

Evaluation of the effectiveness of the National Gambling Support Network

Invitation to Tender (ITT)

April 2024

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About GambleAware

GambleAware is an independent charity that commissions evidence-informed prevention and treatment services in partnership with the NHS, public health agencies, local authorities, the voluntary sector, and other expert organisations and agencies, across Great Britain.

The central aim of GambleAware's purpose and vision is to achieve effective prevention of gambling harms, and access to treatment and support. GambleAware's [Organisational Strategy](#), published in April 2021, outlines our priorities and objectives to guide our work towards our vision of a society where everyone is safe from gambling harms. Our [Commissioning Intentions](#), published last year build on our Organisational Strategy.

GambleAware recognises the importance of evaluating and learning from our commissioned work. We are committed to building evidence of 'what works for whom in which circumstances' to support and inform our commissioning, as well as generating knowledge to contribute to the wider body of evidence, and national policy.

Introduction

GambleAware is seeking to commission a learning and evaluation partner to carry out an evaluation that delivers independent, actionable and robust insights on the effectiveness of the National Gambling Support Network (NGSN). The commissioned learning and evaluation partner will play a key role in generating and disseminating learning throughout the NGSN as well as conducting an integrated review of its clinical, operational and economic effectiveness. This flagship, mixed-methods programme of work will examine the NGSN as a system; offering valuable insights and assurances to support the future commissioning of the NGSN post-White Paper.

While this document outlines the overall objectives and areas of interest for the project, we also encourage the commissioned partner to contribute additional insights, knowledge and creativity. We are open to suggestions for evaluation questions, strands and methodologies including the exploration of AI and machine learning.

Background

Following the government's review of the [Gambling Act 2005](#), it released the White Paper titled [High stakes: gambling reform for the digital age](#), outlining its plans for the reform of gambling regulations. After the release of the White Paper, the government consulted on the structure, distribution and governance of the proposed statutory levy on gambling operators. As part of the suggested changes and introduction of the statutory levy, the government has proposed the creation of three separate commissioners: (1) a treatment commissioner (the NHS); (2) a research commissioner (UKRI); and (3) a prevention commissioner (to be confirmed). Under this

arrangement, which [GambleAware broadly supports](#), the treatment and support that is provided by the NGSN would fall under the NHS in its role as treatment commissioner. To facilitate the transition to this new arrangement and offer insights into its benefits, functioning and strengths, an evaluation of the NGSN as a holistic system is being sought.

GambleAware believes that a robust and independent evaluation is crucial to generate the necessary insights to engage key stakeholders and inform decision-making, ultimately leading to the adoption of the optimal prevention and treatment model. The presence of an independent evaluation will also enhance the credibility to the NGSN as a system particularly in future partnership endeavours with the NHS.

About the NGSN

The [National Gambling Support Network](#) (NGSN), formerly known as the National Gambling Treatment Service (NGTS), is dedicated to delivering free, confidential and personalised support for anyone experiencing problems from gambling, as well as those affected by someone else's gambling.

Commissioned by GambleAware, the network is comprised of a diverse range of voluntary sector treatment providers based across Great Britain. The network has a particular emphasis on early intervention. Its primary goal is to prevent the escalation of harms associated with gambling, providing the necessary treatment and support. In turn, this helps to alleviate the burden on the National Health Service (NHS).

The NGSN consists of 11 organisations, some of which operate on a regional level while others have a national scope:

- **Regional providers:** [ARA](#), [Aquarius](#), [Beacon Counselling Trust](#), [Breakeven](#), [GamCare](#), [NECA](#), [RCA Trust](#)
- **National providers:** [Adferiad Recovery](#), [BetKnowMore](#), [GamCare](#), [Primary Care Gambling Service \(PCGS\)](#), [Gordon Moody](#)

The NGSN was redesigned through 2022 to meet the growing and changing needs of those at risk of gambling harm in Great Britain. GambleAware's [Treatment and Support Survey 2021](#) found that only a small group of people were accessing treatment services in Great Britain compared to a much wider population in need of them.

Following an [independent review](#) and engagement with gambling harm providers, people with lived experience, the NHS and Local Authority partners, GambleAware developed a set of [commissioning intentions](#) that outlined how GambleAware intended to work with providers and partners to deliver the new service delivery model of the NGSN. The transformation of early

intervention, support and treatment services generates several long-term benefits for the gambling harms sector, with the promotion of a holistic, joined up service and by creating the conditions and incentives across the sector for providers to innovate and deliver cost-effective, high-quality outcomes for service users.

This is reflected by a regional first approach, resulting in improved referral routes for anyone experiencing harms from gambling. During any form of brief intervention for gambling harm, or any initial call to the National Gambling Helpline, staff direct those in need of support to their local treatment provider. At this stage, local providers conduct an assessment and refer individuals into the best treatment or support option for their needs.

Within GambleAware, the NGSN is managed through the System Commissioning team. Since April 2023, GamCare has provided the National System Coordinator function for the NGSN. The purpose of this function is to:

- Mobilise and support the transformation of the NGSN
- Ensure continuous improvement of service delivery and outcomes for service users, through the implementation and monitoring of robust governance and knowledge management processes
- Increase geographical footprint of services delivery
- Ensure effective coordination between national and regional providers with strategic oversight of the operational issues.

The System Coordinator function will be absorbed by GambleAware by July 2024 and will be taken forward by GambleAware's System Commissioning Team. GamCare will continue to be a part of the NGSN and provide services, including the [National Gambling Helpline](#).

The NGSN accounts for the vast majority of treatment and support delivered for people affected by gambling harms. However, it is not the only form of support. The [NHS](#) also provides treatment through a network of specialist clinics, and this network has recently grown to include 15 clinics across England. Assessing and understanding how these two systems work alongside each other, and how they can be better integrated, will be one of the priorities for the evaluation. OHID's recent [assessment](#) of the overall gambling treatment system provides some useful baseline evidence.

Evaluation and learning objectives

This evaluation aims to:

1. Provide a holistic and system-level perspective as to impact and effectiveness of the NGSN;
2. Generate learnings to guide the improvement of the NGSN; and
3. Inform any future post-White Paper transition.

Therefore, the core objectives for this work are to:

- Provide a robust independent external assessment of the overall effectiveness of the NGSN and the added value that it brings
- Demonstrate the success and strengths of current practice by identifying what is working well
- Identify and share any opportunities for learning and improvement
- Provide evidence and assurance that the system is working as intended
- Provide evidence, insights and assurance to inform any future commissioning state and transition post-White Paper.

In order to achieve these objectives, it will be important that the evaluation can:

- Go beyond what is known from existing data and reporting
- Work closely with service providers, service users and other key stakeholders to gather their perspectives
- Identify the specific expertise and specialisms within the NGSN
- Illustrate the full nature of the provision that exists and how it interacts with the wider system
- Increase awareness of the full range of tools, assessments and approaches used
- Provide a more holistic picture of the needs, experiences, and outcomes of service users than is currently captured
- Increase awareness of the wider issues that service users present with and the capacity of the system to work to work holistically
- Increase understanding of key processes, user journeys and decision-making throughout the system
- Assess the complementarity of NGSN approaches with wider statutory system approaches
- Identify any opportunities for learning, improvement and further strengthening the system.

Suggested research questions

Below is our current view of the key research questions that this work should explore. We would expect bidders to suggest research questions as part of their proposals and we are open to other suggestions and amendments to the below. In addition, we would expect the research questions to be further refined during the set-up phase of the work.

- How effective is GambleAware at commissioning the overall system, and how can this be improved?
- To what extent do service users get what they need from the system?
- How well does the NGSN work as one overall system?

- How integrated is the system with provision around it (and what types of services does it integrate with to meet user need)?
- How are service users assessed, triaged and monitored?
- What are the overall experiences of service users as they move through the system?
- What processes and rationale are involved in referral pathways (e.g. referral criteria)?
- What factors account for variations in outcomes, both across providers and service users?
- What factors account for the levels of (and variation in) referrals, and how much is unexplained?
- How consistent is the quality of provision, and how this can be improved?
- What are the overall fiscal and economic benefits created by the system, and how these can be maximised?

Suggested strands

We currently envisage three core strands to this work, each with a sub-set of areas of interest.

- **Operational effectiveness**
 - [Review of effectiveness of integration within/across system¹](#)
 - Implementation of recommissioning
- **Clinical effectiveness**
 - [Review of referrals and pathways – levels of integration and with whom](#)
 - [Review of referrals and pathways \(between Helpline & treatment provision\)](#)
 - [Provider approaches to risk management](#)
 - [Adherence to and achievement of NGTS Outcomes Framework](#)
 - [Implementation and effectiveness of treatment approaches²](#)
 - Review of interventions delivered and variation by case complexity, patient characteristics, provider
 - Variation in drop-out rates, and factors affecting it
- **Economic effectiveness**
 - [Cost-effectiveness analysis](#)
 - Cost-benefit analysis

Given the potentially wide-ranging focus of the evaluation, we have provided a list of ‘must-have’ areas that we would expect to see covered comprehensively as part of any proposed approach in [blue](#) above.

¹ Please note that GambleAware has commissioned a separate evaluation of its [Mobilising Local Systems](#) funding programme, which seeks to develop an integrated system: ensuring that, at a local and national level, statutory organisations are able to deliver preventative interventions, support early identification, holistic support and treatment as well as ensuring people are able to live in communities that support their ongoing recovery.

² Please note that GambleAware has commissioned a scoping study to explore the effectiveness of psychological and psychosocial interventions, with an output expected before the end of summer 2025.

Potential approaches

We envisage that this will need to be multidisciplinary and mixed-methods programme of work involving a combination of the following methods. This should not be seen as definite requirements, nor as exhaustive. We are open to bidders suggesting alternative approaches not listed below that meet the requirements detailed within this ITT.

- **Desk research**
 - Reviews of existing policies and procedures
 - Mapping existing provision, skills and specialisms
- **Qualitative research**
 - Process evaluation and mapping
 - Interviews with practitioners and service users
 - Interviews with commissioners and stakeholders
 - Reviews of case files or documentation
 - Site visit and observation
- **Quantitative research**
 - Analysis of monitoring data held by GA
 - Collation and analysis of existing management information and performance data held by providers
 - Analysis of DRF/Theseus data
 - Data collection on measures or metrics not currently captured systematically
 - Statistical and economic modelling

Data

A significant amount of data and information on the NGSN already exists, which the commissioned learning and evaluation partner will have access to at the start of the project. This evidence includes, but is not limited to:

- Quarterly monitoring reports on the performance of the NGSN
- The Data Reporting Framework (DRF) and related annual statistics
- Demand and capacity modelling research with information on unit costs of NGSN Tier 3 and Tier 4 provision³
- Financial budget information and contract information held by GambleAware
- Financial reporting data submitted by NGSN treatment providers
- A [strategic review](#), [outcomes framework](#), [service blueprint](#), and [commissioning intentions](#) paper for the system, all published in 2022.

³ This is unpublished but can be shared with the commissioned learning and evaluation partner.

These documents are held by GambleAware and can be provided at the start of the project. We expect that treatment providers will also have internal reports, evaluations, data, policies and other information that they will be able to share early on in the project.

The information listed above is predominantly focused on quality and performance – with some outcome data (as per the NGTS Outcomes Framework). Please note that there is no external evaluation evidence/data nor evaluation outputs available on the NGTS (the predecessor to the NGSN) beyond GambleAware’s own internal reports and [annual statistics reports](#).

The Data Reporting Framework (DRF)

The collection of data from clients receiving treatment through the NGSN is managed through a nationally co-ordinated system known as the Data Reporting Framework (DRF), initiated in 2015. Individual treatment services collect data on clients and treatment through bespoke case management systems. This data is then pseudonymised and uploaded to a centralised system. Data items collected and uploaded by the treatment providers are set out in the [DRF Specification \(2021\)](#)⁴. Data are collected using four separate tables which provide details of client characteristics, gambling history, referrals and appointments.

The DRF constitutes a co-ordinated core data set, collected to provide consistent and comparable reporting at a national level. Some minor differences exist in data collection between agencies, such as the addition of supplementary categories in individual fields or in the format of collected data. These are reformatted or recoded at a national level to ensure consistency within the DRF specification. Some [secondary data analysis](#) using DRF data has been conducted.

The Treatment and Support (T&S) Survey

The annual [T&S survey](#) provides key data on gambling harms in Great Britain and has been carried out independently by YouGov each year. As well as showing how rates of gambling harms vary across different groups of people and areas, the survey provides unique insights into the demand for and usage of a wide range of treatment and support. It also explores the reasons why people do or do not access support, and their experiences of accessing support. The survey provides crucial evidence for understanding rates of unmet need for gambling harms, and how these vary across the country. Its insights also help to inform the design and delivery systems of support for gambling harms.

Phases

In order to support an appropriate learning and evaluation approach, we suggest beginning with a ‘scoping’ phase that explores the available data and informs the subsequent ‘delivery’ phase. Given the data already available for review, there are also a number of ‘quick wins’ that could be

⁴ Please note that the most recent specification will be made available to the commissioned evaluation supplier.

pursued initially within the 'scoping' phase. We are open to bidders suggesting an alternative phasing of activities that meets the requirements detailed within this ITT.

Please note that there is no logic model or theory of change available for the newly commissioned NGSN. However, we can share documentation that details the recommissioning process, including a newly developed outcomes framework, service blueprint and delivery model.

- **Phase 1: Scoping**
 - Development of theory of change
 - Reviews of existing policies and procedures
 - Review of existing service specifications and provider-level documentation
 - Mapping existing provision, skills and specialisms
 - Analysis of Data Reporting Framework (DRF) extracts and annual statistics
 - Interviews with commissioners and stakeholders
 - Early insights and recommendations for Phase 2
- **Phase 2: Delivery**
 - Further qualitative research and evaluation
 - Further quantitative research and evaluation
 - Technical reports on each strand
- **Phase 3: Synthesis**
 - Testing findings with stakeholders and service users
 - Write up of overall learnings and recommendations

This is to be a comprehensive, flagship evaluation of the NGSN – as such we expect it to cover all parts of the NGSN in terms of scope and for evaluation activity to take place in all GB regions in which NGSN providers operate. We also anticipate some more detailed work to take place in a sample of regions to provide a depth of insight. As such, all 11 providers, as well as other relevant stakeholders, should be included in evaluation activities across the lifetime of the evaluation.

We do not foresee the need to engage with NHS ethics approval processes at this stage, and would welcome the view of bidders. We would expect bidders to suggest proportionate approaches to ensure the ethical standing of this work.

Audience and intended use

There are three broad audience groups for this work, listed below in no particular order. It is important that each is serviced appropriately/meaningfully through evaluation activities and outputs. In particular, GambleAware is keen to ensure that the evidence and insights generated as part of this work are ready in time (and in a format) to inform broader discussions around the future of the NGSN. It should be noted that for this reason a wholly summative approach to evaluation activities/reporting would not be appropriate for this work.

1. **GambleAware:** Supporting us to learn and improve with regards to commissioning and coordinating a GB-wide network; understanding better how we can work with and support regional and national partners, local communities and other stakeholders; informing our approach to the transition to a statutory levy; supporting the implementation of the new commissioning model and the future of the NGSN, as laid out in the White Paper.
2. **Wider National Gambling Support Network (NGSN) providers and their stakeholders:** Supporting the sharing of key learnings to accelerate the overall goals of the NGSN and its providers within their regional/national systems.
3. **Wider system stakeholders:** The future Prevention, Research and Treatment Commissioners from the White Paper, DCMS, NHS provider collaboratives, NHS England and representatives from Scotland and Wales, the Gambling Commission and other stakeholders involved in determining the post-White Paper landscape.
4. **The evaluator for the Mobilising Local Systems (MLS) funding programme:** As noted above, a separate evaluation of MLS funding programme is underway. It will be vital for the for MLS and NGSN evaluators to work together and share insights and to minimise duplication and research burden on participants.
5. **The lived experience community:** GambleAware is committed to the meaningful involvement of individuals with lived experience of gambling harms in our work. We have a Lived Experience Council which offers strategic-level input into our activities. We would be happy to explore how best to ensure the voice of those with lived experience is incorporated and centred in this work. For example, we have connections with both the [Gambling Lived Experience Network \(GLEN\)](#) and the [Affected Lived Experience Research, Treatment and Support \(ALERTS\)](#) group and would be happy to link the evaluator to them. Tenders will be assessed on their consideration of EDI and lived experience within their proposed approaches (see scoring criteria below).

A tailored engagement approach will likely be required for each stakeholder category/group. GambleAware staff and NGSN providers are aware of this evaluation and are all available to take part in evaluation activities, given sufficient warning and information as to the input required. Should an advisory group or steering committee be proposed, we would be happy to suggest candidates from GambleAware and the NGSN to join.

GambleAware is happy to act as 'gatekeeper' for wider system stakeholders, as required, and can offer introductions, where possible. These stakeholders are not uniformly aware of the evaluation and sufficient time and incentives should be considered to ensure their participation, if required.

Outputs

Potential suppliers are invited to propose their own ideas for outputs that meet and align to the aims and priorities of the programme. GambleAware is particularly interested in 'innovative'

outputs, designed to engage specific audiences with relevant findings, at appropriate points in the evaluation.

Key considerations

1. Summative insights are required **no later than December 2025** (with a hard stop by March 2026) in order to allow for learning and recommendations to be fed into wider discussions in a timely manner.
2. Given the large amount of data already available on the NGSN, **'quick wins' should be prioritised as part of a scoping phase**, which should then inform the mainstage of the evaluation. This scoping phase should therefore be seen as a critical determinant of the eventual scope and focus of the evaluation, and will necessitate a phasing of activities to some degree.
3. A formative approach should be taken (ie one that focuses on making iterative improvements) to allow for **insights to be surfaced and shared on a regular basis** with providers and other key stakeholders. This will help avoid insights not being available until after key decisions have been made.

While final outputs will be required by December 2025, we expect early and interim findings to be disseminated to GambleAware sooner/on a more regular basis, where possible, that align to key decision-making junctures. It is vital to the success of this work that insights are available in a timely manner and can inform the transition to a statutory levy system. In this way, this work should be seen as formative, in that it seeks to provide insights as they are generated in order to inform ongoing discussions around the White Paper. We expect to agree the exact nature and format of outputs with the chosen supplier at project inception, but would envisage them including:

- Phase 1 – Scoping report(s), possibly by strand/thematic area
- Phase 2 – Interim report(s), possibly by strand/thematic area
- Phase 3 – Final report with executive summary

We would also be grateful open to other formats of output, that meet the needs stipulated above such as learning digests/blogs, briefing/policy notes or papers, standalone case studies, etc.

Any written reports must be prepared in a clear, accessible, and concise manner, and the first draft should be of publishable standard, in line with GambleAware's [Research Publication Guidelines](#). Furthermore, up to three drafts of outputs may be required before final versions are agreed, and potential suppliers should allow for this in the timings and costs they propose. Stakeholders to be involved in validating, reviewing/commenting and signing off outputs will be agreed with the contractor in advance.

Subject to the exact approach of the commissioned organisation(s), deliverables should also include:

- Collated datasets – anonymised quantitative data generated or analysed in the course of the research, in Excel format.
- Data collection tools – final versions of any data collection tools designed in the course of the evaluation.

Commissioning and contract management

GambleAware's preference is to commission a partner or consortium of partners that collectively possess the required breadth of experience and expertise meet the objectives and requirements detailed within the ITT. Should a consortium approach be proposed, GambleAware will contract a lead partner, who would sub-contract any other partners. Please note that GambleAware may require details on any sub-contracted partners. This information may be requested at any point before or after the contract award to ensure GambleAware is complying with government guidelines and standards. These details may include (but are not limited to):

1. Organisation information
2. Organisation policies
3. Confirmation the organisation(s) is not associated and does work with industry clients
4. Organisation Financial Accounts
5. Organisation Insurance Details

The contract will be managed by an evaluation lead at GambleAware, who will be responsible for day-to-day liaison with the contractor, and for agreeing final versions of all data collection tools and outputs. Other key stakeholders for this work are GambleAware's Director of Evidence and Insights, Director of Strategy and Director of System Commissioning.

An inception meeting will be held at the start of the contract, after which contractors will be expected to:

- Provide regular (eg weekly/fortnightly) progress updates to GambleAware by email, and less regularly (eg fortnightly/monthly) via Teams/Zoom – these may be required more frequently during key periods of evaluation activity
- Attend (virtual/in-person) strategic review meetings with GambleAware following completion of each key evaluation phase.

Timetable

It is anticipated that this work will commence as soon as possible in 2024 and be completed by December 2025. Proposals should include a timeline for the evaluation, with indicative timelines for different phases.

We reserve the right to invite shortlisted suppliers to give a short presentation of their proposal before a final decision is made. If required these will take place in **w/c 20th May 2024**.

A detailed timeline will be agreed with the contractor, which will form part of the contract. The indicative timetable for procurement is as follows.

Table 1. Procurement timetable

Task	Date
ITT issued	Wednesday 3rd April 2024
Clarification question deadline	Wednesday 17th April 2024 at 17:00
Clarification question responses circulated	Monday 22nd April 2024
Proposal deadline	Wednesday 8th May 2024 at 09:00
Contractor presentations (if required)	w/c 20th May 2024
Contractor notified	w/c 27th May 2024
Inception meeting	June 2024
Phase 1/scoping outputs	November/December 2024
Final outputs delivered and project close	Winter 2025/26

Contract price

A budget of up to £350,000 (incl. VAT) is available for this work. This must cover liability for all costs including staff costs, attendance at meetings, equipment, access to data, any reimbursement of research participants, travel and subsistence, overheads, and participation in any dissemination of the research included in your proposal.

Payments will be phased and linked to the successful completion of key stages of the work. Proposals liable for VAT should indicate this in their proposal. **Full itemised costs must be outlined, including all staff costs and any non-staff costs.** All bidders must submit, alongside their written proposal, the attached excel template provided by GambleAware.

[Price File](#)

Terms and conditions

To ensure expediency, we ask that any questions or clarifications regarding our Terms and Conditions are sent to procurement@gambleaware.org by **Wednesday 17th April**. Bidders are unable to make amendments to the Terms and Conditions post tender award.

If there is no correspondence received by Wednesday 17th April, GambleAware will take this as acceptance to the Terms and Conditions.

Please find our standard service agreement here: [Standard Template Service Agreement](#)

Criteria for the evaluation of proposals

Proposals will be assessed on the following criteria and weighting. Potential suppliers should be aware that if a proposal is judged unsatisfactory (ie a score of 0) on any of the below criteria it may be ruled out of further consideration.

Each criterion has been allocated a weighting from 2 to 4 (indicating importance); this weighting will be multiplied by a 0 to 4 score determined by a reviewer (see scoring criteria below).

By way of example, a question allocated the maximum weighting of 4 and that has been answered comprehensively, scoring a maximum score of 4, will have scored a total of $4 \times 4 = 16$.

Table 2. Scoring criteria

Score	Score Description
0	Did not provide a substantive response in relation to the criterion
1	Provided a response which partially met the criterion
2	Provided an adequate response to the criterion, displaying a good level of knowledge
3	Provided a very good response to the criterion, setting out clear examples
4	Provided a comprehensive response to the criterion, including examples, and articulating real context and clarity

Table 3. Evaluation criteria and weighting

Framework Evaluation Criteria	Criteria	Criteria weighting	Max available Score
Quality	Demonstration of understanding of: <ul style="list-style-type: none">- the subject matter- the evaluation aims, requirements and challenges	3	12

	Suitability of the proposed methodology to meet the evaluation objectives	3	12
	Suitability of the proposed method for facilitating the sharing of learning/insights in line with key junctures	3	12
	Experience and expertise of evaluations of a similar nature/size/standing, especially in healthcare or treatment settings	4	16
	Quality control mechanisms, risk management, and assessment of research ethics	2	8
Delivery	Ability to meet the timetable and deliver outputs	3	12
	Ability to work closely and collaboratively with NGSN provider network and other stakeholders	3	12
Equality, Diversity, Inclusion	An understanding of EDI and how lived experience would be embedded into this project in practice	2	8
Cost	Cost and value for money	2	8
TOTAL		25	100

Guidance for submitting a proposal

We recommend structuring your proposal to clearly show how the criteria above have been addressed. The following information should be included in your proposal:

- Organisation name and **named contact** and their role
- A brief statement detailing an **understanding and interpretation** of the purpose, specific objectives, and scope of the learning and evaluation activities required
- A description of your **proposed methodology** for this learning and evaluation work, including the specific approach and methods you anticipate would be useful in conducting the evaluation and how these meet the needs of the project
- A brief summary of any **learning, evaluation and subject matter expertise** specifically relevant to this work, particularly in relation to:
 - Delivering qualitative and quantitative evaluation activities
 - Evaluations of programmes and/or networks focusing on system-level change with multiple stakeholders
 - Bringing together a diverse and multidisciplinary set of expertise – including analytical, evaluation and clinical expertise
 - Leading/working as part of a consortium (if a consortium approach is proposed)
 - The ability to form and maintain strong relationships with providers and other stakeholders

- Managing a range of diverse stakeholders as part of participatory learning and evaluation processes – including within a landscape where other possibly competing (evaluation) activity is ongoing
- Learning approaches that cater to a wide range of stakeholders with differing needs, expectations and availability
- Robust impact and process evaluation methodologies that draw out actionable insights that are packaged into impactful formats catered to specific audiences
- Flexibility in the course of learning and evaluation activities to ensure appropriate management of risk and that emerging opportunities can be taken advantage of
- A geographic presence across Great Britain
- Proposed **timescales**, including dates for the completion of discrete stages of the work as detailed in this brief
- Your proposed **team**, including details of their roles and the tasks they will be involved in, their relevant expertise, and time input in person days (including, where applicable, staff not yet appointed) and associated management arrangements for the project
- Proposal **price** and costs
- Identification of any **ethical issues** that might be expected to arise in the design and delivery of the evaluation, and how these will be addressed
- Your proposed approach to ensuring consideration of **equality, diversity and inclusion** in all evaluation activities
- A **risk assessment** for the evaluation and learning work, detailing potential risks, likelihood, measures to reduce their likelihood, and plans to deal with risks that do materialise.

Proposals should be no longer than 20 pages, including any appendices and should be based on the information provided in this ITT, and upon the professional knowledge and expertise of potential suppliers.

Clarification of specific points can also be sought by e-mail from procurement@gambleaware.org by **17:00 on Wednesday 17th April**. Anonymised questions and GambleAware's subsequent responses will be forwarded, for information, to all contractors involved in the application process. Please let us know at procurement@gambleaware.org if you would like to receive a copy of the collated clarification questions and responses.

Proposals must arrive no later than 09:00 on Wednesday 8th May and be submitted to procurement@gambleaware.org with the subject line 'NGSN - Learning and evaluation partner'.

Bids received after this date will not be accepted.

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GambleAware is the independent charity (Charity No. England & Wales 1093910, Scotland SC049433) and strategic commissioner of gambling harm education, prevention and treatment across Great Britain to keep people safe from gambling harms.