

Invitation to Quote

Instructions & Requirements Document

NHS England and NHS Improvement Commercial

NHSEI Staff Survey

Document owner: Commercial & Procurement Team, NHS England and NHS Improvement

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# Purpose

This document sets out the process for obtaining quotations for Goods and Services up to £150,000.

# Introduction

###### This Invitation to Quote (ITQ) has been prepared by NHS England and NHS Improvement (the ‘Authority’). The Authority is looking for a Supplier for the provision of services to run the NHS Staff Survey for NHS England and NHS Improvement’s workforce, covering the system and services to deliver the survey. A full description of the requirement is found in section 2 below ‘The Requirement’. The contract period is 24 months which will include the survey for both 21/22 and 22/23.

###### This procurement exercise is being carried out as an Invitation to Quote.

###### The Authority has taken reasonable care to ensure that the information provided is accurate in all material respects. However, the Bidders attention is drawn to the fact that no representation, warranty or undertaking is given by The Authority in respect of the information provided in respect of this transaction and/or any related transaction.

###### The Authority does not accept any responsibility for the accuracy or completeness of the information provided and shall not be liable for any loss or damage arising directly or indirectly as a result of reliance on this ITT or any subsequent communication.

###### No warranties or opinions as to the accuracy of any information provided in this ITQ Pack shall be given at any stage by The Authority.

###### Any person considering making a decision to enter into contractual relationships with The Authority or any other person on the basis of the information provided should make their own investigations and form their own opinion of The Authority. The attention of Bidders is drawn to the fact that, by issuing this ITQ, The Authority is in no way committed to awarding any contract and that all costs incurred by Bidder in relation to any stage of the Tender process are for the account of the relevant Bidder only.

###### In accordance with The Authority’s internal financial instructions and general principles applicable to public procurement, The Authority seeks best value for money in terms of the Contract reached with the successful Bidder.

###### The Authority has endeavored, therefore, to express as clearly as possible in this ITQ the terms on which it would propose to contract with the successful Bidder and in particular the obligations, risks and liabilities which it expects to become the responsibility of the successful Bidder.

[Guidance Note: The supplier to enter the detail required where text is highlighted in green]

This document contains the following sections:

* 1. Instructions
  + Project Team Details
  + Timeline
  + Supplier Clarification Question process
  + Evaluation Criteria
  + Scoring
* 2. The Requirement:
  + Background Information
  + Standards and Service Specification
  + Essential Skills Deliverables
  + Deliverables
  + Proposed Terms and Conditions
* 3. Responding to the ITQ
  + Bidders Details
  + Further Bidder Information
  + Bidders Response

1. Instructions

Project Team Details and Contract Lead

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| --- | --- |
| Name of Team | OD and Talent Team |
| Name and Title of Contract Lead | Redacted, OD Transformation & Delivery Lead |

Timeline

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| --- | --- |
| Item | Date |
| ITQ Release Date & Issue on Contract Finder\* | 24/08/2021 |
| ITQ Clarification Deadline | 26/08/2021 |
| ITQ Closing Date | 02/09/2021 9am |
| Estimated Award Date | 09/09/2021 |
| Estimated Contract Commencement Date | 10/09/2021 |
| Estimated Launch of survey | 04/10/2021 |
| Estimated Close of survey | 26/10/2021 |
| Analytics & Results returned | 31/01/2022 |
| Analytics against National NHS results returned | 28/02/2022 |

The contract period is 24 months which will include the survey for 21/22 and 22/23. The timescales will be similar to the above for the 22/23 survey.

The timeline is indicative and may be subject to change.

Supplier Clarification Question Process

All clarification questions relating to this ITQ must be submitted via the procurement portal route (Atamis) within 2 calendar days of receiving the ITQ. Clarification questions received after this time will not be responded to. All Clarification questions will be responded to within 1 working day of the date received.

All clarification questions received via other routes will not be reviewed and responded to.

Please Note: - To ensure an open and fair process is followed, all bidders will receive a copy of the question(s) and answer(s).

Evaluation Criteria

The purpose of evaluation in the procurement process is to establish which supplier(s) have submitted the best quotation; ensuring that the assessment of quotes is undertaken in a transparent, fair and consistent manner so that an effective comparison can be made.

The Authority, reserves the right to accept or reject all or any part of the quotation if you have failed to provide the information requested in this quotation or you have submitted any modification or any qualification to the terms and conditions of contract.

The Authority does not bind itself to accept the lowest priced, or any quotation, nor guarantee any value or volume and shall not be liable to accept any costs you have incurred in the production of your quotation.

The Authority will check each quotation and submission for completeness and compliance with the requirements in this Invitation to Quote document, thus, you should ensure that you carefully examine this document in full.

Quotes will be evaluated on the following Quality and Costs basis;

|  |  |
| --- | --- |
| Section | Weighting (%) |
| Technical/Quality  Including Sustainability and Social Value | 50 |
| Commercial | 50 |

A weighted scoring system will be applied to the response, the high-level evaluation criteria are given below:

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| --- | --- |
| Question | Weighting (%) |
| 1. Implementation | 30% |
| 1. Knowledge and Expertise | 15% |
| 1. Improving staff engagement | 15% |
| 1. Design and delivery, including accessibility | 20% |
| 1. Social Value | 20% |

**Scoring**

**Bidder information**

The ‘Bidders Detail’ will be ‘For Information Only’ and not scored.

The ‘Further Bidder Information’, will be given either a ‘Pass/Fail’ for each section.

**Quality**

The Authorities evaluation system is based on the familiar “weighted scoring approach”, in which the officer scores responses to the quality questions according to a pre-agreed scoring system 0-4 (see table below). The scores for the sections are then added together to give a total quality score for the quotation response.

| Score | Interpretation |
| --- | --- |
| 4  Excellent | The Tenderer’s response provides full confidence that the Tenderer understands and can deliver the Requirements well and addresses all of the requirements set out in the question. |
| 3  Good | The Tenderer’s response provides a good level of confidence that the Tenderer understands and can deliver the services and the Tenderer's response addresses all or most of the requirements set out in the question. |
| 2  Satisfactory | The Tenderer’s response provides a satisfactory level of confidence that the Tenderer understands and can deliver the services and the Tenderer's response addresses at least some of the requirements set out in the question. However, the response is lacking in some areas. |
| 1  Poor | There are weaknesses (or inconsistency) in the Tenderer’s understanding of the services and/or Tenderer's response fails to address some or all of the requirements set out in the question. |
| 0  Unacceptable | No response and/or information provided is deemed inadequate to merit a score. |

**Scoring Cost**

The financial weighted score is calculated by using the following formula:

Tenderers Price Weighted Score = Lowest Total Cost offered Tenderer Total Cost

50 (% weighting)

(Lowest Total Cost divided by Tender Total Cost multiplied by 50)

The financial score will be calculated to two decimals places.

Therefore the bidder who submits the lowest compliant bid (based on the pricing model created for evaluation purposes) will receive the full 50% available.

# **The Requirement**

The Requirement is detailed below which provides background to the project/business need, the standards or specification required alongside the essential supplier skills and the objectives of the requirement.

Background Information:

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| 1. From 1 April 2019, NHS England and NHS Improvement have been working together as a new single organisation to better support the NHS to deliver improved care for patients. NHS England and NHS Improvement are independent bodies, at arm’s length to the government. Our main role is to improve health outcomes for people in England. There are approximately 10,000 staff throughout both organisations who work within central and regional directorates across England.      1. We want NHS England and NHS Improvement to be an exemplar employer; which involves making it a great place to work, and a great organisation to do business with, where patients are at the heart of everything we do.      1. In January 2020 NHS England and NHS Improvement ran our first joint staff survey and for this survey the NHS Staff Survey was used in order to survey our staff in a consistent and systematic way in line the rest of our NHS. The next survey was run in October 2020.      1. For this upcoming survey, we would like to continue to use the NHS staff survey and ensure we are publishing our results in line with the rest of the NHS, which consequently means we would want to be launching by 4th October 2021. 2. Due to these very tight deadlines, it is desirable for the provider to have experience in running the NHS staff survey, or comparable surveys.      1. The survey will support NHS England and NHS Improvement in embedding our values and behaviours across the organisation. Obtaining feedback from staff and taking account of their views and priorities is vital for NHS England for driving service improvements and our development as an organisation. 2. The results of the staff survey are primarily intended for sole use by NHS England and NHS Improvement to review and improve staff experience so that both organisations staff can provide high quality care, for now and future generations. The survey will also support work to improve equality and diversity and reporting for the Work Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES). 3. The requirements of the service provider will be to support NHS England and Improvement in the delivery of the Staff Survey programme over a two year period i.e. 2021/22 and 2022/23. |

Standards and Service Specification:

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| Service areas: The following information details a list of service areas related to developing and running an NHS staff survey for NHS England and NHS Improvement.  Producing survey communications and promotional materials and advising NHS England and NHS Improvement on a survey communication strategy;  Providing support and advice to produce good response rates;  Setting up online surveys and dealing with technical queries;  Delivering online surveys to NHS England and NHS Improvement staff and providing technical support to enable staff to respond;  Handling receipt of online questionnaires;  Management of data, including the cleaning of anomalous data;  Storage of data in agreement with NHS England and NHS Improvement information governance requirements;  Handling the central collation of the results, and production of feedback reports;  Providing a detailed analysis of survey findings to NHS England and NHS Improvement, including organisational, directorate and group level analysis;  Providing adhoc analysis of survey findings to NHS England and NHS Improvement as directed;  Reporting of the results and ensuring that all responses are anonymous and no non-disclosive;  Management of an integrated system (if required) to link a unique identifier to NHS England and NHS Improvement Employee Staff Record (ESR) information;  Trend analysis of NHS England and NHS Improvement results, including benchmarking NHS England performance against high performing organisations including sectors outside health and social care; |

**Essential Skills Deliverables:**

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| **Project management skills**  Ability to deliver against tight timescales, using resources effectively, to a high standard that reflects well on the NHS Staff Survey and the employing organisation.  Ability to be flexible and understanding should there be any changes to the survey project plan beyond our control.  Proactive around communication and progress updates with the NHSEI Staff Survey team and technical teams.  **Analytical skills**  Data analysis skills from gathering data through to storage and handling, interpretation, and reporting, and complying with legal and policy frameworks.  Ability to present the data in a format that is meaningful and accessible for all staff, regardless of seniority.  Problem solving skills including designing appropriate systems and services that meet requirements, troubleshooting and adapting to change.  **Equality and inclusion:**  Ability to meet the accessibility needs of differently-abled and neuro-diverse participants, and provide advice or give extra support to access the survey where needed.  Inclusive communication skills that respect the wide range of gender identities across our workforce, for example our trans and non-binary staff, including gender queer and gender fluid staff.  Skills to support NHS ambitions to improve the experience of underrepresented groups, specifically for example promoting the survey in such a way to ensure good representation of protected characteristic groups.  **Technical skills**  Technical fluency in one/more of the following R/Pyhton/SQL to support the analysis of the survey data, competency in text/sentiment analysis with an established framework, provision of a robust data model for the survey information  **Customer service skills:**  Clear communication and the ability to manage a high volume of queries and respond promptly to all, in a helpful and friendly way that reflects NHS values.  Engagement skills, and alignment with the ethos of NHS staff engagement and the delivery of our NHS People Plan. |

**Deliverables:**

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| *Questionnaire Specification: The requirements for the specification for the development and delivery of an NHS England and NHS Improvement staff survey are detailed below.*  *NB this extract is from the Staff Survey Coordination Centre guidance for contractors 2021, available here:*  [Survey documents related to conducting the survey | NHS Staff Survey (nhsstaffsurveys.com)](https://www.nhsstaffsurveys.com/survey-documents/)  Online questionnaire templates will be set up by contractors for organisations running the online survey. The templates will contain the questions from the core questionnaire along with any additional local questions that the organisation has requested.  From 2021 all organisations must have an online version of their survey.  All staff within an organisation should complete an identical online survey. However the survey should employ adaptive technology to provide optimum user experience depending on screen size.  Online surveys must remain open to staff throughout the fieldwork period if the staff member is eligible and has not responded, even in cases where a response is very unlikely (i.e. someone has left an organisation and further mailings have been stopped).    Contractors must adhere to the following requirements when producing the online questionnaire, for ease of completion on screen:   * The appearance of the questionnaire is very important. It should appear neat and professional.   + The main colour used in the online questionnaire is Pantone Process Blue C, or R:0 G:145 B:201. The light blue used for the bands at the top of each question is a 25% tint of the same colour (Pantone 290 C, R:196 G:216 B:226).   + See [NHS Identity Guidelines (england.nhs.uk)](https://www.england.nhs.uk/nhsidentity/) * The front page should contain all the information featured on the paper questionnaire (except for the information on returning the questionnaire), including the NHS logo.   + Contractors need to include their email and phone helpline contact details.   + Any technical support information should direct queries to the contractor, as the Coordination Centre cannot assist with technical queries (e.g. passwords, new links). The contractor’s support email and phone number should appear on the front page, and at least one of these should appear at the bottom of every other page of the online questionnaire. * It is not permitted for contractors to include their own organisation’s logo anywhere on the survey. * Fonts should be accessible, easy to read and consistently sized, with no special formatting other than that featured in the paper questionnaire. Use of underline, bold and italics must match that in the paper questionnaire. The font and size used should match industry best practice. * The buttons allowing respondents to move between pages should be clear to all participants regardless of any accessibility needs. * Response radio buttons/tick boxes should be sized appropriately according to the font size utilised – i.e. if a large-print font is selected, the response buttons/boxes should also be large-print. * If possible, the area around the radio buttons/tick boxes should be “clickable”, so that the response option is selected if the respondent clicks slightly outside the button/box. * Question series should be on the same page and within the same formatted section, e.g. questions 7a to 7i should all be on the same page and together in the same box, as appears in the paper questionnaires.   + This also applies to questions that are routed or filtered. * Questions should be arranged in such a way so as to avoid placing too few or too many on one page. Too many questions on one page can cause non-response if respondents do not see them; conversely too few questions on one page can cause response fatigue as respondents become bored with too many pages. * For questions that feature the “Other” response with a response text box, ensure that the text box is logically placed with the “Other” response selection, so respondents understand the two items go together. * Respondents must be able to leave questions blank. * Respondents must be able to go back to previous pages while in the process of completing the questionnaire. * Online questionnaires need to be hosted on HTTPS-enabled websites   *Timescales*  *As stated previously it is desirable that the supplier have extensive experience in running the NHS staff survey, or comparable surveys, as this project has strict timescales to adhere to in order to ensure that our staff survey is launch and published in line with the rest of the NHS.*  *We would expect the supplier to work closely with the Coordination centre to aim for launch on 4th October 2021.*    Suppliers should have the following accreditations or be able to demonstrate that their company operates systems/processes equivalent to such standards. Bidders should supply copies of their accreditation certificates or evidence of their equivalent operating systems.  • BS EN ISO 9001  • ISO 14001  • ISO 27001  Suppliers must also demonstrate their training programme and their ability to implement these products or services within an NHS setting. |

**Proposed Terms and Conditions**

The proposed terms and conditions for this engagement are the NHS Standard Terms and Conditions of goods, services, goods & services: Purchase Order Version.

The contract duration is 24 months.

No amendments shall be considered or accepted in relation to the Terms and Conditions. Failure to accept the terms will result in disqualification.

There are available to view on <https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>.

The Purchase Order will serve as the contract.

1. Responding to ITQ

###### When responding to this ITQ, Bidders must ensure that their Tender covers all the information required. Bidders must complete their Tenders within the Authorities procurement portal (Atamis) set out in the "Supplier Response Form". Failure to do so may render the response non-compliant and it may be rejected.

### In evaluating Tenders, the Authority will only consider information provided in the Supplier Response Form.

### Bidders should not assume that the Authority has any prior knowledge of the Bidder, its practice or reputation, or its involvement in existing services, projects or procurements.

### If there are any questions that do not apply to a Bidder, please answer with a N/A and explanation where appropriate.

### Where any section of the ITQ indicates a word limit, any response will be reviewed to that word limit and any additional information beyond that word limit will not be considered. Bidders must provide a word count for each question response.

###### The Authority may at its own absolute discretion extend the Deadline for receipt of Tenders specified in the timetable. Any extension to the Deadline granted under this paragraph will apply to all Bidders.

###### Tenders must be submitted via the Authorities procurement portal (Atamis) no later than the ITQ submission Deadline specified in ‘Timetable’. Tenders may be submitted at any time before the Deadline.

###### Tenders received before this Deadline will be retained unopened until the opening date.

###### The Tender and any documents accompanying it must be formatted in Word or Excel as appropriate and be in the English language.

###### Price and any financial data provided must be submitted in or converted into pounds sterling. Where official documents include financial data in a foreign currency, a sterling equivalent must be provided. Tender pricing must be provided excluding Value Added Tax (VAT).

Bidders Details:

The following is an outline of what will be required and found on Atamis. Please complete this on the Atamis portal directly.

*Please ensure a response is provided for all the sections below.*

|  |  |
| --- | --- |
| *Company Name* | IQVIA Ltd |
| *Company Address* | 210 Pentonville Road, London N1 9JY |
| *Company’s representative name and title* | Redacted, Director, UK&I Healthcare |
| *Contact telephone number* | Redacted |
| *Email address* | Redacted |
| *Address for correspondence* | 24 The Plantation, London SE3 0AB |
| *Date of Submission* | 1 September 2021 |
| *Company Registration Number* | 03022416 |
| *VAT Registration Number* | GB450315485 |

# Further Bidder Information:

*Please ensure a response is provided for all the questions below.*

|  |  |  |
| --- | --- | --- |
| *1.* | *Has your organisation met all its obligations to pay its creditors and staff during the past year?* | Yes |
| *2.* | *If your answer to the above is No, have you rectified the situation resulting in your organisation now being able to pay its creditors and staff?* |  |
| *3.* | *Is your company or any group company (your Organisation) or are any of the directors/partners/proprietors in a state of bankruptcy, insolvency, compulsory winding up, and receivership, composition with creditors or subject to relevant proceedings?* | No |
| *4.* | *Please confirm that data is stored in line with the General Data Protection Regulations 2018 where applicable* | Confirmed |
| *5a.* | *Please confirm that you accept NHS England’s Purchase Order Terms and Conditions in full with no modifications. This offer and any contract arising from it shall be subject to these Terms and Conditions and all other items or instructions as issued in this bidder response.*  [*https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services*](https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services) |  |
| *5b.* | *Please confirm that you accept that any modifications to the Terms and Conditions will be rejected and may result in the bid being rejected.* |  |
| *6*. | *Please confirm that all invoicing shall be processed through Tradeshift in line with NHS England and Improvements processes.* |  |

Bidder’s Response

Please ensure a response is provided for both the Quality (A) and Commercial (B) sections on Atamis by downloading the attachments and reuploading once completed.

1. Quality

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| --- | --- | --- | --- |
| Question 1: Implementation |  | Question % Weighting | 30% |
|  |  | |
| Based on the service specification, please demonstrate your experience of running NHS staff surveys, or comparable surveys. | | | |
| Supplier Response | | | |
| We meet all of your specified requirements.  Quality Health (now part of IQVIA) has been a key provider of the NHS National Staff Survey (NSS) since its inception in 2004; and has been delivering staff surveys in the NHS more widely for the last 35 years. Last year we delivered NSS services to 120 NHS organisations; this year we already have 133 organisations contracted with us (with final negotiations still underway with a number of others).  We confirm that we can meet your tight delivery timescales. We have a wealth of experience of mobilising surveys quickly following contract award and as all aspects of the survey are managed inhouse, we have complete control and flexibility over the entire process. We would take ownership for the mobilisation and survey management agenda, ensuring work required by your organisation is minimised to key tasks. This process would start with organisation of a project inception meeting via Microsoft Teams, ideally on the day of contract award. We would ask you to nominate a key contact within the organisation to act as survey lead, supported with a second contact to assist in the case of absence.  Our key delivery team has been in place for many years, and they have decades of experience between them:   * Redacted, Director of Insight & Feedback, joined Quality Health in 2012 and has led all of our work since then * Redacted, Business & Operations Director, joined in 2005 and has managed all of our staff survey work in recent years * Redacted, Head of IT, joined in 2008 and manages our in-house development team who set up all of our on-line surveys * Redacted, Operations Manager, joined in 2009 and manages our in-house helpline and verification teams * Redcated, Reporting Manager, joined in 2013 and is responsible for all of our staff survey analysis and reporting * Redacted, Head of Market Research and Consulting, joined in 2011 and manages our team responsible for questionnaire design and testing, and our improvement consultancy.   All of these individuals would be directly involved in this project.  Our full service is managed entirely in-house using our own trained and experienced staff; and we pride ourselves on our hands-on managed service approach underpinned by PRINCE2 Project Management methodology. We have all necessary IG, GDPR and other accreditations; and are Corporate Members of the Market Research Society.  As well as our extensive NSS experience, we also deliver:   * NHS Staff Friends and Family Test/“Pulse” surveys * Staff surveys for independent sector hospitals * Employee and volunteer surveys for hospices and other charities * Staff surveys in local authorities * Surveys of probation staff * Fire and Rescue Service staff surveys * Staff surveys for police and other emergency services.   For NHSE&I, we are currently running the major evaluation of the LAMP/LFD COVID-19 testing programme in place across all NHS settings, including a large-scale staff survey.  In Wales, we have delivered the NHS Staff Survey for the Welsh Government/NHS Wales three times over recent years; and have delivered the same in Northern Ireland. | | | |

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| Question 2: Knowledge and expertise |  | Question % Weighting | 15% |
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| Please demonstrate the added value your organisation would bring to NHS England & NHS Improvement including your industry experience and knowledge. | | | |
| Supplier Response | | | |
| **Industry experience**  Quality Health (now part of IQVIA) has been a key provider of the NHS National Staff Survey (NSS) since its inception in 2004; and has been delivering staff surveys in the NHS more widely for the last 35 years. Last year we delivered NSS services to 120 NHS organisations; this year we already have 133 organisations contracted with us (with final negotiations still underway with a number of others).  Our key delivery team has been in place for many years, and they have decades of experience between them, and all of these individuals would be directly involved in this project.  All work is carried out in-house by our highly experienced team, and we use no subcontractors – making our data capture, collection, analysis and storage uniquely secure amongst our competitors. Our employees are experts in designing, mobilising and delivering survey programmes; developing and using technology to find innovative solutions; analysing and presenting data and using a wide range of qualitative research to gather insights from patients, staff and service users.  As well as our extensive NSS experience, we also deliver:   * NHS Staff Friends and Family Test/“Pulse” surveys * Staff surveys for independent sector hospitals * Employee and volunteer surveys for hospices and other charities * Staff surveys in local authorities * Surveys of probation staff * Fire and Rescue Service staff surveys * Staff surveys for police and other emergency services.   For NHSE&I, we are currently running the major evaluation of the LAMP/LFD COVID-19 testing programme in place across all NHS settings, including a large-scale staff survey in acute and primary care settings; and a wide programme of interviews and focus groups.  In Wales, we have delivered the NHS Staff Survey for the Welsh Government/NHS Wales three times over recent years, acting as supplier to all individual NHS organisations, as well as providing the Coordination Centre activities and a range of Performance Improvement Events across Wales. We have delivered the same in Northern Ireland.  **Added value**  We would draw on all of this expertise and industry experience to advise NHSE&I on the design of this survey, and on the analysis and interpretation of results.  We will also offer a range of added value options:   * A range of communications campaigns * Advice on questions * A wide range of analysis and reporting options * Triangulation of staff survey results with data from other sources * Statistical analysis * Sentiment analysis of freetext responses * Formalised safeguarding and whistleblowing processes * Targeted presentations * Focus groups * Performance Improvement Events * Bespoke consultancy.   In particular, we would draw your attention to our engagement and improvement events. Our team will be able to work with you to devise the most appropriate format for any performance improvement event – be that online or face to face – and we can provide examples of different materials which we use to enable an effective session. This includes heat mapping and further breakdown analysis but can also include a focus on free text comments, themes arising, and breakdowns of comments by specific areas if this is appropriate. (We have shown optional pricing for these). | | | |

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| --- | --- | --- | --- |
| Question 3: Improving Staff Engagement |  | Question % Weighting | 15% |
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| Please explain your approach to supporting lasting and substantial improvement in staff engagement. Please include examples of how you would support improved staff engagement through the survey analysis.  This includes equality and diversity, including engagement with underrepresented groups of staff for example LGBT+ employees. | | | |
| Supplier Response | | | |
| IQVIA’s Market Research & Consultancy team has extensive experience of working with NHS organisations, and their staff at all levels, to formulate action plans around performance improvement and staff engagement. We work to agree the most appropriate format and content for the sessions and this can be as interactive as required to ensure full engagement and buy-in from the participants. Some recent examples of this include:   * For **Health and Social Care Northern Ireland (NHS NI)** we ran a series ofperformance improvement workshops around grievance and dismissal and how this was handled by the organisation. This was a sensitive topic area and needed to be planned accordingly, with assurances for staff attending around confidentiality and consent. As a result of these workshops, which took place in four locations around Northern Ireland, and included staff at all levels (as well as staff side representation), new policies were drafted and an organisation action plan put in place. * For **Chesterfield Royal Hospital NHS FT** we ran a series of focus groups for poor performing staff survey divisions. This began with one general workshop with the staff survey team (including colleagues from HR) and included further analysis of results and heat mapping. Following this, we worked with specific departments and developed individual targeted action plan for improvements across the organisation. Finally, we specifically worked with the lowest performing department – which included a specific focus group for this team and a chance to focus specifically on the unique challenges faced they faced and how they could be overcome. * For **Central and North West London NHS FT** we support the development of action plans for mental health community patients which includes analysis cross-division of performance; focus on free text comments and thematic analysis of these; and inter-borough analysis.   During the COVID-19 pandemic we have increasingly migrated some of this work to online platforms. This has included running a consultation event for **Wales Cancer Network and Macmillan** with Clinical Nurse Specialists across Wales around reviewing cancer care pathways in light of the pandemic; running online focus groups with carers for **Carers Trust** and a subsequent co-production workshop; and carrying out presentations and workshops style planning sessions with numerous Trusts for the CQC Mental Health Community Survey.  For this project, our team will be able to work with you to devise the most appropriate format for any performance improvement event – be that online or face to face – and we can provide examples of different materials which we use to enable an effective session. This includes heat mapping and further breakdown analysis but can also include a focus on free text comments, themes arising, and breakdowns of comments by specific areas if this is appropriate. (We have shown optional pricing for these).  Our survey analysis will include breakdowns where possible (depending on numbers) to highlight particular areas of focus for underrepresented groups, and across protected characteristics; and we will work with you to ensure that these groups are appropriately represented in any focus groups and improvement events that we run. | | | |
| Question 4: Design and delivery, including accessibility |  | Question % Weighting | 20% |
|  |  | |
| Please explain your approach in designing and delivering an online NHS staff survey. Please include information on how additional questions can be chosen, the types of reports and analysis you can provide, the timescales for delivery and your ability to provide reports at a specific group or team level. Please also explain how you exemplify best practice in accessibility. | | | |
| Supplier Response | | | |
| **Questionnaire design and delivery**  IQVIA’s bespoke questionnaire platform can be configured to your specific requirements in terms of content and aesthetics. This has been used for a number of years on NSS with around 70% of staff participating online in recent years.  The standard platform is based on the core national questions and can be changed or expanded by including questions from the additional bank modules developed nationally and/or you can add your own questions that focus on topics specific to NHSE&I.  We can provide full assistance with this process, ensuring that questions are designed to provide specific and meaningful data. We have our own library of questions to draw from; and/or our Market Research & Consultancy team can work with you to advise on, and develop, new question sets as appropriate.  The 2021 online questionnaire is already set up and approved by the National Coordination Centre, so the majority of this work is already complete - all we would need to do is make any amendments that were required to tailor this to NHSE&I. We have detailed internal quality control processes to ensure questionnaires are set up and tested according to the specific requirements and our technical team will work with you to ensure the questionnaire is tested and signed off prior to launch.  We confirm that our online questionnaire platform meets all of your specific requirements around appearance (e.g. on question spacing, colours and fonts).  **Reporting**  We will provide a comprehensive reporting package which provides early insights into the results, including the following:   * Detailed Results Tables – available mid-December 2021. This includes frequency tables of previous results, current results and positive/negative scores for each evaluative question * Access to SOLAR (online reporting portal) – available end January 2022. This provides access to your data to enable breakdown analysis of results by variables such as team or specific group level * Detailed Management Report * Presentation of results to agreed NHSS&I audience – date tbc * Theme Level Reporting – available January 2022 * Heat map (RAG report) – available January 2022 * Full freetext comments – available March 2022 * Thematic analysis of comments by theme and sentiment – available March 2022.   **Accessibility**  For all of our survey programmes, all participants have access to our freephone helpline and dedicated e-mail address, which is run in-house using Quality Health’s own trained staff. They are available Monday to Friday 9-5, with an answerphone available at all other times. They are specially trained to respond to queries about each survey programme and can provided completion of the questionnaire over the phone if staff prefer. We also provide access to our Language Line translation service in over 150 different languages, to help facilitate completion for any participants who require this additional support. We can also provide paper copies of the questionnaire if appropriate, including large print and braille.  We will also work with you prior to survey launch to advise on (and provide where necessary) communications materials to encourage update from traditionally under-represented groups. | | | |

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| Question 5: Social Value |  | Question % Weighting | 20% |
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| Describe the commitment your organisation will make to ensure that opportunities under the contract deliver the policy outcome to ‘reduce the disability employment gap’. Link to the policy outcome guidance for MAC 5.1: ‘Increase representation of disabled people’ [Social-Value-Model-Edn-1.1-3-Dec-20.pdf (publishing.service.gov.uk)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/940826/Social-Value-Model-Edn-1.1-3-Dec-20.pdf)  Please include:  ● your ‘Method Statement’, stating how you will achieve this and how your commitment  meets the Award Criteria, and  ● a timed project plan and process, including how you will implement your commitment  and by when. Also, how you will monitor, measure and report on your commitments/the  impact of your proposals. You should include but not be limited to:  ○ timed action plan  ○ use of metrics  ○ tools/processes used to gather data  ○ reporting  ○ feedback and improvement  ○ transparency  ● how you will influence staff, suppliers, customers and communities through the delivery  of the contract to support the Policy Outcome, e.g. engagement, co-design/creation, training and education, partnering/collaborating, volunteering.  Activities that demonstrate and describe the tenderer’s existing or planned:  ● Understanding of the issues affecting the representation of disabled people in the  workforce in the market, industry or sector relevant to the contract, and in the  tenderer’s own organisation and those of its key sub-contractors.  ● Collection of the views and expertise of disabled people and their representative  organisations on successfully supporting disabled employees or applicants.  ● Measures to reduce barriers to securing more jobs for disabled people in the contract  workforce. Illustrative examples:  ○ Inclusive and accessible recruitment practices, and retention-focussed  activities, including those provided in the Guide for line managers on recruiting,  managing and developing people with a disability or health condition.  ○ Introducing transparency to pay and reward processes.  ○ Offering a range of quality opportunities with routes of progression if  appropriate, e.g. T Level industry placements, students supported into higher  level apprenticeships.  ○ Working conditions which promote an inclusive working environment and  promote retention and progression.  ○ Other measures to provide equality of opportunity for disabled people into  employment, including becoming a Disability Confident employer and inclusion  of supported businesses in the contract supply chain. | | | |
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| IQVIA’s **Diversity and Inclusion Programme** covers all our operations and includes our ‘Doing the Right Thing’ Code of Conduct which brings our expectations on staff behaviours to life for employees. All staff engage in the programme and receive **annual diversity training** appropriate to their role.  Our active **Employee Resource Groups (ERGs)**, open to all employees, offer employee connection, collaboration and support for our values and include a dedicated Race, Ethnicity and Cultural Heritage (REACH) Network, Women Inspired, Multi-Faith and Lesbian, Gay, Bisexual and Transgender (LGBT+) Networks. Our **Disability Network** will go live late 2021 and will offer Disability Confidence training.  We work in partnership with **local employability partners** to deliver jobs and employability programmes. These include those left unemployed by COVID-19, and priority groups including young people who are not in employment education or training (NEET), minority ethnic groups, people with physical or learning disabilities, older persons, unemployed and ex-forces.  Across our whole business, traditionally office-based roles such as customer service are **home based** so not restricted by location. This provides a wider range of **flexible working opportunities** for those with health issues, disabilities and/or caring responsibilities.  More widely, our **inclusive and accessible recruitment practices** are designed to attract a broad range of candidates. Decisions are made by several people, with a check against criteria such as motivation, transferrable skills and required adjustments. We carry out user testing to validate our online and digital communications and ask for feedback from our candidates as to their recruitment experience. We specifically train line managers on recruiting, managing and developing people with a disability or health conditions.  As part of the **Connected Communities Workforce Plan**, both IQVIA and our supply chain advertise vacancies through local Job Brokerages to ensure a workforce that reflects the local community.  From this year, based on voluntary **data provision**, we are gathering, monitoring, and providing figures on the percentage of staff, and managers, broken down by ethnicity and disability; and on retention rates based on pregnant women and new mothers, gender, age, ethnicity, and disability.  We are joining the Government’s **Disability Confident Employer Scheme** this year, which will helps us to draw from the widest pool of talent and to secure and retain high quality staff; and as part of this, we will offer work placements, jobs and trainee roles for people with disabilities.  Our **‘IQVIA days’** give each of our 75,000 employees the opportunity to volunteer for a day each year (at IQVIA’s expense) at a charity of their choice, many choosing to support local disability charities.  As well as our work **directly supporting healthcare providers** in supporting those with disabilities, we also work with a wide range of **voluntary organisations** and **Patient Advisory Groups** working in the area of disabilities (for example, through our current work with the Neurological Alliance, and the Stroke Association).  ***We will provide a report to NHSE&I after the first year of the contract with a full breakdown of these activities and plans for Year 2.*** | | | |

B) Commercial

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| Commercial |  |
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| Bidders must provide a costed breakdown of undertaking the work in the ‘Supplier Response’ box below. Your breakdown should also include the total cost to the Authority noting VAT on a separate line if applicable.  The lowest price will be awarded the full percentage score as per the methodology above and all other scores will be calculated based upon this. The authority reserves the right to exclude bids which appear too low and remove these from the process to ensure that the commissioned service is fit for purpose.  *Maximum capped cost £105,000 Exc VAT. The contract duration is 24 months.* | | |
| Supplier Response | | |
| **Cost *per survey year* (not including VAT):**  **Breakdown redacted**  **Total £7,550** | | |