

**Crohn's & Colitis UK**

**Invitation to tender to design an Evidence and Insight Hub  
that will track the impact on quality-of-life  
for those living with IBD in the UK**

**July 2024**

## Contents

1. About Crohn's & Colitis UK	Page 4
2. Scope of Work	Page 4
3. Tender submission	Page 5
4. Selection Criteria	Page 9
5. Key dates	Page 9
6. Instructions for return of tender	Page 10

## 1. About Crohn's & Colitis UK

We are the leading charity for Crohn's and Colitis. Over 540,000 people are living with Inflammatory Bowel Disease (IBD) of which Crohn's and Colitis are the two main types. They are lifelong diseases that many people have never heard of. Due to the stigma and misunderstanding surrounding these diseases, thousands of people are suffering in silence. We are working to improve diagnosis and treatment, and to fund research into a cure; to raise awareness and to give people hope, comfort and confidence to live freer, fuller lives.

We are here for everyone affected by Crohn's and Colitis.

For more information, please visit our website [www.crohnsandcolitis.org.uk](http://www.crohnsandcolitis.org.uk)

We have existed as a charity for over 40 years and are moving into a new phase with a new strategy. A key element of the strategy is to develop a significant programme of work building evidence and insight into the lived experiences of people with Crohn's and Colitis. This tender is an important element of that programme.

## 2. Scope of Work

### *Background*

Crohn's & Colitis UK aims to gain a deeper understanding of aspects of life that are significantly impacted by the experience of living with Crohn's and Colitis. The charity aims to establish a measure of quality-of-life by identifying the social, economic, and health factors influenced by these conditions, and assessing the diverse degrees of impact each factor has on the community.

This research will feed into a public facing Evidence and Insight Hub designed to provide a visual representation of the health and non-health impacts that matter most to our community. Collaborating closely with patients, stakeholders, and external agencies, we are engaged in a co-production approach to ensure that the dashboard authentically represents the highest priorities of those living with Crohn's and Colitis in the UK.

**The first iteration is set to launch in December 2024.**

The objective of this project is to develop a comprehensive overview of the impacts that living with Crohn's and Colitis has on quality of life. The Evidence and Insight Hub will present key metrics and insights, including prevalence and incidence rates, health and non-health impacts, provision, and societal factors. This tool aims to inform stakeholders and guide decision-making processes for improved outcomes for those living with the conditions. Guided by the priorities expressed by those living with Crohn's and Colitis, the dashboard will also employ carefully selected metrics to illustrate the trajectory of improvements or deteriorations in quality-of-life over time.

The Evidence and Insight Hub has various purposes and will serve a diverse audience.

It will enable us to showcase data and insight in order to:

- Guide policymakers on changes to improve the health and well being of our community, informing lobbying and campaigning efforts
- Inform and underpin the strategic priorities for Crohn's & Colitis UK
- Reassure individuals with Crohn's and Colitis that we are aware of and advocating for the issues most affecting them
- Inform the public and promote awareness of the impact of the conditions
- Assist researchers and academics in identifying evidence gaps and research priorities
- Provide healthcare professionals with patient-centric insights into what matters to them
- Equip the media with up-to-date data for news stories, highlighting areas needing change

This initiative will stand as a testament to our commitment to understanding, representing, and improving the lives of our community.

This work is part of our Evidence and Insight programme, dedicated to identifying and addressing gaps in the current knowledge of Crohn's and Colitis. Our aim is to understand the experiences of all those affected by Crohn's and Colitis, including those from underserved groups. For more information about our Evidence and Insight programme [click here](#).

## *Project Outline*

We are seeking qualified suppliers to submit proposals for the delivery of a digital Evidence & Insight hub centred around the quality of life of individuals living with Crohn's and Colitis. The primary objective is to create a high-quality digital experience that aggregates information, context, and data-driven insights related to the quality of life of those living with & affected by Crohn's and Colitis.

### **Key Features:**

- Four key topic domains (Population, Impact, Provision, Society)
- Data integration and visualisation under Impact: Top 10 Impacts (Metrics)
- Functionality to include whitepapers and reports under each domain topic
- Considered user journeys - e.g. links to existing supporting materials and resources

## *Technical Approach*

### **Technology Stack - Separate Ecosystem**

Our current intention is that delivery of the hub will be within a separate ecosystem to support flexibility and avoid complexities with our existing website (Umbraco) which is currently on an upgrade roadmap.

We would expect the supplier to consider the integration across our wider digital experience to ensure that the user journey works cohesively alongside our main website as part of the project. This will involve collaboration with our digital team and potentially our main digital supplier to ensure consistency across the user experience and design language.

We will reserve a subdomain once ready to support brand cohesion (e.g. [hub].crohnsandcolitis.org.uk) which can be directed to the production environment when ready.

We encourage open, tech-agnostic suggestions and recommendations with this in mind including:

- Modern frontend (e.g., React, Vue.js) and backend (e.g., Node.js, Django)
- Headless CMS for content management
- Libraries for data visualisation
- APIs for data exchange

### **Technology Stack - Data & Content**

The key component of the project will be data-led visualisations of quality of life metrics. These are referred to as our Top 10 Impacts (Metrics) and will exist under the **Impact** topic domain.

The ability to interpret and design effective and visually engaging metrics and insights is an important driver towards the objective and success of the project and we expect the supplier to drive and shape this to ensure the best use of data.

We are currently finalising the gathering of the new primary data which will need to be visualised.

We do not expect our data to be complex however we will be looking for support to best manage and utilise this in the experience, expected structure available - Q3 2024. The format will be broadly survey response data consisting primarily of sliding scale range-based responses. We will also include demographics; such as age, gender, condition type, geographic location etc.

## Example Question (Formats)

- 1) How much does 'fatigue and difficulties managing your physical and mental energy levels' interfere with your:
  - Quality of life
  - Social Life
  - Family life
  - Ability to run errands/do household chores
  - Education/careerPlease rate 1 (not affected at all) to 10 (extremely affected)  
Participants will be rating 1 to 10 in each of the 5 areas
  
- 2) My Crohn's or Colitis controls my life and prevents me from doing the things I want to do
  - 1 Strongly Disagree
  - 2 Disagree
  - 3 Somewhat Disagree
  - 4 Somewhat Agree
  - 5 Agree
  - 6 Strongly Agree
  
- 3) Over the last 2 weeks, how often have you had to rush to the toilet?
  - 1 None of the time
  - 2 A little of the time
  - 3 Some of the time
  - 4 Most of the time
  - 5 All of the time
  
- 4) I avoid certain food and drinks in the hope of experiencing fewer symptoms
  - 1 Never applied to me
  - 2 Rarely applied to me
  - 3 Regularly applied to me
  - 4 Most of the time applied to me
  - 5 Always applied to me

We would expect our data to be somewhat living and evolve over time as we continue to gather feedback over time and as part of our commitment to monitoring the state of the nation.

Excluding this, most of the topic domains will house more traditional content, including whitepapers and reports which help us fully represent the breadth and depth of the quality of life impacts.

We would expect these to update less frequently however we may need the ability to retain historic reports or version control.

**For reference:** The following report from Versus Arthritis for The State of Musculoskeletal Health is a similar scope and context for our visualisation within the hub

[versus-arthritis-state-msk-musculoskeletal-health-2023pdf.pdf \(versusarthritis.org\)](#)

## ***Considerations***

### **Brand Alignment & Content Strategy**

We are possibly entering a transition phase with our brand evolution over the next calendar year, so it is important for the delivery method to:

- Seek alignment with our evolving brand
- Promote consistent use of brand elements (logo, colours, typography)

User experience is an important consideration for us, and we believe that prioritising accessible and inclusive design and development is key to delivering well-designed intuitive experiences.

### **Hosting, Scalability and Security**

As a landscape digital resource, we would like to ensure that future-proofing is considered so that the technical approach allows for evolution and change over time in response to new data and milestone changes.

- Hosting support options / recommendation will need to be included as part of provision of services
- We expect allowance for best-practice scalability as usage / traffic grows
- We expect robust security measures (HTTPS, authentication, consent) is expected where appropriate especially with considering governance requirements and data interaction

### **Success Criteria**

As a public facing resource, positive user experience, engagement and satisfaction aligned with the objective will be of high importance when assessing the success of the delivery and effectiveness of the platform.

We will also look at internal usability for management of content going forward as well as stakeholder alignment with key stakeholders in the Charity.

### **Onboarding and Handover**

We would like to understand any training or handover required as part of the delivery process as well as expectations for testing.

### ***Timeline and Budget:***

**Timeline:** Specify realistic phases in alignment with your process or way of working e.g. discovery, design, development, testing, and launch.

We are targeting an initial (or complete) public-facing release for the end of 2024 however are open to considering responses that would require slightly longer timeframes, where the justification for this is clearly outlined.

**Budget:** Provide budget constraints with detailed breakdown and expectations, this can be phased or with the above timeline in mind.

### 3. Tender submission

Your tender submission should include the following:

#### *Proposal for services*

We would like you to set out the following:

- a summary project plan highlighting the methodology and key dates to demonstrate how you would meet the brief by the proposed deadline
- how you will address issues of equality, diversity and inclusion (EDI) in your work
- details of key personnel who will be involved in the project
- key risks and mitigating actions for the project
- an explanation of the unique benefit your organisation will bring to this work
- an indication of how much input and capacity would be required from the charity team
- detail of any elements of the work that would be provided by another company/freelance staff
- details of how you propose to ensure GDPR compliance, as appropriate
- your fee proposal should give a detailed breakdown of costs, itemised for each separate element of the tender and exclusive of VAT.

In addition, we would like you to:

- briefly outline your values, structure, size and capabilities in general
- provide examples of similar projects or reports you have delivered
- provide examples of previous work in PDF or Word format
- list two previous clients (preferably not for profit) that we can contact for reference purposes
- provide your organisation name, address, registered address (if different) and website address
- provide primary person's contact details
- provide a copy of your Equality, Diversity & Inclusion (EDI) policy.



## 4. Selection Criteria

Responses will be evaluated by the charity using the following criteria (in no particular order):

- Ability to deliver on all required services or outputs
- Access to appropriate sources of evidence
- Ability to deliver within specified timescales
- The quality and clarity of the proposal
- Evidence of proven success in similar projects
- Responsiveness and flexibility
- Transparency and accountability
- Value for money
- Financial stability

## 5. Key dates

Date	Task
24 <sup>th</sup> of July	Invitation to tender launched
9 a.m. on 27th August	Submission of tender
Week beginning 2nd September	Interviews of shortlisted bidders
Week beginning 9 <sup>th</sup> September	Award of tender
Week beginning 16th September	Project work commences

## 6. Instructions for return of tender

### *Crohn's & Colitis UK Contact Person*

Please send an electronic version of your proposal, plus any appendices, to Sarah Kelemen at [Sarah.Kelemen@crohnsandcolitis.org.uk](mailto:Sarah.Kelemen@crohnsandcolitis.org.uk) by 9am at 27nd August 9am.

### *Confidentiality*

The contents of this document and any accompanying documents contained herein is the property of Crohn's & Colitis UK unless otherwise stated and may not be disclosed in part or in full to any third party without the prior consent of Crohn's & Colitis UK. This also extends to all documents that might be supplied in connection with the project or its implementation now or in the future.

All information obtained by Crohn's & Colitis UK from the bidders in connection with this tender will be treated in confidence. Any documents supplied by Crohn's & Colitis UK remain the property of Crohn's & Colitis UK, and their return may be requested.

### *Copyright Statement*

This document and any correspondence documents are copyright and will remain the property of the charity and must be returned on demand if so requested.

The information contained herein is the property of Crohn's & Colitis UK and may not be copied, used or disclosed in whole or in part except with the prior written permission of Crohn's & Colitis UK.

### *Bid conditions*

We reserve the right to disqualify any bidder from the selection process at any stage. In particular, the following events may lead to disqualification:

- any proposal received after the specified deadline
- any proposal that fails to conform in procedure, format, sequence substance of the requirements presented in this document
- failure to substantiate claims made in the response to this tender
- any breach of confidentiality.

### *Costs of response*

Crohn's & Colitis UK will not be responsible for any costs incurred by bidders prior to signature of any formal Agreement, including those incurred in responding to this invitation and negotiating any Agreement. All activities which bidders carry out to properly demonstrate the viability of their proposals including demonstrations and presentations will be at their own cost. In turn, we will be responsible for our own expenses and costs throughout the tender and negotiating period.

### *Right of non-selection*

Although it is currently intended that the procurement will take place in accordance with the provisions of this document, we reserve the right to terminate, amend or vary the procurement procedure by notice in writing at any point up to the signing of the Agreement.

In the event of such termination, amendment or variation or otherwise, we shall not have any liability for any costs, expenses or other resources incurred by yourselves in participating in this procurement as a result of such termination, amendment or variation.

We do not bind ourselves to accept the lowest or any tender. The procedures described in this document are for guidance only.