Establishment of Darzi Centres in Essex

Background
The NHS Next Stage Review Interim Report (October 2007) carried out by Lord Darzi (the Report), reported that, despite sustained investment and improvement in the NHS over the past ten years, access to primary medical services and the quality of those services, continues to vary significantly across the country. Many of the poorest communities experience the worst health outcomes and major inequalities exist within England in life expectancy, infant mortality and cancer mortality. Further, the gap in life expectancy between the most deprived and least deprived areas has widened, despite improvements in life expectancy in the most deprived areas.

The Report identifies improving access to primary care as a key priority if the NHS is to deliver more personalised care that meets the needs of individuals and communities, especially those in more disadvantaged or deprived areas. Equitable Access to Primary medical Care (EAPMC) is the vehicle by which the DH intends to achieve more personalised care as set out in the Darzi Report.

The Government will be providing new investment of £250 million to support PCTs in establishing:

- At least 100 new General Practices in the 25% of PCTs with the poorest provision (based on the fewest primary care clinicians, lowest patient satisfaction with access and the poorest health outcomes), both to increase capacity and offer an innovative range of services. There will be no new practices in Essex. Luton is the only area in the East of England where new practices are to be commissioned.
- At least one new GP-led health centre (Darzi Centre) in each PCT in easily accessible locations.

Darzi Centres – The National “Givens”
All Darzi Centres must:
- Open 8:00am-8:00pm seven days a week.
- Provide bookable and walk-in services.
- Provide services for registered and non-registered patients.
- Provide core GP services.
- Integrate with other services.
- Be in accessible locations.

Outline Specification for Darzi Centres in Essex

<table>
<thead>
<tr>
<th>Location</th>
<th>Model</th>
<th>Premises</th>
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<tbody>
<tr>
<td>Mid Essex</td>
<td>North East Chelmsford</td>
<td>To develop in partnership with Chelmsford Borough Council.</td>
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<td></td>
<td>• To serve population growth as a result of the North Chelmsford housing development plan.</td>
<td>• To incorporate OOHS service across Mid Essex PCT.</td>
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<td></td>
<td>• Migrant worker population.</td>
<td>• To incorporate a bundle of local enhanced services.</td>
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<tr>
<td>North East Essex</td>
<td>Colchester</td>
<td>• Co-location with a range of community services already provided within the centre, it also provides the opportunity for further services to be co-located in the future.</td>
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<td></td>
<td>• Predicted population growth of 20% in next 10 years.</td>
<td>• Primary Care Centre PCT LIFT scheme.</td>
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<td>• Areas to the south and the east of the town fall into the most deprived 20% of wards nationally.</td>
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<td></td>
<td>• To be located within the recently purpose built Colchester Primary Care Centre which has close proximity to the train station for commuter use.</td>
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<td></td>
<td>• Housing development planned for North Colchester.</td>
<td></td>
</tr>
<tr>
<td>South East Essex</td>
<td>St Lukes Ward</td>
<td>To be part of Healthy Living Centre this is a Department of Health Social enterprise scheme the PCT developed in partnership with the local borough council, a local primary school and Chamber of Commerce.</td>
</tr>
<tr>
<td></td>
<td>• This is an under doctored area with 2.2 GPs for a population in excess of 10,000.</td>
<td>• Included are a bundle of local enhanced services.</td>
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<td></td>
<td>• Plans are already in place for a healthy living centre and the PCT proposes to co-locate the Health centre with this</td>
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<tr>
<td></td>
<td>• There is PCTMS practice with a registered population of approximately 2,000 that the PCT proposes to decommission</td>
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<tr>
<td></td>
<td>• Eventually the healthy living centre will provide premises for the Health centre, however in the short term a temporary premises solution will need to be identified.</td>
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…”Givens”
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</table>
| South West Essex  | • Wards within Thurrock have a deprivation rating that is amongst the worst 10% in the country. | • In addition to standard GP services the following services may also be commissioned:  
- Minor Injuries  
- Sexual Health services  
- Primary care based mental health services  
- Some diagnostics  
- Advocacy services  
- Pharmacy and Dental Services may be co-located but commissioned separately. |
|                   | • The population of the Thurrock locality is projected to increase by 15% by 2010. | • No premises have been identified by the PCT – these will be expected to be determined by the provider. |
| Thurrock, Grays    | • The Grays ward of Thurrock has been identified as the best location this is the town centre and is a location close to local transport links. |                                                                                                                                 |
| West Essex        | • Loughton Alderton is one of the most deprived areas in the country being in the bottom quintile. | • To include some diagnostics on site and the potential to relocate outpatient services from Whipp's Cross Hospital but will not be included within the procurement. |
|                   | • Based over 2 sites one in the town centre near the station and one in an existing PCTMS practice that is to be re-provided in Traps Hill. | • Current Traps Hill premises owned by a former practice partner are leased by the PCT. Second site identified in town centre. |
|                   | • Large commuter population.                                          |                                                                                                                                 |
|                   | • Poor access survey results for 2006/7 of practices within the area.  |                                                                                                                                 |

Principles and Rules for Co-Operation and Competition

A set of common rules and principles have been agreed across the Eastern Region as follows:-

• Commission from providers best placed to deliver the needs of the population.
• Providers and commissioners co-operate to ensure seamless experience.
• Commissioning should be transparent and non-discriminatory.
• Commissioners and providers should foster patient choice.
• Appropriate promotional activity is encouraged.
• Providers must not discriminate against patients and must promote equality.

Payment regimes must be transparent and fair.
Financial intervention in the system must be transparent and fair.
Mergers, acquisitions, demergers and joint ventures are acceptable.
Vertical integration is permissible.

Objectives of the PCT Procurement Exercise

The key objectives of the PCT’s Procurement Exercise are:-

• To provide patients with greater access to NHS primary medical care services through additional capacity;
• To improve the quality of primary medical care available to patients; and
• To deliver affordable and Value for Money (VfM) NHS primary medical care services.

Scope of Services

The scope for primary medical care services for each PCT Procurement has been developed by the PCT in conjunction with the Strategic Health Authority (SHA) based on the needs of the local community.

The Primary Medical Care Services required for each PCT Scheme are detailed in the Memorandum of Information which is available on the PCT website.

Critical Success Factors (CSFs)

PCTs require the Provider to meet the following CSFs throughout the life of the Contract:

• Access – the services procured must be provided in locations and facilities that meet local patient access preferences.
• Capacity – the aim of the Procurement is to provide additional primary medical care capacity. The potential capacity issues are local and geographical rather than specialty related.
• Quality – patient-centred primary medical care services, delivered in a safe and effective manner and delivered through a learning environment that includes the training of doctors and other healthcare professionals.
• Value for Money and Affordable – the primary medical care services procured through the Procurement must be affordable and provide VfM.
• Integration – Providers will be expected to integrate with, and positively contribute to, the local healthcare community.
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**Tendering Process Overview**

The timescales for the PCT procurements in Essex are detailed below. These dates are expected dates at the time of issuing the Memorandum of Information and may be subject to change.

<table>
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<tr>
<th>Milestones</th>
<th>Date by PCT</th>
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<tr>
<td>Advert published and Expressions of Interest Invited</td>
<td>Mid Essex: 15/05/08, North East Essex: 15/05/08, South East Essex: 12/05/08, South West Essex: 1/10/08, West Essex: 15/05/08</td>
</tr>
<tr>
<td>Deadline for Expressions of Interests</td>
<td>Mid Essex: 30/05/08, North East Essex: 30/05/08, South East Essex: 30/05/08, South West Essex: TBC, West Essex: 30/05/08</td>
</tr>
<tr>
<td>Bidder Information Day</td>
<td>TBC</td>
</tr>
<tr>
<td>PQQ issued to short-listed Bidders who have sent an EOI</td>
<td>June/July 2008, June/July 2008, 09/06/08, June/July 2008</td>
</tr>
<tr>
<td>Deadline for receipt of Potential Bidder Clarification Questions</td>
<td>TBC</td>
</tr>
<tr>
<td>Completion of PQQ Evaluation and communication of result</td>
<td>TBC, TBC, TBC, TBC</td>
</tr>
<tr>
<td>Invitation to Tender (ITT) issued to short-listed Bidders</td>
<td>TBC</td>
</tr>
<tr>
<td>Deadline for receipt of ITT bids</td>
<td>TBC, TBC, 29/09/08, 24/10/08, TBC</td>
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**Stages of the Tendering Process**

As part of the procurement process across the East Region, the following common stages have been agreed:

**Advert**

National and local adverts have been published describing in general terms, the primary medical care services being procured by the PCTs. Adverts have been placed at national and local level to encourage responses from as wide a range of organisations as possible. Potential Bidders must register their interest by submitting an Expression of Interest.

**Memorandum of Information (MOI)**

The MOI should provide potential Bidders with sufficient information on the PCT Procurement process and the PCT Scheme to enable them to make an informed decision about whether they wish to register their interest in the PCT Procurement. Interest must be registered by submitting an EOI.

**Expression of Interest (EOI)**

Interest parties wishing to participate in the PCT Procurement must submit an EOI, in the agreed format, by e-mail to the PCT. Expressions of Interest should arrive no later than 5:00pm on Friday 30th May 2008.

**Bidder Information Event**

To ensure all potential Bidders are given an equal opportunity to fully understand the requirements of the PCT Procurement and have an equal opportunity to bid, each PCT intends to hold a Bidder Information Event in conjunction with the SHA and possibly other PCTs. The Bidder Information Event will aim to inform all potential Bidders of the procurement principles, processes and next steps.

**Pre-Qualification Questionnaire (PQQ)**

The PQQ provides detailed information on the PQQ process, guidance on how to complete the PQQ and a series of questions for potential Bidders to answer. A clarification question and answer process will operate during the PQQ stage and will be explained in the PQQ documentation. The PQQ is designed to evaluate the capacity, capability and eligibility of potential Bidders to provide the primary medical services which are the subject of the PCT Procurement. The PQQ evaluation will include a short-listing process and potential Bidders will be told whether or not they have been short-listed. Further details of the PQQ process and evaluation will be set out in the PQQ.

**Invitation to Tender**

Bidders invited to proceed to the ITT stage for the PCT Schemes will be issued with a PCT Scheme ITT. The detailed requirements of the PCT Scheme ITT, the information required from Bidders and the timescales for submission of bids will be included in the relevant ITT. Further details of the ITT process and evaluation will be set out in the PCT Scheme ITT.

**Contract Award**

Based on the outcome of the PCT Scheme ITT evaluation, recommendations will be made to the PCT Board for the Board to consider. Following PCT Board approvals, the PCT and the recommended Bidder may enter into the contract.

**Service Commencement**

Following contract award and in accordance with the Provider’s mobilisation plan, each PCT and Provider will work together towards service commencement at the contractually agreed date.

**What will practices who submit a bid have to do?**

- Plan and engage with commissioners then consider and action outputs.
- Submit an Expression of Interest.
- Read and understand the Memorandum of Information – understand need, devise solution, competition, timescales, resources, SWOT analysis?
- Complete the Pre Qualification Questionnaire.
- Build a winning team - legal, financial, estates, clinical, administration,
- Project and bid management.
- Begin drafting response.
- Read the Invitation to Tender – 75 documents!!
- Refine solution and develop financial model and obtain funding.
- Develop Implementation Plan.
- Write the response and submit tender – co-ordinate input.
- Manage clarification questions.
- Manage the implementation.

Where to get help

At a recent seminar organised by Primary Care Contracting the following were suggested as sources of advice:-

- http://www.mca.org.uk/MCA/Members/MemberList.aspx
- http://www.newchurch.com
- http://www.thehealthworks.com
- http://www.leelister.co.uk/bidmanagement.html
- http://www.carleyconsult.co.uk/
- http://www.mwconsulting.co.uk/
- http://www.consulting-uk.com/competitivebid.htm
- http://www.lsc.co.uk/capabilities/management_services.htm
- http://www.business-proposals.co.uk/
- http://www.audacia-associates.co.uk/Bid_Management.htm
- http://www.business-growth-solutions.co.uk/

LMC and the BMA

Essex LMCs have produced an information pack aimed at assisting practices who may be considering submitting a bid to provide services.

The Pack contains a Brief Guide to the Tendering Process in Essex, Winning Tenders - produced in association with Healthskills and Tendering for Public Contracts – a Guide for Small Business. All these documents can also be downloaded from the LMCs’ website, www.essexlmc.org.uk

The LMCs have also had contact with:-

Healthskills - http://www.healthskills.co.uk and

Assura Group, http://www.assuragroup.co.uk

both of which offer a range of services to practices wishing to submit tenders either individually or collectively with a number of neighbouring practices.

In additional BMA Members are also able to access Bidding and Tendering, a Guide for Doctors produced by BMA Business Support and available for download from the BMA website, http://www.bma.org.uk