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Planning

## **NHS Community Anticoagulation Services**

NHS North East London Integrated Care Board

F01: Prior information notice

Prior information only

Notice identifier: 2025/S 000-014374

Procurement identifier (OCID): ocds-h6vhtk-0500cd

Published 10 April 2025, 4:10pm

### **Section I: Contracting authority**

#### **I.1) Name and addresses**

NHS North East London Integrated Care Board

4th Floor - Unex Tower, 5 Station Street

London

E151DA

#### **Email**

[hub.queries@nhs.net](mailto:hub.queries@nhs.net)

#### **Country**

United Kingdom

#### **Region code**

UKI41 - Hackney and Newham

## **NHS Organisation Data Service**

QMF

### **Internet address(es)**

Main address

<https://northeastlondon.icb.nhs.uk/>

### **I.3) Communication**

Additional information can be obtained from the above-mentioned address

### **I.4) Type of the contracting authority**

Body governed by public law

### **I.5) Main activity**

Health

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## **Section II: Object**

### **II.1) Scope of the procurement**

#### **II.1.1) Title**

NHS Community Anticoagulation Services

Reference number

PRJ-2149

#### **II.1.2) Main CPV code**

- 85140000 - Miscellaneous health services

#### **II.1.3) Type of contract**

Services

#### **II.1.4) Short description**

NHS NEL ICB is in the process of re-commissioning a new Community Anticoagulation Services. This Prior Information Notice (PIN) serves as the intention to follow the Most Suitable Provider (MSP) process.

We are not required to actively invite anyone to express interest but rather seek to notify the market of the intention.

The PIN outlines the scope, key service features, criteria, and expectations for providers interested in bidding when the opportunity becomes available.

Further details, including procurement timelines and engagement opportunities, will be communicated in due course.

Interested providers are encouraged to express their interest and stay informed about the process.

For enquiries or to register interest, please contact [hub.queries@nhs.net](mailto:hub.queries@nhs.net) using reference number PRJ-2149

#### **II.1.6) Information about lots**

This contract is divided into lots: No

## **II.2) Description**

### **II.2.3) Place of performance**

NUTS codes

- UKI - London

Main site or place of performance

North East London

### **II.2.4) Description of the procurement**

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Patients will be referred to the service from;

- General Practice
- Secondary Care- including patients whose anticoagulation therapy has been previously initiated and managed by acute services.

The specification requires the provider to deliver :

1. Warfarin initiation and stabilisation for Non-Valvular Atrial Fibrillation (NVAF).
2. Warfarin monitoring and maintenance dose adjustments for patients established on warfarin.
3. Direct Oral Anticoagulant (DOAC) initiation for NVAF, followed by transfer of care to patient's registered GP.
4. Switching from warfarin to DOAC for NVAF, followed by transfer to patient's GP
5. The management of excursions from target INR. This is to be in consultation with secondary care specialists when the initiation of treatments to mitigate the impact of under or over anticoagulation with warfarin is necessary.
6. Switching suitable patients from warfarin to DOAC for NVAF, followed by transfer to patient's registered GP.
7. Where necessary, escalation of complex patients to secondary care specialists, with referral back to secondary care for ongoing monitoring, to be decided on a case-by-case basis.
8. Domiciliary visits where patient fits the criteria.

## **II.2.14) Additional information**

The anticoagulation service provider will be responsible for ensuring that the service is provided according to the service specification. The key aspects of the service specification providers must meet are;

- Provision of a community-based anticoagulant management and monitoring service that is clinically appropriate, cost effective and in line with guidance from NICE, the British Committee for Standards in Haematology and recommendations from the 2007 National Patient Safety Agency Alert: Safer use of anticoagulants.
- To have a designated named clinical lead responsible for the safe and effective delivery of the commissioned service.
- To ensure all staff working in the service have the necessary knowledge, skills, competencies and access to ongoing training, as set out by the service specification, in order to meet the requirements of their role.
- To have a range of standard operating procedures in place to cover the key tasks and

patient interventions underpinning the service.

- To ensure the service is accessible in terms of location and opening hours.
- To offer the service in a one-stop clinic offering patient education, anticoagulant treatment discussions INR testing, and drug/dose changes in the same consultation.
- To ensure each interaction, whether a routine visit or a warfarin annual review , is recorded in a standardised template which will be made accessible in the patient's registered GP record.
- To have a clear escalation process for clinical queries depending on the nature and urgency of the query, including establishing working relationships with secondary care.
- To report all Serious Incidents and Never Events in accordance with the requirements of relevant Frameworks.
- To run the service with all appropriate Quality Control processes for point of care testing equipment and materials.
- To safely manage, document and communicate the cessation of anticoagulation as advised by the specialist.
- To report in a timely manner all relevant KPIs and financial data as indicated in the specification.
- To ensure appropriate communication of patient care with the patient's GP (if the service provider is different), community pharmacy, care home (if relevant) and the appropriate secondary care anticoagulation service, if needed.

### **II.3) Estimated date of publication of contract notice**

30 May 2025

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## **Section IV. Procedure**

### **IV.1) Description**

#### **IV.1.8) Information about the Government Procurement Agreement (GPA)**

The procurement is covered by the Government Procurement Agreement: Yes

