

CPSU Annual Conference 2023 - The Edge

TITLE

INNOVATION PARTNERSHIP PROCUREMENT: DESIGN, RESEARCH, DEVELOPMENT, OPERATIONS AND MAINTENANCE OF REMOTE PATIENT MONITORING SERVICE.

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AIM

The aim of this procurement process through Innovation Partnership, was to have a service-based system to strengthen chronic disease management prevention.

OBJECTIVES

To analyse clinical situation in terms of preventative care to detect deterioration through timely intervention; and to improve the persons' quality of life.

METHOD AND DESIGN

A proposal was raised to the Department of Contracts. Three stages were involved in process: (i) Pre-Qualification Questionnaire (PQQ) stage - Procurement issued a request for participation for interested economic operators (ii) Invitation to Participate in the Innovation Partnership - IPIP (Research and Development Stage). Eligible candidates were invited to participate in IPIP by submitting Initial Solution proposal. A pilot project with a cohort of TDM1 patients was carried out to test the solution and develop it to meet the needs of the clinical experts. (iii) Final Tender (Best and Final Offer) – BAFO Stage. The successful candidates will be invited to submit final solution as developed and refined. The contract will be awarded for provision of the service for 7 years.

RESULTS

The analysis identified Diabetes mellitus Type I condition. For PQQ stage, 6 economic operators submitted interest; for IPIP, 4 shortlisted candidates were invited to submit initial proposal and 2 submitted a proposal. For BAFO stage, 2 economic operators will participate. During the pilot study, patient cohort (age < 35 years) were provided with Continuous Blood Glucose monitoring (CGMs) devices following the setting-up and training. The HbA1c thresholds were set up by Healthcare Professionals, and the call centre personnel alerted the parent/guardian to take the necessary action accordingly. The hospital noted that this project assisted not to miss out life-threatening clinical events; led to fast troubleshooting at outpatients' settings, reducing visit time and waiting list; and in absence patients could be followed up.

CONCLUSION

This project benefitted patients, parents/guardians and the medical team observed that the long-term glycaemic control of their patients (HbA1c) improved by 1 – 3% points in all their patients purely using CGMs.¹

REFERENCES

1. Review Report. *Dr. Amanda Bugeja MD, Consultant Public Health Medicine, Office of the Chief Medical Officer*