

Reference Information			
Title:	NHS England – NHS 111 Open Source Critical Care Grant Aid		
Name of requestor:		PCOE Reference:	
Author's name:		Secondary Contact:	
Directorate/ Team	Patients and Information / SS&T	Name of Budget Holder:	Beverley Bryant, Director, SS&T
Tel number of author:	07467689376	Date submitted for approval:	9 th February 2016
E-mail address of author:		Total Value (£) (excl VAT):	£200,000.00
Duration (days):	To the end of the financial year	For interim and specialist contractors, the Department assumes a contractor year of 220 days, reduced pro rata	
Start date:	16 th February 2015	End date:	31 st March 2015
Expenditure type (please tick ✓)			
New Business Case	✓	Extension to Business Case	
		Original PCOE Reference	

All Professional Services		Other expenditure types	
	Please ✓		
Specialist Contractors		ICT	
Interim Manager		Communications	
Consultancy		Digital	
Other Professional services (describe)	✓	Grant Aid awards to Community Interest Companies or other Not For Profit organisations.	Other

Endorsements, Authorisation and Approvals		
Endorsers/Authorisers/Approvers	Confirmation Received (please tick ✓)	Name and Date
NHSE / National Director	✓	By: Tim Kelsey; Date: 14 th January 2014
NHSE / BSA Procurement Partner	✓	By: ; Date: 19 th January 2014
NHSE / Central Management Accountant or Regional/ Area Team	✓	By: ; Date: 23 rd January 2014
NHSE / Efficiency Controls Committee		By: [Specify name]; Date: [Specify date]
DH / PCOE Procurement Business Partner		By: [Specify name]; Date: [Specify date]
DH / Finance Approvals Panel		By: [Specify name]; Date: [Specify date]
Department of Health Minister		By: [Specify name]; Date: [Specify date]
HMT (over £500k & programme funded)		By: [Specify name]; Date: [Specify date]
Cabinet Office/ERG		By: [Specify name]; Date: [Specify date]

Note: It is the responsibility of the requestor to ensure that approval information is retained for audit purposes.

Role / Project Information	
Which specific Business Plan deliverable does this proposal support or align to?	<p>Please state the Business Plan deliverable this is aligned to.</p> <p>There are two aspects of the business plan that this deliverable aligns to</p> <ol style="list-style-type: none"> 1. Ensure the full range of urgent and emergency care services are commissioned in a way to deliver the NHS constitution standards and quality services. This includes winter and resilience planning, emergency preparedness, resilience and response (EPRR) planning and high quality NHS 111 services. Please refer to page 21 of the Business plan : http://www.england.nhs.uk/wp-content/uploads/2014/04/ppf-1415-1617-wa.pdf 2. The purpose of business area 17: Data, digital and customer services is to realise the digital information needs of the NHS and to stimulate the development of new innovative information technology and information services to benefit patients and the public and those who serve them. Please see page 42 of the business plan following this link : http://www.england.nhs.uk/wp-content/uploads/2014/04/ppf-1415-1617-wa.pdf <p>In Addition, the NIB Framework states; <i>“We will ensure a level playing-field for open-source software and ensuring all new source code is open and reusable, and published under appropriate licences”</i></p> <p>To ensure that quality urgent and emergency care services are continued to be commissioned it is becoming increasingly critical that various systems are able to integrate and are interoperable. The ‘ Five Year Forward View’ also states that <i>“Across the NHS, urgent and emergency care services will be redesigned to integrate between A&E departments, GP out-of-hours, urgent care centres, NHS 111 and ambulance services”</i></p> <p>To enable integration between these various bodies and their various electronic system suppliers, it is critical that communities of practice amongst these various suppliers and aspirant suppliers are encouraged and supported to drive innovation. By providing Critical Care Grant to encourage Open Source platforms, these objectives can be achieved.</p> <p>Ensuring a level playing-field for open-source software and that new source code is open and reusable will also benefit other ongoing initiatives led by the NHS 111 team such as development of a 5 year strategy for ‘Directory of Services’ which is a key enabler for the overall Urgent Health and Social Care economy and ‘Digital/Online NHS 111’.</p>

<p>What DH or ALB objectives does this request support?</p>	<p><i>Please provide a short description of the business objectives supported by this procurement, referring, where relevant, to ministerial priorities.</i></p> <p>As part of NHS 111's commitment to Secretary of State, the programme is committed to and is carrying out work to develop NHS 111 online services; and to develop a vision for NHS 111 beyond urgent care. Stimulating innovation and encouraging open source solutions within the NHS 111 system would help to achieve these objectives by enabling integration more widely for e.g. with social care or 3rd sector organisations. Timescales for solution fixes or change requests will be decreased and at the same time responsiveness to changes in business and patient safety requirements will be increased.</p>
<p>What outputs or specific deliverables are required, and how do they support the overall objectives?</p>	<p><i>Please provide details of the outputs or deliverables required from the service obtained under the procurement. Outputs should be capable of objective evaluation.</i></p> <p>This Business Case seeks approval to Grant award to not for profit organisations to drive the development and delivery of the NHS 111 Strategy.</p> <p>Specific outputs relating to this deliverable are;</p> <ul style="list-style-type: none"> - Seed funding to the NHS Open Source Software Foundation: The money will be granted to the NHS Open Source foundation, which is being established as a clinically led Community Interest Company, who will administer the funds. As an Associate Member, NHS England will remain closely connected to the process and assure progress and good use of funds. Specifically the funds will be used to assist in the development of the Code4Health platform (a technology-enabled virtual environment where open source code and tools can be used to develop, test and assure innovative solutions to aid integration and interoperability for digital care services), which will engage clinicians, managers and other staff in looking for ways to generate innovation to improve care, efficiency and outcomes. The Code4Health platform will enable NHS 111 to stimulate innovation from the entrepreneur and SME market to address specific challenges and opportunities around the urgent care and 111 settings. - Support and facilitate conversion of proprietary urgent and critical care solutions to open source solutions: This would be done by engaging with existing proprietary system suppliers to understand and support mitigation of the risks around conversion by outlining the longer term benefits and producing plans to facilitate conversion to open source. - Stimulating innovation for urgent and critical care systems: This will be done through engaging clinicians, managers and other staff in looking for ways to generate innovation to improve care, efficiency and outcomes. The engagement approach would be multichannel and will include interactions through workshops, events, focus groups and social media. - Run direct challenges supporting innovation around urgent and critical care: There will be a significant amount of the money provided as prizes / awards (this will be specified within the Grant Agreement) relating to

	<p>specific challenges to be created around the 111 and Urgent Care space. The Open Source Software Foundation along with the NHS 111 Futures team would decide on specific detail of challenges and track progress.</p> <ul style="list-style-type: none"> - Supporting other Not for Profit organisations including NHS organisations in their development of open source solutions. - An indication of the budget breakdown provided as follows; <table border="1"> <thead> <tr> <th>Service Line Breakdown</th><th>Costs</th></tr> </thead> <tbody> <tr> <td>Code4Health Platform Development</td><td>£20,000</td></tr> <tr> <td>Conversion of Proprietary Systems</td><td>£20,000</td></tr> <tr> <td>Innovation Multichannel events</td><td>£10,000</td></tr> <tr> <td>Challenge Prizes</td><td>£100,000</td></tr> <tr> <td>Community Development Awards</td><td>£50,000</td></tr> <tr> <td>Total</td><td>£200,000</td></tr> </tbody> </table>	Service Line Breakdown	Costs	Code4Health Platform Development	£20,000	Conversion of Proprietary Systems	£20,000	Innovation Multichannel events	£10,000	Challenge Prizes	£100,000	Community Development Awards	£50,000	Total	£200,000
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<p>What skills are required to deliver these outputs or deliverables?</p>	<p><i>Please provide details of the type of individual or organisation required to deliver the outputs or deliverables, including any specific skills, qualifications and experience</i></p> <p>The Open Source Software Foundation is being established as a Community Interest Company (CIC) to deliver the outputs by becoming the custodian of the Open Source movement in Health and Care.</p> <p>A CIC is a special type of limited company which exists to benefit the community rather than private shareholders.</p> <p>NHS England will be supporting NHS Trusts to establish CICs in line with Gov.UK guidelines (https://www.gov.uk/set-up-a-social-enterprise) where Community Interest Statements and Asset Locks are approved by the CIC regulator.</p>														
<p>Why do you need external resources to deliver these outputs or deliverables?</p> <p>What skills can or will be transferred to permanent DH or ALB staff?</p>	<p><i>Please explain why the services set out above cannot be sourced internally. What skills will be transferred to permanent staff, and how will this be done?</i></p> <p>NHS England is a commissioning board and therefore is commissioning these not for profit organisations to provide custodianship and delivery of services to the NHS 111 programme and addresses the imminent demands from front line NHS staff that are required to determine their technology requirements and interactions with the market place and suppliers.</p> <p>There has been little uptake of open source solutions within the NHS, and there is therefore a shortage of local resource with knowledge of processes which ensure that Open Source Software is successfully acquired, appropriate service and support contracts are drawn up, and well considered protocols are in place to balance the need for version control of the core software with the benefits delivered by opening the source code.</p> <p>This strategy directly empowers NHS Trusts and communities of interest to own and plan the roadmap of Open Source solutions without the reliance on proprietary vendors and lengthy locked-in licence contracts.</p>														

<p>What will the impact be on DH or ALB objectives if approval is not given for this business case?</p>	<p>There are several ongoing initiatives in the NHS 111 Futures Programme which would benefit significantly from having an open source platform such as development of Digital NHS 111 and use of the current NHS 111 DoS across the wider health and social care system that aligns with the goals of NHS 111 and the Urgent and Emergency Care Review.</p> <p>Cabinet Office's policy on open source published in 2012 states that the Government will use open standards in its procurement specifications and require solutions to comply with open standards. It also further states that when purchasing software, ICT infrastructure and other ICT goods and services Government departments should wherever possible deploy open standards in their procurement specifications and consider Open Source solutions on a level playing field. (https://www.gov.uk/government/.../All_About_Open_Source_v2_0.pdf)</p> <p>The current technical architecture of the NHS 111 and the wider urgent care system is based on usage of various proprietary software and existing skills and culture are focused on proprietary products. There is little scope to explore alternative open source solutions for evolving requirements within the business.</p> <p>Open source software guarantees the right to access and modify the source code, and to use, reuse and redistribute the software, all with no royalty or other costs. Improvements are also shared with the wider community. Thereby having an open source platform would drive innovation especially from SMEs and facilitate opening up the various 111 systems to integrate with a wide range of urgent care systems. This should also lower barriers to entry for more diverse sources of IT services, including citizens and SMEs.</p> <p>However the NHS 111 team does not have the necessary experience or capacity to facilitate various processes to enable change from current proprietary software to an open source platform or to establish and nurture communities of practice around open source within urgent and critical care.</p> <p>Establishment of these processes and communities without consideration of previous experiences or enough capacity to provide consistent response times for queries and proactive communications could lead to faulty or illegal procurements, unsatisfactory support contracts, a profusion of software versions with attendant support challenges and a negative reputation for NHS England.</p> <p>Credibility of the vision to promote the adoption of Open Source solutions for urgent and critical care could be undermined with NHS organisations and other stakeholders.</p>
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Procurement route (please tick ✓)				
Framework (Insert which one if known)		Open tender		Other (speak to BSA) ✓
Procurement Method: Provide details of the proposed procurement/resourcing method (or specific sourcing strategy) as agreed with BSA ¹ , including the basis of payment (e.g. details of fixed fee) and explain why this will achieve best value. Grant Award Process Advice from [REDACTED]: Thanks for sharing. I am happy to review your plans and to support bids process if required.				
Category Description Code:	Grant			
General Ledger Code:				
Selected provider (if known):				
Benchmarking of rates				
Please provide details of agreed benchmarking rates, whether for a company or specialist contractor, referencing where possible agreed framework rates N/A				

Financial case							
Please provide details of how you have calculated the cost of the product or service, by reference (as relevant) to benchmarked costs, and provide justification for the number of days required and/or mix of resources. You should also provide details of additional costs including, specifically, any allowance for reasonably incurred expenses [in line with DH policies]							
This business case is concerned with seeking approval for A Single Tender Award Grant to be made to the NHS Open Source Software Foundation for the value of up to £200,000.00 to enable the facilitation and custodianship of Open Source Solutions. This spend is budgeted for within Strategic System and Technology financial plans, which have been checked with the PMO and finance team. [REDACTED] has confirmed that this is in the business planning for 2014/15 and programme budget is available.							
Cost Centre Code:	127715 NHS 111 Central Enabling		Budget Holder	Beverley Bryant			
Revenue or Capital expenditure?	Revenue		Programme or Admin category?	Programme			
Breakdown of expenditure (expand as necessary)							
Product, service, Role(s) and Grade(s) (or equivalent)	Unit Cost or daily rate	Agency Fee	Discount agreed (%)	Units Required (days)	FY Expenditure Due		Sub Total (£)
					14/15	15/16	
Code4Health Platform Development					20,000		
Conversion of Proprietary Systems					20,000		
Innovation Multichannel events					10,000		
Challenge Prizes					100,000		
Community Development Awards					50,000		
			Contingency		0		0
			Expenses		0		0

¹ If the value of the service changes after the initial discussion with BSA, requestors MUST go back to BSA as the procurement route may have to change. This will save time in the long run.

	Sub Total	200,000		200,000
	VAT (irrecoverable)	0		0
	Total Cost	200,000		200,000

Approvals:

- Except as set out below, final financial approval for all expenditure requested within this Business Case Approval Form will be given by the Department of Health Finance Approvals Panel. This panel exercises the authority of the Director General, Strategy, Finance & NHS.
 - Requests which require ministerial approval;
 - Any proposal to extend a consultancy agreement beyond 9 months; or
 - Procurement-related consultancy greater than £20k.
- Ministerial approval is required for all cases in respect of:
 - A contract value in excess of £200k (for any other category of professional service); or
 - Any case for interim or specialist contractors with a contract value that would, if the applicable daily rate were applied for a year, exceed £200k (i.e. £900 per day).

Commercial case/Procurement route

- Basis of payment** – as far as possible, the Department prefers prices to be fixed on appointment. You should provide details of an agreed fixed fee, or provide an explanation as to why you are proposing an alternative pricing structure (including the extent to which expenditure caps should apply).

Financial case

- If the value of the service sought exceeds £500k, and funded from a programme budget, you will need to work with your Finance business partner to obtain HM Treasury approval for this category of expenditure. This is to be undertaken after the DH Finance Approvals Panel has approved the case.
- In the case of all types of specialist contractor, DH assumes a contractor year of 220 days, reduced *pro rata* for shorter appointments (e.g. 110 days for six months). You will need to justify any appointment that exceeds this limit. You should also identify any risks associated with the use of an external provider (including your plans to mitigate such risks). Provide details of internal resources that will assist with the provision of the service.