

Evaluation partner for an NHS Anchors Learning Network

The Health Foundation is seeking a supplier to work with us on the evaluation of an NHS Anchors Learning Network in the UK.

Invitation to Tender, July 2020

Prepared by

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Deadline date: 12pm GMT, 3 September 2020

Attached documents include

- [Budget template](#)
- [Sample commission contract](#)
- [Sample tender response form](#)
- [AIMS user guide](#)

Summary

- 1.0 The Health Foundation and NHS England and NHS Improvement have been working together to design a joint programme of work, aimed at developing the NHS Anchors Learning Network.
- 1.1 The Network will aim to support NHS organisations to better understand their role as anchor institutions¹ as well as how they can use anchor approaches to take action to improve community health and wellbeing. The network will cover and include members from all four countries within the UK. It is anticipated that developing the capacity of NHS organisations will enhance the impact of the NHS on the wider determinants of health, narrow inequalities and improve population health.
- 1.2 The Health Foundation is seeking an evaluation partner to undertake a two-phased formative, independent evaluation of the NHS Anchors Learning Network. The first phase will be delivered over a four-month period from October 2020 and will entail scoping and designing a formative evaluation for the NHS Anchors Learning Network, while also capturing valuable learning for the Health Foundation and NHS England and NHS Improvement. The second phase will deliver the formative evaluation of the NHS Anchors Learning Network over a period of two years. The overall purpose of the evaluation is to provide feedback to the Health Foundation and NHS England and NHS Improvement on how the NHS Anchors Learning Network is meeting its objectives to inform the ongoing design and delivery of the Network. The evaluation will do this through capturing evidence of the learning and experience of those involved in the NHS Anchors Learning Network and assessing the progress of the programme against its underlying theory of change (Annex A). We wish to work with the same evaluation partner during both phases of the evaluation.
- 1.3 Through a separate process, the Health Foundation and NHS England and NHS Improvement are also commissioning a support partner to work with them over the two phases to lead on the design, development and delivery of the NHS Anchors Learning Network. The design phase will run from October 2020 until January 2021. Following the design phase, the NHS Anchors Learning Network will be delivered over a two-year period from early 2021.
- 1.4 As background, the Health Foundation and NHS England and NHS Improvement teams held a workshop to consider their priority objectives for the NHS Anchors Learning Network. The three objectives that emerged were:
 - to build skills and capability within members to support them to embed anchor approaches, build local partnership across sectors, and develop technical, delivery and evaluation expertise.

¹ Anchor institutions are large, public sector organisations that are called such because they are unlikely to relocate and have a significant stake in a geographical area – they are effectively ‘anchored’ in their surrounding community.

- to support a change in practice among members and increase the adoption of anchor practices, such as widening workforce participation or procuring for social value.
- to increase the evidence base for anchor approaches and better understand the impact they can have on local population health and the wider economy.

1.5 The evaluation should develop and share learning about the NHS Anchors Learning Network to members in the network. It should also provide valuable learning to the Health Foundation and NHS England and NHS Improvement about how to implement cross-organisational networks² which seek to address the wider determinants of health and how best to plan for their future sustainability.

1.6 The evaluation partner will be commissioned via an open tendering process. The successful team will be appointed in September 2020, to start work in October 2020. The evaluation will last approximately 2.5 years and the final evaluation report will be due in February 2023.

1.7 The deadline to submit proposals is 12pm GMT on 3 September 2020.

About the Health Foundation

2.0 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.

2.1 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.

2.2 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.

About NHS England and NHS Improvement

3.0 From 1 April 2019, NHS England and NHS Improvement are working together as a new single organisation to better support the NHS to deliver improved care for

² Non-clinical membership may include back office functions (such as procurement) which are often not part of learning networks.

patients. As local health systems work more closely together, this new single organisation has been designed to support delivery of the NHS Long Term Plan.³

- 3.1 NHS Long Term Plan sets out an ambitious ten-year vision for healthcare in England. It sets out a new service model: where we take more action on prevention and health inequalities, where we improve quality of care and health outcomes across all major health conditions, where the NHS harnesses technology to transform services, and where we get the most out of taxpayers' investment.

Background to the NHS Anchors Learning Network

- 4.0 Anchor institutions are large, public sector organisations that are called such because they are unlikely to relocate and have a significant stake in a geographical area – they are effectively 'anchored' in their surrounding community. They have sizeable assets that can be used to support the capacity and wellbeing of local communities, economic development and inclusive growth and reduce health inequalities. e.g. through procurement and supply chains, workforce and training, use of buildings and land and being an active system partner in area-based development.
- 4.1 The proposal to develop an NHS Anchors Learning Network follows the 2019 publication, *Building healthier communities: the role of the NHS as an anchor institution*.⁴ Led by the Health Foundation, the report demonstrated how NHS organisations act as anchor institutions in their local communities, identifying where anchor practices are already taking place and how the NHS can maximise its influence on the wider determinants of health.
- 4.2 The NHS Long Term Plan highlights the role of the NHS as an anchor institution. It gives examples of where the NHS is positively influencing local socio-economic wellbeing and sets out that "in partnership with the Health Foundation, we [NHS England and NHS Improvement] will work with sites across the country to identify more of this good practice that can be adopted across England".⁵
- 4.3 It is predicted that the UK economy will experience the greatest recession on record as a result of the COVID-19 pandemic, resulting in significant social and economic impacts.⁶ The impacts of COVID-19 are not being experienced equally across society and it is anticipated that this will exacerbate existing health inequalities. This in turn is likely to have detrimental impacts on people's health and wellbeing. The

³ NHS England. The NHS Long Term Plan [webpage]. *NHS England*; 2019 ([www.https://www.longtermplan.nhs.uk](https://www.longtermplan.nhs.uk)).

⁴ Reed et al, 2019, Building healthier communities: the role of the NHS as an anchor institution, The Health Foundation.

⁵ NHS England. The NHS Long Term Plan [webpage]. *NHS England*; 2019 ([www.https://www.longtermplan.nhs.uk](https://www.longtermplan.nhs.uk)).

⁶ <https://www.theguardian.com/business/2020/jun/10/uk-economy-likely-to-suffer-worst-covid-19-damage-says-oecd>

role of the NHS as an anchor institution should be optimised in supporting local recovery.

- 4.4 Since the publication of the Health Foundation research report and the NHS Long Term Plan, the Health Foundation's Improvement team have been working with NHS England and NHS Improvement to design a joint programme of work aimed at enabling the spread of ideas, knowledge and capability so that NHS organisations can adopt and apply anchor strategies in practice.
- 4.5 Our research, stakeholder engagement and learning from international sites suggests that an effective approach to tackling these challenges is to design and deliver an NHS Anchors Learning Network. A network of this kind would support learning between those already implementing anchor approaches in NHS organisations, build capability in those less experienced and catalyse focused action in specific places or across themes of work (for example procurement practice). The network could also support learning and collaboration between other anchors and partners e.g. local authorities, industry, the voluntary, community and social enterprise (VCSE) sector and universities.

The NHS Anchors Learning Network

- 4.6 The NHS Anchors Learning Network will be designed, developed and delivered over two-phases: a design phase and a delivery phase. A support partner is being separately commissioned to work with the Health Foundation and NHS England and NHS Improvement over these two phases and will lead on the design, development and delivery of the NHS Anchors Learning network in the UK. However, the Health Foundation and NHS England and NHS Improvement will remain engaged as contributors, thought leaders and advisors to the network and will have a presence at network activities and events.
- 4.7 This section provides a brief overview of the role of the support partner during the two phases of implementing the NHS Anchors Learning Network, of whom we expect the evaluation partner to work closely with (see Figure 1). The latter section details the work for this Invitation to Tender for the evaluation of the NHS Anchors Learning Network.

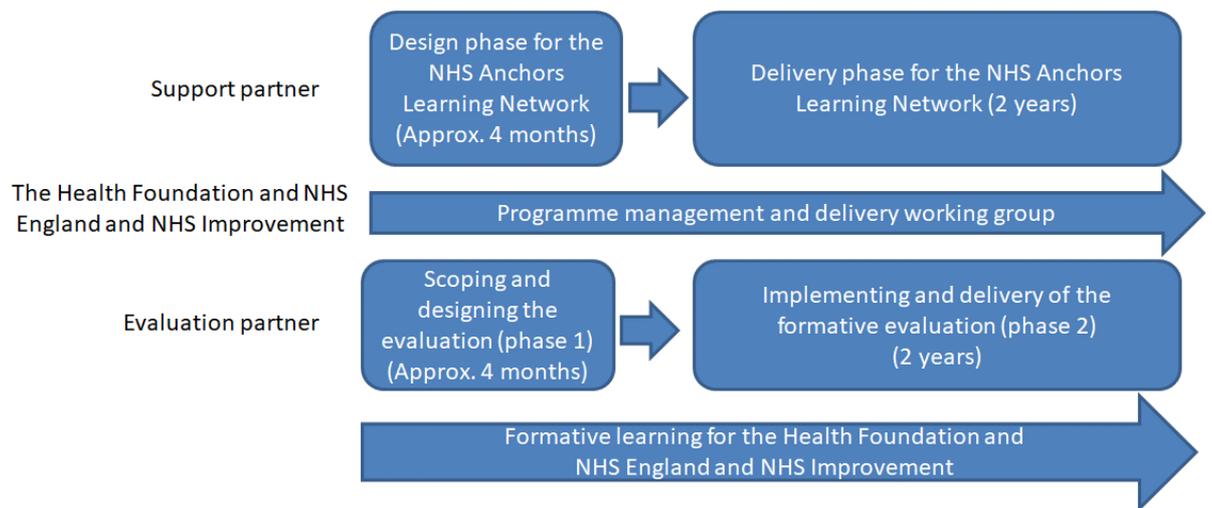


Figure 1: Design and delivery phases of the NHS Anchors Learning Network

Design phase for the NHS Anchors Learning Network (October 2020 – January 2021)

- 4.8 During the design phase (October 2020 – January 2021), the priorities are to design the network (support partner) and develop an evaluation to measure its impact (evaluation partner). The Health Foundation and NHS England and NHS Improvement will work with the support partner, who will have experience in network design, effective collaboration and healthcare improvement, to undertake this phase. This will include considering, for example, our approach to membership and recruitment; how to effectively work across all four devolved nations; designing sustainability into the network; the approach to decision making and co-design within the network; and the relationship between the network and policy influencing. This phase is likely to include a series of co-design workshops with the Health Foundation and NHS England and NHS Improvement, potential members and other stakeholders working in the anchors space across the UK.
- 4.9 The Health Foundation and NHS England and NHS Improvement have identified the following key principles to inform the design and implementation of the network:
- The network should be reciprocal, collaborative and member owned.
 - The network should be representative and inclusive of a wide range of anchor organisations and partners involved in the design and delivery of health and care.
 - The network should be focused on practical action (and have activities and mechanisms which support this).
 - The network should be designed to be autonomous and sustainable beyond the initial two years of funding
 - The network should be adaptive and able to respond to evaluator and member feedback.
- 4.10 By January 2021, the support partner will submit a worked-up design of the NHS Anchors Learning Network and a roadmap for how to deliver it.

Delivery phase for the NHS Anchors Learning Network (February 2021 – February 2023)

- 4.11 The support partner will be responsible for the delivery of the network for a period of two years from February 2021. This will include member engagement, event design and facilitation, coordination of virtual activities, communications activities to support the spread of learning and overall management of the network, working in collaboration with the core team at the Health Foundation and NHS England and NHS Improvement. Additional activities for the NHS Anchors Learning Network may also be scoped during the design phase.

Details of the work

Rationale for the evaluation

- 5.0 The Health Foundation and NHS England and NHS Improvement would like to commission a two-phased formative evaluation of the NHS Anchors Learning Network. The overall purpose of the evaluation is to provide feedback to both organisations on how the NHS Anchors Learning Network is meeting its objectives to help inform the ongoing design and delivery of the NHS Anchors Learning Network. This will be done through capturing evidence of the experience and learning of those involved in the NHS Anchors Learning Network and assessing the progress of the programme against its underlying theory of change (see **Annex A**).
- 5.1 The evaluation of the NHS Anchors Learning Network will answer the following questions:

1. Which design elements of the NHS Anchors Learning Network have been working effectively for the Health Foundation and NHS England and NHS Improvement and members? Why/why not? (e.g. type of organisation, local context, network activities)
2. How are members interacting and engaging with the NHS Anchors Learning Network and what are their experiences?
3. How effectively are the NHS England and NHS Improvement and the Health Foundation working together?
 - a) How effectively are the Health Foundation and NHS England and NHS Improvement learning and adapting to formative feedback on the NHS Anchors Learning Network?
 - b) How effective is the relationship between the Health Foundation and NHS England and NHS Improvement, and how is this perceived by members?
4. How well have the Health Foundation and NHS England and NHS Improvement considered the sustainability of the NHS Anchors Learning Network?

- a) Which elements of the NHS Anchors Learning Network are more likely to be sustained and why? (e.g. relationships with stakeholders)
5. How does the NHS Anchors Learning Network benchmark against known components of successful networks approaches or methodologies in health and health care?
6. What is the NHS Anchors Learning Network learning from other approaches to support anchor strategies (such as national policy and improvement frameworks or other tools)?
7. Does the NHS Anchors Learning Network demonstrate value for money for its members and the Health Foundation and NHS England and NHS Improvement?
8. Which factors are influencing the success (or not) of anchor approaches being adopted by member organisations?
9. What short term and immediate outcomes has the NHS Anchors Learning Network had during its first two years of operation?
 - a) for **network members** (e.g. helping the pace and spread of anchor initiatives within and between organisation(s); levels of engagement in anchors work; getting 'buy-in' from colleagues regarding anchors work; building relationships and connections; sharing/learning/adapting good practices/tools from each other; building skill capabilities; ways of working).
 - b) **for partners** (the Health Foundation and NHS England and NHS Improvement)
 - c) **wider stakeholders** (e.g. other NHS organisations and partners to NHS as anchors (such as local authorities, higher education institutions, and local community and voluntary groups)).

5.2 To answer the questions outlined above, we are seeking an independent evaluator (or consortium) to design and deliver a two-phased formative evaluation. Methods used to answer these evaluation questions may include (but are not limited to):

- observation and/or feedback of the Health Foundation and NHS England and NHS Improvement and members experiences at and/or in between NHS Anchors Learning Network events;
- electronic surveys of members at specified time intervals;
- analyses of on-going metrics collected by the support partner and/or the core team at the Health Foundation and NHS England and NHS Improvement;
- social network analysis;
- case studies; and

- semi-structured interviews with the Health Foundation and NHS England and NHS Improvement, members and wider NHS and system stakeholders and those involved in other sectors.
- 5.3 The successful team will need to ensure they use appropriate methodological approaches for research and evaluation being designed and delivered during the COVID-19 pandemic. Given the ongoing situation regarding COVID-19, the successful team will need to remain flexible regarding timescales and methods throughout the evaluation.
- 5.4 While metrics have not yet been developed for the NHS Anchors Learning Network, it is anticipated that the successful evaluation partner will work collaboratively with the core team at the Health Foundation and NHS England and NHS Improvement and the support partner during the **design** phase of the network to help develop measurable outcome metrics, such as those listed in the Theory of Change, that might be suitable for evaluation purposes. It is important to note we are looking for an evaluation partner who can maintain a flexible approach to the delivery of this evaluation for the duration of the NHS Anchors Learning Network.
- 5.5 The two phases of the evaluation are described in further detail below.

Phase 1: Scoping and designing the evaluation

- 6.0 During the design phase of the evaluation, the evaluation partner will scope and design a formative evaluation for the NHS Anchors Learning Network ensuring it closely aligns with the design principles of the Network. During this phase the evaluation partner should also capture valuable learning for the Health Foundation and NHS England and NHS Improvement, for example on network design methodologies and how the Health Foundation and NHS England and NHS Improvement are working together.
- 6.1 The NHS Anchors Learning Network itself will be designed during this phase so the evaluation partner will need to work collaboratively with the core team at the Health Foundation and NHS England and NHS Improvement and the support partner. The evaluation partner may wish to attend a selection of project meetings with the Health Foundation and NHS England and NHS Improvement to ensure the proposed evaluation framework aligns with the design principles of the network. These meetings will help the evaluation partner establish the potential data sources and determine what data will be collected by the Network members or collected centrally by the support partner working with the Health Foundation and NHS England and NHS Improvement, and/or what primary data needs to be collected by the evaluation partner.
- 6.2 By the end of design phase, the evaluation partner should be able to detail the proposed formative evaluation protocol for the delivery phase to evaluate the NHS Anchors Learning network. This will include:
- the proposed research/evaluation methods;
 - data sources (e.g. attendees feedback forms at events);
 - frequency of data collection (e.g. number of interviews);

- risk register;
 - reporting; and
 - any other evaluation design criteria such as frequency and mechanisms for formative feedback to the Health Foundation and NHS England and NHS Improvement (and network members).
- 6.3 The protocol should also articulate the set of mutually agreed principles to guide the conduct of the evaluation, such as setting out the roles and responsibilities of each party; agreeing steps to minimise the burden of data collection on all partners and members; and to share data and learning as appropriate.
- 6.4 This will also require consideration of obtaining all relevant authorisations (such as data sharing and confidentiality agreements), and consideration of consent and safeguarding.
- 6.5 During the design phase, the evaluation partner should familiarise themselves with published and grey literature on network approaches used to support anchor strategies and implementation elsewhere (such as in US and Canada). This will help the evaluation partner place the evaluation of the NHS Anchors Learning Network in context. Other relevant literature includes the Health Foundation's *Effective Networks for Improvement*, which draws on the literature and empirical evidence about effective networks to describe the component parts of a successful improvement network.⁷ This should help the evaluation partner to make valuable contributions during the evaluation and assist the Health Foundation and NHS England and NHS Improvement make further contributions to the literature on how to use networks as a mechanism for change. Specifically, how networks can support NHS organisations to better understand their role as anchor institutions as well as how they can use anchor approaches to take action to improve community health and well-being. This phase of the evaluation should take into consideration a range of factors including:
- The balance and breadth versus depth of approach needed to complete a formative evaluation, as well as the split between qualitative (e.g. interviews) and quantitative evidence (such as number of attendees at events or survey data).
 - Consideration of evaluation methods and approaches that would be highly suitable and feasible, compared with those that are unsuitable and unfeasible.
 - What data or evidence should be collected by the evaluation partner and what data sources might be available and/or more appropriate for the support partner or the core team at the Health Foundation and NHS England and NHS Improvement to collect through the NHS Anchors Learning Network itself via other mechanisms.
 - The point at which data collection for evaluation of selected outcomes should begin, and the evaluation partner may also want to consider at what point baseline data should be collected.
 - Consideration of the cost and resource implications for any specific data collection.
- 6.6 Key deliverables of the scoping and design phase include:

⁷ <https://www.health.org.uk/publications/effective-networks-for-improvement>

Phase 1 milestones and deliverables			
Milestone	Deliverable	Success criteria	Deliverable due date*
Inception meeting with the Research Manager and the Programme delivery & management working group (see Annex B).	Revised and costed evaluation proposal	Evaluation proposal incorporates any feedback given to the evaluation partner following interview and inception meeting.	October 2020
Attends project meetings with the Research Manager and/or the Programme delivery & management working group to scope and design evaluation for Phase 2 delivery phase of the network.	Draft of formative evaluation protocol submitted for scrutiny and feedback by the Research Manager and the Steering Group. <i>The final formative evaluation framework will be signed off by the Steering Group (and will be shared with the Joint Governance Group (see Annex B)).</i>	Provider delivers a suitable and robust evaluation protocol of how it plans to evaluate the NHS Anchors Learning Network (incorporating feedback from the Research Manager and Steering Group).	At specified time points during evaluation. Final formative evaluation protocol at end of four-month design period: January 2021.
PowerPoint slide pack shared with the Programme delivery & management working group	PowerPoint presentation reporting on valuable learning for the Health Foundation and NHS England and NHS Improvement, for example on network design methodologies and how both organisations are working together.	Evaluation partner discusses initial findings with both organisation and holds a Q&A session.	As above
* Please note that deliverable dates may be subject to change due to the COVID-19 pandemic and the additional pressures on the NHS. We expect our evaluation partner to be willing and able to be flexible around timelines.			

Phase 2: Implementation and delivery of the formative evaluation

- 7.0 The delivery phase of the evaluation will be aligned to the two-year delivery phase of the Network. The primary aim of the delivery phase is to provide feedback to the Health Foundation and NHS England and NHS Improvement to inform the ongoing design and delivery of the NHS Anchors Learning Network through capturing evidence of the experience and learning of those involved in the NHS Anchors Learning Network and assessing the progress of the programme against its underlying theory of change.
- 7.1 The evaluation will be principally **formative** but will also seek to evaluate the NHS Anchors Learning Network against immediate and shorter-term **outcomes** during its first two years of operation that were identified in the design phase (e.g. number of members attending events, number of new connections made by members, type(s) of engagement used by members). The evaluation partner may wish to consider using surveys at specified time periods, observation, social network analysis, and/or interviews with the Health Foundation and NHS England and NHS Improvement or Network members. The evaluation will report the NHS Anchors Learning Network members' successes, challenges, and key learnings to the Health Foundation and NHS England and NHS Improvement which will help to inform the ongoing design and delivery of the network. The evaluation should also provide valuable learning to

the Health Foundation and NHS England and NHS Improvement about how to implement cross-organisational anchor networks and how best to plan for their future sustainability.

7.2 The evaluation partner will be responsible for managing and conducting the evaluation; analysing the findings; and producing a coherent interim and final report and presentation that synthesises the key findings into a core set of themes and lessons. Indicative milestones and deliverables for the **delivery phase** are outlined in the Table below. These may be subject to change during the **design phase** of the evaluation.

7.3 The Health Foundation in conjunction with NHS England and NHS Improvement will work with the evaluation partner to agree the structure of the interim and final report and expects the provider to set the findings in the wider context of how network approaches can be used as a mechanism for advancing anchor strategies. Indeed, we anticipate findings from this evaluation will:

- further improve the design and development of the NHS Anchors Learning Network;
- help showcase success and generate valuable learning for the Health Foundation and NHS England and NHS Improvement and its members;
- inform decisions about the ongoing and future sustainability of the network, and if appropriate, help attract future members;
- inform the Health Foundation and NHS England and NHS Improvement understanding of the effectiveness of a network to improve the capability of NHS organisations to adopt anchor strategies; and
- inform the design of network approaches used across other programmes in the NHS and in other sectors.

7.4 Key deliverables of the delivery phase include:

Phase 2 milestones and deliverables			
Milestone	Deliverable	Success criteria	Deliverable due date or frequency
Formative feedback given to Research Manager and/or the Steering Group.	Verbal or written updates received by the Research Manager (and/or Steering Group) which share progress, challenges, emerging themes and learnings about the NHS Anchors Learning network	Clear and concise feedback and updates provided to the Research Manager (and/or Steering Group) to help inform the ongoing development of the NHS Anchors Learning Network. This should contain updates on progress, challenges and any emerging themes and learnings of the network.	At specified times during evaluation
Slide pack and presentation of emerging/interim findings shared and discussed by the Research Manager and Steering Group.	Interim progress report	The provider uses the agreed interim progress structure and concisely updates on progress, challenges and emerging themes and findings of the NHS Anchors Learning	December 2021

		Network evaluation. The final interim report incorporates feedback received by the Research Manager and Steering Group.	
Presentation to the Research Manager and the Steering Group on final findings.	First complete draft of final report	The provider uses agreed final report structure and concisely pulls together and synthesises the key findings from the evaluation of the NHS Anchors Learning Network into a core set of learning themes.	December 2022
Final evaluation report incorporating feedback from the Research Manager and Steering Group	Final evaluation report	As above, and incorporating any feedback from the Research Manager and the Steering Group.	January 2023
* Please note that deliverable dates may be subject to change due to COVID-19 and the additional pressures on the NHS. We expect our evaluation partner to be willing and able to flexible around timelines.			

- 7.5 During both phases of the evaluation the evaluation partner will need budget to attend a selection of project meetings with the Research Manager and/or the programme delivery & management working group, and as needed into the monthly **Steering Group** (see Annex B: Governance structure). The evaluation partner should consider how frequently they will need to report into the Research Manager or Steering Group. This is likely to be at specified periods of time depending on levels of evaluation activity and design and delivery phase milestones and deliverables.
- 7.6 Over the course of the evaluation there are likely to be several planned events for the NHS Anchors Learning Network. The evaluation partner may need to allocate resources to attend at least 2-3 events, which should be identified during the **design phase** of the evaluation.

Audiences for this work

- 8.0 The primary audience for this evaluation is the Steering Group (see Annex B). The Steering Group provides operational oversight of the NHS Anchors Learning Network and intends to use the interim and final findings of the evaluation to inform the ongoing design and sustainability of the NHS Anchors Learning Network. This evaluation may also inform subsequent evaluation work and be used to develop and implement network approaches. The Steering Group includes representatives from the Health Foundation and NHS England and NHS Improvement (see Annex B).
- 8.1 Other key audiences include the Health Foundation and NHS England and NHS Improvement Joint Governance Group, who provide strategic oversight of the Network; and the Health Foundation's CEO, Directors team, and Healthy Lives, Research and Improvement teams. In addition, senior members of NHS England and NHS Improvement including the Director of Strategy, members of the Strategy Group, and the Health Inequalities team.
- 8.2 The Health Foundation and NHS England and NHS Improvement will work closely with the evaluation partner to develop key messages and to draw out the implications

of the findings, and any communications and public affairs (including media) related to the evaluation and its findings.

8.3 We will work with the evaluation partner to consider different presentational options for the different audiences (such as Network members and the Advisory Group). We are keen to ensure that the development process of this work supports our wider stakeholder engagement work. Wider stakeholders interested in this evaluation and its findings may include:

- NHS Anchor Learning Network members;
- Future network members (and non-members) in health and social care and those involved in other sectors;
- Wider stakeholders from NHS England and NHS Improvement, NHS Scotland, NHS Wales and Health and Social Care Northern Ireland;
- Commissioners;
- The Q community;
- Policymakers and funders;
- Those parties interested in network design.

8.4 Our aim in terms of dissemination is to provide outputs that are useable by those in policy and practice who are research literate but time poor. We may, therefore, commission an independent writer to produce a Health Foundation learning report based on the evaluation partners evaluation report. In such an instance, we expect our evaluation partner to work with the writer to provide insight into the key findings, and feedback on early drafts of the learning report.

8.5 We will also expect the evaluation partner to join us for any stakeholder engagement events, such as roundtable meetings with key system leaders and decision makers, that may be necessary, to add to the debate about the findings, and/or test and validate the findings.

8.6 Please ensure that your proposal makes reasonable allowance for the time required to fulfil these obligations regarding dissemination throughout the duration of the evaluation.

Requirements

9.0 The successful provider will need to maintain a flexible approach throughout the evaluation and will be responsible for delivering all aspects of the evaluation, including developing the evaluation protocol, obtaining relevant authorisations and approvals where applicable. The provider will work with the Health Foundation and NHS England and NHS Improvement, the design and delivery support partner, and members of the NHS Anchors Learning Network to collect all relevant data, design and carry out the evaluation and analyses, and complete interim and final reporting.

9.1 This is likely to require an evaluation team with demonstratable experience in:

- conducting formative evaluations, as well as the ability to develop and disseminate knowledge, learning and evidence in a clear and compelling way.

- developing effective working relationships with a wide range of stakeholders, as well as a strong understanding and experience of evaluating complex interventions.
- interest in, and knowledge of, network approaches to achieve change.

- 9.2 The successful provider must ensure that they have both adequate **capacity and resources** in place in order to deliver robust, timely evaluations that will be complex in nature, across a number of simultaneous deliverables. This evaluation will require team flexibility to enable them to work with different members.
- 9.3 We are looking for appropriate and innovative methodological approaches for research and evaluation being designed and delivered during the COVID-19 pandemic. We welcome bids which draw on a range of methods, backgrounds and expertise, and from a single or consortia of evaluators. In such cases we would anticipate there being a lead evaluator who would take overall responsibility for the delivery of the contract. Proposals should describe in detail how these arrangements would be managed.
- 9.4 The successful evaluation partner should be able to describe how they would address key evaluation questions through a diverse range of methods, particularly where data are likely to be accessible at different times. The successful provider will also be able to clearly demonstrate how they will maintain a flexible approach regarding timescales and to working with partners and members during the COVID-19 pandemic, and how they will manage risks.

Intellectual property

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

Working with the Health Foundation

- 11.0 The work will be managed by a Research Manager at the Health Foundation (the 'Client'). They will be the main point of contact for the evaluation partner and will monitor progress on the contract through regular phone calls or e-mails. The Research Manager can also report into the weekly Working Groups or monthly Steering Group meetings (see Annex B) on behalf of the evaluation partner to ensure the core team at the Health Foundation and NHS England and NHS Improvement are kept informed. The Research Manager will ensure the evaluation partner is kept up to date about programme developments.
- 11.1 Where at all possible, the Health Foundation takes a partnership approach to its work. In the inception meeting we will work with the successful provider to refine the proposed approach, establish a suitable governance structure and evaluation design, and agree on the ways that we will work in partnership.
- 11.2 Our proposed governance structure for the NHS Anchors Learning Network can be found in Annex B.

Working with the NHS Anchors Learning Network members

- 12.0 The Health Foundation and NHS England and NHS Improvement will ensure that the NHS Anchors Learning Network members are aware of the evaluation and have agreed to comply with all reasonable requirements of any independent evaluator partner. The evaluation partner should consider how to avoid over-burdening members, and how best to engage, facilitate data sharing, protect confidentiality, and feedback to participating members or organisations contributing to the evaluation, and manage any potential tensions. This will include how best to utilise meetings that are already scheduled.

Costs

- 13.0 Responses to this invitation should include accurate pricing, inclusive of expenses and VAT. It is emphasised that assessment of responses to this tender invitation will be on perceived quality of service and demonstrable ability to meet the brief, rather than lowest cost, but value for money is a selection criterion.
- 13.1 Based on previous similar work commissioned by the Health Foundation, we anticipate bids of up to £50,000 (inclusive of VAT and expenses).
- 13.2 We will commission this evaluation by issuing a contract for services and, as such, we expect VAT is likely to be payable on all aspects of the work. *Please consult your contracting team and/or finance team to ensure that VAT has been included appropriately before submitting your proposal and budget.*

Questions

- 13.3 If you have any questions to clarify understanding regarding this call please email Anchors_evaluation@health.org.uk.

Tender response requirements

- 14.0 Providers are requested to complete the Health Foundations tender response form on the AIMS system in presenting their response. A PDF form is included as an example – do not use this to submit your application, this must be done online.
- 14.1 Detailed provider information must be provided, such as:
- 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.
- 14.2 The tender response must include confirmation of how you will meet the requirements of the tender including:
- Summary of your proposed approach
 - Summary of the experience of the key personnel 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
- Project and risk management, including a Gantt chart outlining the key dates, milestone and deliverables against each phase/workstream
- Any other relevant information the Foundation should take into account
- Primary contact name and contact details
- Details of the team carrying out the work (names, roles and expertise relevant to the tender)
- Client references, including information on 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. Please find attached a copy of our standard contract and outline any disagreements you may have with these.

Instructions for tender responses

- 15.0 The Health Foundation reserves the right to adjust or change the selection criteria at its discretion. The Health 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.
- 15.1 This work specification/invitation to tender (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 Health Foundation as offers to enter into an agreement. The Health 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.
- 15.2 The Health 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.
- 15.3 The Health Foundation is not obliged to disclose anything about the successful bidders, but will endeavour to provide feedback, if possible, to unsuccessful bidders.
- 15.4 Your bid is to remain open for a minimum of 180 days from the proposal response date.
- 15.5 You may, without prejudice to yourself, modify your proposal by written request, provided the request is received by the Health Foundation prior to the proposal response date. Following withdrawal of your proposal, you may submit a new proposal, provided delivery of the new proposal is received by the original due date.
- 15.6 Please note that any proposals received which fail to meet the specified criteria contained in it will not be considered for this project.

Selection criteria

- 16.0 Responses will be assessed by representatives from the Health Foundation in September 2020. Proposals will be assessed using the following criteria:

Essential criteria

- Expertise in formative evaluations using a range of qualitative and quantitative methods
- Experience and strong understanding of designing and collecting statistical data or metrics as well as its analysis
- Appropriateness of proposed methodology and sampling framework
- Appropriate project management, risk management, information governance, and quality assurance expertise
- Demonstrable capacity to deliver the evaluation on time, on budget and to the required standard, with proven ability to flex resource capabilities and adapt to changing environments when required
- Ability to draw on other expertise if needed, and to work collaboratively with a range of stakeholders
- Strong communication skills
- Value for money
- Willingness to attend NHS Anchors Learning Network events.

Desirable criteria

- Knowledge or awareness of the health and social care settings where the NHS Anchors Learning Network sits
- Knowledge or awareness of scaling and/or spreading networks and an interest in designing and analysing evidence that will help understand the mechanisms or factors influencing impact, spread and sustainability.

16.1 It is important to the Foundation that the chosen evaluation partner is able to demonstrate that the right calibre of staff will be assigned to the project; therefore, the project leader who will be responsible for the project should be present during the panel interviews, if you are selected.

Selection process

17.0 Please complete the online tender response form on the AIMS system by **12:00 on 3 September 2020**. We will not accept proposals submitted after this time.

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

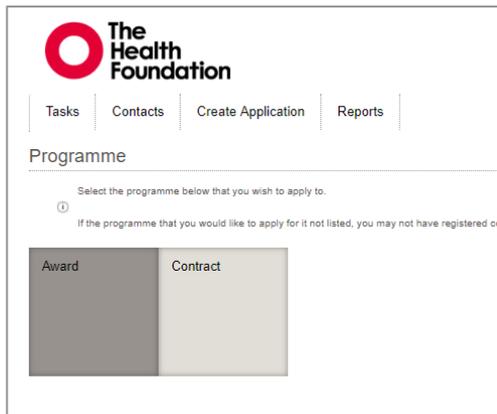
AIMS quick start

Once you have registered with AIMS and activated your profile via the verification email, you can start a tender response. If you are applying on behalf of a team or organisation, register with the organisation via the 'Contacts' tab before doing so.

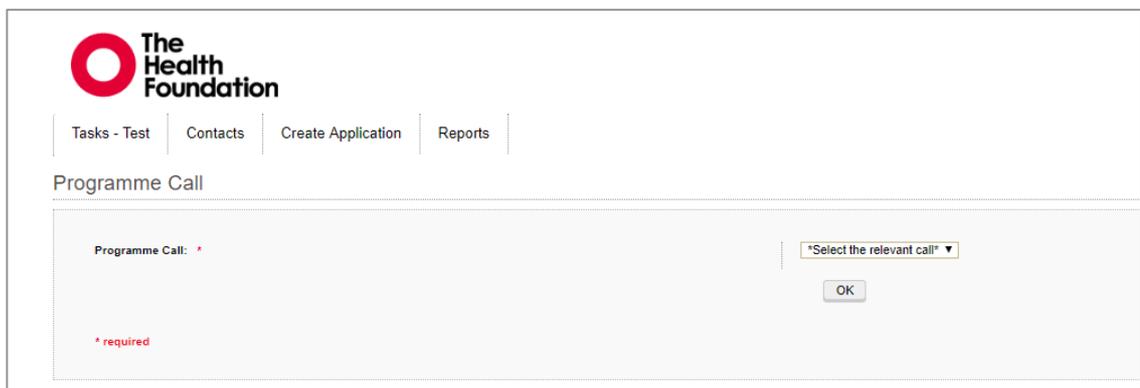
Then click on '*Create Application*' and select to apply on behalf of the organisation you have just registered with.

Open tender instructions

Select the '*Contract*' programme, as shown below.



On the next screen, click into the drop-down menu and select the *Summative evaluation of the Flow Coaching Academy programme* in the drop-down for 'Programme call', as shown.



- 17.1 A response to your application will be made on 22 September 2020.
- 17.2 We intend to interview a selection of shortlisted bidders on **6-7 October 2020** to explore proposals in more depth. Please ensure you are available to be interviewed on these days.
- 17.3 The final decision will be communicated by **14 October 2020**. The start date is to be agreed following the final decision (but would be as soon as practicable).

Confidentiality

- 18.0 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 Health Foundation.
- 18.1 Providers may be requested to complete a non-disclosure agreement

Conflicts of interest

19.0 The Health 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 Health 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 Health Foundation’s website at the following location: <https://www.health.org.uk/COI>

Key dates

20.0 The table below lists the key dates for this evaluation

Date	Deadline
20 July 2020	Invitation to tender published
3 September 2020	Applications close
7-17 September 2020	Internal and external review and assessment meeting
22 September 2020	Shortlisted applicants invited for interview
6 - 7 October 2020	Interviews
14 October 2020	Successful provider notified
20 October 2020	Inception meeting
27 October 2020	Evaluation protocol finalised and contract in place

Annex A: Working Theory of Change: NHS Anchors Learning Network

Learning Network – Working Theory of Change

To help a critical mass of NHS organisations adopt as a priority and take action on their role as anchors to improve community health and well-being, by bringing people together to share, collaborate and increase capability. By doing so, the NHS can powerfully impact the upstream wider determinants of health and leverage all their assets to narrow inequalities and improve population health.

Activities	Outputs	Outcomes	Impact
<p>Learning and Development</p> <ul style="list-style-type: none"> • Masterclasses/seminars and workshops for members (Skill development) • Site visits and study tours • Mentoring/buddying of organisations and individuals <p>Spaces and network-led activities</p> <ul style="list-style-type: none"> • Events (networking) • Peer to peer learning (F2F or via digital platform) • Swap shop – e.g <u>Hexitime initiative</u> • Digital or physical space for network • Peer led workstreams on topics/challenges • Space for partnership development <p>Funded activities</p> <ul style="list-style-type: none"> • Grant funding to test interventions • Funded site evaluation • Education programmes (Inc. formal qualification) <p>Communication & resources</p> <ul style="list-style-type: none"> • Communications programme, including newsletters, blogs and case study generation. • Production of a toolkit to improve capability 	<ul style="list-style-type: none"> • A number of initiatives led by teams making progress on specific issues • Platform for sharing best practice • Spaces exist that support network activities • A series of briefings, learning reports and an evaluation on activities and network • A minimum number of site visits over the duration of the network • Increased communication activities on Anchors, including a social media presence • National level engagement with the network and its activities • An Anchors framework and maturity matrix • Toolkit and guides to support network members and non-members • A series of case studies and stories from network members • Engagement with Anchor influencers both domestic and internationally 	<ul style="list-style-type: none"> • <u>Building skills and capability within the health and care sector</u> <ul style="list-style-type: none"> - Soft skills to build local relationships, frame the anchor mission - Delivery and evaluation skills - Skills to develop partnerships, including how to connect with both existing and new partners • <u>Creating a change in practice</u> <ul style="list-style-type: none"> -Explicit recognition of anchor mission within member organisations and local system strategies -Improved partnership working within the locality - Member organisations adopting specific anchor practices • <u>Increased evidence</u> <ul style="list-style-type: none"> - To understand what interventions are happening and how are they being implemented - Understand the impact of different types of approaches to anchor activities -The value and impact of the network itself in supporting change (the process) 	<ul style="list-style-type: none"> • Strategic shift –changing how NHS orgs think about their strategy incorporating anchors (critical mass) • Network being internationally renowned. • Policy changes to support anchors • Sustainable community of people with expertise and passion to deliver • Anchors a mainstream concept in health and care discourse

Annex B: Governance Structure (as at February 2020)

Advisory Group	<i>Biannual</i>	THF/NHSE/ Joint Governance Group (Biannual)	<i>Strategic oversight</i>
	<p>Purpose: Critical friend and strategic advisor for our partnership and the activities that lie within it. Provide external advocacy for programme and inform future work through their own expertise.</p> <p>Support us to best understand the NHS' contribution to social value and inclusive growth across the UK and to look beyond the NHS when developing our agenda.</p>		<p>Purpose: Strategic oversight and sign off of:</p> <ul style="list-style-type: none"> Partnership agreement Programme objectives and key workstreams Overall joint finance and resource commitments Comms strategy Core programme outputs (e.g. reports)
		Steering Group (Monthly)	<i>Operational oversight</i>
			<p>Purpose: Operational delivery and sign off of:</p> <ul style="list-style-type: none"> Planned programme activities and timescales Programme budget and spend Programme messaging and regular comms outputs Evaluation and dissemination model Stakeholder engagement plan Risk management
		Working Group (Weekly)	<i>Programme management & delivery</i>
			<p>Purpose:</p> <ul style="list-style-type: none"> Programme management – updates and delivery concerns Contract management (Evaluation partner and Support partner) Event design