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Contract

NHS SY ICB - SYB Cancer Alliance - Lung Cancer Screening

NHS South Yorkshire Integrated Care Board

F03: Contract award notice

Notice identifier: 2026/S 000-011865

Procurement identifier (OCID): ocds-h6vhtk-064c81

Published 10 February 2026, 1:12pm

Section I: Contracting authority

I.1) Name and addresses

NHS South Yorkshire Integrated Care Board

197 Eyre Street

Sheffield

S1 3FG

Contact

Procurement department

Email

syicb.procurement@nhs.net

Country

United Kingdom

Region code

UKE32 - Sheffield

Internet address(es)

Main address

<https://www.southyorkshire.icb.nhs.uk/>

Buyer's address

<https://www.southyorkshire.icb.nhs.uk/>

I.4) Type of the contracting authority

Body governed by public law

I.5) Main activity

Health

Section II: Object

II.1) Scope of the procurement

II.1.1) Title

NHS SY ICB - SYB Cancer Alliance - Lung Cancer Screening

II.1.2) Main CPV code

- 85148000 - Medical analysis services

II.1.3) Type of contract

Services

II.1.4) Short description

SY ICB are looking to re-new an existing service which is already commissioned across South Yorkshire and Bassetlaw. The SYB Lung Cancer Screening programme has been operational since March 2021, so has made great strides towards 100% roll out. As an established programme, we are now having to factor in second, third and potentially fourth screening rounds ahead of the transition to becoming a national screening programme (timeline tbc).

II.1.6) Information about lots

This contract is divided into lots: No

II.1.7) Total value of the procurement (excluding VAT)

Value excluding VAT: £4,895,600

II.2) Description

II.2.3) Place of performance

NUTS codes

- UKE3 - South Yorkshire

Main site or place of performance

South Yorkshire

II.2.4) Description of the procurement

SY ICB are looking to re-new an existing service which is already commissioned across South Yorkshire and Bassetlaw. The SYB Lung Cancer Screening programme has been operational since March 2021, so has made great strides towards 100% roll out. As an established programme, we are now having to factor in second, third and potentially fourth screening rounds ahead of the transition to becoming a national screening programme (timeline tbc). Incident scans and nodule surveillance scans beyond 24mths were not a consideration when our services were first commissioned, nor is there much in the way of national guidance to support this, but we have a duty of care to our eligible population to continue screening them every two years while ever they meet the eligibility criteria. This service must be delivered in conjunction with existing services within SY ICB to allow for the best use of resources for SY ICB while ensuring equality of all patients included in the programme both previously and currently.

NHS SY ICB are intending to award a contract an existing provider following Direct Award Process C

The lifetime value of the contract is expected to be £4,895,600

The dates between which the contract will run from are: 1st April 2026 – 30th Sept 2028

Key Criteria 1 - Quality & Innovation. - Weighting 30%

The purpose of continuing care for all original screening cohorts is to promote health inequalities and demonstrate SY ICB's commitment to deliver on national guidance to ensure all those eligible are receiving lung health checks. The provider must be able to fit into and extend the current commissioned services to ensure best use of resources by filling current scanner appointments, while ensuring original cohorts are invited to attend in line with these already established locations and processes.

Key Criteria 2. - Weighting 30%

SY ICB are aiming to ensure that the commissioning of continued care in the form of regular incident scans, is done in the most cost-effective manner, enabling the best use of resources for the organisation.

In order to achieve this SY ICB are looking to commission this service to merge with existing resources to reduce the financial and resourcing impact while enabling us to maintain the offer of LCS to all who are eligible on a rolling basis. It is imperative that this service is provided by an existing provider in this space to avoid the need for duplication of resources and thus cost to SY ICB while ensuring that all patients undertaking a LCS are treated the same and placed on the already established pathways.

Key criteria 3 - Integration, collaboration and service sustainability - Weighting 10%

Our decision to extend this service is influenced by the NHSE Standard Protocol for LCS which states: '..repeat scan every 2 years until no longer eligible by age or other exclusion criteria'. As an organisation we remain committed to upholding this obligation, given that these patients have already been assessed as high risk of developing lung disease including lung cancer and their risk will only increase with age. Screening provides the best chance of finding the disease early. This ambition is reflected within the NHS Long Term Plan to diagnose 3 out of 4 people with cancer at the early stage by 2028.

Using the current service would improve the sustainability of the new service by allowing operational flexibility, patient flexibility and minimising time and operational costs for the provider to ensure the best value and service for patients.

See section II.2.14.1 - Additional information for the remaining Key Criteria

II.2.5) Award criteria

Quality criterion - Name: The existing provider is satisfying the original contract and will likely satisfy the proposed contract to a sufficient standard. / Weighting: 100

Cost criterion - Name: Cost / Weighting: 0

II.2.11) Information about options

Options: No

II.2.13) Information about European Union Funds

The procurement is related to a project and/or programme financed by European Union funds: No

II.2.14) Additional information

Key criteria 4 - Improving access, reducing health inequalities and facilitating choice - Weighting 20%

While the initial rollout of SY ICB's LCS programme was planned to target, cover and provide for those experiencing greater health inequalities while promoting choice and access, it has been recognised that this can be expanded further in the five years the programme has been running. As an organisation we were aware via the Standard Protocol of our obligation to ensure all participants receive at least two LDCT screening round scans (baseline or 24 month scan) before exiting the programme, but we hadn't factored into trajectories or contracts, those patients who might qualify for more than two LDCT screening rounds and now better understand the quantity of these patients. We have now refined accessibility to the service through working with the current provider and their sub-contractors which allows us to target the specific cohorts in question to reduce non-attendance.

Key criteria 5 - Social Value - Weighing 10%

The purpose of this project is wholly based on improving patients access to care, early diagnosis and reducing health inequalities. Specifically, this extension to the LCS programme will further ensure equal opportunity is met as we seek to proactively diagnose early-stage cancer in all patients in a mobile setting. This early diagnosis outcome will also result in a general improvement for wellbeing for those effected as they will either be placed on the appropriate pathway for the care they need or advised of a nil finding despite being eligible due to the risk factors. As this service is mobile in nature and commissioned on a basis in which the existing provider will attend multiple sites at different times this will allow patients to attend appointments that most suit their location, reducing their travel time and increasing uptake by offering them convenience.

Section IV. Procedure

IV.1) Description

IV.1.1) Type of procedure

Award of a contract without prior publication of a call for competition in the cases listed below

- The procurement falls outside the scope of application of the regulations

Explanation:

This is a Provider Selection Regime (PSR) intention to award notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Public Contracts Regulations 2015 do not apply to this award. The publication of this notice marks the start of the Standstill Period. Representations by providers must be made to the relevant authority by midnight on 20/02/2026. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR'.

IV.1.8) Information about the Government Procurement Agreement (GPA)

The procurement is covered by the Government Procurement Agreement: No

Section V. Award of contract

A contract/lot is awarded: Yes

V.2) Award of contract

V.2.1) Date of conclusion of the contract

5 February 2026

V.2.2) Information about tenders

Number of tenders received: 1

The contract has been awarded to a group of economic operators: No

V.2.3) Name and address of the contractor

Alliance Medical Ltd

Warwick

CV34 5AH

Country

United Kingdom

NUTS code

- UK - United Kingdom

The contractor is an SME

No

V.2.4) Information on value of contract/lot (excluding VAT)

Initial estimated total value of the contract/lot: £4,895,600

Total value of the contract/lot: £4,895,600

Section VI. Complementary information

VI.3) Additional information

This is a Provider Selection Regime (PSR) intention to award notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Procurement Act 2024 do not apply to this award. The publication of this notice marks the start of the Standstill Period. Representations by providers must be made to decision makers by midnight on 20/02/2026. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR.

Written representation should be may, via email to - syicb-sheffield.syicb.procurement@nhs.net

The award of this contract has been approved by the NHS SY ICB - Informal Executive Group during a meeting on 05/02/2026.

No conflicts of interest were declared.

Please see sections II.2.4.1 & II.2.14.1 for details of key criteria that the relevant authority used to make a decision, the rationale for the relative importance of the key criteria, and the rationale for choosing the provider with reference to the key criteria.

VI.4) Procedures for review

VI.4.1) Review body

NHS England

Wellington House, 133-135 Waterloo Rd

London

SE1 8UG

Email

england.commercialqueries@nhs.net

Country

United Kingdom

Internet address

<https://www.england.nhs.uk/>