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Contract

## **Clinical Assessment Service (CAS) for Southampton City CCG**

NHS HAMPSHIRE, SOUTHAMPTON AND ISLE OF WIGHT CCG

F20: Modification notice

Notice identifier: 2021/S 000-018351

Procurement identifier (OCID): ocds-h6vhtk-02cf1d

Published 2 August 2021, 8:55am

### **Section I: Contracting authority/entity**

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

NHS HAMPSHIRE, SOUTHAMPTON AND ISLE OF WIGHT CCG

CASTLE STREET

WINCHESTER

#### **Contact**

Celine Machola - Rogers

#### **Email**

[celine.machola@soeprocurement.nhs.uk](mailto:celine.machola@soeprocurement.nhs.uk)

#### **Telephone**

+44 1489779175

#### **Country**

United Kingdom

**NUTS code**

UKJ3 - Hampshire and Isle of Wight

**Internet address(es)**

Main address

<https://in-tendhost.co.uk/soepscommissioning>

Buyer's address

<https://in-tendhost.co.uk/soepscommissioning>

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**Section II: Object**

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

**II.1.1) Title**

Clinical Assesment Service (CAS) for Southampton City CCG

Reference number

F13478

**II.1.2) Main CPV code**

- 85100000 - Health services

**II.1.3) Type of contract**

Services

**II.2) Description**

**II.2.2) Additional CPV code(s)**

- 85100000 - Health services

**II.2.3) Place of performance**

NUTS codes

- UKJ3 - Hampshire and Isle of Wight

Main site or place of performance

Southampton

#### **II.2.4) Description of the procurement at the time of conclusion of the contract:**

Following the completion of a tender process Southampton City Clinical Commissioning Group (SCCCG) are awarding the local Clinical Assessment Service (CAS) that will offer primarily telephone based assessments of patients with urgent healthcare needs. The contract will be for a duration of 5 years and 4 months plus 2 year optional extension period. The Contract will commence on the 1st June 2021 and the total contract award value reflects the earlier start date then previously advertised in the Contract notice.

The contract model will be cap and collar with a marginal rate applied, the total contract value is for the maximum contract period of 7 years +4 month period and includes consideration for the marginal rate and also the addition of a potential 5% incentive payment available.

#### **II.2.7) Duration of the contract, framework agreement, dynamic purchasing system or concession**

Duration in months

84

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## **Section IV. Procedure**

### **IV.2) Administrative information**

#### **IV.2.1) Contract award notice concerning this contract**

Notice number: [2020/S 182-440944](#)

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## **Section V. Award of contract/concession**

### **Contract No**

F13478

### **V.2) Award of contract/concession**

#### **V.2.1) Date of conclusion of the contract/concession award decision:**

1 March 2021

#### **V.2.2) Information about tenders**

The contract/concession has been awarded to a group of economic operators: No

#### **V.2.3) Name and address of the contractor/concessionaire**

Partnering Health Limited (PHL)

Segensworth

Country

United Kingdom

NUTS code

- UKJ3 - Hampshire and Isle of Wight

The contractor/concessionaire is an SME

Yes

#### **V.2.4) Information on value of the contract/lot/concession (at the time of conclusion of the contract;excluding VAT)**

Total value of the procurement: £8,063,391

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## **Section VI. Complementary information**

### **VI.4) Procedures for review**

#### **VI.4.1) Review body**

NHS England

London

Country

United Kingdom

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## **Section VII: Modifications to the contract/concession**

### **VII.1) Description of the procurement after the modifications**

#### **VII.1.1) Main CPV code**

- 85100000 - Health services

#### **VII.1.3) Place of performance**

NUTS code

- UKJ3 - Hampshire and Isle of Wight

Main site or place of performance

Southampton

#### **VII.1.4) Description of the procurement:**

Southampton City Clinical Commissioning Group (SCCCG) are awarding the local Clinical Assessment Service (CAS) that will offer primarily telephone based assessments of patients with urgent healthcare needs. As a key element with the Integrated Urgent Care (IUC) system in Southampton and the wider geography, the CAS will be expected to be able to triage telephone calls forwarded from NHS 111, re-triage dispositions for category 3 and 4 ambulances and assess non-emergency calls initially disposed to the Emergency Department in timely manners.

#### **VII.1.5) Duration of the contract, framework agreement, dynamic purchasing system or concession**

Duration in months

84

#### **VII.1.6) Information on value of the contract/lot/concession (excluding VAT)**

Total value of the contract/lot/concession:

£8,063,391

#### **VII.1.7) Name and address of the contractor/concessionaire**

Partnering Health Limited (PHL)

Segensworth

Country

United Kingdom

NUTS code

- UKJ3 - Hampshire and Isle of Wight

The contractor/concessionaire is an SME

Yes

## **VII.2) Information about modifications**

### **VII.2.1) Description of the modifications**

Nature and extent of the modifications (with indication of possible earlier changes to the contract):

This is modifying an existing contract award notice for Integrated Urgent Care Services. The contract award notice relates to the contract for Clinical Assessment Services (CAS) for Southampton City.

The original procurement was for annual costs of £926k (£8063k over the maximum 7-year contract term). As we approach contract mobilisation, we have greater certainty of the additional costs associated with 111 First on an ongoing basis. For this we anticipate an uplift in activity of circa 16,000 calls per annum. We are now clear that the maximum annual value of the contract, allowing for reasonable levels of activity growth and inflation associated with 111 First, will not exceed £11,415k, an increase of £3,351k (42%) compared to the original procurement. All of this additional cost relates to delivery of the additional national 111 First requirements.

The Contract will also commence as originally advertised on 1st October 2021 for a initial contract period of 5 years with optional 2 year extension period.

### **VII.2.2) Reasons for modification**

Need for modification brought about by circumstances which a diligent contracting authority/entity could not foresee.

Description of the circumstances which rendered the modification necessary and explanation of the unforeseen nature of these circumstances:

As a result of NHS England mandating the implementation of "111 First" nationally (partly as a response to the pandemic), commissioners have had to procure additional services

within the forthcoming IUC contracts over and above what was included in the original procurement, both in terms of additional call volumes and an additional level of clinical validation. NHS organisations, including commissioners plus acute, ambulance and primary care providers, are working together to deliver this enhancement to the NHS 111 service in a coordinated way within the four local integrated care partnership (ICP) areas - Portsmouth and south east Hampshire, North and mid Hampshire, Southampton and south west Hampshire and the Isle of Wight. The initiative is part of a national requirement, with an ambition that all systems will have implemented a minimum specification of the clinical model by December 2020, as set out at the NHS England and NHS Improvement Board Meeting in Common held on 28 July 2020.<https://www.england.nhs.uk/publication/nhs-england-and-nhs-improvement-board-meetings-in-common-agenda-and-papers-28-july-2020/>. This was, subsequently endorsed by a directive within the Third Phase of the NHS Response to COVID-19 letter from Simon Stevens (NHS England, 31 July 2020). By developing the current NHS 111 service to offer patients a different approach to the way they seek out and receive urgent healthcare, we are able to:

- promote NHS 111 (both online and via existing telephony) as the first point of contact for people experiencing a non-life-threatening health issue;
- encourage a move away from (but not exclusion of) going to a physical location as the first choice to access healthcare when it is needed urgently;
- embrace remote assessment and the technology which supports it;
- prevent nosocomial infection by minimising the opportunity for patients to congregate together in ED waiting rooms;
- ensure patients get a clear direction of what they need to do and where they need to go in order to resolve their issue;
- protect those most at risk by giving them an enhanced service.

In short, there are fundamental benefits to the requirement to keep people who need urgent care, and those who treat them, safe - preventing the spread of infection which could be brought about by having too many people grouped together at any one time. Key functions and enhancements from this service include:

- Direct booking into:

-ED and

-MIU and UTC

-Hospital Same Day Emergency Care (SDEC)

-Primary Care

• Clinical triage of all ED and lower category ambulance dispositions. The anticipated main benefits from the enhanced contract will be:

- A reduced proportion of ED dispositions.
- An increased proportion of out of hospital dispositions.
- An increased proportion of self-care dispositions.
- Improved quality of service (designed by governance group)
- Better patient experience.

As this was an increase in the scope of the existing contract, and was an integral part of it, there was no option but to use the same provider as this additional work could not be provided separately from the main contract. Business continuity for this essential service is covered robustly by the policies and procedures already designed and managed by our existing providers, so a separate procurement and award for a small integrated part of the overall contract would not be feasible. This modification does not change the overall nature of the contract. As we approach contract mobilisation, we have greater certainty of the additional costs above but the costs of 111 First on an ongoing basis are still being reviewed. Nevertheless, we are clear that the maximum annual value of the contract, allowing for reasonable levels of activity growth and inflation, will not exceed £11,415k, an increase of £3,351k (42%) compared to the original procurement . All of this additional cost relates to delivery of the additional national 111 First requirements.

### **VII.2.3) Increase in price**

Updated total contract value before the modifications (taking into account possible earlier contract modifications, price adaptations and average inflation)

Value excluding VAT: £8,063,391

Total contract value after the modifications

Value excluding VAT: £11,414,991