**Further Clarification Questions for HBYW Learning Partner**

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| 11, **Could you please explain the intended scope of active contract management in Q2?** | This is detailed in Pages 9 - 12 of our specification. |
| 12, **How similar is this to managing a range of third parties and suppliers delivering scope, products, or services in the context of a project team?** | We're unable to comment as to the degree of similarity desired, but we expect there will be some similarities in the work required as per our specification and those listed here. |
| 13, **What activities, events, or experiences are most relevant for ‘active contract management’?** | Activities that align with those detailed in Pages 9 - 12 of our specification. |
| 14, **What lifecycle stages of active contract management are most relevant? For example-Category Management, RFI, RFP, Public sector tendering,mobilization,supplier management, & transition management** | If not referenced in our specification, no. |
| 15, **Why is the experience in London required? Is relevant experience in other UK locations acceptable to share?** | The service will be delivered in London hospitals working within the local community, so experience of working in a similar context may be useful. Bidders are welcome to share experience from other locations. |
| 16, **Please explain how variables in the contract/project environment (which could include changing scope, adjusting timeline, and new dependencies) relate to data quality** | We are unable to identify in advance how any changes in scope/timeline etc will affect data quality. However, as an example, should timelines be reduced, providers may have less time to collect complete data, and therefore data quantity and quality may be affected. |
| 17, **In sharing expertise and innovation in sharing best practices, could you be more specific about which areas of best practice are most relevant? Could that be in project/contract management, underperforming suppliers, or addressing data quality issues?** | Improvements to the front line delivery of in-hospital youth work and associated organisational/systems development will be the most relevant. |
| 18, **Can you provide an overview of how many partners are involved and therefore need to be managed?** | There will be three providers delivering In-Hospital Youth Work services for the VRU in this period. The In-Hospital Youth Work providers are in the process of signing contracts and the provider information will be made available to the Learning Partner delivery partner. |
| 19, **High deliver plan-Would you like to see a high delivery plan for 22 months?** | Yes, as requested in Q3 of the technical questions response template. |
| 20, **Is experience/project work in the health/hospital industry required (must have?)** | No. |
| 21, **Location-What would be the split between on-site and remote work?** | We have not specified. |
| 22,**"Budget-Two budgets had been called out across documents: 250k and 500k. Is the assumption right that it would 250k across 22 months and an extension of 1 (+1) year it would be another 250k adding up to 500k?"** | Yes. |
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| 23,**"Two different dates have been called out across documentation. Could you please clarify which one is the right one for the overall project plan? (our assumption: June 2025) Learning Report & Systems Change Report due to March 2025 or June 2025"** | The In-Hospital Youth Work service is due to end in March 2025, and the Learning Partner’s ongoing work supporting the providers will finish then as well. Final payments will be made at the same time, but we expect the Hospital-Based Youth Work Programme Learnings Report & Resource Toolkit and Systems Change Paper by the end of June 2025. |
| 24,**"You confirm that all providers use their own independent case management systems. Would you mind also confirming whether any NHS data/ NHS servers need to be accessed as part of the Learning Partnership? The Evaluation Partner spec explicitly mentions health data. "** | "All providers use their own independent case management systems. Some NHS trust data is already shared with relevant in-hospital youth work providers. The Learning Partner will have access to this data. The Learning Partner will not need to arrange any access any NHS servers to deliver their work. " |
| 25,**You confirm there is no limit on the number of CVs. Can you confirm that the CVs are to be submitted as an annex and don’t count into the 2-page limit outlined for Question 6?** | CVs do not count towards the 2 page limit. |