

## **INVITATION TO TENDER**

**For:**  
**Bullying Harassment and Abuse**  
**Date: June 2025**

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## About the NHS Race and Health Observatory

The NHS Race and Health Observatory ('the Observatory') is an independent organisation, set up to explore ethnic inequalities in access to healthcare, experiences of healthcare, health outcomes, and inequalities experienced by black and minority ethnic members of the health and care workforce. In doing so, it assesses aspirations in these areas as outlined in national healthcare policy, including those set-out in the NHS Long Term Plan. It is a proactive investigator, providing strong recommendations that inform policymaking and facilitate change. It is evidence-driven and solution-focused.

The Observatory is supported by NHS England and hosted by NHS Confederation. The work of The Observatory is guided by our values of Objectivity, Impact, Collaboration and Integrity.

The Observatory has three main aims:

- **EVIDENCE:** Synthesise, signal-boost, and validate existing evidence, making it more accessible to a broader audience. We fulfil a bridging role by making evidence relevant to changemakers and decision-makers. We also fill evidence gaps by strategically commissioning original research.
- **INFLUENCE:** We use evidence and intelligence to support and influence policymakers and decision-makers through thought leadership, strategic engagement with leaders, and the championing of new approaches to community participation, working internationally to develop and spread good practice.
- **IMPLEMENT:** We implement - and support the implementation of - anti-racism practice by demonstrating what effective interventions look like and how they can be replicated, working in partnership with providers, patients, and the public.

Our latest strategy can be found [here](#). Among our many priority areas are ethnic inequalities in outcomes and experiences amongst NHS and healthcare workers.

## Scope of the work

### *Background*

NHS Staff survey data shows that bullying, harassment, and abuse towards and amongst NHS staff is rampant. As far back as 2013, The Bewick Review on patient safety highlighted the negative consequences of bullying in the NHS. One of the key conclusions from the review was, ‘bullying reduces morale, increases sickness and staff absences, drives dedicated clinicians out of the NHS and ultimately reduces patient care’<sup>1</sup>.

Bullying also creates a toxic atmosphere in organisations that undermines safety and improvement. The Francis Report on the Mid Staffordshire Scandal also highlighted how poor work cultures and practices resulted in poor patient care and harm<sup>2</sup>. Carter et al (2022) found that higher levels of bullying were linked to psychological distress, intentions to leave the job, self-reported sickness and reduced job satisfaction<sup>3</sup>. West et al (2011) described a spiral of negativity that can emerge when staff are not treated supportively and with respect. Their research found that “when staff report bullying, harassment or abuse from patients’ relatives, friends, carers, and other members of the public, patients do not feel treated with respect and dignity while in hospital.

The percentage of staff experiencing physical violence from patients, their relatives, friends or carers in the previous year is also associated with low subsequent patient satisfaction<sup>4</sup>. On top of negative impact on patients and staff, bullying and harassment was estimated to cost the NHS England over £2 billion per annum<sup>5</sup>.

There are significant differences in the levels of bullying, harassment, and abuse experienced by different ethnic groups in the NHS. According to the 2023 NHS Workforce Race Equality Standard Report<sup>6</sup>:

- In 2022, 94% of trusts reported a higher proportion of Black and minority ethnic staff compared to white staff experienced harassment, bullying or abuse from staff in last 12 months.
- In 2022, the percentage of staff experiencing harassment, bullying or abuse from other staff in the last 12 months was higher for Black and minority ethnic staff (27.7%) than for white staff (22.0%). This pattern has been evident since 2015 and was repeated in all regions.
- In 2022, Black and minority ethnic women (27.7%) were most likely to have experienced harassment, bullying or abuse from other staff in the last 12 months, a trend that has been evident since at least 2015.

- This trend was especially evident for Black and minority ethnic women in general management (30.5%), medical and dental (32.6%), and registered nursing and midwifery (30.7%).

### *Project outline*

Konar et al (2022) recommended that the NHS “must address any bullying and create compassionate and inclusive cultures which have implications on staff-health wellbeing, staff engagement and ultimately patient care”<sup>7</sup>. This echoes previous recommendations from previously cited reviews, reports and research.

The Observatory and NHS England would like to commission an organisation to explore bullying harassment and abuse from an ethnicity perspective. The work will ultimately develop actionable insights, recommendations, and resources to help organisations reduce overall levels of bullying harassment and abuse, as well as close the gap between different ethnic groups.

The research must also propose potential improvement targets/ambitions for individual Trusts, ICB’s and regions.

### *Proposed methodology*

The research should encompass a mixed-methods research approach employing qualitative and quantitative approaches. At a minimum the research should include an analysis of NHS staff survey data, focus groups and interviews with NHS staff (clinical, non-clinical and managers/leaders)

### *Outputs*

On completion of the research period, the following should be produced:

- Detailed findings of the research, including:
  - i. ICB, Regional and Trust level data split ideally by the census classification or the six broad ethnic categories (White, Asian, Black, Mixed, Other Ethnic Group, and Unknown) as a minimum. Where data is available consider immigration status.
  - ii. Identification of specific trends in different staff groups.
  - iii. Highlight areas of good practice.
  - iv. An overview of strategies to reduce bullying, harassment and abuse

- v. A minimum of four case studies show casing projects that have resulted in sustained reduction in bullying, harassment and abuse in an organisation.
- vi. Setting of improvement targets/ambitions for each Trust, ICB and Region.
- A high-level summary report, including recommendations for policy, practice, and research. These recommendations should be developed using guidance outlined in the Observatory's Implementation Toolkit.
- An interim report to be produced at the mid-way point of the project.
- Presentation of findings to the Observatory and its academic reference group at the end of research period.

#### *Detailed specifications*

- The initial research period will be 16 months from the date of award, with a further 4 weeks for review and sign off. Longer periods may be considered if justification for the longer timescale can be provided.
- The programme of work should include extensive and meaningful engagement with NHS staff from an ethnic minority background at all stages.
- The report will be for external publication by the NHS Race and Health Observatory, using the Observatory and NHS England branding, but also including the logo of the contracted organisation.
- We welcome bids up to £150, 000 (exclusive of VAT). Higher value bids may be considered if adequate justification can be given for the additional amount.

#### *References*

1. Independent report. Berwick review into patient safety. Recommendations to improve patient safety in the NHS in England. 6 August 2013 [https://assets.publishing.service.gov.uk/media/5a7cc74540f0b6629523bc31/Berwick\\_Report.pdf](https://assets.publishing.service.gov.uk/media/5a7cc74540f0b6629523bc31/Berwick_Report.pdf).
2. Francis R. Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry. Mid Staffordshire NHS Foundation Trust Public Inquiry, 2013. <https://www.gov.uk/government/publications/report-of-the-mid-staffordshire-nhs-foundation-trust-public-inquiry>
3. Carter M, Thompson N, Crampton P, et al. Workplace bullying in the UK NHS: a questionnaire and interview study on prevalence, impact and barriers to reporting. BMJ Open 2013;3:e002628.

4. West M , Dawson J , Admasachew L , et al . NHS staff management and health service quality. Department of Health 2011.
5. Kline, R., & Lewis, D. (2018). The price of fear: Estimating the financial cost of bullying and harassment to the NHS in England. *Public Money & Management*, 39(3), 166–174. <https://doi.org/10.1080/09540962.2018.1535044>
6. NHS Workforce Race Equality Standard (WRES). 2023 data analysis report for NHS trusts. <https://www.england.nhs.uk/publication/nhs-workforce-race-equality-standard-2023-data-analysis-report-for-nhs-trusts/>
7. Konar N, Dastidar RG, Chakravorty I, Shetty N. Dignity at work in the NHS. *Future Healthc J*. 2022 Jul;9(Suppl 2):12. doi: 10.7861/fhj.9-2-s12. PMID: 36310949; PMCID: PMC9601047.

## **Tender submission**

Your tender submission should be organised under the following headings:

### **‘Project plan’ to include:**

- An introduction illustrating your understanding of the issues around bullying harassment and abuse in the NHS from an ethnicity perspective.
- A summary project plan including details of your proposed methodology and approach to community engagement.
- A timeline including key dates to demonstrate how you would meet the proposed deadline.
- An indication of how much input and capacity would be required from the Observatory team.
- Details of key personnel who will be involved in the project.
- Key ways in which you will work with community partners to ensure patient and public engagement.
- Key risks and mitigating actions for the project.

### **‘Fee proposal’ to include:**

- Costings for the work including VAT.
- A detailed budget covering both personnel costs and any non-pay expenses.
- The costs of any elements of the work that would be provided by another company/freelance staff.

### **‘Company information’ to include:**

- A brief outline your values, structure, size, and capabilities in general.
- Detail of any elements of the work that would be provided by another company/freelance staff.
- An explanation of the unique benefit you will bring to this work.
- Details of how you propose to ensure GDPR compliance, as appropriate.

### **‘Supporting Evidence’ to include:**

- Examples of at least two similar tenders you have won and delivered.
- The details of two previous clients (preferably not for profit) that we can contact for reference purposes (references will be taken up for firms shortlisted).
- Two examples of written work completed by the primary proposed authors.
- A completed equalities questionnaire (see schedule 1).



## Selection criteria

We will rank tenders on the basis of:

1. Overall fit to requirements of the brief and proposed methods.
2. A proven track record of impactful high quality previous work in the area.
3. Relevant experience of team, including a demonstration of cultural competence, understanding of precision medicine, and an ability to engage with issues around ethnic health inequality and racism.
4. Value for money to the Observatory.
5. Your approach to equality, diversity and inclusion.

## Key Dates

ITT released	6 <sup>th</sup> June 2025
Deadline for bids	30 <sup>th</sup> June 2025
Potential follow-up interviews	w/c 21 <sup>st</sup> July 2025
Contract awarded	1 <sup>st</sup> August 2025
Interim report	1 <sup>st</sup> May 2026
Draft full report	1 <sup>st</sup> December 2026
Final report	15 <sup>th</sup> January 2027

### Instructions for the return of the tenders

**Tenders should be submitted by email to [tenderbids@nhsrho.org](mailto:tenderbids@nhsrho.org)**

Tender ref: RHO\_ BHA

We welcome submissions from all interested organisations. Tenders must be received by Monday, 30<sup>th</sup> June 2025. Tenders received after this date will not be considered.

It is incumbent on tenders to ensure they have all of the information required for the preparation of their tenders.

### Further information about this tender can be obtained from:

Name	Owen Chinembiri
Title	Assistant Director - Workforce
Email address	<a href="mailto:tenderbids@nhsrho.org">tenderbids@nhsrho.org</a>

## Schedule 1

### Equalities questionnaire

This questionnaire must be completed satisfactorily in order for any company to be considered to tender for this NHS Confederation contract. In most cases, references to legislation below refer to the Equality Act 2010.

1. Is it your policy as an employer and as a service provider to comply with your statutory obligations under the equality legislation, which applies to Great Britain, or equivalent legislation in the countries in which your firm employs staff?

Yes                      No

2. Accordingly, is it your practice not to discriminate directly or indirectly in breach of equality legislation which applies in Great Britain and legislation in the countries in which your firm employs staff:

- In relation to decisions to recruit, select, remunerate, train, transfer and promote employees?

Yes                      No

- In relation to delivering services?

Yes                      No

3. Do you have a written equality policy?

Yes                      No

4. Does your equality policy cover:

- Recruitment, selection, training, promotion, discipline and dismissal?

Yes                      No

- Victimisation, discrimination and harassment making it clear that these are disciplinary offences?

Yes                      No

- Identify the senior position for responsibility for the policy and its effective implementation?

Yes                      No

5. Is your policy on equality set out:

- In documents available and communicated to employees, managers, recognised trade unions or other representative groups?

Yes                      No

- In recruitment advertisements or other literature?

Yes                      No

- In materials promoting your services?

Yes                      No

Please evidence all questions.

If you answered NO to any part of questions 4 or 5 can you provide (and if so, please do) other evidence to show how you promote equalities in employment and service delivery.

6. In the last three years, have any findings of unlawful discrimination been made against your firm by the Employment Tribunal, the Employment Appeal Tribunal or any other court or in comparable proceedings in any other jurisdiction?

Yes

No

7. In the last three years, has any contract with your organisation been terminated on grounds of your failure to comply with:

- Legislation prohibiting discrimination; or

Yes

No

- Contract conditions relating to equality in the provision of services

Yes

No

8. In the last three years, has your firm been the subject of formal investigations by the Equality and Human Rights Commission or a comparable body, on grounds of alleged unlawful discrimination?

Yes

No

9. If the answer to question 6 and 7 is YES, or, in relation to question 8, a finding adverse to your organisation has been made, what steps have you taken as a result of that finding? Please summarise the details below and provide full details as an attachment.

10. If you are not currently subject to UK employment law, please supply details of your experience in complying with equivalent legislation that is designed to eliminate discrimination and to promote equality of opportunity. List any attached documents.

### **Guidance in answering the equality questionnaire**

When completing the questionnaire, all companies must answer each question fully and supply any documentary evidence requested. Failure to fully answer each question or failure to submit any documentary evidence required may lead the NHS Confederation to consider the answer unsatisfactory.

### **Question 1 and 2**

If your firm has implemented an effective equality policy, you will be able to answer yes to these questions. You will be able to confirm your answers by submitting your equality policy and supporting evidence as for as part of this section.

### **Question 3 and 4**

You will need to submit a copy of your firm's equality policy. You will need to ensure that your policy covers:

- Recruitment, selection, training, promotion, discipline and dismissal
- Victimisation, discrimination and harassment
- Identifies the senior position responsibly for the policy

### **Question 5**

Documents available and method of communication to staff. You will be required to submit examples of any documents, which explain your firm's policies in respect of recruitment, selection, remuneration, training and promotion outside of the equality policy asked for in Question 3 and 4.

You will also need evidence of how your firm has communicated this document to staff i.e. notice boards or issue individual employees with a copy. There is no prescribed evidence here. You will need to submit whatever documents your firm uses for these purposes.

In recruitment advertisements or other literature, you will need to submit evidence that makes public your firm's commitment to equality in employment and service delivery.

Small firms may not have detailed procedures, but you must ensure that evidence is provided which demonstrates that personnel operate in accordance with a written equality policy that includes:

- Open recruitment practices such as using job centres and local newspapers to advertise vacancies
- Instructions about how the firm ensures that all job applicants are treated fairly.

In material promoting your services This relates to how your firm provides information in materials promoting your services e.g. in different languages, making information accessible to people with hearing and visual impairment and physical access for disabled users.

#### **Question 6**

This question's concern is whether any court or industrial tribunal has found your firm guilty of unlawful discrimination in the last three years. It is important to be honest with your answers. The NHS Confederation may check your responses. If the answer is yes, you may wish to insert additional information which details the actions your firm has undertaken to prevent a repeat occurrence.

Answering yes will not automatically mean that you do not get the contract; you need to ensure that the NHS Confederation feels confident that you have sufficient measures put in place to prevent a re-occurrence.

#### **Question 7**

This question's concern is whether your firm has ever had a contract terminated for noncompliance with equality legislation or equality contract conditions. If the answer is yes, your firm may wish to submit additional information which details the actions they have taken to prevent a repeat occurrence.

#### **Question 8**

This question asks whether your firm has had any investigation carried out, whatever the outcome. The NHS Confederation can check a contractor's answer from lists that the CRE and EOC produce, so please be honest. The NHS Confederation is aware that because a firm has been investigated does not mean that it is guilty of discrimination. The result of the investigation will be taken into account when assessing your firm's answers to the questionnaire.

#### **Question 9**

If your firm has been found guilty of unlawful discrimination, you will need to provide evidence that details the steps your firm has taken to correct the situation. The Court, Industrial Tribunal or CRE will have made recommendations about steps your firm should take to eliminate the discrimination. If no action or inadequate action has been taken in this respect, only then will your firm be considered refusal onto the tender list.

#### **Question 10**

If your firm is not subject to UK employment law you must ensure that you supply details of equivalent legislation that you adhere to.