

Statement of Requirements

Contract Reference: CPD4124020

Supporting Families Practice Model Pilot Study



1. PURPOSE

- 1.1. The Department for Levelling Up, Housing and Communities (DLUHC) is commissioning a pilot study to test a promising practice model from the Supporting Families Programme the psychologically informed keyworker practice model. The commission is comprised of two principal elements: (i) practice delivery where the practice model is clearly described and specified as a set of core components to ensure it is understood and implemented effectively in areas taking part in the pilot; (ii) evaluation where the effect of the practice model is measured.
- 1.2. The pilot study has two primary aims: (i) to provide indicative evidence of the impact and efficacy the model delivers on family outcomes compared to models that do not use this specific approach, and; (ii) to establish the feasibility of delivering a full trial of the model. The project aims to complete by September 2025 with a budget of up to £833,333 excluding VAT. The project may be extended to assess longer term outcomes, but this is subject to further funding being secured at future fiscal events.
- 1.3. Findings from this project will be used as evidence to provide indications of the impact of the model on keyworker practice and well-being as well as on child and family outcomes such as family functioning and mental health. This will inform understanding of effective systemic practice models and ways of upskilling keyworkers to aid Supporting Families policy development and response to the recent Independent Review of Children's Social Care. Findings will also be used to inform decision making on trial feasibility which could be used to commission a full randomised controlled trial from 2025.
- 1.4. The Supplier may also be required to deliver additional, similar research projects as part of the delivery of this Contract.



2. BACKGROUND TO THE CONTRACTING AUTHORITY

- 2.1. The Department for Levelling up, Housing and Communities (DLUHC) supports communities across the UK to thrive, making them great places to live and work. Our work includes:
 - Level up all parts of the country to create more opportunities, better jobs and boost living standards.
 - Deliver more, better quality and greener homes including introducing the biggest building safety changes in a generation, building more affordable homes and creating Generation Buy.
 - End rough sleeping; and reducing homelessness.
 - Oversee a sustainable and resilient local government system that delivers the key services we all rely on.
- 2.2. DLUHC's Departmental Plan can be found on the GOV.UK website.
- 2.3. The Supporting Families programme is delivered by DLUHC with close support and collaboration from Department for Education (DfE).

3. BACKGROUND / OVERVIEW OF REQUIREMENT

The Supporting Families Programme

- 3.1. The <u>Supporting Families Programme</u> (formerly Troubled Families) supports families facing multiple disadvantage to make significant and sustained improvements in their lives across a range of issues. The programme operates a keyworker model. The keyworker supports the whole family around a single agreed plan and coordinates local support services. The programme is delivered by local authorities and partners across England.
- 3.2. Supporting Families received an additional £200m investment at the 2021 Budget and Spending Round which takes total planned investment to £695 million by 2024-25. This new funding enables the programme to continue until March 2025 and help secure better outcomes for up to 300,000 families over the three-year period. Full details can be found in the Supporting Families Annual Report 2022.



- 3.3. Supporting Families has a shared governance arrangement between the Department for Levelling Up, Housing and Communities (DLUHC) and the Department for Education (DfE). This enables integrated working across departments to develop policy and support local authorities as well as shared governance structures. Both Departments share a strong objective to help even more families, prevent high-cost statutory interventions such as children going into care, and deliver savings for children's social care over this three-year period.
- 3.4. The Independent Review into Children's Social Care provided recommendations to government on the future of family support services. The Supporting Families national team is working closely with DfE on the design and implementation of the reforms. The review provided a vision of how we can help families to overcome challenges at the earliest stage, keep children safe from significant harm, and make sure children in care have stable loving homes, long-term loving relationships, and opportunities for a good life.

Previous evaluation and research of Supporting Families Programme

- 3.5. The previous National Evaluation of the Troubled Families Programme 2015-2020 shows the programme delivers positive impacts for families. This includes reductions in the proportion of children being taken into care, juvenile sentencing outcomes and adult sentencing outcomes. The programme also represents value for money, delivering £2.23 in economic benefits for every £1 spent. However, there is considerable variation in practice and approaches across local authority areas.
- 3.6. Qualitative research was commissioned to look at different approaches to practice and service delivery and what local authorities say is more successful. The final report is available on GOV.UK.

Supporting Families Evaluation 2022-25

- 3.7. In this spending review period, the evaluation is taking a 'what works' approach, with the aim of understanding the effect that different practice models and elements of support have on families' outcomes. This builds on the results of the national evaluation which shows that the programme's principles of key worker led, whole family, holistic support are effective in helping families to make positive change in their lives. This is intended to help DLUHC identify the most effective practice models, and disseminate this widely to local authorities to improve their delivery of support to families.
- 3.8. A significant amount of work has already been completed to inform our understanding of effective practice models within the Programme.



- 3.9. The Early Intervention Foundation (EIF) completed feasibility and piloting work to support the delivery of efficacy trials. This included a review of existing family support practices being used across the programme and identifying those that are the most promising and most effective in supporting families to make positive improvements to their lives.
- 3.10. From three feasibility studies conducted, EIF identified the psychologically informed keyworker practice model as the most promising, and this has been selected to be taken forward for further testing. Core components of this model were also identified from the EIF studies. This includes: high-quality accredited training in systemic family therapy for keyworkers; and systemically trained clinicians embedded in early help teams to deliver group reflective practice sessions, supervision and training in systemic practice and tools.
- 3.11. The feasibility studies showed that these components were well received by practitioners and a wide range of stakeholders. Participants also reported that systemic practice was contributing to positive outcomes for children and families. However, all of the sites delivering this model implemented it in their own way. We are seeking to establish and test an optimised version of the psychologically informed keyworker model that combines and applies the elements of the approach and builds on the foundations of effective family support provided through the programme to deliver positive outcomes for families.

Next steps: Establishing a model framework and testing efficacy

3.12. The project we are commissioning aims to assess the efficacy of one promising practice model within the overall Supporting Families approach – the psychologically informed keyworker practice model. This model embeds clinicians trained in systemic family therapy in local family support services. This is with the aim to improve the quality of keyworker practice and deliver better outcomes for families. It will also test the feasibility of running a high-quality trial for this model



- 3.13. The first task for the supplier will be to establish a delivery model for the psychologically informed keyworker practice. The model will be developed with the support and input of the Supporting Families team, with final approval for the design being agreed between the delivery partner, the Supporting Families team and other stakeholders. This will involve reviewing existing evidence from the feasibility studies and wider literature on family support, and designing and developing a framework for rolling out the practice model. This will include identifying training needed for non-clinical and clinical staff to support keyworker teams. The supplier will provide the training to local authority teams and will provide ongoing management and support to areas delivering the practice model to ensure that there is high fidelity: that the practice model is being delivered in line with the model definition and specification.
- 3.14. The second element of the commission will be to conduct an evaluation of the practice model. This has two primary aims: (i) to establish the feasibility of delivering a full trial of the model, and; (ii) to provide indicative evidence of the impact and efficacy the model delivers on family outcomes compared to other models. These research questions will be answered through process and impact evaluations.
- 3.15. By testing this approach, key learning from within the project on recruitment, capacity of local authorities to implement systemic practice, fidelity, dosage, feasibility of data collection and appropriateness of measures, sample size for statistical power, follow-up timing, and any unintended consequences can be used to help inform future projects.

Implementation support for local authorities

- 3.16. The project will involve close working with local authorities. DLUHC and DfE have close working relationships with local authorities in England and can support the supplier to engage with local authorities and advise on sample selection.
- 3.17. During the feasibility work, relationships were formed with a number of local authorities with promising practice to be tested. These contacts and background information will be passed to the supplier with the consent of the local authority.



3.18. The project will involve testing already existing interventions or transporting the intervention to new areas. The ambition with this project is to test the effectiveness of the psychologically informed keyworker practice model through a pilot study. The Supporting Families team will work with the supplier and the local authority to provide support for implementing approaches it would like to test.

Other evaluation work over this spending review period.

3.19. This pilot study is one element of a wider programme of evaluation work over this spending review period. The most significant other element is a spend study looking at what the up lift in programme funding has been spent on and what effects that it may have had.

4. **DEFINITIONS**

Expression or Acronym	Definition
DLUHC	Department for Levelling Up, Housing and Communities
DfE	Department for Education
RCT	Randomised Control Trial



5. SCOPE OF REQUIREMENT

Funding

5.1. The budget is up to £833,333 excluding VAT to fund the delivery and evaluation of a one-year pilot study by September 2025.

DLUHC and Supplier activities

5.2. DLUHC and the Supplier's activities are summarised as follows:

Owner	Activity	
DLUHC	•	Provide briefing on the psychologically informed keyworker practice model and its components.
	•	Provide briefing on the previous feasibility work for the model, including all relevant reports and documentation, and support engagement with the local authorities that participated in this work.
	•	Support the supplier to engage with upper tier local authorities in England to identify, select and invite them to participate in the pilot study.
	•	Support the implementation of the approach to be tested in local areas.
Supplier	•	Review existing literature on psychologically informed keyworker practice model and how it relates to the role of family support workers more generally.
	•	Design intervention model, manualise and prepare it for testing.
	•	On the completion and approval of the practice design, an intervention protocol will be published.
	•	Research design for the pilot study, including selecting appropriate data collection and research methods, outcome measures and sample selection for the intervention group and the comparison group.
	•	On the completion and approval of the evaluation and analysis design, a trial protocol will be published.



- Engage with the Independent Advisory Group for the pilot study and any other relevant specialists DLUHC considers it helpful to consult.
- Devising and delivering training of local authority teams in psychologically informed keyworker practice model.
- Supporting Local Authorities participating in the trial to identify and recruit clinical staff.
- Information governance arrangements with local authorities.
- Data collection at a local level and collation of data.
- Ongoing support and monitoring of model implementation in local authorities.
- Engagement with local authorities and other partners on the intervention and on setting up and reporting on the pilot study.
- Reporting findings in written reports produced at intervals across the course of the project.
- Present findings to DLUHC and DfE, outline and explain key insights.

6. THE REQUIREMENT

DELIVERY

- 6.1. This pilot study will require the supplier to work with the local authorities on the delivery of the psychologically informed keyworker practice model in selected areas. The supplier will establish an agreed and clearly defined model so that it can be implemented effectively and consistently across keyworkers and local authorities involved in the study. The model will be developed with the support and input of the Supporting Families team, with final approval for the design being agreed between the delivery partner, the Supporting Families team and other stakeholders.
- 6.2. The supplier will identify and recruit areas to participate in the pilot, including those that will form the intervention group (expected to be 5-7 areas delivering the psychologically informed practice model) and the comparison group (5-7 areas that deliver a generic programme model, i.e., where there is no use of psychologically informed practice, systemic family therapy, nor the use of trained clinicians to support the delivery of the programme).



6.3. The supplier will deliver training and support to the selected intervention group local authorities to enable them to implement the model. This will include procuring high-quality accredited training in systemic practice for all keyworkers delivered by an accredited training partner. The supplier will support the hiring of systemically trained clinical staff who will be embedded in keyworker teams to provide support and consultation to keyworkers. Funding from the contract budget will be used to cover the costs of hiring clinical staff. The supplier will provide management and support to local authorities delivering the model throughout the pilot study and monitor fidelity across local authorities to ensure the practice model is being delivered in line with the model definition.

EVALUATION

- 6.4. The supplier will design and deliver a one-year pilot impact evaluation alongside an implementation and process evaluation on the psychologically informed keyworker practice model. The impact evaluation will be conducted with the 5-7 local authorities implementing the intervention and the local authorities in the comparison group.
- 6.5. The evaluation will include gathering data from those participating in the pilot, conducting analysis and reporting results. The results must indicate the impact of the model on keyworker practice and wellbeing, and child and family outcomes relevant to the programme.
- 6.6. The implementation and process evaluation must examine implementation challenges and enablers, fidelity, mechanisms and any unintended consequences.
- 6.7. Results and findings must enable policy teams to make an assessment of whether this practice model shows enough promise to be taken forward to a full trial at a later date.
- 6.8. Key research questions include:
 - a) is it feasible to implement the model?
 - b) what evidence is there that the approach can have a positive impact?
 - c) is the approach feasible for full-scale trial?
- 6.9. A significant amount of feasibility work has already been completed on psychologically informed keyworker practice. Preliminary piloting work has also been undertaken which will inform the design and approach of the study.



- 6.9.1. Psychologically informed keyworker practice aims to use insights from psychology and psychotherapy in practice with families. Some of the root causes of poor outcomes for vulnerable families are driven by a complex interaction of different needs. It is suggested using clinicians trained in systemic family therapy can help families address issues that they face and make positive changes that will lead to improved life chances and outcomes. The hypothesis is that providing support to keyworkers from clinicians via training, supervision and psychological tools improves the quality of practice. It should support keyworkers to build supporting relationships and help families identify strengths that can support families with complex needs to develop strategies specific to their needs. It should strengthen family relationships and make positive changes to their lives. The pilot study will provide implementable and well evidenced models of psychologically informed practice than can be implemented across the country.
- 6.10. In order to maintain the integrity and quality of both the delivery of the practice model and the evaluation, the supplier will provide ongoing assurances that neither component is adversely affecting the other. DLUHC will continuously review the project design and development and will consult with trusted stakeholders to ensure the hygiene of the practice model and the evaluation are not compromised through the design.

Research design

- 6.11. The supplier will design the pilot study including selecting the research methods that are most appropriate to facilitating the delivery of the aims of the study.
- 6.12. DLUHC is commissioning a rigorous evaluation designed to determine if the intervention works under ideal circumstances. DLUHC's preference would be to conduct a trial of the practice model, randomising selection of the sample to the treatment and comparison groups, within selected local authorities. The practical challenges that are associated with randomised controlled trials are recognised, so DLUHC would be content to look at alternative designs that will produce robust results that assess the effectiveness of the psychologically informed keyworker practice model against standard practice models. Ultimately, the successful design needs to systematically control for all sources of potential study bias, so that DLUHC may estimate the effect size of the intervention model¹ on the outcomes of interest.

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¹ Reference: <u>Early Intervention Foundation's 10 steps for evaluation success</u>



6.13. The research will need to test implementation and initial impact of the practice model. It will need to provide critical learning about recruitment, capacity of local authorities to implement systemic practice, fidelity, dosage, feasibility of data collection and appropriateness of measures, sample size for statistical power, expected effective size, follow-up sequencing, and identify any unintended consequences. This will inform feasibility to commission a full RCT in the future. It will also need to provide evidence of the impact of the model on keyworker practice and well-being and initial indications of impact on child and family outcomes such as family functioning and mental health.

Independent Advisory Group

6.14. DLUHC will organise an advisory group of researchers to provide advice, guidance and scrutiny on the project plans and approach. The supplier will present to this group and potentially other specialists in this field if it is considered helpful.

Working with local authorities

- 6.15. The supplier will work effectively with local authority areas participating in the pilot study. This will include agreeing the scope of the project and ensuring well defined implementation of the approach, this will include data collection and information governance agreements.
- 6.16. The supplier must encourage participation by providing specific reports to the local authority for their learning.
- 6.17. A significant proportion of the overall budget for this pilot study must be used for delivery of the model. This must primarily include funding for the work of a clinician. This could be employing the clinician directly or funding the local authority to employ these roles. This funding must act as an incentive for the areas to take part in the study.
- 6.18. DLUHC recognises the challenges with identifying and establishing a valid comparison group with this type of complex social intervention. The supplier must offer suggestions for how an appropriate comparison groups can be selected. DLUHC is open to selecting a comparison 'in area' (i.e., selecting two groups from within each of the Local Authorities chosen to pilot the psychologically informed practice model, with one group receiving the psychologically informed practice model, and a second group receiving the standard Supporting Families model) or 'out of area' (i.e., selecting Local Authorities to deliver the psychologically informed practice model and a second group of Local Authorities to deliver the standard model). The project budget may be used to incentivise and fund Local Authorities to collect and provide



data or for researchers to collect data from a comparison group of families. DLUHC will support the supplier to identify and encourage participation of Local Authorities in the pilot study.

Data and measures

- 6.19. The study will gather longitudinal data, with a minimum of two waves of data collected at baseline and around one year after the start of the intervention/treatment.
- 6.20. The one-year period will ensure sufficient time has passed to assess the impact of the programme on some measures. Ideally, data will be gathered over a longer time span, however DLUHC are keen to gather insights from the study in a timely manner and feed this back to local authorities promptly. Therefore, it has been concluded that this timeframe is a good compromise between robust evaluation and timely, impactful policy findings and recommendations.
- 6.21. At future fiscal events, DLUHC may look to secure additional funding for this pilot study in order to extend the project and gather data over a longer period. The supplier is to provide details of how the project plan can be varied to accommodate this, how the sample will be managed and data collection will be conducted at possible future waves of the study.
- 6.22. It is recognised that some outcomes of interest, such as children's social care demand, may take longer to materialise. Therefore, it is proposed that the supplier measures more immediate outcomes such as mental health and family functioning. The supplier must use outcomes which are good indicators of longer-term outcomes such children's social care demand.



6.23. Data will be gathered directly from participating families. The supplier must use tested and standardised questions where they already exist; new questions will be tested with families for validity to ensure that respondents understand what information is being sought and that they are capable of answering the questions. The possibility of using linked administrative data for this project has been explored. However, this approach has been discounted given the timescales involved in setting up the required data sharing agreements, and the significant lag in data being made available for analysis.

Data analysis

6.24. Data will be gathered across a minimum of two waves. In order to control for any selection bias, the use of quasi-experimental design (QED) techniques may be required to isolate the effect and impact of the treatment and comparison practice models. For example, difference-in-difference or propensity score matching are techniques which allow DLUHC to control for pre-existing differences between treatment and comparison groups, to isolate the impact of different treatment conditions. The supplier may make a proposal on the best approach to take.

Outputs

- 6.25. The supplier must provide regular updates on the progress of the evaluation, and informal insights when they emerge. The supplier may make a proposal around formal reporting, but as a minimum the final report must provide an overview of all research activities and reports key findings and insights.
- 6.26. DLUHC are seeking practical and implementable findings that can be adopted by local authorities.
- 6.27. The project will be reviewed by the independent advisory group, with results and outputs scrutinised in depth before being shared with policy colleagues, local authorities and other government departments.
- 6.28. Study reports will be published on GOV.UK. The report will be published within three months of project completion and ministerial approval being granted.



Additional Requirements

- 6.29. The supplier will allow some flexibility throughout the contract for DLUHC and the supplier to react to emerging matters and changing priorities.
- 6.30. The supplier will work collaboratively with DLUHC taking on board comments and suggestions, whilst also providing constructive challenge on methods of research delivery and interim conclusions drawn from the different sources of information and stages of analysis.
- 6.31. The Supplier may be required to deliver additional research of the supporting families programme or cohort of families on support. The research would support DLUHC's understanding of the programme and the experience of keyworkers delivering the programme, and families' experience of receiving support. As mentioned at paragraph 6.21, this could include additional fieldwork and data collection, subject to funding being secured for this work at future fiscal events.
- 6.32. The Supplier may need to allow for further promising practice models to be tested in a similar trial setting to the psychologically informed practice model set out in this Statement of Requirements. Details of this would be worked through with the collaboration of the supplier.

6.33. Social Value

The Supplier agrees, in providing the Deliverables and performing its obligations under the Call-Off Contract, that it will comply with the social value commitments for MAC 2.2: Theme 2: Tackling economic inequality and MAC 7.1: Theme 5: Wellbeing in the Call-Off Schedule 4 (Call-Off Tender). Full details on the themes are set out in the Social Value Quick Reference Guide.



Further Research

- 6.34. The supplier may be requested to scope and budget further research and evaluation beyond the Supporting Families project. Any additional requests for research and evaluation will be discussed and agreed with the Supplier on a case-by-case basis and formalised via the Contract variation process. Costings for any additional research and evaluation work will be in accordance with the rates identified in the Price Schedule for the delivery of this Contract.
- 6.35. Additional research and evaluation work could cover a range of approaches and methods appropriate to the research questions that are developed and agreed. This includes:
 - Qualitative and quantitative methods.
 - Case studies.
 - Interviews, surveys.
 - Research with staff and families.
 - Statistical analysis and further evaluation.
 - Provision of digital tools to conduct novel polling, such as push-polling, involving providing/facilitating access to third-party systems and tools (e.g. polling public perceptions of anti-social behaviour).
 - Provision of access to unique datasets from third parties to support research activities across the Department (e.g. housing, banking/financial services, mobile/communications, job markets etc.).

This list is not exhaustive.



7. KEY MILESTONES AND DELIVERABLES

The following Contract milestones/deliverables shall apply:

Milestone / Deliverable	Description	Timeframe/Delivery Date
1	Contract awarded	Sept 2023
2	Project Inception Meeting; including provision of a project outline	Sept 2023
3	Progress meeting via video- conferencing; and fortnightly thereafter	Sept 2023
4	Embedding of systemic practices preparation in Local Authorities delivering the pilot practice model	Sept 2023 – Feb 2024
5	Evaluation preparation and development of research design and trial protocol	Sept 2023 – Feb 2024
6	Go live date for programme delivery	Mar 2024
7	Implementation including fieldwork and data collection for stage one and two of the research	Mar 2024 – Nov 2025
8	Interim report on project progress and early findings	Mar 2025
9	Endline for programme delivery	May 2025
10	Data exploration, analysis and discussion of findings for the study	Dec 2024 – Aug 2025
11	Initial report following completion of the project	Jul 2025
12	Final draft report following completion of the project	Sept 2025
13	Submission of final report and presentation	Sept 2025
14	Final report sign-off from the Project Lead or Minister and completion of the project	Sept 2025



8. MANAGEMENT INFORMATION/REPORTING

- 8.1. Throughout the contract, regular fortnightly meetings will be held between the supplier and DLUHC/DfE via video conferencing or the telephone. In addition, weekly reports outlining tasks completed up and coming activities and issues arising are required. Other meetings will also be required as necessary.
- 8.2. The supplier will take on board feedback from DLUHC and other experts feeding into the project.

9. CONTINUOUS IMPROVEMENT

- 9.1. The supplier will be expected to continually improve the way in which the required Services are to be delivered throughout the contract duration.
- 9.2. The supplier will present new ways of working to DLUHC during Contract review meetings.
- 9.3. Changes to the way in which the Services are to be delivered must be brought to DLUHC's attention and agreed prior to any changes being implemented.

10. QUALITY

- 10.1. The study must be conducted in line with DLUHCs objectives and the ethical standards set out in the **Government Social Research code**. Research must be analytically robust, and ethically conducted.
- 10.2. All contractable deliverables must be of publishable quality under DLUHC's name. DLUHC will work with the supplier to analyse and interpret the data to form the final deliverables.

11. PRICE

11.1. Prices are submitted via the Price Schedule excluding VAT and including all other expenses relating to Contract delivery.

12. STAFF AND CUSTOMER SERVICE

- 12.1. The supplier shall provide a sufficient level of resource throughout the duration of the contract in order to consistently deliver a quality service.
- 12.2. The supplier's staff assigned to the contract shall have the relevant qualifications and experience to deliver the contract to the required standard.
- 12.3. The supplier shall ensure that staff understand the authority's vision and objectives and will provide excellent customer service to DLUHC throughout the duration of the Contract.

OFFICIAL



13. SERVICE LEVELS AND PERFORMANCE

13.1. DLUHC will measure the quality of the supplier's delivery by:

KPI/SLA	Service Area	KPI/SLA description	Target
1	Delivery timescales	The Supplier shall adhere to the timescales/project plans unless otherwise agreed by DLUHC.	100%
2	Service provision	The Supplier shall ensure that the services provided meet the requirements set out in section 6 of the Statement of Requirements.	100%
3	Quality	The Supplier shall use suitable quality assurance processes throughout the contract as agreed with DLUHC at the start of the contract. Quality must meet the standards set out in section 10 of the Statement of Requirements.	100%
4	Quality	The supplier shall provide regular updates as the evaluation design is developed, including presenting at the evaluation advisory board, as requested by DLUHC. The supplier shall provide explanations of design decisions through the duration of the project.	100%



5	Quality	The supplier shall produce a robust evaluation that provides high quality evidence – as deemed by DLUHC – that measures the efficacy of the trial practice against a general practice model.	100%
6	Delivery	The Supplier shall ensure the practice model is appropriately designed, that the design of the model is monitored to ensure it does not change or diverge significantly from the initial design, and the supplier will provide sufficient support to Local Authority areas engaged in the project to enable them to maintain the fidelity of the model, providing necessary advice, guidance and training.	100%
6	Adhering to guidance	The Supplier shall adhere to DLUHC's branding, data security and other guidance, (to be provided to the Supplier upon appointment).	100%
7	Reporting	The Supplier will be required to provide all reporting in a format agreed by DLUHC. The supplier must ensure reports have undergone relevant quality assurance by the Supplier before submission to DLUHC.	100%



8	Meetings	The Supplier shall meet remotely with DLUHC within 5 working days of a request and be available via telephone/email. Suitable materials and/or presentations shall be prepared for the meetings. Meeting notes shall be provided no later than 3 working days after the meeting.	100%
9	Account Management	The supplier shall respond to complaints and issues with appropriate and robust resolutions within 5 working days.	100%
10	Social Value	The Supplier is to provide quarterly reports to demonstrate delivery of its commitment to Social Value. This shall be in accordance with MAC 2.2: Theme 2: Tackling economic inequality and MAC 7.1: Theme 5: Wellbeing in the Call-Off Schedule 4. The full Reporting Metrics for the themes are specified in the Social Value Model Quick Reference Table.	100%

- 13.2. Each of the deliverables will need to be agreed/accepted by DLUHC before the project moves onto the next stage. Poor performance against the SLAs will be assessed and managed by DLUHC who will assess whether the products meet the required standard/quality as set out in this Statement of Requirements.
- 13.3. If any of the deliverables fail to meet the agreed quality service levels and performance DLUHC reserves the right to consider early termination of the contract in accordance with its terms and conditions.



14. SECURITY AND CONFIDENTIALITY REQUIREMENTS

- 14.1. The supplier may need to attend meetings at 2 Marsham Street, London where photo ID is required, and bags and people are scanned.
- 14.2. The Supplier will securely process and store personal data in accordance with the Data Protection Act. The Supplier must include a clear technical explanation of the organisation's security standards and what measures will be in place to keep the data secure. If more than one organisation is processing data for this Contract, the lead Supplier must ensure that all the organisations involved meet the required data security standards.
- 14.3. Data gathered from the project will be stored by the supplier; DLUHC will not have access to the raw data. Data will be held securely up to six months after the final report is published, and then destroyed securely.
- 14.4. DLUHC will remain as data controller and will own the Intellectual Property and Publishing Rights for the research outputs. At the end of the project, and when requested throughout its duration, any additional project materials must be shared with DLUHC.

15. PAYMENT AND INVOICING

- 15.1. The payment method for this Call-Off Contract is by bank transfer. DLUHC will pay the Supplier within 30 days of receipt of a valid invoice.
- 15.2. Payment can only be made following satisfactory delivery of pre-agreed certified products and deliverables.
- 15.3. All individual research project cost pricing must be in line with the supplier's rates submitted in the Price Schedule.
- 15.4. Before payment can be considered, each invoice must include a detailed elemental breakdown of work completed and the associated costs.
- 15.5. Invoices should be submitted to:

CP2P Team, DLUHC, 4th Floor, High Trees, Hillfield Road, Hemel Hempstead, HP2 4XN.

Email address: <u>CLGInvoices@levellingup.gov.uk</u> and copy the contract manager.

15.6. All invoices must be specific to charges agreed at the end of each milestone. Other information such as: Purchase Order number, project reference, period of work, and number of days worked, invoiced amount, VAT shall also be included on each invoice.

OFFICIAL



16. CONTRACT MANAGEMENT

- 16.1. The project will be overseen by DLUHC and DfE colleagues including policy officials and analysts. The supplier will have regular meetings with DLUHC and DfE colleagues to discuss progress and expectations. The supplier will have access to expert knowledge of the programme.
- 16.2. The supplier and DLUHC will convene at least fortnightly (or as required) to assess progress. The supplier will attend the meetings at each agreed review point, or if there are particular issues that need to be addressed.
- 16.3. At each review point, DLUHC will assess whether outputs meet satisfactory standards before the work can proceed to the next stage. The dates of these meetings will be set and agreed between the contracting authority and the supplier once in post.
- 16.4. There will be a final review once all outputs have been completed, at which the contracting authority will assess overall progress including the final report.
- 16.5. Attendance at contract review meetings shall be at the supplier's own expense. They may be conducted virtually if appropriate.

17. LOCATION

- 17.1. Services will be completed at the location of the research as well as the supplier's address.
- 17.2. The location of the research will be in England only.