

Expression of interest (EOI) for services to Campbell Page

Please return completed forms and direct any questions to: <u>partners@campbellpage.co.uk</u>

| Please state tender | |
|--------------------------------|--|
| opportunity (where applicable) | |

Section 1: Organisation information

| 1.1 Please give details about y | your organisation |
|--|-------------------|
| Organisation name | |
| Registered address | |
| Post code | |
| Company registration and / or charity number | |
| Contact name | |
| Contact number | |
| Contact email address | |
| Organisation website | |
| Do you know any Campbell Page employees / shareholders? If yes, please give details | |

| 1.2 Please give details of your | 1.2 Please give details of your parent organisation (if applicable) | | |
|---|--|--|--|
| Parent organisation name | | | |
| Registered address | | | |
| Post code | | | |
| Company registration and / or charity number | | | |
| Please confirm your relationship with immediate controlling parent organisation | Wholly owned subsidiary More than half owned Other relationship (please include below) | | |

Expression of interest (EOI) for services to Campbell Page

| Please specify your relationship if you selected | |
|--|--|
| 'other' above | |

| 1.3 Organisation overview | | |
|---------------------------|------------|--|
| Type of organisation | | |
| Private | Yes 🗌 No 🗌 | |
| Third sector | Yes 🗌 No 🗌 | |
| Public sector | Yes 🗌 No 🗌 | |
| Social enterprise | Yes 🗌 No 🗌 | |
| Consortium / SPV | Yes 🗌 No 🗌 | |
| | | |

Do you already work with us? If yes, please give details below.

| Yes | No | |
|-----|----|--|

| Have you | worked wi | th us before? If | yes, please give | the service / contract and date | es |
|----------|-----------|------------------|------------------|---------------------------------|----|
| below. | Yes 🗌 N | lo 🗌 | | | |

1.4 Partner classification

We categorise our partners into the three tiers below:

Tier 2 - Partners classed as end to end subcontractors delivering a full service from referral to outcome. All tier two partners must meet the following criteria;

- 1. A robust financial position (both in the beginning, and throughout contract delivery)
- 2. ISO27001 (work to information security quality standards)
- 3. Proven track record of delivering relevant services with a supported supply chain

Tier 3 - Partners classed as key national or regional specialist service providers who undertake specific customer intervention(s) across all or part of the delivery model in example areas including:

- health;
- employment;
- skills;
- attitude;
- behaviour; and
- goals, motivation and lifestyle including accommodation, mental health, finance and debt, drugs and alcohol, families and relationships.

Expression of interest (EOI) for services to Campbell Page

Tier 4 – Partners who provide services to support contracts on a spot purchase basis

| 1.5 Which type of provider are you? | |
|--|--|
| Tier 2 End to end provider who meets the three key criteria | |
| (Fill in sections 2 and 3) | |
| Tier 3 Special intervention(s) services (Fill in section 3) | |
| | |
| Tier 4 Provision / training services (Fill in section 3) | |
| | |

Which area(s) does your organisation deliver in?

Justice (Criminal Justice, MoD, Immigration and Borders, Policing and Crime Prevention)
 Skills

Welfare to Work

Young People services

Other (please specify)

Expression of interest (EOI) for services to Campbell Page

Section 2: Tier 2 information

(Please complete this section if you have indicated you are a <u>Tier 2</u> provider.)

2.1 Do you have ISO27001 accreditation (Information security quality standard) or any security clearance for handling government secure data? Please provide details below;

2.2 Please give details of your recent contract performance delivery by completing annex 1.

Expression of interest (EOI) for services to Campbell Page

Section 3: Customer groups

| 3.1 Please indicate the customer groups your services | are specif | ically designed to |) |
|---|------------|--------------------|---|
| meet; | | | |
| BME groups | Yes | No 🗌 | |
| Carers | Yes | No 🗌 | |
| Dual diagnosis offenders | Yes [| No 🗌 | |
| ESA Ex-IB | Yes | No 🗌 | |
| ESA IB / IS | Yes [| No 🗌 | |
| ESA Mandatory | Yes |] No 🗌 | |
| ESA Voluntary | Yes | No 🗌 | |
| Ex – HMRF | Yes | No 🗌 | |
| Ex-offenders | Yes | No 🗌 | |
| Graduates | Yes | No 🗌 | |
| Homeless people | Yes | No 🗌 | |
| JSA 18 to 24 | Yes | No 🗌 | |
| JSA 25+ | Yes | No 🗌 | |
| JSA Early Entrants | Yes | No 🗌 | |
| JSA Ex-IB | Yes | No 🗌 | |
| Learners completing apprenticeships | Yes | No 🗌 | |
| Learners completing Level 2 qualifications | Yes | No 🗌 | |
| Learners completing Level 3 qualifications | Yes | No | |
| Learners with basic skills needs | Yes | No | |
| Learners with ESOL (English for speakers of other | | | |
| languages) needs | Yes | No 🗌 | |
| Lone parents | Yes | No 🗌 | |
| Offenders completing Unpaid Work | Yes | No 🗌 | |
| Offenders serving life sentences | Yes | No 🗌 | |
| Offenders serving custodial sentences under 12 months | Yes | No | |
| Offenders detained under the Terrorism Act (TACT) | Yes | No 🗌 | |
| Over 25s | Yes | No 🗌 | |
| Over 50s | Yes | No 🗌 | |
| People who are drug or alcohol misusers | Yes | No 🗌 | |
| People who are hearing impaired | Yes | No 🗌 | |
| People who are visually impaired | Yes | No 🗌 | |
| People with learning difficulties | Yes | No 🗌 | |
| People with mental health needs | Yes | No | |
| People with specialist disabilities (please specify) | | | |
| Mental and Behavioural Disorders | Yes 🗌 | No 🗌 | |
| Musculoskeletal | | | |

Expression of interest (EOI) for services to Campbell Page

| 3.1 Please indicate the customer groups your services a | are specifically designed to |
|---|------------------------------|
| meet; | |
| Cardiovascular | |
| Professionals / executives | Yes 🗌 No 🗌 |
| Refugees / asylum seekers | Yes 🗌 No 🗌 |
| Sex Offenders | Yes 🗌 No 🗌 |
| Whole Families | Yes 🗌 No 🗌 |
| Woman offenders | Yes 🗌 No 🗌 |
| Woman offenders involved in the sex industry | Yes 🗌 No 🗌 |
| Young people (under 14 years old) | Yes 🗌 No 🗌 |
| Young people (14 to 16 year olds) | Yes 🗌 No 🗌 |
| Young people (16 to 18 year olds) | Yes 🗌 No 🗌 |
| Young people (NEET) | Yes 🗌 No 🗌 |
| Other – please specify | Yes 🗌 No 🗌 |

Section 4: Delivery locations

| 4.1 Area(s) of interest | |
|--|--|
| Please indicate the areas where you can deliver your services: | |
| Pan-mainland UK | |
| Scotland | |
| Wales | |
| North East of England | |
| North West of England | |
| Yorkshire and The Humber | |
| East Midlands | |
| West Midlands | |
| London | |
| South East of England | |
| South West of England | |

| 4.2 Please give details of your current delivery infrastructure: | | |
|--|--|--|
| Geographical area Delivery locations | | |
| | | |

Expression of interest (EOI) for services to Campbell Page

Section 5: Services

| 5.1 Please indicate the services you have experience of, or are accredited to deliver: | | | | | | | | | |
|--|------------|--|--|--|--|--|--|--|--|
| Skills | | | | | | | | | |
| Skills Assessments | Yes No | | | | | | | | |
| Basic skills English | Yes 🗌 No 🗌 | | | | | | | | |
| Basic skills Maths | Yes No | | | | | | | | |
| Basic skills ICT | Yes No | | | | | | | | |
| ESOL | Yes 🗌 No 🗌 | | | | | | | | |
| Foundation Learning | Yes 🗌 No 🗌 | | | | | | | | |
| Vocational training - please list the sectors you cover, for example retail | Yes 🗌 No 🗌 | | | | | | | | |
| Industry Certified Training such as CSCS, - please list all the courses you provide and the awarding bodies | Yes 🗌 No 🗌 | | | | | | | | |
| Other –please provide further details | Yes 🗌 No 🗌 | | | | | | | | |
| Employability | | | | | | | | | |
| Apprenticeships | Yes No | | | | | | | | |
| Careers Advice/IAG | Yes 🗌 No 🗌 | | | | | | | | |
| CV writing, development and covering letters | Yes 🗌 No 🗌 | | | | | | | | |
| Work experience placements | Yes 🗌 No 🗌 | | | | | | | | |
| Volunteer placements | Yes 🗌 No 🗌 | | | | | | | | |
| Job search / interview techniques | Yes 🗌 No 🗌 | | | | | | | | |
| Self-employment / enterprise support | Yes 🗌 No 🗌 | | | | | | | | |
| In-work support / mentoring | Yes 🗌 No 🗌 | | | | | | | | |
| Links to employer vacancies | Yes 🗌 No 🗌 | | | | | | | | |
| Attitude and behaviour | | | | | | | | | |
| Motivation/Work placements | Yes No | | | | | | | | |
| Motivation / confidence building courses | Yes 🗌 No 🗌 | | | | | | | | |
| Offending behaviour programmes | Yes 🗌 No 🗌 | | | | | | | | |

Expression of interest (EOI) for services to Campbell Page

| Attitudinal Skills | Yes | No | |
|---|-----|-------|----------------------|
| Lifestyle | 100 | | |
| Debt advice / management | Yes | No | \Box |
| ID & Bank Accounts | Yes | | |
| Money Management | Yes | | |
| Housing advice / management | Yes | | |
| Access to housing | Yes | | |
| Benefit advice / management | Yes | No No | |
| Gambling advice / support | Yes | | |
| Family advice / support | Yes | | |
| Relationship advice / support | Yes | | |
| Carer advice / support | Yes | | |
| Childcare advice / support | Yes | | |
| Reducing re-offending support | Yes | | |
| Offending disclosure advice | Yes | | |
| Health | 100 | | |
| Condition management | Yes | No | |
| Support for people with learning difficulties | Yes | | |
| Support for people with mental health needs | Yes | | |
| Support for people with physical disabilities | Yes | | |
| Alcohol misuse advice / support | Yes | | |
| Drug and substance misuse advice / support | Yes | | |
| Dual diagnosis | Yes | | |
| Sexual health advice / support | Yes | | |
| Leisure Activities | 100 | | |
| Sports | Yes | No | |
| Drama | Yes | | \square |
| Music | Yes | | |
| Dance | Yes | | \square |
| Media | Yes | | \square |
| Graphic/Visual Arts | Yes | | \square |
| Additional Areas of Need | | | |
| Gangs | Yes | No | |
| Veterans | Yes | | |
| Foreign Nationals | Yes | | $\overline{\square}$ |
| Faith | Yes | | $\overline{\square}$ |
| Domestic Violence | Yes | | $\overline{\square}$ |
| Women specific services – Life skills | Yes | | |
| Other – please specify | Yes | | |
| | | | |



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Section 6: Additional Information

6.1 Please provide any additional information to support your Eol

All the information you give us is confidential.

Thank you for your interest in working with us. We will let you know about new partnership opportunities in the future.

Please note – it is up to you to update us if the information you have given changes, or if you don't want us to keep your information on file anymore.

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Annex 1: Contract delivery performance

| Please complete the following table with your performance on past or current contracted services within the last three years | | | | | | | | | | |
|--|--------|-----------------------------|------------------------------------|---------------------------------------|--|----------------------|----------------------|-----------------------|--|--|
| Funding body / prime contractor | Region | Customer target group | Contract start and end dates | Customer volumes (per annum) | Targets (For example job entry rate, positive outcomes, qualifications achieved) | Outcomes achieved | Sustained targets | Sustained achieved | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
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