

T26/001/CHS Housing with Care Data Systems - Clarifications

Q1. a) Would CHS Group consider solutions that include an integrated mobile app for staff working at the scheme locations to view their rota, including tasks for each client, and log their visit arrival and departures, plus enter task completions including medication dispensed, enter relevant observations, notes and raise concerns when applicable, via the app, and not via filling in paper/card care cards? The devices to be either suitable Android or iOS devices with/without SIMs for network access, and if without SIMs communicating solely via the CHS Group Wi-Fi (assuming the CHS Group Wi-Fi is present at all such locations)?

A: We would only be looking at digital solutions - no paper/card care cards will be considered. There will be Wi-Fi throughout all schemes, but happy to consider SIM as backup - if suitable security is in place on the device.

Q1. b) Would CHS Group supply suitable devices in either case above, or expect the Housing with Care Data System supplier to do so and within the budget?

A: Happy to either use a supplied device or procure our own - happy to discuss.

Q2. Would staff visits / appointments be scheduled to each client typically at their 'home address' (e.g. a flat in one of the schemes), with tasks including medication to be dispensed, visit by visit, or would the staff be scheduled by their shift at a scheme location, with client appointments effectively treated as tasks at that scheme location? Essentially, we are asking if the scheduling required is visit by visit, with relevant tasks at each such visit, or shift and task with a number of clients at each scheme location? (The former scenario is a 'home care' type of working, the latter 'extra care' or a 'residential care' form of working.)

A: The schemes are Extra Care (Housing with Care) - shift and task with a number of clients.

Q3. Approximately how many staff (mobile app users) are being rota'd to fulfil appointments, and how many back-office system users (care planners, schedulers etc.) would be using the new system?

A: There would be somewhere between 2 and 5 care staff active at any one time at each scheme and 2 to 3 back offices.

Q4. Can you identify the electronic interfaces that are required in the sense of which systems would need to be integrated with the new Housing with Care Data System, if any, in terms of the system names that would need integration and any available APIs?

A: I believe that invoices are sent from our Sun Finance System with billing information provided on spreadsheet - but need confirmation on this one. I don't believe any other integration or APIs are required.

Q5. Given that the contract may be extended, what contract term does the £200K incl. VAT budget apply to?

A: Initial 5-year term up to a maximum of 8 years.

Q6. Is there a particular provider you are wishing to integrate with?

A: We do not have anyone specifically in mind.

Q7. What level of data are you looking to work with?

A: Various data

Q8. Can you please give the number of users who will be accessing system so we can provide a price?

A: We have three sites and currently have about 5 staff phones at each site, but staffing levels vary. There can be anything between 2 and 5 carers 'on the floor' at any one time (per site) and 2 to 3 admin users.

Q9. We have reviewed the award criteria for this opportunity on Contract Finder: [Housing with Care Data System - Find a Tender](#) However, this is not reflected in the tender documents. Is there somewhere we can submit our pricing and responses to the listed criteria as below?

This table contains award criteria for this lot:

Name	Type	Weighting
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Price	Cost	35%
Functionality matched against the specification. (System deliverables)	Quality	35%
Degree of future-proof capability	Quality	10%
Consultancy Support	Quality	7.5%
Implementation and mobilisation	Quality	7.5%
Social Value	Quality	5%

A: Your written response needs to cover the issues within the specification and approach to implement, covering off the areas that are part of the scoring matrix.

Q10. Just to confirm there's no proforma for this information?

A: You will need to complete the necessary forms as per attached appendices, but your official tender document will be your own presentation, and no form is provided to use for this.

Q11. Please confirm if you are looking for a product that has already got an API integration with the Pharmacy to order medications for service users, or do you want a system that can be used to support the existing manual medicines cycle process as described in Appendix I.

A: We need a working pharmacy interface. I will not be accepting any 'we can develop' responses.

Q12. Can you please clarify the total amount per year of the said contract. You have mentioned £200,000 (Two Hundred Thousand) is it yearly?

A: The estimated value is based on 8 years.

Q13. Based on the specification “Devices must not be able to access general Internet features, such as social media”, are you looking for the provider to also provide the devices?

A: Happy to either use a supplied device or procure our own - happy to discuss.

Q14. Are there any additional documents other than the PSQ, form of tender, and collusion / non collusion declaration documents that need to be sent back?

A: All which are required to be returned are listed in the ITT.

Q15. When would you like us to provide our pricing, and is there a specific pricing document you’d like us to complete?

A: The ITT states that Tender submission deadline is 8 December 2025, 11:59pm. The pricing should be included within your form of tender.

Q16. Please could you share the T&Cs for this ITT?

A: All terms are listed within the ITT.

Q17. The form of Tender which is mentioned in the ITT document that needs to be completed and sent back is not available in the set of documents provided. Could you please provide this?

A: There is no set format for the Form of Tender, you are required to submit your tender in a written proposal for how you will meet the requirements including costs.