Impact on Urban Health

# INVITATION TO TENDER

## LEARNING PARTNER: CHILDREN'S MENTAL HEALTH PROGRAMME

September 2026

# Contents

# 1.0 SUMMARY

## 1.1 Overview

**Impact on Urban Health is seeking a Learning Partner to support the final phase of our Children's Mental Health (CMH) Programme.**

As the programme winds down between 2026 and 2028, we are seeking a Learning Partner to help us capture and synthesise learning from six years of programme delivery, and to help us:

- Understand what the programme has learned about preventing poor mental health for children and supporting nurturing environments for children and their families.
- Understand the programme's contribution to change at local, system and ecosystem levels.
- Capture lessons for future programme design and lifecycle management for Impact on Urban Health.
- Understand how programmes can be closed responsibly and effectively.
- Produce learning products for internal and external audiences which help sustain the programme's legacy.

This is primarily a learning partnership and will focus on learning, reflections, sense-making and knowledge mobilisation. We are particularly interested in understanding how learning emerged across the life of the programme and how that learning influenced programme strategy, investment decisions and ways of working.

We recognise that attribution of population level outcomes may not be possible and we are interested in approaches that explore contribution, influence, systems change and programme learning.

The successful applicant will work collaboratively with the Children's Mental Health Programme team and the Data, Evaluation and Learning team, Policy Influencing and Communications team and a Strategic Consultant, building on existing evidence and engaging a range of internal and external stakeholders.

## 1.2 Who we are looking for

We are seeking an individual or organisation with experience of children, families, health equity and/or children's mental health, alongside experience of:

- Learning and evaluation in complex systems
- Place-based and/or systems-change initiatives
- Qualitative and participatory approaches
- Organisational learning and reflection

- Communicating learning to different audiences and ability to distil complex issues and nuanced work into compelling and easy to understand learnings
- Working with funders, public sector organisations and community partners.

We welcome proposals that combine evaluation, facilitation, sense-making and knowledge mobilisation expertise.

## 1.3 Budget and Timelines

**Budget**: £50,000 inclusive of VAT

| | |
|---|---|
| **Closing date for clarifications:** | Monday 12th October 2026 |
| **Closing date for applications:** | Midday, Monday 19th October 2026 |
| **Interview date:** | From 27th – 29th October 2026 |
| **Award date:** | November 2026 |
| **Project start date:** | November-December 2026 |
| **Project end date:** | June 2027 |

## 1.4 How to apply

Please submit applications to leila.lawal@urbanhealth.org.uk Your application should include:

- A proposal outlining your approach to this project (maximum 3 pages)
- Relevant experience and examples of similar work (maximum 2 pages)
- Single page CVs of your team. (This does not count towards the page limit).
- Examples of outputs from similar work (This can be as a link or attachment. This does not count towards the page limit)
- A simple budget (This does not count towards the page limit)

Please see section 8.0 for full details of submission requirements.

**Closing date for applications: Midday, Monday 19th October 2026**

# 2.0 PROJECT BACKGROUND & AIMS

## 2.1 Project background

**About Impact on Urban Health**

Impact on Urban Health is part of Guy's & St Thomas' Foundation. We work to improve health equity by addressing the social, economic and environmental factors that shape health outcomes.

We seek to create lasting change through a combination of funding, partnerships, evidence, participation, influencing and systems change approaches. The Children's Mental Health programme reflects this approach, focusing on creating equitable, nurturing and preventative environments that support children's mental health.

**Children's Mental Health programme**

The Children's Mental Health (CMH) programme was launched in 2020 with the aim of improving children's mental health equity in Lambeth and Southwark. Through £15.9m of investment across 147 partnerships, the programme sought to create equitable, nurturing and preventative environments for children and families most affected by poverty and racism.

The programme impact goal is: '*Children most affected by poverty and racism have better access to safe, nurturing environments'.*

Over six years, the programme worked across early years, schools, family support, community organisations, research, policy and systems-change initiatives. Throughout this period, the programme's understanding of children's mental health evolved significantly. While much of the children's mental health sector has traditionally focused on individual children and clinical responses, CMH increasingly focused on the social, economic and environmental conditions that shape children's mental health, with a particular emphasis on prevention and addressing structural inequalities.

The programme is now entering a planned wind-down phase. Rather than representing an endpoint, this period is intended as an opportunity to consolidate learning, strengthen partner legacy, influence future policy and practice, and capture insight that may benefit both Impact on Urban Health and the wider children's mental health sector. The programme's closure also creates an opportunity to learn about how complex, place-based programmes can be ended responsibly and effectively while sustaining relationships, learning and impact.

As the first major Impact on Urban Health programme to formally close, CMH provides a unique opportunity to generate organisational learning about programme lifecycle

management, adaptation, legacy-building and programme closure. This learning will help inform future approaches across the organisation.

## 2.2 Project aims

The learning partnership has three broad aims:

1. **Understanding children's mental health -** To understand what the programme has learned about improving children's mental health through preventing poor mental health from developing and creating supportive environments for children and families.
2. **Understanding programme contribution -** To understand the programme's contribution to change in children's mental health systems, environments, partnerships and practice.
3. **Organisational learning -** To identify lessons for Impact on Urban Health regarding programme design, adaptation, evidence use and lifecycle management.

## 2.3 Intended use of the learning

The learning generated through this work will be used to:

- Inform future programme design, delivery and lifecycle management across Impact on Urban Health.
- Strengthen organisational approaches to learning, adaptation and evidence use.
- Support reflection on how funders can contribute to complex social and systems change.
- Influence future policy, practice and funding approaches within children's mental health.
- Communicate the programme's learning, achievements and legacy to partners, funders and policymakers.
- Inform communications, influencing and legacy activities during the final phase of the programme wind-down.

**Success of this work**

A successful partnership will enable Impact on Urban Health to:

- Confidently articulate what it has learned about supporting children's mental health through prevention and supportive environments.
- Identify practical lessons for future programmes and investments.
- Recognise and celebrate the contributions of partners.

- Produce credible, accessible and actionable learning for both internal and external audiences.

## 2.4 Project timeframe

| Deliverable | Timing |
|---|---|
| **Tender awarded** | November 2026 |
| **Deliverable 1:** Inception phase | November/December 2026 |
| **Deliverable 2:** Programme journey and Learning review | February 2027 |
| **Deliverable 3:** Partner perspectives and Legacy Learning report | April 2027 |
| **Deliverable 4:** Final Internal Learning report | June 2027 |

# 3.0 WHAT WE WANT TO LEARN AND WHY

## 3.1 Learning opportunities

The CMH programme represents six years of investment, experimentation, adaptation and learning.

One of the programme's most significant contributions is the evolution of its own understanding of children's mental health. We are interested not only in understanding what happened, but also why programme thinking changed and what implications this has for future policy, practice and investment.

The Learning Partner will be expected to work closely with the CMH team and engage colleagues from across Impact on Urban Health to explore what the programme's journey can teach us about evidence use, adaptation, decision-making, partnership working and programme lifecycle management.

The work will build on a substantial body of existing evidence, learning and reflection generated over the lifetime of the programme. This is expected to include programme evaluations, partner learning reports, research outputs, commissioned studies, participation and community engagement outputs, internal reflection documents, case studies and programme documentation. We expect there to be up to 100 documents of varying length, although will confirm this number on inception.

The Learning Partner will be expected to make use of existing evidence wherever possible, identify gaps and limitations in the available evidence base, and collect additional information where it adds value to answering the learning questions.

Across all learning questions, we are interested in understanding how learning, evidence and outcomes relate to children and families most affected by poverty and racism, including where gaps exist in the available evidence.

## 3.2 Learning Questions

| Learning Area | Learning Question | How we will use this information |
|---|---|---|
| **Programme impact** | **1.** How did the programme's understanding of the factors that support children's mental health evolve over time, and what implications does this have for future policy, practice and investment? | To inform future strategy, policy, funding and practice within and beyond Impact on Urban Health. |

| Learning Area | Learning Question | How we will use this information |
|---|---|---|
| | **2.** What contribution did the programme make to improving the conditions that support children's mental health, and what evidence do we have for this? | To help articulate programme achievements while also identifying evidence gaps and limitations. |
| | **3.** What contribution did the programme make to improve the policies and practices that support children's mental health? | To understand influence on practice, partnerships, networks, policy and wider systems. |
| **Delivery and methodology** | **4.** How and why did the programme evolve over time, and what can Impact on Urban Health learn from this journey? | To support organisational learning regarding new programme development, participation, approaches to evaluation, evidence use and strategic adaptation. |

In addition to the learning questions, we are interested in what Impact on Urban Health can learn about ending programmes well and sustaining relationships, learning and legacy, to inform future programme lifecycle approaches across Impact on Urban Health.

The successful candidate will be supporting us to explore this by sharing any relevant feedback and reflections as you deliver this work.

# 4.0 INTENDED PARTICIPANTS AND AUDIENCES

## 4.1 Participants

We anticipate involvement from:

- Current CMH team members
- Former CMH staff
- Impact on Urban Health leadership
- Current funded partners
- Former funded partners
- Community organisations
- Strategic external stakeholders
- Local and national children's mental health actors
- Children, families and communities where appropriate and proportionate.

For former Impact on Urban Health Children's Mental Health colleagues, children and families participating in this work will be remunerated for their time and contribution. Rates will be confirmed with the successful applicant during project inception. Applicants should include an allowance for participants remuneration within their proposed budget.

## 4.2 Audiences

The primary external audience for this work is funders and investors interested in children's mental health, prevention and systems change. We hope the learning generated through this work will influence future funding decisions, policy development and programme design.

| External | Internal |
|---|---|
| Primary audience:<br>• Funders working in children's mental health<br>• Funders interested in prevention and systems change<br>• Local policymakers, commissioners and system leaders in Lambeth and Southwark<br><br>Secondary audiences:<br>• Policy actors.<br>• Children Mental Health practitioners<br>• Children's mental health organisations | • CMH programme team<br>• Data, Evaluation and Learning team<br>• Impact on Urban Health Leadership Team<br>• Wider Impact on Urban Health colleagues<br>• Teams developing future lifecycle methodologies. |

# 5.0 TASKS AND DELIVERABLES

## 5.1 Tasks

We expect the Learning Partner to:

- Review programme documentation and historical learning materials.
- Develop a learning framework and approach.
- Conduct interviews and sense-making activities with internal stakeholders.
- Engage current and former funded partners.
- Capture learning about programme closure in real time.
- Develop case studies illustrating programme evolution and influence.
- Support reflection and sense-making with Impact on Urban Health staff and partners.
- Produce learning outputs tailored to internal and external audiences.

Impact on Urban Health is in the process of undertaking a wider synthesis of its evidence base. While this wider synthesis will be exploring broader topics and themes, the successful applicant would be expected to work alongside this activity, ensuring that their work does not duplicate existing work being undertaken.

**What Impact on Urban Health will contribute**

This partnership is intended to be collaborative. Impact on Urban Health will provide access to relevant programme documentation, learning outputs, evaluation reports, research, internal reflections and other materials required to support the work.

We will work with the Learning Partner to refine the scope and approach during the inception phase and support access to key stakeholders.

The Children's Mental Health team and Data, Evaluation and Learning team will facilitate introductions to current and former partners, colleagues and other stakeholders, and will support the coordination of interviews, workshops and sense-making activities where appropriate. We will also provide regular opportunities to test emerging findings, discuss implications and ensure learning is relevant to both the programme and the wider organisation.

## 5.2 Deliverables

We are interested in outputs that support learning, reflection and influence throughout the partnership, rather than solely at its conclusion. We welcome proposals that include innovative and accessible approaches to sense-making, engagement and dissemination alongside more traditional written outputs.

| | Purpose | Content |
|---|---|---|
| **Deliverable 1:** Inception Phase | To agree the scope, approach, priorities and methodology for the learning partnership | • Refined learning framework<br>• Methodology<br>• Stakeholder engagement plan |
| **Deliverable 2:** Programme Journey and Learning Review | To provide an early synthesis of how CMH evolved over its lifetime and identify emerging themes. | • Review of programme history and development<br>• Analysis of key strategic pivots and decisions<br>• Initial reflections on the programme's changing understanding of children's mental health<br>• Emerging learning regarding prevention and systems change |
| **Deliverable 3:** Partner Perspectives and Legacy Learning Report | To understand how partners experienced the programme and identify factors that may support or hinder legacy. | • Interviews and engagement with current and former partners<br>• Analysis of partner journeys and experiences<br>• Learning about programme closure and transition<br>• Preliminary case studies<br>• Legacy opportunities and risks |
| **Deliverable 4:** Final Internal Learning Report | To capture the full learning from six years of the CMH programme and inform future Impact on Urban Health programmes. | • Findings against all learning questions<br>• Lessons for programme design and adaptation<br>• Learning about evidence use and participation<br>• Learning about lifecycle methodology and programme closure<br>• Recommendations for future programmes<br>• Organisational learning priorities<br>• Provide support to Comms partner, and work with Impact on Urban Health Policy Influencing and Comms team to provide key message for external communications plan |

## 5.3 Methodology

We are not seeking a purely metrics-driven evaluation and recognise that evidence quality and availability vary across the programme. We therefore welcome a range of methodological approaches that are appropriate to the learning questions and available evidence.

We anticipate that strong proposals are likely to draw on approaches such as qualitative and participatory methods, case study approaches, and organisational learning and reflection. However, applicants are encouraged to propose the combination of methods they believe will be most effective in addressing the learning questions and supporting the aims of the project.

Applicants should be realistic about what can and cannot be concluded from the available evidence. We are particularly interested in approaches that explore contribution, influence, learning and change over time, rather than relying solely on attribution-based evaluation methods. Proposals should also demonstrate how findings will be tested, refined and sense-checked with stakeholders throughout the project.

## 5.4 Quality assurance

Applicants should outline the quality assurance processes they will apply throughout the project to ensure the rigour, credibility and accessibility of the work. We are interested to hear how quality will be maintained throughout research design, evidence synthesis, analysis, participation and engagement activities and in the development of written and digital outputs, including the use of any research tools (including AI) throughout the process.

## 5.5 Participation

Impact on Urban Health's participation strategy aims for the communities that we work with to help inform and shape the work that we do. As such we would like applications to outline how they will build in opportunities for participation from both the wider Impact on Urban Health team and our key external stakeholders including community partners.

## 5.6 Use of AI

AI is fundamentally changing the way we approach and deliver many aspects of monitoring, evaluation, research, and learning work. However, AI may expose methodological and ethical issues that can impact evidence and output quality. As such, while AI may be used to assist researchers, we do not recommend that any whole element of this work is delegated entirely

to AI systems. Human researchers must lead and maintain oversight of the work, any AI outputs must be robustly checked, and all use of AI for synthesis and analysis must be fully and transparently documented in any outputs.

Similarly, we do not recommend the use of AI to *fully* write reporting outputs due to hallucinations, inaccuracies, and inaccessible, artificial writing styles. Rather, we suggest that AI may be used to assist with readability reviews and drafting or exploratory work.

We are also concerned by the environmental impact of AI datacentres, from which there is evidence of an emerging pattern of environmental racism, disproportionately impacting on marginalised (specifically Black and Brown) communities. As such, any use of AI should be intentional, and add clear, tangible value, rather than be gratuitous.

**Based on this, we require all applications to disclose whether and how they plan to use AI in this work, and briefly how they would mitigate against the risks identified above, as part of their application.**

[For further information for use of AI in evaluation and synthesis see Practical-guide-to-using-AI-tools.pdf and OSF | RAISE 1 - recommendations v.3 OSF.pdf]

## 5.7 GDPR

Some of our reports contain personal and sensitive data. All applicants must be set up to be GDPR compliant, and effectively and competently handle personal, sensitive data. Data sharing agreements will be set up at the inception of the project.

## 5.8 Safeguarding

The Children's Mental Health programme has worked with organisations supporting children, young people, families and communities, including groups who may be experiencing vulnerability as a result of poverty, racism, exclusion or other forms of disadvantage. The Learning Partner may therefore engage directly with organisations, practitioners, community partners and, in some circumstances, people with lived experience as part of this work.

Applicants should set out how safeguarding considerations will be embedded throughout the design and delivery of their proposed approach, including how they would ensure participant wellbeing and manage any safeguarding concerns that may arise during engagement activities.

While we anticipate that the majority of engagement will be with staff, partners and stakeholders rather than directly with children and young people, applicants should explain

how they would meet safeguarding requirements should their proposed methodology involve direct engagement with children, young people, families or community members.

The successful applicant will be expected to comply with Impact on Urban Health's safeguarding requirements and may be asked to provide relevant safeguarding policies and procedures during project inception.

### 5.9 Budget

The budget should include your/each team member's daily rate of pay and the number of days you/each team member will dedicate to the work, plus any expenses you/your team will incur in the work.

# 6.0 OUR VALUES AND WAYS OF WORKING

## 6.1 Our values

Impact on Urban Health is part of Guy's & St Thomas' Foundation, and we share the same values. Our work and our approach to everything we do is anchored in our values, and we support each other to live them. We are looking for partners who share these values and have them underpin the work they deliver and expect applicants to explain how these values will shape their approach to this project.

| Value | What it means for this project |
|---|---|
| **Enterprising** | A willingness to explore new ideas and approaches to generating, sharing and applying learning. |
| **Collaborative** | Genuine engagement with colleagues, partners and stakeholders throughout the learning process. |
| **Delivery-minded** | A focus on producing learning that is useful, practical and capable of informing action. |
| **Inclusive** | Recognition that valuable knowledge comes from multiple sources, including lived experience, community insight, practitioner expertise and research. |

## 6.2 Knowledge and Power

The production of evidence, and the translation of that into learning and knowledge outputs, is not neutral. What is accepted as credible evidence is shaped by power dynamics, which can be both material (such as who has funding and resources to produce evidence outputs) and social (such as whose knowledge is seen to "count", and who has influence over policy and discourse). As such, the experience and expertise of specific groups, particularly those experiencing racism, poverty, and other forms of marginalisation, are often underrepresented or overlooked in evidence bases. As a funder embedded within these power structures, we are aware that our approach to knowledge production, learning and evidence can either reproduce or challenge this.

As such, we are seeking an approach to this work that reflects our commitment to using power intentionally and equitably. This includes recognising lived experience and community insight as important forms of knowledge alongside more traditional evidence sources. We are interested in methodologies that are intentionally reflexive on power, and that pay attention to

gaps and inequities within our evidence base, particularly where groups and communities have been historically (and continue to be) excluded from knowledge production.

Applications should also consider how this work can help share and build power. We particularly welcome applications from organisations with participation or community research expertise, with this built into their proposals. Sharing and building power can also involve transparent and clear analysis and sense-making, and designing and disseminating outputs that are relevant, accessible, and practical for our stakeholders.

### 6.3 Working together

This work is intended to be collaborative and developmental, with the Learning Partner working closely with the CMH programme team and the Data, Evaluation and Learning (DEL) team throughout the contract period.

We expect the Learning Partner to work in partnership with us to refine the approach, test emerging findings, and support reflection and sense-making as learning develops. Regular project meetings will be held throughout the work, with more frequent engagement during inception and key phases of fieldwork and analysis.

A small Project Steering Group, comprising representatives from the CMH team, DEL team and other relevant colleagues from across Impact on Urban Health, will provide oversight and support. The Steering Group will help shape the direction of the work, sense-check emerging findings, and provide feedback on draft outputs.

Given the importance of organisational learning to this work, we expect the Learning Partner to engage colleagues from across Impact on Urban Health as appropriate. This may include participation in workshops, interviews, learning sessions and feedback processes that help test findings and identify implications beyond the CMH programme.

The Learning Partner will also be expected to engage a range of external stakeholders to ensure their experiences and perspectives inform the learning process. We anticipate engagement with approximately 30 current and former programme partners, as well as former and current Children's Mental Health colleagues.

We anticipate that most meetings will take place online; however, some in-person engagement will be required. Applicants should set out their proposed approach to stakeholder engagement and include any associated travel and facilitation costs within their budget.

# 7.0 WHO WE ARE LOOKING FOR

We are seeking a Learning Partner with experience of organisational learning, evaluation and complex systems change. The successful applicant will help us explore, synthesise and communicate learning from the Children's Mental Health programme, while supporting reflection and sense-making across Impact on Urban Health and our partner network.

We welcome applications from individuals and organisations.

## 7.1 Assessment Process

Applications will be assessed against the criteria below. Each criterion will be scored using the following scale:

| Score | Description |
|---|---|
| **0** | Does not meet criteria |
| **1** | Partially meets criteria |
| **2** | Meets criteria |
| **3** | Exceeds criteria |

## 7.2 Award criteria

| Award criteria | Award weighting |
|---|---|
| **Approach and Methodology** | **30%** |
| A methodology appropriate to the available evidence and learning objectives. | |
| An approach that balances reflection, sense-making, evidence and stakeholder engagement. | |
| A clear understanding of the difference between assessing contribution and claiming attribution. | |
| A clear approach to generating learning across the programme lifecycle. | |
| | |
| **Skills and Experience** | **30%** |
| Experience of working with complex systems and evolving programmes. | |
| Systems change, place-based and/or complex programmes. | |
| Children's mental health, health equity, prevention and/or wider social determinants of health. | |
| Working with funders, philanthropy or grant-funded programmes. | |
| Qualitative research, facilitation and stakeholder engagement. | |
| Producing high-quality learning products for a range of audiences. | |
| | |
| **Ethics, Equity and Participation** | **15%** |
| A strong understanding of equity and inclusion. | |

| Award criteria | Award weighting |
|---|---|
| Experience of working with multiple forms of knowledge, including lived experience and community insight. | |
| An approach that considers power dynamics in evidence generation and learning. | |
| A clear strategy for engaging partners and stakeholders in meaningful ways throughout the work. | |
| Appropriate safeguarding, ethical and data protection practices. | |
| | |
| **Working with us and Project Management** | **15%** |
| A collaborative approach to partnership working. | |
| Strong project management and communication arrangements. | |
| Appropriate quality assurance processes. | |
| An approach to managing risks and adapting to emerging learning. | |
| Experience of working with multiple stakeholders and balancing competing perspectives. | |
| | |
| **Costing and Value for money** | **10%** |
| A clear and realistic budget. | |
| Details of team member day rates and anticipated days. | |
| A rationale for how resources have been allocated. | |
| Evidence that the proposed approach represents good value for money and is proportionate to the scope of the work. | |

# 8.0 HOW TO APPLY

To apply, please submit:

- A proposal outlining your understanding of the brief and how you would approach and deliver the work (maximum 3 pages).
- Details of how you meet the required criteria, including relevant skills, experience and examples of comparable work (maximum 2 pages).
- Two examples of previous work that demonstrate your experience in learning partnerships, evaluation, organisational learning, systems change and/or related fields (these can be shared as links or attachments)
- Short CVs for the key personnel who would be involved in delivering this work.
- A budget outlining team member day rates, anticipated days required, any expenses, and a brief rationale for how resources have been allocated.
- Details of any actual or potential conflicts of interest.
- A brief statement outlining any proposed use of artificial intelligence (AI) in undertaking this work and how associated risks will be managed.

Note there are no specific formatting requirements for the above, but please ensure that all submissions are clear and well presented.

**Please send submissions to leila.lawal@urbanhealth.org.uk by Midday, Monday 19th October 2026.** We will not accept submissions received after this deadline.

## 8.1 Shortlisting criteria

Applications will be assessed against the following criteria:

- Approach and Methodology: 30%
- Skills and Experience: 30%
- Ethics, Equity and Participation: 15%
- Working with us and Project Management: 15%
- Cost and Value for money: 10%

Following shortlisting, selected applicants will be invited to interview. Interviews are expected to take place in late **October 2026**. Further details regarding the interview format will be shared with shortlisted applicants.

## 8.2 Clarification questions

Any clarification questions should be submitted by email to leila.lawal@urbanhealth.org.uk by **Monday 12th October 2026**