

Gambling-Related Harm Minimisation in the Armed Forces

Invitation to Tender

Responsible Gambling Trust

Friday 19th February 2016

1. About the Responsible Gambling Trust (RGT)

- 1.1 RGT is the leading charity in the UK committed to minimising gambling-related harm. As an independent charity funded by donations from the gambling industry, the RGT funds education, prevention and treatment services and commissions research to broaden public understanding of gambling related harm. RGT's aim is to stop people getting into problems with their gambling, and ensure that those that do develop problems receive fast and effective treatment and support.
- 1.2 The RGT develops its commissioning plans in collaboration with the Responsible Gambling Strategy Board and the Gambling Commission. These arrangements are underpinned by an 'assurance and governance framework' agreed between the three parties and rely on openness, transparency and partnership to deliver results.

2. Purpose and Scope of the Invitation to Tender (ITT)

- 2.1 This document relates to the ITT for Gambling-Related Harm Minimisation in the Armed Forces advertised by the RGT on their website www.responsiblegamblingtrust.org.uk dated February 19th 2016.
- 2.2 The purpose and scope of this document is to:
 - Outline the tendering process and timetable;
 - Provide applicants with sufficient information to enable them to consider the appropriateness of this invitation and to respond;
 - Outline the information required in the response;
 - Set out the administrative arrangements for the receipt of proposals.

3. Work Requirements

- 3.1 Individuals and families within or retired from the Armed Forces may be considered an at-risk group in need of intervention to reduce gambling-related harm¹. The overall aim of this funding programme is to develop evidenced approaches to reduce the impact of gambling-related harm amongst those within, or retired from, the Armed Forces in Great Britain.

¹ Disley, E., Pollitt, A., Culley, D.M., & Rubin, J. (2011) Map the Gap: A critical review of the literature on gambling-related harm. RAND, UK. Available from:
http://www.rand.org/content/dam/rand/pubs/technical_reports/2011/RAND_TR1013.pdf

- 3.2 RGT recognises that gambling is, for the majority of those who partake in the activity, a fun and enjoyable leisure pursuit, and as such tenderers are reminded that reducing gambling participation is not a proxy for the reduction of gambling-related harm.
- 3.3 RGT works with gambling operators and others to explore ways in which the gambling industry themselves can reduce gambling-related harm. These funds will therefore not be available to operator-based proposals.
- 3.4 We expect that projects should have a national focus – either in terms of geographical spread of provision, or as pilot projects with the intention of evidencing national roll out.
- 3.5 RGT are being deliberately non-prescriptive about the approach to be taken to harm minimisation, in order to encourage innovation. The work should encompass information and advice, signposting and harm minimisation activity, and should be practical, rather than solely theoretical. RGT remains open minded to innovative approaches both in relation to the project focus and the design. However these must be clearly and fully explained in the proposal.
- 3.6 In particular, we should like to encourage proposals which show evidence of investment by other public bodies (e.g. Armed Forces, NHS, local authorities). This may be through joint working and public sector investment in cash or kind.

4. Approach

- 4.1 The proposal should outline the organisation(s) previous experience in this area (or related areas), and provide a candid assessment of the potential strengths and weaknesses of the proposed approach. It should explain the specific benefits of using this approach over others.
- 4.2 Proposals should be explicit about the aims and objectives of the project, and should identify appropriate outputs and outcomes, and explain how these will be measured, monitored, and used in project review and development.
- 4.3 It is expected that the proposals would address the following:
 - Evidence of an assessment of need, and how the work will address this;
 - Clear demonstration of how the organisation(s) will gain access to this often difficult to reach group;
 - Evidence of appropriate targeting to achieve maximum impact;
 - Clear aims and objectives;
 - Service user input throughout life cycle of project;
 - Transparent monitoring, evaluation of the effectiveness of the intervention, and review;
 - Dissemination of findings to a range of national and local stakeholders;
 - Sustainability of the work after the funding ceases (e.g. ongoing investment from public bodies);
 - How the work improves our understanding of gambling-related harm and its impact.
- 4.4 We should like to encourage proposals which show evidence of investment by other public bodies (e.g. Armed Forces, NHS, local authorities). If the proposed work includes such a relationship, full details of the nature and operation of this relationship must be detailed within the proposal.

4.5 The proposal should detail what inputs the project will require to perform effectively.

5. Programme Schedule

5.1 The funding is available for up to 24 months, with key deliverables and milestones expected to include the following, although this may differ dependent upon the nature and size of the project funded:

- Project inception
- Interim report(s) (may be more than one for large projects)
- Draft report
- Final report
- Wider dissemination (stakeholder presentations, conferences)

5.2 Close contact with RGT and regular progress updates will also be expected, and project teams may be invited to discuss their progress at the quarterly National Clinician's Network Forum².

6. Tendering Process and Timetable

6.1 The ITT is issued on February 19th 2016 and applicants will have a period of four weeks to review the documentation and to submit queries relating this ITT.

6.2 Queries must be submitted no later than 17:00 GMT, Friday 18th March 2016 to ArmedForcesITT@responsiblegamblingtrust.org.uk with subject heading "Gambling-Related Harm Minimisation within the Armed Forces ITT Query".

6.3 Any queries should clearly reference the appropriate paragraph in this documentation. RGT will respond to all reasonable requests for clarification of any aspect of this ITT and supporting documents, if made before the above deadline.

6.4 RGT reserves the right to publish the response to a request for clarification in the interest of fair competition. Such updates will be available via the RGT website.

6.5 Proposals must be submitted by 17:00 GMT on Friday 15th April 2016 to ArmedForcesITT@responsiblegamblingtrust.org.uk. The RGT reserves the right to extend any deadline. Any extension granted will apply to all applicants.

6.6 The RGT reserves the right to reject any proposals:

- a) Received after the deadline;
- b) Which do not comply with the conditions and requirements set out in this ITT;
- c) Which do not deliver sufficient value for money, quality or do not meet the RGT's strategic objectives.

6.7 All documents and correspondence relating to the tender must be written in English. Applicants should consider only the information contained within this ITT and supporting documents, or otherwise formally communicated to you in writing when making your offer.

² National Clinicians Network Forum: A quarterly meeting of service providers currently working with, or interested in, problem gamblers and affected others, to share best practice and advance knowledge.

- 6.8 The submission of tender documentation should demonstrate a thorough understanding of Harm Minimisation in the gambling field, and include:
- a) An outline of, and justification for, the proposed methods;
 - b) A summary of key activities to support specified outputs and outcomes;
 - c) A timetable linked to key activities (e.g. GANTT chart);
 - d) Full disclosure of costs;
 - e) A risk assessment and proposed risk mitigation;
 - f) A description of the organisation(s) which will undertake the work, including an overview of directly relevant experience;
 - g) Contact details of each participating organisation;
 - h) Contact details for two referees.

7. Intellectual Property

- 7.1 Successful individuals or organisations will be required to assign to RGT all rights in and to any intellectual property created or arising from the work carried out by the individual or organisation (or by the organisations employees or agents).

8. Confidentiality and Publicity

- 8.1 RGT may from time to time require that successful individuals or organisations enter into a confidentiality agreement with RGT.

9. Budget

- 9.1 The Gambling-Related Harm Minimisation in the Armed Forces programme will have a budget of £37,500 per annum, and the funding will be for two years (a total budget of £75,000). Although size of bid will not directly impact application evaluations, value for money and justification for project costs will be among the key assessment criteria (see Appendix A for Awarding Criteria). The RGT are committed to funding the right programmes, be that a number of smaller projects, or one larger project.

10. Eligibility

- 10.1 Applicants must be based in England, Scotland or Wales.
- 10.2 The project must be run by more than one person and have some formal structure, for example a management committee or steering group (documentary evidence of this will be required).
- 10.3 Applicants must be able to demonstrate financial sustainability. Applicants may be required to share accounts for up to the previous 24 months, on request.

11. Conditions of Tender

- 11.1 RGT reserves the right to issue the response to any clarification request made by you to all applicants unless you expressly require it to be kept confidential at the time the request is made.
- 11.2 The information contained in this ITT and the supporting documents and in any related written or oral communication is believed to be correct at the time of issue, but RGT does

not accept any liability for its accuracy, adequacy or completeness and no warranty is given as such. This exclusion does not extend to any fraudulent misrepresentation made by or on behalf of RGT or to any other liability which cannot be excluded at law.

11.3 By issuing this ITT, the RGT is not bound in any way to enter into any contractual or other arrangement with you or any other party.

11.4 It is intended that the remainder of this procurement will take place in accordance with the provisions of the ITT but the RGT reserves the right to terminate, amend or vary the tendering process by notice to all known tendering organisations in writing. The RGT does not accept any liability to you for any losses caused to you as a result of such termination, amendment or variation.

11.5 You will not be entitled to claim from the RGT any cost or expenses that you may incur in preparing your proposal irrespective of whether or not your tender is successful.

11.6 All information supplied to you by the RGT, either in writing or orally, must be treated in confidence and not disclosed to any third party (save to your professional advisers) unless the information is already in the public domain.

11.7 There must be no publicity by you regarding the project or the future award of any contract unless the RGT has given express written consent to the relevant communication.

Appendix A - Awarding Criteria

Tendering organisations are required to respond to **ALL** of the criteria below. To assist our evaluation of your tender submission, please ensure you clearly cross-refer your responses in the tender to the criteria.

Quality Criteria: 65 marks will be allocated to your response to the award criteria shown in Table 1 below:

Table 1:

Quality Criteria	Weighting
A demonstrated understanding of the background to the project and RGT aims and objectives.	x1
Quality and appropriateness of the methodology and work plan for meeting all of the requirements set out above.	x3
Quality and appropriateness of the project management proposals including arrangements for quality assurance through the project. Coverage of the risk register and appropriateness of counter-measures.	x1
Quality of relevant expertise and experience of the key personnel proposed for this contract in harm minimisation or similar social contexts.	x1.5
Added value that the proposed approach/team brings to RGT and its needs.	x1

Award criteria will be scored using the indicators set out in table 2 below:

Table 2:

Scoring Methodology		
0	Very Poor	No response or partial response and poor evidence provided in support of it. Does not give confidence in the ability of the Bidder to deliver the Contract and/or our requirements are not met in most respects.
1	Weak	Response is supported by a weak standard of evidence in some areas giving rise to concern about the ability of the Bidder to deliver the Contract and/or our requirements are not met in some respects.
2	Satisfactory	Response is satisfactory and supported by a satisfactory standard of evidence. Gives moderate confidence in the ability of the Bidder to deliver the contract, meets the requirements in most respects.
3	Good	Response is comprehensive and supported by a good standard of evidence. Gives a higher level of confidence in the ability of the Bidder to deliver and meets requirements.

4	Very Good	Response is comprehensive and supported by a very good standard of evidence meeting requirements and may exceed them in some respects. Gives a high level of confidence in the ability of the Bidder to deliver the contract.
5	Exceptional	Response is very comprehensive and supported by a high standard of evidence. Gives very high level of confidence in the ability of the Bidder to deliver the contract. May exceed requirements in several respects.

The assessed overall score for each question will be calculated by multiplying the quality score received with the weighting for that question, set out below. This score will then be divided by the total maximum available score for the Quality Criteria and multiplied by 65% to get your final score for that question. NB – Although the criteria are numbered, this does not relate to any order of importance.

Price criteria: 35 marks will be awarded to the lowest priced bid and the remaining bidders will be allocated scores based on their deviation from this figure. Your total costs figure including VAT and expenses in the schedule of charges will be used to score this question.

For example, if the lowest price is £100, and the second lowest price is £125, then the lowest priced bidder gets 35% (full marks) for price and the second placed bidder gets 26.2% and so on ($25/100 \times 35 = 8.75$ marks; $35 - 8.75 = 26.25$ marks).

Overall quality and price scores will be aggregated to provide the final bidding assessment score. This will be used to shortlist bidders. Scores will be moderated across assessors and may be further adjusted after (any) clarification meetings and/or responses. The highest scoring overall bidder after (any) clarification will be the preferred supplier.