**Capture Planning**

**Guidance**

* The capture plan should start to be developed at the earliest opportunity, and regularly updated as new relevant information becomes available.
* The second column on the table provides prompts of the type of information that would be expected within this document.
* The final column provides the opportunity to embed further information into the capture plan, including market assessments, commissioner intentions etc.
* The information from the capture plan will feed into other documentation such as the Opportunity Decision Point (ODP) and the Bid strategy (Win Themes).

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| **External Analysis** | | | **Named Lead** | **Notes/ Actions/ Attachments** |
| **Area** | **Guidance/ Prompts**  *(To be deleted before presenting the Capture Plan)* | **Analysis** |  |  |
| Opportunity Description | *Name*  *Background*  *How it Connects to Strategy of Commissioner*  *Key Requirements of the commissioner*  *Deliverable*  *Schedule* | INT HMR  TUPE will apply, service currently in place-jointly commissioned with local authority & CCG. We don’t have any service present in the patch. Open day with colleagues from the local authority to be arranged. We would be sent information start of September.Chase slides & info from the bidder event-ASK STEPH!! Voluntary/community/faith sectors discussed at bidder event a lot, requirement for local providers. 38 GP surgeries likely to reduce to 36. Possibly 3+2 years or 5+2 years contract (block contract). |  |  |
| Commissioner Analysis | *Information from stakeholder analysis*  *Organisational information and power structure*  *Key decision makers, drivers and influencers*  *Commissioning process*  *Evaluation process (Quality/ Finance)*  *Hot Buttons and Issues*  *Commissioner Satisfaction Feedback – State of current relationships* | . Commissioners don’t really know, no direct relationships with any of our execs. May have provider relationships i.e. provider Chief exec events etc. Likely require lead contracting arrangement. Disappointment noted in LCFT pulling out last time. ? Chris Woods already arranging a meeting up with Steve Taylor-Divisional Director of integrated services at the acute trust. What current contracts do they currently have? CCG 2 year operational plan-Can we get a copy of that?? Should be online, have a look at some of the performance reports from their board meetings. National stats on end of life etc., would be included in the tender in we could put forward we could reduce admissions by x% admission. GPs seeing a big increase on people attending GPs in complete isolation. ? Scope and understand what’s the community offer of INT teams, i.e. 24/7 working etc? Need a discussion around technology, how will the GPs access, one single phone line etc. Currently our technology isn’t great, not an integrated care record, understand risk stratification tool. IT a big influence particularly around telehealth & telecare. |  |  |
| Competitive Analysis | *Market Analysis, SWOT analysis, Expected approach and strategy of competitors. Competitor strengths and weaknesses. Integrated solution analysis worksheet*  *Consideration for Partnerships/ Subcontractors* | Find out who their current community provider is at present? Pooling better care money for 2015/16 £18 million, need to think about finding a partner with a social care provider (Horizon scanning required-GAP). Last time we talked to health care at home, may still be useful. Contact local council to analyse housing stats. KEY GAP- social care element. Also useful to find out who the council is in the area and possibly meet. Work required to investigate estate in the area? |  |  |
| **Internal Analysis** | | |  |  |
| Probable Solution | *Outcomes that the commissioner wants* |  |  |  |
| Cost and Pricing Analysis | *For service models; engage Network Accountant to provide costed models of care.* |  |  |  |
| Past Performance | *How are we scoring? What is our track record in this area of work?*  *Where are our evidence and credentials to back up our performance?* | Our current service not working as effectively as they should, currently deliver in BWD, Chorley S ribble and Greater Preston, if we got to presentation we could use a GP from “perfect locality” (3 demo sites of wider holistic community offer, communities looking after themselves) to present. |  |  |
| Risk Analysis | *For existing contracts, have we been served notice on the contract?*  *Looking at performance issues, how can we mitigate these risks? Highlight through the strategy - RAG ratings for risks* | Mobilisation on a new patch. Lack of knowledge of the patch & population. Look at their JSNA understand number of GP practices, review GP profiles. Match GP profiles to level of service requirement. Need to understand the size of the INTs. What engagement have they done to date? Suggest a conversation with health watch in that area? Investigate carers groups that are around-Could then get access to patient feedback. Review their acute trust performance ? a lot of delayed discharges (From Louise). Is there a 3rd sector group? Risk-No relationships, don’t know the GPs, geographical distance between LCFT and service delivery, what additional support are required for services i.e. additional safeguarding support for examples. Can we get the support services from LCFT or can we subcontract from services in the local area i.e local acute trust. Workforce recruitment and retention-National issue around recruiting staff, do we know the staff shortages etc in the area. VANGUARDS around the country being set up with new innovative staffing models, to be truly innovative could we look at a different model with different staff mix. Risk stratification to be understood. |  |  |
| **Strategy Development Plan** | | |  |  |
| Win Strategy White Paper | *For the bid, what are the differentiators from the competitors? Highlight how we meet the commissioners requirements and how we are better than competitors (through evidence)* |  |  |  |
| Contact/call plan | *To be worked up with the Marketing Manager; comms strategy with ND/ CD and exec team. Influencing and providing messages to commissioners* |  |  |  |
| Intelligence Collection | *Information gained from news, reports etc. to be gained by the Knowledge Manager and Engagement Team. Internal information for promotion of current services.* |  |  |  |
| Communication and Public Relations | *Any events/ PR/ talks etc to raise the profile of the organisation and service.* |  |  |  |
| Technology Review | *Partnerships, innovation and risk management* |  |  |  |
| Review and Milestones | *Dates for review, ITT submission dates and release* |  |  |  |
| **Execution and Monitoring** | | |  |  |
| Reviews | *Reviews (Pink/Red/ Gold) for the bid process- dates and people involved* |  |  |  |
| Kick off Meeting | *Part of the proposal development plan – information/ people who would need to be involved. Information to be provided to people at the kick off meeting.* |  |  |  |