

**Report to:** **STRATEGIC COMMISSIONING BOARD**

**Date:** 29 September 2021

**Executive Member:** Councillor Eleanor Wills – Executive Member (Adult Social Care and Health)

**Clinical Lead:** Dr Ashwin Ramachandra – CCG Co-Chair

**Reporting Officer:** Jessica Williams – Director of Commissioning

**Subject:** **GM CONTRACTING PRINCIPLES AND EXTENSION OF TAMESIDE AND GLOSSOP CONTRACTS**

**Report Summary:** The Health and Care Bill 21-22 progressing through parliament introduces new measures to promote and enable collaboration in health and care. This includes the formal abolition of Clinical Commissioning Groups (CCG) and the transfer of responsibilities to the Integrated Care Board. For Tameside and Glossop CCG the aim for co-terminosity means Glossop will move from Greater Manchester (GM) Integrated Care System (ICS) into Derbyshire ICS.

As we prepare for the formation of the GM ICS, GM CCG Chief Finance Officers and Directors of Commissioning approved several principles to ensure consistency in approach in our contracting that included the extension of contracts to provide stability during the transition, in particular:

- Extension of VCSE contracts for maximum extension period of up to three years (to 31/03/25).
- Extension of IS contracts including Primary Care contracts other than GMS, PMS and APMS, to a maximum extension of two years (to 31/03/24).

Advice from Head of Market Management at GMSS, NHS E/ NW Director of Finance and Star Procurement is that extending contracts was the pragmatic approach providing we were not committing one-off resource funding that we won't have available to us in the future. The risk of challenge to the extensions is deemed as low and procuring contracts at this stage would not be efficient way of working, as it would provide some risk to the ongoing conversations regarding Integrated Care Systems and their functionality. The CCG has considered forty two contracts that are due to end before March 2024 and identified the commissioning intention for each to provide the stability whilst enabling planned service redesign to continue and also ensuring that no non-recurrent funding commitment extends beyond the period that funding is available.

**Recommendations:** That the Strategic Commission Board be recommended to approve the Commissioning Intentions in line with the Greater Manchester Contracting Principles as follows:

1. The extension of the following contracts directly held by Tameside and Glossop:
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<b>Provider name</b>	<b>Commissioning Intention</b>
Connect Health	Extend for two years to end on 31 March 2024.
Diagnostic Healthcare Ltd	
Manor House Surgery	
Pioneer Healthcare Ltd	
Practice Plus Group	
Primary Eyecare Services Limited	
Ross Care	
Stamford House Medical Centre	
Action Together (Commissioning Infrastructure Programme)	Extend for three years to end on 31 March 2025.
Action Together (Miles of Smiles)	
Big Life Neighbourhood Mental Health Team	
Francis House Family Trust	
High Peak CVS	
Home-Start HOST	
Hyde Physiotherapy Centre	
Marie Curie	
Richmond Fellowship	
Stroke Association	
The Bureau (Volunteer Car Scheme)	
Willow Wood	Extend by one year to 31/3/23
Age UK Serious Mental Illness Step Down	

2. To request Lead CCGs to extended contracts where Tameside and Glossop are an associate in line with the Greater Manchester Contracting Principles.
3. To request GM CCGs confirm the commissioning agreements for Silver Cloud.
4. Ending the following contracts in line with existing end dates/extension periods:

<b>Provider name</b>	<b>Commissioning Intention</b>
42nd Street (Young people's therapeutic support)	superseded by a tender for an integrated service

Anthony Seddon Fund (CYP Drop in)	
Off The Record (CYP Drop in)	
TOG MIND - The Hive	
42 <sup>nd</sup> Street (Mental Health Provision in Schools)	Non recurrent funding
Off The Record	
PC Refurb	
The Worry Wizard	
TOG MIND (Mental Health Provision in Schools)	
Infinity Initiatives CIC (LLW)	Services are currently being reviewed
The Anthony Seddon Fund (LLW)	
The Bureau (LLW)	
The Anthony Seddon Fund (MH Crisis Drop-in)	
Connex Community	Plan to integrate offer into Early Help

5. Provision of the offer currently delivered by Connex Community through expanding the Early Help service to include integrated family peer support and activities for children and young people with ADHD and Autism.
6. The review of the following Unlocking Wellbeing Funding grants later in the year having considered the outcomes achieved.
  - Anthony Seddon
  - Diversity Matters NW
  - Infinity Initiatives
  - LGBT Foundation
  - Provider TBC
  - TOG MIND

**Financial Implications:  
(Authorised by the statutory  
Section 151 Officer & Chief  
Finance Officer)**

<b>Budget Allocation (if Investment Decision)</b>	
<b>CCG or TMBC Budget Allocation</b>	CCG budget allocation: £11.3m
<b>Integrated Commissioning Fund Section - s75, Aligned, In-Collaboration</b>	S75 & Aligned

<b>Decision Body – SCB Executive Cabinet, CCG Governing Body</b>	SCB – S75 £10.8m CCG GB - £0.5m
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**Value For money Implications – e.g. Savings Deliverable, Expenditure Avoidance, Benchmark**

**Additional Comments**

The proposals outlined in this report are aligned to the principles agreed by GM Chief Finance Officers and GM Directors of Commissioning. It is recognised that the objective of the proposals is to facilitate stability and continuity of provision of essential health care services following the dissolve of CCGs at 31 March 2022; furthermore, this will allow a period for the GM ICS to embed and mature. However, it is important to note that the contracts/grants outlined in the report are based on current levels of activity and costs. The CCG must reserve the right to change course should there be any material change in activity/cost prior to finalising contract variations (eg. Ophthalmology services assigned to Practice Plus) to ensure minimal financial risk.

**Legal Implications:  
(Authorised by the Borough  
Solicitor)**

The report sets out that the principles behind these proposals have already been agreed by the Chief finance and commissioning officers and so it is expected that these recommendations will not have any adverse impact either on service delivery and value for money especially when considered in the context of the transfer to the Integrated Care Board.

As set out in the report extending contracts be it by way of modification of existing contracts or a direct award where the current contract is due to expire carries with it a risk of challenge. That challenge should be mitigated as far as possible and also be managed closely. Therefore the project officers need to ensure that they continue to work closely with STAR throughout this process and alert STAR to any potential issues at the earliest opportunity.

**How do proposals align with  
Health & Wellbeing Strategy?**

The commissioning intentions will ensure that the local population continue to receive appropriate care during the NHS reconfiguration.

**How do proposals align with  
Locality Plan?**

All services are providing care in line with the Locality Plan and the commissioning intentions will allow time for the Locality Plan to be refreshed as part of the planning for the ICS.

**How do proposals align with  
the Commissioning Strategy?**

The Commissioning Strategies for the GM and Derbyshire ICSs is not yet in place and the commissioning intentions ensure that the integrity of services from the Tameside & Glossop Commissioning remains in place until the ICS strategies are produced.

**Recommendations / views of  
the Health and Care Advisory  
Group:**

The report has been to the NHS Tameside and Glossop CCG Audit Committee who considered the content and supported the recommendations set out in the report with the proviso that

all quality and financial monitoring remains in place to ensure rigor in the ongoing contract management

**Public and Patient Implications:**

The commissioning intentions ensure no break in provision for the population of Tameside and Glossop during and immediately after the formation of the Greater Manchester and Derbyshire Integrated Care System (ICS).

**Quality Implications:**

All contracts will continue to be managed in line with their quality expectations.

**How do the proposals help to reduce health inequalities?**

The commissioning intentions ensure no break in provision for the population of Tameside and Glossop and provides time for further service redesign focussed on reducing inequalities and 'Building Back Fairer'.

**What are the Equality and Diversity implications?**

The commissioning intentions provide time for further service redesign focussed on ensuring equitable services.

**What are the safeguarding implications?**

All contracts will continue with the monitoring of safeguarding as per the contract.

**What are the Information Governance implications? Has a privacy impact assessment been conducted?**

There is no change to Information Governance so no Privacy Impact Assessment has been conducted.

**Risk Management:**

The risk of procurement challenge has been considered at a GM level when developing the GM Contracting Principles and at a Tameside and Glossop level. Advice has been sought from The Head of Market Management at GMSS, the NHS E/I NW Director of Finance and STAR Procurement. All concluded that the extension would be a sensible approach and the risk of procurement challenge was minimal.

Overall, it was felt that procuring contracts at this stage would not be efficient way of working and would provide some risk to the ongoing conversations regarding Integrated Care Systems and their functionality.

**Access to Information:**

The background papers relating to this report can be inspected by contacting the report writers

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## 1. INTRODUCTION

- 1.1 The Health and Care Bill 21-22 <https://bills.parliament.uk/bills/3022> progressing through parliament introduces new measures to promote and enable collaboration in health and care. Including the establishment of Integrated Care Boards which repurpose existing Clinical Commissioning Group (CCGs) leading to their formal abolition (section 14Z27) and the transfer of responsibilities to the ICB.
- 1.2 The White Paper, 'Working together to improve health and social care for all' that set out legislative proposals for the Health and Care Bill <https://www.gov.uk/government/publications/working-together-to-improve-health-and-social-care-for-all> included the expectation that the NHS and local authorities will be given a duty to collaborate with each other through a statutory Integrated Care Systems (ICSs) comprising of an ICS Health and Care Partnership - bringing together the NHS, local government and partners, and an ICS NHS Body. The ICS NHS body will be responsible for the day-to-day running of the ICS, while the ICS Health and Care Partnership will bring together systems to support integration and develop a plan to address the systems' health, public health, and social care needs.
- 1.3 The principle that coterminous boundaries deliver clear benefits in integration between local authorities and NHS organisations underpinned the proposals. Around 70% of ICSs were already coterminous with upper-tier local authority boundaries however, Greater Manchester was one of those that was not as Tameside and Glossop CCG includes people under Derbyshire County Council. The Integrated care systems boundaries review: decision summary published on 22<sup>nd</sup> July <https://www.gov.uk/government/publications/integrated-care-systems-boundaries-review-decision-summary> confirmed the intention to move the area of Glossop from Greater Manchester ICS into Derbyshire ICS.
- 1.4 NHS Tameside and Glossop CCG (T&G CCG) have a number of contracts that ensure that the local population have access to NHS services with 31 expiring in 21/22, 10 in 22/23, and 14 after March 2024. Maintaining access to services for our population as the Health and Care bill is enacted is essential.
- 1.5 This paper sets out the plans for NHS Tameside and Glossop contracts in the context of the formation of the Greater Manchester and Derbyshire ICS.

## 2. LOCAL CONTEXT

- 2.1 Greater Manchester CCG Chief Finance Officers and Directors of Commissioning have approved the following principles (**Appendix 1**) to ensure consistency in approach across Greater Manchester (GM) CCGs as we prepare for the formation of the GM Integrated Care System:
  - Consolidation of contracting and finance payment for each NHS and acute Independent Sector (IS) provider for 22/23.
  - Locality level decisions remain or Continuing Healthcare and Primary Care providers with contracts such as GMS, PMS and APMS.
  - Extension of VCSE contracts for maximum extension period of up to three years (to 31/03/25).
  - Extension of other IS contracts including Primary Care contracts other than those in 2.1.2, to a maximum extension of two years (to 31/03/24). In addition, where a contract has associates or there are numerous contracts with the same provider, a Lead commissioner will take control of all payments on behalf of GM commissioners and contracting issues. The GM Contracting Review group will recommend to CCG Chief Finance Officers which contracts can be consolidated from 22/23.

- 2.2 The Head of Market Management at GMSS reviewed the proposals and advised that despite there being a green paper regarding Transforming Public Procurement, which is looking to simplify processes and requirements for the NHS, it still remains under the rules and framework of public contract regulations. Therefore any proposals have to be agreed through appropriate governance, appropriate due diligence should have taken place and an audit trail of decisions documented which can justify the decision would be in the interest of the population.
- 2.3 The proposals have been discussed with NHS E/I NW Director of Finance who endorsed the pragmatic approach extending contracts where appropriate but in doing so, not committing one-off resources funding that we won't have available to us in the future. In addition, the need to be confident we wouldn't come under a considerable challenge from other providers by doing this was highlighted.
- 2.4 GMSS / SBS have supported many GM CCGs to directly award and also to extend contracts with incumbent providers, with no challenges being received so the proposal for these providers is deemed as low risk of challenge. Also the latest procurement policy (PPN-1120) permits lawful excluding of bidders to those within a locality for below threshold procurements; which will typically touch other IS contracts.
- 2.5 Star Procurement have provided the following advice:
- 2.5.1 Tameside and Glossop CCG has taken into consideration both the future of Integrated Health Systems and the most recent NHS White Paper to support integration and innovation for Health Services from April 2022 and beyond. The nature of Clinical Commissioning Groups beyond April 2022 therefore procuring contracts at this stage would not be efficient way of working and would provide some risk to the ongoing conversations regarding Integrated Care Systems and their functionality.
- 2.5.2 As part of the Health and Care Bill, a new provider selection regime has been introduced. One of those provider selection approaches is to continuation of existing arrangements. Taking into account these two factors, there is low risk of challenge and the continuation of these contracts reduces the risk to both the CCG and Contracts.
- 2.6 The arrangements for contracting services for the population of Glossop will become clearer once discussions have taken place with Derbyshire ICS. At this stage, contracts will continue to be managed in the same way but this may change after April 2022.

### **3. CURRENT CONTRACTS**

- 3.1 The following contracts are subject to GM principles - 2.1.3 (VSCE) and 2.1.4 (IS) above.
- 3.2 Table 1 includes the contracts that NHS Tameside and Glossop CCG hold independently that are due to end before 2024/25. They are relatively equally split with eight being with IS and six with VCSE providers. The majority were extended in 20/21 and are due to end 31st March 22 so do not have an option to extend however; one IS and two of the VSCE contracts have a extension options.

<b>Table 1 Contracts held Independently</b>					
<b>Provider name</b>	<b>Service</b>	<b>Funding Type and Annual indicative value</b>	<b>End date</b>	<b>Option to Extend</b>	<b>Category VSCE or IS</b>
Diagnostic Healthcare Ltd	DEXA Scanning	Cost per Case National Tariff	31/03/2022	No	IS
Docobo Ltd	Supply of doc@HOME telehealth infrastructure	Block £92,389.12 plus VAT	28/02/2024	Yes	IS
Manor House Surgery	BCC - Skin Cancer & Dermatology	Cost per Case Local Tariff	31/03/2022	No	IS
Pioneer Healthcare Ltd	Nerve conduction studies	Cost per Case Local Tariff	31/03/2022	No	IS
Practice Plus Group	Ophthalmology Services	Cost per Case mix of local and National Tariff	31/03/2022	No	IS
Primary Eyecare Services Limited	Community Optometry	Cost per Case GM Tariff	31/03/2022	No	IS
Ross Care	Wheel Chair services	Block £533,798	31/03/2022	No	IS
Stamford House Medical Centre	Vasectomy	Cost per Case Local Tariff	31/03/2022	No	IS
Big Life	Neighbourhood Mental Health Team	Block £453,689	31/09/2022	Yes (2 years)	VCSE
Richmond Fellowship	Provision of twenty four (24) hour supported accommodation to adults	Block £695,637	31/03/2022	Yes (2 years)	VCSE
Stroke Association	A Stroke Recovery Information, advice and support service	Block £119,472	31/03/2022	No	VCSE
Hyde Physiotherapy Centre	Physiotherapy	Cost per Case Local Tariff	31/03/2022	No	VSCE



Marie Curie	Specialist palliative nursing care for patients in the end of life stage	Cost per Case Local Tariff £45,675	31/03/2022	No	VSCE
Willow Wood	Hospice services	Block £693,490	31/03/2022	No	VSCE

3.3 Table 2 shows the grants that NHS Tameside and Glossop CCG have awarded directly that are due to end before 2024/25.

<b>Table 2 Grant Awards</b>				
<b>Provider name</b>	<b>Service</b>	<b>Annual value</b>	<b>End date</b>	
42nd Street	Young people's therapeutic support	£33,630	30/11/2021	
42nd Street	Mental Health Provision in Schools	£28,000	31/08/2022	
Action Together (Miles of Smiles)	Volunteer Car Scheme	£46,000	31/03/2023	
Age UK	Serious Mental Illness step down	£108,040	31/03/2022	
Anthony Seddon Fund	CYP Drop in	£6,114	30/11/2021	
Connex Community	Carers respite service	£96,350	31/03/2022	
Francis House Family Trust	Contribution cost to a children's hospice	£16,360	31/03/2023	
High Peak CVS	Support of Community groups	£10,721	31/03/2022	
Home-Start HOST	Parent Infant Mental Health Service and Dads Matter	£64,269	31/03/2022	
Infinity Initiatives CIC	LLW Informal Support	£21,000	31/03/2022	
Off The Record	CYP Drop in	£16,116	30/11/2021	
Off The Record	Mental Health Provision in Schools	£56,000	31/08/2022	
PC Refurb	IT equipment to enable therapy	£20,000	31/03/2022	
The Anthony Seddon Fund	LLW Informal Support	£83,000	31/03/2022	
The Bureau	Volunteer Car Scheme	£16,032	31/03/2022	
The Bureau	LLW Informal Support	£20,000	31/03/2022	
The Worry Wizard	Mental Health Provision in Schools	£10,000	31/08/2022	
TOG MIND	Mental Health Provision in Schools	£56,000	31/08/2022	

TOG MIND – The Hive	CYP Drop in	£26,608	30/11/2021
The Anthony Seddon Fund	MH Crisis Drop-In	£9,224	31/08/2021
Action Together	Commissioning Infrastructure Programme	£35,000	31/03/2022

3.4 Table 3 shows the grants that NHS Tameside and Glossop CCG are in the process of awarding that are due to end before 2024/25.

<b>Table 3 Grant Awards in process</b>			
<b>Provider name</b>	<b>Service</b>	<b>Annual value</b>	<b>End date</b>
LGBT Foundation	Unlocking Wellbeing Funding	£20,000	09/05/2022
Diversity Matters NW	Unlocking Wellbeing Funding	£20,000	09/05/2022
Provider TBC	Unlocking Wellbeing Funding	£20,000	09/05/2022
Infinity Initiatives	Unlocking Wellbeing Funding	£40,000	09/05/2022
TOG MIND	Unlocking Wellbeing Funding	£55,000	09/05/2022
Anthony Seddon	Unlocking Wellbeing Funding	£45,000	09/05/2022

3.5 Table 4 includes the contracts that NHS Tameside and Glossop CCG hold on behalf of ourselves and other CCGs or commissioners. This excludes Direct Access Head and Neck MRI contracts that were re-procured and the new providers start 1 October 2021.

<b>Table 4 Contracts held on behalf of Ourselves and Other CCGs or Commissioners</b>					
<b>Provider name</b>	<b>Service</b>	<b>Funding Type and Annual indicative value</b>	<b>End date</b>	<b>Option to Extend</b>	<b>Category VSCE or IS</b>
Connect Health	MSK, ENT and direct access full body scans	Cost per Case mix of local and National Tariff	31/03/2022	No	IS
Silver Cloud (for Greater Manchester)	Digital Mental Health Platform providing Online Cognitive Behavioural Therapy (iCBT) for Greater Manchester	Block £532,096	31/03/2022	Yes	IS

3.6 Table 5 includes contracts where NHS Tameside and Glossop CCG are an associate. This excludes Direct Access NOUS and Adult Hearing contracts that were re-procured and the new providers start 1 October 2021.

<b>Table 5 Contracts where NHS Tameside and Glossop CCG are an associate</b>					
<b>Provider name</b>	<b>Service</b>	<b>Funding Type and Annual indicative value</b>	<b>End date</b>	<b>Option to Extend</b>	<b>Category VSCE or IS</b>
Transport for Sick Children	Transport	£9,250	31/03/2022	No	VSCE
British Pregnancy Advice Service	TOPS	Cost Per Case	31/03/2022	No	IS
Care Fertility Manchester	Fertility services	Cost Per Case	31/01/2023	Yes	IS
Create	Assisted Conception	Cost Per Case	31/01/2023	Yes	IS
NUPAS	TOPS and Vasectomy	Cost Per Case	31/03/2022	No	IS
Marie Stopes International	TOPS and Vasectomy	Cost Per Case	31/03/2022	No	IS
Morelife UK Limited	Adult Specialist Weight Management Service	Block £240,767	31/09/2022	Yes	IS
LANCuk (Learning, Assessment and Neurocare Centre Limited)	ADHD Waiting List	Block £180,000	31/03/2022	No	IS

3.7 Table 6 includes contracts, which are due to expire after March 24 and so will remain in place and be reviewed by the ICS.

<b>Table 6 Contracts due to expire after March 2024</b>					
<b>Provider name</b>	<b>Service</b>	<b>Funding Type and Annual indicative value</b>	<b>End date</b>	<b>Option to Extend</b>	<b>Category VSCE or IS</b>
Broomwell Healthwatch Limited	ECG monitoring 12 Lead and 24hr	Cost per Case Local Tariff	30/09/2024	Yes	IS
Baywater Healthcare UK Limited	Provision of Oxygen	Cost Per Case	03/10/2027	Yes	IS
Physiological Measurements Ltd Yorkshire Health Solutions	Direct Access Non- Obstetric Ultrasound	Cost per Case Local Tariff	01/10/21 to 30/09/24	Yes (2 years)	IS

Beacon Medical Services Group Complete Price Eyewear Ltd (The Outside Clinic) Manchester University NHS Foundation Trust Mediscan Diagnostics Services Ltd Salford Royal Foundation Trust Scrivens Ltd Specsavers Hearcare Group Ltd Tameside and Glossop Integrated Care NHS Foundation Trust	AQP Adult Hearing	Cost per Case Local Tariff	01/10/21 to 30/09/24	Yes (2 years)	IS and NHS
Beacon Medical Services Group Diagnostics Healthcare Ltd	Direct Access Head and Neck MRI	Cost per Case Local Tariff	01/10/21 to 30/09/24	Yes (2 years)	IS

#### 4. PROPOSED COMMISSIONING INTENTIONS

- 4.1 The following commissioning intentions ensure we align with the GM principles and maximise the opportunities for ICS level and Place based planning and service redesign.
- 4.2 Extend all contracts with IS providers in Table 1 and Connect Health in Table 4 for two years to end on 31st March 2024.
- 4.3 Discuss with GM CCGs the requirement to extend Sliver Cloud (in Table 4) on behalf of GM.
- 4.4 Extend all contracts with VCSE providers in Table 1 for three years to end on 31st March 2025.
- 4.5 Extend the following grants from Table 2 for three years to end on 31st March 2025.

Provider name	Service	Annual value	End date
The Bureau	Volunteer Car Scheme	£16,000	31/03/2022
Action Together (Miles of Smiles)	Volunteer Car Scheme	£46,000	31/03/2023
Francis House Family Trust	Contribution cost to a children's hospice	£16,360	31/03/2023
High Peak CVS	Support of Community groups	£10,721	31/03/2022
Action Together	Commissioning Infrastructure Programme	£35,000	31/03/2022
Home-Start HOST	Parent Infant Mental Health Service and Dads Matter	£64,296	31/03/2022

- 4.6 Extend Age UK Serious Mental Illness Step Down by one year to 31/3/23 as this will enable time for the coproduction of provision to meet the needs of older people with mental health needs within Living Life Well developments in line with the Community Mental Health Framework.
- 4.7 The contract terms for all those contracts being extended will remain the same although it is recognised there may be a requirement to make changes in the future once ICS arrangements are clearer.
- 4.8 End the following grants from Table 2 at the end of contract as they have been superseded by a tender for an integrated service

Provider name	Service	Annual value	End date
42nd Street	Young people's therapeutic support	£47,670	30/11/2021
Anthony Seddon Fund	CYP Drop in	£6,114	30/11/2021
Off The Record	CYP Drop in	£16,116	30/11/2021
TOG MIND - The Hive	CYP Drop in	£25,608	30/11/2021

- 4.9 End the following grants from Table 2 at the end of contract as funding is non-recurrent or funded by Greater Manchester as indicated by \*.

Provider name	Service	Annual value	End date
42nd Street	Mental Health Provision in Schools*	£28,000	31/08/2022
Off The Record	Mental Health Provision in Schools*	£56,000	31/08/2022
The Worry Wizard	Mental Health Provision in Schools*	£10,000	31/08/2022
TOG MIND	Mental Health Provision in Schools*	£56,000	31/08/2022
PC Refurb	IT equipment to support therapy	£20,000	31/08/2022

- 4.10 Redirect funding from the following grant to establish an integrated Early Help family peer support and activity offer for children and young people with autism and ADHD. Families have benefitted from the service and the need for early support to families where children have additional needs and require support to enable the family to access mainstream provision remains. However, the provider has struggled to deliver the core offer due the complexities of providing appropriate staffing at the times families need it and the challenges of providing a small service from a distance.

Provider name	Service	Annual value	End date
Connex Community	Carers respite service (winding down from Sept 2021)	£96,350	30/09/21

- 4.11 End the following grants from Table 2 at the end of contract as services are currently being reviewed and it is anticipated they will be replaced by a different service.

<b>Provider name</b>	<b>Service</b>	<b>Annual value</b>	<b>End date</b>
Infinity Initiatives CIC	LLW Informal Support	£21,000	31/03/2022
The Anthony Seddon Fund	LLW Informal Support	£83,000	31/03/2022
The Bureau	LLW Informal Support	£20,000	31/03/2022
The Anthony Seddon Fund	MH Crisis Drop-In	£9,224	31/08/2021

4.12 Consider the grants in Table 3, which are in the process of being awarded later in the year once outcomes have been considered.

## **5. CONCLUSION**

5.1 The contract extensions and existing planned procurements will ensure that people registered with a GP in NHS Tameside and Glossop CCG will continue to be able to access services whilst Greater Manchester and Derbyshire ICSs agree the way forward and plan the longer-term arrangements for the commissioning of services.

5.2 During the lifetime of the extension variation may be required to accommodate changes required due to the transfer of responsibility for the Glossop registered population or new arrangements in the way contracts are held in Greater Manchester ICS.

## **6. RECOMMENDATIONS**

6.1 As set out at the front of the report.