



QUESTIONS AND ANSWERS

Request for Proposal (RFP): Sustainable Translation of Academic Digital Tools (STADT) project

#	Supplier Question	Wellcome response
1	What level of detail is expected of the case studies? Is the aim of the case studies to showcase a variety of examples, or should the emphasis be on fewer but more in depth examples? What information are you interested in prioritising?	<p>The aim of the case studies is to illustrate:</p> <ol style="list-style-type: none">1) How developers of ADTs have encountered barriers to the translation of their product2) Real-life examples of how these barriers have successfully been navigated <p>This is the information that should be prioritized from the case studies. The detail of the case studies should focus on the pathway that the research group has taken towards translating that technology into real-world usage. We don't expect in-depth technical detail on the technology or detailed descriptions of its design process.</p>
2	What does co-designing the final report with Wellcome's branding team look like? Will the selected supplier be expected to design the final report using brand guidelines, are branded templates available, or will the Wellcome branding team lead on the design of the report? If the latter, what is the time availability of the team and how far in advance will they need the report if this is due to be published by May 2024?	<p>Wellcome and the chosen supplier will work together on branding once the supplier has developed a draft report, and the timings will be mutually agreed.</p>
3	What are your budgetary constraints for this project? This will help us refine the methodology and the time and cost estimate for the full proposal.	<p>The maximum available budget for this RfP is £250,000 plus VAT.</p>



4	It was a little unclear as to the scope of the project in terms of detailed outputs, particularly in respect of 3rd party consultations, etc.	The main output from the project will be a written report. The report will include the outcomes from consultation with 3rd party experts, and some case studies of ADTs that have successfully navigated the translation pathways. Also the report will include some recommendations for funders as to how we could act to remove/reduce barriers in the translation pathway.
5	It would be really helpful to have an approximate indication of the budget that the WT have allocated for this work, as that will allow us to decide whether it will be possible and worthwhile for us to submit a suitably scoped proposal.	The maximum available budget for this RfP is £250,000 plus VAT.
6	How many academic groups do you anticipate the successful bidder will have to engage with?	This should be guided by the initial desk research undertaken so we don't have a fixed idea of how many academic groups the supplier would need to engage with. This should be sufficient to get a rounded view across the different technology types we are interested in, and to cross both high- and low-income settings.
7	The scoring criteria for budget states " <i>Is the proposed work within budget</i> " - could you provide this budget cap figure?	The maximum available budget for this RfP is £250,000 plus VAT.
8	Would there be an expectation that if a protocol was developed using provisions containing IP, the IP holder	We are not anticipating that a protocol will be an output of this RfP. The main output will be a report containing the information described in the RfP – a description of the



	<p>would receive appropriate compensation if it impacted on their product's commercial properties?</p>	<p>barriers in the translation pathway for digital technologies developed in academia, with case studies to show successful examples, and some recommendations to funders.</p> <p>As this is commissioned work, Wellcome will own the report and any outputs from the project. We do not anticipate that there will be any new IP arising from this project.</p> <p>Please refer to Wellcome's Terms and Conditions Section 9 Intellectual property</p>
<p>9</p>	<p>Do you have any ADT's you would like me to work with as part of the project? (I could explore potential opportunities to develop them to be open-source, thus strengthening the outcome of any successful outcome in this project)</p>	<p>The aim of this project is not to create open-source technologies, nor to influence developers to make their technologies open-source. We want to understand how the translation pathway (route to market) is impacted by the decision to make a technology open-source. For example, do open-source technologies face additional barriers to commercialization over non open-source tech?</p> <p>We would like the final report to include examples of open-source and non open-source ADTs that have successfully made it into use. We will be able to share some ideas of case studies with the appointed supplier, and would expect the supplier to also come up with some ideas as well.</p>
<p>10</p>	<p>Do you have any additional major areas in addition to those I am already working in? And would those areas I am working in be suitable as a starting point?</p>	<p>We are mainly interested in the translation pathways for digital tools developed in academia for healthcare use – this could include digital medical devices (SaMD),</p>



		<p>healthcare apps, prediction tools relevant to health or decision support tools for healthcare.</p> <p>For this project, educational digital tools would be out of remit, and we are not intending that any protocols, models or software would be created.</p>
11	<p>If the project is successful, what recognition is to be given to authors associated with anything that is designed? (For instance, if a model is developed, who would be given credit for the model? Wellcome / the Investigator(s) who designed it?</p>	<p>The key output from this project will be a report. The authors of the report would be named in the report document. The report will be owned by Wellcome and we plan to publish it on Wellcome's external-facing website.</p> <p>We do not anticipate that there will be any new IP arising from this project. In general however, any IP generated through RfPs like this would be owned by Wellcome.</p> <p>Please refer to Wellcome's Terms and Conditions Section 9 Intellectual property</p>
12	<p>Should the supplier identify the expert consultants (such as academics with experience successfully translating digital tools, organisations hosting not-for-profit digital tools, experts in translation/commercialization of open-source code ADTs) for the governance structure? Or would Wellcome be recommending people?</p>	<p>We expect that the supplier will be able to suggest some external consultants, and the Wellcome team will also be able to share some suggestions.</p>
13	<p>Are certain ADTs more important to the team (e.g., prediction tools vs SaaS) or certain priority areas? Should all be treated equally in terms of representation in the case studies? And should the supplier equally balance representation of case studies from high-income health</p>	<p>It would be useful to get a balance across these different areas, and indeed some of the barriers to translation will be the same for both prediction tools and for SaaS/SaMD. We would expect the supplier to pick case studies to illustrate a range of barriers to translation, highlighting which are specific to which product type.</p>



	countries and LMICs, or prioritize those from LMICs where possible?	Similarly, a balance between high- and low-income settings would be preferable. We would be open to discussion with the supplier about how to achieve this balance, such as focusing on certain technology types based on their most likely deployment setting.
14	Would Wellcome also be interested in learning from unsuccessful ADT translations to complement lessons learned from the successful case studies?	Yes, this may be useful to illustrate how barriers to translation manifest and what their impacts are in practice. The emphasis should be on successful case studies, however.
15	Does Wellcome have fixed points or milestones throughout this project that we should keep in mind when we consider the approach and delivery plan, beyond a May 2024 deadline?	Yes there will be milestones throughout this project, and these will be finalized with the supplier after they are appointed. These will likely be linked to the deliverables described in the RfP.
16	In the RfP, you mention our budget should include allocation of funds for at least two senior academic consultants. Can you please elaborate on any specific preferences around the role the academic consultants will play and engagement model?	We expect that the supplier will engage with academic consultants throughout the project. We would anticipate that these academic consultants would help to shape the direction of the report (such as through describing some of the key barriers to translation), provide contacts and case studies, and review and comment on the final report.
17	We assume Wellcome will have an internal working team – what is the expectation on level and model of engagement between Wellcome's internal team and our team?	Yes, there will be an internal working group within Wellcome to support this project. Its likely that we'll hold monthly meetings between the supplier and the working group, to reflect on progress and share insight.



18	Do you want a reasonably equal focus on commercial and not-for-profit pathways, or do you have a preference for on where we should focus our attention?	The focus should be fairly balanced between commercial and not-for-profit pathways. Through the course of the project it could become apparent that there is more to discuss in one of these pathways over the other, and we can discuss that as and when the issue arises.
19	Similarly, do you have specific categories of tools that you would like us to focus on (e.g., SaMD) or use cases (e.g., diagnostic, therapeutics etc.)?	We'd like to see at least one example of a health related digital tool (such has SaMD) and at least one modelling/prediction tool. No preference regarding use case/intended use (such as diagnostic vs therapeutics).
20	To what extent (if at all), did you want us to focus on specific implications for Wellcome (e.g., investment approach)?	We'd like the report to include recommendations for research funders (such as Wellcome), on how we could act to improve success rates for the translation of digital tools from academic projects. Examples of this could include how funders can better use research grants to enable translation, or for research funders to develop certain infrastructure in the research translation landscape.
21	Who is the intended primary audience(s) for the publication? Are you able to share any additional details on the publication plan at this stage?	We expect the final report to be published on Wellcome's external-facing website. This means that it will be available for anyone to read. The primary intended audience for the report is research funders (such as Wellcome). It may also be of interest to other players in the translational landscape (such as University tech transfer offices, or innovation support bodies like the health innovation network) and to academic groups who are developing digital tools.



22	What is the estimated budget range for this project? This will help us refine our approach.	The maximum available budget for this RfP is £250,000 plus VAT.
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