

Tenderer: 1 - [REDACTED]						SCORING	
						Score*	Assessment
						10	Very high standard with no reservations at all about acceptability
						9	High standard
						7	Good standard; acceptable with only minor reservations
Assessor:						4	Low standard with significant reservations and doubts about acceptability
						0	Clearly fails to meet requirements
						*Scores between these values are acceptable, for example 5	
Non-price Criteria	Weighting				Avg. Score	Weighted Score	Comments/Evidence
Service planning (Q.1)		9	9	10	9		Submission Need column lacks data on actual need-more activity related. Very comprehensive on activities against core offer, based on current practise. Recognition of 30% model. Activities describe targeted within universal provision. Accessible services across community venues-innovative. Interview Excellent knowledge and research regarding needs of area, key stakeholders and activities that would address these issues-already delivering these rather than just talking about future role. All services have clear aims and objectives and fit with FCO/EYFS. Clear emphasis on parental consultation and feedback in plan/do review cycle.
	20%				9	18.50	
Excluded groups (Q.2)		9	9	10	9		Submission Good use of estart to identify vulnerable groups and their access to centre. Good identification of other agencies who provide links to other groups. Good case studies provided, focused projects as demonstrated through temporary accom, home educated children, BME peer mentoring. Clear understanding of the needs of the locality. Innovative practice. Interview Very comprehensive examples provided regarding excluded groups describing process of identification, multi-agency planning and working and real outcomes for families engaged in programmes. Also engaged with LA pilots (e.g. 0-7) shaping strategic delivery e.g. breast feeding programme/BME peer mentoring work.
	15%				9	13.88	
Business planning processes (Q.3)		9	8	9	9		Submission Proven track record of supplying service backed by sound business processes including financial auditing and a range of supporting policies. Appendix 4- excellent demonstration of service planning in terms of staff deployment against core offer. Clear statement on central values relating to safeguarding CAF and first aid. Interview Illustrated clear well developed business planning processes. Workforce development programme and succession planning described too. Staff structure working well and would be expanded-especially more outreach work. Deployment across centres, specialist staff. Recognition of business planning requirements for new reach areas
	10%				9	8.75	
Quality assurance (Q.4)		7	7	8	8		Submission Lots of evidence of project evaluations but the systematic improvement of service provision is not evident. Interview Plan do review cycle clearly demonstrated. Examples provided where parents experiences and feedback has shaped service delivery. Monitoring and evaluation officer within team. Clear framework described that is understood by all staff. Services each have clear aims, objectives and outcomes, evidence provided. Would want to develop/support evidence of long term outcomes.
	10%				8	7.50	
Relationship with Children's centre Commissioning team (Q.5)		9	9	9	9		Submission Demonstrates a partnership approach. Recognises the relationship between LA and role of provider. Willingness to engage in new initiatives evident as is ability to lead new innovative pieces of work/pilots. Willingness to engage and use estart-used in Appendix six. Interview Clearly understood strategic role of LA and COMG in relation to monitoring and shaping services, but also dynamic/innovative in approaching new pieces of work and seeing partnership working with other bodies.
	10%				9	9.00	
Transition management (Q.6)		9	9	10	9		Submission Positive about current model of delivery across 2 centres, sees change to reach areas as positive in terms of delivery and offers ongoing VFM. Seamless approach and recognition of the changes that will need to be made in terms of monitoring data. Interview Very good response detailing all aspects of transition planning, comms strategy, informing stakeholders of changes, working with new providers in other areas, new contractual obligations, new service planning and monitoring and how to implement. Also risks identified in terms of service continuity to providers-actions identified to mediate risks associated.
	5%				9	4.63	
Integrated working (Q.7)		8	9	9	8		Submission Excellent local links particularly with CAF and locality developments. However do not mention wider context of Contact Point, preventive agenda. Interview Able to give clarity vision of CC role in preventive agenda, clear on CAF processes, integrated working. All staff have been trained n CAF and see themselves as instigators of CSAF process and lead professional where appropriate. Gave ex. Of integrated working and removing barriers (e.g. midwifery) and successful outcomes related to this work.
	10%				9	8.50	
Demonstrating impact (Q.8)		8	8	9	9		Submission Evaluation measures immediate responses-range of methods are provided and demonstrated through appendices. Would have liked more evidence on how this is captured in a wider framework. Interview Gave a clear strategic framework, recognition of where gaps are and what CC can address (and what they cannot). Helpful doc. Provided which focussed on ECM. Clarity over strategic aims linked to corporate agenda. Excellent documentation and understanding of needs and demonstration of impact.
	5%				9	4.25	
TOTAL	85%					75.00	

	A	B	C	D	E	F	G	H	I
1	Tenderer:2 - [REDACTED]							SCORING	
2								Score*	Assessment
3								10	Very high standard with no reservations at all about acceptability
4								9	High standard
5								7	Good standard; acceptable with only minor reservations
6	Assessor:							4	Low standard with significant reservations and doubts about acceptability
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9									
10	Non-price Criteria	Weighting					Avg. Score	Weighted Score	Comments/Evidence
11	Service planning (Q.1)	20%	9	9	9	7	9	17	Submission: Very detailed response, although needs not specific to IOW context. Activities aspirational. Recognises the importance of integrated working Creative innovative approach (e.g. digital CC and good links/ knowledge of local partners e.g. Homestart, RCC and NHS PCT. Good recognition CAF. Importance of volunteers in working with targeted groups. Interview comments: There was further explanation around proposals to identify local needs by looking at demographics, pockets of deprivation, etc. working with strategic partners in Health, schools and the community. There was an emphasis on community engagement via a community engagement strategy, an example of specific parental engagement was given from Birmingham. Service mapping would start from understanding what's already there and why. There was a willingness to spend time to explore what is currently delivered.
12	Excluded groups (Q.2)	15%	8	8	9	9	9	12.75	Submission: Good local research. Excellent regarding linking youth work and young parents, good examples relating to hidden harm agenda, innovative practices e.g. summer residential, evidence from existing work. This is a strong response! Interview comments: The answer focused on a real example of working with teenage parents – a recognised need in Birmingham. How such parent would be engaged and supported with key outcomes and issues identified using an agreed project framework tool – SID.
13	Business planning processes (Q.3)	10%	8	8	9	8	8	8.25	Submission: Issue regarding structure and how that would maximise resources to delivery- seems to replicate some of IWC strategic role. Strong supervision and practise framework. Lots of value added appear to be demonstrated e.g. staff deployed across CC's. Interview comments: A scalable model based on tendering for all 8 centres was described. With the island strategic manager providing consistency across the centres as a single point of reference. There was evidence of an understanding of the IoV context regarding locality working and CAF Panel. There was a willingness to develop practice to reflect local structures.
14	Quality assurance (Q.4)	10%	8	8	9	8	8	8.25	Submission: Benefits of central quality assurance team demonstrated. Clear framework for monitoring quality at each level and safeguarding a focus with QA. How does framework relate to examples of current good practice? No mention Interview comments: A quality cycle for improvement was described focusing on staff, services and outcome. For staff target setting, appraisal and supervision were key to quality improvement. For services – annual business planning, SEF and annual conversation. The response mentioned the importance of safeguarding. Benefits of the organisation's national approaches to quality assurance were described, ie. Corporate quality team.
15	Relationship with Children's centre Commissioning team (Q.5)	10%	8	8	8	7	8	7.75	Submission: Familiar with using CAF in centres, strength, accredited ICT solutions offered. Recognition of local partners including 0-7 programmes. Think family approach- preventive agenda. Interview comments:
16	Transition management (Q.6)	5%	8	9	9	7	8	4.125	Submission: Good on staff transition-action plan addresses TUPE. Clear activities- relation to provider transition and also discusses community transition-only one that does! Review of services. Interview comments: Key tasks and risks identified included strategic governance, inter-agency relationships, service users – impact of change, communication, cultural change regarding core values, policies and procedures for those becoming [REDACTED] staff. A key risk was the safeguarding of services users – national advisers would support such areas of work.. There was a recognition of the current different approaches used in centres that would need to be taken into account
17	Integrated working (Q.7)	10%	9	8	9	8	9	8.5	Submission: Clear holistic vision as to what can be offered in terms of integrated working. Vision for preventive services-progressive universalism. Experience of CAF/lead professional-pilot in [REDACTED] Interview comments: Experience in the development of fully integrate, co-located Surestart Programme teams was described. The challenge of creating interagency structures whilst remaining in home organisations. The important of information sharing was raised. Again the importance of safeguarding was mentioned and centre staff involvement in CAF processes and referral routes to appropriate agencies. Example of Birmingham CAF work was cited where children's centres are the highest referrers into CAF and staff often are Lead Professionals.
18	Demonstrating impact (Q.8)	5%	8	8	8	7	8	3.875	Submission: Good to see using nationally recognised framework to capture outcomes. Has been demonstrated in other sections. Interview comments: There was a focus on the use of outcomes Based Accountability. Also further explanation of the 'SID' process locally to ensure projects were based on real, identified needs with clear outcomes.
19	TOTAL	85%						70.5	

	A	B	C	D	E	F	G	H	I
1	Tenderer: 3 -								SCORING
2								Score*	Assessment
3								10	Very high standard with no reservations at all about acceptability
4								9	High standard
5								7	Good standard; acceptable with only minor reservations
6	Assessor:							4	Low standard with significant reservations and doubts about acceptability
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8								*Scores between these values are acceptable, for example 5	
9									
10	Non-price Criteria	Weighting					Avg. Score	Weighted Score	Comments/Evidence
11	Service planning (Q.1)	20%	6	6	7	7	7	13.00	Submission Evidence of detailed research undertaken re: existing practice, local context and needs. Range of activities appropriate to offer requirement. Lack of innovation in some areas of delivery. Additional resources offered through mobile toy library and sensory unit. Plan requires partners-e.g. health-1 day per fortnight midwife-how would they engage. Interview Theoretical response, did not really reflect the needs of IOW as well as could of despite information provided earlier in process. Lots of generalities. Good links to VCS. Resources identified at early stage on process. Development of community profile for each CC's.
12	Excluded groups (Q.2)	15%	5	5	5	8	6	8.63	Submission Recognition of integrated working to support vulnerable groups, ex. Of current practice but not impact of practice/early success indicators. Evidence of needs on IOW. Interview Discussed rural communities and issues faced by them-but felt it was very general/supposition/not backed up by data analyses or research on the ground. No real practical examples provided of engaging with excluded groups-how they have gone about this innovatively?
13	Business planning processes (Q.3)	10%	6	5	7	8	7	6.50	Submission Model of business management framework flexible across IOW based on locality need, good support for CPD within a national framework. Bring eAspire as well as use of estart. Financially stable org. Issues re: key staff and continuity for parents/carers and children. National best practice toolkit and planning. Recognition of multi agency working to build capacity. Strategic manager role-how would it link with commissioners role and where costed? What is the role-strategic links already exist. Interview Discussed suggested model which works well in other area. Did not mention locality working in IOW context. Good support from national body. Some concerns regarding strategic manager role-how this relates o Las role-emphasised flexibility on this
14	Quality assurance (Q.4)	10%	8	7	8	7	8	7.50	Submission Comprehensive QA framework-supported nationally. Effective well evidenced evaluation and management programme. Range of QA mechanisms internal and external. Lack of recognition of good practice already in existence. Interview Strong response in this area, data driven, self evaluation framework provided, not afraid to stop services if not working. See COMG as integral to M&E. Offer capacity in this area.
15	Relationship with Children's centre Commissioning team (Q.5)	10%	8	6	7	7	7	7.00	Submission Strong relationship described but respective roles would have to be clarified. Extra funding and resource -illustrates additionality this provider will bring. Reads as if starting from scratch no recognition of work already developed. Discusses work with partners but not LA. Interview Forging partnership seen as key, understanding of national good practise and bringing to local level. Good relationships and dialogue required at every level.
16	Transition management (Q.6)	5%	6	6	8	7	7	3.38	Submission Comprehensive response, previous TUPE experience. Have central team to manage transition process, flexibility demonstrated. Sound practices. Interview Risks identified re: external body coming in. in relation to local PVIs. But would look to employ local people-celebrate what is good. Did not discuss new designations, impacting families-e.g. maintaining service provision.
17	Integrated working (Q.7)	10%	7	7	7	7	7	7.00	Submission Theoretical response would have been good to see ex. Of current practise and reflection of IOW processes. Practical ex. Real evidence. Lack of recognition of what is already on offer-role of locality co-ords. No sense of how CAF working in current centres. Interview Keen to fit into local processes as all LAs do CAF differently. (Made assumptions about some CAF processes on IOW and health not engaging)
18	Demonstrating impact (Q.8)	5%	6	6	8	8	7	3.50	Submission Early success indicators, but does not correlate to service plan for examples. Focus on outputs (no.s) would like more practical ex. of outcomes from their experience Interview Gave example of outcomes for LEAP parenting group. Research on meaningful social return. Concerns regarding national drive against local delivery.
19	TOTAL	85%						56.50	

	A	B	C	D	E	F	G	H	I
1	Tenderer: 4	NOT SHORTLISTED						SCORING	
2								Score*	Assessment
3								10	Very high standard with no reservations at all about acceptability
4								9	High standard
5								7	Good standard; acceptable with only minor reservations
6	Assessor:							4	Low standard with significant reservations and doubts about acceptability
7								0	Clearly fails to meet requirements
8		*Scores between these values are acceptable, for example 5							
9									
10	Non-price Criteria	Weighting					Avg. Score	Weighted Score	Comments/Evidence
11	Service planning (Q.1)	20%					#DIV/0!	#DIV/0!	
12	Excluded groups (Q.2)	15%					#DIV/0!	#DIV/0!	
13	Business planning processes (Q.3)	10%					#DIV/0!	#DIV/0!	
14	Quality assurance (Q.4)	10%					#DIV/0!	#DIV/0!	
15	Relationship with Children's centre Commissioning team (Q.5)	10%					#DIV/0!	#DIV/0!	
16	Transition management (Q.6)	5%					#DIV/0!	#DIV/0!	
17	Integrated working (Q.7)	10%					#DIV/0!	#DIV/0!	
18	Demonstrating impact (Q.8)	5%					#DIV/0!	#DIV/0!	
19	TOTAL	85%						#DIV/0!	

	A	B	C	D	E	F	G	H	I
1	Tenderer: 5 -								
2									
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6	Assessor:								
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10	Non-price Criteria	Weighting					Avg. Score	Weighted Score	Comments/Evidence
11	Service planning (Q.1)	20%					#DIV/0!	#DIV/0!	
12	Excluded groups (Q.2)	15%					#DIV/0!	#DIV/0!	
13	Business planning processes (Q.3)	10%					#DIV/0!	#DIV/0!	
14	Quality assurance (Q.4)	10%					#DIV/0!	#DIV/0!	
15	Relationship with Children's centre Commissioning team (Q.5)	10%					#DIV/0!	#DIV/0!	
16	Transition management (Q.6)	5%					#DIV/0!	#DIV/0!	
17	Integrated working (Q.7)	10%					#DIV/0!	#DIV/0!	
18	Demonstrating impact (Q.8)	5%					#DIV/0!	#DIV/0!	
19	TOTAL	85%						#DIV/0!	

	A	B	C	D	E	F	G	H	I
1	Tenderer: 6 - One Children's Society (Service)								SCORING Score* Assessment 10 Very high standard with no reservations at all about acceptability 9 High standard 7 Good standard; acceptable with only minor reservations 4 Low standard with significant reservations and doubts about acceptability 0 Clearly fails to meet requirements *Scores between these values are acceptable, for example 5
2									
3									
4									
5									
6	Assessor:								
7									
8									
9									
10	Non-price Criteria	Weighting						Avg. Score	Weighted Score
11	Service planning (Q.1)								Comments/Evidence
									Submission Comprehensive service planning approach, clearly undertaken research into IOW context (e.g. needs). Extensive range of activities against FCO, demonstrated elements of targeted provision with universal provision. Peer relationships innovative examples. Real emphasis on working with partners. Outputs relate to outcomes. Interview Additional capacity identified to facilitate planning/transition at contract award stage. Had done considerable research around our local needs based on data available. Consultation/Manifesto of Good Childhood would identify intended outcomes. Gave clear tracking of service plan around Family Support with development from local Children's Plan Priorities, Parenting Strategy.
		20%	9	9	9	8	9	17.50	
12	Excluded groups (Q.2)								Comments/Evidence
									Submission Clear identification of excluded groups and activities to support and engage. Family support plan fits well with CAF/O-7 prog. Range of approaches. Uses ex. From current experience. Interview Again, local research identified a need around lone parents, especially fathers. Then gave example from current practice in Bradford. Clear approach of universal offer and a targeted approach. Also ensured this group had dedicated seats on Advisory Board. Consultation, marketing included before activity started. Also looked at out-of-hours delivery and linked to local community groups.
		15%	9	9	9	9	9	13.50	
13	Business planning processes (Q.3)								Comments/Evidence
									Submission Proposed staffing structure is IOW wide and provides economies of scale and consistency of approach. However if did not get all centres? Research undertaken into vol. programmes on IOW. Flexibility to work across all centres. Pooled resources. Manifesto recognises role of community. Clear ex. Of best practice and additionality round rurality. Willing to seek additional funding. Clear vision of staff deployment. Safeguarding clearly related to business planning Interview Creative approaches to planning including opportunities for modern apprentices. Strong links to a range of agendas including Eco-Island, Locality Co-ordinators and Social Care. One point of contact for LA through Programme Manager. Talked about Workforce and secondment opportunities for staff. Identified role within Safeguarding.
		10%	8	9	8	8	8	8.25	
14	Quality assurance (Q.4)								Comments/Evidence
									Submission Clear auditing of practice and policy e.g. H&S/Safeguarding/complaints. Systematic approach. Links back to national org. and depts they can draw on for QA and information management. Recognition of relationships with partners. National team research unit. Interview National Research Unit down to each member of staff having a speech and language target as part of their performance management. Recognised the need to complete prioritisation process with other partners. Recognised that QA needed to feedback into local strategies.
		10%	9	8	9	9	9	8.75	
15	Relationship with Children's centre Commissioning team (Q.5)								Comments/Evidence
									Submission Clearly demonstrates understanding of commissioning relationship. Experience of working with LAs. Central IOW approach to data described. Familiar with range of IT solutions e.g. eStart. Full answer covers all aspects of questions. Childcare sufficiency assessment mentioned. Duplication of prog manager role. Interview Able to demonstrate clearly understanding of commissioning relationship and existing good relationships on IOW. If awarded centres would still need clarification on R and R of Programme Manager in relation to LA.-discussed proportionality ie if had less centres would amend structure to take account.
		10%	9	8	8	9	9	8.50	
16	Transition management (Q.6)								Comments/Evidence
									Submission Good response, experience of managing transition in other areas, team to manage process and devt of transition plan. Secure business continuity process/roles and responsibilities. Interview HR person gave clear description of how transition with staff would happen including time allocation to individual members, listening and asking questions. Would also be available at contract award stage to start work around transition.
		5%	9	9	9	8	9	4.38	
17	Integrated working (Q.7)								Comments/Evidence
									Submission Knowledge demonstrated re:CAF/integrated working agenda and practice. Lack of recognition of local context re: locality working, but good emphasis on CAF processes. Clear WFD identified. Recording systems aligned with CAF. Interview Referenced three localities. Good background research. Clear about role of CCs to lead agenda, including Lead Professional. Also identified examples of de-escalation through services. national Implementation Partner around Contact Point.
		10%	9	9	8	8	9	8.50	
18	Demonstrating impact (Q.8)								Comments/Evidence
									Submission Would have liked to have heard more examples of how impact evidenced in other centres provided by org. Liked well being indicators. Recognition of distance travelled and need to capture early successes. No examples provided. Interview Range of techniques with a clear long term strategic view. Participation Training rolling out for staff. Captured the stabilizing of families. Activity that could have side lined groups, seen through to ensure families remain engaged. i.e. step down from even though staff had originally referred them.
		5%	9	8	8	8	8	4.13	
19	TOTAL	85%						73.50	

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1	Tenderer: 7								SCORING
2								Score*	Assessment
3								10	Very high standard with no reservations at all about acceptability
4								9	High standard
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8									*Scores between these values are acceptable, for example 5
9									
10	Non-price Criteria	Weighting					Avg. Score	Weighted Score	Comments/Evidence
11	Service planning (Q.1)	20%	6	7	7	7	7	13.50	<p>Submission</p> <p>Comprehensive service response. Reflects practical activity undertaken against some analysis of need-includes parental consultation. Good links with health demonstrated, would have liked more recognition in relation to child poverty and activities relating to this agenda.</p> <p>Interview</p> <p>Majority of questions answered by manager. Not clear about the strategic view from the body who will hold the contract. Recognise that increased reach area will need to be evident through service planning.</p>
12	Excluded groups (Q.2)	15%	7	7	8	8	8	11.25	<p>Submission</p> <p>Evidence of activity based on identified need. Rural isolation section well developed, Demonstrates a variety of methodologies and activities for engaging excluded groups. Also shows developing practice.</p> <p>Interview</p> <p>Example given related to current group within [REDACTED] Very clear inclusive ethos at the centre. Would like to have seen more identification of other groups within wider reach area. Again, would like to have heard more of strategic view from responsible body.</p>
13	Business planning processes (Q.3)	10%	6	7	7	7	7	6.75	<p>Submission</p> <p>As a current provider business planning practices are well described in this context. Clear vision for COMG, willingness to benchmark across other centre re: VFM. Clear vision for staff team, supervision practices and deployment. No mention of safeguarding within business processes.</p> <p>Interview</p> <p>Recognition of the need to broaden staffing structure but limited around the need to reduce person dependent model. No visual representation of how this would look to meet the needs of the reach area. Clear view of how the role of the [REDACTED] would need to be extended but not so secure around relationships between [REDACTED] in wider reach area. Safeguarding not mentioned within tender and answer quite general in terms of it underpinning everything and part of policies. Would like to have heard more about Workforce, and quality assurance through outreach.</p>
14	Quality assurance (Q.4)	10%	6	8	7	7	7	7.00	<p>Submission</p> <p>Clear link between IOW established processes, does not discuss start in this area-very clear on relationship between centre activities and parents views /consultation. Complaints procedures in place and contribute to monitoring of impact</p> <p>Interview</p> <p>Similar performance management process of school. Performance of Children's Centre in HT's review. Recognised need to broaden view of QA i.e. use of data. Role of COMG clarified and example of current work given. Beginning to recognise the benefit of E-Start in QA process. Not clear about the role of the responsible body in overseeing this process across the whole CC agenda.</p>
15	Relationship with Children's centre Commissioning team (Q.5)	10%	7	8	7	7	7	7.25	<p>Submission</p> <p>Use of e-start to capture data and use for need analysis. Regularly working with a and seeking links with partners, range of innovative techniques to gain feedback. Willingness to respond to new programme. Joint working with LA.</p> <p>Interview</p> <p>Clearly answered through business planning. Further clarification around E-Start given. Again, led by manager.</p>
16	Transition management (Q.6)	5%	6	7	8	8	7	3.63	<p>Submission</p> <p>As a current provider transition arrangements lessened, but recognises new reach area and plans that have to be made in this area. . Activities and tasks clear identified. Recognition of [REDACTED] in process and support that can be offered through CC.</p> <p>Interview</p> <p>Recognition of need to broaden skills of [REDACTED] securing links between the Centre and the [REDACTED] and linking with other [REDACTED] across the reach area. Would like to have heard more how the responsible body would strategically develop links with other responsible bodies. Not just down to the manager. Risks recognised as processes such as HR, Payroll that have currently been managed by IVC. Would like to dig further around the implications of [REDACTED]</p>
17	Integrated working (Q.7)	10%	6	9	9	7	8	7.75	<p>Submission</p> <p>Recognises the role of CC in integrated working agenda. CAF evidence of engagement in processes. Networking opportunities offered in creative way. Preventive agenda clear understanding. Would have liked more on early identification, risk factors.</p> <p>Interview</p> <p>Gave example relating to IW with Health staff only. Identified risky partnerships and reasons why. Links across a range of agenda such as 0-7 Project and Extended Services. Again, no strategic view given.</p>
18	Demonstrating impact (Q.8)	5%	7	8	7	7	7	3.63	<p>Submission</p> <p>Awareness of outcome based accountability-although needs to be developed and demonstrated. Has maximised opportunities to demonstrate impact e.g. through MSC, recognition of different types of impact and how they relate to SEF. Uses early success indicators to demonstrate impact. Willingness to focus work in on excluded groups</p> <p>Interview</p> <p>Good links to Pre-Schools and reduction of home visiting by HV Service. Links made to data and tracking through F&P. Would like to have heard more about how this impact is used by the responsible body.</p>
19	TOTAL	85%						60.75	

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10	Non-price Criteria	Weighting					Avg. Score	Weighted Score	Comments/Evidence
11	Service planning (Q.1)	20%	7	7	7	8	7	14.50	Submission: Comprehensive delivery plan with a comprehensive range of activities to meet the offer. Lacking in local data supporting identification of needs. Interview comments: Expressed need for consultation – would have been useful to hear more about how this would be done. Little mention made of data on known locally identified groups. Description of needs were felt to be future rather than current. Health issues were identified and acknowledgement of specific need due to presence of prison in the reach area
12	Excluded groups (Q.2)	15%	6	5	7	8	7	9.75	Submission: Good research around groups to be prioritised and local context. Demonstrates a range of creative techniques and activities. Based on the reality of what is currently provided Interview comments: Particular focus and understanding of fathers' needs was recognised, with benefit of male worker attached to [REDACTED] adding value. Again the examples appeared to be drawn from future intentions rather than current practice
13	Business planning processes (Q.3)	10%	5	7	6	8	7	6.50	Submission: Demonstrates capacity to deliver, value for money delivering across 2 centres, safeguarding demonstrated as part of business planning. The range of policy documents appended clarified significant processes. Interview comments: There was a recognition of the possibilities of sharing specialism across the two centres tendered for and the need to explore community venues given limited space at one centre, and that term time only delivery requires addressing. There remained some level of concern as to the Directors' involvement in taking responsibility for ensuring and monitoring service delivery. No current model of practice around the effective use of the COMG or previous equivalent was convincingly described. The role of the Directors required more clarity. There appeared to be an over-reliance on the interim centre manager. Directors need to demonstrate they lead the vision.
14	Quality assurance (Q.4)	10%	6	5	6	8	6	6.25	Submission: Demonstrate local quality mark and application for national quality mark. Well described processes. Clear understanding of role of centre manager in QA. Creativity in collating feedback from users. Role of COMG in assuring quality is not clarified. Interview comments: There was clarity around the theory of quality improvement. [REDACTED]
15	Relationship with Children's centre Commissioning team (Q.5)	10%	6	6	8	7	7	6.75	Submission: Recognition of the need for good data management. Feels like they will need to be lead by the LA rather than leading as an organisation. The relationship between outputs and outcomes is described. Interview comments:
16	Transition management (Q.6)	5%	7	7	8	7	7	3.63	Submission: Change management action plan described, transition for staff and stakeholder is explored. Sensitive to position of [REDACTED] Knowledge of the local area and vision for future delivery. No experience of TUPE. Change management action plan is mentioned but not full described. Interview comments: Further important elements of transition were described. There was a realisation of the need to work sensitively with the responsible body of the second centre being tendered for. Identified communication as key to successful transition and the importance of continuity of service delivery.
17	Integrated working (Q.7)	10%	6	5	6	7	6	6.00	Submission: No clear picture of current working in relation to CAF. Lacks clarity on overall vision for integrated working. Benefit in the current involvement of inclusion processes in IoW, locality working model, CAF, 0-7 project. Misinterprets the role of centres in CAF i.e. not simply signposting Interview comments: The response focussed on future intention rather than current practice – e.g. will identify a CAF lead person. In the context of expected involvement in current IoW processes the response indicated that insufficient action has been taken to adopt CAF processes
18	Demonstrating impact (Q.8)	5%	7	5	6	8	7	3.25	Submission: There is evidence of an understanding regarding difference that services make to outcomes. Recognition of longer term impact – transitions into school. Interview comments: The value of well constructed case studies to support outcome was described and individual tracking beyond 5yrs old. There was a dependency on the interim manager to describe notions of measuring outcomes to demonstrate impact.
19	TOTAL	85%						56.63	

	A	B	C	D	E	F	G	H	I
1	Tenderer: 9								SCORING
2								Score*	Assessment
3								10	Very high standard with no reservations at all about acceptability
4								9	High standard
5								7	Good standard; acceptable with only minor reservations
6	Assessor:							4	Low standard with significant reservations and doubts about acceptability
7								0	Clearly fails to meet requirements
8									*Scores between these values are acceptable, for example 5
9									
10	Non-price Criteria	Weighting					Avg. Score	Weighted Score	Comments/Evidence
11	Service planning (Q.1)	20%	5	6	6	8	6	12.50	<p>Submission</p> <p>Comprehensive service plan, research on what already exists evident. Activities are generic but do indicate that it is a generic plan and that centre ones were available. Needs section doesn't indicate research into IoW context. Identifies CAF as a process for identification – but limited to SEN only.</p> <p>Interview</p> <p>Were not able to articulate needs of IoW despite the research undertaken for the tender. Lots of generalities and presumptions about IoW needs-not borne out of any factual data. Robust model for community consultation mentioned. Linked to Eco island and regeneration. Very high level responses-needed more local focus.</p>
12	Excluded groups (Q.2)	15%	5	6	5	7	6	8.63	<p>Submission</p> <p>Recognition that vulnerable groups are central to delivery. Examples given of groups requiring targeting but not innovative approaches. Activities quite generally described.</p> <p>Interviews</p> <p>Discussed national track record in this area-but no examples provided-were not clear on priority areas for IoW, mistake regarding KS1 results (i.e. saying low attainment when not the case for KS1). Felt like a very theoretical responses when requested examples.</p>
13	Business planning processes (Q.3)	10%	6	5	6	8	6	6.25	<p>Submission</p> <p>Nationally accredited business processes are described. Access to specialist mobilisation team and consultants and economies of scale around staffing and training are described. Willing to offer additionally – would this reply on consultation. Lacking detail regarding different roles and responsibilities in each centre?</p> <p>Interview</p> <p>Good regarding flexibility and recognising good practices on the ground. However did not appear that research had been done re: locality clusters and preventive agenda on IoW. Description of targeted team did seem to duplicate existing workforce again showed lack of research-model works in others areas. Model of staffing also did not seem to make distinction between 30% centres and 70% centres. Although emphasised it was flexible had concerns around this.</p>
14	Quality assurance (Q.4)	10%	6	6	7	8	7	6.75	<p>Submission</p> <p>Aiming Higher accredited. National quality management scheme participants e.g. IIP. Benefits from links to national organisation for training, developing volunteer network, performance management. Is there a recognition of skills that existing staff have? No mention of safeguarding. Robust complaints procedures.</p> <p>Interview</p> <p>Cycle described in handout. 'Customers part of input output process. Outcomes associated with ECM. Daily measurement through CC data collection start. Liked role modelling of practice. Ex. Provided-Braintree. Some felt vague response on how data to be collected and outcomes measured. Again quite a theoretical answer.</p>
15	Relationship with Children's centre Commissioning team (Q.5)	10%	6	6	6	8	7	6.50	<p>Submission</p> <p>Knowledge of eStart and practical use of the system – staff trained in use and interpretation. Also use CC Tracker. Benefits from [redacted] work in developing approaches through TIC. Experienced in SEF/Ofsted process. Recognition of the need to have systems in place to ensure consistency and safe working with partners.</p> <p>Interview</p> <p>Concerns regarding duplication of roles-at a strategic level and operational level, although discussed flexibility in these arrangements and need to develop IoW vision of CC's model.</p>
16	Transition management (Q.6)	5%	7	6	7	8	7	3.50	<p>Submission</p> <p>Experience of TUPE. The approach to change management required for transition are explained and backed up by experience. Use a risk assessment approach. Willing to invest time and resources to minimise impact of change.</p> <p>Interview</p> <p>Good on not impacting service delivery for families, identified key risks that would need to be managed e.g. getting buy into approach, developing relationships, stakeholders buy in to concept. Initialisation and mobilisation phase have national experts that can support this part of the process.</p>
17	Integrated working (Q.7)	10%	6	6	6	8	7	6.50	<p>Submission</p> <p>Can do attitude. Experience of working in integrated teams. Clear vision, strong model. Some real examples of current practice. Recognition of existing partners. How will national training of [redacted] harmonise with island staff already trained in this area. Would have liked to see some research into the IoW locality model.</p> <p>Interview</p> <p>Discussed role modelling. Clear understanding of CAF process. Was not clear about progressive universalism. Was also not clear on CC leading CAF process instigating CAFs being lead professional. Again lack of research on the ground about how CSF being rolled out locally and locality working and where CCs fit in model.</p>
18	Demonstrating impact (Q.8)	5%	6	5	5	7	6	2.88	<p>Submission</p> <p>Early success indicators to be agreed by the LA. Lacking in detail around how impact would be demonstrated in terms of difference made to children and families. No innovative in demonstrating impact.</p> <p>Interview</p> <p>Illustrated an example of tracking children and young families-but was one they had already used elsewhere. Still did not have a sense of innovative practices/systems for capturing data and outcomes.</p>
19	TOTAL	85%						53.50	