



# **#HealthNow economic evaluation**

## **Invitation to tender**

January 2023



# 1. Introduction

This invitation to tender (ITT) invites proposals to undertake an economic evaluation of the impact of our #HealthNow campaign delivered by [Groundswell](#), in partnership with [Crisis](#) and [Shelter](#).

Groundswell, as the lead delivery partner of #HealthNow, are conducting a robust evaluation of this 4-year National Lottery Community Fund funded project. We are seeking proposals to deliver an economic evaluation of key aspects of our #HealthNow programme, with a particular focus on how the establishment of Homeless Health Peer Advocacy (HHPA) services have led to improved health outcomes for people experiencing homelessness.

We welcome proposals from organisations with experience in:

- Evaluating health and/or homelessness related interventions
- Working collaboratively with various stakeholders across the country
- Working with confidential client data

**The deadline for submissions is 5pm on Thursday 2 March.**

The contractor will be selected in March, to commence work in April. We expect the work to be complete by the end of August 2023.

Further details of the tender specification and how to submit a proposal are outlined below.

## 2. About #HealthNow

[#HealthNow](#) is a UK wide campaign, funded by National Lottery Community Fund, led by Groundswell and delivered in partnership with Crisis and Shelter.

The campaign aims to work towards an inclusive health system where everyone has access to the health care they need; ultimately moving people out of homelessness. It intends to achieve this vision through building a national #HealthNow alliance that is led by and built upon the experience of homelessness and, by uniting people with experience of homelessness with health and homeless sector partners to co-produce local level and national solutions to the problem of health system inequality.

The #HealthNow campaign has five key overarching goals:

- **Awareness and understanding** - Raise awareness and understanding of barriers to accessing health services for people experiencing homelessness.
- **Local system change** - Identify barriers to accessing care and treatment when homeless, at a local level in three key partner cities and develop action plans to eradicate the barriers.
- **Supporting individuals** - Support people who are homeless to access the health care they need through locally tailored Homeless Health Peer Advocacy (HHPA) services.



- **Taking national action** - Harness insights from peer-led research and robust HHPA data capture to create annual “national actions”, which the alliance can mobilise around to create long lasting change.
- **Participation and progression** - Participation is the catalyst for the success of #HealthNow. Participation of people who are and who have been homeless. People who have experienced the inequalities. People who understand what needs to be done to change the system. All #HealthNow volunteers and many of its staff have been homeless. In return for their contribution, they receive support through the Progression Programme.

### 3. Background

The #HealthNow campaign is in its fourth year of delivery and due to end on 30 September 2023. Key achievements of the campaign so far include:

- The establishment of new [HHPA](#) services in Newcastle, Birmingham and Greater Manchester which now support a significant amount of people to access appropriate healthcare. In year three, 28 peer advocates delivered 1910 HHPA interventions with people experiencing homelessness.
- The development of our #HealthNow peer network, ensuring people experiencing homelessness’ voices are heard. The network recently consulted on new NICE guidelines on healthcare for people experiencing homelessness.
- Supporting the progression of our volunteers into employment and education, to develop confidence and skills, and work towards their individual goals. In year three, 8 peers moved into employment and 2 peers were supported to obtain settled refugee status.
- Peer researchers coproducing several [research projects](#) and interviewing over 200 people experiencing homelessness about their experiences of accessing healthcare to develop actions to address inequitable healthcare.
- The formation of local #HealthNow alliances and the national Homeless Health Partners meeting bringing together key stakeholders and those with lived experience of homelessness to tackle homeless health inequalities.

Groundswell are conducting an evaluation to understand the overall impact of the #HealthNow campaign, this will be primarily qualitative. We want to strengthen this by commissioning an economic evaluation which quantifies the impact that the campaign has had in improving health outcomes for people experiencing homelessness.

We have previously commissioned an [evaluation](#) of our London based HHPA services which provided evidenced the social and economic value of the service, this may be a useful reference for potential evaluators.



## 4. Aim of the evaluation

The economic evaluation aims to understand how the delivery of HHPA in Newcastle, Birmingham and Greater Manchester support people experiencing homelessness to have improved health and wellbeing. It should aim to answer the following questions:

- Do the outcomes associated with HHPA mean that #HealthNow makes cost savings for healthcare services which are greater than the cost incurred as a result of the programme? (e.g. through the reduction in unplanned admissions, reduction in missed appointments)
- Where are any cost savings realised, within each local system (e.g. as a result of 'unplanned care activities', such as reduced ambulance call outs, A&E attendances, missed GP or other appointments, or non-health outcomes such as reduced police interaction etc.)?
- What is the net economic impact of the service, taking into account social value achieved, cashable savings through reduced unplanned care activities, and increased access to planned treatment and care?
- What, if any, social value is achieved through improved health outcomes?

We are particularly interested in demonstrating the economic impact of HHPA interventions through understanding how patients' use of secondary care may be affected both in the short term and potentially over a period of time (e.g. the increase in proactive healthcare interventions and ability to exercise self-advocacy on a longer term basis).

We welcome proposals utilising various methodologies to answer the proposed questions. One element we would like to explore is how the use of costed case studies could illustrate the cost savings associated with HHPA delivery.

Additional evaluation questions or amendments to the proposed questions can be suggested by contractors at proposal and/or inception stage.

## 5. Working with the #HealthNow team

The work will be managed by Dr Jo Brown, Research Manager at Groundswell, with input from Rachel Brennan, National Partnerships Lead at Groundswell. A collaborative approach to working with the partners across Groundswell, Crisis and Shelter will be established.

At the evaluation inception meeting, we will work with the successful contractor to refine the proposed approach and agree on the ways that we will work in partnership. We will work closely to align the economic evaluation with the broader evaluation activities.



To support the successful delivery of this work, the contractor will have access to the following documents and data:

- Exported data sets from our CRM system, which monitors client health needs, homelessness situation and HHPA appointments (including type of support received i.e. support to register with a healthcare service, support to attend a healthcare appointment) and communications (including missed, cancelled and rearranged appointments).
- Documents outlining insights from our ongoing and past monitoring and evaluation activities.

## 6. Deliverables

The contractor will be expected to deliver on the following outputs:

- A work plan detailing how the work will be delivered including timescales
- Attendance at regular project meetings
- A short progress report in advance of each project meeting
- Ongoing updates to the Research Manager by email or telephone where needed
- A final report outlining the findings from the evaluation questions and the methodology used in an accessible format which can feed into the overall evaluation report.

## 7. Timescales

Tender Process	
ITT published	Tuesday 31 January
Deadline for clarification questions/expressions of interest	Friday 10 February
Clarification answers circulated to all interested parties	Friday 17 February
Deadline for submissions	Thursday 2 March
Interview with awarding panel	Friday 10 March
Selection of contractor	Monday 13 March
Evaluation Delivery	
Project start/inception meeting	Within two weeks of contract award
Monthly project meetings	May, June, July, August (TBC)
Completion of project	Thursday 31 August



## 8. Intellectual Property

The ownership of the research material including the final report and any data produced lies with the #HealthNow partnership.

## 9. Information sharing

To facilitate the evaluation, it is understood by all partners that information generated by the project will be shared on a regular basis with the evaluator, and information sharing arrangements will be in place from the outset of the project.

Data will be extracted from our CRM systems which monitor various aspects of HHPA service delivery in each city. The evaluator will need to take steps to ensure that any sensitive data is stored securely and processed in line with GDPR.

## 10. Budget

The budget for this research is £20,000 including VAT where applicable. The proposal should include a comprehensive assessment of costs including:

- Salary costs for each project team member to be involved in fulfilling the contract
- Other staff costs e.g., secretarial support
- Other administrative costs
- Fieldwork costs
- Overheads (if charged)
- Other costs (with detail)

If the allocated cost to conduct the outlined specification exceeds £20,000 can contractors set out what is possible within this budget and how much of the full specification falls outside of this amount and what the additional expenditure would add to the work.

Payments will be made according to the following schedule: 1/2 on receipt of a signed contract agreement and a final 1/2 when final outputs are signed off.



# 11. Responding to this ITT

Your submission should include:

- An outline of the proposed approach to the project and limitations
- An explanation of how the proposed approach addresses the questions set out in this ITT
- Details of the research methods proposed
- Indication of what data we would need to provide to answer the proposed questions
- Indication of what data you can bring to answer the proposed questions (i.e. publicly available costings for care activities)
- Information on how data will be analysed
- Any proposed adjustments to the research questions
- A schedule for completion of the work in line with timescales outlined in ITT
- The lead team member who will be the point of contact for this project if contracted
- Relevant experience of the organisation and of the individual team members who will be responsible for delivering this work
- A detailed breakdown of costs, showing the proposed input (in terms of days) from key staff involved in the evaluation
- A summary of risks associated with the work and how these can be mitigated
- Details of two referees (one must be a previous evaluation client) who can be approached if contracted

Proposals will be based on a written submission (Word, PowerPoint or PDF accepted) and a subsequent interview with the awarding panel.

We will assess research bids according to the following criteria:

- The extent to which the proposal meets the brief outlined in the ITT (30%)
- The appropriateness of the proposed methods (25%)
- The ability to meet the specified timescale (25%)
- The contractors' experience of carrying out similar work (15%)
- Overall value for money (5%)

Please send any clarification questions or expressions of interest to Jo Brown, Research Manager at [jo.brown@groundswell.org.uk](mailto:jo.brown@groundswell.org.uk) by **Friday 10 February**. Clarification answers will be circulated to all interested parties on **Friday 17 February**.

**Please submit your written submission to [research@groundswell.org.uk](mailto:research@groundswell.org.uk) with '#HealthNow Evaluation Proposal' as email header by 5pm on Thursday 2 March.**

