**Request for Quote – Information and ResponeTempate**

**Self-Care proposal for Adult Clinical Services**

**ON BEHALF OF**

**Central London Community Healthcare NHS Trust**

**Atamis Project REF No: C343806**

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| **Service Specifications** |
| CLCH is looking to procure a new training programme for clinical staff as part of a transformation piece of work. CLCH is a Community NHS Trust is looking at how our staff support patients in the community to self-manage their health conditions independently. We are looking for a staff training programme to empower staff to support patients to self-manage these conditions independently.Below are specifications for the clinical staff training programme:1. The training provider should be an expert in delivering training to healthcare professionals to empower patients to self-manage their conditions.
2. There will be a total of approximately 84 staff being trained.
3. Training must be delivered by an interactive virtual workshop led by experts in training clinical staff to teach patients on self-care.
4. The programme must be delivered over a set period of time, generally several months with touch points that include interactive virtual workshops with staff and experts from your company.
5. Interactive virtual workshops with teams in cohorts of a maximum of 12 at a time, spaced evenly throughout the year as agreed with CLCH.
6. Staff should be able to access ongoing development and support from the provider after the training has been completed.
7. The training should be evidence based and lead to ongoing sustainability of the programme. This must be built into this training.

 \*Note: ‘**all** elements of this service specification’ refers to **all points requirements between and including points 1-7**.Please provide answers with the words limits specified in each question  |

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| **Evaluation Criteria**  |
| The Evaluation Criteria has been detailed below including the weightings available for each individual section/area.

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| **Section** | **Weighting** |
| **Quality (70%)** |
| 1. Question 1
 | 30% |
| 1. Question 2
 | 10% |
| 1. Question 3
 | 10% |
| 1. Question 4
 | 10% |
| 1. Question 5
 | 10% |
| **Price (30%)** |
| 1. Pricing
 | 30 % |

**Quality**Quality sections will be scored using the following matrix:

|  |  |  |
| --- | --- | --- |
| **Grade label** | **Grade** | **Definition of Grade** |
| Unacceptable | 0 | The proposal completely fails to meet the required standard or does not provide an answer |
| Weak | 1 | The proposal significantly fails to meet the standards required, contains significant shortcomings or is inconsistent with other aspects of the Tender |
| Satisfactory | 2 | The proposal meets the required standard in most material respects, but is lacking or inconsistent in others  |
| Good | 3 | The proposal meets the required standard in all material respects |
| Excellent | 4 | The proposal meets the required standard in all material respects and exceeds some or all of the major requirements  |

Scores for these sections will be multiplied by the weightings to calculate final scoring. **Price** The lowest priced bidder will receive the full percentage available for that pricing element (as per the weighting). Other bidders would be assessed on their variance in session price to the lowest price bidder using the following calculation:Lowest bid price x 30% (weighting) = Bidder score Bidder Price**The total bidder score will be calculated by adding all weighted scores across quality and price together to calculate the bidders’ score out of 100%.** |

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| **Submission**  |
| For any clarification questions, please contact the individual listed below. Kindly submit the quote directly to the following email address for the project:**John McLinden****Divisional Director of Nursing and Therapies**john.mclinden@nhs.net |

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| **Timeline**  |
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| RFQ Published | 05/03/2025 |
| Clarification Deadline | 12/03/2025 11:00 AM |
| RFQ Deadline | 17/03/2025 11:00 AM |
| Award Date  | 21/03/2025 |

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**Response Template**

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| **Please provide the following details.** * **Company Name:** Full legal name of the company.
* **Company Address:** Registered address, including country and postal/ZIP code.
* **Contact Information:** Main phone number, email address, and website (if applicable).
* **Company D-U-N-S** Number (Data Universal Numbering System) :
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**Quality**

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| 1. Provision- All elements of the service specification
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| Would you be able to provide all elements of this service specification, and what would your estimated budget be? (maximum 500 words) |
| Response: |

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| 2) Experience- All elements of the service specification  |  |
| If yes, do you have **experience** of delivering all elements of this specification?(maximum 500 words) |
| Response: |

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| 3) Follow up support for staff |
| What does your company’s access to ongoing development and support after the training has been completed. How is the ongoing sustainability of the programme built into the training?(Maximum 250 words) |
| Response |

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| 4) Evidence base/Accreditation |
| What evidence base is your training programme built on? Are you accredited by the Personalised Care Institute or other accreditation organisations? (Maximum 250 words) |
| Response |

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| 5) Experience working with NHS  |  |
| Do you have experience of providing this training to Community based NHS staff (District Nurses, Specialist nursing services)? If so, please provide details.(maximum 500 words) |
| Response: |

**Pricing**

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| 10) Pricing and estimated costs |  |
| Please provide an estimated breakdown of costing for the service you would provide.   |
| **Pricing Element** | **Price**  | **Notes/Comments** |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | £ |  |
|  | **TOTAL PER ANNUM** | **£** |   |