

Reference: FOI.ICB-2324/139

Subject: Charlotte Keel Medical Practice

I can confirm that the ICB does hold the information requested; please see responses below:

QUESTION	RESPONSE
All agendas, minutes, meeting papers/documents and attendee lists from meetings since December 2022 relating to the award of the Charlotte Keel Medical Practice contract that was due to start on 1st July 2023.	The award of the Charlotte Keel Medical Practice contract due to start on 1st July 2023 was discussed at the following ICB meetings: Primary Care Operational Group – 19th January 2023 Primary Care Committee – 21st February 2023 Finance, Estates and Digital Committee – 23rd February 2023 ICB Board – 2nd March 2023 Primary Care Operational Group – 23rd March 2023 Primary Care Committee – 28th March 2023 ICB Board – 6th April 2023 Primary Care Committee – 25th April 2023 Primary Care Operational Group – 11th May 2023 Primary Care Operational Group – 15th June 2023 ICB Board – 6th July 2023 Agenda, attendees, minutes (where applicable) and appropriate papers have been attached. Redactions have been made where the



Integrated Care Board

ICB believes that disclosure of the information would prejudice the commercial interests of the ICB (Section 43(2)) and where information regarding procurement bids have been sent to the ICB in confidence (Section 41). These exemptions have been considered in more detail below:

Section 43(2) – Prejudice to the commercial interests of the ICB BrisDoc hold a short-term contract for Charlotte Keel Medical Practice. They became an Emergency Caretaker for the contract after the previous contract holder terminated the contract with BNSSG CCG in 2018. Since 2018, BNSSG CCG and subsequently BNSSG ICB have been undergoing procurement processes to find a long-term contract holder. An initial procurement resulted in no tenable bids and BrisDoc agreed to a contract extension until a second procurement exercise had finished. This was delayed due to the pandemic and has only recently been concluded with the abandonment of the procurement.

The ICB recognises this practice is in an area of high deprivation and a stable sustainable service is the focus of any discussions regarding future service provision. The ICB has indicated that it will undertake another procurement and the ICB cannot risk disclosing any information which might prejudice any future procurements. The information redacted consists of procurement information including detailed financial information, the information submitted



Integrated Care Board arding the bids and contract

from the bidders and the discussions regarding the bids and contract award.

Public interest arguments in favour of disclosing the information:

The public interest arguments in favour of disclosing the information took into account the FOIA definition of where there is a public interest as well as the legal framework for public authority procurements as set out in the Public Contracts Regulations 2015. These Regulations require the ICB to conduct all procurements openly and in a manner which enables behaviour to be scrutinised.

The ICB understands that there will be a public interest in ensuring that the procurement was undertaken fairly and that decision making processes were robust. As the procurement ended in abandonment, the ICB understands that there will be interest in how a second procurement for service provision was unsuccessful.

There is a public interest in ensuring that the ICB has undertaken this procurement in a way that provides the best value for money.

<u>Public interest arguments in favour of maintaining the exemption:</u>

The overriding procurement policy requirement placed on public bodies is that all procurements are based on value for money. The



Integrated Care Board

ICB believes that release of information which would prejudice any future service provision would not be in the public interest. This prejudice could take the form of increased costs as part of any procurement process or delays due to financial negotiation or contract challenges. The disclosure may discourage interested bidders from bidding. It is in the public's interest that the ICB is able to commission good quality and safe primary care medical services for the local population.

Local Primary Care Networks (PCNs) have acknowledged that the inability to procure a contract for Charlotte Keel Medical Practice may destabilise the local primary care environment. Charlotte Keel Medical Practice has over 18,000 registered patients and should the ICB not procure a provider for the practice then these patients would need to be reregistered to other practices in the local area.

The ICB believes there may be a risk that local practices do not have the resources or estate available to accommodate the displaced patients. The ICB may need to negotiate financial arrangements for receiving practices to support increasing workforce and estate.

The ICB has been transparent regarding the procurement and regular updates have been provided to the ICB Board in public through various Sub-Committee minutes. The attached papers provide details of the staff members who were involved in making the



Integrated Care Board

decisions and all the Committees acted within their Terms of Reference and discharged their duties as per the BNSSG Constitution and Scheme of Reservation and Delegation. Each Committee has a wide range of members including Integrated Care System partner members and non-executive members.

Public Interest Test

It is in the public's best interest that any future service provision is secured without any necessary delays. Disclosure of the information may lead to delays in the procurement process. These delays have been described as part of the public interest test considerations.

The ICB has also considered the possible effects on patient care should the procurement be delayed or should the ICB be unable to procure the contract. The ICB considers the requirement for the population to access good quality and safe primary care medical services more important than disclosing the information regarding the contract award at this time.

It is important to note that timing is relevant as the ICB may consider disclosing the information once long-term service provision has been secured for this practice.

The ICB needs to be able to secure long-term sustainable service for the population and the disclosure of any information which may



Integrated Care Board

discourage bidders, or jeopardise any future procurements would be detrimental to both the ICB and the population served by Charlotte Keel Medical Practice. Therefore the public interest lies in maintaining the exemption.

Section 41 (Information received in confidence)

The ICB considers the detailed information received during the procurement and subsequent due diligence as confidential. The procurement documentation states: "The authority confirms that it will keep confidential and will not disclose to any third parties any information obtained from a named customer contact, other than to the Cabinet Office and/or contracting authorities defined by the regulations, or pursuant to an order of the court or demand made by any competent authority or body where the authority is under a legal or regulatory obligation to make such a disclosure."

Public interest arguments in favour of disclosing the information:

The public interest arguments in favour of disclosing the information took into account the FOIA definition of where there is a public interest as well as the legal framework for public authority procurements as set out in the Public Contracts Regulations 2015 which requires the ICB to conduct all procurements activity openly and in a manner which enables behaviour to be scrutinised.



Integrated Care Board

The ICB understands that there will be a public interest in ensuring that the procurement was undertaken fairly and that decision making processes were robust. As the procurement ended in abandonment, the ICB understands that there will be interest in how a second procurement for service provision was unsuccessful.

There is a public interest in ensuring that the ICB has undertaken this procurement in a way that provides the best value for money and that resource has been utilised in the most effective way.

Public interest arguments in favour of maintaining the exemption:

As stated above the information received during the procurement process is considered confidential and therefore any information received during the tender and subsequent due diligence process would be considered confidential. As the ICB has outlined that information would not be shared, this would be the expectation of bidders. As the data relates to a procurement it would be reasonable to assume that a breach of this confidence would be actionable in court.

The ICB, as a public authority, would need to finance such an action and therefore disclosure of the information would not be in the public interest if it led to a legal case which would require ICB resources to support. The current focus of the primary care teams is immediate



and South Gloucestershire

Integrated Care Board

service provision and procurement of long-term service provision for the population. Legal action would take staff resources away from these activities.

The ICB has indicated that it will likely attempt another procurement to obtain long term sustainable service provision for the local population and therefore the ICB cannot risk disclosing any information which might prejudice any future procurements.

The ICB has considered that disclosure of the information may discourage bidders from bidding during the next procurement or any procurements across BNSSG. This would not be in the public interest as larger market engagement promotes competition and better value for money.

Public Interest Test

It is in the public's best interest that any future service provision is secured without any necessary delays. Disclosure of the information may lead to delays in the procurement process. These delays have been described as part of the public interest test considerations.

The ICB has also considered the possible effects on patient care should the procurement be delayed or should the ICB be unable to procure the contract. The ICB considers the requirement for the



Integrated Care Board	
	population to access good quality and safe primary care medical services more important than disclosing the information regarding the contract award at this time.
	The ICB needs to be able to secure long-term sustainable service for the population and the disclosure of any information which may discourage bidders, lead to legal action or jeopardise any future procurements would be detrimental to both the ICB and the population served by Charlotte Keel Medical Practice. Therefore the public interest lies in maintaining the exemption.
All communications, including emails and letters, between the ICB and One MediCare since March 2023.	Please find attached all communication between the ICB and One MediCare since March 2023.
	Redactions have been made where the ICB believes that disclosure of the information would prejudice the commercial interests of the ICB (Section 43(2)) and where information regarding procurement bids and subsequent due diligence have been sent to the ICB in confidence (Section 41). These exemptions have been considered in more detail in question 1. The same public interest arguments and considerations have been taken.
	Public Interest Test
	It is in the public's best interest that any future service provision is secured without any necessary delays. Disclosure of the information



Integrated Care Board

may lead to delays in the procurement process. These delays have been described as part of the public interest test considerations.

The ICB has also considered the possible effects on patient care should the procurement be delayed or should the ICB be unable to procure the contract. The ICB considers the requirement for the population to access good quality and safe primary care medical services more important than disclosing the information between the ICB and One Medicare which contains commercially sensitive information or information regarding mobilisation of the contract.

The ICB needs to be able to secure long-term sustainable service for the population and the disclosure of any information which may discourage bidders, or jeopardise any future procurements would be detrimental to both the ICB and the population served by Charlotte Keel Medical Practice. Therefore, the public interest lies in maintaining the exemptions.

The information provided in this response is accurate as of 18 September 2023 and has been approved for release by David Jarrett, Director of Integrated and Primary Care for NHS Bristol, North Somerset and South Gloucestershire ICB.