

Request for Proposal (RFP) to develop a learning framework to support children and young people's understanding of antimicrobial resistance and the actions they take as community advocates to reduce its impact.

1. Introduction

A growing body of literature and practice recognizes the importance of incorporating the perspectives of children (up to 9) and young people (age 10-24) in health research in a variety of roles from co-designing the research agenda to helping with the translation of knowledge into communities.

Wellcome is exploring the role of young people in the areas we work on. In this RFP we are looking to see how we can support children and young people's understanding and awareness of antimicrobial resistance (AMR) - a modern global health crisis - **and** the actions they can take as community advocates to reduce its impact.

AMR happens when harmful microbes, including bacteria, viruses, fungi and parasites, eventually fail to respond to the drugs that were designed to kill them. Since the discovery of penicillin in the 1920s, antimicrobials have been used to save millions of lives. Not only have they been used to treat diseases such as tuberculosis, antimicrobials have also enabled large numbers of clinical procedures including chemotherapy and surgeries. However, misuse and overuse of antimicrobials, both in medicine and agriculture, has accelerated AMR. A UK Government review on antimicrobial resistance published in 2014 - [Antimicrobial Resistance: Tackling a crisis for the health and wealth of nations](#) estimated that by 2050 there will be 10 million extra deaths annually, attributable to AMR.

There is already evidence that young people can serve as effective community advocates on this issue and we will be looking to design a framework and guidance to support more widespread activities in this space. Examples include:

- **The International Federation of Medical Students' Associations (IFMSA)**, advocates for the role of young people in fighting AMR, through active participation in high-level meetings on AMR, such as the 72nd United Nations General Assembly in New York and the AMR Call to Action meeting in Berlin.
- **Antibiotic Guardian's Community Engagement** projects from 2017–2019 included the Rollback Antimicrobial Resistance Initiative in Tanzania. The objectives of this initiative were to raise AMR awareness in communities, impart early AMR knowledge to young people, enlisting secondary school students as AMR ambassadors and joining the government and global efforts in implementing action plan on fighting AMR.
- **Students Against Superbugs Africa** – a project involving young people under the guidance of health professionals. By developing a culture of social responsibility among young people, the project aims to 'create positive behaviour change in prescribing and dispensing of antimicrobials in a bid to curb antimicrobial resistance' and to reduce 'the prevalence of antimicrobial resistance in urban informal settlements by influencing positive behaviour change in antimicrobial use and designing infection prevention programs'.

The [WHO competency framework](#) articulates the skills and knowledge health professionals need to address AMR successfully. We believe that this approach could be drawn upon to support young people to develop a comprehensive understanding and awareness of AMR in a similar way. In developing a core learning framework for children and young people's

understanding of AMR, we would create a common language, used by individuals and organizations engaging children and young people in AMR projects. This would allow them to sequence learning appropriately and/or select developmentally appropriate materials/terminology when designing youth engagement communications to improve impact.

What we are looking for:

- A core learning framework for AMR, with associated guidance for those working with young people so that all AMR engagement activities can take into account young people's prior learning and the challenge of the task.
- The framework must be developmentally appropriate and flexible enough that it can be adapted for use within a range of countries and different contexts such as schools and community engagement projects, patient groups and social media campaigns.
- Children and young people to be involved in this project from the outset.
- The project to be delivered in **two phases**:

Phase 1 Objectives

Phase 1 (rapid pilot phase):

i) understand what is known about AMR by children and young people at three stages of learning: for example, age 8, age 12, age 18 in three countries in the Global South. You may base your broad conclusions on a range of evidence such as existing AMR youth activities, school and college curricula and specialists in AMR youth engagement. You must test your early thinking with young people during World Antimicrobial Awareness week to raise the profile of the project.

ii) As a result of this feedback, co-develop with children and young people appropriate messages about AMR for each of these stages and - as a result of understanding those messages - determine what children and young people could then do to raise awareness of AMR in their communities. Our preference is to have messages developed and tested during World Antibiotic Awareness Week. However, timescales are tight so be realistic about what you feel you can achieve before World Antimicrobial Awareness week.

Phase 2 Objectives

In phase 2 the findings and learning from phase 1 would be used to determine the structure and content of a core learning framework. Our objective in phase 2 is to support providers of AMR engagement projects to think about how the specific activities they design properly reflect the age and stage of the learners, cultural context etc. and lead to a better understanding of AMR in children and young people.

2. Background

a) Global response to AMR

Global action to tackle drug-resistant infections is not happening at the scale and urgency needed. The World Health Organization describes drug-resistant infections as "one of the biggest threats to global health, food security, and development today".

Action among political leaders can be strengthened with public support. But public understanding of AMR and its impact is currently limited. We can change this by communicating more powerfully. Wellcome's report, '[Reframing Resistance](#)' – [how to communicate about antimicrobial resistance effectively](#), summarises the five requirements to persuade policy makers and the public to act:

1. Frame antimicrobial resistance as undermining modern medicine
2. Explain the fundamentals succinctly
3. Emphasise this is a universal issue; it affects everyone including you
4. Focus on the here and now
5. Encourage immediate action

b) Children and young people as part of the solution to AMR

In many parts of the world children and young people make up 30-50% of the population. However, they are not always consulted about strategic decisions that affect them. It is possible that children and young peoples' contribution to developing research agendas, collecting research data and acting as community advocates for change has been underestimated. Ultimately, bringing children and young people into the conversation about AMR may improve the impact of research in the local community.

For children and young people to be a significant part of the solution to AMR globally, they need to be supported to understand this complex and multi-disciplinary problem. This understanding needs to begin with basics and progressively develop understanding of new concepts and skills. In any youth project about AMR, in any part of the world, we must ensure that:

- Children and young people have the right skills and knowledge to access the project they are involved in. The cognitive demand must be appropriate: we should not ask them too much too soon *or* assume no prior knowledge at all, otherwise interest will wane and momentum will be lost.
- Differential rates of literacy and numeracy and prior knowledge in local communities are accounted for in project design. Projects need to be sensitive to local cultures and available resources - handwashing, for example, is difficult in some rural communities due to a scarcity of water. The core learning framework must be flexible enough to be adapted to the context in which it will be used. Frameworks that can be implemented locally are more likely to be effective.

3. RFP Specification

This section sets out the specification of services for this RFP exercise. Suppliers should use this section to fully understand Wellcome's requirements and to inform their response.

Your proposal, which should be no more than 6 pages of A4 excluding appendices and a detailed presentation of costings. It should reach the main point of contact for this RFP by **24 August 2020**. The indicative budget for this project is up to £150,000 excluding VAT. Your proposal should clearly explain how you will meet the following requirements:

a) Scope of work

i) Phase 1: Understanding what young people know about AMR

A clear understanding of what is known and can be understood about AMR by children and young people will help to inform the learning framework to be developed in phase 2.

In your proposal, please explain clearly how you would:

- investigate what children and young people know and understand about AMR at three different stages of learning: for example, age 8, age 12, age 18 in each of three countries in the Global South. You may want to consider how to frame these stages – e.g. as ages, levels of cognitive demand or as levels of understanding.
- develop appropriate messages about AMR for each stage of learning in collaboration with children and young people
- determine what children and young people could then do (having received those messages), as effective community advocates to raise awareness of AMR.

Some of these messages/ activities **must** be tested with diverse groups of children and young people during World Antimicrobial Awareness Week, from 18-24 November 2020. This is likely to be online in the current climate. You may want to suggest more than one workshop in different countries or age groups, if it is possible within the budget. Tell us what you think you could achieve in the time available. Please clearly state what you would do and how it would be managed to gain as much benefit as possible from this potentially high-profile activity. Please also explain how you would evaluate the effectiveness of the different activities.

Please note that we would expect payment to be given for advice and this should be included in the costings. As a guide Wellcome expects expert advisory group members to be paid at a rate of £350 per day for adults and £150 for young people and that any focus group participants should be paid appropriately for their time. Please include these costs in your budget.

ii) Phase 2: Developing the core learning progression framework

In your proposal, please clearly explain the methodology you will use to:

- develop a core learning framework.

The framework you create will enable children and young people to develop the skills and knowledge needed to actively and effectively contribute to increased awareness of AMR and to advocate for a more judicious use of antimicrobials. The framework should be knowledge- and competency-based. The outcomes from phase 1 will be used to specify a core learning framework that scaffolds learning effectively to help children and young people gain a good understanding of AMR. It may also define the threshold concepts children and young people need to grasp along the way.

Development of the framework should also be informed by feedback from at least 10 individuals or organisations, identified with input from Wellcome, the World Health Organization (WHO), Food and Agriculture Organization (FAO) and the World

Organization for Animal Health (OIE), that have successfully delivered youth activities related to AMR in a variety of settings.

The framework must work equally well in schools, colleges, youth engagement projects, science clubs and any other setting where children and young people may engage in one-off or extended activities. Please be aware that the learning framework developed may need to be adapted to reflect the needs of different and local communities and addressing this should form part of your proposal.

Please suggest a format for your framework that you have seen work successfully in other settings, and that is achievable in the time available.

Please note:

- Children and young people should be involved in this work from the outset.
- We are open to ideas that meet the objectives outlined in this RFP but are **not** articulated within it.
- We require Phase 1 reporting to be completed by 30 November 2020 and Phase 2 to be completed by 30 June 2021.
- You will need to respond separately to the requirements around GDPR and safeguarding, especially if you are proposing digital assets arising from the workshop(s) and direct contact with children and young people. Please include this information in an annex (and in addition to your 6-page proposal).

b. Reporting

Phase 1

A detailed report to explain

- the methodology used to determine what children and young people know that supports their understanding of AMR and the findings.
- how those findings were used to inform the development of the activities tested during WAAW 2020
- evaluation outcomes for those activities.

Phase 2

A report, which includes:

- the core learning framework
- adapted frameworks
- accompanying guidance notes for use of the frameworks in a variety of settings, including schools, colleges, youth engagement projects, science clubs (please note that this is not an exhaustive list).
- the methodology you employed to arrive at these deliverables

You may need to source photographs and other assets for the final product. Please provide an estimate of the costs of producing the framework in English and in the major languages of the countries you propose to work in. The deliverables should be in an electronic format to be agreed with Wellcome.

c) Dissemination of the learning progression framework.

Please think as creatively as possible about how to disseminate the completed framework in May or June 2021 and cost one major activity into your proposal.

d) . **Deliverables** – this table outlines the minimum requirement for this RFP. Please explain clearly, in your proposal, how you will meet these and any additional deliverables.

#	Deliverable	Timescale
1	Research to gauge children and young people’s understanding of AMR.	10 November 2020
2	Development and testing of activities to support children and young people to raise awareness of AMR in their communities	18-24 November 2020
3	Report of Phase 1	30 November 2020
4	Report of Phase 2 - to include a report of dissemination activity	30 June 2021

4.RFP Timetable

#	Activity	Responsibility	Date
1	RFP issued to Suppliers	WT	29 July 2020
2	Submission of expression of interest to RFP	Supplier	15:00 7 August 2020
3	Submission of Supplier Q&A to Wellcome Contact	Supplier	15:00 11 August 2020
4	Return of Supplier Q&A to Suppliers	WT	By 14 August 2020
5	Submission of RFP Response	Supplier	15:00 24 August 2020
7	Evaluation of proposals	WT	25 and 26 August 2020

8	Possible interviews	WT and Supplier	28 August 2020
9	Notification of Preferred Supplier	WT	By 2 September 2020
10	Kick off meeting	Supplier and WT	7 September 2020 (or earlier)

5. Response Format

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

6. Expression of Interest

Suppliers are asked to submit a short expression of interest by e-mail to the Wellcome Contact in accordance with the RFP timetable.

7. Supplier Q&A

Prior to the submission of your RFP response, Suppliers are provided the opportunity to submit any questions they have about the exercise. All questions are to be submitted to the Wellcome Contact by e-mail in accordance with the RFP timetable.

8. RFP Proposal

Suppliers are required to submit proposals that also respond to the following sections. Please note that your proposal should be no longer than 6 A4 pages, excluding appendices.

i) Contract Feedback

This section allows Suppliers to provide specific feedback to the contractual agreement which will be used should their 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 7 below).

ii) Information Governance

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

iii) RFP Questions

This section requests responses from Suppliers to specific questions in relation to this RFP exercise.

#	Question
1	Explain your approach and design principles to phase 1 and 2 of this project - how will you meet the objectives of each phase?
2	Explain how you will ensure that young people are fully involved throughout the whole project .
3	Describe strategies you will put in place to keep to the timescale for this work. State who the main point of contact will be.
4	Describe projects you have completed in the past that demonstrate the skills and or knowledge that you will need to deliver this work. Please include a description of the team's experience of working across a range of global settings, with or alongside minoritized communities and tell us about your in-country partners if you are UK based. Please provide the names and contact details of two referees.
5.	Please include a risk register, including your standard mitigations for GDPR, safeguarding and wellbeing and managing subcontractors (if appropriate).
6.	Fully describe the costs for the project from implementation to delivery of the framework. We will also need to know: 1. Who will be working on the project, their experience and expertise, and the number of days allocated to them. 2. Costs associated with project management, communications and overheads. 3. Your approach to VAT (especially if your head office is outside the UK).

About Wellcome.

Wellcome exists to improve health by helping great ideas to thrive. We support researchers, we take on big health challenges, we campaign for better science, and we help everyone get involved with science and health research. We are a politically and financially independent foundation. Find out more about Wellcome and our work: [wellcome.ac.uk](https://www.wellcome.ac.uk).

1. 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.

2. 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.

3. **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.

4. **Funding**

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

5. **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.

6. **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.

7. **Accessibility**

Wellcome is committed to ensuring that our RFP exercises are accessible to everyone. 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 exercise, 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 outline them clearly within your commercial response. Wellcome is committed to evaluating all proposals fairly and will ensure any proposed adjustment costs sit outside the commercial evaluation.

8. **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.

9. **Wellcome Contact Details**

The points of contact within this RFP exercise for all communications are as indicated below:

First POC:

Nan Davies
Programme Lead, Education & Learning
education@wellcome.ac.uk

Alternate POC:

Mark Ellis
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