

Invitation to Tender: Evaluating the impact of the Medwise decision support tool for managing patients with Long Covid in primary care (Ipswich and East Suffolk Clinical Commissioning Group and its system partners, SNEE ICS).



About the Eastern Academic Health Science Network

Our purpose is to turn great ideas into positive health impact.

We were established by the NHS to convene all partners in the health sector, to develop and deliver innovative solutions in health and care. Our focus is the East of England, but we are part of a national network which enables us to deliver at scale.

We believe citizens, academia, health services and industry will achieve more working together than they will in isolation. Our job is to make this happen. We do this by helping innovators to navigate complex systems, generate value propositions and connect stakeholders to overcome challenges together.

1. Medwise.ai is supported by Panacea Star, Accelerate Cambridge, Eastern AHSN, Digital Health. London, MedTech Foundation, and EIT Health.
2. RCGP (2020) General practice in the post COVID world Challenges and opportunities for general practice. July. [general-practice-post-COVID-rcgp.pdf](#) (Accessed 14.10.21)
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1. Introduction

This is an invitation to tender for research services to understand the impact of the Medwise clinical decision support tool for supporting General Practitioners (GPs) and other health care practitioners (HCPs) to access evidence-based information to support assessment, treatment, and referral of patients with Long-COVID symptoms.

Eastern AHSN is seeking a suitably qualified supplier to provide evaluation services for this project.

The following table sets out the intended timetable for the submission of bids, their assessment, and the conclusion of the contractual arrangements.

Date	Milestone
5 th May, 2022	ITT published and issued to potential suppliers.
26 th May, 2022	12pm deadline for applications to be received.
30 th May, 2022	Scoring of applications conclude, applicants notified by email, preferred supplier/s notified, and due diligence begins.
3 rd June, 2022	Due diligence concludes, preferred supplier identified and Eastern AHSN sign Contract.

This document sets out the lot available, the expected criteria suppliers should address in their bids, along with the timescale, methodology and process for submission, scoring and award.

Questions regarding this lot can be directed to jeremy.davenport@eahsn.org

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2. Background

Medwise¹ is an artificial intelligence (AI) powered clinical information platform accessed through a mobile app or desk top device. In this pilot, we are testing the use of Medwise to help NHS professionals find information about how to manage long Covid, although it can be developed to support decision-making in any therapeutic area. It enables clinicians to search for information about Covid 19 and long Covid and receive an instant, concise answer sourced from national guidelines and academic journals. The service is free to NHS workers at the point of use with use of the platform licensed to the host organisation. The number of new Covid-19 cases is continuing to fluctuate in the UK. The knowledge we have about the virus, its new variants, and the impact of Long-Covid disease keeps developing and it is challenging to keep up with the latest developments and guidance, to enable patients get the best care possible based on up-to-date information and evidence.

With support from an Innovate UK grant, the Medwise AI platform has now been adapted and a beta version of the Covid-19 specific platform has launched for public testing. The SNEE ICS and their partners, want to deploy Medwise to support its Health Care Professionals (HCPs) in their management of long Covid in primary care networks.

General practice has played a strategic public health role in the pandemic response, including targeting support for more vulnerable patients, addressing health inequalities, helping patients to self-care, utilising the assets which exist within communities and providing data to aid the pandemic response. GPs and their teams play a key role in managing the long-term physical and psychological consequences of COVID-19. A recent report by the Royal College of GPs² has highlighted emerging evidence that suggests that patients who have recovered from the virus have experienced a range of health problems, including chronic fatigue, ongoing respiratory difficulties, and mental health problems. GPs will continue to be at the forefront of helping patients cope with the lingering and difficult legacy left by Covid-19 and must be appropriately supported to ensure high quality patient care in its aftermath. This means developing systematic approaches for GPs to proactively identify those patients who are most likely to require support in primary care.

Eastern AHSN is looking to commission an independent evaluator to undertake a qualitative evaluation of the impact of a pilot project being implemented by the SNEE ICS (IESCCG and its system partners) over a 12-month period.

Scope of the Evaluation

What questions are we looking to answer?

The overall aim of this project is to complete an independent evaluation of the Medwise AI pilot project which will be implemented by the SNEE ICS. The outputs of the evaluation will provide the basis for informing decision-making concerning the development and future deployment of the Medwise platform in support of long Covid diagnosis and treatment. It is anticipated that the evaluation team will undertake semi-structured interviews or focus groups with a sample of clinical and non-clinical staff to understand their perception of:

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- Acceptability of and satisfaction with the Medwise platform.
- Confidence in the quality of information and knowledge generated.
- Confidence in managing patients with Long Covid before and after implementation.
- Impact on the appropriateness of referrals to secondary care services related to Long Covid.
- Perceived impact on time saved in securing information and clinical decision making.

Proposed Methodology

The contracted evaluation team will undertake qualitative data collection and analysis. This approach will place emphasis on the experience and perception of clinical and non-clinical staff who are actively using the platform as well as those managing referrals. This will include primary care staff as well as sample of HCPs at selected sites (including the ICS-wide long Covid team) to be confirmed during project start up (in consultation with the SNEE ICS counterpart team and the EAHSN). It is anticipated that up to 30 GP practices will be included in the evaluation with a limited number of staff members to be interviewed as part of the evaluation. The number and location of the participating practices will be confirmed during project start up.

The types of staff involved in the evaluation study will include GPs and nurses (primary care), ICS Long Covid team and possible staff in secondary care. The sites and final number of staff to be included in the evaluation will be confirmed during project start up.

The evaluation team should propose and develop a qualitative methodology that they feel appropriate to achieving the overall objectives for the evaluation (please see attached Logic Model). It will be the responsibility of the evaluation team to:

- Confirm the evaluation framework and identify the those to be interviewed.
- Confirm appropriate qualitative measures to address the questions above.
- Design appropriate data collection tools.
- Work with SNEE ICS and its system partners to secure staff details to ensure appropriate sampling.
- Provide monthly updates on progress as required and escalate any issues that may affect timelines or the quality of the evaluation to Eastern AHSN as soon as they arise.

Whilst we intend to procure a qualitative evaluation, we expect the appointed evaluation team to take quantitative findings from the Medwise platform into consideration including levels of use, documents most frequently engaged with and questions most often asked by users.

Deliverables

The work of the independent evaluator should result in:

- *Evaluation framework report (1.08.22)*
- *An interim report* presenting initial findings (30.11.22).
- *A final report* delivered (March 2023 with dissemination in April 2023). This should be copy-edited and ready for publication.

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3. Value

Bidders are encouraged to put together a bid that they feel most appropriately answers the questions set out above and provide a cost breakdown by work package and task. Bids will primarily be judged on quality and their ability to answer the key questions, with 20% of the overall score allocated to cost. We are looking for bids that adequately answer the research questions for the best value for public money.

The project budget available for the successful evaluation is £15,000.

4. Timetable

Below is an approximate outline timetable for this programme. Exact timings will be agreed with the appointed evaluator based on their approach and timeline for data collection and analysis.

Deadline for submissions	26 th May 2022 (12pm)
Contract awarded	6 th June 2022
Start up and scoping	14 th June 2022
Evaluation Framework	1 st August 2022
Interim Report	30 th November 2022
Final Report	March 2023

5. Scoring Methodology

0	The Provider is unable to fulfil the requirement, or no response is received
1	The Provider is only able to partly fulfil the requirement
2	The Provider is able to fulfil the requirement
3	The Provider exceeds fulfilment of the requirement
Quality – weighted at 80% of total score	
The Provider has demonstrated that:	
Review Deliverables	1. All the objectives and products contained within the specification will be delivered.
	2. Comprehensive and suitable methodologies are proposed for all aspects of the work, with the rationale for each.
Capability	3. Project challenges have been identified and suitable mitigations proposed.
	4. Experience of undertaking a similar piece of work, delivered to timescale
	5. The availability of suitably competent staff who have relevant experience, evidenced by CVs

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	6. An understanding and application of data confidentiality and information governance issues.
	7. Able to deliver the report within the project deadline with a realistic timetable.
Price – Weighted at 20% of total score	
Price	<p>Price will be evaluated by the bid with the lowest score scoring 100 and all other bidder prices being expressed as an inverse proportion.</p> <p>For example, where maximum value for an opportunity is £60 000</p> <p>Bid A - Price £30,000 = scores 100</p> <p>Bid B - Price £40,000 = scores 90</p> <p>Bid C - Price £50,000 = scores 80</p> <p>Bid D - Price £60,000 = scores 70</p>

6. Checklist for bidders

This check list may be helpful in developing your bid but may not be exhaustive:

- Each bid states “Evaluating the impact of the Medwise decision support tool for managing patients with Long COVID in primary care in SNEE ICS Ipswich and East Suffolk Clinical Commissioning Group and its system partners [bidder name]’ as a foot note on each page.
- Each bid is page numbered.
- Price for the bid has been provided, is net of VAT and is not subject to any proposed discounting.
- Each bid excludes the cost of making a presentation to Ipswich and East Suffolk CCG and Eastern AHSN on the findings.
- Each bid states the daily rate for the author and any associates and the number of days consumed in each element of the task.
- Each bid includes an overall timeline, broken down by task and milestone.
- Each bid includes CVs for the project team, outlining similar work previously undertaken.
- Each bid comes from the same organisation as the organisation which will submit the invoice for the report once complete, and the name of the invoicing organisation is clearly given.
- Each bid states that the report will be delivered in Word.

7. Responses

We invite interested bidders to submit their response describing how they would deliver the described requirements within the timeframe and cost envelope. Completed responses should be sent by email to **Jeremy Davenport by 26th of May (12 pm)**.

If you have any questions on the invitation document or the deliverables, please contact Jeremy Davenport jeremy.davenport@eahsn.org by **the 20th of May 2022**.

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We will post all questions raised (without disclosing the source of the enquiry) and all responses to those contacted about this opportunity unless they are considered commercially sensitive. Our view on whether a question is commercially sensitive or not shall be final.

We reserve the right to carry out clarifications if necessary; these may be carried out via email or by inviting bidders to attend a clarification meeting. To ensure that both the Eastern AHSN and bidders' resources are used appropriately, we will only invite up to three (the ultimate number will depend on the closeness of scores) highest scoring bidders to attend a clarification meeting, should a clarification meeting be required.

Scores will be moderated based on any clarifications provided during this meeting. You are responsible for all your expenses when attending such meetings. Eastern AHSN reserves the right to vary all dates in this Invitation to quote, to terminate this procurement process and/or decide not to award a contract.

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