Wellcome Mental Health Evidence Synthesis RFP: Webinar video transcript

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Suzanne Gage
Well hello everyone and welcome to this webinar which is about the new request for proposals for the evidence synthesis programme. So before we discuss what the evidence synthesis programme is, I’d just like to get everyone to introduce themselves, so I'll go first. My name’s Suzi Gage. I’m the research lead for metrics in the field building team of the Mental Health Challenge Area at Wellcome and Niall.

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Niall Boyce
My name's Niall Boyce and I’m Head of Field Building in mental health at Wellcome.

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Suzanne Gage
And Olivia?

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Olivia Donovan
And I’m Olivia Donovan. I’m a procurement officer at Wellcome and I partner with the mental health area.

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Suzanne Gage
Excellent. Well, let’s crack on then, Niall, could you tell us a little bit about what the evidence synthesis program is?

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Niall Boyce
The evidence synthesis program is a new initiative by Wellcome and what it aims to do is really transform the role of evidence in determining research priorities for funders and for the mental health field as a whole. And it aims to do this really by linking up what’s out there, what the published evidence is, with the research that's being done in a very close way to just accelerate progress in the field. Now the mental health field is fantastic. It’s very rich, it's very complex. And it's been really good in recent years to see advances such as Open Access

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Niall Boyce
making so much more material available for researchers to use. The problem is, though, that current systems aren’t allowing all this material, and all this effort to be channeled as efficiently as it could be. So, for instance, we've got systematic reviews,

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Niall Boyce
and we’ve also got prioritization exercises. But sometimes the prioritization exercises, for instance, are aren’t based on really as comprehensive as synthesis of the evidence as they could be. And the systematic reviews are sometimes not updated as frequently as would be needed to really speed things along. So what we want to do at Wellcome is to commission a living, that is to say, a consistently and regularly updated set of systematic reviews in mental health science.
Niall Boyce
And to have priority setting based on these outputs. So our aim is to focus on foundational, early translational and late translational research in early stage depression, anxiety and psychosis, and what we'd like to do is look at personalized care, so getting the right treatment to the right person at the right time, we'd like to look for new pharmacological treatments and new non pharmacological treatments.

We'd like an evaluation of the most promising candidates at each of these stages, and we'd also like this to be updated regularly to identify dead ends, because that happens in research, to look for areas for, for further focus, and for concentrated focus, and also at areas that really can be moved on now to large scale trials.

All of this is in the RFP and a grid, and so you can have a look at that and refer to that for the definitions of what exactly we mean by early, late translational and foundational. The other thing that we'd like is to identify the gaps in research because one of the problems with looking at the published evidence is that you're only looking at the published evidence. What isn't being done? We're interested in that as well. The one exclusion that I'd stress at this point is that we're not interested in things which are currently used in treatment. So we wouldn't be interested in, say.

The comparison of what the most effective antidepressant is used in primary care, that's really the domain of other organizations such as Cochrane and such as Nice. But we would be open to looking at work on, say, the repurposing of physical health drugs for mental health purposes.

Suzanne Gage
Fabulous. So that's a very comprehensive description. Now this funding opportunity is being put out by Wellcome as a contract rather than a grant. So Olivia, could you possibly tell us a bit about why that is and what the difference is between a contract and a grant?

Yeah, so the reason we're putting it out as a contract is because as you can see from the little introduction Niall did there, there's some quite specific things we're looking for as a result of this. We will be having some set deliverables and that we would like to work very closely with you on and because of that, it fits better into sort of the contracting landscape. It's just a much closer relationship and it means that we know what outputs we will be getting from the start.

Olivia Donovan
Obviously mental health also has grants open at the moment. There isn't any conflict there. You can apply for both, but just be aware that it is a different process for contracts, and on the contract opportunities webpage on the Wellcome website there is a whole section of FAQs that goes into a little bit more detail on some specifics about contracts, things like tax and that sort of thing.
I think the thing to emphasize is that this is a program that will inform our thinking about mental health at Wellcome. So we would want to work very, very closely with the supplier throughout the duration of the funding.

And who do you think could be a supplier for this contract?

Well, we’re casting the net wide. The thing to say is this is an initial three year period of funding and we’re open to proposals from academic centres for instance, from data analytics firms, from publishers. What we really need though is a mix of the appropriate skills and that would be a mix of skills in evidence synthesis and also what we call the domain knowledge. So people who are experts in the research field of mental health themselves, including of course, lived experience.

And just to bring in in terms of the global picture, you might be aware if you’ve applied for grants before that suppliers from mainland China can’t apply for grants. This is actually due to Chinese restrictions, not UK restrictions and it doesn’t apply for contracts. So mainland China can apply for this contract.

The only countries that we can’t contract with are just those ones that are sanctioned by the UK. The up-to-date list for that can be found on the HSBC website, but in general this is an opportunity is open to all.

Thank you. So to think a little bit more about the program itself, once a supplier is in place, how will the project run from a logistical point of view, Niall?

Well, the first thing to say is that we want this to be a really inclusive, really global effort. So one option, not the only option but an option, might be to have a hub and spoke model. So what we have is as essential coordinating centre with various global networks carrying out these reviews. There are two separate parts. As I mentioned, there’s the living evidence synthesis. So actually looking at what’s out there. And then there’s the process of really making suggestions, recommendations for research priorities.

based on the outcome of those syntheses. And both the synthesis and the suggestions being updated regularly at a rate that’s appropriate to the field because we’re aware that within these various domains some are moving faster than others. So like to reiterate what our focus is, our focus is early intervention in depression, anxiety and psychosis on what we’re calling the foundational
early translational and late translational levels; the one exception there is non pharmacological
treatments where the

Niall Boyce
The phases of development differ a bit, so we’re just going for the late translational there.

Niall Boyce
As you’ll see in the RFP, as I said, this cuts down to a grid of sort of eight areas per field of
depression, anxiety, psychosis. That’s 24 reviews in total, but that’s just a suggestion for how we
might break it down. Again, we’re very interested to know how our suppliers might break it down if
they do it differently, for instance.

Niall Boyce
So there are challenges here. What exactly to focus on so we’re not including too much material or
too little material. There’s perhaps some degree of adaptation in this process. So the focus can shift
as some areas look less promising and as other areas come online, we’re very interested to know
how suppliers would address these issues. But we’re very interested, as I said, to know how people
might modify the sorts of models and ideas which we present in the RFP. We’re very open to
negotiation.

Niall Boyce
The only thing which is non-negotiable is this needs to be an inclusive project.

Suzanne Gage
Now a question that’s often asked by prospective suppliers is what is the budget for this proposal for
this project?

Niall Boyce
Right. What we’re looking for at this stage are realistic estimates from suppliers. So we’d like to hear
from you rather than setting a benchmark which you feel you have to adhere to at this particular
point. But what I can say is that we will fund for three years initially.

Olivia Donovan
And just to add from that, what we need from you in terms of budget in the expression of interest
form one of the questions asks for a cost estimate, this is non binding and we are just looking for a
single figure at that stage. However it’s good to bear in mind if you get through to the full proposal,
one of the assessment factors for that will be value for money like Niall says just to make sure we’re looking at realistic estimates, but we don’t want to set a rigid ceiling.

Suzanne Gage
Incorporating lived experience expertise is something that’s really important to Wellcome, so how has lived experience been involved in putting this RFP together?

Niall Boyce
Well, as you can imagine with an RFP this ambitious and this complex, there’s been a lot of consultation. So we’ve had internal consultations within Wellcome. We’ve also had external consultations with experts in the field. And part of this has involved talking to our lived experience advisers. Little experience is very much part of Wellcome work. It’s at the heart of what we do in mental health and we have talked to people from our lived experience group and see what they thought of the proposal and how they might.

Niall Boyce
Modify it to really make sure that it’s addressing their needs and their concerns. If you want to learn more about welcomes work with lived experience and mental health. If you just Google Wellcome mental health lived experience videos, you’ll be able to access some videos which are hosted by the Mental Elf on how lived experience works or you could also go to our website.

Suzanne Gage
Thank you. Now hopefully we have answered some questions that people who are thinking about applying for this opportunity might have. But if people have further questions on this RFP or this project, what can they do to get answers, Olivia?

Olivia Donovan
So as part of the expression of interest stage, there is a space on the form for you to put your questions in. This obviously still adheres to the expression of interest deadline of the 15th of July, and successful suppliers will then be given all the answers to all the questions which will all be made anonymous as well. In terms of more general FAQs to do with contracting, like I said before, have a look on our contract opportunities webpage and there is an FAQ.

Olivia Donovan
Thing on there, and that should hopefully answer some of some of the more general questions, but anything specific please do put into that expression of interest form.

Niall Boyce
And because we’re really keen to hear from a variety of people, as wide variety as possible of suppliers, we have kept it simple initially. So if you go to the RFP, you’ll see that there’s a link in there to a web form. It’s only a couple of hundred words. I think it’s 800 words that you fill in, easy to fill in, easy to submit. Please do because we really love to hear from you.
Suzanne Gage

Thank you very much Niall and Olivia for providing all this information if you are interested in finding out more, please head to the contracts page on the Wellcome website where you can access the full RFP which should have all the information that you need. And yes, we look forward to seeing your applications. Thank you very much.