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Knowing you're
not alone is what matters...
that there is always
someone you can turn to.”
Kieran

Invitation to tender for:

**The evaluation of a 3 year service development project
providing support for anyone affected by a brain tumour diagnosis
in South East Wales.**

Introduction

Background and context

In South East Wales there are approximately 1,600 people living with the effects of a brain tumour diagnosis. Approximately 100 – 120 new cases are diagnosed each year. These people will come from all works of life, any age (including children), gender, ethnicity, socio-economic background. There are no known causes; screening is not possible; early diagnosis is an issue and treatments have not progressed significantly in 30 years. Over 50% of those diagnosed will be given a terminal prognosis, patients with a grade 4 tumour are given 6-15 months' life expectancy. After treatment most will be left with a lifelong disability or comorbidity.

Macmillan Cancer Support (Macmillan) has identified the need for support services for people affected by a brain tumour diagnosis, a group that are treatable but not curable. The need for support is great, hence Macmillan has joined forces with Brain Tumour Support (BTS), a charity that has been delivering support services in England for the last 6 years.

The physical, mental and emotional effects of a brain tumour and the treatments used result in a variety of issues and problems including

- Physically impairments, loss of sight, hearing, mobility, balance etc.
- Epilepsy and long term side effects of medication such as steroids
- Infertility
- Reduced mental capacity
- Memory loss and fatigue
- Personality changes, often leading to relationship break down
- Depression and other psychological problems
- Loss of employment, financial stability and social status

Due to a combination of the above, the main issue facing people affected by a brain tumour is **isolation**. This is because -

- Cancer in the brain has all sorts of psychological as well as physical effects such as personality change, reduced mental capacity, mood changes etc. that make it more difficult for the patient to communicate and be understood.
- The above changes often cause the carer to also withdraw from social interaction and friends and family can find it hard to understand the changes that have occurred, particularly if the patient looks well.
- Physical disabilities, fatigue and memory loss can make it difficult for them to continue with their normal daily activities and social engagements, use public transport and access online/social media.

- If a patient has brain surgery and/or epilepsy they automatically lose their driving licence and often never regain it.
- Many patients and their carers lose their income and then cannot afford to travel and take part in what were normal social activities.
- Brain cancer is a rare cancer and there are approximately 200 different sorts of brain tumour. For those trying to find comfort in connecting with others going through similar circumstances, it is difficult to make those connections without support from others, particularly in rural areas.
- People are often unaware of what support is available to them and feel that services such as 'health and wellbeing' and 'living with and beyond cancer' are not appropriate to them.

The Project

Strategic objectives of the project

To ensure that no one feels alone after the diagnosis of a brain tumour. The mission of Brain Tumour Support is to provide, patients, carers, friends and family with individualised and specialist information, guidance and emotional support for as long as it is needed.

Aim of the project

To develop and deliver a suitable and sufficient support service for anyone affected by a brain tumour in South East Wales.

Outline of support services

The support service that the charity provides is specifically designed for brain tumour patients and their families. It is offered in a variety of locations, via a variety of means and at a variety of times. Whilst much of the work is emotional support, Brain Tumour Support Workers (BTSWs) are also able to provide information and guidance on a range of issues, as well as signposting to other relevant organisations. The two BTSWs for SE Wales are trained and skilled at communicating with a wide range of people affected by complex needs and they have developed an expert knowledge of their local areas. They are client focused and start by assessing what 'support' means to each individual.

Support groups are open to anyone affected by a brain tumour for as long as they are needed. They offer a safe and relaxed environment for people to meet other likeminded people, share their experiences, express feelings and learn what might help them cope, without fear of judgement.

1:1 support via home visits, telephone, texts and email. As well as providing support themselves BTSWs are able to signpost on to other appropriate organisations and to link up people with similar issues/interests/ages for peer support. Some people like regular contact and others simply want to know that someone is there in case they need them. Support lasts for as long as it is needed, even into bereavement.

Counselling is for those individuals who require more specialised emotion support and is provided by a trained counsellor contracted to the charity.

Social media enables many people to feel part of the 'brain tumour family' and is invaluable, particularly for those who find other means of communication difficult. BTS facilitates a number of private Facebook groups which clients can access for more informal peer support. The groups are regularly monitored and managed.

Information is available via the charity website and written literature is provided, mostly sourced from other reputable sources such as Macmillan and Headway.

Project Evaluation

The evaluation is being commissioned as an overall programme evaluation.

Aim and objectives of the evaluation

The aim of the evaluation is to provide an independent assessment of the impact of the project and to gather learning and insights to inform and shape the development of future brain tumour support services in England and Wales. The project is designed to be flexible and to adapt as we learn, which means that the evaluation is central to the project's development.

The project will run from May 2019 until April 2021.

Impact

- To what extent, if any, has the project been successful at reducing social isolation within the target group (this includes patients and their loved ones)?
- In addition to social isolation, in what other ways, if any, has the support offered impacted on people's lives in the target group?
- To what extent, if any, are there still areas of unmet need?
- How aware are professionals of the support services being offered? How confident are they in referring to the service? What was the perceived impact of the service?
- Of those in the target group that have taken up the service, how did they find out about the service and how do they feel that awareness should be raised?
- To what extent did reciprocal signposting occur between BTS and other organisations offering support, guidance and information?
- What future barriers do stakeholders perceive to the success of the project and how can they be mitigated?
- What has been the added value and impact of BTS and Macmillan to those affected by a brain tumour diagnosis?

Process - key questions

- What have been the benefits and drawbacks of the delivery model? This specifically included the efficacy of groups, 1:1 support, counselling and social media.
- What are the key contextual and organisational factors that have enabled the success of the programme? E.g. equity of access and patient choice.
- How successful has the project been in delivering support services? What are the lessons learned regarding what works (and what doesn't), for whom, why and in what circumstances?
- What is the potential to replicate the project across Wales and the UK?
- What are the key challenges in the delivery of the project at a local level and how and to what extent have they been overcome?
- How well have the partners worked together to deliver the programme, and what, if anything, could have been done differently?
- What are the key lessons learnt and recommendations for BTS and Macmillan, locally, nationally (Wales-wide) and UK-wide?

Proposed approach and methodology

We will look to the expertise of the successful evaluation provider to design a robust but pragmatic evaluation. However, it is anticipated that the evaluation will:

- Adopt a mixed methods approach to the evaluation, including both qualitative and quantitative methods, therefore triangulating sources and reducing the risk of bias. The nature of the target group means that there will be mixed cognitive ability, particularly in relation to field work and collection of data. This will need to be considered throughout the evaluation.
- Include detailed case studies of patient and carers experience.
- Conduct face to face interviews with clients and professionals, triangulate this data with quantitative data collected by the internal project team i.e. CharityLog, to make conclusions and recommendations about the project and its impact and associated processes.
- Consider innovative and engaging formats for presentation of findings - such as videos, workshops, respondent involvement in presentations etc.

The successful bidder will be required to work with the partnership in a collaborative and flexible way. The project will continue to develop and evolve over time and so we would welcome bids from providers that are able to demonstrate flexibility in their approach to the evaluation and working with us.

Reporting and dissemination

Interim and final reports

An interim report and a final report, both with executive summary, will be required. All reports will be submitted in draft until an acceptable iteration is signed off by the Steering Group.

Emergent findings

As this is a longer-term and formative evaluation, the research team will be encouraged to feed emergent findings into the project team, to shape policy and delivery more immediately, as appropriate.

Clear conclusions and recommendations

Reports will be required to summarise clear, evidence based conclusions, followed by actionable recommendations. Applicants are reminded this is a pragmatic, service-focused evaluation required to facilitate service development.

Creative dissemination

Effective, innovative and engaging ways to disseminate findings to stakeholders will be looked for in applications. Making recommendations for the way forward are a key part of ensuring value for money from the evaluation process.

Timescale and Management for the Evaluation

Evaluation - Key milestones

Evaluation tendering and commissioning	September 2019
Inception meeting and methodology refinement	November 2019
Interim report, including presentation	October 2020
Final report, including presentation	March 2021
Dissemination activities	April 2021

Management arrangements

The evaluators will report directly to Rosemary Wormington, Head of Support Services, BTS, who will be the project manager for the evaluation.

The evaluation team will be required to provide brief monthly written updates and participate in quarterly face to face review meetings during the course of the evaluation, possibly by electronic

means. In addition to describing progress, these will allow for any necessary revision to the planned methodology, setting down milestones for the next reporting period.

The successful applicant will be expected to provide strong project management for the work, including a consistent key point of contact, project plan with milestones and RAG rated quarterly management update.

Resources available to support the evaluation

Resources that will be available for utility throughout the evaluation will include:

- Guidance and input from the BTS Support Team and Macmillan professionals
- Access to a wide range of expertise and resource from Macmillan's departments, including but not restricted to the Evidence Department and the Evidence Advisor for Wales

Risk Management

Applicants should submit with their bid a summary explaining what will be the key risks to delivering their evaluation and what contingencies they will put in place to minimise them. A risk is defined as any factor which may disrupt, delay or prevent the full achievement of a project objective. We are particularly interested in how the supplier will achieve any stated sample for focus groups, interviews or surveys.

Ethics and sensitivity

Bids should consider if their methodology requires formal ethical process to be followed; though it is unlikely. However, regardless of the need for formal approval, we would look to proposals to consider the ethical implications of each phase of the work and how these will be mitigated.

Budget

There is a maximum budget for the work of £20,000 (including VAT and expenses). A selection of evaluation options individually priced would be preferred, so that there are options to choose from up to the maximum of £20,000.

We expect the proposal to have detailed and transparently costed methodology and outputs, providing a breakdown of costs which include sample sizes and tasks allocated to each staff member broken down by day rate/ # days /per activity or output. The process to decide which proposal to support will include discussion on proposed costs and value for money.

Bidding process proposal requirements

Proposals should be a maximum of 20 A4 pages. CVs can be included as an appendix and should be no more than 1-page long.

The proposal should (within the page limit) cover the following:

- A succinct summary of the proposal

- Details of the approach and methods to be used, including your rationale for choosing this approach, detailed methodology (including sample sizes), analysis approach and details of your approach to reporting and dissemination
- Your organisation's experience of evaluation, particularly in the health/cancer sector in Wales
- Details of the personnel to be involved including their role for this evaluation and their previous relevant experience (CV to be included as an appendix)
- Arrangements for managing this work and quality assuring outputs, including how you would like to work with Brain Tumour Support during the evaluation
- A detailed budget, including a breakdown of time and costs per activity and per team member. The budget should be inclusive of VAT and expenses
- Details of how people affected by cancer will be involved in the planning, design, conduct and dissemination of the evaluation

Criteria for selection

We are looking for the following criteria upon which to make our selection:

- A clear and well-presented proposal
- A strong appreciation of what we're looking to achieve in the project and what we want to get from the evaluation
- A suitably qualified and experienced team, with strong experience in evaluating similar projects/programmes, ideally in the Welsh health and social care sector. A good understanding and knowledge of the wider Welsh health and social care landscape and policy and political context would be an asset
- A proposal that represents value for money
- Adopting a method which is flexible and will suit changing circumstances
- Experience of working collaboratively with stakeholders and helping them to collect data

Selection process and submission details

We are requesting all interested organisations to notify us of their intention to bid by the deadline below.

Please notify **BTS of your intention to bid by 14 September** and send an electronic version of your proposal, plus any appendices to **Rosemary Wormington at rosemary@braintumoursupport.co.uk by 28 September 2019**. Your proposal should include a signed form of tender (appended below).

Please send any questions you have on the brief by email to Rosemary Wormington by the deadline below. All questions should be submitted by email.

We will make a note of all queries received, get the relevant member of the team to answer them, and will share all the questions we get with all bidders. We will circulate responses as soon as possible, and no later than 26 September 2019. Brain Tumour Support

Contact details

Rosemary Wormington

29A high Street
Thornbury
South Gloucs
BS35 2AR

Telephone – 01454 422701 Support Office

Mobile – 07546 912594

Task	Date
ITT issued to potential suppliers	28 August 2019
Tendering organisations notify intention to bid	14 September
Deadline for queries from potential suppliers	26 September
Submission deadline for proposals	28 September
Notification of shortlisted organisations to interview	4 October
Interviews	17 October
Notification of successful bidder following interview	21 October
Inception meeting	7 November

Conditions of tendering

All the documents and information supplied with this tender ("the tender documents") are private and confidential and remain the property of Brain Tumour Support and must be returned upon demand.

Brain Tumour Support's tender documents are personal to you as the individual or the organisation that is invited to submit a tender. You must not assign or pass them to any other person or legal entity (including subsidiary or associated companies) without our prior written consent.

For your tender to be valid you must complete all the details requested in the Form of Tender:

- Where the tenderer is an individual, by that individual
- Where the tenderer is a partnership, by at least two duly authorised partners
- Where the tenderer is a company, within the meaning of the Companies Act, either by two directors or by a director and secretary of the company, such persons being duly authorised for that purpose

You must satisfy yourself, through your own efforts, of the accuracy of any information you rely on to complete your tender return. You must also satisfy yourself as to the accuracy and sufficiency of the prices and rates you tender.

The information that we have supplied is given in good faith for you to use as general guidance in the preparation of your tender. You must satisfy yourself through your own investigations of the accuracy of this information. We shall not be held responsible or liable for the accuracy of any information you use.

We cannot guarantee the total volume or value of goods and / or services that we will purchase from those organisations and individuals to whom we award a contract.

If we need to make any changes and / or additions to any of the tender documents, you will receive an e-mail to let you know this has happened. These changes and alterations will be deemed to form part of the tender documents.

BTS expects each tender to be valid, for it to accept, for a period of at least 90 days from the return date.

BTS does not bind itself to accept the lowest priced tender or any tender and it will not be liable for or pay any expenses or losses which you might incur in preparing your tender. The issue of tender documents to you is merely an invitation to treat and it does not amount to any form of offer for any purpose whatsoever. BTS is not contractually bound to consider any tender.

Any acceptance of a tender by BTS will be by letter. No other method of acceptance shall be binding on us.

Please complete and return the attached form of tender as part of your submission.

FORM OF TENDER

DECLARATION

We do hereby offer to enter into a contract with Brain Tumour Support on the terms and conditions of the Invitation to Tender, subject only to Tenderer Qualifications as may be agreed by the Brain Tumour Support.

We undertake to keep the tender open for acceptance by Brain Tumour Support for a period of ninety (90) days from the return date.

We declare that this is a bona fide tender, intended to be competitive, and that we have not fixed or adjusted the amount of the tender by, or under, or in accordance with, any agreement or arrangement with any other person. We further declare that we have not done, and we undertake that we will not do, any of the following acts prior to award of this Contract:

- (a) Collude with any third party to fix the price of any number of tenders for this Contract;
- (b) Offer, pay, or agree to pay any sum of money or consideration directly or indirectly to any person for doing, having done, or promising to be done, any act or thing of the sort described herein and above.

We understand that you are not bound to accept the lowest price, or any, tender.

Signed:

Date:

Name:

in the capacity of:

duly authorised to sign tenders for and on behalf of: