

Policy Research Unit to drive improving health and reducing inequalities in Scotland

Funding to set up a Policy Research Unit to drive improving health and reducing inequalities in Scotland

Call for applications

August 2023

NOTE: We advise all potential applicants to familiarise themselves as early as possible with the application process.

All applications for the Policy Research Unit have to be submitted through our [online application portal](#). Please read the application form guidance before completing your application.

Please ensure that you have read the Frequently asked questions document on our website following the information call on Thursday 24 August 2023.

Deadline for applications is **12.00 (midday), Wednesday 27 September 2023**.

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1. About the Health Foundation

The Health Foundation is an independent charitable organisation working to build a healthier UK.

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.

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.

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.

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.

Further details about the organisation can be found at www.health.org.uk.

2. Introduction and overview

2.1 Overview

Health is our most precious asset. Good health has a significant influence on overall wellbeing and allows people to participate in family life and in their community.

In 2022, the Health Foundation led an independent review into the state of health and health inequalities in Scotland, leading to a final report, **Leave no one behind**. Published earlier this year, the report highlights:

- Concerning health trends that indicate a lack of improvement in the decade before the pandemic and, in many cases, widening inequalities, with signs that the most disadvantaged are being left behind. This is underlined by increasing rates of extreme poverty.
- Three areas of particular concern: the prevalence of drug-related deaths; inequalities in the health and experiences of infants and children; and health and socioeconomic outcomes among young and middle-aged men.
- An overall lack of progress on health and widening inequalities comes despite continued policy focus and detailed surveillance and data collection. There remains a gap between policy intent, delivery and the extent to which this has led to meaningful change in people's lives. A lack of independent scrutiny and voice in Scotland was identified by stakeholders.

The report concludes that Scotland can build on strong policy intent to reduce stubbornly high inequalities.

The Health Foundation plans to support this renewed ambition and has allocated up to £1.2 million to set up a new Policy Research Unit in Scotland. This is aligned with our **strategic priority** strategic priority to improve people's health and reduce inequalities and particularly our objectives to:

- increase public and professional understanding and promote policy and system action on the wider determinants of health
- influence the UK governments to take a whole-government approach to tackling the wider determinants of health.

The work of the unit will focus on two key areas drawing on the conclusions of our independent review:

- Providing an independent and critical voice on policy related to improving health and health inequalities in Scotland.
- Working with people involved in policy delivery to enable the development of practical and credible solutions to the implementation gap between policy intent and the experience on the ground.

A key principle underpinning this work is to ensure that the activities, outputs and policy calls are developed and owned by Scotland, and its institutions and communities. The programme of work will help achieve the Health Foundation's ambition for decision

makers across all parts of society to understand and fulfil their potential contribution to building a healthy nation.

The unit will be supported by a governance structure that allows it to maintain independence in the outputs it produces, while also working collaboratively with the Health Foundation towards our outcomes.

We expect to award funding to a Scotland-based organisation to set up and run the Policy Research Unit.

2.2 About the Policy Research Unit to improve health and reduce inequalities in Scotland

A healthy population is one of Scotland's most important assets; it is a vital input into people's wellbeing and a thriving society and economy. One of the Health Foundation's strategic priorities is to work with others to improve people's health and reduce inequalities by:

- increasing understanding about the economic and societal benefits of good health
- focusing on the key role of economic, social and environmental factors in shaping health and driving inequalities
- working with stakeholders to build cross-sector support and mobilise action for the changes needed to promote healthier lives.

The Health Foundation report, [Leave no one behind](#), provides a picture of past and present health and inequalities in Scotland to inform future efforts for change and improvement. The report concluded that action and progress on inequalities is possible and can be achieved within existing powers and by maximising their use. Change will require collaboration across all parts of the delivery system – central and local government, business, the third sector, local communities, and the public – and for there to be a shared and sustained focus on multiple factors that influence health. For that change to have lasting impact, it must be developed and owned by Scotland, and its institutions and communities.

A Policy Research Unit focused on driving action to improve health and reduce inequalities in Scotland will take forward the next phase of this work. It will seek to build on the evidence base provided by the review and the relationships developed with key stakeholders across different sectors in Scotland. It will maintain the principle that the work is rooted in Scotland, while reflecting the Health Foundation's aims and values (**see Box 1**). It will also ensure high quality standards with a rigorous quality assurance approach and working closely with the senior adviser and steering group to ensure outputs are credible and land well externally.

The unit will deliver a programme of work that addresses two areas highlighted by stakeholders involved in the review as particular issues: a lack of independent voice in Scottish policy debates; and an implementation gap between policy intent and the experience on the ground.

Throughout the programme of work, the unit will continue to build the Health Foundation's profile and influence in Scotland. It will provide a more fixed presence

within Scotland to represent the Health Foundation, continue to build networks and have on-the-ground intelligence to maximise the impact of the work. It is envisaged that the Policy Research Unit will have a clear and distinct identity connecting it to the Health Foundation.

The audiences for the work of the unit include system leaders, policymakers, implementers, practitioners and decision makers, but we also expect it to ensure that public debate recognises the impact of broader social and economic policy on health. The unit will need to engage closely with a range of stakeholders to ensure its activity accounts for a range needs and perspectives. It will also ensure appropriate public participation through the programme of work.

Alongside the Unit, the Health Foundation is commissioning a Scotland-based senior adviser and is establishing a steering group, chaired by the adviser, to support the work. The senior adviser will help to shape the unit's programme of work and provide a link to the steering group. The steering group will consist of key senior stakeholders in Scotland from across sectors. The unit is expected to work closely with the senior adviser and be informed by the steering group to ensure the work is robust, rooted in Scotland and designed to maximise impact.

The Health Foundation will also commission a communications agency to manage its senior stakeholder engagement, support media opportunities and help ensure that the Health Foundation's profile and momentum is maintained in Scotland. The agency will work alongside the Policy Research Unit's communications team to help ensure alignment of communications plans.

Box 1: The Health Foundation values

We are independent – the unit will provide an independent and critical voice in Scottish policy debates

We collaborate to make a greater impact – the unit will continue to engage and influence key stakeholders across different sectors and political leaders in Scotland

We are informed by evidence and experience – the unit will deliver work that builds on the evidence base provided by the review and that continues to be informed by experts including the public

We bring a spirit of constructive challenge and an open mind – the unit will provide external scrutiny of progress in Scotland

2.3 The opportunity

The Health Foundation has allocated up to £1.2 million in grant funding to establish a new Policy Research Unit to improve health and reduce inequalities in Scotland, which will develop and deliver a three-year programme of activity. The unit is expected to formally launch by early 2024 with funding for a three-year period.

The grant funding is anticipated to support a senior role to lead and shape the work of the unit and engage with stakeholders across the Scottish policy community as well as provide capacity for research and analysis, project management and wider functions such as admin, contract governance, publications and events.

The work will build on the evidence base provided by the **Health Foundation review and their partner reports**. It will further build relationships with key stakeholders across different sectors in Scotland to help achieve the programme aims.

By offering funding over a three-year period, this programme will provide the unit with the resources, time and capacity to make real progress.

An initial design phase will enable the unit to fully explore and develop thinking before finalising programme plans. We recognise that some elements of the work will evolve over time.

Applicants should set out how they will deliver the objectives and the areas of work outlined below in their application form. There are two main issues that the work of the unit will seek to address:

- a lack of an independent evidence based commentary in Scottish policy development and discourse;
- an identified 'implementation gap' between policy intent and the experience on the ground.

It is envisaged that up to around a quarter of the resources would support the activity directly related to the implementation gap project (further outlined below) including the management of the project and a potential commission of an external partner to deliver the work.

This work, and a continued building of Health Foundation profile and influence within Scotland, will be supported by broader communications and engagement activity.

The successful organisation will need to demonstrate provision of programme management, and any necessary support services, such as the host organisation's publications and events teams.

Policy and insights function

Our review highlighted the lack of independent and critical voice in relation to improving health and health inequalities in Scotland. This function would speak to the health implications of policy issues in Scotland, setting the agenda through outputs and activity on key areas affecting health and inequalities in Scotland. It would also provide any rapid analysis/commentary as appropriate, with a specific focus on the widening gap between the most deprived local areas and the rest of Scotland.

This function will inform the media commentary and civil society action to improve health and reduce inequalities in Scotland by providing interpretation of evidence and potential policy impact. It will deliver an updated and concise version of key analysis of health and determinants trends in Scotland, based on activity in our previous review, to provide external and independent scrutiny of progress in Scotland.

Areas of focus could include poverty, housing and education as well as trends in health and health outcomes. Our review identified the key powers and areas of policy related to health and inequalities which can provide a guide to potential areas of interest.

A barrier to greater understanding of drivers of health and inequalities highlighted in the review was the availability of published data in relation to certain aspects of health inequalities. The insights function would scope an approach to widen the accessibility to produce more detailed analysis and make this more available to other external actors in early 2024.

Proposals should set out the approach and planned programme of activity and outputs for the policy and insights function.

Closing the implementation gap

Our review identified a gap between policy intent and the experience of people on the ground as a significant problem in making progress to improve health and reduce inequalities in Scotland. The review also highlighted particular risks to current and future health outcomes and inequalities in the early years and for young and middle-aged men.

The unit will deliver a project to identify the barriers to policy implementation in these areas and develop actionable recommendations that have potential to lead to change.

We anticipate the unit would deliver a deliberative process with stakeholders from across a range of sectors including the public sector, the third sector and business with potential consideration of the following elements to improve policy design and delivery:

- Ways of working across sectors and different levels of the system, where responsibilities should lie between different actors, and how to collaborate to achieve goals.
- A review of current metrics and targets, including the National Performance Framework to ensure what is being aimed for leads to the required broader goal.
- Available funding and funding mechanisms and how this can be best distributed or altered to achieve goals.

The aim of this work would be to identify actionable change to policy implementation that can be made within existing parameters (eg, funding or statutory targets) and the extent to which those parameters need to change to improve delivery. It will be important for public and stakeholder engagement to shape the focus.

Proposals should set out the potential design of this work including how examining two areas will enable greater learning and how to ensure recommendations have buy in and lead to change. We anticipate that the unit would work with an external provider or partner from within their organisation to deliver this strand of work.

Communications and engagement activity

The Health Foundation's activity in Scotland holds a key principle that it is informed and rooted in Scotland. A key part of doing this will be through working with key

stakeholders across different sectors in Scotland. This is also an important route through which to disseminate and influence using the outputs of the unit, and where appropriate, wider Health Foundation work and networks.

Proposals should set out how they will maintain a programme of engagement that helps to inform the work of the unit and for the unit to influence policy in Scotland. We anticipate that this would involve some of the following activities: stakeholder events, meetings with policy makers, webinars and roundtable discussions about relevant policy and evidence. Other approaches will be considered.

Alongside this, the Health Foundation will continue to build influence at the most senior level. The commissioned communications agency is expected to develop a communications strategy for the programme of work, working closely with the unit and any other research partners.

Policy Research Unit		
Tackling the implementation gap	Providing policy and insights	Collaboration across the delivery system
<ul style="list-style-type: none"> • Understand barriers to implementation • developing actionable policy recommendations 	<ul style="list-style-type: none"> • Independent and critical voice in Scotland • scrutiny and input to policy development 	<ul style="list-style-type: none"> • Engage stakeholders across sectors including the public • Influence senior leaders and decision makers

2.4 Programme of work

The three-year programme comprises a short design phase, working closely with the Health Foundation, senior adviser and informed by the steering group, followed by an action phase focused on delivery, with review points at the end of each year.

In the final year of the programme, the unit will be invited to scope further activity for a third phase. An illustrative timeframe for each phase is set out below, although applicants may want to adapt this based on their available resources and existing internal processes.

2.4.1 Design phase

It is envisaged that this will be a relatively intensive period of working closely with the Health Foundation and senior adviser to set up the unit and where parameters for outputs, approaches and ways of working and partnership plans are agreed and

understood. It will also help to ensure the work programme fits with the Health Foundation's values and positioning.

The unit will have the opportunity to fully explore and develop thinking before finalising the delivery plans. We expect that ideas will evolve over the programme duration.

Core activities for this phase may include the following:

- Recruitment of staff to the unit to deliver the core programme of work.
- Engagement work to build relationships with key stakeholders for the programme.
- Outlining plans for the three-year programme, working with the senior adviser and the steering group.
- Identifying deliverable outcomes and an impact measurement framework for the programme.
- Establishing governance arrangements for working with programme partners.

The key outputs of this phase include: an agreed scope, a partnership plan, governance framework and delivery plan for the rest of the programme, including a provider and approach to deliver Work strand 1, and ways of working agreed with the Health Foundation commissioned senior adviser and communications agency.

2.4.2 Action phase

Following the design work, and anticipated to commence by Spring 2024, we would expect the unit to deliver their programme plans continuing to work collaboratively with the Health Foundation, senior adviser and steering group and wider stakeholders.

It is expected that in this phase the unit will also scope out further activities to achieve the desired outcomes. Applicants should include indicative costs for the scoping of up to two further areas of activity in their budgets.

2.5 Review and governance

The unit will meet regularly, and at least monthly, for project management purposes with the Health Foundation and senior adviser throughout the time of the programme. It will also meet up to four times a year with the steering group to share progress, shape work plans and consider opportunities for activity.

At the end of each year, the unit is expected to produce an annual report summarising activities to date and progress, any research findings, key learnings and impact. The unit and the Health Foundation, supported by the senior adviser and steering group, will reflect on learnings and agree plans for the following year. In the final year of the programme, we will assess the effectiveness of the activities and anticipate inviting the unit to submit plans for building on the work when the funding ends.

2.6 Programme outcomes

The longer term aims of the Health Foundation are for:

- increased public awareness and debate about the action needed to improve health and address inequalities
- greater adoption among decision makers of the policy approaches needed to improve health and address inequalities
- more effective delivery and implementation of policy to address the implementation gap
- a cross-sector approach to taking action in Scotland to improve health and reduce inequalities
- further developing the Health Foundation's presence, influence and engagement in Scotland.

This programme of work seeks to shift our funded activity toward more practical impact and action in Scotland to help achieve those aims.

Applicants should set out the outcomes they expect to deliver through the three-year funding period that help to achieve those aims. We would anticipate this to include the extent to which actionable policy proposals have been adopted and the use of the unit's outputs in parliamentary debates or by stakeholders.

Work during the design phase can further refine these outcomes and develop an impact assessment framework in collaboration with the Health Foundation, senior adviser and steering group.

3. How to apply

3.1 Application timetable

The application process for the Policy Research Unit for improving health and reducing inequalities in Scotland will follow the timetable below:

Activity	Date
Open for applications	Thursday 17 August 2023
Online information call for applications	12.00 (midday), Thursday 24 August 2023
Deadline for application	12.00 (midday), Wednesday 27 September 2023
Notification of outcome of application	Friday 13 October 2023
Interviews	Friday 20 October 2023
Final decision	17.00, Monday 23 October 2023
Start date	As early as possible

3.2 Application process

We will run a single stage process.

The programme opens for applications on Thursday 17 August 2023 and closes for applications at **12.00 (midday) on Wednesday 27 September 2023**.

We will host a live **information call at 12.00 (midday) on Thursday 24 August 2023**. The information call will outline the call for application and includes a Q&A with members of the Health Foundation programme team. To register your interest in attending, please email Healthylives.tenders@health.org.uk by Monday 21 August 2023 and send us any questions about the opportunity in advance of the call.

To begin your application, you will need to register on our [online applicant portal](#). You will then receive an email with a link to complete an application form. Applications must be submitted via the [online portal](#) by the deadline, 12.00 (midday), Wednesday 27 September 2023. Applications submitted via alternative means will not be considered, and late submissions will not be accepted.

Note: that as you are completing the form, you will be able to save your progress and continue at a later time. Please avoid copying text from a Word document as this will lead to formatting problems in your answers.

We will only accept one application per applicant. The Health Foundation programme panel for this work will assess written applications against the programme's assessment criteria (see section 4). The panel will include members of the Health Foundation who will manage the award programme, as well as external assessors.

We will then invite successful applicants to present their plans to the panel. As part of the presentation, the panel will have an opportunity to ask questions and discuss plans in more detail.

Panel presentations will take place in person at a venue in Edinburgh, Scotland.

The Health Foundation will notify teams of the final decisions on their applications by Monday 23 October 2023. We will offer unsuccessful applicants feedback on their applications.

4. Eligibility of criteria

4.1 Eligibility

The programme is available to an experienced policy research partner based in Scotland, with knowledge and expertise in Scotland-specific issues and context. Proposals can include collaboration between different institutions or organisations.

Applicants will have significant experience in research and policy in relation to health and inequalities with a specific focus on the determinants of health – social and economic drivers of our health. We encourage applications from cross-disciplinary teams including, but not limited to, economics and public health.

They should have policy expertise in areas such as incomes, poverty, employment, housing and early years as covered in the Health Foundation review of health and inequalities in Scotland. They will have demonstrable experience of effectively disseminating and promoting research and analysis, of influencing policy and interacting and working with policymakers. They will also have experience of working collaboratively with a broad range of stakeholders including the public.

5. Assessment criteria and supporting notes

During the application process we will be assessing against the key areas detailed in this section.

5.1 Assessment criteria

We are looking for applications which demonstrate:

- mission alignment with the Health Foundation aims to improve health and reduce inequalities
- rigour and independence, and a history of delivering similar work
- expertise in health, the determinants of health including income, employment and housing
- experience of project and programme management of research programmes of a similar scale
- financial stability and long-term viability of the organisation (due diligence may be undertaken on shortlisted organisations)
- commitment to being a living wage employer
- commitment to embedding principles of equity, diversity and inclusion in one's work
- experience of engaging with policymakers and contributing to policy impact.

We expect plans to cover the following:

- outline roles of the unit
- an outline of your approach to delivering the three work strands and any other activities you would undertake to achieve the programme objectives
- what you will achieve at the end of year 1, year 2 and year 3 of the programme
- approaches to engaging a range of stakeholders, including the public, businesses and policymakers
- a rigorous approach to quality assurance and ensuring that work and outputs are credible
- an outline of your communication and engagement plan
- how you will work with the Health Foundation, the senior adviser and the steering group to maximise impact
- plans for governance
- evidence of ownership by senior leadership
- a detailed budget for the work, including what the award will cover
- early thoughts on how impact will be measured.

5.2 Supporting notes

5.2.1 Partnership working

We expect the unit's delivery team, the senior adviser, communications agency and steering group to be in place by the start of the design phase. We want to know how you will anticipate working with the partners and advisers on this programme to achieve programme aims.

6. Terms of funding

6.1 Budget

Applicants can apply for up to £1.2 million.

We will fund the unit for a period of three years. You will be expected to submit a budget covering the full three-year programme. However, we understand that some costs associated with delivery of work will be subject to decisions reached during the design phase. Therefore, we ask that applicants submit a detailed budget for the six-month design phase and an indicative budget for the remaining 30 months of the programme. At the end of the design phase, we will require the unit to submit a revised budget and spending profile for the action phase.

The Health Foundation will cover reasonable costs associated with additional work identified during the design phase, for example an additional data analyst post for the unit.

6.1.1 Governance

Applicants should include costs associated with unit governance, such as operational costs and programme management. Costs associated with programme governance will be covered by the Health Foundation. This will include the programme steering group and other governance structures put in place by the Health Foundation to ensure the success of the programme. The research will be supported as a charitable grant and as such is not liable for VAT.

Successful applicants must be ready to begin the programme within three months of application outcomes.

6.2 What our funding can be spent on

You will need to provide a detailed budget for the work, what the funds will cover and details of any in-kind funding being provided.

The following is a list of types of expenditure we would expect to be funding (this list is not exhaustive):

Costs for policy research unit team members for time spent on the programme

Project management costs

Associated expertise such as patient and public involvement

Honoraria for public and patient involvement

Administrative support

Communications materials and associated staff time

Programme meeting costs, such as room hire and catering

Attending workshops, seminars and learning events supporting the ambitions of the programme

Reasonable running cost such as consumables, data analysis, computing costs, essential administration and office expenses directly related to this project

Our funding cannot be spent on the following:

Costs of any development or capacity training that is unlikely to have a direct impact on the success of the programme.
