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**Expression Of Interest – Qualification Questionnaire**

**Instructions & Requirements Document**

**NHS England and Commercial**

**C311826**

**New Oversight and Assessment Framework - 360 feedback survey**

**Document owner:** Commercial & Procurement Team, NHS England

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**Purpose**

This document sets out the process for obtaining Expressions of Interest in a future project.

# **Introduction**

This Expression of Interest Qualification Questionnaire) has been prepared by NHS England (the ‘Authority’).

NHS England (NHSE) has recently developed a new Oversight and Assessment Framework for 2024/25, which is due to be published later this year. As part of the framework, it also sets out how NHSE will discharge its legal duty to annually assess each Integrated Care Board’s (ICB) performance and publish a summary.

For 2025/25, for the first time, the ICB annual assessment process will also include consideration of capability based on how well an ICB has performed against 6 core functional areas and discharged key activities, with input from the ICB’s own self-assessment, NHSE regional and national teams, and key stakeholders.

NHSE is seeking to engage a research partner to develop and conduct an annual partner survey as part of implementing the new Oversight and Assessment Framework, the purpose of which is to seek the views of ICB system partners on how they have performed in their role as a local leader of the NHS and as a co conveyor of their wider integrated care system (ICS) partnership.

###### This procurement exercise is being carried out as an Expression of Interest.

###### The Authority has taken reasonable care to ensure that the information provided is accurate in all material respects. However, suppliers’ 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 EoIor any subsequent communication.

###### No warranties or opinions as to the accuracy of any information provided in this EoIPack 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 suppliers is drawn to the fact that, by issuing this EoI, The Authority is in no way committed to awarding any contract and that all costs incurred by suppliers in relation to any stage of the Tender process are for the account of the relevant supplier only.

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 EoI (Qualification Questionnaire)**

* + Bidders’ Details
  + Bidders’ Response

1. Instructions

Project Team Details

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| Name of Team | NHSE Oversight and assessment team |
| Name and Title of EoI Lead | Andy Powell Procurement Manager |

Timeline

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| **Item** | **Date** |
| EoI Release Date & Issue on Contract Finder\* | 10.10.2024 |
| EoI Clarification Question Deadline | 17.10 2024 |
| EoI Deadline to respond to Clarifications | 19.10.2024 |
| EoiIClosing Date | 24.10.2024 (5pm) |

The timeline is indicative and may be subject to change.

Supplier Clarification Question Process

All clarification questions relating to this EoI must be submitted via the procurement portal route (Atamis) within 7 calendar days of receiving the ITQ using the template provided in the Documents section. Clarification questions received after this time will not be responded to. All Clarification questions will be responded to within 2 working days 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 suppliers will receive a copy of the question(s) and answer(s).

Evaluation Criteria

The purpose of the EoI and the Qualification Questionnaire prior to conducting a procurement process is to establish the level of interest/technical ability in the market in order to be able to deliver the scope of the Authority’s requirements in full.

The Authority, reserves the right to accept or reject all or any part of the Qualification Questionnaire if you have failed to provide the information requested

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

The Authority will check each submission for completeness and compliance with the requirements in this Expression of Interest document, thus, you should ensure that you carefully examine this document in full.

# **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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| NHS England has recently developed a new Oversight and Assessment Framework for 2024/25, which is due to be published later this year. Building on previous frameworks, it sets out NHSE’s approach to NHS Oversight.  As part of the framework, it also sets out how NHSE will discharge its legal duty to annually assess each ICB’s performance and publish a summary. This assessment must evaluate how well the ICB has discharged its functions, including duties such as improving service quality, reducing inequality, obtaining appropriate advice, promoting research, considering the 'triple aim' impact of decisions, involving patients and the public in commissioning plans, meeting financial duties, and considering local needs assessments and strategies.  For 2025/25, for the first time, the ICB annual assessment process will also include consideration of capability based on how well an ICB has performed against 6 core functional areas and discharged key activities, with input from the ICB’s own self-assessment, NHSE regional and national teams, and key stakeholders including health and wellbeing boards, Healthwatch, local authorities, and the Care Quality Commission (CQC). |

**Standards and Service Specification:**

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| The core requirements are detailed below and are expected to be conducted with input and agreement from NHSE’s oversight and assessment team:  NHSE is seeking to engage a research partner to develop and conduct an annual partner survey as part of implementing the new Oversight and Assessment Framework, the purpose of which is to seek the views of ICB system partners on how they have performed in their role as a local leader of the NHS and as a co conveyor of their wider ICS partnership.  By appointing a research partner to conduct an annual survey to gather ICB partner feedback it is anticipated that it will achieve two key aims:   * Support NHSE to effectively discharge its duty to assess annual performance of ICBs, including reviewing engagement of ICBs with their local Health and Wellbeing Boards (LHWBBs). * Provide independent system partner input into annual ICB capability assessment.   A full specification for the survey is to be developed, ahead of seeking business case approval for undertaking a commercial procurement process to appoint a research partner, which will build on the high-level parameters set out below.   1. Development of the survey: In the first year we envisage a period of engagement and testing to develop the survey ahead of implementation. This will involve working with NHSE (including regional teams) and other relevant stakeholders such as ICBs and system partners to develop the survey questions and engagement strategy – see Annex A for example questions. 2. Sampling strategy: The target audience for the survey is ICB system partners, to include as a minimum, NHS providers, relevant local authorities, Health and Wellbeing Boards, local Healthwatch/National Voices and local VCSE Alliance. This equates to 10-15 organisations per ICB (dependent on the size of the ICB and nature of their local partnership arrangements). With 42 ICBs in total, the annual survey is to be sent to a maximum of 630 recipients.   Recipient details (to include name, role, organisation and e-mail address) are to be provided by NHSE. The appointed research partner will be responsible for sending out the survey (electronically), along with any reminders required to achieve the specified response rate.   1. Survey design: The survey will be conducted on a digital basis only, with the majority of questions to be quantitative in nature (e.g. scale questions), supplemented by a small number of open questions. For example, providing the opportunity for respondents to be able to explain their response to a scale question. 2. Reporting: We will require survey results to be analysed and reported by ICB and have a national overview report as a minimum. |
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**Essential Skills & Deliverables**

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| **Approach and deliverables**  The supplier will be required to have the following skills:   * A proven track record of successfully carrying out surveys and evaluations with health and care organisations * Experience of drafting survey questions, carrying out qualitative research, developing engagement strategies and producing evaluation reports. * An in depth understanding of ICBs and partner organisations, including working with NHSE and its regions * Experience of managing relationships with key stakeholders, including NHS, social care, VCSE etc. * Specific skills include strong written and verbal communication, attention to detail, critical thinking and analysis, and problem solving skills. * Experienced project managers to ensure the project runs to time and budget.   **Budget & Timescales**  The outline timescales for development and implementation of the partner survey are as follows:   * Engagement (Jan – Mar 2025): Engagement and testing takes place to develop the survey, ready for implementation. * Survey conducted (April – June 2025): Survey sent out to identified partners and results analysed. * Reporting (By end July 2025): Final reports on survey results completed and shared with NHSE.   **The budget for this work is to be determined from the market testing with suppliers.** |

1. Responding to EoI

###### When responding to this EoI, suppliers must ensure that their submission covers all the information required. Suppliers must complete their submission within the Authority’s procurement portal (Atamis). Failure to do so may render the response non-compliant and it may be rejected.

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

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

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

### Where any section of the EoI 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. Suppliers must provide a word count for each question response.

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

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

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

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

Supplier’s 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.*

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| *Company Name* |  |
| *Company Address* |  |
| *Company’s representative name and title* |  |
| *Contact telephone number* |  |
| *Email address* |  |
| *Address for correspondence* |  |
| *Date of Submission* |  |
| *Company Registration Number* |  |
| *VAT Registration Number* |  |

Supplier’s Response

Please ensure a response is provided in the blank sections below (Page 8 onwards) for the EoI Qualification Questions. Once this questionnaire is complete please upload it into Atamis as an attachment.

Qualification Questionnaire

Please enter your responses to the questions in the spaces provided from page 8 onwards.

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| **Question** | **Word Limit & Supporting Evidence** |
| 1. What interests you in bidding for the contract based on what is outlined in the scope? 2. Based upon the scope outlined, what would the approximate cost be for delivering the 360 feedback survey over 1, 2 and 3 years? Please provide a breakdown of costs, for each year and a total for 3 years. 3. What would you expect the survey return rate to be? How would this be achieved? 4. How able do you feel you are to deliver the contract within the timescales outlined? How will you deliver the project? 5. What further information would you like NHSE to provide to support you bidding for the contract? | 250 Words Arial Size 12  Please provide a submission in an Excel Spreadsheet.  250 Words Arial size 12  500 Words Arial size 12  500 Words Arial size 12 |

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| **Supplier Response Q1** |
| *Please provide your response below and embed the supporting evidence.* |

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| **Supplier Response Q2** |
| *Please provide your response below and embed the supporting evidence.* |

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| **Supplier Response Q3** |
| *Please provide your response below and embed the supporting evidence.* |

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| **Supplier Response Q4** |
| *Please provide your response below and embed the supporting evidence.* |

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| **Supplier Response Q5** |
| *Please provide your response below and embed the supporting evidence.* |

**Annex A – Example questions**

Example questions aligned to the six functional areas of the ICB capability assessment, which have been drawn from the previous national CCG partner survey.

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|  | **Supporting activities** | **Headline key line of enquiry** | **Potential 360 questions** |
| **A: Strategy and Planning** | **Assessing Need** | How has the ICB worked with the ICP to assess current and future population health needs to ensure strategies and plans target the areas which will make the biggest improvement to health outcomes and reducing health inequalities? | 1. To what extent do you agree or disagree with each of the following statements about the JFP plan and priorities?  * I have been given the opportunity to influence the JFP plan and priorities * The JFP priorities are the right ones  1. Overall, to what extent, if at all, do you feel you have been engaged by the ICB over the past 12 months? 2. How satisfied of dissatisfied are you with the way in which the ICB has engaged with you over the past 12 months? 3. Still thinking about the past 12 months, to what extent do you agree or disagree that the ICB has listened to your views where you have provided them? 4. To what extent do you agree or disagree that the ICB has taken on board your suggestions? |
| **Strategy** | How has the ICB collaborated with partners to develop an Integrated Care Strategy, which aligns actions around a defined number of impactful goals that will improve outcomes and reduce inequalities? |
| **Planning** | How has the ICB worked with system partners to develop and agree a credible Joint Forward Plan which will deliver agreed national and local priorities? |
| **Involving and engaging** | How has the ICB promoted the involvement and engagement of a range of voices? |

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|  | **Supporting activities** | **Headline key line of enquiry** | **Potential 360 questions** |
| **B: Leadership of the NHS and partnership working** | **Leading the NHS** | How effectively has the ICB led its system, embedding collaboration as a basis for system-wide delivery? | 1. Overall, how would you rate your working relationship with the ICB? 2. Thinking back over the past 12 months, would you say your working relationship with the ICB has got better, got worse or has it stayed about the same? 3. How effective, if at all, do you feel the ICB is as a local system leader? 4. Please think about discussions that take place about the wider health economy in your area, through local groups. To what extent, if at all, would you say the ICB has contributed to wider discussions through these groups? |
| **Mutual accountability** | How has the ICB enabled mutual accountability across the system, to facilitate the delivery of system strategies and plans? |
| **Influencing** | How has the ICB worked with partners to play a full part in improving the wider determinants of health? |

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|  | **Supporting activities** | **Headline key line of enquiry** | **Potential 360 questions** |
| **C – Arranging for the provision of healthcare services (strategic commissioning)** | **Allocating resources** | How effectively is the ICB using its budget (including additional allocations made as a result of delegation of commissioning responsibility) to meet the health needs of its population, using a granular understanding of cost and utilisation data and intelligence on population health needs to allocate resources in a way which drives the greatest improvement in population health outcomes? | 1. To what extent do you agree or disagree with the following statements about the way in which the ICB plans and commissions services?  * The ICB involves and engages with the right individuals and organisations when making commissioning decisions * I have confidence in the ICB to commission high quality services for the local population * I understand the reasons for the decisions that my ICB makes when commissioning service * The ICBs plans will deliver continuous improvement in quality within the available resources |
| **Shaping the design of services and service provision** | How has the ICB worked with system partners (collaboratives and place based partnerships) to develop effective plans for the provision of care services for its population, using investment to drive quality improvement, tackle unwarranted variation and address inequalities? This includes services for which commissioning responsibility has been delegated by NHSE to ICBs. |
| **Procuring and contracting for the provision of services** | How has the ICB developed an effective plan for the procurement of NHS services (including those it has delegated responsibility for commissioning) that are in line with required frameworks and standards, and incentivise quality and value for money? |

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|  | **Supporting activities** | **Headline key line of enquiry** | **Potential 360 questions** |
| **D – Assuring performance, quality and delivery** | **Delivery assurance and oversight** | How does the ICB assure itself of delivery, finance and quality performance and discharge its oversight responsibilities in line with its agreement with NHS England? | 1. To what extent do you agree or disagree with the following statements about the way in which the ICB monitors and reviews the quality of commissioned services?  * I have confidence that the ICB effectively monitors the quality of the services it commissions * I have confidence in the ICB to act on feedback it received about the quality of service |
| **Improvement** | How has the ICB implemented an approach to improvement, which has led to tangible improvements in the quality of services and population health outcomes at all levels of the system? |
| **Financial management** | How has the ICB delivered its financial duties, balancing finances as commissioner and a system leader? |
| **Emergency response** | How has the ICB developed robust plans for emergency planning and response? |

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|  | **Activities** | **Headline key line of enquiry** | **Potential 360 questions** |
| **E – Securing transformation and learning** | **Workforce** | How has the ICB implemented the NHS Long Term Workforce Plan (LTWP) system-level actions across three key areas: growing the workforce through existing training and recruitment, retaining existing talent, and working and training differently? | 1. To what extend do you agree or disagree with the following statements about the way the ICB works with system partners to drive transformation:    * I have confidence in local workforce plans to deliver the identified priorities.    * I have confidence that the local digital and data strategy to deliver improvement in care outcomes.    * The learning, innovation and research priorities identified are the right ones. |
| **Digital** | How is the ICB leading the implementation of digital solutions which transform care delivery and put citizens at the centre of their care? |
| **Data** | How has the ICB joined-up data and digital capabilities and capacity to deliver continuous improvement in performance and outcomes? |
| **Infrastructure** | How has the ICB utilised its infrastructure to maximise value for money across the system and deliver on wider development and sustainability goals? |
| **Learning** | How has the ICB sought to embed learning, innovation and research at all levels of the system, leading to improved equity in experience, access and outcomes for people and to reduce inequalities? |

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|  | **Activities** | **Headline key line of enquiry** | **Potential 360 questions** |
| **F – Effective governance and people** | **Risk Management** | How does the ICB Board understand and monitor current and future risks to ICB delivery and proactively address shared risks? | 1. To what extent do you agree or disagree with the following statements about the overall leadership of the ICB?  * The leadership of the ICB has the necessary blend of skills and experience * There is clear and visible leadership of the ICB * I have confidence in the leadership of the ICB to deliver its plans and priorities * The leadership of the ICB is delivering continued quality improvements * I have confidence in my ICB to deliver improved outcomes for patients |
| **Board capability** | How has the ICB developed its board capability so that it is a high performing board? |
| **Effective decision-making** | How has the ICB's governance facilitated effective decision-making, ensuring that it focuses on the right priorities? |
| **Healthy culture** | How has the ICB promoted an open, safe and compassionate culture, which allows people to speak up and reflects the diversity of its population? |