

## **Invitation to tender**

### **Cost of Racism**

**Date: 11 September 2025**

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## About the NHS Race & Health Observatory

The NHS Race and Health Observatory (RHO) is an independent organisation, supported by the Department of Health and Social Care and NHS England, set up to explore ethnic inequalities in access to healthcare, experiences of healthcare, health outcomes, and inequalities experienced by Black and other ethnic minority members of the healthcare workforce. This includes assessing the aspirations to tackle ethnic health inequalities outlined in national healthcare policy. The RHO is a proactive investigator, providing strong recommendations that inform policymaking and facilitate change. The RHO is evidence-driven and solutions-focused.

The RHO is hosted by NHS Confederation. Its board and team are independent and it dictates its own direction and areas of focus. The RHO has three main functions:

- facilitating new, high-quality, and innovative research and evidence
- making strategic policy recommendations for change
- supporting the practical implementation of those recommendations and of anti-racism focused interventions more widely, within the NHS.

## Scope of the work

In Spring 2025, the Observatory published a briefing entitled [The Cost of Racism: How ethnic health inequalities are standing in the way of growth](#). Based on a review of literature, the briefing explored past attempts at quantifying the cost of health inequities to both the healthcare service and the economy more broadly. The briefing began to explore where some of the costs deriving from racism lie, including:

- cost of underlying inequitable health burden;
- costs deriving from inequitable access (e.g. a patient accessing services later and therefore requiring more complex and expensive care);
- costs deriving from patient complaints after poorer experiences of care; and
- costs relating to workforce inequity (including tribunals and retention).

The paper concluded that the inefficiencies caused by systemic racism, from avoidable hospital admissions to workforce discrimination, place unnecessary strain on an already stretched NHS. Addressing these disparities should lead to a healthcare system that is more equitable, efficient, and accessible for all. By shifting resources toward preventing the root causes of racial health inequities, we can improve outcomes and the financial sustainability of the NHS.

The briefing proposed the use of a **cost of illness methodology in order to quantify the economic costs of racial health inequities in England**. An analysis based on a cost of illness approach will help provide important evidence in shaping future policy and ensuring that racial health inequities are tackled with the urgency and seriousness they deserve. The analysis will also enable us to support the NHS to implement its 10-year-plan.

### *Definitions*

The NHS Race and Health Observatory uses the following definitions relating to racism and inequities in healthcare.

- **interpersonal racism**, where a person experiences direct discrimination, bullying, harassment, or stigmatisation based on their race or ethnicity.
- **structural racism**, where a person's access to vital resources, and their experiences with housing, education, employment, and the justice system are impacted by their race and ethnicity, often because discriminatory practices are deeply embedded in legislation, or historical policies of colonisation and segregation continuing to have damaging legacies.
- **institutional racism**, where these above forms of racism combine and are enshrined in policies and practice, limiting an individual's ability to access fair treatment, to get ahead in their careers, or to access the vital services they're entitled to.
- **Ethnic and racial health inequity** – avoidable, unfair, and systemic differences in health and access to, experience of, and outcomes in healthcare based on a person's race or ethnicity. This is distinct from health inequality or health disparity, which are usually used to describe difference without engaging with the systemic causes of those differences.

### **Project outline**

NHS RHO seeks to commission an exploration of the “cost of racism” in the style of a cost of illness analysis. The primary aim of this study is **to explore, map, and estimate the economic costs of racism and ethnic inequity in health and health care in England**. This study should explicitly consider and appropriately address the complexities of the task and lead to the development of:

- a. A conceptual framework for estimating the costs of racism that can be applied both at a national and local level – demonstrating to politicians, policymakers, and leaders the value of investing time and resource into eliminating ethnic and racial health inequity. The framework should adopt a cost of illness approach and should consider cost stemming from inequities in health outcomes, access, preventable illness, experience, and delayed care.
- b. A set of figures estimating the costs of racism relating to the healthcare system, individuals, and the economy at large.
- c. Discussion of the nuances and limitations behind estimations of total costs including consideration of the different sectors/agents in the health system that different costs might fall on, and the extent to which they are 'avoidable' through reasonable actions.
- d. Practical recommendations for policymakers on how to mitigate and avoid these costs.

While we are open to potential bidders proposing their own methodological approach, we would expect the project to include, as a minimum:

- A literature review examining past attempts internationally to calculate the cost of racism in health and healthcare or comparable sectors, which engages with the methodological strengths and weaknesses of this past work.
- Engagement with members of the health and care workforce, and patients with lived experience of race inequity in health and healthcare. All outputs, conclusions and recommendations should be validated by people with relevant lived experience.
- A review of available UK-relevant data sources relating to ethnic inequities in health outcomes, access, experience, preventable illness and delayed care

Where justified, we will also consider proposals including primary data analysis.

### *Partnership bids*

The NHS RHO recognises the power of collaboration and the potential for multiple experts, initiatives, and organisations to pool their expertise and resources to achieve a greater impact. If you believe you can fulfil some aspects of the project but not all, we encourage you to consider a collaborative approach with relevant partners. Where this approach is taken, the project would be managed under a single contract, so a lead partner should be named in bids, and thought should be given to sub-contracting processes where necessary.

### *Expected outputs*

- An interim report, including a draft protocol for peer review.
- A report including:
  - the findings of the literature review and other analyses
  - A conceptual framework for understanding and calculating the costs of racism at both a national and local level.
  - An estimate of the economic costs associated with racism related to health and healthcare, including costs arising in the economy as a whole, the healthcare system, and individuals
  - Recommendations for policy, practice, and further research
  - A summary of methods and key methodological caveats
  - Technical appendices detailing sources of evidence and detailed methodologies.
- Communications and influencing materials to enable broad dissemination, including content for presentations and workshops. Where helpful for the purposes of influencing, some illustrative examples of where cost derives from racism can be included.

**Note:** all outputs should be compiled in an accessible format for communicating publicly and transparently.

### *Detailed specification*

- The contract will be 12 months from the date of award.
- We expect the successful bidder to engage in extensive and meaningful community participation and co-production approaches throughout all project phases.
- The final resource will be open-access and hosted on the NHS RHO HARP (Health Action Resource Platform). It will be co-branded in NHS RHO's house style.
- We welcome bids up to **£150k (excluding VAT)**. Higher value bids may be considered if adequate justification can be given for the additional amount.
- The outputs will be for external publication, with the RHO retaining intellectual property rights.
- The successful bidder will be expected to work collaboratively with the Observatory and specifically commit to fortnightly meetings with NHS RHO core project team and steering meetings with the project Task and Finish Group (c. every two months).
- The successful bidder will be expected to be guided by the NHS RHO Implementation Model throughout the project (Appendix A) and will be supported by the NHS RHO Implementation team in doing so.

- This project is one element of a broader programme of work looking at the Cost of Racism and will be taking place alongside projects exploring costs within maternity and neonatal services, and diabetes. Although these projects will be completely by different suppliers, it will be necessary for suppliers in all projects to work collaboratively to ensure a degree of alignment and compatibility between conceptual approaches and findings.

## **Tender submission**

Your tender submission should be organised under the following headings:

‘Project plan’ to include:

- Details of your proposed methodology and your approach to community participation, co-design, and co-production.
- A Gantt chart, or similar project management outline, detailing actions, milestones, and timescales to demonstrate how you would meet the proposed deadline.
- An indication of required input and capacity from the NHS RHO team, beyond what is already outlined in this ITT.
- Details of anticipated key risks and mitigating actions for the project.

‘Fee proposal’ to include:

- A budget breakdown as appropriate to your pricing model, covering the following costs: personnel, work provided by another company/freelance staff, non-pay expenses.
- Your tender should detail the fee for each separate element of the tender inclusive of VAT.

‘Company information’ to include:

- A brief outlining your structure, size and capabilities; including details of key personnel who will be involved in the project, their lived and/or learned expertise and skills.
- Details of any elements of the work that would be provided by another company/freelance staff, their expertise and skills.
- Your understanding of the brief, and of the role that race, ethnicity, and racism play in determining differential experience and outcomes.
- An explanation of the unique benefit you will bring to this work.
- Details of how you propose to ensure compliance with data protection regulations, as appropriate.

‘Supporting Evidence’ to include:

- Examples of at least two similar tenders you have delivered and have resulted in significant impact/outcomes for Black, Asian, and minoritised ethnic people and communities.
- Examples of at least two public-facing written outputs as a demonstration of expected quality of eventual outputs.
- The details of two previous not for profit clients that we can contact for reference purposes (references will be taken up for shortlisted applicants).
- 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 demonstrated proven track record of delivering similar projects successfully, with impactful recommendations.
3. Relevant experience, skills and competencies of team, including a demonstration of cultural competence, understanding of maternity and neonatal health, and an ability to engage with issues around ethnic health use inequities and racism.
4. Value for money to the RHO.
5. Your demonstrated approach to equality, diversity and inclusion and culture

## Key Dates

Publication of Invitation to Tender (ITT)	8 <sup>th</sup> September 2025
Online drop-in session for potential bidders	16 <sup>th</sup> September 2025
Deadline for submission of tender response documents	17 <sup>th</sup> October 2025
Formal tender interviews (online)	3 <sup>rd</sup> November 2025
Preferred supplier notified and contract negotiation	10 <sup>th</sup> November 2025
Contract finalised and project commencement	10 <sup>th</sup> December 2025

## Instructions for the return of tenders

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

Tender ref: RHO Cost of Racism

Tenders must be received by 23:59 on 17<sup>th</sup> October 2025. Tenders received after this date will not be considered.

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

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

Name	Sam Rodger
Title	Assistant Director, Policy and Strategy
Email address	<a href="mailto:Sam.rodger@nhsrho.org">Sam.rodger@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.