

Tender response form

Click on any of the underlined headings to start your form. Once you have completed all mandatory questions within a section and moved to the next, you will see a tick appear on the section tab. You can save and return to complete the form at any time by going to [AIMS.health.org.uk](https://aims.health.org.uk) and logging in.

Once you have completed all sections you can submit the form by clicking on "Save and Exit" and then "Yes, submit entire form now." We recommend you print or save a copy of the form before submitting it.

Before completing this form please re-read the invitation to tender (ITT) and accompanying materials carefully.

1. Proposal

Please ensure that you have read the [AIMS user guide](#) and supporting information before completing this tender response form, available on the [Health Foundation website](#).

You can access the [AIMS user guide](#) in the Related Links section at the top right of the page.

You can navigate to the specific ITT information by selecting the 'Programmes open for application' link in the same section.

1.1 Proposal information

AIMS ID: Xxxxxx (Pre-populated unique tender response ID number)

Programme: Contract (Pre-populated project classifier)

Call: Call name (Pre-populated call name)

1.2 Project Title

275 character limit (approximately 50 words).

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

1.3 Please use this section to provide an overview of your proposal

1375 character limit (approximately 250 words).

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

1.4 Detailed proposal

Please give us the details of your proposed approach remembering to refer back to the ITT.

Your proposal must include detailed plans ensuring the following issues are addressed:

- How your proposal will meet the needs of the Health Foundation
- Your approach and methodology
- Your relevant experience and expertise
- Capacity to deliver and value for money

This section does not have a character / word limit, but, we do ask that answers are not more than 3,000 words.

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

2. Management and communications

Please ensure that you have read the **AIMS user guide** and supporting information before completing this tender response form, available on the **Health Foundation website**.

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2.1 Please use this section to describe how you envisage working with the Health Foundation and the other stakeholders in this work.

Additionally, please give details of how you will ensure we are kept informed of the project's progress.

1375 character limit (approximately 250 words).

This section does not have a character limit, but, we do ask that answers are not more than 250 words.

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

2.2 Please provide a project management plan

Please outline what are you going to do (deliverables) and when (milestones).

Please address the following points in your answer:

- Project management arrangements.
- Governance structures, including how strategic decisions about the direction of the project will be made (including resolving issues as they arise), and how partners, executive sponsors and external stakeholders, including patients, will be engaged and involved.
- Reporting mechanisms that will be in place across the project.

Please include the timelines for all deliverables, including high level milestones. It is optional to upload a supporting project plan as an attachment below.

This section does not have a character / word limit, but, we do ask that answers are not more than 3,000 words.

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

Upload project management plan here:

This section is not mandatory to complete before the tender response can be submitted.

2.3 Please consider any risks in relation to the proposal and how you will mitigate against these.

1300 character limit (approximately 200 words).

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

2.4 Project duration

Please enter duration in months.

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

2.5 Please select the area in which your project will have most impact.

If your project is based in England, an additional drop down of regional options will appear.

Please select;

- Eastern for Bedfordshire, Hertfordshire, Essex, Cambridgeshire, Norfolk, Suffolk
- London for all London boroughs including Richmond, Kingston, Sutton, Bromley and Bexley
- South East for Buckinghamshire, Oxfordshire, Berkshire, Hampshire, Isle of Wight, Sussex, Surrey, Kent

| | |
|-----------------|---|
| Country: | <p><i>This section is mandatory to complete before the tender response can be submitted. The options to select from are listed below.</i></p> <ul style="list-style-type: none"><input type="checkbox"/> England<input type="checkbox"/> Northern Ireland<input type="checkbox"/> Scotland<input type="checkbox"/> Wales<input type="checkbox"/> International<input type="checkbox"/> UK-wide |
| Region: | <p><i>This section is mandatory to complete before the tender response can be submitted if 'England' is selected in the previous section. The options to select from are listed below.</i></p> <ul style="list-style-type: none"><input type="checkbox"/> North East<input type="checkbox"/> North West<input type="checkbox"/> Midlands<input type="checkbox"/> Yorkshire and the Humber<input type="checkbox"/> West Midlands<input type="checkbox"/> East Midlands<input type="checkbox"/> Eastern<input type="checkbox"/> South West<input type="checkbox"/> London<input type="checkbox"/> South East |

2.6 Please select the areas in which your project will have additional impact.

If your project is based in England, an additional drop down of regional options will appear.

Please select;

- Eastern for Bedfordshire, Hertfordshire, Essex, Cambridgeshire, Norfolk, Suffolk
- London for all London boroughs including Richmond, Kingston, Sutton, Bromley and Bexley
- South East for Buckinghamshire, Oxfordshire, Berkshire, Hampshire, Isle of Wight, Sussex, Surrey, Kent

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| Country: | <p><i>This section is not mandatory to complete before the tender response can be submitted. See above question for selection options.</i></p> |
| Region: | |

3. Details of team members

Please ensure that you have read the AIMS user guide and supporting information before completing this tender response form, available on the [Health Foundation website](#).

You can access the AIMS user guide in the Related Links section at the top right of the page.

You can navigate to the specific ITT information by selecting the 'Programmes open for application' link in the same section.

3.1 Please provide details of the key members of your team who will be working on the programme of work. Please add a new row for each team member.

(Add a new line per person)

ADD is a multi-function button. You should click on ADD to save the data entered in each row. You will be left with a blank row when you have completed this question in order for the last row to be saved.

| Name: Example: Mr John Smith | Relevant experience for this project | Roles and responsibilities on this project |
|---|---|---|
| <i>This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.</i> | <i>This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.</i> | <i>This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.</i> |

3.2 Supporting documentation: CVs

Please upload one document containing information on the primary members of the project team.

File types accepted: MS Excel (xls,xlsx), MS Word (doc, docx) and PDF.

File upload:

This section is not mandatory to complete before the tender response can be submitted.

Select 'Save' or 'Save & Continue' to ensure the file is attached correctly. This can be found at the bottom of the page.

4. Finances

Please ensure that you have read the **AIMS user guide** and supporting information before completing this tender response form, available on the **Health Foundation website**.

You can access the **AIMS user guide** in the **Related Links** section at the top right of the page.

You can navigate to the specific ITT information by selecting the **'Programmes open for application'** link in the same section.

4.1 What is the total cost of your proposal?

The Health Foundation wishes to maximise the return it provides to beneficiaries and obtain best value from external suppliers.

When considering the resources required, please note the timeframe within which you are required to complete the work. Please include VAT in your costing.

Total cost:

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

4.2 Contract budget

Please complete the attached budget form with detailed costings of your proposal.

Maximum of one file attachment allowed. File types accepted: MS Excel (xls, xlsx), MS Word (doc, docx) and PDF.

[Click here to download the budget template that we would like you to use.](#)
Please upload once complete.

Upload completed budget here:

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

Please select **'Save'** or **'Save & Continue'** to ensure that the file is attached correctly. This can be found at the bottom of the page.

4.3 Please provide full justification for your costs, including the time spent on the project by each member of your team and all other relevant costs.

1350 character limit (approximately 245 words).

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

5. About your organisation

Please ensure that you have read the **AIMS user guide** and supporting information before completing this tender response form, available on the **Health Foundation website**.

You can access the **AIMS user guide** in the **Related Links** section at the top right of the page.

You can navigate to the specific **ITT information** by selecting the **'Programmes open for application'** link in the same section.

5.1 Organisation details

Lead applicant (to whom all correspondence will be addressed)

These details are pulled from the **Contacts** tab. If you need to amend these, save the form and then hover over the **'Contacts'** tab underneath the **Health Foundation** logo. Select the **'Edit my details'** tab and edit as required.

Organisation name:

Pre-populated from the contact information added when registering.

Type of organisation:

This section is mandatory to complete before the tender response can be submitted. The options to select from are listed below.

- Academic Institution
- Acute Trust
- Ambulance Trust
- Arm's Length Body
- Care Home Provider
- Commissioning Body
- Community Healthcare Trust
- Dental Practice
- Eye Care Service
- Foundation Trust
- General Practice
- Hospice Provider
- Local Authority
- Mental Health Trust
- NHS Trust
- Pharmacy
- Local Health Board
- Health and Social Care Trust
- Health and Social Care Board / Public Health Agency
- Regional networks
- Social Enterprise/Community Interest Group
- Special Health Board
- Royal College/Specialist Society
- Voluntary Sector
- Other: please specify

Address line 1:

Pre-populated from the contact information added when registering

Address line 2:

Pre-populated from the contact information added when registering

Address line 3:

Pre-populated from the contact information added when registering

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| Address line 4: | <i>Pre-populated from the contact information added when registering</i> |
| Postcode: | <i>Pre-populated from the contact information added when registering</i> |
| Country: | <p><i>This section is mandatory to complete before the tender response can be submitted. The options to select from are listed below.</i></p> <p><input type="checkbox"/> England <input type="checkbox"/> Northern Ireland <input type="checkbox"/> Scotland <input type="checkbox"/> Wales <input type="checkbox"/> International <input type="checkbox"/> UK-wide</p> |
| Region: | <p><i>This section is mandatory to complete before the tender response can be submitted if 'England' is selected in the previous section. The options to select from are listed below.</i></p> <p><input type="checkbox"/> North East <input type="checkbox"/> North West <input type="checkbox"/> Midlands <input type="checkbox"/> Yorkshire and the Humber <input type="checkbox"/> West Midlands <input type="checkbox"/> East Midlands <input type="checkbox"/> Eastern <input type="checkbox"/> South West <input type="checkbox"/> London <input type="checkbox"/> South East</p> |
| <input type="checkbox"/> Please tick box if registered address is different than above. | |
| Website Address: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| <u>Primary Contact:</u> | |
| Full name: | <i>Pre-populated from the contact information added when registering</i> |
| Title: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| Job title: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| Telephone: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| Mobile: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| Fax number: | <i>This section is not mandatory to complete before the tender response can be submitted.</i> |
| Address 1: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| Address 2: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| Address 3: | <i>This section is not mandatory to complete before the tender response can be submitted.</i> |
| Address 4: | <i>This section is not mandatory to complete before the tender response can be submitted.</i> |

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| Postcode: | <i>This section is mandatory to complete before the tender response can be submitted.</i> |
| Country: | <p><i>This section is mandatory to complete before the tender response can be submitted. The options to select from are listed below.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> England <input type="checkbox"/> Northern Ireland <input type="checkbox"/> Scotland <input type="checkbox"/> Wales <input type="checkbox"/> International <input type="checkbox"/> UK-wide |
| Region: | <p><i>This section is mandatory to complete before the tender response can be submitted if 'England' is selected in the previous section. The options to select from are listed below.</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> North East <input type="checkbox"/> North West <input type="checkbox"/> Midlands <input type="checkbox"/> Yorkshire and the Humber <input type="checkbox"/> West Midlands <input type="checkbox"/> East Midlands <input type="checkbox"/> Eastern <input type="checkbox"/> South West <input type="checkbox"/> London <input type="checkbox"/> South East |
| Email: | <i>Pre-populated from the contact information added when registering</i> |

5.2 Organisational description

Please provide a brief description of the lead organisation in terms of its activities/services and the organisational governance and management structure.

1950 character limit (approximately 300 words).

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

5.3 Accounts

In addition to completing the box below please also provide copies of the last 2 years of your annual report and accounts (if publicly held) or balance sheets/income statements if not. (If available, full audited accounts should be provided although prepared statements may be accepted).

| | The year before last | Last year | This year projected |
|----------------------------------|--|----------------------------|--|
| Period | <i>This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'</i> | | |
| Annual Turnover | | | |
| No of Employees | | | |
| Profitability | | | |
| Supporting Documentation: | | | |
| Year 1: File upload | <i>This section is not mandatory to complete before the tender response can be submitted</i> | Year 2: File Upload | <i>This section is not mandatory to complete before the tender response can be submitted</i> |

5.4 Please provide details of how you will support the Health Foundation's continued compliance with the General Data Protection Regulation?

1950 character limit (approximately 300 words).

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

5.5 Please provide details of your third party liability insurance.

1950 character limit (approximately 300 words).

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

5.6 Additional information

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A or 'No'.

Has your organisation ever had a contract terminated for default?

- Yes
 No

How many staff does your organisation employ?

Has your organisation provided services to the Health Foundation previously?

- Yes
 No

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|---|--|
| Names of joint applicants/partners (where appropriate): | |
| Is there any additional information about your organisation that you feel we should be aware of which has not been requested in this document? | |

5.7 References

Please provide two references of organisations for which you (or lead team members) have provided similar services in the past two years, who have confirmed they would be willing to be approached by the Health Foundation. Please include full name, postal address, telephone number and email address, and explain how you have worked with these organisations.

This section is mandatory to complete before the tender response can be submitted. If this section is not relevant for your tender response, please enter 'N/A'.

| | |
|--|--|
| Name: | |
| Position: | |
| Organisation: | |
| Address line 1: | |
| Address line 2: | |
| Town/City: | |
| Postcode: | |
| Country: | |
| Telephone: | |
| Email: | |
| Brief description of the work undertaken for this organisation: | |

6. Declaration

Declaration

In order to process your application, the Health Foundation needs to collect and process your personal information.

The Health Foundation is the Data Controller (as defined by the Data Protection Act 2018, the General Data Protection Regulation, and all applicable laws which replace or amend it) who will collect and process your personal data.

Please refer to our Privacy Notice for full details of what data we collect about you, how we use it, who we share it with, how long we keep it and your rights relating to your personal data. Our Privacy Notice is available on our website - <http://www.health.org.uk/privacy-policy-and-cookies> . If you do not have access to the Internet, please write to the Health Foundation Data Protection Officer (DPO) at the details listed below with your address and a copy will be sent to you in the post.

In summary, we will collect and process your information to assess your application.

The information we collect will be;

- Name, job title, organisation name and contact details such as email address.
- Processing requires your application information and personal details to be shared with third parties including assessors, website editors and copywriters, partner organisations and service providers.
- We will ensure that all parties we share your data with keep your information secure and do not use it for any other purposes than those which we have specified in the Privacy Notice.
- We will share your information if we are required to by law.
- We will retain this data for as long as is necessary for the relevant activity. We may keep some of your data indefinitely.

If you have any concerns about how your personal data is being collected and processed, or wish to exercise any of your rights detailed in our Privacy Notice please contact:

The Health Foundation Data Protection Officer (DPO)
The Health Foundation
90 Long Acre
London
WC2E 9RA

- By submitting your completed application, you give permission for details of this application and contact information to be shared on the Health Foundation website (following your approval of the copy) should you be successful in your application.
- Please click here if you would like to subscribe to the monthly Health Foundation newsletter – <http://www.health.org.uk/newsletter>

| 6.1 Declaration | |
|---|--|
| Declaration of applicant: | <input type="checkbox"/> I confirm that I have read and understood the above privacy notice. |
| Signed on behalf of the organisation: | <input type="checkbox"/> I confirm that the organisation named on this proposal has given me authority to submit this application on its behalf. I confirm that the information I have supplied is, to the best of my belief, correct. |
| Do you agree to all the terms and conditions in our Sample contract (found in Annex 1 of the ITT)? If not, please give details. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Name: | <i>Pre-populated from the contact information added when registering.</i> |
| Job title: | <i>Pre-populated from the contact information added when registering.</i> |
| Date: | <i>Pre-populates to the date you create the form.</i> |

| 6.2 Marketing Information | |
|---|----------------------|
| Tell us how you first heard about this programme. | <i>Please select</i> |