**Digital Technical Clinical Support (DTCS) Framework**

**User Guide**

**Version Control**

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https://www.lpp.nhs.uk/categories/clinical-digital-solutions/

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# Introduction

This guidance document is intended to provide information and practical support to Suppliers awarded to the Digital Technical Clinical Support (DTCS) framework and Contracting Authorities looking to utilise the DTCS framework as a route to market.

Please note that this guidance only applies to the DTCS framework. Contracting Authorities and awarded Suppliers should ensure they refer to the relevant guidance document of the framework they wish to access (if different to DTCS) to ensure that the right processes are being followed.

A Contracting Authority’s procurement department should always be involved in the decision to access a framework in order to ensure that the decision aligns with the relevant local procurement policies and Standing Financial Instructions (SFIs).

# Key Information

|  |  |
| --- | --- |
| Framework Title | Digital Technical Clinical Support (DTCS) |
| FTS Contract Award Reference | 2025/S 000-049321 |
| Framework Period | 48 Months (18/08/2025 – 17/08/2029) |
| NHS LPP Framework Reference | LPP/2025/003 |

# Background and Vision

NHS London Procurement Partnership (NHS LPP) is a membership organisation, founded and funded by NHS organisations. Working with our stakeholders, we support the NHS to make the most of its purchasing power in order to maximise investment in patient care. As one of the biggest publicly-funded healthcare systems in the world, the NHS’ non-pay spend is approximately £27 billion each year. It is vital that every NHS penny is spent wisely to retain, redesign and improve health care. Working in partnership, our members have saved the NHS nearly £1 billion through NHS LPP since 2006.

This framework is provided in association with NHS North of England Commercial Procurement Collaborative (NOE CPC).

The Clinical Digital Solutions (CDS) team at NHS LPP works to improve the procurement and commissioning of technology, to support members with bespoke and one-off projects, and to represent members and make sure their requirements are considered at a national level. The team's remit is increasingly one of transformational change, driving aggregation, ascertaining and achieving digital maturity for our membership, as well as the public sector.

Technology and digitalization are at the centre of the evolution of the NHS, it continues to drive for operational efficiency combined with excellent patient care. The investment and procurement decisions to be made will be important, as will the underpinning Call-Off Contract and supplier management. The requirement for ad-hoc and specialist technology consultancy has increased considerably, as the role of technology in the delivery of patient care changes significantly, not least to help the NHS meet the challenge to go digital but to assist with the mass implementation of specialist systems across the NHS landscape.

Following the success of NHS LPP’s Clinical Digital Professional Services (CDPS) Framework we recognised the demand for the renewal of this framework, that covers the previous scope of CDPS, including services pertaining to both proprietary solutions and opensource solutions. Market analysis determined the need to change the naming convention of the framework, now named Digital Technical Clinical Support (DTCS), and the structure of the Lots introducing two new Lots (Lot 3 – Implementation Professional Services & Lot 4 – Integration Professional Services) and the closure of an existing Lot within CPDS (Lot 4 – Support Professional Services).

The aim of the DTCS framework is to help Contracting Authorities to procure all standalone, clinical system focused technical support, this will include services pertaining to both proprietary clinical digital solutions and opensource clinical digital solutions. The DTCS framework provides standalone technical support in conjunction with complex clinical systems that can be procured via our Clinical Digital Health Solutions (CDHS) Framework.

Our aim was to develop the first public sector clinical systems framework that compliantly allows for both innovation of products within the lifetime of the framework and a comprehensive direct award mechanism for all framework Suppliers. This will facilitate growth corresponding to the increased demand for digital enablement across both the NHS, social care and the wider public sector.

# Scope

The DTCS framework is split out into the five lots as follows:

Lot 1 – Cloud Hosting, Environment Build, Operation and Maintenance Professional Services

Lot 2 – Design, Development, and Deployment Professional Services

Lot 3 – Implementation Professional Services

Lot 4 – Integration Professional Services

Lot 5 – General Clinical Digital Professional Services

The specification for each Lot can be found within the imbedded document:



As above, the DTCS framework provides the technical support that may be required for the procuring, implementation and integration of systems purchased via the CDHS framework. The CDHS framework provides an innovative and agile route to market for Contracting Authorities enabling the procurement of clinical systems through a single Lot, outcome-based framework structure. This allows Suppliers to not only evolve the functionality of their existing product portfolio throughout the lifetime of the framework but also to expand their range into new solution areas. The CDHS framework contains the following provisions:

|  |  |  |
| --- | --- | --- |
| **Scope of the CDHS Framework** | | |
| **Solution** | **Sub-Solution** | **Products** |
| Electronic Patient Record System Solutions | PAS | Functionality may include but is not limited to: Standalone Patient Administration System (PAS) products and system integrations/portals to support organisations either not ready for full EPR functionality or those that want to keep their PAS separate from their clinical wrap. |
| Acute EPR | Functionality may include but is not limited to: A comprehensive range of both enterprise and best of breed EPR system products and system integrations/portals across Acute care settings. |
| Community EPR | Functionality may include but is not limited to: A comprehensive range of both enterprise and best of breed EPR system products and system integrations/portals across Community care settings. |
| Mental Health EPR | Functionality may include but is not limited to: A comprehensive range of both enterprise and best of breed EPR system products and system integrations/portals across Mental Health care settings. |
| Ambulance EPR | Functionality may include but is not limited to: A comprehensive range of both enterprise and best of breed EPR system products and system integrations/portals across Ambulance care settings. |
| Pathology System Solutions | N/A | Functionality may include but is not limited to: Core Laboratory Information Management System (LIMS) products, Integrated Blood Science Service System products (includes Clinical Biochemistry, Haematology and Immunology), Blood Transfusion System products, Blood Bank System products, Genomics System products and system integration/portals. |
| Radiology System Solutions | N/A | Functionality may include but is not limited to: Picture Archiving and Communication System (PACS) products, Radiology Information System (RIS) products, Vendor Neutral Imaging Archive (VNIA) products and radiology system integration/portals. |
| Pharmacy System Solutions | N/A | Functionality may include but is not limited to: Pharmacy Dispensing System products, Electronics Prescribing Medicines Administration (EPMA) products, Ward based automation and kiosk products, Pharmacy Workflow Management products, discharge planning products and pharmacy system integration/portals. |
| Patient Support System Solutions | N/A | Functionality may include but is not limited to: Patient Tracking and Bed Management System products, Personal Health Record (PHR) products, system integrations/portals and associated wearables and home devices. |
| Specialist Clinical System Solutions | N/A | Functionality may include but is not limited to: All specialist clinical systems such as maternity, child health, theatres, emergency department, cardiology, renal etc. and system integrations/portals. |
| Shared Care Record System Solutions | N/A | Functionality may include but is not limited to: Shared Care Records spanning multiple organisations across both health and social care, Electronic Master Patient Index (EMPI) products, Record Locator Service (RLS) products, Integration Platforms/portals, Informatics products, Vendor Neutral Archive (VNA) products, Reporting and Population Health Analytics products. |

Please find the link to the CDHS framework from our website below:

<https://www.lpp.nhs.uk/categories/clinical-digital-solutions/clinical-digital-health-solutions-cdhs/>

Whilst above are the provisions contained within the CDHS framework, these are examples of the type of clinical systems that the Suppliers awarded a position onto the DTCS framework can provide technical support but is not necessarily limited to only those listed above.

# Accessing the Framework

The DTCS framework agreement can be accessed by the following:

* Central government departments & their executive agencies (a list of such departments and executive agencies can be found at
* <http://www.cabinetoffice.gov.uk/government-business/government-ministers-responsibilities.aspx>)
* Non-departmental public bodies (NDPBs) (a list of NDPBs can be found at Annex A to the Public Bodies Directory 2007 published by the cabinet office) which can be found at
* <https://www.gov.uk/guidance/public-bodies-reform>
* National Health Service (NHS) bodies, including Clinical Commissioning Groups, NHS trusts, NHS foundation trusts, a Special Health Authority and a Local Health Board in England and Wales and other constituent bodies in Wales, Scotland and Northern Ireland including but not limited to: the Scottish ambulance service, lists of all of such NHS bodies can be found at
* <http://www.nhs.uk/Servicedirectories/pages/nhstrustlisting.aspx>
* <http://www.wales.nhs.uk/nhswalesaboutus/structure>,
* <https://www.scot.nhs.uk/organisations/>
* <http://www.hscni.net/index.php?link=hospitals>
* All Local Authorities, a list of such authorities being available at:
* <http://www.direct.gov.uk/en/Dl1/Directories/Localcouncils/AToZOfLocalCouncils/DG_A-Z_LG>
* Police forces and other emergency services, including fire and rescue services, the maritime and Coast guard agency and other rescue authorities a list of police authorities and fire and rescue services can be found respectively at the following:
* <http://www.police.uk/forces.htm>
* <https://www.fireservice.co.uk/information/ukfrs/>
* Educational establishments i.e. schools maintained by local authorities; academies; city technology colleges; further education establishments, and universities.
* <https://www.gov.uk/check-a-university-is-officially-recognised/recognised-bodies>
* Registered social landlords (RSLs), a list of such authorities being available at:
* <https://www.gov.uk/government/publications/current-registered-providers-of-social-housing>
* Registered charities, as detailed at:
* <http://www.charity-commission.gov.uk/>
* Devolved and other administrations within the British Isles, including those detailed at:
  + (in the case of Scotland) <http://scotland.gov.uk/Home> and <http://www.scottish.parliament.uk/>
  + (in the case of Wales) <http://new.wales.gov.uk/?llang=en,OJ/S>
* Healthcare and Social Care providers in the Channel Islands
  + <https://gov.gg>
  + <https://www.gov.je>

## Framework Access Charge

There is no charge for Contracting Authorities to access this framework agreement, the only charge payable to NHS LPP is the Activity Based Income (ABI) charge (see paragraph 5.2 below) paid by the contracted Supplier.

Should a Contracting Authority wish for NHS LPP to provide additional bespoke procurement resource support, over and above what is shown in this document, then this can be arranged. Any applicable costs will be discussed and agreed in advance with each Contracting Authority on a case by case basis.

## ABI

This framework has been established with an ABI charge of 1%. Each Supplier will pay NHS LPP the ABI charge for all Contracts awarded under the framework. ABI is used to offset the costs of setting up and maintaining the framework.

## Framework Access Agreement

Prior to entering into a Call-Off Contract by completing the Order Form and Call-Off Contract under this framework, a Contracting Authority must first complete the online framework access agreement by completing the required section of our website found here (please copy and paste the link below into your browser):

<https://my.lpp.nhs.uk/requestaccessagreement.aspx?c=9f333d3e-383f-46c2-87f8-871331b8d05e>

Once completed the Contracting Authority will be provided with a link via email to access the relevant documentation for the DTCS Framework.

Suppliers on the framework are not permitted to enter a Contract under this framework with any Contracting Authority until a signed online access agreement is in place and a Unique Reference Number (URN) is allocated to the Contract issued by NHS LPP. Please note a URN is required for every Contract entered into on this framework.

## Framework Compliance

1. Before entering into a Call-Off Contract under this framework a Contracting Authority will first need complete the online framework access agreement (see paragraph 5.3 above).
2. A Contracting Authority must use the standard Call-Off Contract Terms and Conditions that were issued as part of the overarching framework ITT. These have been specifically developed to address the unique commercial and contractual challenges presented by a clinical system Contract and are bespoke to the needs of the NHS and wider health and social care economy. Template operational schedules have been included in the Call-Off Contract Terms and Conditions to help support Contracting Authorities at the point of Contract finalisation; however, these may be amended subject to individual requirements. These will be made available to a Contracting Authority upon receipt of a signed online access agreement.
3. Prior to raising any Purchase Orders (PO) with a contracted DTCS framework supplier, the Contracting Authority must first request a URN from NHS LPP. This is unique to each individual Call-Off Contract and must be referenced on all PO’s relating to the corresponding Call-Off Contract. Suppliers must also quote the URN on all associated invoices.

This provides a clear audit trail linking the order back to both the specific Call-Off Contract and the overarching framework agreement, thus ensuring compliance.

NHS LPP reserves the right to request copies of all PO’s, Order Forms and Call-Off Contracts from the Customer (and invoices from the contracted Supplier) relating to a given URN in order to ensure that we are accurately invoicing Suppliers for the correct amount of ABI owed.

# Awarding a Contract

Both further competition and direct award are permissible under the DTCS framework.

Contracting Authorities will have mechanisms for direct award including the ability to award to any framework Supplier for services listed under the Lots within paragraph 4 of this document, as well as Appendix 1 - DTCS Framework Specification embedded above.

Please be aware that Legislation requires a Contract Award Notice to be placed in Contracts Finder following any Call-Off Contract award resulting from either further competition or direct award under this framework. If you need assistance with this, please contact the CDS team ([cds@lpp.nhs.uk](mailto:gstt.cds@nhs.net)) with details of your award and this Notice will be placed on your behalf.

While an assessment of financial standing and insurances has already been undertaken for all Suppliers as part of the overarching framework tender, it is the responsibility of the individual Contracting Authority to request up-to-date copies of the relevant evidence reports prior to Contract signature. Suppliers are obligated to provide the Contracting Authorities with this information.

## Further Competition

Suppliers awarded to the framework will only be invited to take part in further competitions that relate to the specific services for which they have been awarded within the specific Lots within the DTCS framework. See paragraph 8 Supplier Matrix.

Pre-Market Engagement

It is acknowledged that the Lots within the DTCS framework contain a broad range of services that may not all be appropriate for the requirements of a given Contracting Authority. NHS LPP is very keen to avoid Suppliers incurring unnecessary costs to bid on inappropriate further competitions, as well as Contracting Authorities incurring unnecessary costs to subsequently evaluate inappropriate bids. For this reason, NHS LPP encourage all Contracting Authorities to undertake pre-market engagement with all Suppliers that have services awarded to the relevant Lot prior to publishing your further competition ITT.

The Contracting Authority’s obligations:

Any Contracting Authority awarding a Contract through a further competition procedure under the DTCS framework agreement shall:

(a) Identify the relevant Lots that its service requirements fall into;

(b) Identify the Suppliers capable of performing the Contract (the Capable Suppliers) for the service requirements by filtering Suppliers by Lot using the Supplier Matrix;

(c) Amend or refine the Call-Off Contract Terms and Conditions operational schedules in accordance with the guidance outlined in the Contract Build Log (see paragraph 6.5);

(d) Invite tenders by issuing the Call-Off Terms and Conditions and any other relevant documentation (the Request for Proposal or RFP), to the Capable Service Providers; and may include one (1) or more down-select stages within the further competition procedure depending upon the nature and complexity of the Services requirements;

(e) Shall keep each Tender bid submitted by a Supplier during the general further competition sealed until the expiry of the time limit for the receipt of tenders;

(f) Set a time limit in the RFP for the receipt of Tender bid submissions which considers factors such as the complexity of the subject matter of the proposed Call-Off Terms and Conditions and the time needed to develop and submit response documentation;

(g) Following the expiry of the Tender bid submission deadline, apply the published Evaluation Criteria to compliant tenders in order to establish which of the further competition Tender(s) provides the most advantageous solution;

(h) On the basis set out above, award a Contract to the successful Supplier;

1. Once the evaluation process is completed the Contracting Authority should notify all Suppliers of the outcome of the further competition and start the recommended 10 day stand still period before concluding the Contract. This letter will start the 10 day stand still period giving all Suppliers an opportunity to request further information before the Contract is formally awarded. The standstill period should finish at midnight once ten full calendar days have passed. If the tenth day finishes on a weekend or bank holiday this should be extended to midnight on the next working day. Contracting Authorities should use the information within the completed evaluation document to complete the standstill letters. The letters should also be customised to reflect the further competition details and the Contracting Authority’s process for appeal or request for further information.

## Direct Award

**NHS LPP has agreed with the Cabinet Office Commercial Spend Controls function to report and record direct awards of £25K+ and direct awards accumulatively of £25K+ during the tenure of the DTCS framework.**

**Justification and approval from a Contracting Authority’s Head of Procurement (HoP) and Chief Financial Officer (CFO) for utilising the direct award mechanism must be provided, upon request, to NHS LPP prior to entering into any agreement with any Supplier awarded a position within the framework.**

**NHS LPP will monitor the use of direct award through allocation of URNs for Order Forms and Call-Off Contracts and stated route to market choice within the DTCS Access Agreement within our internally held database, as well as our internal MyLPP Contracts Register.**

**NHS LPP will ensure that Contracting Authorities are abiding by their internal Standing Financial Instructions (SFIs) when utilising the DTCS catalogue for a direct award.**

**All direct award expenditure via the DTCS framework, upon request, will be reported back to the Cabinet Office Commercial Spend Controls team.**

Furthermore, any Customer requesting Services under the DTCS without re-opening competition shall:

(a) Identify the relevant Lot which its Services requirements fall into;

(b) A Contracting Authority may undertake a direct award, without the need for further competition, to any awarded Supplier using the day rates published for that Supplier on the DTCS framework catalogue.

As stated within paragraph 3.12 of the DTCS ITT, the day rates published for a Supplier on the DTCS Framework Catalogue have been taken from a Supplier’s bid submission to be awarded a position on the DCTS Framework. If any day rates change in line with paragraph 3.13 of the DTCS ITT, then the direct award would only be available once the relevant information has been updated in the DTCS framework catalogue. NHS LPP will ensure that the catalogue is updated within one weeks’ time of a price change request being agreed an implemented.

**Please note that NHS LPP reserves the right not to accept a price change request.**

## Duration of Contract

## The minimum and maximum total Call-Off Contract term under this framework is as follows:

The term of any Order Form and Call-Off Contract may be a minimum of one (1) day up to an initial maximum of one (1) year with additional optional extensions up to a maximum of five (5) years.

## It is the responsibility of the Contracting Authority to determine the appropriate initial Contract length and ensure that provisions are made for any optional future extensions that may be required.

## Evaluation Criteria

The following evaluation criteria was set out within the framework agreement. The headings stated should be used as part of any further competition within the framework; however, the Contracting Authority can include sub-criteria as long as this is clearly stated to all Suppliers upfront in any further competition tender documentation. These weightings can be changed to meet the individual requirements of a given Contracting Authority.

|  |  |
| --- | --- |
| Criteria | Weighting |
| Technical / Quality | 60% |
| Social Value (minimum 10%) | 10% |
| Commercial | 30% |
| **Total** | **100%** |

The above evaluation criteria were used to evaluate the bids received to form the DTCS framework, it is recommended that the same weightings be applied for further competitions via the framework, however, not mandated.

Commercial and Quality/Technical weightings can be set at anywhere between 1 & 90% at further competition to meet a Contracting Authority’s unique priorities. A minimum of 10% must be given to social value.

The combined Commercial, Quality/Technical and Social Value weightings total must add up to 100% and must reflect a justifiable assessment of the most economically advantageous tender

## Social Value and Sustainability

Procurement Policy Note (PPN) 06/20 applies to procurements covered by the Public Contracts Regulations 2015, including all Central Government Departments, their Executive Agencies and Non-Departmental Public Bodies.

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/921437/PPN-06_20-Taking-Account-of-Social-Value-in-the-Award-of-Central-Government-Contracts.pdf>

It advises that all in scope procurements must include a minimum weighting of 10% of the total score for social value. This should reflect one or more of the below themes and outcomes.

|  |  |
| --- | --- |
| **PPN06/20 Themes** | **Policy Outcomes** |
| Theme 1 – Tackling Economic Inequality | Create new businesses, new jobs and new skills |
| Increase supply chain resilience and capacity |
| Theme 2 – Fighting Climate Change | Effective Stewardship of the Environment |
| Theme 3 – Equal Opportunity | Reduce the disability employment gap |
| Tackle workforce inequality |
| Theme 4 – Wellbeing | Improve health & wellbeing |
| Improve community cohesion |

The evaluation criteria for award onto the framework included a 10% Social Weighting value which assessed the above areas. Suppliers participating in the further competition process will be required to submit commitment statements confirming that they can deliver the required Social Value outcomes. Responses will then be evaluated using qualitative questions to assess the delivery mechanism for the outcomes by the Contracting Authority undertaking the further competition.

The use of a Social Value Delivery Model in procurement provides a standardised approach to defining social value and a clear systematic way to evaluate against local Social Value priorities in the awarding of Contracts. Suppliers should ensure that they consider their own approach and promote/evidence best practice when bidding. Suppliers that can evidence how they will deliver commitments made in relation to the relevant policy outcomes will score more highly.

## Call-Off Terms & Conditions

The framework Call-Off Contract Terms and Conditions will be made available to a Contracting Authority upon receipt of a signed online access agreement. The Contracting Authority will also receive the DTCS Call-Off Contract Guidance document. The purpose of this document is to support the Contracting Authority to understand any actions they may need to take regarding the finalisation of the operational schedules. For example:

|  |  |  |  |
| --- | --- | --- | --- |
| **Schedule Title** | **Summary** | **Owner** | **Pre-Tender/Pre-Award (in the case of compliant direct award) or Contract Award** |
| Service Specification | Both the specification that was published as part of the further competition tender pack and the winning bidders tender response document need to be embedded into the Call-Off Contract when finalised. | Customer | Pre-Tender/Pre-Award |
| Performance Management | Service Credit structure to be published as part of the tender pack. There is flexibility with this schedule template and it may be amended or replaced with a different version upon the discretion of the Contracting Authority/Customer. | Customer | Pre-Tender/Pre-Award |
| Charges and Invoicing | Delivery milestone payments and monthly service charges need to be agreed and inserted. | Customer/Supplier | Contract Award |
| Implementation Plan | Full implementation plan needs to be agreed and embedded into the Call-Off Contract. | Customer/Supplier | Contract Award (implementation plan should be requested as part of the further competition tender process, it would then be inserted into the contract at contract award or be negotiated at preferred bidder stage). |
| Acceptance Procedures | Acceptance Test Criteria needs to be agreed and embedded into this schedule of the Call-Off contract. | Customer/Supplier | Contract Award |
| Contract, Service Management and Reporting | The process for logging a service incident needs to be agreed and this schedule of the Call-Off contract needs to be updated accordingly. Details surrounding the MI requirements should be embedded into Annex A. | Customer/Supplier | Pre-Tender/Pre-Award (this process should be stipulated upfront in the tender documents). |

Where the managed service schedule is utilised in a given Call-Off Contract there is an expectation that the Supplier will work with the Contracting Authority to establish whether the Contract is eligible for VAT recovery under the NHS contracted-out services (COS) rules (as per the guidance published by HMRC). This may involve reviewing the principal elements of the service (and whether these meet the guidelines), as well as considering various other aspects such as ancillary or integral supplies, levels of ‘labour and expertise’ and guarantees of availability in order to determine the correct VAT treatment.

## Establishing a Project Team

Contracting Authorities will need to establish a project team which is responsible for supporting the award of the new Contract. This project team should include key stakeholders from across the organisation who can input into the specification and evaluate the quality of responses from Suppliers under the framework.

The project team should be supported by a project lead who is responsible for ensuring the project is supported by the Contracting Authority’s board and managing the implementation of the new Contract.

If the Contracting Authority does not have the resource to undertake this internally then NHS LPP can provide support at an additional cost. If this is required then you should contact the CDS team to discuss this further, [cds@lpp.nhs.uk](mailto:gstt.cds@nhs.net).

## Managing the Contract

The Contracting Authority should hold regular meetings with the Supplier to review performance against agreed Key Performance Indicators (KPIs). Should the Supplier fail to meet the agreed KPIs then the Contracting Authority should look to take corrective action as outlined within the Contract document.

Contracting Authorities will receive a detailed DTCS Call-Off Contract Guidance document upon receipt of a signed online access agreement.

# Frequently Asked Questions

## What is a framework?

A framework is a general term for an agreement with a provider(s) which sets out Terms and Conditions under which specific purchases (call-offs) can be made throughout the term of the agreement. Frameworks are established for bodies to buy goods or services via a pre-approved list of Suppliers.

## If a Supplier is not on the framework can they still take part?

No. The framework has been awarded through PCR 2015. Suppliers at the time of advert had the opportunity to register their interest in being awarded a position on the framework. The tender process for the framework has now closed and has been awarded.

## Do I need to invite all Suppliers to a further competition?

You will need to invite all Suppliers for the Lot(s) under which you are undertaking your further competition unless there are specific reasons why you believe a Supplier cannot deliver the services you require. Where this is the case you should check with the Supplier first to ensure that you are not challenged later in the process.

## How long does a further competition need to run for?

This will depend on the complexity of the service. Contracting Authorities should consider the size of the Contract, the number of services included. On average LPP would suggest Suppliers are given four weeks to respond to the further competition. For specific advice please contact the CDS team, [cds@lpp.nhs.uk](mailto:gstt.cds@nhs.net)

## Do I have to apply a standstill period to a further competition?

NHS LPP encourages the application of standstill periods for all further competitions under the framework, especially where the value of the Contract exceeds the thresholds. This ensures transparency to all Suppliers involved in the process and minimises the risk of challenge once a Contract is awarded.

## Can I use Atamis for my further competition?

Further competitions can be carried out using the Atamis e-procurement portal if so desired. Should you choose to use this option all the Supplier details will already be in the Portal which will assist with the process.

## Is a Contract Award Notice Required?

Please be aware that Legislation requires a Contract Award Notice to be placed in Contracts Finder following any Contracts over £12K awarded from this Framework. If you need assistance with this, please contact the CDS team with details of your award and this Notice will be placed on your behalf, [cds@lpp.nhs.uk](mailto:gstt.cds@nhs.net)

# Supplier Matrix

A Supplier contacts list will be issued to a Contracting Authority upon receipt of a signed online framework access agreement.

Please find the Supplier matrix for the Lots of the DTCS framework listed below:

Lot 1 – Cloud Hosting, Environment Build, Operation and Maintenance Professional Services

Lot 2 – Design, Development, and Deployment Professional Services

Lot 3 – Implementation Professional Services

Lot 4 – Integration Professional Services

Lot 5 – General Clinical Digital Professional Services

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bidder | Lot 1 | Lot 2 | Lot 3 | Lot 4 | Lot 5 |
| Answer Digital Limited |  | Y | Y | Y | Y |
| Apira Ltd Primary |  |  | Y |  | Y |
| Atos IT Services UK Limited | Y | Y | Y | Y | Y |
| Avanade UK Limited | Y | Y |  |  |  |
| BearingPoint |  |  |  |  | Y |
| Blue Pelican Consulting |  |  |  |  | Y |
| Burendo Ltd |  | Y | Y | Y |  |
| Cloud 21 | Y |  | Y |  | Y |
| EMIS Health (Optum) | Y | Y | Y | Y | Y |
| EntServ UK Ltd – DXC | Y | Y |  | Y |  |
| Ethical Healthcare Consulting |  |  | Y |  | Y |
| Evolution Recruitment Solutions Limited |  |  | Y |  |  |
| Health Systems Support Ltd |  |  | Y |  | Y |
| Healthcare Innovations Consortium Ltd |  |  | Y | Y | Y |
| Insight Direct (UK) Ltd | Y | Y |  | Y |  |
| Kinseed Limited |  | Y |  |  |  |
| Mastek UK Ltd | Y |  |  |  |  |
| Parico Limited |  |  |  |  | Y |
| Safehand Consulting Limited |  |  |  |  | Y |
| Smart Co Consulting Limited |  |  |  |  | Y |
| Softcat Plc |  |  |  |  | Y |
| St. Vincent's Consulting Ltd |  |  | Y | Y | Y |
| Stalis Ltd |  |  |  |  | Y |
| Streamwave Ltd |  |  |  |  | Y |
| Telefónica Tech Northern Ireland Limited | Y | Y |  |  |  |
| Thalamos Ltd |  | Y | Y | Y | Y |
| The Public Service Consultants Limited |  | Y |  |  | Y |
| VE3 Global | Y | Y | Y | Y | Y |
| Voror Health Technologies Ltd | Y | Y | Y | Y |  |
| Zuhlke Engineering Ltd |  | Y |  |  |  |
|  | **10** | **14** | **14** | **11** | **20** |