

Draft Invitation to Tender - Equity, Diversity and Inclusion Listening Exercise

1. About People's Health Trust

People's Health Trust believes in a society without health inequalities. We work to ensure that where people live does not unfairly reduce the length of your life, or the quality of your health.

We do this by working with people to invest in initiatives which help to create fairer places to grow, live, work and age. We believe in funding ideas which are small and local and are genuinely designed and led by local people. We target our funds at the neighbourhoods whose residents experience the sharp end of health inequalities.

We know that people who live in less advantaged neighbourhoods will live fewer years and have more health problems than those who live in better places. The main causes of poor health are the social and economic circumstances that define our lives - having good social relationships, decent housing, adequate incomes, well-functioning local economies and access to good quality public environments.

Mortality rates from Covid-19 have brought the impact of differential experience of these social determinants of health into sharp focus, as it's clear that people living in the neighbourhoods with the highest levels of disadvantage are twice as likely to die as those in the least disadvantaged. Similarly, some Black, Asian and minoritised ethnic populations and disabled people also experience much more severe health outcomes. That is why the Trust is more determined than ever to work with communities and neighbourhoods to address the root causes of health inequalities, through collective action on the social determinants of health.

2. Background to proposed contract work

People's Health Trust has spent the last couple of years considering its approach to equity, diversity and inclusion. This process involved the Board of Trustees and the staff team. It led to the co-production and publication of the [Trust's EDI statement](#) announcing our intention to be an anti-racist and anti-oppression organisation. The statement was accompanied by a co-produced [action plan](#) and associated blog exploring the impact of discrimination on health.

We know that our journey to become an anti-racist and anti-oppression organisation has only just begun and expect our plan to be flexible enough to respond to the changing context and the needs of the people we support, our staff team, our volunteers and our trustees.

a. **Overseeing the work**

The ultimate responsibility for the EDI work rests with the Board which means that they need to inspire and model behaviour, challenge and agree the plan to take forward the work, ensure the resources are available to manage the work and evaluate its success.

In practice we see the work as a mission which affects impacts everyone connected to the Trust and for which everyone needs to play their part.

Formally (and to make this practice nimble), the Board has an [EDI sub-group](#) and the staff also have an [EDI Team](#) both of which comprise people with lived experience of one (or often more) protected characteristics. The two teams meet before each Board meeting to plan ahead and overview our progress against our EDI action plan.

b. Our current progress

The joint board and staff EDI groups agreed that one of our key activities was a listening exercise across the trust because, in the words of one team member, “how can you move ahead with the other things on the plan until you have discussed how things are internally”.

We are therefore now at the point of commissioning this piece of work. Whilst there will be some other EDI work taking place concurrently (around grants and EDI work), the bulk will follow the EDI listening exercise.

3. What we are aiming to achieve through the listening exercise

We want the staff and Board members to be able to talk freely so that we move closer to being an anti-racist and anti-oppression organisation. We know that if we are to move on, we need to know where we are right now. We also need to be able to vision where we want to get to.

We want to be able to listen to experiences and hopes for the future with an open mind and acceptance that people’s experiences are their experiences and that we can always do better.

4. The kind of EDI listening exercise that we would like to run

- An opportunity for every staff member, volunteer and Board member to have their voice heard in a way which suits them
- Create a safe space where people feel able to talk and listen
- To use the listening exercise to consider our EDI positions as:
 - A place to work - as an employer, including the culture and relationships
 - A funder - considering the programmes we offer, the way in which we work and the data and stories we collect
 - A board - EDI concerns/actions and thoughts within the Board (beyond composition) and roles and responsibilities.

5. Some ideas for how this could work

We are very open to hearing about ways in which to run the listening exercise. The staff EDI team came up with some possible ways in which to do this, including:

- Individual surveys - this is a chance for everyone to contemplate their own position in their own time. It recognises the fact that not everyone will like group sessions.
- Some more in-depth one-to-one listening exercises - give a chance to take a slightly more qualitative approach
- Group - bringing together groups of people at team and Board level to listen and discuss

We would be very open to hearing about more creative approaches to this too.

6. Output

We would like a consultant to:

- Work with the staff and Board EDI teams to develop the sessions
- Run the listening exercises (whatever they may be)
- Collate and analyse responses and write a report for the Board and Staff EDI Teams with recommendations for further consideration.

7. Timeline

We would like the work completed by late November 2022 (but there is flexibility).

8. Resources

The number of days the assignment would take would very much depend on the approach proposed by the organisation, but we anticipate a maximum budget of around £6k for this piece of work. There is some room for negotiation on this figure.

9. Declarations of interest

We would expect any organisation bidding for this work to declare a conflict of interest with the Trust, any of its staff, volunteers or trustees. This will not necessarily preclude you from moving forward in the process, but the transparency is important to the integrity of the process.

10. Submission of proposal

Proposals should include the following:

Understanding of the brief and the Trust

1. Tell us about yourself and your organisation.
2. Tell us about your experience of delivering similar work (listening exercises within an EDI context) with other organisations.
3. Tell us how you will approach this work, including consideration of managing risk and safeguarding. A proposal of no more than 1 side of A4.
4. Please send CV's and Biographies of all you propose to be involved.

Proposals should be no longer than 8-sides of A4 plus appendices and summary CVs. It can be considerably less.

If you feel that you require additional support to submit this proposal, please do get in touch with us by:

Telephoning: 020 4548 0939

Emailing: enquiries@peopleshealthtrust.org.uk

Writing to us at: 2 Bath Place, Rivington Street, London, EC2A 3DR

You can also contact us to arrange a call back or a video call.

11. Deadline

Proposal should be returned to piers.atherton@peopleshealthtrust.org.uk by 31 August 2022

We will acknowledge receipt. Proposals received after this date and time will not be considered.

Through this process we intend to confirm a contractor by mid-September 2022.

Board EDI Group

Leandra Box - Chair

Jenny Edwards

Shavanah Taj

Staff EDI Team

Elizabeth Adebola

Dorothea Eyewumi - Chair

Lily Davies

John Hume

Lis Judge

Peter Williams