

Report to: **East Sussex Health Overview and Scrutiny Committee (HOSC)**  
Date: **16th September 2008**  
By: **Director of Law and Personnel**  
Title of report: **Equitable access to primary care**  
Purpose of report: **To update on progress with plans for new GP-led health centre services in Eastbourne and Hastings.**

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## **RECOMMENDATIONS**

**HOSC is recommended to:**

- 1. Consider and comment on the progress on the procurement of GP-led health centres by East Sussex Downs and Weald and Hastings and Rother PCTs.**
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### **1. Background**

1.1 Lord Darzi, in his *Interim Report* of August 2007 (*Next Stage Review of the NHS*) gave a commitment to establishing at least 150 GP-led health-centres (one in each Primary Care Trust (PCT) area) providing access to GP services on an 8am - 8pm, 7 days a week basis. The health centres are part of a wider national programme of improving access to primary medical services, which also include opening at least 100 new GP practices in so called 'under-doctored areas' and extending GP practice opening hours.

1.2 Each local PCT has the responsibility for procuring the new health centre for its area through a process of competitive tendering using the Alternative Provider of Medical Services (APMS) contract that has been developed nationally. The contract is to be offered for an initial term of five years. The Department of Health has specified that the contracts for the new health centres should be awarded by 31 December 2008, with service commencement following as soon as possible after this date - generally by April 2009.

### **2. Implementation in East Sussex**

2.1 The East Sussex Downs and Weald (ESDW) and the Hastings and Rother (H&R) PCTs are each in the process of procuring providers of GP-led health centres. The location of the health centre site in Eastbourne is to be within one of the most deprived wards in the town – Devonshire. Hastings and Rother PCT is integrating the health centre services into the new Primary Care Centre being developed as part of the Station Plaza scheme.

2.2 For both health centres, the core service will be based around a GP practice holding a list of registered patients. Each facility will offer core GP services from 8am to 8pm seven days a week and have bookable appointments for both registered and non-registered patients, and a walk-in service. These services are to be GP-led, but patients will be triaged by appropriately trained nurse practitioners who will direct patients to the most appropriate practitioner/service.

2.3 Both centres will have the capacity for more services to be added in future which would then make them more like a polyclinic model.

2.4 In June 2008, John Vesely, Head of Primary Care, East Sussex PCTs updated HOSC on progress on plans for the services. Key points included:

- The Station Plaza, Hastings development is scheduled to be completed by December 2009 and Hasting and Rother PCT has obtained approval for the GP-led health centre service to commence at this time, which is beyond the April 2009 national deadline.
- The Eastbourne site in the Devonshire ward had not been identified and bidders would be able to propose locations in their tenders.
- The developments have not led to significant rescheduling of planned primary care developments (but there could be some impact in Eastbourne, depending on resources available).
- GPs have expressed some concerns about impact on existing services but the PCTs want to ensure there is 'nil detriment' and deliberately chose sites where there is a transient population and areas where there are higher levels of health needs.
- GPs have concerns that the centres could create an expectation that they will provide longer opening hours in their practices. However, some GPs have expressed interest in bidding to manage the new centres.

2.5 John Vesely, Head of Primary Care, East Sussex PCTs is attending HOSC and will give an update on the progress of the procurement process and further feedback from consultation with stakeholders. A background paper supplied by the PCTs is attached as appendix 1.

### **3. Areas for HOSC to explore**

3.1 Following their presentation, Mr Vesely will take questions and HOSC members may wish to explore the following issues:

- Outcomes from the consultation and response to the issues raised – particularly how the concerns of GPs are being resolved.
- Whether the procurement process is progressing to schedule and update on short listing of bidders.
- Progress on identifying the Eastbourne site in Devonshire ward and whether the centre will be operational by April 2009.
- Status of Station Plaza development and whether still on schedule to go live in December 2009.
- Status of other primary care developments – e.g. Arthur Blackman Clinic and Silverhill in Hastings and whether the procurement of the two GP led health centres has had an impact on planned primary care developments.
- What opportunities there will be for further patient and public involvement in the design of the centres and their services.
- Update on how the plans for extending opening hours of existing GP practices are progressing.

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# East Sussex Downs and Weald & Hastings and Rother Primary Care Trusts

## Progress Report for the East Sussex Health Overview and Scrutiny Committee September 2008

### Equitable Access to Primary Medical Care: GP-led Health Centre Procurement

#### Main Developments

##### *Expressions of interest and PQQ returns*

At the initial Bidders Day event held on 20<sup>th</sup> June 2008 an issue was raised about the interpretation of part of the Memoranda of Information (MOI) which resulted in the PCTs deciding to re-advertise and issue slightly revised MOI (reported in the July Update Briefing). Following the re-advertisement (which resulted in some 4 weeks delay that is recoverable during the overall programmes of these procurements) and the supporting Bidders Day Event held on 13<sup>th</sup> August 2008 the PCTs received expressions of interest from 29 organisations for these two procurement exercises. Pre-Qualification Questionnaires (PQQs) were issued to all of these organisations and a total of 16 PQQs were returned from 10 organisations (some were interested in bidding for both services).

The PQQ returns fall into the following classification:

Type of organisation	PQQ returns	
	ESDW	H&R
GP	3	4
Social Enterprise	1	1
Independent Sector	2	2
NHS Organisation	0	0
Voluntary Organisation	0	0
Other	2	1
	<b>8</b>	<b>8</b>

#### **1.2 PQQ evaluation**

The PQQ returns are currently being evaluated and scored, and the intention is to produce a short list of no more than 5 potential bidders for each service. Each of these organisations will be sent an Invitation to Tender (ITT) and a copy of the APMS (Alternative Provider Medical Services) contract. ITTs are due to be issued mid-September and organisations will have four weeks to return the completed tender.

### 1.3 ITT evaluation

Early on in the procurement process, a set of draft evaluation criteria for scoring the ITT submissions were agreed by the PCTs. There are 11 sets of criteria – termed ‘workstreams’ that are detailed in Annex A. A small group of independent assessors with the relevant skills and experience has been formed for each workstream and they will score each submission against the criteria before the Project Group itself collates these scores and produces a comprehensive evaluation report.

The assessors will be aided in their task by the AWARD program, an on-line system developed by Commerce Decisions. Assessors will be provided with training in the use of the system and ongoing expert support during the evaluation process. AWARD not only allows remote access for evaluators, but also provides a comprehensive audit trail, which is essential in the event of challenges from unsuccessful bidders.

### 1.4 Local Stakeholder Involvement

The PCTs have offered to visit local service user and community groups to discuss and seek views on the proposed GP-led health centres. So far three groups have invited PCT representatives to attend meetings: Healthy Eastbourne Partnership on 11 September, Eastbourne Community Network on 17 September, and the Housing Forum (Eastbourne Association of Voluntary Services) on 14 October.

## 2. Next steps

- Annex B details the current procurement timetable – **please note this is currently under discussion**
- Complete PQQ evaluation, shortlist and issue ITTs
- Prepare ITT evaluation process – training on AWARD system for evaluators.

## Annex A: GP Led Health Centres: Invitation to Tender (ITT) Evaluation Criteria

CRITERIA	SCORE	Sub criteria weight	%age
<b>Quality of clinical service</b>	12		26
Successful appropriate mgt of patients		4	
Appropriate benchmarking		4	
Clinical audit		4	
Willing able to treat required range of conditions		4	
Appropriate ratio of GPs to other staff		4	
General staffing arrangements		4	
Clinical leadership		4	
Treatment and referral pattern		4	
Support services arrangements pharmacy		4	
Support services arrangements diagnostics		4	
<b>Patient Access</b>	12		26
Waiting times		4	
12/7 medical cover (8 till 8)		4	
Location suitability		4	
Premises suitability		4	
Access for disadvantaged populations		4	
Promotion marketing arrangements		4	
<b>Patient Experience</b>	8		18
Competency of staff		4	
Environment		4	
cleanliness		4	
Throughput (efficiency of patient process)		4	
<b>Integration with LHE</b>	6		14
Communication arrangements with other HC providers		4	
Record sharing arrangements		4	
Emergency planning		4	
<b>Availability by start up deadline</b>	2		4
Arrangements for recruitment of appropriate staff		4	
Availability of buildings and infrastructure		4	
Availability diagnostic equipment (access)		4	
<b>Security</b>	2		4
Security of staff		4	
Security of patients		4	
<b>Safety</b>	2		4
<b>Other sub-criteria</b>	2		4
Sustainability of the contract			
Confidence in the Business Model			
Future proof			
<b>Totals</b>	<b>46</b>		<b>100</b>

## Annex B: Procurement Timetable

Milestones	Date
Completion of PQQ evaluation and communication of result	w/c 8 <sup>th</sup> September 2008
Invitation to Tender (ITT) issued to Bidders	w/c 15 <sup>th</sup> September 2008
Deadline for receipt of ITT bids	w/c 6 <sup>th</sup> October 2008
ITT evaluation completed	w/c 10 <sup>th</sup> November 2008
Contracts awarded	w/c 1 <sup>st</sup> December 2008