

Invitation to tender

Evidence review and deliberative workshop(s) to scope one or more research questions about greenspace, blue space or other public space

28 October 2019

Prepared by

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Deadline date: 13:00, 19 November 2019

Attached documents include

- Sample contract
- Sample tender response form
- AIMS user guide

1.0 Summary

The Health Foundation is seeking a supplier to do an expedited evidence review and design, organise and run one or more deliberative workshops to identify research questions on the topic of 'greenspace, blue space or other public space' in relation to health and health inequalities (see box 1). We are particularly interested in the scale and impact of reduction in community assets, although scoping should not be restricted to this subject.

The work will involve doing an expedited evidence review of greenspace, blue space and other public space in relation to health and health inequalities. The review should include evidence around community assets and related health issues. We would like the supplier to produce a concise stakeholder briefing written in plain English summarising the expedited evidence review to inform a diverse range of stakeholders about the evidence base.

The work will also involve designing, organising and running one or more deliberative workshops with a diverse range of stakeholders to identify one or more relevant, answerable research questions within the topic of greenspace, blue space or other public space. The aims and objectives, methods, findings and recommendations of the work should be reported in a clear and concise slide-deck ('final report').

The results of this work will help us develop a research commission on the topic of greenspace, blue space and other public space as part of a wider programme of research commissions on public health topics, aiming to inform public health practitioners and policymakers about pressing public health issues and/or the action needed to address them.

This work is being commissioned through an open tendering process. The successful team will be appointed in late November 2019, ideally with the ability to start soon afterwards.

We want the expedited evidence review and a draft stakeholder briefing to be completed in late January/early February 2020, the deliberative workshop(s) to be completed in late February 2020 and the final report to be delivered in March 2020. We will agree the exact dates with the chosen supplier and we are willing to negotiate the timeline if necessary.

We anticipate bids for the full piece of work of **up to £35,000 (inclusive of VAT and expenses)**. Applicants are also allowed to present options for additional activities that would require an increased budget (e.g. extra workshops) if they explain how the proposed options would add value.

Applicants must complete their application on an online portal called AIMS (aims.health.org.uk). Please familiarise yourself with AIMS as quickly as possible, as we may not be able to respond in a timely fashion to any technical queries as the deadline for application nears.

The deadline to submit proposals is 13:00 on 19 November 2019.

Box 1: definitions of greenspace, blue space, other public space and community assets

| | |
|---------------------------|---|
| Greenspace | <p>In urban areas, greenspace includes:</p> <ul style="list-style-type: none">• Formal greenspace – parks and gardens.• Natural and semi-natural greenspace – woodland, heath, wetlands, wasteland and derelict land being reclaimed by nature.• Green corridors – canals, streams, cycle-ways, old railways, lanes and hedges.¹ <p>‘Accessible’ greenspace is located close to residents’ homes, easy to walk to, physically accessible, safe to use and provides well-maintained facilities.²</p> |
| Blue space | <p>Blue spaces are areas near to or adjacent to water, including:</p> <ul style="list-style-type: none">• rivers, brooks or canals• lakes, reservoirs or ponds• marshes, estuaries and coastline (some studies include these in the definition).¹ |
| Other public space | <p>We consider other public spaces to be areas or places that are generally open and accessible to all people.³ Other public spaces may be indoor or outdoor and publicly or privately owned.</p> <p>Examples of other public spaces include:</p> <ul style="list-style-type: none">• high streets• street markets• shopping centres• community centres• libraries• parks• playgrounds• neighbourhood spaces in residential areas.⁴ |
| Community assets | <p>A community asset is anything that improves the quality of community life.⁵ We consider ‘community asset’ to mean buildings or spaces, such as:</p> <ul style="list-style-type: none">• schools• hospitals• libraries• community centres |

¹ Morton S, ‘Public health matters: green space, mental wellbeing and sustainable communities’ (Public Health England, 2016).

² Balfour R, Allen J, ‘Local action on health inequalities: Improving access to green spaces’ (Public Health England, 2014).

³ UNESCO, ‘Inclusion through access to other public space’ (online).

⁴ Worpole K, Knox K, ‘The social value of other public spaces’ (Joseph Rowntree Foundation, 2007).

⁵ UCLA Centre for Health Policy Research, ‘Asset mapping’ (UCLA, 2004).

- parks.

This may or may not include buildings or spaces registered as Assets of Community Value under the Localism Act 2011.

2.0 About us

The Health Foundation is an independent charity committed to bringing about better health and health care for people in the UK.

Our aim is a healthier population, supported by high quality health care that can be equitably accessed. We learn what works to make people's lives healthier and improve the health care system. From giving grants to those working at the front line to carrying out research and policy analysis, we shine a light on how to make successful change happen.

We make links between the knowledge we gain from working with those delivering health and health care and our research and analysis. Our aspiration is to create a virtuous circle, using what we know works on the ground to inform effective policymaking and vice versa.

We believe good health and health care are key to a flourishing society. Through sharing what we learn, collaborating with others and building people's skills and knowledge, we aim to make a difference and contribute to a healthier population.

3.0 Background to the wider research programme

The Health Foundation wants a better evidence base for decision-making on what works to improve people's health through action on the wider determinants of health: the social, economic, environmental and commercial factors that shape people's opportunities to live healthy lives. Currently, action and policymaking can be inhibited by a lack of evidence, inaccessible evidence or contested views as a result of either. As an independent organisation, we can contribute robust, independent and timely evidence to inform policy and practice, and surface important topics for further debate, funding or research.

As part of the Health Foundation's Healthy Lives Strategy,⁶ the wider research programme aims to identify and address evidence gaps on pressing public health issues across the wider determinants of health, to inform public health practitioners and policymakers about the issues and/or actions that are needed to address them. This will be achieved through a series of research commissions to build robust, independent evidence on topics related to the wider determinants of health.

This invitation to tender is for scoping work to review existing evidence and carry out one or more deliberative workshops to inform the development of a research commission on greenspace, blue space or other public space.

⁶ The Health Foundation, 'Healthy Lives for people in the UK: introducing the Health Foundation's healthy lives strategy' (The Health Foundation, 2017).

3.1 Why greenspace, blue space or other public space?

In September, the Health Foundation conducted an online survey of public health professionals in the UK to identify priority research topics for this target audience. The rationale for choosing this audience was that, as specialists in improving health and health equity through action on the wider determinants of health, public health professionals would be able to identify areas in which better evidence could support better policy and/or practice across the wider determinants of health.

The following types of public health professional were invited to complete the survey:

- Directors of public health
- Public health consultants or consultant-level specialists
- Public health principals, practitioners, programme leads or managers
- Public health analysts or intelligence specialists
- Public health specialty registrars
- Other public health stakeholders

In the survey, respondents were asked to prioritise one or two categories of wider determinant of health⁷ and up to three topics within their chosen categories, based on their knowledge and experience, and our selection principles and scope (box 2). We also asked respondents to suggest specific research topics or questions if possible.

Box 2: selection principles and scope of research topics

The choice of research topic(s) will be guided by the following principles:

- important⁸ to the public health community
- contested or not being paid enough research attention elsewhere
- emergent or timely
- relevant to local areas and widespread across the UK.

We expect research projects we commission for the wider research programme will:

- last up to 12 months
- mainly involve secondary data analysis
- be amenable to analysing health equity and/or population health impacts
- be within a budget of £40,000–£100,000.

We received 74 complete responses to the survey, with diverse representation in terms of UK regions, job roles and types of organisation. The most popular wider determinant category was 'our surroundings', which relates to how places, spaces and buildings make people feel and the opportunities they provide. The most popular topic within this category

⁷ Choices of categories of wider determinant of health were: our surroundings; friends, family and community; food system; work; money and resources; education and skills; housing; transport; other (free text).

⁸ Based on the number of people affected, the equity impact or the quality of life impact

was 'greenspace, blue space or other public space'. Participants suggested several specific research issues and questions within this topic.

The internal project working group, comprising public health and research specialists, analysed the survey results and discussed them in relation to the selection principles and scope. The group selected 'greenspace, blue space or other public space' as the overarching topic to explore further through an expedited evidence review and deliberative workshop(s). Within this topic, one area we are particularly interested in exploring is the scale and impact of reduction in community assets.

4.0 Details of the work

4.1 Aim

To help the Health Foundation produce one or more relevant, answerable research questions on the topic of greenspace, blue space or other public space in relation to health and health inequalities in the UK. One issue we are particularly interested in is the scale and impact of reduction in community assets, although scoping should not be restricted to this subject.

4.2 Objectives

- A. Identify an appropriate number of stakeholders, representing a diverse range of sectors and experiences, to take part in one or more deliberative workshops on the topic of greenspace, blue space and other public space.
- B. Expeditedly review the evidence on the topic of greenspace, blue space and other public space in relation to health and health inequalities in the UK. The review should include evidence around community assets and related health issues.
- C. Produce a concise and relevant evidence briefing (or briefings), written in plain English, for the workshop participants. The purpose of the briefing(s) is to make sure that all participants have a shared document explaining the purpose of the workshop and summarising the evidence base.
- D. Organise and facilitate the deliberative workshop(s).
- E. Report the aims and objectives, methods, findings and recommendations of the work in a clear and concise slide-deck ('final report') for the programme steering group.

4.3 Approach

The Health Foundation plans to commission the supplier to deliver the objectives set out above (section 4.2). In this section we provide more information about the approach we would like the supplier to take for each objective.

| |
|---|
| A Identify an appropriate number and diversity of stakeholders to take part in one or more deliberative workshops on the topic of 'greenspace, blue space and other public space'. |
|---|

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|--|
| We expect a diverse range of stakeholders to take part in the workshop(s) including: |
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- | |
|--|
| <ul style="list-style-type: none">• Subject matter experts (academics) |
|--|

- Public health professionals
- Public health policymakers and/or policy ‘influencers’
- Topic-specific stakeholders (e.g. representatives from the Ordnance Survey or journalists)
- People who do not have specialist public health or research knowledge (‘the public’)

We are particularly keen to involve stakeholders from underrepresented groups and we expect applications to include details about how the supplier will recruit people from diverse backgrounds and sectors.

We will provide names and contact details of some individuals we specifically want to invite, but it will be the supplier’s responsibility to make contact and send invitations to all participants.

B Expediently review the evidence on the topic of greenspace, blue space and other public space in relation to health and health inequalities in the UK. The review should include evidence around community assets and related health issues.

The expedited review should be based primarily on relevant grey literature and to a lesser extent academic literature. We will give the supplier a literature search of relevant grey and academic literature at the project inception meeting (comprising no more than 50 sources).

C Produce a concise and relevant evidence briefing (or briefings), written in plain English, for the workshop participants.

The purpose of the briefing(s) is to make sure that all workshop participants, who should be from a diverse range of backgrounds, have shared knowledge and understanding of the evidence base. This will ensure all participants can meaningfully contribute to the deliberation, drawing on their own experience.

The supplier will have discretion over the content and structure of the evidence briefing(s).

D Organise and facilitate the deliberative workshop(s).

The purpose of the workshop(s) will be to discuss which issues within the topic of greenspace, blue space or other public space are most amenable to an answerable and useful research project that is in line with our selection principles and scope (box 1), and from this discussion produce one or more specific research questions of interest.

The supplier will have discretion over the organisation and delivery of the workshop(s) and should clearly set out their plan and rationale in their proposal. We want to hear how the supplier would run the workshop(s) based on their previous experience and the parameters of this project. For example, the tender response should cover issues such as the expected number of workshop participants and whether experts would be

mixed with non-specialists or whether separate workshops would be held for these two groups.

If required, the Health Foundation will offer our events space to hold the workshop(s) at no cost to the supplier.

E Report the aims and objectives, methods, findings and recommendations of the work in a clear and concise slide-deck ('final report') for the programme steering group.

We will provide feedback on the first draft of the report and the second draft if needed.

4.4 Working with us

The supplier's responsibilities

- We expect frequent updates from the chosen supplier and we will want to meet or speak with the chosen supplier regularly, but we will agree the frequency and nature of updates with the supplier at the inception meeting. Initially, we anticipate holding fortnightly project meetings either in person (at our offices) or via telephone/Skype. Any costs incurred for attending meetings should be factored into the budget.
- The supplier will be responsible for producing at least one evidence briefing to inform the workshop(s).
- The supplier will be responsible for establishing contact with potential participants, unless otherwise agreed.
- We anticipate the supplier will recruit a range of participants from key stakeholder groups including the public, national representative organisations (e.g. The National Trust, Ordnance Survey etc), charities and local community groups, policymakers and subject specialists.
- The supplier will be responsible for designing, managing and conducting the workshop(s), collating the findings, and summarising the findings and recommendations in a slide deck that will help the steering group decide which research question(s) to prioritise for the second stage of the process.
- We expect the supplier to set the findings in the context of our wider strategic narrative to help us develop the future direction and delivery of the wider research programme. We may also ask the supplier to present the findings to the programme steering group.
- Applicants are responsible for making sure their proposals make reasonable allowances for the time required to fulfil these obligations.

Our responsibilities

- We will work with the chosen supplier to confirm the design of the work before the work begins. The work will be overseen by a Research Manager, with content input provided by a strategic lead from the Health Foundation.

- At the inception meeting, we will provide the supplier with literature searches on greenspace, blue space and other public space in relation to health and health inequalities to enable the supplier to start collating evidence for the review.⁹
- We will work with the supplier to ensure the briefing is appropriate.
- We will work with the supplier to identify workshop participants.
- We will work with the supplier to agree the structure of the slide deck and provide feedback on drafts.

4.5 Intellectual property

In commissioning this work, the Health Foundation will own the intellectual property generated (please see the intellectual property clause in Schedule 6 of the sample contract).

5.0 Key dates and deliverables

| Milestone | Date |
|---|----------------------------------|
| Release of ITT | 28 October 2019 |
| Deadline for submissions | 19 November 2019 |
| Interviews and selection | 26–27 November 2019 |
| Project inception | 3 December 2019 |
| Deadline for expedited evidence review and draft stakeholder briefing | Late January/early February 2020 |
| Deliberative workshop(s) | Late February 2020 |
| Final report | March 2020 |
| Steering group meeting | March 2020 |

6.0 Costs

Responses to this ITT should include accurate pricing, inclusive of expenses and VAT. We will assess tender responses based on perceived quality of service and demonstrable ability to meet the brief, rather than lowest cost, but value for money is a selection criterion (see below).

Based on previous similar work commissioned by the Health Foundation, we anticipate bids up to a **maximum of £35,000 (inclusive of VAT and expenses)**. We will consider higher

⁹ The literature searches will be prepared by the Health Services Management Centre (HSMC) Library on our behalf.

bids if the applicant can demonstrate the value of additional activities that take the cost to over £35,000 (inclusive of VAT and expenses).

We will commission this research by issuing a contract for services and we expect VAT is likely to be payable on all aspects of the work. Please consult your contracting team or finance team to ensure that VAT has been included appropriately before submitting your proposal and budget.

7.0 Tender response requirements

Suppliers are requested to complete a tender response form on our online portal, AIMS (aims.health.org.uk). A PDF form is included as an example, but **do not** use this to submit your application – this can only be done online via AIMS.

You should be able to provide detailed information about your organisation, including:

- organisation name, address, registered address (if different) and website address
- description of the organisation's activities or services
- history and ownership
- organisational governance and management structure
- most recent company accounts

Your tender response must include:

- detailed information on your proposed approach
- a summary of the experience of the key staff who will be involved in the project
- costs, including a summary of the day rates and required days of those employed on the project, inclusive of VAT and expenses
- potential risks and your risk management approach
- any other relevant information the Foundation should consider
- the name of the primary contact and their contact details
- details of the team carrying out the work – names, roles and expertise relevant to the tender

In addition, you should be able to provide:

- client references that include a list of comparable organisations to which you have supplied a similar service and a brief project description for each.
- a statement of your willingness to reach a contractual agreement that is fair and reasonable to both parties.

8.0 Selection criteria

Responses will be assessed by the Health Foundation using the following criteria.

- Skills and expertise in delivering deliberative workshops
- Knowledge and awareness of the wider determinants of health and health inequalities
- Appropriateness of proposed methods
- Appropriate project management, risk management and quality assurance expertise

- Demonstrable capacity to deliver the research on time, on budget and to the required standard, with proven ability to flex resource capabilities and adapt to changing environments if necessary
- Ability to work collaboratively with a broad range of stakeholders, including members of the public who do not have specialist public health or research knowledge
- Strong communication skills
- Ability to travel to workshop sites
- Value for money

9.0 Selection process

Please complete the online tender response form on the AIMS system **by 13:00, 19 November 2019**.

Please read the AIMS user guide before starting to complete the form. This is available on our website and via the form on the AIMS system.

A response to your application will be made **by 22 November 2019**.

If you have any queries about the application process which are not addressed in this document, please email Hardeep Aiden (hardeep.aiden@health.org.uk) or Claire Greszczuk (claire.greszczuk@health.org.uk) in the first instance. We will try to reply within one working day, making sure that relevant information is shared with all applicants.

Interviews will be held on **26 or 27 November 2019** at the Health Foundation offices in Blackfriars.

It is important for suppliers to demonstrate that the right calibre of staff would be managing the project from the outset. Therefore, we would encourage you to make sure that the core project team members are available for interview if you are shortlisted.

The exact start date will be agreed following the final decision, but we are hoping to have an inception meeting with the chosen supplier on **3 December 2019**.

10.0 Other information

The Foundation reserves the right to adjust or change the selection criteria at its discretion. The Foundation also reserves the right to accept or reject any and all responses at its discretion, and to negotiate the terms of any subsequent agreement.

This ITT is not an offer to enter into an agreement with the Foundation, it is a request to receive proposals from third parties interested in providing the deliverables outlined. Such proposals will be considered and treated by the Foundation as offers to enter into an agreement. The Foundation may reject all proposals, in whole or in part, and/or enter into negotiations with any other party to provide such services whether it responds to this ITT or not.

The Foundation will not be responsible for any costs incurred by you in responding to this ITT and will not be under any obligation to you with regard to the subject matter of this ITT.

The Foundation is not obliged to disclose anything about the successful bidders, but will endeavour to provide feedback, if possible, to unsuccessful bidders.

Your bid is to remain open for a minimum of 180 days from the proposal response date.

You may, without prejudice to yourself, modify your proposal by written request, provided the request is received by the Foundation prior to the proposal response date. Following withdrawal of your proposal, you may submit a new proposal, provided it is delivered before the original proposal response date.

Please note that any proposals received which fail to meet the specified criteria contained in it will not be considered for this project.

11.0 Confidentiality

By reading/responding to this document you accept that your organisation and staff will treat information as confidential and will not disclose to any third party without prior written permission being obtained from the Foundation.

Suppliers may be requested to complete a non-disclosure agreement

12.0 Conflicts of interest

The Foundation's conflicts of interest policy describes how it will deal with any conflicts which arise as a result of the work which the charity undertakes. All external applicants intending to submit tenders to the Foundation should familiarise themselves with the contents of the conflicts of interest policy as part of the tendering process and declare any interests that are relevant to the nature of the work they are bidding for. The policy can be found and downloaded from the Foundation's website at the following location:

www.health.org.uk/about-us/.