Following a successful pilot, NHS England (NHSE) is substantively commissioning specialised healthcare interventions (non-surgical) within a primary care setting that is appropriate to service the population in Greater Manchester, for adults on the NHS pathway of care for the treatment of gender dysphoria. Providers who have the capability and capacity to deliver the service requirements are invited to take part in a procurement process that will result in a single contract being let. The two-stage process will first test provider capability and capacity, then shortlisted providers will be invited to submit substantive service delivery proposals.

The successful provider will utilise a multi-disciplinary team of professionals, and the service will be delivered in compliance with NHSE’s published service specification (provided with this notice). The service will provide assessment of individuals for the purpose of diagnosis and will provide (or arrange access to) healthcare interventions for those who receive a diagnosis of gender dysphoria as described in the service specification.

The contract is currently expected to commence in December 2023, though this is subject to mobilisation timings and therefore this date may be delayed (at the commissioner’s sole discretion).

The contract term will be 5 years with an option to extend for a further 2 years (at commissioner discretion). The indicative contract value at this stage is up to £1,773,000 p/a recurring and up to £100,000 to cover mobilisation costs (if required, and at the commissioner’s sole discretion). The commissioner reserves the right to add related service elements and funding during the contract if they deem it to be necessary.

The objectives of the service are:

* provide a high-quality, timely and sustainable service for adults who are registered with a GP in Greater Manchester and who have gender dysphoria; and promote respect, dignity, and equality for all individuals.
* an integrated approach that supports the wider system in delivering an individual’s overall health and social care needs.
* provide a service with a visible profile, with at least one physical location where individuals feel safe, supported, and welcomed.
* provide a service with robust clinical and operational governance structures, systems and frameworks.
* establishment of a multi-disciplinary team of healthcare professionals, with a named clinical lead, who either have experience or are interested in developing competencies and expertise in the care of individuals with gender dysphoria.
* engagement with and inclusion of service users in the co-design and ongoing development and delivery of the service.
* establishment and development of meaningful collaborative relationships with local statutory services to meet the needs of the population.
* exploitation of digital technology to facilitate patient access and enhance the patient experience.

Interested providers will be able to view this opportunity via the 'current tenders' list on the e-procurement system, Atamis, available on the following link: <https://health-family.force.com/s/Welcome>

If you are not already registered on the system, you will need to do so before you can fully access the opportunity. On registration, please include at least two contacts to allow for access to the system in times of absence.

The procurement process will consist of two stages:  Stage 1: The aim of this shortlisting stage is predominantly to test the capability and capacity of potential Providers and to identify whether there is more than one capable provider; (2) Stage 2 will either be: (a) a competitive process (if more than one capable provider is identified at Stage 1), which may involve dialogue and will involve assessment of bids against published evaluation criteria and weightings; or (b) a collaborative “Assurance Process” with a single provider, if only one capable provider is identified at Stage 1. Both approaches will involve evidence being considered by subject matter experts and assessed against critical success factors and expected minimum standards.

The services are healthcare services falling within Schedule 3 to the Public Contracts Regulations 2015 ("the Regulations") which are not subject to the full regime of the Regulations but are instead governed by the "Light Touch Regime" contained within Chapter 3, Section 7 of the Regulations (Regulations 74 to 77).

The process will be conducted in accordance with the requirements and flexibilities provided by Articles 74 to 76 of the Directive, and Regulations 74 to 76 of the Regulations. The Authority will run a transparent process, treating all Bidders equally. For the avoidance of doubt, the Authority will not be bound by the Regulations or the Treaty on the Functioning of the European Union or any other regulations or legislation except for the specific parts or circumstances that apply to the procurement of these Services.

Neither the inclusion of a Bidder selection stage, nor the use of any language or terms found in the Directive or Regulations, nor the description of the procedure voluntarily adopted by the Authority ("Open", "Restricted", "Competitive Procedure with Negotiation", "Competitive Dialogue" or any other description), nor any other indication, shall be taken to mean that the Authority intends to hold itself bound by the Directive or Regulations, save by the provisions applicable to services coming within the scope of Annex XIV of the Directive / Schedule 3 of the Regulations.

The Contracting Authority will observe voluntary award decision notices provisions and may observe a 10-day standstill period described in Regulation 86 of the Regulations. Bidders who are unsuccessful will receive scores and reasons for the decision, including the reasons why the Bidder/application was unsuccessful (Stage 1) and the characteristics and relative advantages of the winning bid if there is a competitive tender at Stage 2.