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Planning

Antipsychotic Medicines Prescribing and Drug Safety Monitoring

NHS DEVON INTEGRATED CARE BOARD

F01: Prior information notice

Prior information only

Notice identifier: 2025/S 000-047397

Procurement identifier (OCID): ocids-h6vhtk-058486

Published 8 August 2025, 4:03pm

Section I: Contracting authority

I.1) Name and addresses

NHS DEVON INTEGRATED CARE BOARD

Aperture House, Pynes Hill, Rydon Lane,

Exeter

EX25AZ

Contact

Tracey Kerslake

Email

d-icb.contracting@nhs.net

Country

United Kingdom

Region code

UKK4 - Devon

NHS Organisation Data Service

QJK

Internet address(es)

Main address

<https://devon.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

Section II: Object

II.1) Scope of the procurement

II.1.1) Title

Antipsychotic Medicines Prescribing and Drug Safety Monitoring

Reference number

QJK-25_APMR

II.1.2) Main CPV code

- 85121270 - Psychiatrist or psychologist services

II.1.3) Type of contract

Services

II.1.4) Short description

This notice is being published to alert providers of a potential procurement exercise for the provision of an antipsychotic prescribing and drug safety monitoring service for patients registered with a GP in Devon.

Any values and timescales stated within this PIN are for guideline purposes only and should not be taken as a guarantee.

NHS Devon is seeking providers of psychiatric lead service to offer drug safety monitoring and prescribing of antipsychotics in line with the relevant NICE regulations and guidelines for a known cohort of patients.

II.1.5) Estimated total value

Value excluding VAT: £0.01

II.1.6) Information about lots

This contract is divided into lots: No

II.2) Description

II.2.3) Place of performance

NUTS codes

- UKK4 - Devon

II.2.4) Description of the procurement

In England, the prevalence of psychotic disorders (including schizophrenia, schizoaffective disorder, and affective psychosis) is estimated to be around 0.5% of people aged 16 and older. A 2014 survey found that 0.7% of survey respondents had experienced psychotic disorder in the past year. NHS England also notes that psychosis affects up to 3% of the population and is associated with significant social impairment and reduced life expectancy.

The 2014 Adult Psychiatric Morbidity Survey (APMS) found that around 0.5% of people aged 16 years or older in England had received a diagnosis of a psychotic disorder (schizophrenia, schizoaffective disorder, or affective psychosis) in the preceding year. The median lifetime risk for schizophrenia is 7.2 per 1000 people. The male-to-female risk ratio is 1.4:1.

The age of onset peaks around age 20-25 years for males and 25-30 years for females. A smaller second peak of onset occurs in women after the age of 45-50 years.

Patients with schizophrenia have a higher mortality and shorter life expectancy than the general population due to physical illness (including cardiovascular diseases and cancers), accidents, and suicide.

The population this contract is due to serve is a defined group of patients that previously had antipsychotic medication administered through primary care. Due to the primary care provider being unable to continue prescribing Antipsychotic medication we require a psychiatry led provider to manage the on-going prescribing and drug safety monitoring of this identified group of patients who at the point of transfer are not open to secondary MH services.

The primary aim of this service is to provide ongoing prescribing function for the antipsychotic medication and drug safety monitoring. The initial requirement is for up to 120 patients across NHS Devon from early October 2025. However, the number of patients may increase throughout the lifetime of the contract and may alter by point of contract award.

The provider will:

- Ensure ongoing drug safety monitoring and prescribing including appropriate blood tests* and ECGs and informed by NICE guidelines
- Ensure that any concerns related to the person's mental health are appropriately escalated to the secondary mental health provider.

- Issue prescription that will be dispensed by the patient's local pharmacy.

It is anticipated that after an initial review, 1-2 months prescription lengths would be required, with a 12 month annual review. However, the provider must use clinical judgement, informed by NICE guidance, to determine the physical health monitoring needs of the individual and safe length of prescription.

The ICB envisages care being delivered as close to home as possible, however this could include the service being delivered remotely, with the preferred remote method of contact being agreed with the patient. Where the service is delivered remotely it is anticipated that the primary method will be via Teams (or an equivalent system for safe virtual delivery) and the provider will take reasonable steps to support the patient in the utilisation of IT where advice and guidance may be required e.g. easy to read, jargon free instructions. Should digital poverty or IT connectivity prevent use of virtual delivery, the provider needs to have mitigations available.

A range of strategies to proactively engage with patients especially in relation to non-attendance will be required.

*blood tests include

- Full Blood Count, Blood Lipids, Plasma Glucose or HbA1c, Liver Functions Tests, Creatinine Kinase, Prolactin

II.3) Estimated date of publication of contract notice

1 October 2025

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: No

Section VI. Complementary information

VI.3) Additional information

Any interested parties are asked to confirm by email to d-icb.contracting@nhs.net. Please use: Antipsychotic Medication Monitoring and Prescribing in the subject line. Further information will then be sent in reply, including an engagement questionnaire which will be used to inform future planning with regard to this procurement.

Completed questionnaires should be returned to the above address by 12 noon 26 August 2025