

Re-procurement of Assisted Conception Services

Introduction

Bristol, North Somerset and South Gloucestershire (BNSSG) CCGs are committed to service users and the public being involved at the heart of our work. We will continue to listen and act upon patient and carer feedback at all stages of the commissioning cycle because we believe services are better when they are shaped by the experiences and aspirations of local people. This report sets out the feedback we have received during our engagement on re-procurement of Assisted Conception Services, and what we have done as a result.

Background and objective of project

Following the current service provider, North Bristol NHS Trust, giving notice to cease providing an Assisted Conception Service and Basic Semen Analysis Service, commissioners are seeking to re-procure this service.

The objective of the project is to re-procure NHS-funded Assisted Conception Services (treatment and storage) for the BNSSG population.

Approach

A draft service specification was developed from examples of similar specifications for Assisted Conception Services, reviewed by the existing service providers to ensure it accurately described current service being provided (as there was no proposal to change the service, only the provider) and discussed with the regulatory body for licensed fertility treatments, the Human Fertilisation and Embryology Authority.

This draft specification was put out to public consultation for 2 weeks to get feedback on its content to enable commissioners to identify any changes required before putting the final specification out to tender. Staff from the current provider were made aware of the consultation exercise and actively encouraged to respond as well local fertility support groups who were contacted directly to put the consultation on their

sites and current users via the Bristol Centre Reproductive Medicine (BCRM) website.

Findings

29 responses were received, 13 from service users, 5 from general public, 6 from staff (2 from groups of staff of which one came via Protect Our NHS), 2 from GPs, and the remaining 3 unspecified.

Service Users were concerned about the potential loss of the current Bristol service, their future treatment, potential additional travel and uncertainty due to poor communications. Staff and Protect Our NHS focussed on decision-making, procurement process and employment issues.

The following issues were raised:

In respect of decision to give notice on current service:

- 10 respondents (staff and service users) questioned the decision of NBT to close the service and raised concerns about privatisation
- 7 respondents lamented the closure of a successful much needed service and raised concerns about the continued need for a centre in Bristol.
- 5 service users raised concerns about communication
- 4 service users were worried about disruption to future treatment
- 1 professional raised potential impact on other local fertility service providers

In respect of the re-procurement process

- 6 respondents questioned the inclusion of basic semen analysis in the bid
- 5 respondents also questioned future use of publicly funded building and getting value for money back
- 4 detailed responses raised concerns about the procurement process itself,
- 4 respondents specifically questioned whether those involved had a conflict of interest

- 4 respondents raised questions about the business acumen and financial stability of the incumbent being considered for lease of building
- 3 raised employment and pension protection of existing staff
- 2 raised concerns over the failed attempt to take over in 2016,
- 2 responses raising employment and career concerns of nurses and loss of nurses
- 1 respondent felt that the organisation North Bristol were in discussions with were being given an unfair advantage
- 1 respondent felt there should be no need for an open procurement process

You Said, We Did

We have grouped the feedback we have received into the main themes in the ‘You Said’ column. We have provided the action or response we have taken as a result of your feedback in the ‘We did’ column.

You Said	We Did
10 respondents (staff and service users) questioned the decision of NBT to close the service and raised concerns about privatisation	The Clinical Commissioning Group are unable to comment on the decision taken by NBT
7 respondents lamented the closure of a successful much needed service and raised concerns about the need for a centre in Bristol.	We clarified NBTs intention to find an alternative provider to lease the BCRM Licensed building and provide assisted conception services from that building including completion of existing pathways. Accessibility of provision of services is a key criterion for re-procurement of NHS services.
5 patients raised concerns about communication	This has been fed this back to NBT
4 were worried about disruption to future treatment	It will be a requirement within the evaluation criteria to provide a robust transition plan including completion of all cycles for NHS funded patients.
6 respondents questioned the inclusion of basic semen analysis in the bid	NBT has given notice on this service so commissioners are required to re-commission it. Commissioners believe the semen analysis service most logically sits with

	the wider assisted fertility medicine service to support and ensure continuity of patient pathways.
5 respondents also questioned future use of publicly funded building and getting value for money back	This has been fed back to NBT as owners of the building. They are aware of their obligations.
4 respondents specifically questioned whether those involved had a conflict of interest	We are confident that input from current members of staff in the development of the service specification was appropriate as it needed to accurately reflect current service provision. They have had no involvement in decision-making or meetings regarding procurement. The specification has also been informed and reviewed by a number of BCRM staff, the HFEA, GPs, a external fertility consultant and was shared for public consultation.
3 raised employment and pension protection of existing staff	This is a key criterion of the assessment process.
4 detailed responses raised concerns about the procurement process itself	The CCG is absolutely committed to its legal duties, and will ensure a fair, transparent, and equitable procurement process is undertaken, including in relation to premises and geography.

Conclusion

As a result of public consultation, we delayed going to advert to allow the CCG commissioning Executive to assure themselves the current procurement approach was optimal to provide a continuous service delivery for the Bristol, North Somerset and South Gloucestershire population.

Procurement

The CCG believes having considered the feedback received that the procurement approach is optimal and has put the Assisted Fertility Medicine service out to the market on 31st July 2017.

As part of the consultation, expressions of interest were sought through a rigorous process for members of the public to sit on the assessment panel. The role of lay representation is to contribute to a balanced and rounded evaluation of the tenders received. As a result of this process, we have appointed two public contributors to evaluate and moderate the bids.