Service Specification

PHE ‘Sender’ Transition and Closure Programme – Wider Public Health System Reforms – Programme Management Service

**Purpose**

Public Health England (PHE) is seeking to commission an external partner to support:

1. Establishing a change, transition and closure programme in its role as a primary ‘sender’ organisation as part of the wider public health system reform programme.
2. Establishing a programme of work that supports the national public health system transition governance and assurance arrangements.

**Background**

Public Health England (PHE) is the expert national public health agency which fulfils the Secretary of State for Health’s statutory duty to protect health and address inequalities, and executes his power to promote the health and wellbeing of the nation.

PHE supports local authorities, and through them clinical commissioning groups, by providing evidence and knowledge on local health needs, alongside practical and professional advice on what to do to improve health, and by taking action nationally where it makes sense to do so.

On 18th August 2020 Matt Hancock (Health and Social Care Secretary of State) announced that changes to the Public Health System were required to strengthen UK’s response to the Covid-19 Global Pandemic.

The ‘Future of Public Health’ published 15th September 2020 set out changes to delivery and implementation of the UK public health system strategy. This includes establishing the National Institute for Health Protection (NIHP) as one of the ‘receiver’ arrangements. This wide-ranging programme of work will result in the closure of PHE as an executive agency of DHSC, most likely during 2021.

**Outline of Work**

Working as part of a blended team, and collaboratively with the business, and our transition Programme Team the supplier will be required to take forward the set up and coordination of all requirements of a Programme Management Office (PMO).

The preferred supplier will need to have recent and evidenced experience, skills, knowledge and expertise in designing, leading, supporting and delivering successful change and transition programmes.

We will be seeking partners who can provide a wealth of knowledge, insight and hands-on experience of delivering a full PMO service with previous transition and closure work, preferably including Public Health and the ability to access knowledge, tools and approaches to inform our planning and preparation.

Key will be bringing subject matter expertise and capacity across a range of PPM methodologies (PRINCE2, MSP and Agile) within corporate, organisational/operational and people transition areas in support of our wider programme aims to ensure we transfer our functions and responsibilities during 2021/22 in ‘good order’ to the identified and agreed ‘receivers’ in the future public health system.

**Deliverables**

Given the aims of this programme, ensuring we are ‘well led, and well managed’ is critical and a dedicated PMO is an urgent requirement to ensure that there is streamlined reporting into and through the national programme for public health system reform including the National Institute for Health Protection (NIHP).

The supplier will be responsible for managing the Sender Programme activity, tracking and reporting transition risks and dependencies across PHE, including business continuity and resilience.

It will coordinate reporting into central transition on all sender activities and will also need to be put in place, streamlining reporting on the work, also reporting into the national transition programme.

In addition, the supplier will direct the process of document control within PHE IG policy and support the coordination of internal and external commissions for Audit requirements to provide added assurance.

**Areas of specific focus and expertise**

The supplier will need to have existing experience, skills, knowledge and expertise in designing, leading and delivering a PMO function ideally to successful change and transition programmes within Government Public Health, with an awareness of the wider health and social care landscape including working with OGDs and Local Government and frontline services to deliver:

Programme information management

Programme resource management

Risk and Issue Management

Assurance

Governance and Reporting

Communication and Stakeholder Engagement

**Reporting arrangements**

The delivery partner should work closely with PHE sender transition team to plan, implement and report on the project.

The dissemination process should be inclusive of local and national stakeholders where required.

The evaluation and review process should be transparent – sharing information on objectives, plan and timetable and report with recipients, providers, stakeholders, commissioners and policy makers.

**Data Handling and Provision**

All personal data (as defined within the General Data Protection Regulation - GDPR), collected, stored, analysed or shared must be carried out in compliance with the Data Protection Act 2018, GDPR and must conform with the policy statements specified in the PHE Information Governance Policy framework.

The successful provider must adhere to the Freedom of Information Act (2000).

**Risk Management**

Applicants should submit, as part of their application, a summary explaining what they believe will be the key risks to delivering this project, and what contingencies they will put in place to deal with them.

A risk is defined as any factor which may delay, disrupt or prevent the full achievement of a project objective, which includes any potential **conflicts of interest**. All risks should be identified. The summary should include an assessment of each risk, together with a rating of the risks likelihood and its impact on a project objective (using a high, medium or low classification for both). The risk assessment should also identify appropriate actions that would reduce or eliminate each risk, or its impact.

**Delivery Timescale**

Establishing the PMO and processes is expected to begin in January 2021 through to established processes and procedures for the programme team being in place and being delivered by March 2021.

**Contract Period**

The contract will begin on 20th January until 31 March 2021 as per the commissioning timetable below.

**Contact Point(s)**

It is expected that the supplier will appoint a named, suitably qualified evaluation lead manager who will be the main point of contact with Public Health England.

The key contact points at PHE will be Sheree Axon, Transition Director. All members of staff will be available for telephone or face to face advice throughout the project lifetime. PHE can facilitate discussions with other topics experts from within PHE and other key partners.

**Costs**

The provider will need to give a detailed breakdown of their costs. Please note that applicants will need to demonstrate value for money.

The overall contract value will be for a maximum of £45,000 (excluding VAT). This is with an expected start date of 20th January and end date of 31 March 2021.

**Accessibility**

Public Health England is committed to making its digital content accessible, in accordance with the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018. The supplier is expected to work to the following requirements when developing any digital products:

<https://www.gov.uk/guidance/accessibility-requirements-for-public-sector-websites-and-apps>

<https://gds.blog.gov.uk/2018/06/20/creating-the-uk-governments-accessibility-empathy-lab/>

<https://www.gov.uk/service-manual/helping-people-to-use-your-service/getting-an-accessibility-audit>

**Application Process**

Applications should be submitted electronically and include the following documentation:

* Supporting statement setting out and establishing suitability to undertake the project, including evidence of carrying out work of a similar nature
* Project outline including, where appropriate, details of evaluation plan, communications plan & methodology, evaluation logic model, timescales and stakeholder engagement plan.
* Budget (including detailed breakdown of spend)
* Risk mapping and associated risk register, including any potential conflicts of interest
* Evaluation and project team CVs

Word count (excluding Project / Evaluation Team CVs) is a max of 2,000 words per document.

Applications will be reviewed by an internal PHE panel and candidates will be informed electronically of the result.

If two applications are scored identically then both applicants will be invited to a verbal presentation to decide the outcome.

**Selection Criteria**

Criteria used by members of the PHE panel to assess applications for funding from the project include:

1. **RELEVANCE** of the proposed project plan and evaluation methodology to the aims and objectives of the project
2. **QUALITY** of the work plan and proposed management arrangements
3. **STRENGTH** of the project team
4. **IMPACT** of the proposed work
5. **VALUE** for money (justification of the proposed costs)
6. **INVOLVEMENT** of key partners and the public

**Commissioning Timetable**

It is anticipated that commissioning of this project will occur to the following approximate timetable:

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| --- | --- |
| **Date** | **Action** |
| **w/c 21 Dec 2020** | Issue of invitation to tender via BRAVO |
| **11th January 2021** | Deadline for receipt of applications |
| **w/c 11th January 2021** | Notification of outcome of applications review |
| **w/c 18th January 2021** | Award of contract |
| **31 March 2021** | Project completion |