DPS Schedule 6 (Order Form Template and Order Schedules)

Order Form

ORDER REFERENCE:	PROC 789-2024
THE BUYER:	The Competition and Markets Authority (CMA)
BUYER ADDRESS	The Cabot, 25 Cabot Square, London, E14 4QZ
THE SUPPLIER:	CM Monitor (Britain Thinks) Ltd
SUPPLIER ADDRESS:	Metherell Gard, Morval, Looe, United Kingdom, PL13 1PN
REGISTRATION NUMBER:	07291125
DUNS NUMBER:	216779966

DPS SUPPLIER REGISTRATION SERVICE ID: 430281

APPLICABLE DPS CONTRACT

This Order Form is for the provision of the Deliverables and dated 4th April 2024.

It's issued under the DPS Contract with the reference number CCS RM6126 for the provision of Research with consumers of infant formula and follow-on formula.

DPS FILTER CATEGORY(IES):
High level subject area: nutrition
Research method:
- qualitative, and within that depth interviews, focus groups
- face to face, online

Target participants:
- consumers
- parents, low income (socio-economic)

Location: England, Wales, Scotland and Northern Ireland

ORDER INCORPORATED TERMS
The following documents are incorporated into this Order Contract. Where numbers are missing we are not using those schedules. If the documents conflict, the following order of precedence applies:

1. This Order Form including the Order Special Terms and Order Special Schedules.
2. Schedule 1(Definitions and Interpretation) DPS Contract reference number CCS RM6126
3. The following Schedules in equal order of precedence:

    - Joint Schedules for DPS reference number CCS RM6126
        - Joint Schedule 2 (Variation Form)
        - Joint Schedule 3 (Insurance Requirements)
        - Joint Schedule 4 (Commercially Sensitive Information)
        - Joint Schedule 10 (Rectification Plan)
        - Joint Schedule 11 (Processing Data)
    - Order Schedules for Order reference number: PROC 789-2024
        - Order Schedule 1 (Transparency Reports)
        - Order Schedule 2 (Staff Transfer)
        - Order Schedule 3 (Continuous Improvement)
        - Order Schedule 5 (Pricing Details)
4. CCS Core Terms (DPS version) v1.0.3
5. Joint Schedule 5 (Corporate Social Responsibility) DPS Contract reference number CCS RM6126
6. Order Schedule 4 (Order Tender)

No other Supplier terms are part of the Order Contract. That includes any terms written on the back of, added to this Order Form, or presented at the time of delivery.

ORDER SPECIAL TERMS
The following Special Terms are incorporated into this Order Contract:
None

ORDER START DATE:	4th April 2024
ORDER EXPIRY DATE:	3rd September 2024
ORDER INITIAL PERIOD:	6 months, 0 days

DELIVERABLES
See details in Order Schedule 20 (Order Specification)

MAXIMUM LIABILITY

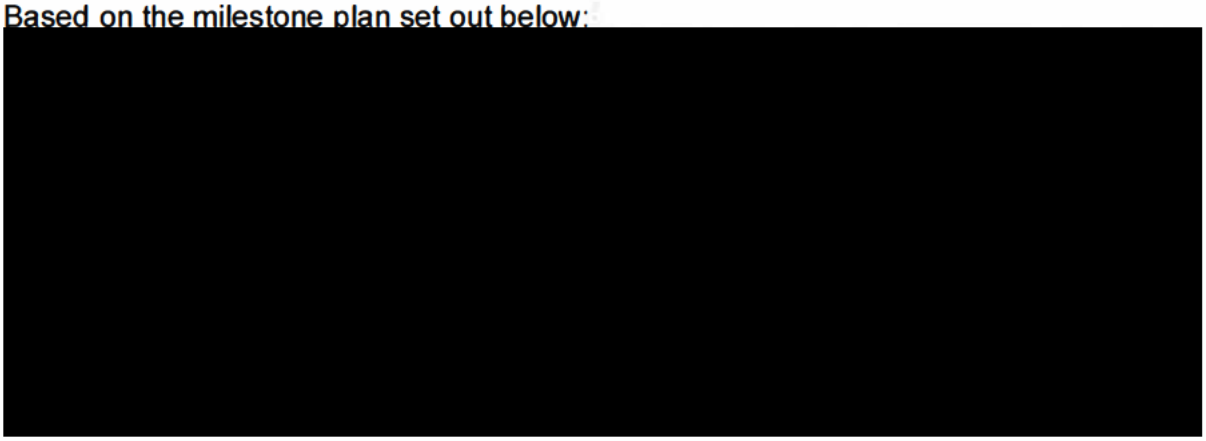
The limitation of liability for this Order Contract is stated in Clause 11.2 of the Core Terms.

The Estimated Year 1 Charges used to calculate liability in the first Contract Year is £79,025.

ORDER CHARGES
See details in Order Schedule 5 (Pricing Details)]

REIMBURSABLE EXPENSES
None

PAYMENT METHOD
BACS.
Based on the milestone plan set out below:



CMA will pay invoices received upon triggering of the milestones listed above, after an assessment that the milestones have been satisfactorily completed.

BUYER'S INVOICE ADDRESS:
Finance Team


BUYER'S AUTHORISED REPRESENTATIVE
Hannah Lockley

BUYER'S SECURITY POLICY
Available upon request from CMA.

SUPPLIER'S AUTHORISED REPRESENTATIVE

[redacted]
Thinks Insight & Strategy, West Wing, Somerset House, London WC2R 1LA, United Kingdom

SUPPLIER'S CONTRACT MANAGER
[redacted]
Thinks Insight & Strategy, West Wing, Somerset House, London WC2R 1LA, United Kingdom

PROGRESS REPORT FREQUENCY
To be agreed in the Inception Meeting and recorded in the Project Initiation Document (PID). Likely to be weekly, on average.

PROGRESS MEETING FREQUENCY
To be agreed between project team and Supplier.

KEY STAFF
[redacted]
Thinks Insight & Strategy, West Wing, Somerset House, London WC2R 1LA, United Kingdom

KEY SUBCONTRACTOR(S)
None

E-AUCTIONS
Not applicable

COMMERCIALLY SENSITIVE INFORMATION
Supplier's Commercially Sensitive Information – to be advised to CMA.

SERVICE CREDITS
Not applicable

ADDITIONAL INSURANCES
Not applicable

GUARANTEE
Not applicable

SOCIAL VALUE COMMITMENT
Not applicable

For and on behalf of the Supplier:		**For and on behalf of the Buyer:**	
Signature:	[redacted]	Signature:	[redacted]
Name:		Name:	
Role:		Role:	
Date:	04 April 2024	Date:	04 April 2024

Order Schedule 5 (Pricing Details)

The total cost for delivering the research is **£79,650+VAT.**

[redacted]

SCHEDULE 11: PROCESSING, PERSONAL DATA AND DATA SUBJECTS

1. The Supplier (Contractor) shall comply with any further written instructions with respect to processing by the Customer (Contracting Authority).
2. Any such further instructions shall be incorporated into this Schedule.

Description	Details
Subject matter of the processing	Research with UK consumers to inform the CMA's Infant Formula and Follow-on Formula Market Study.
Duration of the processing	Administrative, sample and research data (which may or does identify living individuals directly or indirectly) is to be retained in full by the Contractor until the CMA's work in this area is complete.[1,2] The CMA will advise the Contractor when the publication date is reached.[3]
Nature and purpose(s) of the processing	The nature of the processing includes (but is not necessarily limited to): the collection, recording, organisation, structuring, storage, adaptation or alteration, retrieval, consultation, use, disclosure by transmission, dissemination or otherwise making available, alignment or combination, restriction, erasure or destruction of personal data. The purpose of the processing is for the Contractor to conduct qualitative research with consumers and subsequently to provide the research findings, by way of the following outputs, to the CMA: - [redacted] - -

[1] This may include a period during which a legal challenge is made and (if made) the duration of the appeal process.

[2] Bidders should note that the potential for litigation arising from CMA cases means that participants in our research cannot be promised "complete" anonymity/confidentiality, given the possibility (however remote) that the court(s) may order disclosure. This has implications for the wording of pre-engagement emails/letters, recruitment screeners, topic guide and survey questionnaire introductions, and consents, and we will work with you to devise accurate and appropriate phrasing which does not detract from engaging participants in the research.

[3] Bidders should note that you may be required, therefore, to retain the personal data (and survey data) either for less time or for more time that you would retain data as standard (whether following the fulfilment and termination of a given research contract and/or for audit, quality assurance or regulatory purposes). We will discuss our specific data retention requirements as they apply to the proposed project with the Contractor on appointment.

	[redacted]
Categories of Data Subject	[redacted]
Type of Personal Data	***Qualitative research*** The Personal Data (PD) to be processed (or likely to be processed) for each data subject is: - First name and surname - Email address(es) (personal) - Telephone number (personal landline) - Telephone number (personal mobile) - Home address/postcode - Sex - Date of birth/age - Audio recording and/or video recording - Other personal data that may be deemed necessary for sampling, research or analysis purposes - Other personal data that may be collected through the research This PD **must not** be shared by the Contractor with the CMA in a way such that a living individual can be identified or is identifiable directly from the information in question or can be identified or is identifiable indirectly from that information in combination with other information. The CMA's lawful basis for processing under Article 6 of the UK GDPR is **consent**. • Article 6(1)(a) – "*the data subject has given consent to the processing of his or her personal data for one or more specific purposes*" The Contractor must be able to provide evidence to the CMA that data subjects: - have been informed that their participation is voluntary and solely processed for research purposes of the CMA in its official duty. - have been provided with a privacy notice that informs them how and why the CMA will use their PD in accordance with the requirements of data protection law; - have been informed of anonymisation and pseudonymisation principles that would be applied for the purpose of research and publishing a report.

	- have been informed that the Contractor is retaining data that would enable them to be individually identified by the CMA.
Type of Special Category Data	***Qualitative research*** Special Category Data (SCD) will be processed as part of this research requirement. The Special Category Data to be processed (or likely to be processed) for each data subject is: - personal data revealing racial or ethnic origin - personal data concerning health This Special Category Data **must not** be shared by the Contractor with the CMA in a way such that a living individual can be identified or is identifiable directly from the information in question or can be indirectly identified from that information in combination with other information. In relation to the processing of special category data, the CMA relies on the condition under Article 9(2)(a) of the UK GDPR that the "*the data subject has given explicit consent to the processing of those personal data for one or more specified purposes* The Contractor must be able to provide evidence to the CMA that data subjects have been informed of information relating to the processing of their personal data (including SCD) as set out in the row above.
Plan for return and destruction of the data once the processing is complete UNLESS required to do otherwise by UK law	The personal data is to be destroyed by the Contractor from all its systems at the end of the period defined under Duration of the processing.

Order Schedule 4 (Order Tender)

The Supplier will supply services in accordance with its proposal dated 11th March 2024, further clarified 27th March 2024. Submitted in response to the Competition and Markets Authority Invitation To Tender, Reference PROC 789-2024 and the Annex A: Statement of requirements to this schedule.

Order Schedule 20 (Order Specification)

This Schedule sets out the characteristics of the Deliverables that the Supplier will be required to make to the Buyers under this Order Contract

ANNEX A: STATEMENT OF REQUIREMENTS (SoR)

CONTRACT REFERENCE: PROC-789-2024
Research with consumers of infant formula and follow-on formula

About the CMA

The Competition and Markets Authority (the CMA) is an independent, non-ministerial department. We work to promote competition for the benefit of consumers, both within and outside the UK. You can find further information about what we do, and how we do it, at the CMA's website on gov.uk.

In the course of a market study or market investigation, a merger case, super-complaint investigation or other regulatory/enforcement activity, the CMA may need to commission consumer research as part of its evidence-gathering process. Research projects can be national (GB/UK), regional or local in scope, and our requirements range in scale and complexity.

Findings from consumer research are typically used as sources of evidence in CMA cases. Evidence informs critical case decisions[4] and – should parties dispute the outcomes – may be subject to legal challenge through the courts, at potentially high financial cost to taxpayers, consumers and businesses, and reputational risk to the CMA. Consequently, the CMA requires research to be conducted to the highest quality standards, being rigorous enough to withstand critical scrutiny from all stakeholders, both external and internal.[5]

Responses to this Call For Competition (CFC)

a. We require written proposals to be returned to us by **2pm, Friday 8th March 2024.**

[4] For example, the CMA may prohibit a merger from going ahead where it would result in a substantial lessening of competition (an SLC), or only permit the merger to proceed subject to undertakings or remedies.

[5] Our publication Good practice in the design and presentation of consumer survey evidence in merger cases sets out the CMA's approach to many aspects of the design, interpretation and assessment of surveys that may form part of the evidence base in merger cases. It is provided as a resource for those who may commission, conduct or submit as evidence a customer survey as part of a merger case.

b. In responding, you **must** read carefully this Statement of Requirements (SoR).

c. Proposals should be tailored specifically to the requirements as defined in this SoR and answer the questions given in Annex B of the CFC.

d. In order to facilitate the CMA's review of submitted proposals, you are required to provide information to the layout described in paragraph 2.3 of the CFC (*Tender Response and Format*).

e. Should the CMA decide to commission research on this occasion,[6] we anticipate that the Contractor will be appointed by w/c 18th March 2024, with an inception/set-up meeting in the same week.[7]

f. We require an interim presentation of the qualitative research findings by 13 May 2024 and a final presentation by 3 June 2024.

g. We require the draft written research report mid-June 2024 and the final written research report for publication mid-July 2024.

h. It should be noted that the timetable for this research is tight and timeliness of delivery of the fieldwork and other outputs is essential if the CMA is to meet its deadlines.

[6] The CMA has not yet made a definite decision to do so. We reserve the right to commission all, some or none of the research specified in this CFC. We will not pay Bidders' bid costs for any reason.

[7] For any research project commissioned by the CMA, we will always have an inception/set-up meeting. Where the timetable allows, our preference is that the meeting is held face-to-face at the CMA's London offices in Canary Wharf. Otherwise, the meeting will be conducted virtually on Microsoft Teams. The requirement for a meeting lasting 2 hours should be reflected in Bidders' costs for the proposed project.

Infant formula and follow-on formula market study

Background to the market study

On 20 February 2024, the CMA announced that it is undertaking a market study into the supply of infant formula and follow-on formula in the UK.[8] This follows our announcement on 29 November 2023 that we would carry out further work in the infant formula market to examine whether weak or ineffective competition could be leading to parents/carers paying higher prices than they need to.[9]

In our November report we highlighted that consumers may not always be equipped to make well-informed choices and that suppliers may face insufficient incentives to offer infant formula at competitive prices.

Given these concerns, our infant formula and follow-on formula market study will gather additional evidence in three areas:

a) consumer behaviour, the drivers of choice, and the information and advice available to consumers to support their decisions;
b) the role of the regulatory framework and its enforcement in influencing market outcomes; and
c) supply-side features of the market.

We are seeking to commission research to support area a) above.

The infant formula market

In our November groceries update, we set out our understanding of the infant formula market. These findings are summarised below.

The core focus of our work is the infant formula market. However, follow-on formula, some milks labelled as foods for special medical purposes such as 'anti-reflux' and 'comfort milks',[10] and growing up milk, are also likely to affect how this market operates. For this reason, they are also included within the scope of our market study and this research.

[8] https://www.gov.uk/cma-cases/infant-formula-and-follow-on-formula-market-study
[9] CMA publication: Price inflation and competition in food and grocery manufacturing and supply (publishing.service.gov.uk)
[10] Formulas labelled as foods for special medical purposes are in the scope of the market study to that extent that they are a) suitable from birth and b) sold directly to consumers without prescription. These formulas are designed for infants with a diagnosed disease, disorder or medical condition.

Infant formula is an essential, non-substitutable product for those who use it

Infant formula is designed for use in the first months of life and is the only substitute for breastmilk which can satisfy, by itself, the nutritional requirements of healthy babies until appropriate complementary feeding is introduced. As such, infant formula is an essential and non-substitutable product for those who use it and one which many consumers must continue to purchase in the same quantities, even in the face of price rises.

Complementary feeding begins at around six months. From this point and up to one year of age, consumers will still need to provide infants with either breastmilk, infant formula or follow-on formula. As such, infant formula or follow-on formula can, for some consumers, continue to be essential and non-substitutable products.

The proportion of infants totally or partially breastfed in England at six to eight weeks in 2022/23 stood at around 49%.[11] Differences rates of use of infant formula can be seen in different population groups. For example, greater use of infant formula (as opposed to breastfeeding) has been found in the UK amongst younger mothers (below age 30); those living in more deprived areas; and those who finished education earlier. Higher rates of breastfeeding and lower use of infant formula are found amongst minority ethnic groups.[12]

Danone is the main manufacturer in the infant formula market and produces Aptamil and Cow & Gate. Nestle manufactures SMA and Little Steps, while HiPP and Kendamil manufacture branded products under their own names. Aldi is the only retailer to produce an own-label product, under the Mamia brand.

There is significant price differentiation between infant formula products

The regulations concerning infant formula seek to ensure that all products will satisfy, by themselves, the nutritional requirements of infants in good health until appropriate complementary feeding is introduced.[13] The NHS states that this means that, 'there's no evidence that switching to a different formula does any good or harm'.

Rules around the labelling, promotion and advertising of infant formula also mean that claims relating to nutrition and health are prohibited. Similarly, advertising and

[11] Breastfeeding at 6 to 8 weeks after birth, Apr 22 to Mar 23, Office for Health Improvement and Disparities. Experimental data
[12] Publication: Infant Feeding Survey – UK, 2010
[13] Legislation: Commission Delegated Regulation (EU) 2016/127 (Retained direct EU legislation)

promotion of infant formula directly to consumers, including retail level practices such as special displays or discount coupons are effectively prohibited.

Where a product is compositionally very similar, and suppliers cannot advertise or make distinctive claims about it, it would ordinarily be expected that there would be limited price differentiation. But prices of infant formula – even between brands produced by the same supplier – differ significantly.

According to First Steps Nutrition Trust, the price per 100ml of reconstituted powdered infant formula based on cow's milk in August 2023 varied from 13p per 100ml for the cheapest product (Cow & Gate First Infant Milk, 1200g pack) to 35p per 100ml for the most expensive (Aptamil 1 First Milk Tabs, 552g pack).[14]

Each brand offers a wide range of baby milk products, not all of which are necessary

Each manufacturer may offer several different infant formula products as well as follow-on formula and growing up milks. Danone and Nestle offer three different, progressively more expensive, product 'tiers', for each of their infant formula, follow-on and growing up milks.

Despite being strictly regulated, manufacturers use similar branding and labelling to suggest that infant formula, follow-on formula and other growing up milks are part of an infant/toddler's feeding 'journey'. However, not all of these products are necessary.

Specifically, once complementary feeding starts at around 6 months of age consumers can choose to progress from infant formula to follow-on formula which is marketed as suitable for infants aged between 6 and 12 months. The NHS however recommends that: 'first infant formula is the only formula your baby needs. Your baby can stay on it when you start to introduce your baby's first solid foods at around six months, and they can drink it throughout their first year.'

In the US, where infant formula products can be marketed direct to consumers, follow-on products are not widely available, and infant formula products are typically labelled as being suitable from birth to 12 months. In effect, follow-on formula is a product that appears to exist in order to indirectly market infant formula.

Similarly, from 12 months onwards infants can be introduced to cow's milk and while growing up milks are available for children of this age, the NHS says that there is no evidence to suggest that growing up and toddler milks provide extra nutritional benefits to whole cow's milk for young children.

Consumers choose a brand at a vulnerable moment, and brand loyalty is high

[14] Publication: FSNT (2023), Costs of infant formula, follow-on formula and milks marketed as foods for special medical purposes available over the counter in the UK, Table 3

There is limited published research on what influences consumer choice of particular infant formula products. However, we have seen evidence that around three quarters of consumers choose an infant formula product pre-birth or at birth (in hospital).

We have heard from stakeholders that consumers may not always realise that all infant formula products provide all of the nutrients a healthy infant needs. Stakeholders also told us that the following factors are the likely biggest drivers of consumer decision-making: recommendations from friends and family; advice from health professionals; brand awareness generated through marketing of follow-on formula and other growing up milks though multiple different channels and other services like baby clubs; previous experience with a particular brand; and using a particular brand in healthcare settings. We heard that lower prices were not often a significant factor in decision-making and that there was little switching between brands.

Reflecting this, there appears to be little evidence that, in the face of growing cost-of-living pressures, consumers are choosing the cheapest brands, or own-label alternatives. This is despite there being significant savings from doing so, and despite regulations ensuring that all infant formula products provide all the nutrients a healthy baby needs.

Objectives

The CMA requires qualitative research to fulfil our central research objective which is to develop our understanding of consumer behaviour when choosing infant formula to help us better understand how this market is working for them. We are particularly focused on understanding when decisions are made, the drivers of choice, and the information and advice which have supported decisions. Within this, the research will need to explore:

a) Choosing to use formula: Why and when do consumers decide to, or have to, start using infant formula? Which product/brand (including formulas labelled as foods for special medical purposes) and in which format do they use? Where do consumers get information about infant formula from, and which of these sources/channels are most influential and trusted?
b) Awareness and understanding: Are consumers aware of the different brands/products of infant formula? How did they come to know about these products/brands? What do consumers perceive the differences between them to be (including products such as hungry baby formula, anti-reflux and comfort milks)? Are they aware that all infant formula products provide all of the nutrients a healthy baby needs? Are they aware that they do not need to purchase follow-on milk, and that growing-up milk is unnecessary?

c) Choice: How do consumers choose which product/brand of infant formula to use and what factors drive their decisions? How does price influence decision-making? How does brand awareness (including labelling and marketing of other formula products), and its reputation, as well as its product offering and availability, influence decision-making? How do consumers assess quality or other benefits a product might provide their baby with? Are consumers able to differentiate between different formula packaging? Do consumers experience any pressures when choosing brands/products of infant formula?

d) Barriers to purchasing cheaper products. Are there any barriers preventing consumers from choosing a cheaper infant formula product when they first want, or need, to use it (for example, child dislikes, social stigmas, perceived quality of higher priced products, safety concerns)?

e) Switching between brands. Do consumers try more than one infant formula product/brand at the outset or consider switching later on? What factors drive their decisions? Where consumers try other products/brands, what factors influence their choices?

f) Other formulas. When infants are 6-12 months old, do consumers use infant formula or follow-on formula, and what factors drive their choices? What drives their decisions about which brand/product do use? From age 1 onwards, do consumers anticipate that they will use cow's milk, or 'stage 2' then 'stage 3' growing up milks, and what do they think will drive their choices?

Population of interest

The primary population of interest for this research is UK adults aged 16+ who needed to, or chose to, give their child infant formula (exclusively or in combination with breastfeeding) and were responsible either wholly or jointly for deciding which product/brand to use.

Using ONS data we estimate that between 1 and 2% of UK households currently have a baby aged 10 months or younger which had been fed formula either exclusively or in combination with breastmilk in the last 7 days.[15]

We recommend restricting participation in the qualitative research to those who are currently using infant formula or follow-on formula. We are keen to ensure participants in the research can recall as accurately as possible the factors driving their initial decisions around use of formula and any subsequent decisions related to switching, using follow-on formula etc. We would welcome Bidders' views on:

[15] ONS, 2021 data. Respondents were asked about use of infant formula when babies were aged between 4 and 10 weeks and either infant formula or follow on formula when babies were aged between 4 and 10 months.

a) How the research can best strike a balance between respondents being able to accurately recall the details of their experience, while ensuring that different cohorts (described below) are sufficiently represented in the sample.
b) What techniques could be used to ensure respondents are able to recall specific elements of their decision-making when this might not be particularly easy for most to recall.

Sample design and methodology

Our view is that qualitative research is most appropriate as it is likely to enable us to explore consumers' experiences, behaviour and understanding in depth. Qualitative research is also thought to be most appropriate because decisions around feeding can be personal and sensitive and exploring this may require participants to recall particularly stressful periods, for example if their baby was unwell or struggling to feed. Some of the areas we wish to explore may also be things that consumers have not considered or paid much attention to prior to participating in the research or they may struggle to recall.

The sample will need to have coverage across each of the four UK nations and include a mix of urban, suburban and rural areas. As well as considering that consumers may be vulnerable in this market generally, they may also be vulnerable for other reasons, for example: financial constraints, physical or mental health challenges. We are keen to know Bidders' thoughts on how we can cover this in the sample. Further to this, the sample should aim to include a range of consumers, including:

- Income levels. A range of different income levels (and/or socioeconomic groups).
- Ethnic group. A range of ethnic groups should be represented in the sample.
- Planned vs unplanned use. Those who planned to use infant formula versus those who did not plan to. Within this we would like to include some consumers who had to make a decision very quickly/in an emergency situation, for example in hospital.
- Extent of use. Those who used infant formula either exclusively, regularly (in combination with some breastfeeding) or occasionally (mostly breastfeeding).
- Use of infant formula and follow-on formula. The sample should include consumers who have used infant formula alone, as well as those who went on to use follow-on formula or only used follow-on formula.
- Brand. Representation across largest brands (both the higher and lower priced brands), main new/entrant challenger brands and the only own label product (Aldi's Mamia). However, we would welcome views from Bidders on the feasibility of this.

Please detail the research approach you recommend, the number of in-depth interviews/observation sessions/focus groups/etc, that you would undertake within the timescale and budget specified and how you would recruit the interviewees.

We will look to proactively collaborate on designing a topic guide and any stimulus materials that may be needed for use in the qualitative research.

Deliverables required

Please provide assurances, as appropriate, that the following can be delivered on time and to a high quality:

- Agreed methodology, including pre-testing/piloting.
- All research materials (including a draft Privacy Notice (for the perusal of research participants) to be submitted to the CMA for review) and stimulus materials, if applicable).
- Regular progress reports.
- A face-to-face stand-alone interim presentation of the qualitative research findings. Given the tight project timings, we appreciate this might not be based on full qualitative data, but on interim findings from the first few weeks of fieldwork.
- A PowerPoint face-to-face results presentation.
- A written report suitable for publication by the CMA (with all personal information of the research participants anonymised).
- A technical annex, suitable for publication by the CMA

Timetable

The time available for the proposed research project is tight and we require an interim presentation of the qualitative research findings by 13 May 2024, a final presentation by 3 June 2024 and the final written report for publication by mid-July 2024. A suggested timetable is outlined below.

Stage	Timings
Deadline for Bidder clarification questions	27 February 2024
CMA response to clarification questions published	29 February 2024
Deadline for receipt of proposals	8 March 2024
Successful agency appointed	w/c 18 March 2024
Inception meeting	w/c 18 March 2024
Qualitative fieldwork begins	1 April 2024

Interim presentation of the qualitative research findings	13 May 2024
Final presentation of the qualitative research findings	3 June 2024
Draft written research report for publication	mid-June 2024
Final written research report for publication	mid-July 2024

You should include a detailed timetable indicating your ability to meet the reporting deadlines set out here. If you think that the CMA's timescales are not workable, you must set out a robustly-justified alternative timescale, or alternative approach to the qualitative research. Any alternatives timescales/approaches must meet the final reporting deadlines outlined in the table above and clearly set out when the other key milestones would be met (specifically, the interim presentation of the qualitative research findings and draft final report). Please explain in your proposal why any changes are desirable and how they will improve the quality of the outputs delivered.

Team

We believe that individual researchers, their expertise and commitment, are the mainstay of high-quality research. For each member of the core executive team you put forward, you must adequately demonstrate their suitability against the CMA's specific research requirements (taking into account research topic, audience(s), objectives, methodology and so on). In each case, please provide a summary of their professional credentials, and the requisite skills and relevant expertise upon which they will draw in delivering the proposed project (generic CVs should not be submitted).

Information Security

The contract shall involve access to information classified at Official [Sensitive] level.

The information to be released is set out in the Security Aspects Letter (SAL) at Annex F of the Call For Competition.

The additional terms and conditions set out at Annex F shall apply to the Call For Competition. These provisions are mandatory UK government terms and Bidders are required to accept them without qualification. Where such terms are not accepted, the bid shall be deemed to be non-compliant, and the Bidder shall be disqualified.

UK GDPR

The contract shall involve the processing of Personal Data.

The contract shall involve the processing of Special Category Data.

The CMA will be the Data Controller and the Contractor (plus any sub-contractors used by the Contractor) will be the Data Processor(s). The Contractor is required to process personal data and Special Category Data only on the documented instructions of the CMA.

The data to be processed is set out in the further written instructions at Schedule 11 to this Annex A.

Bidders are required to accept these further written instructions without qualification.[16] Where such instructions are not accepted, the bid shall be deemed to be non-compliant, and the Bidder shall be disqualified.

If you wish to *supplement* the further written instructions at Schedule 11 (i.e., you believe that it will be necessary to process Personal Data and/or Special Category Data *in addition* to that indicated at Schedule 11), you should state this in your response to Mandatory Question 4 (MQ4) and list the additional category/categories (to the extent it/they can be determined at this stage) that you believe should be incorporated in Schedule 11.

Use of the CMA's research data

The CMA's research data is to be retained in full by the Contractor until the CMA's work in this area is completed, at which point it must be fully destroyed. The CMA will advise when this date is reached. Consequently, you may be required to retain the CMA's research data either for less time or for more time that you would retain data as standard (whether following the fulfilment and termination of a given research contract and/or for audit, quality assurance or regulatory purposes).

During the time it is retained, the CMA's research data must not be used by the Contractor for its own commercial purposes (i.e., other than for the CMA) without our express permission, in writing. The Contractor must not share the CMA's research data with any third party for any reason without the express permission, in writing, of the CMA. The Contractor must not sell the CMA's research data to any third party for any reason. These requirements apply even when the CMA's research data has been pseudonymised or anonymised.

[16] Please notify the CMA immediately if you consider that any of these further written instructions infringe the Data Protection Legislation.

Budget

Please note that the budget for this proposed project is up to £80,000 excl. VAT. Bids above this ceiling will result in the automatic exclusion of the bidder concerned.

Fees

Please provide costs as specified at Annex D of the Call For Competition.

Any assumptions that affect the costing of your core proposal should be stated (e.g., approach/methodology, eligibility, response rates, interview length, achieved sample size, etc.), and Bidders are asked to set out their core proposal costs in such a way that we are able to calculate prices when scaling is applied (e.g., if we wish to increase or reduce the number of interviews overall or if we wish to conduct interviews that are longer or shorter, etc.).

If you choose to provide one or more cost options (i.e., in addition to your core proposal costs), any assumptions that affect the costings should be stated.

Glossary

Bidder	A Supplier on the Research and Insights Dynamic Purchasing System (DPS) Agreement (RM6126) who is invited to participate in a Call For Competition and is sent a Call For Competition document.
Contracting Authority	The Competition and Markets Authority
Contractor	A Supplier on the Research and Insights Dynamic Purchasing System (DPS) Agreement (RM6126) who is awarded a contract following a Call For Competition.