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| Hack(336)smaller3 | Adults, Health and Integration |

## REQUEST FOR QUOTATION – HEALTH AND WELLBEING STRATEGY PEER RESEARCH FOR LONDON BOROUGH OF HACKNEY AND CITY OF LONDON

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| **From (Contact Officer):** | Donna Doherty-Kelly |
| **Service Area:** | Public Health |
| **Address:** | 1 Hillman Street, London, E8 1DY |
| **Date:** | 28th April 2021 |

Please submit your firm, fixed price quotation for the services above as set out in this request. Prices should be exclusive of VAT.

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| **Quotation to be returned no later than:** | **5pm Thursday 20th May 2021**  Q&A period: Until 14th May 2021 (4pm)  Moderation meeting: 25th May 2021  Implementation meeting date: 1st June 2021 (2pm) |
| **Full Description of Services:** | See specification below |
| **Envisaged Contract Start Date:** | 1st June 2021 |
| **Services required for:** | From 1st June 2021 to 14th October 2021 |
| **Expenses:** | The quoted price must be inclusive of all expenses that may arise from delivery of the services |

Your quotation will imply agreement with the London Borough of Hackney’s Conditions of Contract (sent out with this quote) in the event of an order being placed. No other terms and conditions will apply.

Please note that the information in relation to this contract should be treated as confidential.

**SECTION ONE:**

PLEASE COMPLETE BELOW:

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| **Name of Organisation:** |  | |
| **Company Registration Number:** |  | |
|  |  | |
| **Name of Insurance Company and expiry date:**  **(please include photocopies of your certificates with your bid)** |  | |
| **Amount of Public Liability Cover:** |  | |
| **Amount of Professional Liability Cover:** |  | |
| **Amount of Employer Liability Cover:** |  | |
|  |  | |
| **Name of staff carrying out the project:** |  | |
| **Status of staff – i.e. employee, director, sole trader:** |  | |
| **Description of Two Similar Contracts including who commissioned you, the value of the contract, and the names of two referees. (300 words maximum)**  **Please note that if you do not meet this criteria, your quote will not be considered.** |  | |
| **Contact details of Manager of Service for the above: (for reference purposes):** |  | |
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**SECTION TWO:**

**SPECIFICATION – HEALTH AND WELLBEING STRATEGY PEER RESEARCH FOR LONDON BOROUGH OF HACKNEY AND CITY OF LONDON CORPORATION**

**Introduction and Context**

**Hackney**

Hackney is a rich, vibrant mix of different communities and is the sixth most diverse borough in London.

There are well established Caribbean, Turkish and Kurdish, Vietnamese and Orthodox Jewish communities as well as newer communities of people from African countries and Eastern Europe.

The 2011 Census estimates Hackney’s population to be 246,300 which is expected to grow to 316,500 by 2041. Around 40% of the population come from Black and Minority Ethnic groups with the largest group (approximately 20%) being Black or Black British. 36% of the population are White British and 16% are “other White.”

Hackney has one the largest groups of Charedi Jewish people in Europe who predominantly live in the north east of the borough and represent 7% of the borough’s overall population. At least 4.5% of Hackney’s residents are Turkish and are mainly concentrated in the South, East and Central parts of the borough. At least 89 different languages are spoken in the borough.

Hackney is a relatively young borough with 25% of its population under 20 and a further 23% aged between 20-29 years old. People aged over 55 make up 18% of the population.

The proportion of children and young adults in Hackney is likely to change little between now and 2041. In contrast, the working age population (aged 16-64) is projected to rise by over 45,000 over the next 25 years. The 65+ age group is also projected to rise both in terms of numbers and the proportion of the population, particularly after 2021.

**City of London**

The City of London is both the historic and geographic heart of the capital bordered by seven central London boroughs. At just over one square mile in size it is the world’s leading international financial centre with more than 6,000 businesses, and is also an important visitor destination and transport hub.

ONS figures from previous years show the population of the City of London has been increasing – the mid 2019 estimates show a 1,000 person increase in population on the previous year (8,706)[[1]](#footnote-0) to 9,721. The main component in population change in the City of London in recent years is migration in and out rather than significant changes in birth or death rates. Housing Led population projections published by the GLA[[2]](#footnote-1) show that the City of London population is predicted to continue growing. Using 2018 figures as a baseline it projects that by 2030, the City of London population overall will have grown by around 9%. The most significant area of growth will be in the over 65 population, with the under 18 population experiencing a low rate of growth at 2% over the same period.

The City of London is easily accessible and well connected. The majority of our service users live close to our boundaries with the London Boroughs of Camden, Islington, Hackney and Tower Hamlets. Many of our current service providers also deliver contracts in these areas.

Alongside this residential population, around half a million people come into the City of London each day to work, visit or study.

Using GLA housing led projections[[3]](#footnote-2),it is estimated that around 30% of the City of London population is from a BAME group, although other sources believe the figure is up to 40%. BAME groups predominantly live in the East of the City and in the Portsoken Ward, around 40% of residents are BAME.

As can be seen below, the 18 and under population is the most diverse and the white population has the oldest age profile.

**Health and Wellbeing Boards**

Hackney and the City of London Corporation both have a Health and Wellbeing Board which are statutory committees.

Both boards, which include senior leaders from the NHS, the relevant local authority, Healthwatch and the voluntary and community sector members that work together to improve the health and wellbeing of people in Hackney and in the City of London and reduce health inequalities.

**Health and Wellbeing Strategy**

Each Health and Wellbeing Board (HWB) has a statutory duty to produce a Health and Wellbeing Strategy, setting out its priorities to address the health and wellbeing needs of local people. The strategies will set out the health and wellbeing priorities for Hackney and for the City of London over the next four years and provide an opportunity to make a real impact on tackling and improving health inequalities experienced by Hackney and City of London residents over the next 4 years.

As part of the Health and Wellbeing Strategy development for both Hackney and the City of London, a three month engagement period will take place, during which time we will work with our local communities to co-produce our health and wellbeing priorities using a peer research model.

**How the strategies will be used**

Actions will be set against our priorities in the strategy, which will be reviewed by the Health and Wellbeing Boards on a regular basis.

The strategies will be reviewed regularly against clear measures and objectives established through an accompanying delivery plan.

These strategies will guide the work of both Hackney Council and the City of London Corporation and wider partners over the next four years.

**Co production and peer research**

The strategies, priorities and actions will be developed using a model of co-production. Co-production is a way of working that involves residents and communities in equal partnership; and which engages groups of people at the earliest stages of design, development and evaluation[[4]](#footnote-3). Co-production acknowledges that people with ‘lived experience’ are often best placed to advise on what support and services will make a positive difference to their lives. Using a well defined co-production approach will ensure that a person-centred perspective is maintained throughout the development and implementation of the strategy.

This project will work within the principles of the [City and Hackney Co-production Charter](https://www.healthwatchhackney.co.uk/wp-content/uploads/2018/03/Co-production-Charter_Hackney-City_Final.pdf) to co-design the engagement framework and co-deliver resident engagement and collaborate in developing the new strategic priorities.

We aim to provide inclusive participation within the development of the strategies, connecting with diverse communities, ensuring that we are reaching out to local people whose voices we do not always hear. We will take steps to overcome barriers to participation and encourage local people, community groups and key stakeholders to have their say in the development of this strategy through using a peer research approach.

Peer researchers (also referred to as ‘community researchers’) use their lived experience and contextual understanding of a social or geographical community to help generate information about their peers that can be used for research purposes, or in this case developing local insights to co-produce the health and wellbeing strategies. They can be involved in assisting with research design, developing research tools, collecting and analysing data or writing up and disseminating findings.

There are many advantages to adopting a peer research approach, such as:

* access to less heard voices
* empowerment of participants
* the added value of lived experience
* gathering better data
* activating communities
* benefits to peer researchers by providing them with valuable work experience and training that may increase their employability in the future. A substantial body of evidence indicates that people gain confidence and self-esteem by participating in peer research and finding that they add significant value to the process. It may also promote social inclusion among groups who often experience exclusion and isolation[[5]](#footnote-4).

**Aims of service**

The aim of the service is to ensure that there are a diverse range of local residents trained to conduct and deliver peer research within Hackney and the City of London. The main focus will be on residents, with a secondary focus on the local worker population, to co-produce local health and wellbeing priorities and understand local population health and wellbeing needs. The analysis of this research will be fed back to Hackney and City of London’s Health and Wellbeing Boards regularly over a three month engagement period (June-August). The peer researchers and successful bidder will also work closely with Hackney Council and the City of London Corporation to co-design the Strategies and co-develop the monitoring and evaluation framework for the Strategies.

By using this model, we will co-produce both Hackney’s and the City of London’s Health and Wellbeing Strategy, and provide opportunities for local residents and regular worker population to be involved in shaping and monitoring the strategy throughout its development and implementation.

This peer research work will form part of a wider engagement and co-production approach to the development of the two strategies. We will also be working with local stakeholders to develop the strategy priorities and related actions linked to the identified health and wellbeing priorities. We will do this through a series of focus groups over the next three to four months. The stakeholder engagement will be overseen and delivered by Public Health and members of the strategy working group.

**Service requirements**

* Recruit local residents (between 30-45 with at least 5 being from the City of London) to work with their local communities to inform the development of strategic priorities and action plans for the two Health and Wellbeing Boards.
* Train the peer researchers on research and co-production methods so that they are able to collect and analyse feedback from the local community.
* Work with Public Health, the strategy working group and peer researchers to co-develop training materials, engagement materials and research questions.
* Work within the principles of the [City and Hackney Co-production Charter](https://www.healthwatchhackney.co.uk/wp-content/uploads/2018/03/Co-production-Charter_Hackney-City_Final.pdf) and support the development of the wider strategy engagement framework.
* Build on existing assets and resident engagement/involvement mechanisms where possible.
* Deliver the peer research over the summer months through face to face and online activities if COVID-19 guidelines allow.
* Ensure that iterative qualitative and quantitative analysis is conducted and sent to Public Health on a weekly basis.

**Deliverables**

* All deliverables should be concluded within 5 months of the start date of the project to meet a deadline of 14th October 2021
* Recruitment of 30-45 peer researchers, with at least 5 being from the City of London peer researchers - June 2021.
* Delivery of training to provide researchers with the skills required to conduct the local peer research and analysis- June 2021.
* Develop a sampling framework to ensure that we hear from communities/ residents who are less often heard and where we know there may be particular barriers to engagement e.g. undocumented migrants, homeless.
* Supporting researchers to book in and conduct research groups and interviews- June-August 2021.
* Provision of regular support and supervision for peer researchers- June- September 2021.
* Development of engagement materials that are co produced by peer researchers - June 2021, such as communication materials to raise awareness of the peer research to increase engagement with local people.
* Design of research feedback process to Hackney Council and City of London Corporation.
* Provision of weekly update reports to the commissioner- weekly.
* Attendance at stakeholder and strategy working group meetings- when required.
* Development of research materials with Hackney Council and City of London Corporation and peer researchers -June 2021.
* Provision of report summarising feedback at end of peer research for the two Health and Wellbeing Boards- end of August 2021.
* Provision of a plan to support peer researchers to get involved in other opportunities that build on their skills set after the peer research has ended- August 2021. For the City of London, throughout the project there should be ongoing work and a synergy with the development of community influencers in the Shoreditch Park and City Neighbourhood.

**Methodology**

The bidder is invited to use their expertise to advise on how best to implement and manage a project plan that will ensure the delivery of peer research from June- August 2021.

The service should be delivered using co-production principles.

The strategy engagement will follow the co-production approach set out in the C&H Co-production Charter (currently under review)[[6]](#footnote-5). Here, co-production is defined as *designing, reshaping or delivering our way of working in equal partnership with local people in order to create better services and outcomes.*

Recruitment

Recruitment of 30-45 peer researchers who represent our diverse local communities that are residents from various wards in Hackney of which 5 should be from within the City of London, targeting recruitment and delivery of research in wards or estates of higher deprivation in particular. There will need to be recruitment of researchers that can speak community languages spoken within the City of London and Hackney.

Training of peer researchers

Peer researchers will be trained up to be able to deliver 1:1 interviews, focus groups and understand co-production principles and safeguarding. They would also be trained to analyse data. Peer researchers will also be briefed on local health needs and draft priorities of the Health and Wellbeing Strategies.

Research

Strategy engagement work should build on existing assets and resident engagement/involvement mechanisms, such as attending local community meetings, networks and forums that already exist to discuss the health and wellbeing strategy.

Virtual methods of consultation and engagement are likely to be used as part of developing the strategies. The scale of virtual consultation will depend on the COVID-19 guidance at the time of the engagement. However, the provider should ensure that there are a range of inclusive ways for local people to get involved in developing the strategy, wherever possible.

This strategy will take a mixed method approach for the engagement phase. Engagement will consist of:

* 1:1 interviews
* Focus groups
* street based/ open spaces surveys with residents and workers

Snow-balling sampling methodology can be used within this work - where individuals are encouraged to discuss the priorities with their friends and family members (who live in Hackney or the City of London). Using this approach will allow us to create an informal safe space where we can further explore residents' views on possible priorities for the health and wellbeing strategies and explore potential interventions/ support to address these priorities.

There should be a sampling framework to ensure that we include communities/ residents who are less often heard and where we know there may be particular barriers to engagement e.g. undocumented migrants, homeless population

Target audiences for the peer research include:

* Faith based groups
* Racial, ethnic and cultural groups
* Carers
* Young people in care
* People living in socio-economically disadvantaged circumstances
* Adults living in care settings
* People with a physical disability or learning disability
* People with mental and physical long-term conditions
* Young people (16-24) including those with SEND
* Older people
* People with No Recourse to Public Funds, asylum seekers and refugees
* LGBTQ+ people
* Those who are homeless or sleeping rough
* people with English as a second language
* People on low wages or insecure employment

The City of London does not have pre existing groups or networks for all of these groups (for example there are no care homes within the City of London boundaries) but the successful bidder would be expected to demonstrate an innovative approach to hearing from all communities in the City and to hearing from the working population too.

**Provider experience**

The successful bidder should have experience of delivering previous qualitative and quantitative research projects, including data collection and analysis.

The successful bidder should have experience of delivering co-production programmes of work similar to the peer researcher model outlined above.

The successful bidder should have experience of working on local community empowerment projects and have connections with local residents and organisations across Hackney and / or the City of London.

The successful bidder should have experience of working with key resident groups outlined in the specification above.

The successful bidder will be expected to demonstrate an understanding of the key health and wellbeing needs in Hackney and in the City of London.

**Reporting Arrangements**

Day to day reporting will be to the Authorised Officer for the contract:

Donna Doherty-Kelly, Principal Public Health Specialist.

Contact details: [donna.doherty-kelly@hackney.gov.uk](mailto:donna.doherty-kelly@hackney.gov.uk)

There will be a written weekly progress report, provided to the Authorised Officer.

Sign-off of the draft project plan to be produced by Monday 7th June **2021**.

A final research report for submission to both Health and Wellbeing Boards for approval is required by 30th September 2021 at the latest.

**Timescales and Budget**

Contract Award is expected by **1st June 2021**.

The successful bidder is required to submit a project plan including Gantt chart (see method statements). This shall be updated and shared with the Authorised Officer alongside the monthly reporting.

Key milestones include:

1. Draft project plan– by Monday 7th June 2021.
2. Recruitment and training of peer researchers- by 30th June 2021
3. Research activity schedules- by 30th June 2021
4. Engagement materials developed- 30th June 2021
5. Peer research - June- August 2021
6. Analysis feedback- weekly
7. Final analysis report – August 27th 2021

This work is to be fully completed by 14th October 2021. A final report, for sign-off by the Health and Wellbeing Boards, will be presented to the Authorised Officer by August 27th 2021.

The maximum budget available for this contract is £25,000. This is fully inclusive of all expenses including resources, materials and travel expenses and the cost of surveys.

Payment will be subject to satisfactory performance – and will be as follows: divided into three equal instalments, with the 1st payment once work has commenced, the second payment upon recruitment of 50% of peer researchers and research has started, and third will be provided upon the production of the final project report.

Any reports or data used or created as a result of this work will remain the property of London Borough of Hackney and the City of London Corporation, although the Provider will be credited for the production of its contents. This means that the Provider will be unable to publish any findings independently or without the express written permission of Hackney Council and City of London Corporation through its Authorised Officer.

**SECTION THREE**

**Method Statements**

This section will be used to determine a score for your bid. You must demonstrate evidence of how you have delivered similar work as well as outline how you will meet the requirements of the specification.

Bids will be evaluated upon the basis of first detailing relevant experience for similar contracts and then on 80:20 quality/price ratio i.e. 80% of the score based on quality and 20% based on price.

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| **Quality 80%** | **% Score** |
| Past experience of delivering co production and peer research programmes | 20% |
| Methodology for development of peer researcher work and engaging a diverse range of residents in the allocated timescale | 30% |
| Proposed plan for peer researchers after research is complete | 10% |
| Project Plan and Delivery | 20% |
| **Price 20%** | **20%** |

Each question will be scored between 0 to 4:0 being poor, 1 being weak, 2 part met, 3 fully met and 4 exceeding requirements.

**Past experience of delivering similar co production programmes (20%)**

Please outline your previous experience of delivering similar co production and research work conducted with local communities, related health and wellbeing **(20%)**

***500 words maximum***

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**Methodology for development of peer researcher work and engaging a diverse range of residents in the allocated timescale (30%)**

1. Please outline how you will ensure recruitment of a diverse range of peer researchers representing the communities of the City and Hackney to deliver this work **(15%).**
2. How will you train and support the peer researchers to effectively reach and engage with some of our most vulnerable and disadvantaged communities, to ensure that all local people have the opportunity to contribute to the new Health and Wellbeing Strategies for the City of London and Hackney **(15%)**

***1000 words maximum***

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**Proposed plan for peer researchers after research is complete (10%)**

Please outline how your organisation will support peer researchers to access further opportunities (including volunteering, training and/or employment) once the project has come to an end?**(10%)**

***500 words maximum***

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**Project Plan and Delivery (20%)**

Please provide a GANTT chart or detailed project plan outlining how the peer research will be conducted and analysed. Please detail how you will ensure the project is delivered on time and how you will mitigate any risks that may impact on successful delivery of the project **(20%)**

***500 words maximum (Gant chart or project plan excluded from word count)***

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**Price (20%)**

Please outline your total price (inclusive of all expenses) and include your budget breakdown costs in a separate pricing schedule. Please note the maximum price for this Service is **£25,000.00.**

**On behalf of:**

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| --- | --- |
| Company Name: |  |
| Address: |  |
| Name of Signatory: |  |
| Signature: |  |
| Date: |  |

1. Office for National Statistics Mid 2019 population estimates ONS July 2020 [↑](#footnote-ref-0)
2. GLA 2018 based housing led population projections February 2020 London datastore [↑](#footnote-ref-1)
3. GLA 2016 based housing led ethnic group projections published November 2017 London datastore [↑](#footnote-ref-2)
4. https://www.nationalvoices.org.uk/wellbeing-our-way/co-production [↑](#footnote-ref-3)
5. https://icstudies.org.uk/peer\_research\_network/what-peer-research [↑](#footnote-ref-4)
6. <https://www.healthwatchhackney.co.uk/wp-content/uploads/2018/03/Co-production-Charter_Hackney-City_Final.pdf> [↑](#footnote-ref-5)