

Cambridgeshire and Peterborough Clinical Commissioning Group (CAP CCG)

Dynamic Purchasing System

Domiciliary Care

Operational Guide

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1. CAP CCG and *adam*

Cambridgeshire and Peterborough Clinical Commissioning Group (CAP CCG) is a Clinical Commissioning Group that is able to procure services and/or facilitate the procurement of services within their geographical coverage.

CAP CCG has partnered with *adam* in order to introduce a web-based system, SProc.Net, to manage a Dynamic Purchasing System (DPS) to enable procurement, transaction, and management of Continuing Healthcare (CHC) delivered through Domiciliary Care service providers.

CAP CCG will use this system, over the 4-year lifespan of the DPS contract. As a potential Provider of CHC Domiciliary Care services, this Operational Guide will take you through what a DPS is and set out what you need to do to provide services through the DPS.

2. What is a Dynamic Purchasing System (DPS)?

A DPS is a fully electronic system used by public sector bodies to award contracts for works or services. The use of a DPS to award such contracts ensures the end-to-end procurement process is competitive, fair and transparent. Providers must meet the minimum criteria for entry to the DPS, but there are no other restrictions on who can or cannot join. Procurement by NHS England or CCG of NHS healthcare services via a DPS is governed by Regulation 34 of the Public Contract Regulations 2015 and the 'light touch regime' therein.

3. How the DPS works

Providers who wish to supply CHC Domiciliary Care services will need to meet the minimum entry criteria by applying online at www.sproc.net and completing an Accreditation and Enrolment. Once enrolled, Providers will receive notifications of tender opportunities (Requirements) sent by CAP CCG. Providers can respond to these via the system, SProc.Net.

If a tender (Offer) is successful, a contract variation (Service Agreement) will be created on the system between the Provider and the CCG. Providers will then submit weekly bills (Service Receipts) through the system. *adam* will provide the CCG with details of Service Receipts on a weekly basis for the services the Provider has delivered through the DPS, and the CCG will pay the Provider for the services they have delivered.

The DPS is a fair and transparent process for all Service Providers, who will benefit from access to all opportunities (Requirements) to provide services in their specialism.

Use of SProc.Net for Providers means:

- each Provider will be competing on a level playing field with other Providers for new opportunities to provide their services;
- reduced administration costs and an easy to use, streamlined process;
- the full history and a complete audit trail of all buying decisions and communications are captured in one easy to access location.

4. How do you join the DPS?

Joining the DPS requires the completion of a 3-step process, consisting of Registration, Accreditation and Enrolment. Details of each step have been outlined below.

4.1. Registration

You must first register your business on the *adam* system at www.sproc.net. To complete your registration, you will need to provide the following information:

- Business Name
- Business Tax/VAT Number
- Charity Registration Number (Charities only)
- Company Registration Number (Limited and Public Limited Companies only)
- Address line 1, City, County, Post Code
- Telephone Number
- Email address

The business name you register will be the name shown on the system. You must then create your first administrative user by providing:

- First Name
- Last Name
- Job Title
- Email address

This user will be an administrator on the system and have the ability to create other users for your business at all additional locations you may have. Once completed, the administrator will receive an email containing a username and temporary password to access the system. Upon logging into SProc.Net, you will be prompted to change the password.

Once registered, you will be able to complete the remaining two steps. For further details on how to complete this Registration process, please see the Accreditation and Enrolment User Guide, available from the *adam* Demand site found at <http://demand.sproc.net>.

4.2. Accreditation and Enrolment

Accreditation and Enrolment consists of a series of questions which require your response and the submission of certain documentation. To be considered as a Provider of CHC Domiciliary Care services, your business must meet the minimum criteria at the Accreditation and Enrolment stage.

At the **Accreditation** stage, you will be asked a series of objective questions that need to be completed at a company level.

At the **Enrolment** stage, you will need to answer a series of questions regarding the management of the location, and upload supporting documentation. If you have a business with multiple locations (i.e. Branches) from which you intend to submit tenders (Offers), then each location will need to be enrolled separately.

Providers will be required to agree to the latest NHS Standard Contract particulars with the CCG. This can be found on the *adam* Demand site, at <http://demand.sproc.net>.

Prior to starting your application, it is essential that you read the DPS Application Guide at <http://demand.sproc.net> in the section titled 'How to Become An Approved Supplier', where you can view the full Accreditation and Enrolment criteria. For full details on how to create and submit your application, please see the Accreditation and Enrolment User Guide available at <http://demand.sproc.net> in the Help section.

4.3. Accreditation and Enrolment Evaluation

Once completed, your application will be checked by the *adam* team, with final approval for enrolment completed by CAP CCG. You will receive an email notification confirming whether your application has been approved. If the application is rejected due to you failing to meet the minimum criteria, the *adam* team / CAP CCG will provide feedback to allow you to rectify any issues and reapply, if appropriate. Please note, there is no limit to the number of application resubmissions

5. Service Categories

The Supply Category, Domiciliary Care, is broken down into smaller Service Categories. As a Provider, you will be required to identify the Service Categories for which you wish to receive invitations to submit offers. The Service Categories are defined as:

Brain Injury	Learning Disability
Dementia	Learning Disability - Nursing
Dementia - Nursing	Learning Disability - Supported Living
Fast Track (End of Life)	Mental Health
Fast Track (End of Life) - Hospice	Mental Health - Nursing
Fast Track (End of Life) - Nursing	Mental Health - Supported Living
General Care	Physical Disability - Supported Living
General Care	Physical Disability
General Care - Nursing	Physical Disability - Nursing
General Care - Nursing	

At Enrolment, you will stipulate which categories of services you can supply; subsequently you will only be able to make Offers against Requirements relevant to these selections. Throughout the lifespan of the DPS, you will be able to add / remove categories of service you are able to provide.

6. Requirements, Offers, Weightings and Ranking

Once you have successfully enrolled to join the supply base, you will be able to offer to deliver CHC Domiciliary Care services, as required, to the CCG.

6.1. Requirements

When the CCG determines CHC Domiciliary Care services are required, CAP CCG will create and distribute a Requirement to the supply base. A Requirement is the name used for a tender in the SProc.Net DPS system. Requirements will be distributed to Domiciliary Care Providers that have indicated they are able to provide services to a specified Postcode area that matches the Service Users requested location. The requirements will also stipulate the requested start date and, if known, end date.

There may arise a situation that offers an exception to the standard DPS process. In this situation, CAP CCG reserve the right to contact a single Provider, or specified selection of Providers. A retrospective Requirement will be placed on SProc.Net. Detailed below is a list of example situations in which this may occur:

- **Safeguarding cases** – In a situation where a Service User or group of Service Users have to be moved from an existing provider at short notice due to safeguarding concerns with an existing Provider.
- **Specialist Care** – In a situation where a complex package is required and only a specific Provider can meet the needs of the Service User.
- **Out-of-area placement** – In a situation where the Service User requires a placement outside of the area covered by the CCG.

6.2. Open for Offers

Once the Requirement has been distributed, Providers can submit an Offer during the 'Open for Offers' period. An Offer is the name used for a proposal submitted by a Provider. CAP CCG will stipulate the timescale of this period on the Requirement. Once this period ends, no further Offers can be submitted by the supply base.

To create an Offer, Providers will state whether or not they can meet the requirements ('Attributes') and submit a price ('Price'). On each Offer, there is a price component and a quality component that factor in to how each Offer is scored and ranked.

- **Attributes**

Each Service Category has a set of relevant attributes. An attribute is a feature or characteristic of an individual Service User's needs that the Provider must be able to deliver and is comprised of the following:

- **Features** – Core criteria or 'must have' elements of care delivery required to meet the Service User's needs. This serves as a pass or fail criterion. These are displayed as tick-boxes on the system.
- **Offer Questions** – Supplemental questions used to clarify the Provider's capability to deliver elements of required care delivery. Whilst this is not scored this serves as a pass or fail criterion should the Provider be unable to demonstrate the suitable level of proficiency.

- **Provider Quality Score (PQS) – 30%**

The PQS is a custom quality score assigned to each Provider. From go-live, the PQS will be formed of the Provider's Care Quality Commission (CQC) rating. Providers are able to view their PQS via the Supplier Relationship Management (SRM) section on SProc.Net. Providers are required to have a minimum CQC rating of amber across all 5 CQC inspection areas or better to be accepted onto the DPS and able to make offers.

As a Provider, if you obtain evidence from CQC of a change in your inspection ratings, please send to CAP CCG via the SRM module.

Over the lifetime of the DPS, the metrics forming the PQS may change. CAP CCG will notify Providers in this instance and inform them of the new metrics which constitute the PQS, and from when these changes will take effect.

- **Price – 70%**

Price scores are then calculated by the system by comparing Provider's rates using the following formula:

$$(\text{Best Price} \div \text{Bid Price}) \times \text{Price Weighting}$$

The Price Score is weighted to represent 70% of the Provider's total score. This is subject to change over the course of the DPS contract.

The total Score is generated by the system based on the combined final Quality (PQS) and Price weighted scores. These scores are then used to rank all Offers in ascending order (i.e. the highest score achieves rank 1 and so on).

During the Open for Offers period, all Providers will have visibility of their overall ranking. Whilst the Open for Offers period is open, Providers have the opportunity to revise their submitted price in an effort to improve the ranking of their offer.

6.3. CAP CCG Review

When the Open for Offers period ends, SProc.Net will place all submitted offers into a ranked shortlist. CAP CCG has stipulated that Offers will be placed into this shortlist based on a combination of the submitted Price (70%) and the associated Provider's PQS (30%).

CAP CCG will award the contract to the most suitable offer within the shortlist. There is no 100% guarantee that the lowest price offer, or the offer from the Provider with the highest quality score will be accepted. CAP CCG reserve the right to reject Offers from the shortlist should they be deemed inappropriate. For example, but not limited to, direct or indirect canvassing.

CAP CCG reserves its right to amend the award criteria from time to time, subject to prior notification to Providers, including the use of Service User feedback and historical Service Provider performance data.

6.4. Messaging Tool

A messaging tool is available during the Open for Offers period for you to communicate with CAP CCG to clarify any specifics of the Requirement. Requirement messages and their responses will be published on the Requirement and can be seen by all Providers who are bidding. As such, you must not include anything which identifies you or your business in any Requirement messages. The following policy must be adhered to for its use. This policy is to ensure a full auditable trail and alleviate any risks to CAP CCG or the provider through miscommunication or malicious practice:

- **Identification** – There must be nothing communicated through the messaging system which identifies either you as the Provider or a CAP CCG member of staff.
- **Prejudice** – There must be nothing communicated through the messaging system which portrays a bias for or against you as the Provider.
- **Data Protection** – There must be nothing communicated through the messaging system containing sensitive information of a personal or commercial nature, pertaining to either you the Provider, a CAP CCG member of staff, or the Service User.
- **Off-contract risk** – There must be nothing communicated through the messaging system which incites engagement outside of the system.
- **Clarification** – Further details concerning the Requirement which will aid Providers in constructing their Offers must always be communicated through the messaging system on the Requirement.

7. Service Agreements (Individual Placement Agreements)

If the Offer is successful, a Service Agreement (a digital record of the Individual Placement Agreement) will be created on SProc.Net between the Provider and the CCG. The Service Agreement (Individual Placement Agreement) is a Contract Variation to the NHS Standard Contract.

CAP CCG will inform the Provider of the outcome of the offer via SProc.Net following the end of the Open for Offers period. Providers will be required to accept the terms of the Service Agreement via digitised acceptance on SProc.Net prior to the commencement of the Service Agreement (Individual Placement Agreement) and care delivery.

7.1. Changes to Service Agreements (Individual Placement Agreements)

Cambridgeshire & Peterborough CCG reserve the right to end and amend active Service Agreements (Individual Placement Agreements). The Change Order function in the system will be used by CAP CCG to make such amendments.

The Change Order Policy below outlines what changes to an active Service Agreement (Individual Placement Agreement) can be made using the Change Order function in the system, at the discretion of CAP CCG:

- **Change to a Service Agreement (Individual Placement Agreement)** – Where an alteration in service is required, it is permissible to request a change with the Service Provider / CAP CCG.
- **Ending a Service Agreement (Individual Placement Agreement)** – CAP CCG reserve the right to end the active Service Agreement (Individual Placement Agreement) observing any contractual requirements.

7.2. Intermissions

CAP CCG may use intermissions on Service Agreements (Individual Placement Agreements) as necessary where, due to a change in circumstances, the Service Agreement (Individual Placement Agreement) needs to be placed into an 'on-hold' status:

- **Hospital Admission (unplanned)** – Providers must notify the CHC team within 24 hours of any hospital admissions. In such instances payment will stop after the fourteenth day. Any extension to this arrangement will be considered in exceptional circumstances (e.g. to allow continuity of care) and all instances must be agreed in writing by the CHC team.
- **Death of a Service User** – Payment will be made up to two days after the confirmed date of death of death service user.
- **Holiday / Hospital admission (planned)** – In the event of the service user not requiring the services for any period more than fourteen days due to a period of planned absence including holidays, the provider must notify the CCG in such instances in advance. planned hospital admission or other cause, the provider must notify the commissioner in such instances

Payments for the package continue only if prior approval has been received in writing from the CHC team.

The Provider shall notify the CHC team on 03 300 571 022 or email capccg.complexcases-chc@nhs.net.

CAP CCG reserve the right to change the above conditions where it may be deemed necessary.

8. Suspensions

CAP CCG reserve the right to suspend Providers from the DPS supply chain, for reasons such as, but not limited to:

- Safeguarding concerns.
- Large Scale Investigations (LSI)
- Care Quality Commission (CQC) Notice of Decision to Suspend Placements list
- Care Quality Commission inspection – Services are inadequate

9. Service Receipting and Billing

Once a Service Agreement (Individual Placement Agreement) has been created and delivery of care services has commenced, the Provider will be required to submit weekly bills (Service Receipts) through SProc.Net. *adam* will then submit approved Service Receipts to CAP CCG weekly, who will then pay the Provider weekly, in arrears in line with the established payment terms, against Self-Bills generated from approved Service Receipts. Please refer to the *adam* training user guides for the process on Service Receipting available from Go-live.

10. Communication

10.1. Supplier Relationship Management section

CAP CCG will be using the Supplier Relationship Management (SRM) section within SProc.Net to communicate with approved Providers. The SRM section will allow the providers to communicate directly with CAP CCG officers in an open and transparent manner. Further information can be found in the System User Guide on SProc.Net (post Go-live). The Requirements as listed in the Messaging Policy are applicable during use.

10.2. Feedback and Complaints

If you wish to request any feedback or to lodge a complaint, please contact CAP CCG via email to capccg.complexcases-chc@nhs.net.

11. Next Steps

Providers need to join the DPS if they wish to supply CHC Domiciliary Care services to the CCG. This can be done by successfully completing the Registration, Accreditation and Enrolment processes. *adam* will be available to provide technical assistance with this process and to answer any questions you may have regarding this new procurement process.

Please make sure you register, accredit, and enrol on the system as soon as possible, to ensure you can offer services come system go-live. If you have any questions, please do not hesitate to contact *adam* at supplychains@useadam.co.uk.