

Anti-

SUPERBUGS

Pre-Commercial Procurement



A PCP for smart ICT solutions against Multi-resistant microorganisms

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Agència de Qualitat
i Avaluació Sanitàries de Catalunya

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The Consortium



General Objectives

The ANTISUPERBUGS PCP buyers group challenges the market to develop **novel technologies aimed to upgrade and strengthen current Surveillance & Infection Control Systems of patients and environment enabling real time prevention, real time reporting and prompt intervention**

Thanks to these novel technologies ANTISUPERBUGS PCP buyers group will:

- **improve the quality of care processes in hospitals**
- **reduce both the costs and the operational impact resulting from infections caused by Multi-Drug Resistant Organisms (MDROs, otherwise known as Superbugs)**
- **improve the appropriateness of antimicrobial medicine usage**
- **reduce the community and social care impact of MDROs acquired in hospital**

Specific Objectives

- **Improvement of the quality** and **reduction of the costs** of the collateral effects of the care process in hospitals
- Creation and consolidation of an **pan-European network of procurers**
- Definition of the cross-border and joint **pre-commercial public procurement** procedure
- **Mutual learning, knowledge sharing and transferring** within a **multidisciplinary consortium**

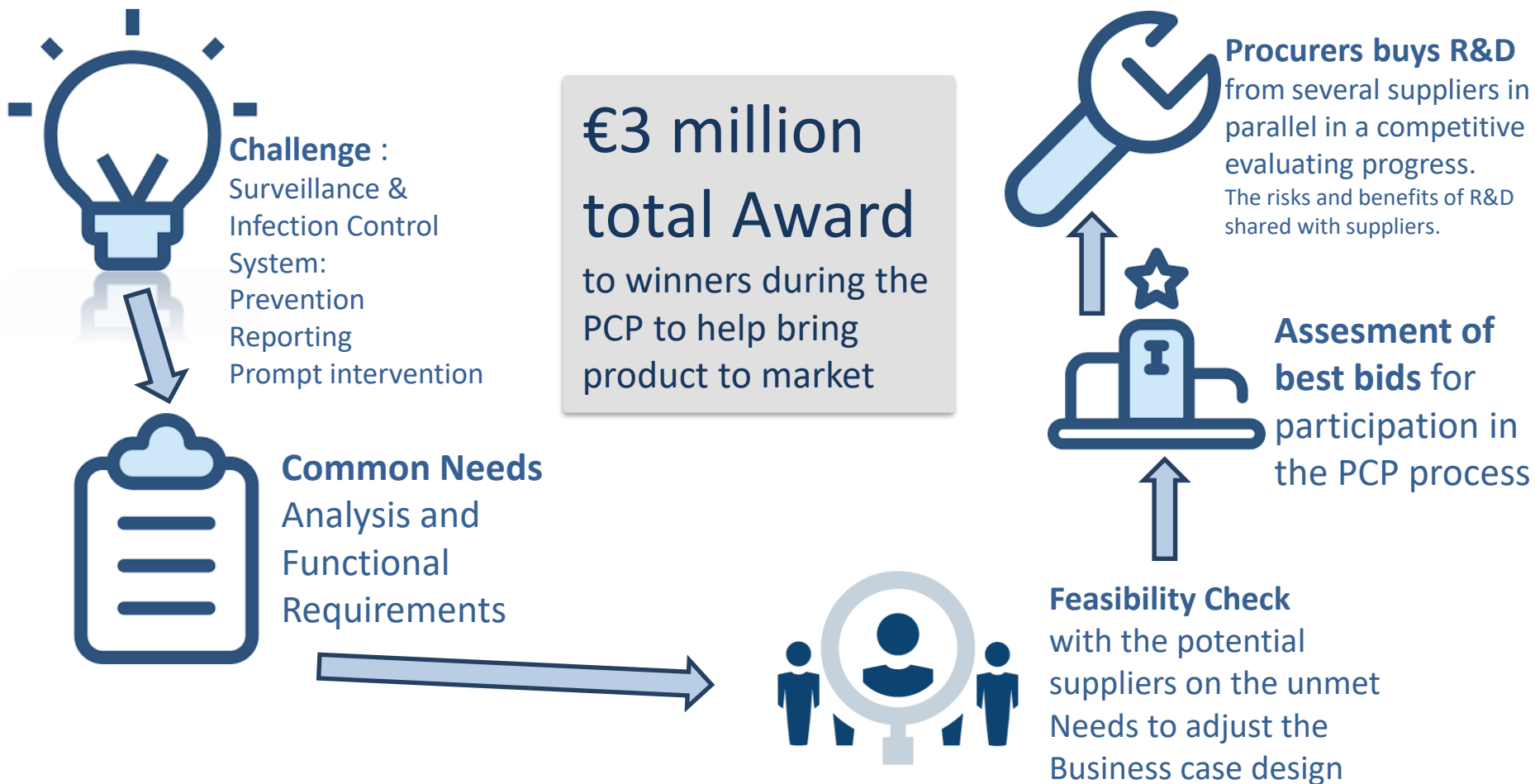


One joint PCP 6 Commissioning Authorities

AQuAS will act as **procuring entity** on behalf of the buyers group

The total jointly committed
Budget : **€3 millions** for the
PCP

From the Idea to the Solution



WHAT ARE THE NEEDS



ACCURATE High sensitivity and specificity of micro-organism identification



AFFORDABLE cost effective compared to current practices.



RAPID Real time alert System.
Continuous or High Frequency surveillance

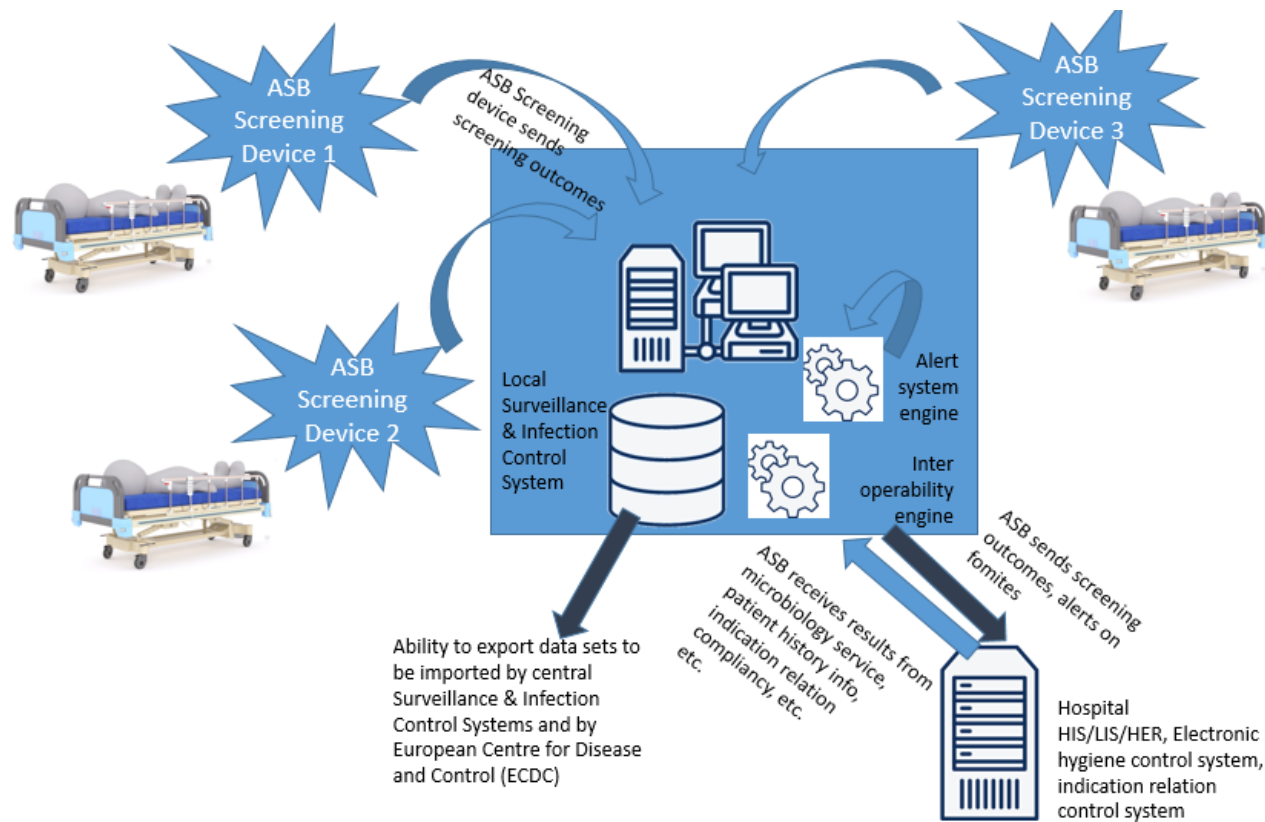


CONNECTED Integration with PHRs, using *interoperability standards (HL7 etc)*


















EASY TO USE To be deployed/installed into existing healthcare environments. Minimally invasive for patients

Challenge Brief



Challenge Brief – New approach

| Requirements/characteristics | Microbiology Laboratory | PCRs | ASB |
|---|---|---|---|
| High sensitivity |  |  |  |
| High specificity |  |  |  |
| Environmental detection (no physical sample from the patient) |  |  |  |
| Distant detection (enabling automatic and continuous detection with no user intervention) |  |  |  |
| Real time (immediate/short turn-around time of test) |  |  |  |

Use cases

USE CASE SCENARIO 1

Nowadays: Unconscious patient with fever is admitted in the emergency room. Blood sample and microbiological samples are sent to the lab, and first results are reported to the clinician within 30 min. Later, patient is transferred to the ICU. On the second day patient presents with fever, headache and nausea. The doctor started calculated treatment with antibiotics. Additional lab results reported – patient's situation worsens and receives reserved antibiotics.

Future: The new ASB* system detects on arrival of the patient by use of non-invasive sampling that there is a colonisation/contamination with *Clostridium difficile*.

Thanks to this detection and the patients health conditions, the physician decides which antibiotics are to be prescribed to the patient and whether isolation or cohort-isolation is needed

Use cases

USE CASE SCENARIO 2

Nowadays: Mrs. M. is hospitalized in the ward. The professional enters the room and performs the usual interventions. While doing that the professional has contacted the patient and surface. The professional then leaves the room. The next day the professional is not feeling well and it will be identified that he was carrying MRSA. Another 24h later, the patient Mrs. M. is having symptoms of respiratory infections (e.g. coughing). Additional lab results reported – patient's situation worsens and receives reserved antibiotics.

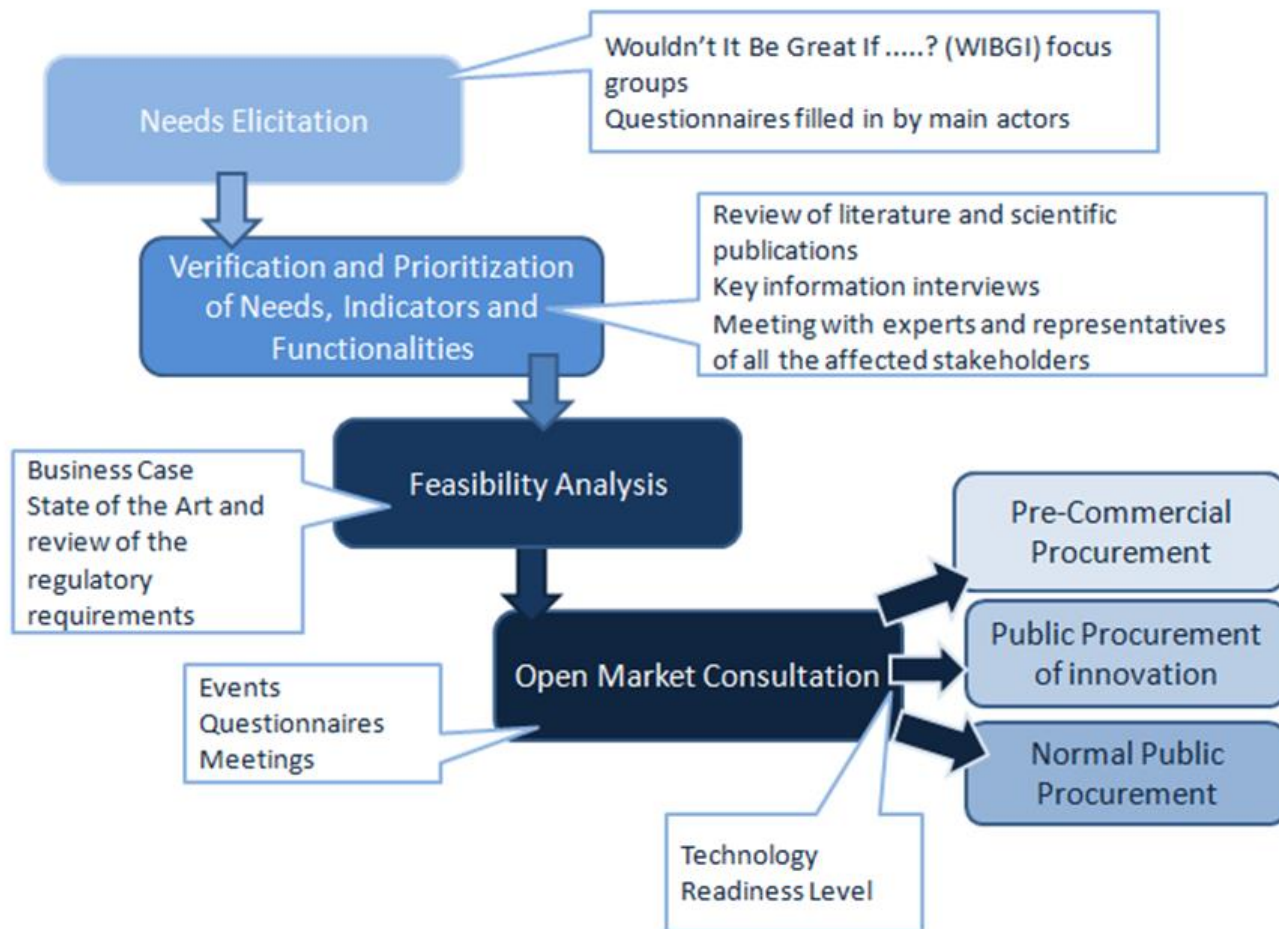
Future: The new ASB-system detects on arrival of the patient by use of non-invasive sampling that there is a colonisation/contamination with either *Klebsiella pneumoniae* or *Acinetobacter baumannii*.

Thanks to this detection and the patient's health conditions, the physician decides which antibiotics are to be prescribed to the patient and whether isolation or cohort-isolation is needed

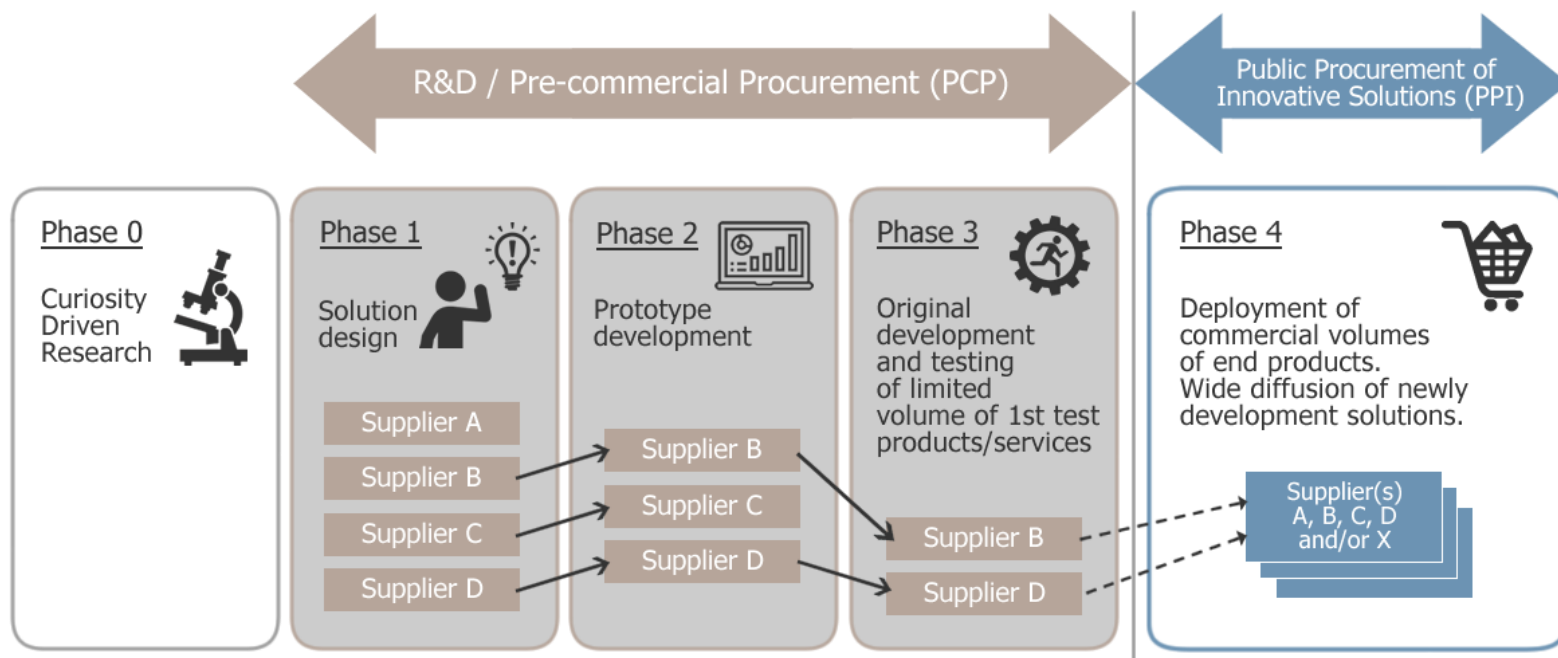
Use cases

USE CASE SCENARIO 3

Future: On admission at the hospital, all patients are scanned by the ASB system, that monitors regularly the patients to detect the presence of *Clostridium difficile* and either *Klebsiella pneumoniae* or *Acinetobacter baumannii* or both. A continuous monitoring system that is connected to a hospital information system. As soon as either *Clostridium difficile* or *Klebsiella pneumoniae* or *Acinetobacter baumannii* is detected, the ASB system alerts the hospital control and surveillance centres and the proper protocols are triggered.



Description of the procurement



| | Phase 1 Solution design | Phase 2 Prototyping | Phase 3 Original development and validation & testing of a limited set of prototype devices or prototype services within the contracting authorities |
|---------------------------------------|---|------------------------|---|
| Maximum number of selected Bidders | 5 | 4 | 2 |
| Maximum budget per phase (Euros) | 380K | Approx 1,3M | Approx 1,75 M |
| | approx. 3,4 M | | |
| Duration (months) | 3 | 6 | 9 |
| Regulation | Phase 1 Contract | Phase 2 Contract | Phase 3 contract |
| | Call for Tender/Invitation To Tender Challenge Brief Framework Agreement | | |

Thank you

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