



3 Specification – Lot One

Contract Reference

T00316HR

Contract Title

Occupational Health Service

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1 Minimum and Mandatory Requirements

This Specification sets out the Authority's minimum requirements in relation to the provision of Occupational Health Services and the Employee Assistance Programme. It is the Authority's expectation that all Applicants meet these minimum requirements and will demonstrate this in their responses to the Method Statements and Technical Questions within 4 Stage Two Tender Submission.

The Authority has set out a number of Mandatory Requirements within this Specification, these are identified with the inclusion of the wording *(Mandatory Requirement)* against whole sections or individual requirements. Applicants will be required to confirm their compliance with these Mandatory Requirements within their Stage Two Tender Submission.

2 Overall Scope and Nature of the Requirements

This service is required for the Authority's directly employed staff and also customers of the Authority such as Schools, Academies and other third party organisations who purchase Human Resources (HR) services from the Authority through a Service Level Agreement.

3 Generic Requirements

3.1 *(Mandatory Requirement)* Safer Recruitment

3.1.1 To ensure the Service creates a safer recruitment culture for clients and staff, the following are mandatory requirements:

- at least one member of each of your organisation's Counsellors must have undertaken safer recruitment training;
- the Provider must have effective procedures in place, that are regularly updated and communicated to staff;
- the Provider must set a code for acceptable standards of behaviour for all staff and ensure this is effectively communicated to staff;
- the Provider must take seriously all concerns that are raised;
- the Provider must, on an ongoing basis, increase awareness and commitment to safeguarding across its organisation.
- the Provider must ensure that all staff, where applicable have a full DBS check.

3.2 Data Protection

3.2.1 *(Mandatory Requirement)* Data Protection Act 1998 - The Provider must comply in all respects with the provisions of the Data Protection Act 1998 and will indemnify the Authority against all actions, costs, expenses, claims, proceedings and demands which may be made or brought against the Authority for breach of statutory duty under the Act which arises from the use, disclosure or transfer of personal data by the Contractor, his staff, agents or work people.

3.2.2 *(Mandatory Requirement)* The product supplied by the Provider must comply with

the Medical Records Act.

- 3.2.3 The Authority expects that you have a formal information security policy applicable to your processing, storage or handling of Authority data. You must on request supply the Authority with evidence of this policy and describe precisely how it applies to Authority data
- 3.2.4 Access to Authority data must be strictly controlled and only personnel who need access to the information should have access to the information. No person who is not working directly on the Authority's information should have access to it, either in paper or electronic form.
- 3.2.5 All electronic data (email and media) must be encrypted in transit (this must be at least 256bit AES encryption or similar). The method of transmitting and receiving Authority data must be specifically agreed with the Authority in advance.
- 3.2.6 All paper documentation containing personal details such as names and addresses must be subject to clear desk policy, locked away when not attended and always sent via recorded or registered post.
- 3.2.7 Specific handling arrangements for paper documents must be agreed with the Authority in advance.
- 3.2.8 On completion of the assignment all documentation and physical media must be returned to the Authority by secure and agreed method.
- 3.2.9 On completion of the assignment all data pertaining to the project must be permanently deleted from any computer used for working on the project.
- 3.2.10 The Authority expects that it is explicitly informed of all individuals who are authorised to access Authority data. The Authority expects full background checks (e.g. DBS) on all staff with access to Authority data. The Authority prohibits the sharing or distribution of Authority data to third party organisations unless specifically authorised.
- 3.2.11 Access to Authority data must be strictly controlled. All servers holding Authority data must be held in secure rooms with strictly controlled access. Access to physical media and documentation must also be strictly controlled. The Authority's physical data and documentation must always be held in locked storage when not attended.
- 3.2.12 The Authority expects that good operations & network management controls are established. These controls must cover logical access; vulnerability analysis; firewall; lifestyle devices controls; and remote working.
- 3.2.13 The Authority expects that a hierarchy of logical access control mechanisms are in place. These controls cover access to operations; systems; applications containing Authority data. User Passwords in relation to Authority data, must be at least 6 characters in length; alpha – numeric; changed every three months; and unique to an individual.
- 3.2.14 Authority data must never be taken off site without the Authority's specific authorisation.

- 3.2.15 The Authority must be informed straight away of any security incidents relating to processing, storage or handling of Authority data. These include but are not limited to unauthorised access, denial of service, loss of information, data corruption.
- 3.2.16 Evidence of your organisations compliance with relevant standards; regulations; and legislation applicable to your handling and destruction of Authority data must be provided. These should include but not be limited to your Data Protection Act registration and any evidence of ISO 27001 compliance. Authority data must never be passed to or access by a third party without the Authority's specific authorisation.

3.3 Security Requirements and Client Confidentiality

- 3.3.1 All records will be collated and maintained in accordance with the provisions of the Data Protection Act, and the Human Rights Act. All necessary precautions will be taken to ensure complete protection of this data in accordance with these Acts.
- 3.3.2 All electronic data will be stored securely with appropriate security protocols. No confidential information will be sent via external e-mail or via the internet unless in a secure form. All confidential emails will be sent in encrypted format in line with the Council's email protocol using Egress.
- 3.3.3 Transfer of records to any new Service Provider, or the customer, must be done in accordance with the requirements of legislation and adherence to strict medical confidentiality.
- 3.3.4 Without prejudice to the acts mentioned above, the Contractor must ensure that the customer's authorised officer is informed without delay where the Contractor becomes aware that any employee:
- is considered likely to be of harm to him/herself or others;
 - is considered to be involved in criminal activity;
 - is considered to be in breach of the organisation's codes of conduct;
 - is considered to be in breach of health and safety legislation;
 - has given written permission to the Contractor for information to be passed to the organisation for consideration and/or further action;
 - authorises in writing the release of information to a third party.

4 Service Requirements

4.1 Core Requirements

- 4.1.1 The Authority requires occupational health services covering, but not limited to the following activities:
- health promotion activities and/or health checks i.e. able to respond to the Authority's request for basic health screening activities; cholesterol checks, blood pressure checks, taking part in well-being sessions/days when required etc and to be able to offer innovative options on health promotion activities;

- assessment of fitness for duty examinations provided by Occupational Health Nurse or Physician;
- personal attendance to provide occupational health input at key meetings / case conference reviews of long-term absentees;
- health surveillance such as school crossing patrol and power boat and Seafarer medicals, vaccinations;
- ill health retirement assessment and review appointments;
- management information;
- management of sickness referrals and return to work assessments;
- medical reports and written advice;
- pension review assessment (qualifying injuries, ill health retirements);
- physiotherapy /ergonomic assessments;
- pre-employment and point of entry health questionnaires, screening and medicals;
- progression of GP and specialist reports;
- representation on behalf of the Authority and associated organisations at Courts, Tribunals and Appeals.

4.1.2 The Authority is looking for Applicants to quote on a fully managed secure web-based solution, externally hosted, but accessible to Managers of the Authority. This system should include online pre employment processes, health surveillance systems and systems for creating, reviewing and updating management referrals and be both secure and user friendly. Training for referring managers should be included and at no additional cost.

4.1.3 The Authority currently has a limited on-site Occupational Health Service for all employees. A small consulting room with a waiting area is provided in the Council's Town Hall premises in Torquay. The room contains basic medical equipment, including an examination table and a personal computer. Relevant Human Resources procedures will be made available to the successful Provider.

4.2 **(Mandatory Requirement) Service Requirements**

The Service to be provided must cover the following:

4.2.1 An Occupational Health Physician who provides on-site consultations one full day (9.00 am – 5.00 pm) every 4 weeks. These consultations relate primarily to establishing fitness to work, and occasionally pre-employment medical examinations as well as assessment for Ill Health retirement.

4.2.2 An Occupational Health Nurse Advisor/Manager who provides on-site consultation one day a week every week (9.00am – 5.00pm) with the option of on-site consultation twice a month and the equivalent of 2 on site consultations as telephone appointments subject to the nature and numbers of referrals. These consultations relate primarily to establishing fitness to work and pre-employment medical examinations, work place assessments and can either be face to face or via the telephone subject to the suitability of such.

4.2.3 Off-site support for reviewing online pre-employment questionnaires and clinical

administrative support.

- 4.2.4 Feedback to be provided on the day, in the form of an online form, with the option of information via letter if required. If feedback on the day cannot be provided, the Authority would anticipate feedback within 2 working days.
- 4.2.5 The average annual absence rate for Authority employees is 8 to 10 days per year based on seasonal variation and business unit. The Authority is keen to reduce its absence rate and be viewed as a best practice employer. The Authority expects that the successful Occupational Health Provider will be key in working with the Authority's HR team in reducing all types of absence within the Authority and associated organisations by providing advice, guidance and innovative ideas to reduce absence which takes a more preventative approach and supports the Authority's Well-being at work strategy.
- 4.2.6 Complete and sign off annual medical checks, such as Powerboat Medicals, School Crossing Patrol medicals and Seafarer Medicals.
- 4.2.7 Suitable and effective communication and online systems which must include utilising the Human Resources Occupational Health generic email address.
- 4.2.8 A fully managed Occupational Health process using an on-line system, the Authority will not accept paper based quotes.
- 4.2.9 This service is required for the Authority's directly employed staff and also customers of the Authority such as Schools, Academies and other third party organisations who purchase HR services from the Authority through a Service Level Agreement.

4.3 (Mandatory Requirement) Core Functions of the Service

The process for referring employees to the Service, minimum quality standards, and reporting requirements are described for each core function. The Core Functions of the Service include:

4.3.1 Individual Assessment of fitness to work

The purpose of this Service is to:

Provide advice on fitness for work (in accordance with the Equality Act 2010) including recommendations on phased return to work and the need for alternative duties and Risk Management advice regarding the work environment, e.g. organisation structure, volume and methods of work. The examples of types of Risk Management advice could be extended to explicitly include level and manner of supervision.

Advice should be given on the following areas (this list is not exhaustive):

- fitness to return to work following illness, accident or injury;
- likelihood of return to work within three (3) months;
- fitness to return to work with temporary restrictions;
- fitness to return to work with adjustments;

- if redeployment should be considered and what type of role would be suitable;
- permanently unfit to work and ill health retirements in keeping with the Authority's procedures anticipate timescale for recovery – guidance on when a person will be fit to work;
- if an employee is likely to be covered by the Equalities Act and guidance on reasonable adjustments that are considered appropriate;
- provide advice for managers in managing sickness absence and reducing absence and assisting people back into and to remain in the workplace. This work will help the Authority to reduce the financial costs of work related ill health;
- advice on trends and patterns of absence and ideas and suggestions for reducing absence and to provide advice and guidance in more preventative ways of managing the health of employees that supports the Authority's Well-being at work strategy;
- the Provider will be expected to initiate and / or participate in a series of targeted health and wellbeing programmes, in order to address the generic health needs of customer employees. It is expected that these will include pro-active work in relation to reducing stress, poor mental wellbeing and musculoskeletal problems and in promoting healthy living and working for employees;
- the exact details of these programmes will be agreed between the Provider and the customer's and may be either local (informed by data from Management Information reporting) or based on regional or national campaigns;
- the Provider shall provide a facility for an emergency referral appointment, i.e. to see an employee within 2 working days, for example where attempting to determine if an injury is the result of an accident at work, or if there is a need to refer a distressed employee quickly.

4.3.2 The process for referring an employee for an assessment of fitness to work includes:

- the line manager, in consultation with the Human Resources business unit, will make the decision to refer an employee to the Occupational Health Service. The employee will be kept fully informed throughout the referral process;
- referrals may relate to long-term absence, recurrent short-term absences, or return to work following absence;
- referrals are made using an online referral form in conjunction with the Provider;
- the Provider provides advice on the issues outlined in the referral, with due consideration of the need to maintain confidentiality of medical information;
- If required, the Occupational Health Advisor or Physician will visit the employee's home for consultation or the workplace if required to assess the need for any adjustments that could facilitate a return to work;

- the Provider is aware of and complies with the relevant sections of the pension regulations that apply to local authority employees.

4.3.3 Quality standards relating to this Service include:

- appointments will be scheduled within two (2) days from receipt of referrals appropriate to individual circumstances;
- if further information is required regarding the referral, the Occupational Health Provider will make a request in reasonable time in advance of the scheduled appointment;
- where an appointment may not add value until after the GP report has been received, it would be reasonable and cost effective to delay the appointment particularly in the case of complex and sensitive cases, providing a reason is provided in advance of the appointment explaining the circumstances behind the decision;
- the Provider will provide an online report to the Human Resources Department within two working days of the appointment;
- if medical information is needed from the employee's general practitioner or medical specialist, the Provider will provide a preliminary report for the manager, via the Human Resources Department pending receipt of this information;
- where additional medical information is required, the Provider will send a request for a report within one working day of receiving the Applicant's consent for release of medical information, and in cases of non-receipt, chase this up 5 days from the date of sending. The Provider will keep the Human Resources Department informed throughout this process.

4.3.4 Reporting on quality standards will include quarterly reports on:

- the number of requests to assess fitness to work;
- reasons for referral, such as long-term absence, recurrent short-term absences, return to work following an absence, and cause of absence;
- number of referrals where medical information from the employee's general practitioner or medical specialist was requested;
- the outcome of referrals, such as phased return to work, limited period of alternative duties, recommendation for ill Health retirement;
- referrals managed by the Occupational Health Advisor;
- referrals managed by the Occupational Health Physician;
- average length of time between receipt of referral form and appointment and between the initial appointment and the outcome of the referral, such as less than 5 working days, 6 to 10 working days, more than eleven working days.

4.3.5 Pre-employment Health screening

The purpose of this Service is to:

- provide advice to managers on the fitness to work of prospective employees;

- assess individual fitness in relation to job requirements and Health and safety regulations, such as working with hazardous substances, use of VDU equipment etc;
- provide advice on any reasonable adjustments to the work environment, where this is necessary;
- advise managers on the needs of individuals with physical and mental impairments in keeping with the Equality Act 2010.

The process for completing pre-employment Health assessments would be as follows:

- provide an online completed pre-employment confidential questionnaire from successful candidates for all posts;
- in most cases, the information provided on the questionnaire will be sufficient to advise that the applicant is fit for the job. Where there is doubt regarding fitness, or where questionnaire responses indicate the need for further information, the Authority's Human Resources Department will be informed;
- the Occupational Health advisor will contact the prospective employee by telephone, wherever possible, and conduct a telephone interview;
- where this is not possible or appropriate, or if a telephone interview is not sufficient to resolve the query, the Authority's Human Resources Department will be notified. The applicant will be asked to attend for an appointment with the Occupational Health Nurse or Physician arranged by the Provider, with authorisation from the Authority's Contract Manager.

4.3.6 Quality standards relating to this Service include:

- the Authority's Human Resources Department will be advised on fitness to work, or the need for further information, within 5 working day of the Provider receiving completed pre-employment questionnaires and related job specifications;
- any appointments with the Occupational Health Advisor or Physician will be scheduled, within 4 working days of the decision to seek further information. The Human Resources Department will be notified of the outcomes of these within 2 working days of the appointment;
- should additional information be required from an Applicant's general practitioner or medical specialist, a written request for a report will be sent within one working day of receiving the Applicant's consent for release of medical information;
- advice will be provided to the Human Resources Department within 2 working days on receiving all required information.

4.3.7 Reporting on quality standards will include quarterly reports on the number of:

- pre-employment Health Questionnaires that were screened;
- applicants found to be unfit;
- pre-employment questionnaires where additional information was required from a general practitioner or medical specialist;
- appointments with the Occupational Health Advisor;

- appointments with the Occupational Health Physician;
- applicants where fitness to work was not advised within 7 working days of receipt of a pre-employment Health questionnaire;
- applicants employed without OH clearance.

4.3.8 Health Surveillance of Current Employees

The purpose of this Service, which is operated on a responsive basis, is to:

- identify work-related health problems early;
- reduce the incidence of work-related Health problems;
- control risks relating to workplace hazards;
- comply with statutory requirements, including Control of Substances Hazardous to Health (COSHH), Management of Health and Safety at Work Regulations and other Health and Safety legislation;
- work with the Authority's Health and Safety professionals in advising the Authority of any changes in Health and Safety or other legal requirements, advising how those should be met, and monitoring the effectiveness of any control measures that are introduced;
- set up surveillance programmes as requested;
- other screening as agreed with Provider during the course of the Contract.

4.3.9 The process for completing health surveillance of current employees includes:

- the Provider will carry out any appropriate health surveillance for employees working with hazardous substances, as identified by the Authority, during the pre-employment assessment;
- the Provider will provide annual medical examinations for school crossing patrol personnel, including vision and hearing tests;
- the Provider will screen medical questionnaires for night workers where requested;
- the Provider will be responsible for filing and storing records relating to Health screening.

4.3.10 Quality standards relating to this Service include:

- the Provider will notify Human Resources of any problems and related advice within five working days of surveillance;
- the Provider will maintain a data base of all surveillance programmes;
- the Provider will advise the Authority of the adequacy of its current surveillance programmes on an annual basis, or when legislative or other requirements change;
- reporting on quality standards will include quarterly reports on the numbers of employees surveyed and type of surveillance that has been provided.

4.4 **(Mandatory Requirement) Administrative Support to the Contract by the Provider**

The Authority's Human Resources Department will only provide a limited administrative

support function to the Occupational Health Service, other than as stated below: The Human Resource professional team will check the referral from the manager is of appropriate nature and that all relevant information has been supplied. Then:

- 4.4.1 The referral will then be submitted electronically to the provider.
- 4.4.2 The Provider will ensure an appointment is triaged to either the Occupational Health Nurse or Physician.
- 4.4.3 Invite the employee to a clinic appointment that has been booked and ensure attendance at Clinic.
- 4.4.4 Ensure that feedback following the clinic has been sent in to HR professional team contact, HR Support, Referring Manager and employee as appropriate.
- 4.4.5 The Provider will be responsible for the administration process relating to confidential medical information and records that are as a result of the clinic.
- 4.4.6 An appropriate and suitable resource must be allocated to the administration function by the Provider to this account to ensure efficient and effective Service delivery which must cover how leave of staff working on this account (pre agreed or not) is covered to ensure that there is no disruption in the level of Service to the Authority or its customers.

4.5 *(Mandatory Requirement)* Administrative Systems and Processes for the Contract by the Provider

- 4.5.1 The Provider must have suitable systems and processes in place for the following:
 - how a copy of the feedback following clinic (session) will be sent to the employee;
 - if a GP/Specialist medical report is requested, a method for processing the request within agreed time scale;
 - how the employee is given the option to view the request;
 - where a medical report is required how consent is obtained from the employee in order to contact their clinician, with an appropriate chase mechanism including frequency;
 - what action you take if you have no response from the employee;
 - where the medical report is not received within agreed time scale, the chase mechanism you have in place with the specialist including frequency;
 - what action you take if the employee has requested to view or discuss the feedback prior to submission to the Authority's Human Resources Team/Referring manager;
 - when reports are sent in for processing the method for ensuring reports are sent to Human Resources (HR) within agreed time scale;
 - methods for ensuring excellent communication with the, e.g. informing Human Resources (HR) of any 'Did Not Attend's' (DNA's), or delays to return of feedback. This information would need to be sent to the HR professional contact who signed off the referral and the Authority's Occupational Health account manager;

- an understanding of the local government ill health retirement (IHR) scheme and associated administration;
- how you will manage any complaints or appeals against IHR, from individuals. What mechanism you have in place for second opinions in such cases;
- your process for confidential medical records management and compliance with the Data Protection Act. How you meet the requirements of the Data Protection Act and the safe and confidential management of medical records - what systems you have in place;
- the process you would operate in the event of a data breach, e.g. an employee being sent someone else's personal feedback;
- your process for dealing with complaints concerning the Service received;
- your process for the authorisation of any additional charges, e.g. an understanding of a 2 tier authorisation process (i.e. both referring and contract manager before an additional cost proceeds).

4.6 (Mandatory Requirement) I.T. System Requirements

4.6.1 The Authority requires that the proposed I.T. system must be:

- an established software application (i.e. fully developed and in Live use (not Beta Testing) in at least two (2) sites in the European Union);
- fully developed;
- a Web Application;
- hosted;
- secure; and
- kept fully functional with all supported versions of third party components, systems etc, for example databases, operating systems including mobile devices, report tools, browsers or any other products.

4.6.2 The Applicant must:

- ensure that any enforced format or layout requirements imposed meet at least AA standards in terms of Accessibility;
- provide up-to-date documentation from the latest annual Penetration Testing undertaken by a reputable security vendor and provide evidence that any high priority items (or above) have been addressed. If this is not immediately available the Provider must guarantee that this will be in place by the time the Contract is signed.

4.6.3 The Solution must ensure that all data is encrypted in transit.

4.6.4 The Solution must provide for the automatic recovery of application files following a system break and the ability to automatically re-update files to the point of the break without the necessity for manual re-keying of data by the users. A way of achieving this could be to incorporate a mechanism for holding data messages (and making a speedy recovery) in the case of systems, connections or other components being out of action preventing normal data flow from one site to the other.

4.6.5 The Solution must be capable of supporting a secure connection mechanism from

the Authority's network to the hosted System.

4.7 I.T. Service Requirements

4.7.1 *(Mandatory Requirement)* The Applicant must have a Service Level Agreement (SLA) for supplying comprehensive technical support of the proposed I.T. System, which must be submitted as part of their bid. As a minimum the SLA needs to cover:

- method(s) of incident reporting;
- incident categorisation;
- response times;
- methods of support (including remote support);
- out-of-hours support;
- escalation processes;
- volume of use restrictions; and
- any occasions where additional costs would be applicable.

4.7.2 Training must be available to support the implementation of the system.

4.7.3 Details of all cases must be migrated from the Authority's current system in an accurate, correct and timely manner.

4.7.4 The Applicant must have general security procedures in place. These should include adherence to recognised standards, for example ISO/IEC 27001 (proof of compliance to be made available upon request). Also, audits by a reputable third party (details of audits to be made available upon request).

4.7.5 The Applicant must have robust Business Continuity procedures in place (i.e. how the Organisation plans to ensure its continued functioning and servicing for this Contract, after a major event, e.g. a flood or fire that results in the loss of computers, telephones, premises etc).

4.7.6 The Applicant must supply the Authority with all of its production data (in a format and time to be specified), with an appropriate database schema, free of charge at the end of the contract period.

4.7.7 *(Mandatory Requirement)* The Applicant must have a Service Level Agreement (SLA) for the hosting of the System, which must be submitted as part of their bid. As a minimum the SLA needs to cover:

- back-ups;
- system restore;
- system availability/reliability;
- loading of software patches and upgrades (including patches and upgrades to operating systems and third party components); and
- reaction to information on potential security breaches.

4.7.8 The Authority's data must not be transferred to a country or territory outside the

European Economic Area.

- 4.7.9 **(Mandatory Requirement)** The Solution must provide an availability level of 99.5%, measured over a calendar month: twenty four 24 hours a day/7 days a week.
- 4.7.10 **(Mandatory Requirement)** The Applicant must have technical and procedural security measures in place to prevent:
- unauthorised or unlawful processing of personal data;
 - accidental loss or destruction of or damage to personal data.
- 4.7.11 Access to the Authority's dataset must be limited to the Authority and approved personnel from the organisation.
- 4.7.12 The Applicant must outline an implementation plan which describes how the system will be installed and deployed and a description of the tasks involved and resources needed. The successful Applicant will need to develop their outline plan into a full implementation plan on contract award.

4.8 (Mandatory Requirement) Operational Requirements

4.8.1 Out of Hours Contact

- the Authority would expect Contracted days to run from 9.00am to 5.00pm. The Authority may require advice outside of our contracted hours by telephone;
- the Provider would be expected to assess eligibility of ill health retirement claims and complete the necessary documentation for submission.

4.8.2 Time Allocation for Appointments

- the Authority wishes to ensure that Occupational Health advisors and Physicians have adequate time to assess employees who are referred to the Occupational Health Service, whilst maintaining a best value. Applicants will be asked to provide details of suggested time allocations and to comment as to why they perceive them to be reasonable.

4.8.3 Clinical Audit and Governance

- the Authority will insist that the arrangements for clinical audit and clinical governance will be put in place responsibly by the Provider.

4.8.4 Communication

- the Authority will wish to ensure that managers know how to access and use the new Occupational Health Service effectively and are updated regularly for the Services available.

4.8.5 Medical Records

- The Provider would be responsible for medical records management relating to the Service. A suitable arrangement must be in place for maintaining and keeping medical records secure and confidential, in keeping with Data Protection and the Authority's procedures.

4.8.6 Missed Appointments (Non-Attendance)

- the Authority is keen to ensure that employees attend their Occupational Health appointment. Currently over 89% of employees keep their appointment dates. Applicants will be asked for how they could work with the Authority to maintain this low level of non-attendance.

4.9 Staffing Requirements

- 4.9.1 *(Mandatory Requirement)* Both Occupational Health Physicians and Occupational Health Nurse Advisors must hold qualifications in Occupational Health together with experience in this field.
- 4.9.2 *(Mandatory Requirement)* The Occupational Health Physician is required to have or be (or equivalent):
- Member of the Faculty of Occupational Medicine or higher;
 - hold the appropriate General Medical Council (GMC) and United Kingdom Central Council (UKCC) registration.
- 4.9.3 *(Mandatory Requirement)* The Occupational Health Nurse Advisor is required to have or be (or equivalent):
- qualified in Occupational Health OHND/BSc Occupational Health;
 - evidence of continuous professional training/development;
 - RGN with current practising certificate;
 - hold the appropriate GMC and UKCC registration.
- 4.9.4 In addition to the above the successful Provider must have suitably qualified and experienced personnel who will be engaged in the provision of Services, who must be suitably organised.
- 4.9.5 It is preferred that the Provider holds the Faculty of Occupational Health accreditation.
- 4.9.6 The Provider must have a suitable management team with the requirement of carrying out and supervising the Contract and the personnel who will be engaged in the provision of Services, with a specific named contact who will be termed the Contract Manager.
- 4.9.7 Suitable communication procedures must be established between the Contract Manager, the Contract management team and the Authority in support of effective working relationships with the outcome of meeting the requirements of the Contract.
- 4.9.8 *(Mandatory Requirement)* A continuous Service must be provided. A suitable attendance system must be in place for Staff, including a back-up system to cover for staff absence.

4.10 Provider Requirements

- 4.10.1 The Provider will demonstrate commercial advantage, stability and innovation, technical capacity and the ability to deliver requisite quality of Service(s) competitively, and will demonstrate an ability and willingness to:
- be commercially pro-active on the Authority's behalf;
 - be flexible and co-operative in implementing business change;

- work collaboratively with the Authority to continuously improve and eliminate waste and non-value adding activity.
- 4.10.2 The Provider will demonstrate an understanding of Best Value legislation as it affects government and public sector organisations. The Provider will accept that certain Service areas may be added or removed from the Contract in the light of a Best Value review.
- 4.10.3 An option is being considered of reducing the Service, so the Occupational Health Nurse Advisor/Manager provides on-site consultation one day every other week (9.00am – 5.00pm), rather than every week. Pricing for this has been included, however this is for information purposes only.
- 4.11 Additional Requirements**
- 4.11.1 The Authority would expect the Provider to continue to explore best practice throughout the Contract and discuss as appropriate clinical and non-clinical innovations to improve the Service provision.
- 4.11.2 The Authority is happy to discuss clinical research if appropriate to explore best practice for the organisation. The Authority sees this as an essential part of the Provider's Services and recognises that it may be requested. The Authority would be happy to enter into negotiations and subsequently support this process where appropriate, however would not expect to be charged.

5 *(Mandatory Requirement)* Contract Management Requirements

- 5.1 Effective Contract Management is imperative for the management of the Contract to ensure that the Service is being delivered as agreed to the required level of performance and quality.
- 5.2 The Contract will be performance managed through the use of Contract Management Meetings. The Provider must establish a procedure for resolving any conflict or issues raised with the running of the Contract in a timely and effective manner.
- 5.3 In extreme circumstances, to assist with performance management, the following will be used:
- breach of Service Level Agreement – if there has been a breach in the Contract due to not meeting terms such as response times for example this may result in a penalty of not being able to charge for that Service for that specific element. If this occurs an Action Notice will be issued, please see the following point below;
 - Action Notices will be issued - Step in Rights have been included in the terms and conditions of Contract to cover the circumstance where the Authority reasonably believes that it needs to take action in connection with the Service being provided.

6 *(Mandatory Requirement)* **Management Information**

- 6.1 Applicants should, by way of on-going Contract performance be prepared to produce key management information at no additional cost to the Authority. The exact format and duration will be agreed between the Service Provider and the Authority's Authorised Representative. The Service Provider should be able to produce the agreed management information in electronic format such as Microsoft Excel. This will be at no cost to the Authority.
- 6.2 The Authority requires information on Service activity and quality standards on a quarterly basis including case mix, as indicated within this specification. You are asked to describe the form that this management information could take and the media by which it would be communicated
- 6.3 Applicants shall be able to produce management information for the following, but not limited to:-
- number of referrals per clinic;
 - length of time before referrals are booked;
 - number of Physician referrals per session and per quarter;
 - number of Nurse Manager referrals per session and per quarter;
 - number of pre-employment screenings;
 - number of candidates not cleared during pre-employment screening;
 - number of did not attend appointments;
 - number of GP information and specialist requested;
 - number of employees citing stress that is totally work related;
 - number of missed appointments;
 - outcome of referrals;
 - reductions in absence (supported by examples) of early intervention and proactive handling;
 - number of ill health retirements successful/unsuccessful/tier one, two or three;
 - KPI targets will be in relation to the above with the method to be finalised at post Tender negotiations, in line with Authority expectation and delivery of an effective Service.

7 Invoicing

- 7.1 For the purpose of invoicing the Authority for additional services charges an excel spreadsheet must be submitted to the Authority's Contract Manager for authorisation by Contract Manager and Referring Manager prior to an invoice being issued. The spreadsheet must include all details of all additional charges:
- a. details of standard onsite provision;
 - b. details of Occupational Health Physician services;
 - c. details of Occupational Health Nurse services;
 - d. welfare services;
 - e. Occupational Health Physician follow up;
 - f. date;

- g. name;
 - h. department;
 - i. cost centre;
 - j. name of referring manager;
 - k. action details;
 - l. time taken;
 - m. cost;
 - n. contract management and travel costs;
 - o. disbursements/GP reports;
 - p. pre-employment checks details such as name, location, departments, type of screening, start/end date of process.
- 7.2 Invoices should be sent to the Authority's Contract Manager by the end of the following month in which the additional charge has taken place.
- 7.3 The Authority's settlement terms are 30 days from receipt of the goods and services or the invoice whichever is the later.

8 Compliments and Complaints

- 8.1 The Provider shall have a written compliments and complaints procedure, made available to service users. Provision of information regarding the procedure should take account of any disabilities or communication difficulties service users may have. The contractor's procedure shall make clear that service users may alternatively use their own Customer Department's procedures. The Provider will show evidence of promoting a climate of welcoming service users' comments and involvement.
- 8.2 Any complaints of a serious nature from service users should be communicated to the customer's Authorised Officer within 7 working days of receipt, together with details of the action taken / to be taken by the Provider in response to the complaint.
- 8.3 The number and nature of compliments and/or complaints received should be recorded on a database by the Provider and emailed to the customer on a monthly basis for discussion, via a secure method.

9 Customer Satisfaction

- 9.1 The Contractor(s) will monitor and measure line managers and HR satisfaction of the quality of the referral process and reporting on a quarterly basis.
- 9.2 The Contractor(s) will monitor and evaluate employee satisfaction of those who have used the counselling service by issuing a customer feedback questionnaire to be completed after the final session.

10 The Authority's Responsibilities

- 10.1 The Authority will appoint a nominated contract manager who will act as the main contact for business as usual discussions as well as escalation.
- 10.2 The Contract will be managed by reasonable and regular review meetings, which will cover management information to aid identification of trends and issues,

performance against the service level agreement and areas for service development. The exact nature, format and timing of the meetings will be agreed with the Provider, although the customers will expect review meetings to be held at least monthly during the early part of the contract and at least once a quarter thereafter.

11 Management of Risk

The Provider will identify business and commercial risks associated with service delivery and ensure appropriate mechanisms are in place to reduce/mitigate risk (e.g. business continuity plan, disaster recovery). These will include maintaining a risk register as well as robust business continuity and disaster recovery plans, which are assessed and tested on a regular basis.

12 Further Services Offered

The Applicant will be expected to suggest as part of their response to the questions in Volume 4 - Stage Two Tender Submission any additional products or Services that they may be able to offer as part of this Contract or any other added value that their offer might be able to bring to the Authority. Applicants are expected to build any such offers into their submissions regardless of whether specific questions are asked along these lines or not.

13 Availability of the Contract

The provision will only be available to current employees, or those employees who are wishing to access deferred local government pension, unless specific agreement is reached with the Provider for groups of employees who transfer out of the organisation under TUPE. This may be an interim or permanent arrangement.

The Contract may also be used in the future by the Torbay Development Agency and any current or future arms-length companies wholly owned by the Authority and by any third party organisations including schools and academies who currently use the services of Torbay Council's Human Resources Team, or are likely to in the future through service level agreement.

14 Scope and Nature of Possible Modifications or Options

The Authority is willing to consider future possible Modifications or Options, based on the following:

- a. the emergence of new and evolving relevant technologies which could improve the Services;
- b. new or potential improvements to the Services;

- c. changes in ways of working that would enable the Services to be delivered at lower costs and/or at greater benefits to the Authority.
- d. an increase or decrease in staffing numbers, including the addition or reduction of schools, academies and other third parties using the Contract; or
- e. factors that could not be reasonably foreseen by the Authority at the time of tender issue.