Commission for Patient and Public Involvement in Health

9th Floor, Ladywood House
45 Stephenson Street
Birmingham B2 4DY

t: 0121 345 6100 f: 0121 345 6130 www.cppih.org

30 May 2003

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Marion Chester
Legal Services
Association of Community Health Councils for England and Wales
Earlsmead House
30 Drayton Park
London
N5 1PB

Dear Ms Chester

Patient and Public Involvement Forums

Thank you for your letter dated 15 May 2003 in which you express the concerns about the process for selecting Local Networks to support of PPI Forums. I will take this opportunity to explain the background and then turn my attention to your specific points.

Firstly, the CPPIH must have Local Networks in place by 1 September 2003 and this demanding deadline has significantly influenced the options open to us for choosing Local Network providers. Secondly, in order to achieve value for money, we decided to use a <u>competitive tendering process</u> so that we would be able to select organisations who offer the <u>best value solutions</u>.

Approximately 600 organisations expressed interest in tendering for providing Local Networks and we had to find a process that was capable of managing this number. At the time of asking for expressions of interest we had no way of gauging the extremely high interest which there subsequently was, and we did not promise invitations to tender only on the basis of trusts contained in the expressions of interest.

In order to manage the overall process efficiently and fairly we considered carefully how to proceed. We decided to divide the country into geographic clusters of trusts that made sense in terms of flows of patient historic associations etc as far as practicable, so that we would be able to compare bids on like with like basis. In doing so we acknowledged that however we grouped the trusts we would not and could not meet everyone's aspirations as to what the ideal solution was. It is for these reasons that we have had to take certain decisions and, even though they may not command the support of everyone, we have taken them in a context of what the CPPIH must deliver,

We used expressions of interest to guide our allocation of trusts, and in many cases organisations were asked to include trusts that they had not included in their expressions of interest. You may be interested to know that a very large number have responded positively by tendering for exactly the groups that we allocated.

Self-evidently in a competitive tendering process organisations will be pitched against each other and we make no apology for this. Some organisations have found this unsatisfactory and have withdrawn and others have taken a different approach and formed consortia. We do not accept your point about 'varying the terms'.

I will now address your specific points in the order in which you raise them.

- We are operating to Department of Health guidelines on procurement and we have had advice from the PPAU and, where necessary, lawyers.
- As I have already mentioned, we do not share your conclusion that we varied the terms of the procurement process.
- In the event that we receive only one bid for a particular group of trusts, we will accept the bid if it meets the necessary criteria.
- The evaluation criteria by which bids will be judged is contained in Invitation to Tender documents and we do not see particular need to put this in the public domain at this time. Organisations that do not succeed with their bids will be able to seek feedback and this will be given with openness and against the published criteria.

There has been no movement in the Commission's commitment to providing Local Networks that deliver what they are required to deliver and this is clearly spelt out on our web site and in other PR material.

I hope this addresses all your points. Whilst I appreciate that you may not agree with some of the answers I have provided, we hope you will understand the