



Request for Proposals (RFP)

Understanding the landscape of psychological and social interventions for anxiety, depression, and psychosis

Introduction

Wellcome is a politically and financially independent charitable foundation. We improve health for everyone by funding research, leading policy and advocacy campaigns, and building global partnerships. In 2020, Wellcome announced our new 30-year strategy to tackle three global health challenges: mental health, infectious disease, and the impact of climate change on health. Wellcome also funds basic curiosity-driven science via Discovery schemes.

Our Mental Health vision is a world in which no one is held back by mental health problems. To advance this vision, our mission over the next 20 years is to drive a step change in the ability to intervene as early as possible in the course of anxiety, depression, and psychosis, broadly defined, in ways that reflect the priorities and needs of those who experience them.

We recognise that the current diagnostic categories are imperfect but removing all categories or creating new ones also presents difficulties and may limit engagement with the field. Included in our definition of anxiety, depression, and psychosis are all forms of anxiety, depressive and psychotic disorders including obsessive compulsive disorder, post-traumatic stress disorder, post-partum psychosis, bipolar disorder, and schizophrenia.

1. RFP Background & Objectives

More information is needed to understand the landscape of psychological and social interventions for anxiety, depression and psychosis. This broad understanding can then be used to identify areas and gaps where further research investment could have the most impact in working towards creating a step change in the early intervention of these conditions. In this case, early intervention refers to identifying and providing effective support for mental health problems as early as possible.

2. RFP Specification

This work focuses on psychological and social interventions for anxiety, depression, and psychosis. We are commissioning two packages of work, one on psychological interventions and one on social interventions. Suppliers can apply to complete either one or both packages of work.

Each of these will involve an analysis of the landscape of interventions with potential for early intervention, in order to identify the gaps in the field where further research investment is most needed.

For each of the two packages of work, we would like to achieve this through three main activities (more detail on each is below):

- 1) A high-level mapping and categorisation of the landscape of interventions across high, middle, and low-income countries.



- 2) A detailed analysis of the areas where there are gaps and barriers to developing and implementing promising interventions, using the findings from the initial mapping.
- 3) A final report that builds on the previous stages to provide recommendations on key opportunities for investment, in order to accelerate progress in developing effective interventions.

The suppliers must collaborate with people with lived experience at multiple stages of the design and delivery of the project e.g., during project design, literature searching and data collection, and data analysis.

2.1 Outputs

More detail on the three main activities are as follows. We will ask the successful supplier to provide:

- 1) A high-level mapping of interventions that enables identification of critical gaps in our knowledge/evidence base, to include the following;
 - A framework/method for categorising interventions, with some detailed examples of each category. (Note that we are not looking for all interventions in the field to be individually catalogued)
 - Evidence relating to active ingredient, efficacy, effectiveness, cost-effectiveness, and safety of each category.
 - Research designs/frameworks and outcome measures used to evaluate the efficacy and effectiveness of each category.
 - For each category of intervention, details on delivery and implementation such as duration, mode and location of delivery, cultural adaptation and validation, resource requirement, scalability, feasibility, acceptability to end users, and if/how developed in collaboration with people with lived experience.
 - The attrition rate at each stage of development and reason(s) for failure or termination of interventions.
 - The extent to which existing interventions meet the criteria shown in section 2.3 (as refined in the inception report).
 - Suggestions of up to 15 promising interventions to take forward for activity 2, according to the criteria shown in section 2.3.
- 2) A detailed critical analysis to identify the gaps in the field where further research investment is most needed in order to develop those interventions that have been identified as promising.
 - A description of barriers and facilitators to the development, implementation and evaluation of interventions, including challenges specifically encountered in low-resource settings.
 - A description of barriers and facilitators to involving people with lived experience in the development, implementation and evaluation of interventions.
 - Critical gaps in the current evidence base that need to be addressed for promising interventions to progress and be made available widely.
 - Lessons to be learned from interventions that have been found not to work or have been found to work but have not been implemented.



3) A final report including the following:

- A summary of the findings and outputs from activities 1 and 2
- Recommendations on opportunities for Wellcome to support progress in relation to the development of interventions, with the ultimate goal of improving clinical outcomes and functioning. This should include:
 - A summary of the most promising future directions and gaps to fill in this area, including but not limited to interventions currently in the pipeline.
 - An analysis of who the partners and stakeholders are associated with the development, implementation and scale-up of such interventions, including people with lived experience.

2.2 Methodology

Throughout all outputs, we expect:

- A consideration of whether (and how) the priorities and perspectives of people with lived experience of mental health problems are incorporated into research in this field. This should include:
 - What does the involvement of people with lived experience look like in the design, development, implementation, and evaluation of these interventions? At what stage does this happen?
 - What is the acceptability of or demand for these interventions from people with lived experience?
 - How could the involvement of people with lived experience in this field be improved?
- The supplier should reach out to a range of stakeholders including (but not limited to):
 - Funders, developers and evaluators of psychological and social interventions (established academic groups, companies, start-ups, academia/government developers)
 - Implementers of the psychological and social interventions (NGOs, Government Organisations, companies, start-ups, clinicians)
 - People with lived experience of mental health problems
 - Policy makers (WHO, UNICEF, World Bank, Ministries of Health, Social welfare and developments)

We would expect a reasonable spread of high-income countries (HICs) and low- and middle-income countries (LMICs) to be included, covering as a minimum the United Kingdom (UK), Europe and Africa. We would not anticipate the creation or commissioning of any new data relating to a specific intervention, intervention type or market. Where there is inadequate information, this should be presented as a finding. There is no restriction on the methodology used as long as ethical guidelines are adhered to and all data are processed in accordance with Wellcome's data protection policies and UK and EU data protection regulations.



2.3 Criteria for promising interventions

We are proposing the following criteria for evaluating the extent to which interventions can be considered as promising but are keen to work with suppliers to refine these criteria during the first part of the project.

Ideally, promising interventions will:

- Meet the needs and priorities of end beneficiaries
- Include clear and scalable routes to implementation whether by industry or other stakeholders
- Be developed in collaboration with people with lived experience
- Be capable of being applied at scale in low resource settings
- Be based on a clear mechanistic understanding of how they work and for whom
- Be applicable even in the context of challenging global events such as extreme heat, other extreme weather events, future pandemics, mass migration, international conflict, conflict between social groups and lack of trust in science

2.4 Criteria for exclusion

The following types of interventions should be excluded from this work:

- Interventions that are already included in their current form in clinical pathways or treatment guidelines.
- Interventions focused on wellbeing, rather than mental health. Interventions should be intended to be used for the treatment of depression, anxiety and/or psychosis.

3. Eligibility

We encourage proposals from a broad range of potential suppliers to fulfil this role. We are commissioning two separate packages of work, one each on psychological and social interventions. The deliverables will be separate for each package of work. You may propose to undertake one or both packages. Please specify in your proposal which package(s) of work you are proposing to undertake and, if you are a team, who will lead on each package of work. Please note that we do not expect that one individual could complete both packages of work in the allotted time. The supplier(s) should have appropriate expertise on psychological and/or social interventions for anxiety, depression, and psychosis (as relevant to the chosen package[s] of work).

We expect potential suppliers/teams to be diverse in membership, inclusive in practice and have experience of working across a range of global settings. We anticipate it could be an asset if suppliers have worked in or have close links with LMICs/low-resource settings, so please identify this where relevant in the proposal.



4. Deliverables from the supplier (9 months in total for delivery of all outputs):

Note that deliverables will be separate for each package of work (psychological and social interventions).

4.1. Inception report – at 6 weeks

An inception report that should include:

- The detailed scope of work.
- The final list of research questions and sub-questions to be pursued.
- The proposed methodology for answering these research questions, and completing and reporting on the three main activities.
- A detailed timeline for the completion of the work.

4.2. Interim Report – at 4.5 months

This should include:

- An interim report detailing a high-level mapping of the intervention landscape (activity 1 in Section 2.1 Outputs) with proposed focus areas, including prioritisation and justification. This will inform discussions with the Wellcome team to refine the scope and decide on promising interventions and focus areas for activity 2.
- This should also include a detailed summary of progress made, any issues that have arisen, and strategy for tackling these.
- A 30-minute presentation of the interim report using PowerPoint or similar, to be given virtually or in person, with time for Q&A from the Wellcome team. Slides to be supplied in PDF format after the presentation.

4.3. Final report – at 9 months

A final report which contains the full package of work and addresses the three main activities set out above, including the high-level mapping, detailed critical analysis and recommendations. This needs to be completed within 9 months from the contract start date. This will be delivered in two stages:

- A **draft final report**, which will be shared with Wellcome 1 month in advance of the end date to allow Wellcome staff time to give feedback, raise questions, and make recommendations for further improvement.
- A **final report**: a clean and final copy which will be delivered after incorporating feedback on the draft report from Wellcome.
- A 90-minute **presentation of the findings** to the Mental Health team, to be delivered virtually or in person, with time for Q&A from the Wellcome team. Slides to be supplied in PowerPoint format (or similar) after the presentation.



5. RFP Timetable

#	Activity	Responsibility	Date
1	RFP issue to suppliers	Wellcome	Wednesday 7 February 2024
2	Submission of expression of interest and supplier Q&A to Wellcome Contact	Supplier	Monday 4 March 2024
4	Return of supplier Q&A to suppliers	Wellcome	Friday 15 March 2024
5	Submission of RFP Proposal	Supplier	Wednesday 3 April 2024
6	RFP Proposal Evaluation Period	Wellcome	Thursday 4 April – Tuesday 16 April 2024
7	Supplier Presentations	Supplier	Monday 22 April – Thursday 2 May 2024
9	Notification of Contract Award	Wellcome	Friday 3 May 2024 – Wed 8 May 2024
10	Contract Negotiation	Wellcome & Supplier	May – June 2024
11	Contract Start Date	Wellcome & Supplier	June 2024

6. Response Format

The following headers support the timetable by providing further detail of the key steps.

6.1. Expression of Interest

Suppliers can be individuals or teams, working independently or through a company. Suppliers are asked to submit a short expression of interest by e-mail to the Wellcome Contact in accordance with the RFP timetable. These will not be used to shortlist, but suppliers must have submitted an EOI by the EOI deadline for their subsequent RFP Proposal to be considered. The EOI should consist of the following:

- Which package(s) of work you are proposing to undertake and, if you are a team, who will lead on each package of work.
- Whether you are an individual or a company (including full company name and number and registered company address)
- If an organisation, please provide a registered name, address, and registration number.
- A non-binding cost estimate as a single figure for each package of work you are proposing to undertake, in GBP including VAT.
- Any questions you have about the work.

We are happy to accept expressions of interest from a group of individuals or partner organisations. We ask that one of these organisations or individuals is identified as the lead



contact in the expression of interest. In a successful multi-partner bid the lead organisation/individual will be contracted and must be prepared to sub-contract partner organisations/individuals.

6.2. Supplier Q&A

Prior to the submission of your RFP Proposal, suppliers are provided the opportunity to submit any questions they have about the work. All questions are to be submitted to the Wellcome Contact by email along with your Expression of Interest in accordance with the RFP timetable.

All questions will be collated, anonymised, answered and returned to all suppliers who have submitted an expression of interest in the RFP process. Please make sure you ask all questions at this stage. If you have any additional questions after this deadline, these will not be answered; this is to ensure a fair and equitable process.

6.3. RFP Proposal

Suppliers are required to submit proposals which respond to the following sections;

	Question	Max words
Team/ Experience		
1	A brief overview of you or your company's prior work, including your experience and expertise relevant to this RFP and the package(s) of work (i.e., psychological and/or social interventions). If you are applying as a team, please also include a brief description of who would be involved in the project team, their expertise, and their main role and responsibilities.	300 words
2	What makes you/your team best placed to fulfil Wellcome's requirements set out in the RFP?	300 words
Methodology		
3	Your proposed approach to this work, including the proposed: <ul style="list-style-type: none"> • Methodology and scope (see section 2, RFP Specification) • Plan for outputs management and sharing of project learning. • Diversity and inclusion planning (how you will ensure that the literature reviewed, and interviews conducted will be inclusive to different groups of people and locations) 	1000 words
4	Outline how you will involve people with lived experience at multiple stages of the design and delivery of your project (e.g., during project design, literature scanning and data collection, analysis)	200 words
6	Highlight any risks or challenges you foresee in meeting the RFP requirements and any mitigation(s) you will undertake. Please present this as a table.	N/A (1 table)



	Question	Max words
Budget and Delivery		
7	Delivery Plan/Timeline – Provide an overview of the stages and timeframes in which you propose to meet the RFP requirements (for example, as a Gantt chart)	N/A (1 chart)
8	Communication Plan – Describe your approach to working closely with the Mental Health team at Wellcome	150 words maximum
9	Cost proposal detailing and justifying the proposed costs to meet our requirements	N/A (1 table)
10	All our content should be WCAG 2.2. AAA compliant. Any documents being provided to Wellcome must pass accessibility requirements. An example of an accessible document you've produced must be provided in your response to the RFP. If you are unable to produce accessible documents, budget must be set aside to employ a suitable agency to do this work.	N/A (Attachment)

Evaluation Criteria

During the RFP evaluation period the evaluation panel will independently evaluate your proposal against the criteria outlined below. All scores will be collated, discussed and a decision will be agreed on who progresses to the next stage of the procurement exercise.

Criteria	Detail	%
Methodology	<p>Coverage: How well are the desired activities and deliverables (as outlined in the specification) covered in the proposed methodology?</p> <p>Quality: Is the proposed methodology aligned with our needs?</p> <p>Utility: Will the proposed methodology deliver the desired, credible, and useful results?</p> <p>Lived experience: Is there an appropriate plan for collaborating with people with lived experience? Has lived experience collaboration been appropriately demonstrated?</p> <p>EDI: Has appropriate attention been given to equity, diversity, and inclusion considerations in the proposed methodology? Do you have EDI policies and are these being put into practice in the proposal?</p>	40%
Experience	<p>Skills and Experience: Does the supplier have the relevant skills, experience, and contextual understanding to deliver this work? This includes experience collaborating with people with lived experience.</p>	25%
Delivery & Outputs	<p>Communication: Is there a good plan for communicating with the Wellcome team, community, people with lived experience, and external stakeholders?</p> <p>Delivery plan: Is the proposed delivery plan appropriate and achievable?</p>	25%



Criteria	Detail	%
	<i>Feasibility</i> : How feasible is the delivery plan? Is there a good plan for overcoming the identified challenges and operational risks?	
Budget	<i>Value for Money</i> : Is the proposed work within budget and good value for money?	10%
Total:		100%

6.4. Contract Feedback

This section allows suppliers to provide specific feedback to the contractual agreement which will be used should your proposal be successful. Contract feedback is to be incorporated into your proposal as an annex and in the following format;

Clause #	Issue	Proposed Solution/Comment

Suppliers submitting proposals as a registered company should review this [document](#). Individuals submitting proposals as a sole trader (not registered) should review this [document](#).

Individuals submitting proposals through their own personal services company please highlight this to the Wellcome contact immediately (see point 9 below).

6.5. Information Governance

Suppliers are asked to complete the [TPSRA2](#) assessment before the RFP submission deadline for Wellcome to assess how you handle data.

7. About Wellcome

Wellcome supports science to solve the urgent health challenges facing everyone. We support discovery research into life, health and wellbeing, and we're taking on three worldwide health challenges: mental health, global heating and infectious diseases. Find out more about Wellcome and our work at wellcome.org.

8. Non-Disclosure and Confidentiality

Prospective suppliers should be aware that inappropriate publicity could have a serious effect upon Wellcome's business. The information contained within this document or subsequently made available to prospective suppliers is deemed confidential and must not be disclosed without the prior written consent of Wellcome unless required by law.



9. Prospective Suppliers Personnel - IR35 and Off Payroll Working Rules

Before the RFP response deadline, prospective suppliers must make the Wellcome Contact aware if they are intending to submit a proposal where the services will be provided by any individuals who are engaged by the prospective supplier via an intermediary i.e.

- Where the prospective supplier is an individual contracting through their own personal services company; or
- The prospective supplier is providing individuals engaged through intermediaries, for the purposes of the IR35 off-payroll working rules.

10. Independent Proposal

By submission of a proposal, prospective suppliers warrant that the prices in the proposal have been arrived at independently, without consultation, communication, agreement or understanding for the purpose of restricting competition, as to any matter relating to such prices, with any other potential supplier or with any competitor.

11. Funding

For the avoidance of doubt, the output of this RFP exercise will be funded as a **Contract** and not as a Grant.

12. Costs Incurred by Prospective Suppliers

It should be noted that this document relates to a Request for Proposal only and not a firm commitment from Wellcome to enter into a contractual agreement. In addition, Wellcome will not be held responsible for any costs associated with the production of a response to this Request for Proposal.

13. Sustainability

Wellcome is committed to procuring sustainable, ethical and responsibly sourced materials, goods and services. This means Wellcome seeks to purchase goods and services that minimise negative and enhance positive impacts on the environment and society locally, regionally and globally. To ensure Wellcome's business is conducted ethically and sustainably, we expect our suppliers, and their supply chains, to adhere to these principles in a responsible manner.

14. Disability Confident

The Wellcome Trust is proud to be a Disability Confident Employer (DC Level 2) and we encourage all our partners and suppliers to do the same. More information about this can be found on the government website [Disability Confident employer scheme and guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/disability-confident-employer-scheme). Disability Confident is creating a movement of change, encouraging



employers to think differently about disability and take action to improve how they recruit, retain and develop disabled people.

15. Accessibility

Wellcome is committed to ensuring that our RFP exercises are accessible to everyone. Our intention is to work with kindness and consideration and to value the wellbeing of everyone involved in the process. If you have a disability or a chronic health condition, we can offer adjustments to the response format, e.g. submitting your response in an alternate format. For support during the RFP process, please contact the Wellcome Contact.

If, within the proposed outputs of this RFP exercise, specific adjustments are required by you or your team which incur additional cost then please outline them clearly within your proposal. Wellcome is committed to evaluating all proposals fairly and will ensure any proposed adjustment costs sit outside the commercial evaluation.

16. Diversity & Inclusion

Embracing [diversity and inclusion](#) is fundamental to delivering our mission to improve health, and we are committed to cultivating a fair and healthy environment for the people who work here and those we work with. As we learn more about barriers that disadvantage certain groups from progressing in our workplace, we will remove them.

Wellcome takes diversity and inclusion seriously, and we want to partner with suppliers who share our commitment. We may ask you questions related to D&I as part of our RFP processes.

17. Wellcome Contact Details

The single point of contact within this RFP exercise for all communications is as indicated below;

Name: Hardip Dhaliwal
Pronouns: She/ Her
Role: Procurement Officer
Email: RFP@wellcome.org