



# **Welcome to OPEN INFORMATION MEETING**

verbal presentation of  
**REQUEST FOR TENDERS**

## **LIVE INCITE**

**Lifestyle InterVention IN the perioperative proCess through dIgiTal care**

**Stockholm January 29<sup>th</sup> 2018**

# Present core team member presentation

Name	Organization	Title / Role
Rikard Wicksell	Karolinska University Hospital	Director of Functional Area Medical Psychology / Psychologist, Associate Professor
Malin Johnsson Fagerlund	Karolinska University Hospital	Head of function unit trauma, obstetrics and emergency surgery / Medical doctor, Associate Professor
Martin Kral	Karolinska University Hospital	IT specialist
Stefan Gudasic	SLL Procurement	Unit Manager SLL Procurement
Carin Jescke	SLL Procurement	Procurer
Fredrik Lundkvist	Karolinska University Hospital	Project Management Support
Martina Ahlberg	Karolinska University Hospital	Project Manager

# Agenda

13.00 – 13.55

Presenting the LIVE INCITE Request for Tenders

- Introduction
- The PCP challenge
- Expected outcomes
- IPR — Commercial exploitation of the results — Declaration of Pre-existing rights
- Conditions of tender
- Process rules and information
- Conditions of the contracts

13.55-14-05

Leg stretcher

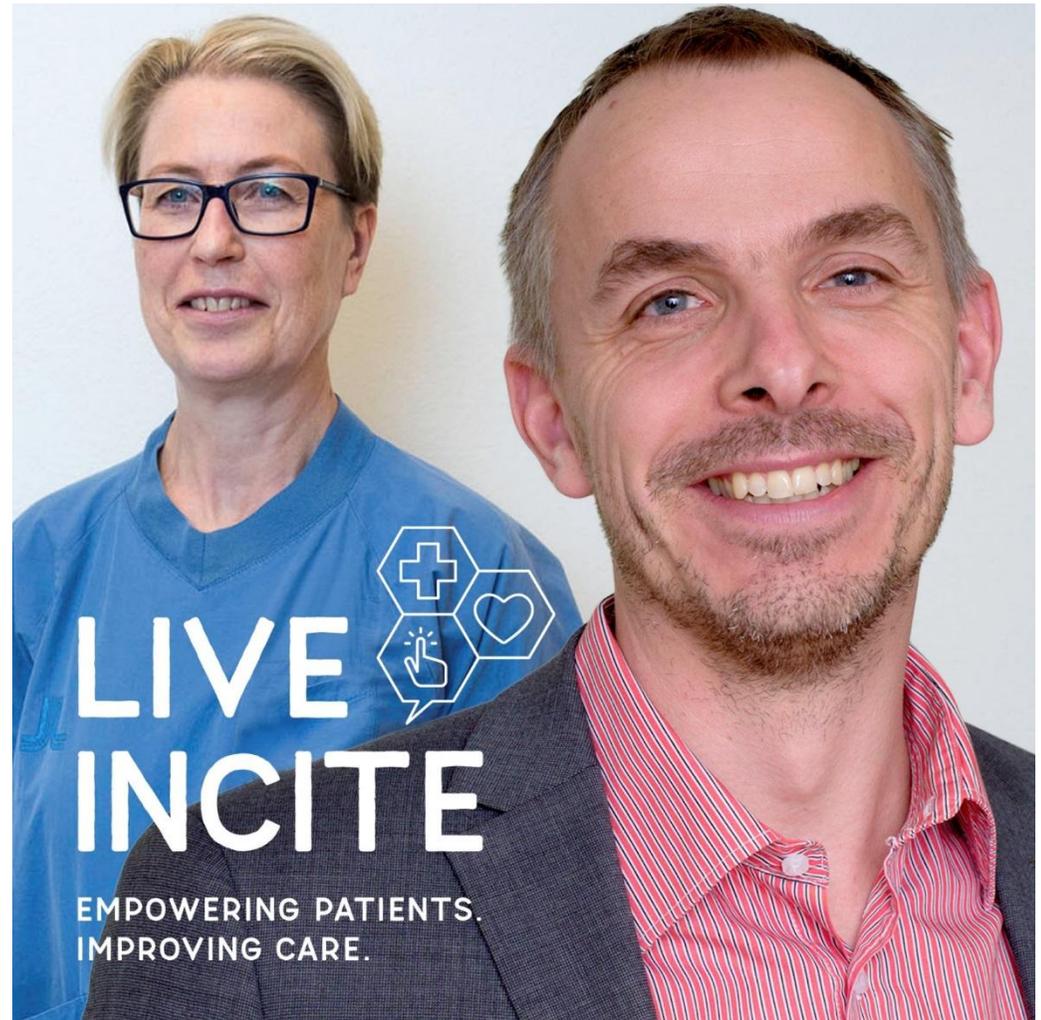
14.05 – 15.00

Questions

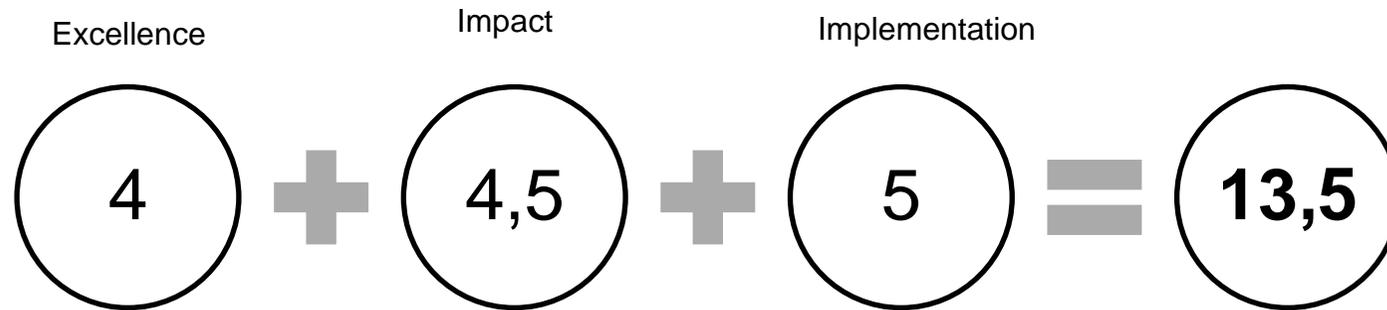
# Tender documents

Document	Purpose
Request for Tenders	Main document
Annex 1 LIVE INCITE Framework Agreement	Framework Agreement to cover whole PCP
Annex 2 LIVE INCITE Specific Contract phase 1	Specifics for each phase
Annex 3 LIVE INCITE Project Abstract template	To be completed by Contractor early start of phase for reporting purposes to EU
Annex 4 LIVE INCITE End of Phase report template	To be completed by Contractor after delivery in phase for reporting purposes to EU
Annex 5:1 LIVE INCITE Request for Tenders Proposal template – Administrative section	Formal content
Annex 5:2 LIVE INCITE Request for Tenders Proposal template – Technical offer	Solution offer
Annex 5:3 LIVE INCITE Request for Tenders Proposal template – Financial offer	Financial offer
Annex 6 Exclusion criteria form	Formal requirements, part of Administrative section
Annex 7 Scoring Simulation Tool	Tenderer understanding of scoring

# Chapter 1 INTRODUCTION



# Horizon 2020 project



**Call:** Horizon 2020 SC1-PM12: eHealth innovation in empowering the patient

**Central Components:** Empowering the patient + Digital/IT + Pre-commercial procurement (PCP)

**Core:** Conduct a pre-commercial procurement

# Overall purpose & core case

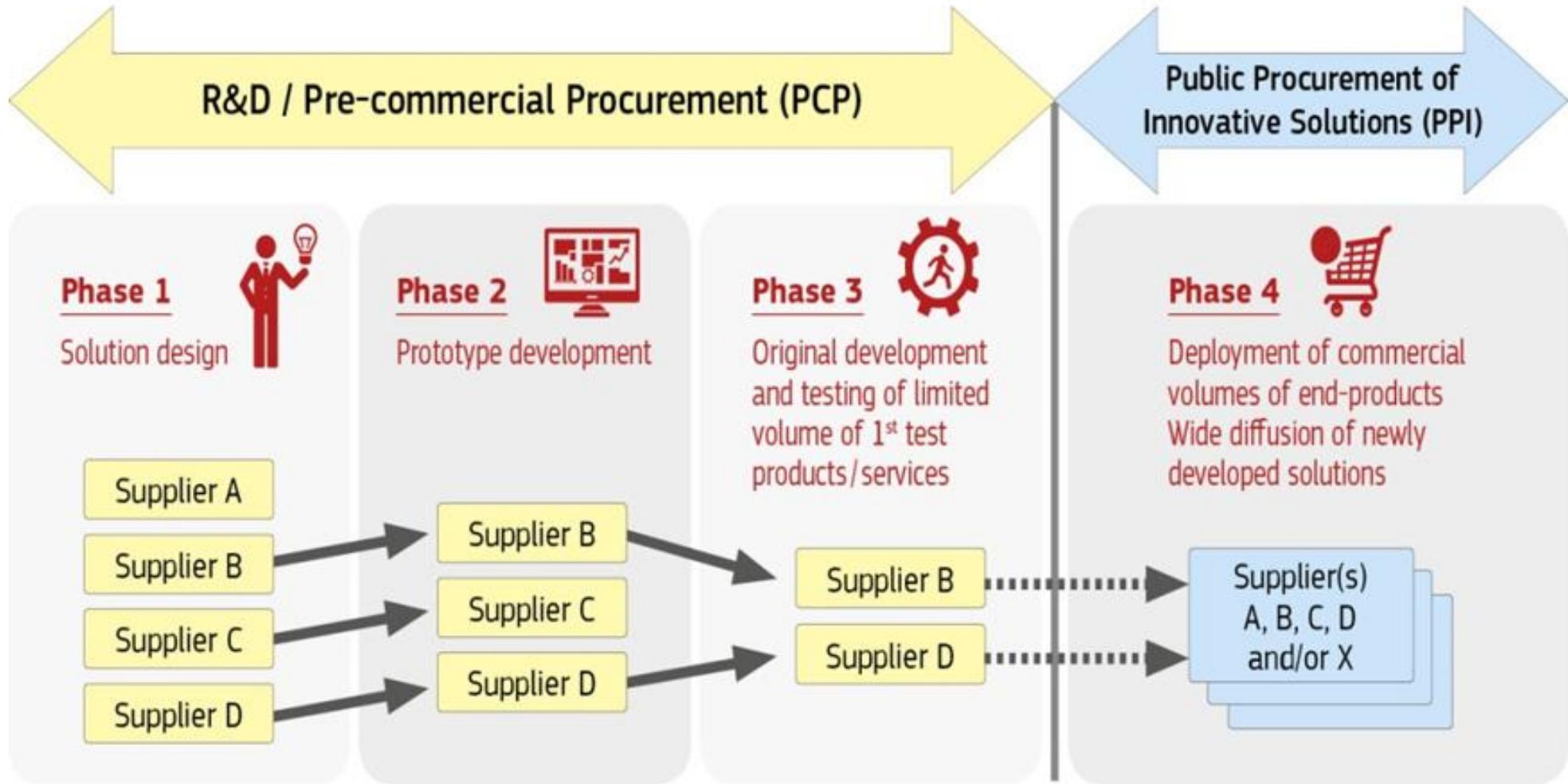
The ***purpose*** of LIVE INCITE is to facilitate the development of a digital solution to empower patients to change risk behaviors prior to surgery. The solution should:

- allow for *individualized interventions and analyses*
- follow evidence based *methods for behavior change*
- *leverage the potential of technology and digital formats* to maximize the reach of the interventions.

The ***core case*** in LIVE INCITE constitutes digital intervention aiming at complete quitting of daily smoking and Risky Drinking in relation to planned knee and hip surgery.

However, it is essential for post-PCP uptake and sustainability that the solution is ***sufficiently flexible to allow for other and co-existing*** risk factors, medical conditions and care contexts.

# Pre-commercial procurement - overview



# Start and end dates per phase



<u>Phase</u>	<u>Start date</u>	<u>End/Delivery Date</u>
<b>Solution design</b>	<b>07/05/2018</b>	<b>24/08/2018</b>
<b>Prototype development</b>	<b>26/11/2018</b>	<b>07/06/2019</b>
<b>Original development &amp; Field-Test/Pilot</b>	<b>23/09/2019</b>	<b>26/06/2020</b>
<i>Of which pilot stage</i>	<i>08/02/2020</i>	<i>19/06/2020</i>

# Total budget and budget distribution



<i>Phase</i>	<i>Expected budget</i>	<i>Expected minimum number of R&amp;D providers</i>	<i>Maximum budget per provider</i>
Solution Design	300.000 EUR	4	75.000 EUR
Prototype Development	1.200.000 EUR	3	400.000 EUR
Original Development	1.500.000 EUR	2	750.000 EUR

# Meeting types

- **Open Information Meeting** – open to anyone for presentation of RfT and Q&A
- **Open Information Meeting for Contractors** – presentation of call-off tender phase 2 & 3 to Contractors only
- **Presentation Meeting** – Contractors to present their offer before evaluation of phase 2 & 3 offers
- **Start-up Meeting** – early in phase to align work
- **Sprint Demo Meeting** – alignment meetings where Contractor present progress and get feedback
- **Delivery Presentation Meeting** – the final ”sprint demo” in which the result for the phase is presented by Contractor

# Overall time schedule

16/03/2018	Deadline for <b>submission of tenders</b> for the Framework Agreement and Phase 1
07/05/2018	Deadline for <b>signing of Framework Agreements</b> and phase 1 Specific Contracts
14/05/2018 – 16/05/2018	Phase 1 <b>Startup Meeting</b> with each Contractor and a defined agenda (remote optional)
20/08/2018 – 22/08/2018	Contractors Phase 1 <b>Delivery Presentation Meeting</b>
24/08/2018	Launch <b>call-off for phase 2</b> (only offers from Contractors that Successfully Completed phase 1 are eligible)
10/10/2018	Deadline for <b>submitting phase 2 offers</b>
16/11/2018	Contractors <b>notified of decision</b> on awarding phase 2 contracts
25/01/2019	<b>First prototype</b> delivered
01/06/2019	<b>Final prototype</b> delivered, including Prototype Development Results document
31/05/2019	Launch <b>call-off for phase 3</b> (only offers from Contractors that Successfully Completed phase 2 are eligible)
07/08/2019	Deadline for <b>submitting phase 3 offers</b>
16/09/2019	Contractors <b>notified of decision</b> to award phase 3 contracts
16/10/2019 – 18/10/2019	<b>Sprint Demo 1 and Start-up Meeting</b> for original development and pilot/field-test preparations (SD 3:1)
09/01/2020 – 06/02/2020	<b>Testing and modification period</b> of delivered solutions as to secure Pilot efficiency
08/02/2020 – 19/06/2020	<b>Pilot/Field-testing</b> of products/services developed during phase 3

# Payment setup and schedule

	Phase 1		Phase 2		Phase 3	
	Date	%	Date	%	Date	%
<b>Payment 1: Start-up</b>	11/05/2018	50	30/11/2018	50	30/09/2019	30
<b>Payment 2: Delivery</b>	31/08/2018	20	14/06/2019	30	14/02/2020	30
<b>Payment 3: Final</b>	03/10/2018	30	10/07/2010	20	17/07/2020	40



Chapter 4  
**THE PCP CHALLENGE**

# The Challenge statement

“The overall goal of LIVE INCITE is to *improve health outcome of smokers and risky drinkers* by reducing postoperative complications through lifestyle interventions with digital services.

LIVE INCITE thus challenges the market to *develop a digital solution for behavior change* that:

1. Supports patients to quit smoking and risky drinking before and after surgery
2. Can be applied beyond the core case

The challenge is further specified in the core case and evaluation framework.”

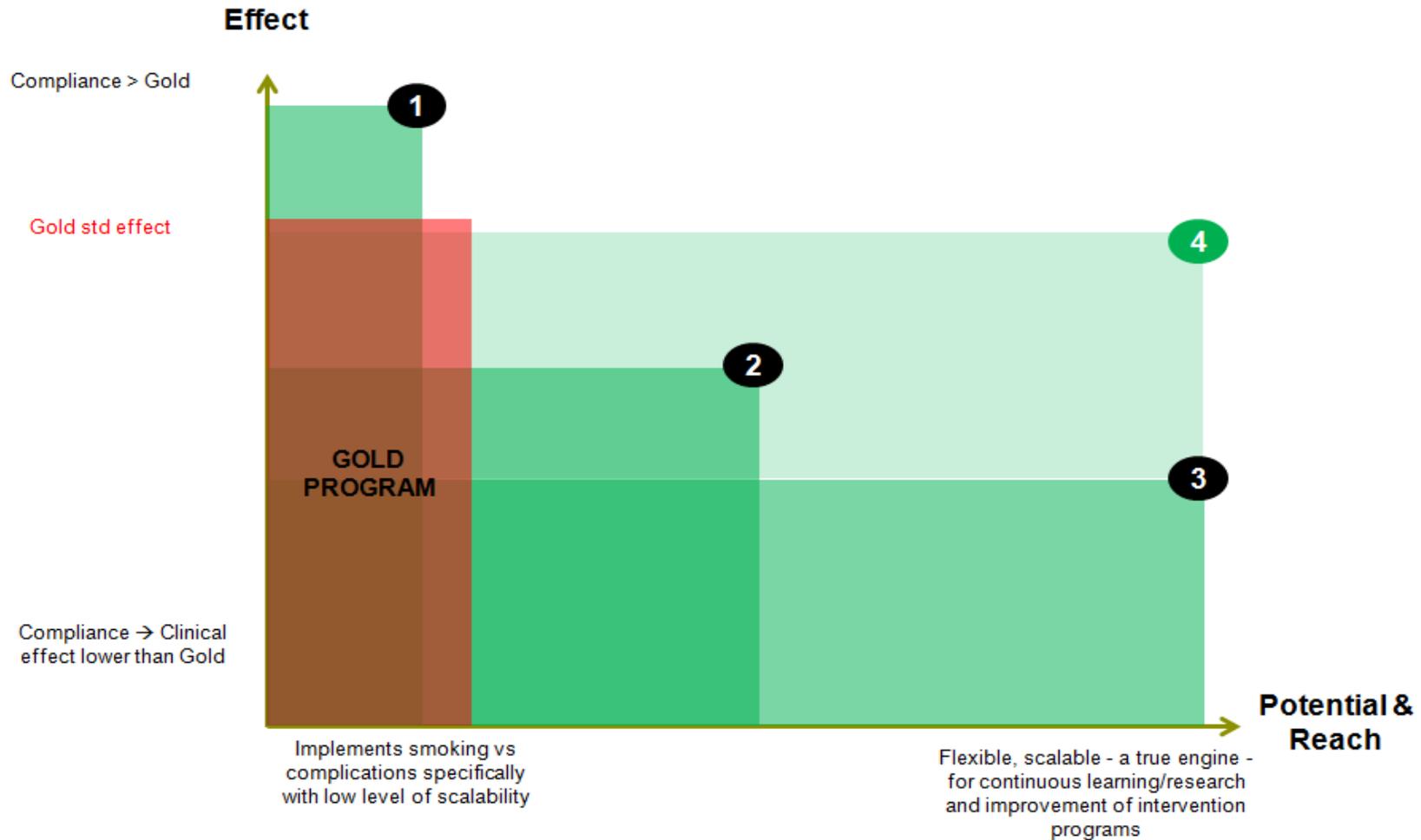
# The core case

The core case in LIVE INCITE constitutes digital intervention aiming at reducing postoperative complications by successful quitting **daily smoking** and **risky alcohol drinking** for at least **4 weeks prior** to planned knee and hip surgery.

“... there is no effect of reducing smoking or alcohol intake, as only complete quitting reduces the development of complications after surgery .”

The purpose of the solution to support behavior change must be viewed in relation to the *desired* behavior change. **In the core case, the desired behavior change means *complete* quitting of smoking and Risky Drinking** but for another risk factor, such as for instance obesity, the desired behavior change might not be as absolute

# Success by means of effect times reach



## Chapter 5

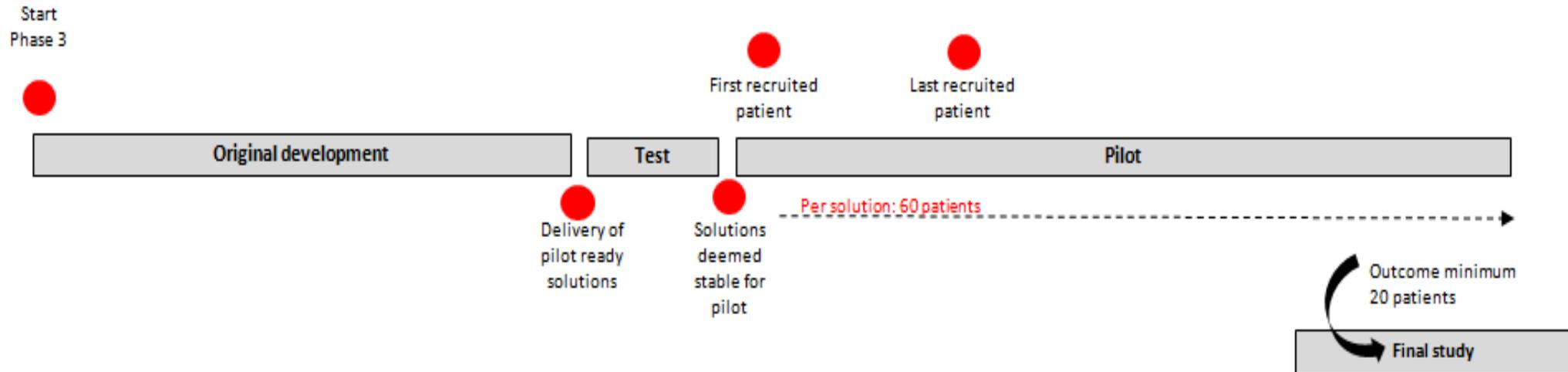
# EXPECTED OUTCOMES



# Overview of phases

	Phase 1	Phase 2	Phase 3
Start-up meetings	Yes	Yes	Yes
Project abstract	Yes	Yes	Yes
Sprint demos	2	3	2
Delivery Presentation meeting	Yes	Yes	Yes
Core delivery	Solution Design	Prototype	Pilot-ready solution
End of phase report	Yes	Yes	Entire PCP

# Phase 3 overview





## Chapter 6

# IPR — COMMERCIAL EXPLOITATION OF THE RESULTS — DECLARATION OF PRE-EXISTING RIGHTS

# IPR & Commercialization

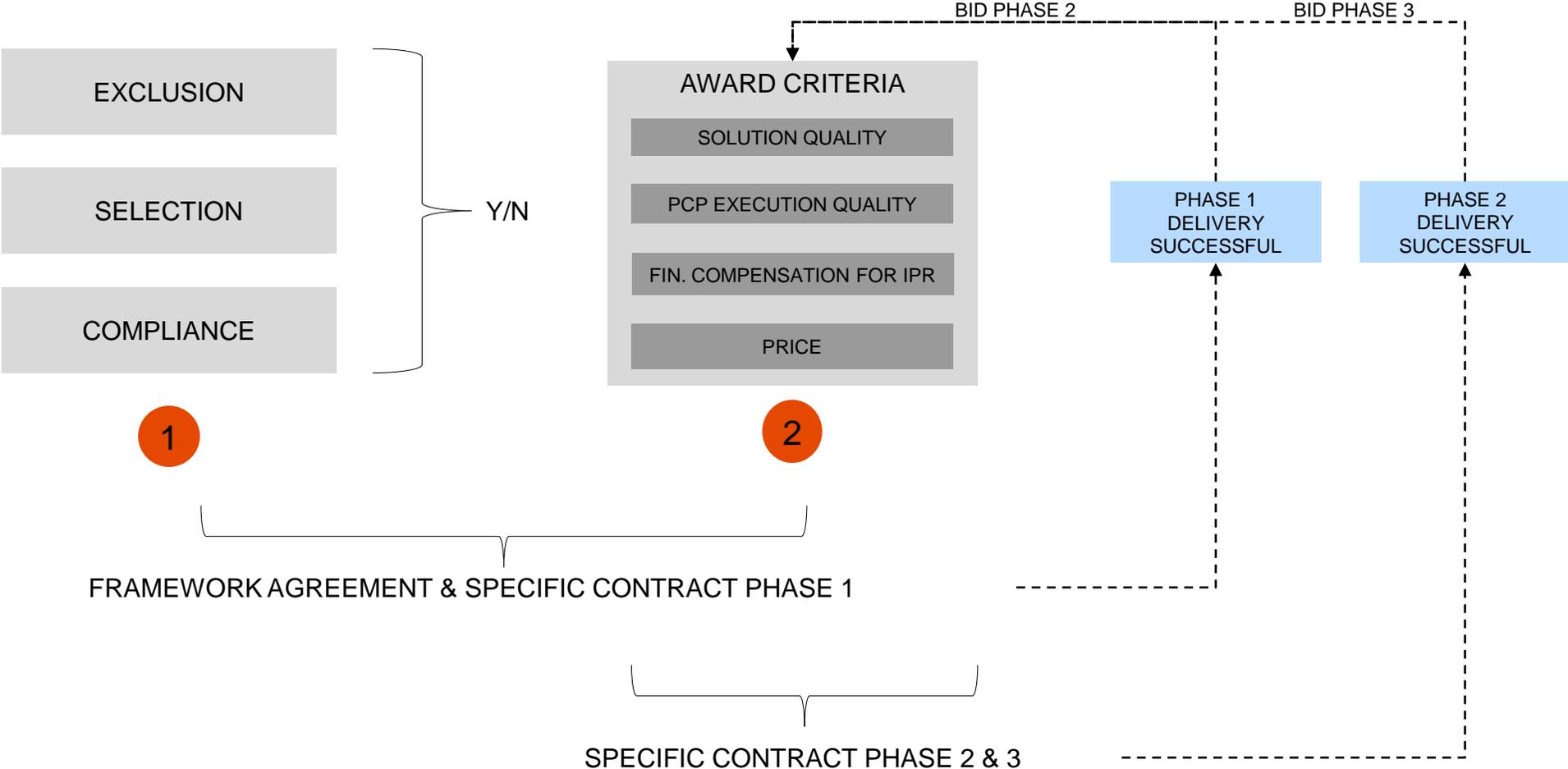
Each **Contractor retain ownership of the Project IPRs** attached to the Results it generates during the PCP implementation, *provided there is a financial compensation* valuing the allocation of ownership of Project IPR generated during the PCP to the Contractor.

The Contractors are expected to **commercially exploit the Results of the R&D undertaken in the PCP within a period of four (4) years** after the end of the Framework Agreement.

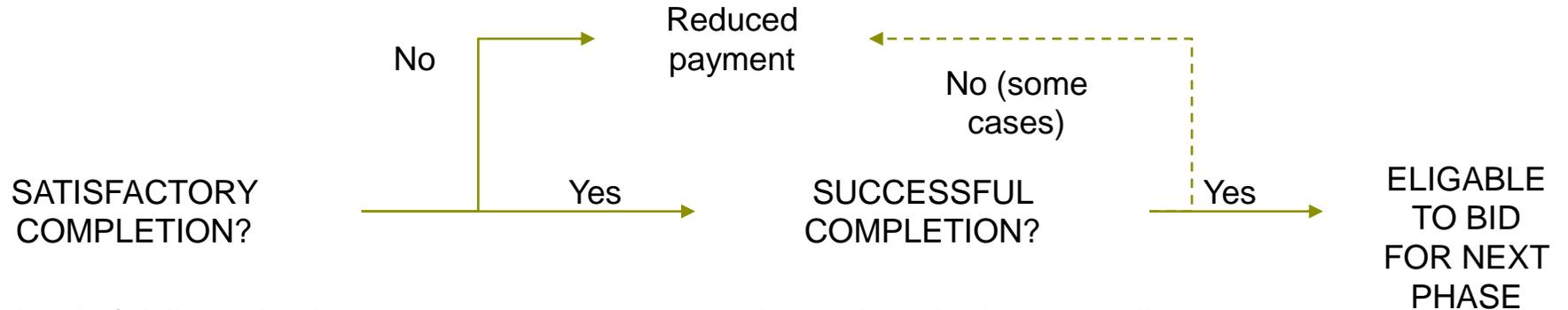
## Chapter 7

# CONDITIONS OF TENDER

# Overall Evaluation Process



# Satisfactory vs Successful



Basic level of delivery, i.e. that the supplier has in fact delivered what it said but without assessing quality beyond reasonable

Assessing whether a supplier and its solution is considered to be "promising".

# Scoring Solution Quality

Relative Item Priority

No	ID	Proposed head line: Evaluation Area & head line for eval Item	Relative Item Priority
1	E1	Effectiveness - Change patient's behavior	1
2	C1	Capability - Data on complications	1
3	C2	Capability - Individualized intervention	2
4	C3	Capability - Adherence to intervention	1
5	C4	Capability - Data collection	2
6	C5	Capability Intervention program optimization	2
7	C6	Capability - Innovation level	2

## SCORING SOLUTION QUALITY

- Each item is given a score 1-5
- Dividing the item score with the Relative Item Priority results in a Relative Item score
- All Relative Item scores within the same area are summarized
- The summarized scores from each area is weighed according to the weights for the phase

ID	Item score	Relative Item score	CALCULATED FIELDS		
			Area score	Area weighed score	
E1	0	0,00	0,00	0,00	
C1	0	0,00	0,00	0,00	
C2	0	0,00			
C3	0	0,00			
C4	0	0,00			
C5	0	0,00			
C6	0	0,00			
C7	0	0,00	0,00	0,00	
F1	0	0,00			
F2	0	0,00			
F3	0	0,00			
F4	0	0,00			
F5	0	0,00	0,00	0,00	
S1	0	0,00			
S2	0	0,00			
S3	0	0,00			
S4	0	0,00			
S5	0	0,00	0,00	0,00	
				0,00	0,00

Evaluation Area Weight	Phase 1
Effectiveness	20%
Capability	40%
Feasibility	20%
Sustainability	20%

Area weight

- A final score from the evaluation section Solution Quality is arrived at and aggregated to the Total score table

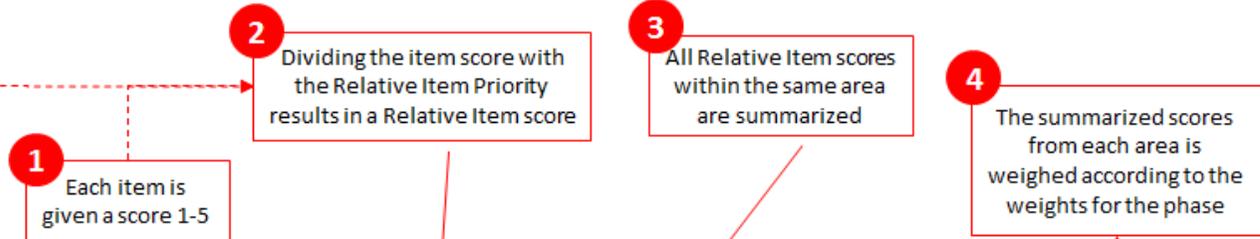


# Scoring PCP Execution Quality

## SCORING PCP EXECUTION QUALITY

Relative Item Priority

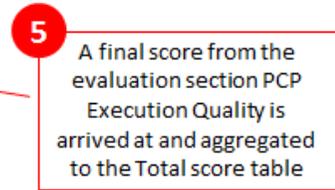
Evaluation Area & headline for Evaluation Item	Relative Item Priority
Project execution - Overall Time & Activity Plan for entire PCP	2
Project execution - Phase specific detailed time plan	2
Project execution - Methodology for identification and remedy of risks	3
Implementation Capability - Overall delivery organization and competencies	2
Implementation Capability - Delivery organization per phase	1
Implementation Capability - Phase 2 development methodology	3
Implementation Capability - Phase 3 Roll-out and Support organization	1
Implementation Capability - Methodology for identification and remedy of risks	3
Infrastructure readiness - Infrastructure (technical implementation readiness)	2



ID	Item score	Relative Item score	Area score	Area weighed score
EX1	0	0,00	0,00	0,00
EX2	0	0,00		
EX3	0	0,00		
EX4	0	0,00	0,00	0,00
EX5	0	0,00		
EX6	0	0,00		
EX7	0	0,00		
EX8	0	0,00	0,00	0,00
EX9	0	0,00		
				0,00

Evaluation Area Weight	Phase 1
Project execution	40%
Implementation capability	35%
Infrastructure readiness	25%

Area weight



# Establishing IPR rights & Scoring Offered Price

## ESTABLISHING FINANCIAL COMPENSATION & SCORING OFFERED PRICE

Factor per phase

	Phase 1	Phase 2	Phase 3
Factor	0,00005333	0,00001	0,000005333

1

If there is a difference between the Virtual Price and Offered Price, the tender is eligible for further scoring

If eligible ...

2

The Offered Price is multiplied by a factor.

3

A score is arrived at by subtracting the value from (2) from 5:  
 $5 - (\text{Offered Price} * \text{factor})$

4

The score from (3) is divided by the average relative item priority, being 2.

5

The normalized score is aggregated to the Total score table.

Virtual Price	0
Offered Price	0
Difference	0
Yes/No	

**FINANCIAL  
COMPENSATION FOR  
RETENTION OF IPR**

Offered Price	0
Score	5,000
Normalized score (divided by 2,0)	2,5

**OFFERED PRICE**

# Aggregating the Total score

## TOTAL SCORE

	Scores	Phase 1	
Solution Quality	0,00	70%	
PCP Execution Quality	0,00	10%	#####
Offered Price	2,50	20%	

2 A weight per section is applied to each score

3 A final score from the tender is arrived at

1 The scores from the three evaluation sections are aggregated to the Total score table

CALCULATED FIELDS				
ID	Item score	Relative item score	Area score	Area weighed score
E1	0	0,00	0,00	0,00
C1	0	0,00		
C2	0	0,00		
C3	0	0,00		
C4	0	0,00	0,00	0,00
C5	0	0,00		
C6	0	0,00		
C7	0	0,00		
F1	0	0,00		
F2	0	0,00		
F3	0	0,00	0,00	0,00
F4	0	0,00		
F5	0	0,00		
S1	0	0,00		
S2	0	0,00		
S3	0	0,00	0,00	0,00
S4	0	0,00		
S5	0	0,00		
				0,00

ID	Item score	Relative item score	Area score	Area weighed score
EX1	0	0,00		
EX2	0	0,00	0,00	0,00
EX3	0	0,00		
EX4	0	0,00		
EX5	0	0,00		
EX6	0	0,00	0,00	0,00
EX7	0	0,00		
EX8	0	0,00		
EX9	0	0,00	0,00	0,00
				0,00

Offered Price	0
Score	5,000
Normalized score (divided by 2,0)	2,5

SOLUTION QUALITY

PCP EXECUTION  
QUALITY

OFFERED PRICE

# Relative Item Priorities for Solution Quality & PCP Execution Quality

ID	Evaluation Area - Evaluation Item	Relative Item Priority
E1	Effect - Change patient's behavior	1
C1	Capability - Data on complications	1
C2	Capability - Individualized intervention	2
C3	Capability - Adherence to intervention	1
C4	Capability - Data collection	2
C5	Capability - Intervention program optimization	2
C6	Capability - Innovation level	1
C7	Capability - Patient empowerment and self sufficiency	1
F1	Feasibility - User friendliness	1
F2	Feasibility – Modifications	2
F3	Feasibility - Number of patients	3
F4	Feasibility - Clinical resources	3
F5	Feasibility - Legal requirements	4
S1	Sustainability – Cost	4
S2	Sustainability - Theoretical framework and evidence	1
S3	Sustainability - IT architecture	2
S4	Sustainability - Interoperability	1
S5	Sustainability - Business plan and model	3

ID	Evaluation Area & Evaluation Item	Relative Item Priority
EX1	Overall Time & Activity Plan for entire PCP	2
EX2	Phase specific detailed time plan	2
EX3	Methodology for identification and remedy of risks	3
EX4	Overall delivery organization and competencies	1
EX5	Delivery organization per phase	1
EX6	Phase 2 development methodology	1
EX7	Phase 3 Roll-out and Support organization	1
EX8	Methodology for identification and remedy of risks	3
EX9	Infrastructure (technical implementation readiness)	2

# Thresholds

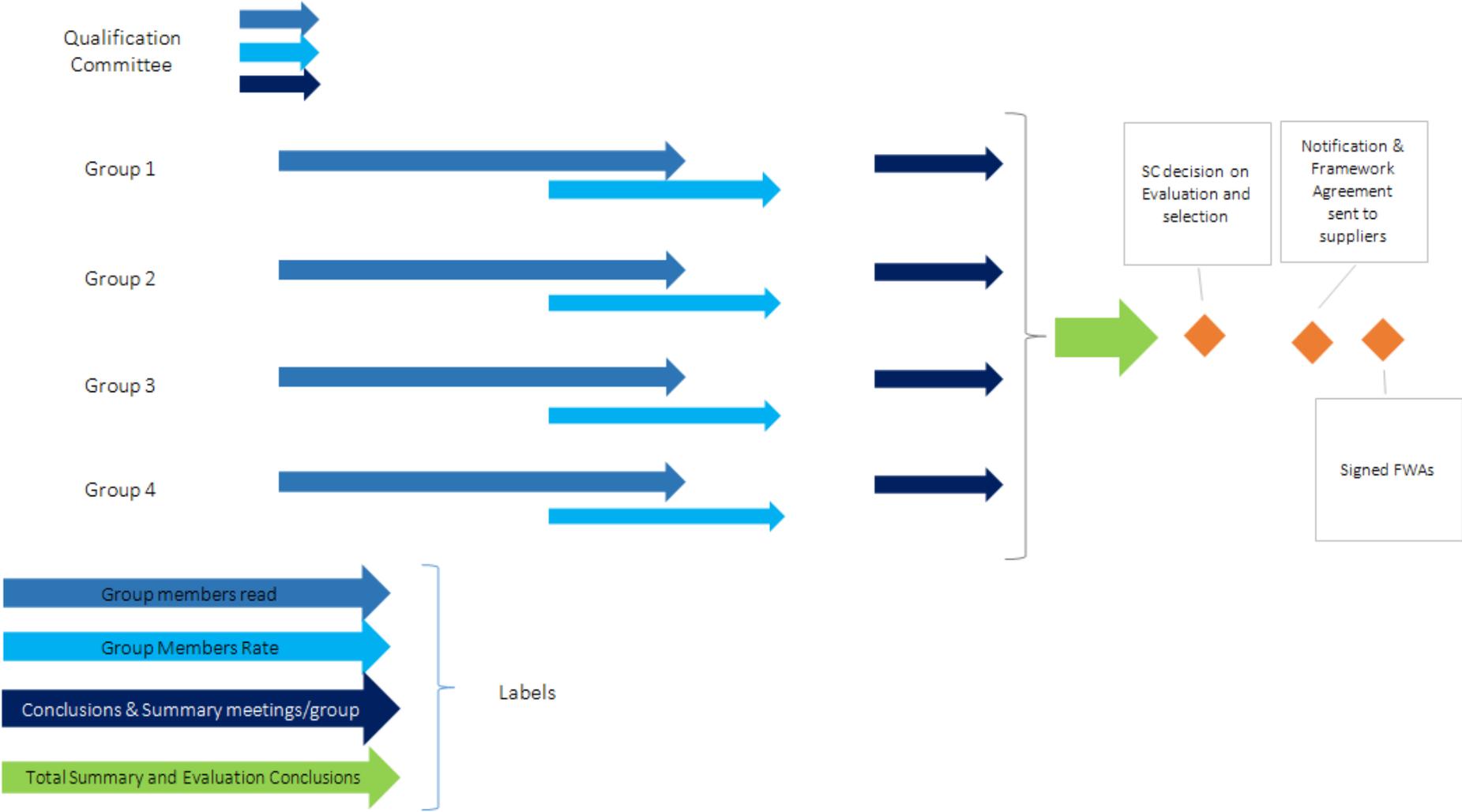
- The tender must be **submitted following the tender template** made available as part of this Request for Tender.
- The tender must be submitted **following the formal requirements** described in this tender.
- All Evaluation Items must be **possible to score**, in other words addressed explicitly and thoroughly by the Tenderer in its proposal, following as a minimum the tender response template.
- The **Offered Price must not be over the maximum price** defined per phase.
- The Financial Compensation for Retention of IPR must be **higher than zero (0)**.
- No Evaluation Item in Solution Quality or PCP Execution Quality with a **Relative Item Priority of 1 may score 1**.
- Regarding bids for phase 2 and 3, Contractors must have **passed the previous phase Successfully** as described in this Request for Tender.
- Solution Quality: A minimum of **three (3) Evaluation Items with a Relative Item Priority of 1 must have scored a minimum of 4**, out of which one must be C6 – Innovation level.
- PCP Execution Quality: A minimum of **one (1) Evaluation Item** out of the total two (2) in PCP Execution Quality must have scored a minimum of 4.



Chapter 8

# PROCESS RULES AND INFORMATION

# Overall evaluation process





Chapter 9

# CONDITIONS OF THE CONTRACTS

[www.upphandling.sll.se](http://www.upphandling.sll.se)

Deadline Submission of tender:

At the latest 23.59 CET on March 16<sup>th</sup> 2018.



# Q&A SESSION

LIVE  
INCITE



EMPOWERING PATIENTS.  
IMPROVING CARE.