

## Global Dialogues on the Intersection between Climate Change and Mental Health Research Q&A

Question	Answer
<p>1. What kind of project budget could we expect to work with? We recognise that you do not want to limit ambition, but this would be very useful to know this.</p>	<p>1. Wellcome have specifically not provided a budget as we ask that the supplier(s) look to cost this appropriately providing a detailed breakdown as what they think is required to deliver this activity. Value for money will represent one of the criteria against which applications will be scored.</p>
<p>2. Reading the proposal, the scope of the call is global – but might there be opportunities to propose regional activities limited to a few countries?</p>	<p>2. Regional activities should ensure appropriate representation, hence should try and engage as many countries in that region as possible. The supplier may propose to do some more targeted work in specific countries that may be particularly relevant to climate change &amp; mental health research (e.g., because of potential policy buy-in, because of vulnerability to climate change etc.).</p> <p>We anticipate a significant portion of this work will be held at a regional level i.e., regional workshops and regional findings reports. We also would anticipate regional representatives on the global steering committee / at the global workshop.</p> <p>We appreciate that ‘regional’ is still a very broad geographic scope, so suppliers are welcome to select specific countries if they feel that best serves the outcomes of this work.</p>
<p>3. We recognize that we would need to work in partnership with people and organizations within LMIC contexts and wonder if Wellcome can offer any support in introducing us to potential partners for this work?</p>	<p>3. A core competency we envision the provider to have includes: “Experience working in LMICs and equitably co-designing projects with LMIC partners”. We therefore expect the supplier to closely collaborate with LMIC partners and/or to be based in an LMIC. We will support the provider in ensuring appropriate geographical representation where possible and use our existing networks at Wellcome, but we expect the provider to lead in this process.</p>
<p>4. I am wondering whether you might have further information on the budget, even if it is purely indicative (for instance, a range, or upper limit?). For instance is this a 50 – 100k piece of work, or (as I suspect may be the case) larger than that?</p>	<p>4. Wellcome have specifically not provided a budget as we ask that the supplier(s) look to cost this appropriately providing a detailed breakdown as what they think is required to deliver this activity. Value for money will represent one of the criteria against which applications will be scored.</p>
<p>5. Does the budget we submit need to include flights, stipends etc for participants at the face-to-face conference or is there a separate budget for that?</p>	<p>5. That is correct, the budget needs to include any costs related to proposed activities, as relevant to the RFP. This may include flights, stipends etc.</p>

<p>6. Is it envisaged that people with lived experience of mental health and climate change will be on the steering group and at every level of discussion Can we include cost of training/ supporting them to fully participate?</p>	<p>6. Yes, as mentioned in the RfP people with lived experience of mental health problems and/or climate change should be included on the steering committee. Please include costs relevant to the involvement of people with lived experience in the budget.</p>
<p>7. Clarity on the outputs –you use ‘We’ a lot in the list of outputs and we are wondering if Wellcome envisage leading on any of those deliverables or outputs or if it is all down to the supplier(s).</p>	<p>7. No, we expect the supplier to lead on the activities described in the RFP but work in close collaboration with Wellcome. We (Wellcome) will still be involved throughout the project and support the supplier when and where appropriate (e.g., linking with other researchers working in climate change &amp; mental health etc.).</p>
<p>8. Given that reliable access to the internet is not always a viable option in some of the regions earmarked for this project, would the Trust be open to face to face regional workshops instead of virtual?</p>	<p>8. We are aware of the disparities in access to Internet connection around the globe and how this represents a possible barrier to diversity in the current project. We are very keen on ensuring appropriate representation of different stakeholders, including stakeholders with no or limited Internet access. We are also aware of the considerable footprint that air travel can have and are keen on reducing it whenever possible. Therefore, we would be open to considering alternatives to online workshops where the justification can be made. Suppliers are encouraged to consider alternatives to travel e.g., paying for non-air travel where possible, purchasing internet connectivity for participants to use etc).</p>
<p>9. How does Wellcome Trust define Mental Health, particularly as it relates to this project?</p>	<p>9. We do not currently have a Wellcome definition of mental health. Potential suppliers are welcome to propose their own working definition, as long as they cite appropriate sources. In the context of climate change &amp; mental health, we are taking a broad working definition, given the emerging nature of this research, encompassing the full mental health spectrum from climate emotions to psychiatric disorders.</p>
<p>10. While building the budget for the proposal, should we include indicative budgets for the hybrid global workshop? This would depend on location, number of partners and other logistical overheads. and would be hard to determine at this stage.</p>	<p>10. The cost estimate should include all costs associated with the activities described in the RFP, including the hybrid global workshop. At this stage we are only asking for an estimate and are aware that this may change depending on the proposed plan. We are planning on conducting the hybrid global workshop in a LMIC and to try and balance the need to involve as many stakeholders as possible while avoiding <i>unnecessary</i> air-travel.</p>
<p>11. At the regional level, apart from the workshops, it may be beneficial to explore other forms of</p>	<p>11. Yes, we encourage suppliers to be creative concerning different forms of engagement and methods. As long as these</p>

<p>engagement and data collection from stakeholders. Methods such as individual in-depth interviews and survey forms can complement workshops. Is there scope to consider these?</p>	<p>are relevant to achieving the goals of the RFP, they would be in scope.</p>
<p>12. What is the range of funding available or expected for this call?</p>	<p>12. Please see Q1</p>
<p>13. In the past, what range of funding was made available for calls with similar expectations and activities?</p>	<p>13. Wellcome have specifically not provided a budget as we ask that the supplier(s) look to cost this appropriately providing a detailed breakdown as what they think is required to deliver this activity. Value for money will represent one of the criteria against which applications will be scored</p>
<p>14. Are foreign currencies (e.g. USD) for this RFP accepted?</p>	<p>14. Yes, we can pay in other currencies. Please ensure that this is clear in your proposal.</p>
<p>15. Are there caps or restrictions on any fees for private companies or for indirect or overhead costs?</p>	<p>15. As this is a contract and not a grant, there are no restrictions on fees and there are no specific overhead/indirect cost categories. Please ensure you include all the costs needed to complete the project on time and in full.</p>
<p>16. To clarify, lead consultants are required to conduct the recruitment of various stakeholders throughout the project eg. For regional workshops – youth ambassador, co-chairs etc. but Wellcome will be involving stakeholders from WHO, UN separately and the involvement will be discussed at the start of the programme?</p>	<p>16. Throughout the project, the supplier will lead on the identification and recruitment of relevant stakeholders. However, Wellcome will support the supplier in this exercise by building on existing relationships with different stakeholders.</p>
<p>17. For regional workshops, can they be solely focused on one region (eg. UK based) or are you looking for proposals to integrate multiple LMIC regions?</p>	<p>17. No, we envision the regional workshops to cover a large range of different geographies and not to be based in one single country. The supplier is welcome to propose different ways of dividing global geographies into regions (e.g., using the WHO regional system) or justify prioritizing specific countries within a certain region. Within the regional workshop, specific countries may be selected for more targeted country-level activities (see Q2)</p>
<p>18. What is the support given by Wellcome on the dissemination of information at the end of the project? There is mention of taking an iterative approach but what is the final deadline of when activities by the lead consultant need to be done by? Is there an opportunity to hand over the</p>	<p>18. We envision the supplier to lead on the dissemination strategy and Wellcome will support this process. However, the supplier will not be responsible for the dissemination once the contract has ended. The supplier will liaise with Wellcome in the final stages of the project to ensure that</p>

<p>communications to a Wellcome team to ensure a communications strategy is continued.</p>	<p>there is a sustainable dissemination plan once the contract has ended.</p>
<p>19. Pg 1 – To what extent does Wellcome expect the supplier to account for the impacts of COVID-19 when collecting data on mental health and climate change? COVID-19 created enormous mental-health challenges, particularly in LMICs, which likely underpin and/or exacerbate mental health challenges associated with climate change.</p>	<p>19. We do not envision primary data collection on climate change &amp; mental health as part of the current project (although data may be collected from workshop stakeholders, e.g., via interviews or surveys etc.). When organizing the workshops, we expect the supplier to conduct these in line with current COVID-19 regulations.</p>
<p>20. Pg 1 – Will the RFP supplier team be working with Wellcome during the first phase of the project to construct the Steering Committee, or is the RFP supplier team intended <u>to be</u> the Steering Committee? If the latter, what does Wellcome foresee as the appropriate mix of scientists, policymakers, practitioners, and people with lived experience on the Steering Committee?</p> <p>a. How many people are expected to be on the Steering Committee?</p>	<p>20. No, the RFP supplier team is not intended to be the Steering Committee, but some members of the RFP team will be part of Steering Committee meetings, e.g., to support the Chair(s), take forward discussions. The supplier will lead on identifying other stakeholders to sit on Steering Committee, with support from Wellcome. There is no need at this stage to specify the number of people that will sit on the Steering Committee as part of the application.</p>
<p>21. Pg 2 – What are the parameters around establishing “a community of practice” to facilitate continued interactions following project delivery? What is the expectation around such a community, e.g. membership requirements, regional representation, meeting frequency, on-going funding mechanisms, etc.?</p>	<p>21. The aim of the community of practice is to ensure a degree of continuity for the project. We do not envision any specific membership requirements besides an interest in mental health &amp; climate change research and the community of practice is likely to be open to all. We would be keen on ensuring global representation in the community of practice, with a specific focus on LMICs. The specific format of the community of practice (e.g., meeting frequency, platform etc.) is to be determined. The supplier, however, will only be responsible for setting up the community of practice and not for running it once the contract has ended.</p>
<p>22. Pg 3 – Additional clarity is appreciated on the requirement for a “non-academic report and other non-academic outputs to reach diverse audiences”. What is the expectation around “non-academic reporting” and other “non-academic” outputs?</p> <p>a. On academic outputs: Who selects the journal outlet referred to?</p>	<p>22. We kept the wording voluntarily open as we are keen for the supplier to creatively think about possible non-academic outputs of this piece of work. By non-academic we intend outputs that are not journal articles published in peer-reviewed journals. One example of a non-academic output may be a policy brief.</p> <p>For the academic outputs, the journal outlet will be decided by Wellcome in collaboration with the supplier. Wellcome will liaise between the supplier and the journal.</p>
<p>23. Pg 3 – Is Wellcome responsible for organizing membership of WHO and other UN agencies at the Regional Workshops?</p> <p>a. Who is responsible for involving “representatives from WHO and</p>	<p>23. Wellcome will be responsible for supporting the supplier in involving different UN agencies.</p>

<p>other UN agencies” — the contractor or Wellcome Trust?</p>	
<p>24. Pg 3 – Are the “Regional Leads” assigned by Wellcome, or are they intended to be members of the Steering Committee?</p>	<p>24. “The regional leads will be identified by the supplier with the support of Wellcome. They could be members of the Steering Committee”.</p>
<p>25. Pg 4 – “The RFP supplier is responsible for running and convening the Steering Committee and supporting the Chairs”</p> <p>a. are the Chairs part of the RFP supplier team, or are they appointed by Wellcome as part of the Steering Committee?</p>	<p>25. No, the Chairs do not need to be part of the RFP supplier team. The Chairs will be identified by the supplier, with support from Wellcome.</p>
<p>26. Pg 4 – “A list of possible participants has been initiated and we will ask internal and external stakeholders to make suggestions to ensure representativity (?) of the different regions”.</p> <p>a. has the list of possible participants been initiated by Wellcome?</p> <p>b. if so, please provide examples of internal and external stakeholders?</p>	<p>26. Yes, that is correct. The list of possible participants has been initiated by Wellcome. The supplier will be asked to build upon this list. By internal stakeholders we mean Wellcome staff and by external stakeholders we mean anyone outside of Wellcome with an interest in climate change &amp; mental health research.</p>
<p>27. Pg. 4 - For the hybrid global workshop, who is responsible for selecting and inviting the participants (ie, who is included in “We” in the text on page 4)?</p>	<p>27. The supplier will lead in selecting and inviting the participants to the hybrid global workshop, with support from Wellcome.</p>
<p>28. Pg. 5 - Who produces the “policy product” ?</p>	<p>28. The supplier will be expected to lead on the policy product, with support from Wellcome.</p>
<p>29. Pg 7 footnote #1 – “As part of the contract negotiation stage, we will be asking the successful supplier to provide evidence that they are similarly able to uphold this commitment and have appropriate safeguarding measures in place”.</p> <p>a. can Wellcome expand on what they deem to be “appropriate safeguarding measures”?</p>	<p>29. Safeguarding refers to the range of measures in place to protect people from harm, abuse or maltreatment. Given that the current project will involve collaborating with some groups that may be more at risk than others (e.g., people experiencing mental health problems), we expect the supplier to be able to have appropriate safeguarding measures in place. However, this will not represent an assessment criterion but will only be discussed during the contract negotiation stage.</p>
<p>30. Pg #7 Point 3. Lived experiences. With the implications that there would be a certain amount of collaboration with the suppliers and the Wellcome team of experts at different points, would there be an opportunity to interface with the leadership of the Lived Experience Team in the execution of the workshop as outlined in the project proposal?</p>	<p>30. The Wellcome Lived Experience team will be able to provide the chosen supplier guidance on working with people with lived experience, however we expect the supplier to lead this work when delivering the workshops requested in the RfP.</p>

<p>31. Pg #7. Point 5. EDI is a well-recognized term, however is there an expectation of the degree of diversity and inclusion? For example, if Indigenous communities were not specifically included.</p>	<p>31. We encourage the supplier to include a diverse range of stakeholders, with a particular focus on communities most affected by climate change and justify the selection. We understand that within the limitations of the project this cannot include every community affected but would wish to see serious consideration of EDI.</p>
<p>32. Pg 8 – “A subset of proposals will be invited to a virtual meeting which will last 45 minutes in total and will consist of a PowerPoint presentation followed by questions and answers session by Wellcome staff”.</p> <p>a. Is it is the responsibility of the RFP team to produce a PowerPoint presentation at this stage, as part of this 45 minute virtual meeting?</p> <p>b. Will the entire RFP team be invited to this virtual meeting, or just the team leads?</p>	<p>32. Yes, it will be the responsibility of the supplier to produce a PowerPoint presentation for the virtual meeting.</p> <p>The lead reviewer will be asked to take part in the interview, and they will be able to invite core members of their team to participate. More information will be provided to suppliers invited to the interview stage.</p>
<p>33. Pg 10 – Is being “disability confident” a strong condition of this contract? Is the expectation that a member of the RFP team and/or Steering Committee has a disability, or rather, that persons with disabilities are meaningfully engaged throughout this process?</p>	<p>33. We encourage all our suppliers to be a Disability Confident employer (see: <a href="http://www.gov.uk">Disability Confident employer scheme - GOV.UK (www.gov.uk)</a>). However, this is not a requirement of the contract. We do not expect that a member of the RFP team and/or Steering Committee will have to disclose a disability.</p>
<p>34. Regarding disseminating anticipated outcomes, is the contractor expected to handle all the communications or will Wellcome Trust handle communications (ie newspapers, social media, etc.)? In other words, is the contractor expected to target key stakeholders and to produce materials suitable for the various audiences (policymakers, journalists, media, communities, etc.)?</p>	<p>34. Yes, it will be the supplier’s responsibility to target key stakeholders and produce materials suitable for various audiences. Wellcome will support in disseminating these materials.</p>
<p>35. Who writes the “easily accessible report” that is published on the Wellcome Trust website, who handles the translation and who identifies the “different audiences” to target?</p>	<p>35. All these tasks will be the responsibility of the supplier.</p>
<p>36. On the budget:</p> <p>a. For hybrid global workshop, should the contractor’s budget include travel and accommodation expenses for participants, steering committee members and its own personnel?</p>	<p>36. Yes, the contractor’s budget should include all costs relevant to the conduct of the project (including travel &amp; accommodation expenses for everyone involved, all costs associated with organizing the workshops, and all costs related to convening the Steering Committee).</p>

<p>b. For the hybrid global workshop, should the contractor’s budget include the costs associated with organizing the workshop, ie room rental, food and beverage, AV/IT equipment, registration management, etc.?</p> <p>c. Should the work of the Steering Committee be included in the budget?</p>	
<p>37. Beyond the information to focus on low- and middle-income country contexts, does the Trust have any specific preferences for geographies that members of the Steering Committee should belong to?</p>	<p>37.No, we envision the project to be global in scope meaning that we do not have a preference in terms of regions we would like the supplier to engage with.</p>
<p>38. Is there a scope for including country-level convenings for larger countries?</p>	<p>38. See answer to Q2</p>
<p>39. Is there flexibility in the timeline of the activities, especially the regional workshops?– 2 months for all regional workshops might be tight.</p>	<p>39.Suppliers can request a different timeline to that specified in the RFP for the activities they propose. Please justify any changes made.</p>
<p>40. Is it possible to provide an estimate/range for the budget?</p>	<p>40. Wellcome have specifically not provided a budget as we ask that the supplier(s) look to cost this appropriately providing a detailed breakdown as what they think is required to deliver this activity. Value for money will represent one of the criteria against which applications will be scored.</p>
<p>41. While outside the scope of the RFP, does Wellcome Trust have any intentions of supporting regional research networks focused on climate change and mental health?</p>	<p>41.The current RFP is not focusing on supporting primary research (e.g., data collection on climate change &amp; mental health). However, regional research networks are likely to represent key stakeholders to be included throughout the project.</p>
<p>42. The RFP states that Wellcome is particularly interested in proposals that involve a collaboration between different organisations. Given this, how would you prefer to see these collaborations structured? Should it always be one lead organisation and sole funding recipient, with sub-contractors?</p>	<p>42. Wellcome prefers to contract just one supplier, and they then sub-contract out to other organizations as needed.</p>
<p>43. Relatedly, do you have a preferred number of organisational partners that you’d like to see involved in a bid? Are there limits to how many sub-contracts we could build into our project design?</p>	<p>43. Wellcome does not have any preferred number of organizational partners as long as all partners are relevant to the conduct of the RFP activities.</p>

<p>44. While we see that the RFA covers all global regions, we would like to know if there are particular priority countries or regions where Wellcome would like the project to focus energy, or where Wellcome has already begun to build collaborations that would be relevant to this scope of work?</p>	<p>44. See answer to Q2 and Q43.</p>
<p>45. Is the space within the scope of work to propose alternative ways to organise the workshops, rather than only global geographic regions?</p>	<p>45. Yes, suppliers can propose alternative ways to organize workshops and justify their preference.</p>
<p>46. Are there any constraints regarding what kinds of organisations can serve as lead applicants or sub-grantees on this project?</p>	<p>46. There are no constraints regarding what type of organization can serve as lead or sub-contractors (please note this is a grant not a contract) as long as they are able to sign up to Wellcome’s contractual agreements.</p>
<p>47. Is the timeline outlined in the RFA fixed or is there room for adapting the timelines based on the consultant’s approach to the scope of work?</p>	<p>47. See answer to Q39.</p>
<p>48. Similarly, how much scope is there for adapting the key activities, in consultation with Wellcome and other partners?</p>	<p>48. The outcomes, objectives, and key activities of the project are unlikely to change. However, we would be open to discuss with the supplier possible modifications to the project, where relevant to achieving the outcomes and objectives. Please include any changes in your proposal and justification for these.</p>
<p>49. Across the overlap of issues surrounding mental health and climate, does Wellcome Trust have any identified emerging priorities?</p>	<p>49. No, one of the aims of the current project is to identify emerging research priorities in this space.</p>
<p>50. Any budget guidance?</p>	<p>50. See answer to Q1.</p>
<p>51. Would you like all of the regional work to happen concurrently, or are you open to a more staggered approach?</p>	<p>51. We are open to a more staggered approach.</p>
<p>52. Can you provide more context on how you would like WHO and UN agencies to be involved in the project (other than attending Steering Committee meetings)? Is there any additional context that would be helpful for us to consider when designing the project approach?</p>	<p>52. The degree of involvement with UN agencies will be discussed once the supplier has been identified, in collaboration with the relevant UN agencies. There is no need to specify this as part of the RFP as this relationship will be facilitated by Wellcome.</p>
<p>53. Do you have specific platforms that you prefer using for global virtual workshops? Does Wellcome Trust have any constraints for using certain platforms?</p>	<p>53. We do not have a specific platform that we prefer using, as long as it is easily accessible for participants. There is no need to specify which type of platform the supplier plans to use for the workshops at this stage.</p>
<p>54. Would the local portion of the hybrid global workshop be able to be hosted at Wellcome Trust?</p>	<p>54. No, we plan on having the in-person component of the global workshop hosted in a LMIC.</p>

<p>55. Will the regional workshop be acceptable as a mini-conference for research presentations on the topic of climate change and mental health?</p>	<p>55. The regional workshops will focus on collating and synthesizing the priorities, barriers, and solutions to research and action on the link between climate change and mental health at the regional level. Research presentations may be included as part of these workshops, but they should not be the focus and we do not envision these workshops as conferences.</p>
<p>56. Is the possibility of considering other elements that are a first-tier result of climate change than affects mental health? For example, human displacement, rural degradation, food security etc...</p>	<p>56. Yes, that would be in scope. We are interested in both direct and indirect impacts of climate change on mental health.</p>
<p>57. Should there be equal representation of each global region present? As indicated, the focus of this area has been predominantly in high income countries. Will having a slightly tilted focus on developing countries be advised?</p>	<p>57. There should be appropriate regional representation, but we are particularly keen on focusing on communities whose mental health is most affected by climate change, and this includes communities in LMICs.</p>
<p>58. Are you open to teams proposing different configurations for the various groups and committees?</p>	<p>58. Suppliers can suggest a different configuration of the groups and committees proposed in the RFP. Please justify any changes made.</p>
<p>59. Do you see the community of practice, steering committee and other groups continuing to exist after this project?</p>	<p>59. Yes, but it will not be the supplier's responsibility to continue managing these once the contract has ended.</p>
<p>60. Climate change and mental issues affects age demography differently. Has Wellcome factored this, as the communications will differ for children, youths and for seniors throughout the global dialogue leading to the consolidation of a non-academic report?</p>	<p>60. We encourage the supplier to think creatively about the most appropriate ways to reach different audiences when disseminating the results of the project.</p>
<p>61. Mental health issues arising from climate change is not a one size fits all, as different continents have unique experiences. For example, An African living in Africa being one of the continents that has been disproportionately affected by the climate crisis, combined with biodiversity loss, plastic and oil pollution, and illegal wildlife trade will respond differently to a Caucasian in the Global North. Is Wellcome hoping to capture this within the dialogue and report?</p>	<p>61. Yes, exploring regional and local variations in priorities for climate change &amp; mental health research space is one of the key areas of focus of this project.</p>
<p>62. Are the ad hoc training workshops on specific topics mentioned on page 4 of the RFP workshops that would be planned and organised <u>after</u> the April-June regional workshops, or are they to take place <u>at the same time</u> as the regional workshops? is this something which the chosen contractor will also need to organise and deliver?</p>	<p>62. The ad hoc training workshops on specific topics would take place after the regional workshops and may be based on feedback collected during the regional workshops. Yes, we expect the chosen contractor to lead on and organize these. This does not mean they will need to deliver these, e.g., the supplier may liaise with an academic institution that will deliver training on a specific method.</p>

<p>63. How does Wellcome envision this community of practice taking place, will it be hosted on Wellcome's website or will a dedicated online space need to be created by the contractor? Does the proposal need to include a financial element to ensure the sustainability of this community of practice that goes beyond the timeline of this project? (e.g. a microsite set up by the contractor would be costly, time-consuming and would require funding for its upkeep and maintenance).</p>	<p>63.The community of practice is likely to be hosted online. Yes, the supplier will have to lead in the creation of a dedicated online space. However, this does not necessarily need to be a microsite (e.g., the online community of practice could be hosted as part of existing online mental health platforms). The supplier does not need to include a financial element to ensure the sustainability of this community of practice. The supplier should however include a financial element concerning the set-up of the community of practice. Please also see question 21.</p>
<p>64. Would the blog pieces be published on the contractor's website, on a microsite, or on Wellcome's website? If these pieces go beyond the project timeline and the contractor is required to be involved in commissioning, editing, publishing etc this also has cost implications</p>	<p>64.Wellcome will discuss with the successful supplier the most appropriate outlet for the blog pieces. These may be published on the Wellcome website or elsewhere. The supplier will not be responsible for pieces that go beyond the project timeline.</p>
<p>65. Does Wellcome have an indicative idea of the desired number of Steering Committee members and the number of participants for the regional workshops and the hybrid global workshop? (these numbers also have a cost implication)</p>	<p>65.We encourage the supplier to come up with a cost estimate that reflects the appropriate number of participants they foresee the Steering Committee and the workshops to have. We do not have a suggested minimum or maximum number of participants.</p>
<p>66. Regarding intellectual ownership of final project outputs, such as the policy product and the non-academic pieces, will the contractor be able to retain IP (and share with Wellcome and other partners) so these products can be published as their own? Or will all products become the IP of the Wellcome Trust?</p>	<p>66. Please see Wellcome's General Term and Condition 9 Intellectual Property, linked in the RFP document. As in the RFP document instructions, please use a contract feedback annex when submitting the full proposal for any proposed amendments.</p>
<p>67. As the agreement between the Wellcome Trust and the contractor will be a contract, not a grant, contractors will need to include VAT on invoices to the Wellcome Trust. Is the VAT cost to be included in the final budget sent with the full proposal by the 11<sup>th</sup> of November, or is VAT from the contractor assumed but not to be included in the budget?</p>	<p>67. Please exclude VAT but make it clear which of the following will apply:  a) VAT will be included on invoice  b) Supplier is based overseas and so cannot charge Wellcome VAT (Wellcome will still need to self-account for this)  c) Supplier is a sole trader and not VAT registered</p>
<p>68. What is the overhead permitted in proposals to Wellcome Trust from research organisations with charitable status, for work that is funded as a contract, not a grant? Is it the same or different to the overhead percentage allowed in grant applications</p>	<p>68. As this is a contract not a grant there is no set percentage allocated for overheads. Please include in your budget all costs required to allow you to deliver the project in full and on time.</p>
<p>69. Will Wellcome Trust share the findings of its earlier consultations to support our selection of</p>	<p>69. Yes, we will share the findings of the earlier consultations with the supplier, where appropriate.</p>

steering committee members and consultation participants?	
70. Can the global workshop be held in August or must it be held in September? a. Can the global workshop be held earlier or later?	70. See question 39
71. Who chooses the location of the global workshop?	71. The location for the global hybrid workshop will be chosen by the supplier, with support from Wellcome.
72. Can regional consultations have an in-person component?	72. Please see Q8.
73. What is Wellcome's definition of mental health? Does it include brain health (i.e. dementia etc.)?	73. See answer to Q9. No, we do not include brain health as part of our definition of mental health.
75. Knowing that Wellcome has already done lived experience consultations before, could we clarify whether Wellcome has any existing lived experience groups or networks they would like to ensure are included in the consultations, and any Wellcome specific requirements for lived experience consultations to be aware of?	75. We expect the supplier to identify and collaborate with people with lived experience expertise. The Wellcome Lived Experience team will be able to provide the chosen supplier with guidance on working with people with lived experience.
76. Will Wellcome Trust please clarify what type of contract will be awarded (firm fixed price, time and materials, cost plus, other)?	76. The contract will be a fixed price, with payments tied to the completion of project deliverables.
77. Will Wellcome Trust please confirm that there is not a prescribed Budget format or template to be used and offerors may submit Budget in their format ?	77. Yes, we can confirm that there is not a prescribed budget format/template to be used and that suppliers can submit budget in their format.
78. Will Wellcome Trust please clarify whether proposals should be submitted in GBP or local currency? Please clarify if payments will be in local currency?	78. See Q14
79. The RFP requests submission of a Gantt chart. Does Wellcome Trust specifically want a MS Project file or may offerors provide a work plan with milestones and key activities noted in their own format?	79. We are happy for the supplier to submit the Gantt chart in any preferred format as long as milestones, timelines and key activities are noted down clearly.
80. This call has stimulated a hive of global discussions, and in the spirit of collaboration we are keen to join forces with interested	80. No, only one supplier will be awarded. We are not willing to take the responsibility of putting together different bidders given it may lead to unfair processes and lack of

<p>partners/other bidders in our global networks as much as possible, while balancing this with the need for an agile core team/supplier to move at pace. Will Wellcome consider bringing partners together across multiple bids, if there are aligned and complementary proposals submitted that may be stronger as a coalition?</p>	<p>transparency. However, as part of the project the supplier will be tasked with bringing together key stakeholders interested in climate change &amp; mental health, and this may include other suppliers, who will however likely take part in the project as participants. If a supplier is aware of another supplier putting in an application, they are very welcome to join forces.</p>
<p>81. Can we please clarify that this assumption is correct, that our budget should include all relevant costs for the entire project, including those identified post-proposal by the supplier with support from Wellcome such as Steering Committee Chairs and/or Regional Leads, rather than just the costs to the Supplier directly?</p>	<p>81. Yes, that is correct. The budget estimate should include all relevant costs for the entire project (this includes costs related to Committee Chairs, Regional Leads etc.)</p>