

Invitation to tender and project specification

A themed synthesis of funded research 2012-2022

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About the Health Foundation

- 1.1. The We are an independent charitable organisation working to build a healthier UK.
- 1.2. Health is our most precious asset. Good health and wellbeing enables us to live happy, fulfilling lives and frees us up to achieve our potential. It fuels our prosperity – a healthy and productive labour force is the engine that powers our economy. And it helps to build a stronger society by enabling us to play a full part in family life, make social connections and contribute to our communities.
- 1.3. Our health is shaped by a range of factors including our early life, the work we do and the income we earn, the education we receive and the homes and places we live in. The health and care system should support good health and wellbeing by enabling everyone to access the high-quality treatment, care and support they need, when they need it.
- 1.4. Yet, good health remains out of reach for too many people in the UK. Improvements in life expectancy have slowed. We compare poorly with other leading nations on some important aspects of our health, such as cancer and heart disease. Deep inequalities in health between our poorest and wealthiest communities have widened. Meanwhile, health and care services are under huge pressure and struggling to provide access to timely, high-quality care.
- 1.5. It doesn't have to be like this. By valuing our health as an asset, investing in health and care services and focusing on the wider factors that shape our health and drive inequalities, we can build a healthier nation.

Background to project

- 1.6. The Health Foundation is moving into its next strategic period (2023-25) and has defined three strategic priorities to help us meet our overarching aim; to bring about better health and health care for people in the UK. These priorities are:
 - Improving health and reducing inequalities.
 - Evidence and analysis to improve health and care policy.
 - Radical innovation and improvement in health and care.
- 1.7. The broad ambition and objectives for each priority is outlined in the Foundation's [Our Strategy for 2023–25](#).
- 1.8. Historically, there has been a lack of consistency in the Health Foundation's recording of outputs from funded research, which makes it difficult to monitor spread, coverage and impact of our research.
- 1.9. To help us meet our aims and optimise our research mechanisms, the Health Foundation is seeking to synthesise findings and generate insights from historical Health Foundation funded research to:
 - better understand and utilise findings to direct future work, inform strategy and funding
 - provide greater confidence and insight to draw on research findings in internal and external work
 - inform decisions on the methodological approaches of our work
 - underpin and support external communications where appropriate
 - develop a comprehensive record of outputs from Health Foundation funded research to populate a new research cataloguing system.

Details of the work

- 1.10. The supplier will produce a themed synthesis of the Health Foundation funded research from 2012-2022, including awards, contracts, and evaluations mapped against the Foundation's revised 2023 strategic priorities.
- 1.11. As it is early days for the new strategic model, the supplier will work with project and strategic priority teams to develop the focus of the synthesis. We envisage this being

- achieved in the form of workshops to hone the focus of the synthesis and identify specific lines of enquiry for each of the three strategic priority areas.
- 1.12. Once the focus is defined, the supplier will synthesise the evidence against the three strategic priorities, summarising key findings to:
 - provide insights as to how findings align with, and add to, existing literature in the wider external context
 - identify the strengths and limitations of research findings
 - provide a consideration of the strength of methodological approaches of the research.
 - 1.13. See section 4 for full deliverable requirements.
 - 1.14. The synthesis should be based on the following inclusion criteria:
 - 1.14.1. research commissioned and funded by the Health Foundation to external organisations or individuals including awards, contracts, and evaluations
 - 1.14.2. research published between 2012-2022 – research can have been commissioned pre-2012 but publication must have been within this period
 - 1.14.3. research must be available in the public domain, including but not limited to final reports, all peer-reviewed and/or grey literature
 - 1.14.4. publications generated by infrastructure grants.
 - 1.15. Exclusion criteria for this research includes:
 - 1.15.1. in-house research exclusively undertaken by the Health Foundation, ie not funded and delivered by external parties
 - 1.15.2. research commissioned and funded by the Health Foundation in the period but not yet available in the public domain.
 - 1.16. Please see the *Themed synthesis workflow diagram* that provides a diagrammatic overview of this work.
 - 1.17. Prospective applicants are invited to join an Information Call on Thursday 30 March 11:15 to 12:00 should they want to hear more about this work. To register to attend the call and to submit questions for discussion, please email research.mailbox@health.org.uk.

Deliverables

- 1.18. The supplier must have the relevant subject matter expertise and knowledge to proficiently review and appraise the research in the context of the three distinct Health Foundation strategic priorities.
- 1.19. If a single supplier does not have the requisite knowledge across all three themes, we would encourage them to partner with other suppliers that have the relevant expertise and knowledge.
- 1.20. Suppliers will be provided with a list of all historical research commissions and associated outputs mapped to each of the three strategic priorities. Where this data is not available, the supplier will undertake a manual search of outputs to complete the evidence base and to update internal records.
- 1.21. The supplier will facilitate three workshops, one with each strategic priority, to develop the research questions and focus (see section 3). The supplier will produce an outline that summarises the areas of focus and key lines of enquiry for the synthesis for each strategic priority. The workshops will be key to the success of this work as strategic priority teams are in the early stages of setting out their objectives for the new strategic period. The workshops will require strong facilitation skills to align the requirements from each group.
- 1.22. The synthesis should:
 - 1.22.1. generate insights and summary findings from the body of research funded by the Health Foundation and relevant to each strategic priority, clearly summarising key findings
 - 1.22.2. provide a consideration of the strength of methodological approaches where possible

- 1.22.3. provide crucial insights as to how findings from funded research align with, and add to, existing literature in the wider external context
- 1.22.4. generate a comprehensive catalogue of findings and outputs against historical research to allow the Health Foundation to draw on these routinely as part of its ongoing work
- 1.22.5. be written in plain English to allow Health Foundation staff and teams to utilise the intelligence gained from the synthesis.
- 1.23. Suppliers are required to produce:
 - 1.23.1. a synthesis report, with findings presented against each strategic priority, in word format with comprehensive references
 - 1.23.2. an XLS file of any outputs that were not listed through the Health Foundation grant holder survey, complete with summarised findings
 - 1.23.3. a presentation of primary findings and insights to internal management groups to support knowledge mobilisation and comprehension, with supporting PowerPoint slides (can be delivered remotely or in-person)
 - 1.23.4. three external publications, one for each strategic priority, of peer-reviewed journal standard that draw out the learning gained through the synthesis.
- 1.24. Additional outputs that are not part of this costed specification but negotiable with the Health Foundation include:
 - additional publications as work progresses based on outcomes and findings
 - recommendations on achieving impactful knowledge mobilisations of this work.

Accountability

- 1.25. All elements of this contract, including reviews will be monitored by an internal working group, led by the project lead (portfolio manager) and overseen by a director.
- 1.26. Suppliers will be provided will a list of all historical research and associated outputs mapped to each of the three strategic priorities collated from a recent survey of all historical award and contract holders. The approximate number of research commissions in this period is estimated at approximately:
 - Improving health and reducing inequalities = 100
 - Evidence and analysis to improve health and care policy = 110
 - Radical innovation and improvement in health and care = 242
- 1.27. Light touch progress meetings will be scheduled at intervals over the contract period.
- 1.28. The report will undergo internal peer review and the supplier will be expected to respond to and incorporate feedback from up to two rounds of comments.
- 1.29. The Health Foundation holds primary editorial control and would seek joint authorship of any publication and would work with the supplier to agree the format, focus and route to publication.
- 1.30. As part of the contracting process a Privacy Impact Assessment will need to be completed by the Health Foundation and approved by the Data Protection Officer before the contract can be issued.'

**Data protection guidelines will be set out in the contract.*

Timescales

- 1.31. The following deadlines are anticipated:

Stage	Timeline
ITT open for applications	7 March 2023
Information call (Q&A)	30 March 2023

Closing date for applications	18 April 2023
Outcome sent/invites to interview	24 April 2023
Interviews	3 May 2023
Interview outcome notification	w/c 8 May 2023
Inception meeting	May 2023
Final report submission	December 2023
Presentation to working groups	January 2024

Costs

- 1.32. The cost of the commission is up to £130,000 inclusive of VAT.
- 1.33. The Health Foundation will revisit the cost of the commission to reflect any additional agreed outputs and/or publications.

Instructions for tender responses

- 1.34. The Health 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.
- 1.35. This work specification 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 specification and request for response or not.
- 1.36. The Foundation will not be responsible for any costs incurred by you in responding to this specification and will not be under any obligation to you with regard to the subject matter of this specification.
- 1.37. The Foundation is not obliged to disclose anything about the successful bidders, but will endeavour to provide feedback, if possible, to unsuccessful bidders.
- 1.38. Your bid is to remain open for a minimum of 180 days from the proposal response date.
- 1.39. 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 delivery is effected prior to the established proposal response date.
- 1.40. 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

- 1.41. Responses will be evaluated by the Health Foundation using the following criteria in no particular order:
 - ability to deliver on all required services or outputs
 - understanding of the brief
 - the quality and clarity of the proposal, products or services
 - evidence of proven success of similar projects / evidence of adaptability of any existing products to be used
 - responsiveness and flexibility
 - transparency and accountability
 - value for money.

How to apply and selection process

- 1.42. Please complete the **online tender response form** by midday on 18 April 2023. You will need to register to use the application portal. Once registered you will receive a welcome email with a 'get started' link to start your application.
- 1.43. We will contact you with the outcome of your application by 24 April 2023.
- 1.44. Interviews will be held on 3 May 2023.
- 1.45. The final decision will be communicated week commencing 8 May 2023 with a contract start date to be agreed as soon as is practicable.

Confidentiality

- 1.1 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.
- 1.2 Providers may be requested to complete a non-disclosure agreement

Conflicts of interest

- 1.3 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 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: <https://www.health.org.uk/sites/default/files/2019-02/Health-Foundation-policy-on-conflicts-of-interest.pdf>.