

Information, Advice and Advocacy service specification

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DRAFT

1. INTRODUCTION

Tower Hamlets Together (THT) is a partnership of health and social care organisations working closer together to improve the health and wellbeing of people living in Tower Hamlets. Our ambition is to achieve a more coordinated approach to providing services, reducing duplication and improving the overall experience and outcomes for the residents who need them.

THT is a partnership of health and care organisations that are responsible for the planning and delivery of prevention and health and care services. Tower Hamlets Council is a key partner and is the lead commissioning organisation for the Integrated Information and Advice (IAA) service. The partnership includes:

- London Borough of Tower Hamlets
- NHS Tower Hamlets Clinical Commissioning Group
- Tower Hamlets GP Care Group
- East London NHS Foundation Trust
- Barts Health NHS Trust
- Tower Hamlets Council for Voluntary Service

The integrated Information, Advice and Advocacy (IAA) service will support the council to manage demand on its adult social care front door and health services by providing free, independent, quality-assured information, advice and advocacy on matters relating on **health, social welfare, and social care** in order to resolve and prevent or delay needs/problems escalating.

The vision is to give residents better **access** to excellent IAA at the right time and in the right way to support them to live independent, healthy and fulfilling lives. High quality information (which is relevant, accessible and accurate) is essential for all residents who need, or may need support in order to know their rights and to live independently and well.

This document sets out the service requirements for the provision of an integrated IAA service for all adults in Tower Hamlets. The service will enable and support residents to access high quality information and advice that **is linked in with preventative services** across the borough such as social prescribing, care navigators and community navigators as well as housing and social welfare advice provision funded through the Local Community Fund.

The council recognises that there is range of different ways in which the desired outcomes can be achieved. For that reason this specification sets out a range of basic functional requirements in respect of the service to be provided, but more importantly it defines the **aims, objectives and expected outcomes** to be achieved through delivery of the service.

The council will select a service provider on the basis of confidence that the model of service delivery proposed meets these aims, objectives and outcomes in a way that optimises quality and value for money in accordance with the Evaluation Criteria set out in the Invitation to Tender Instruction. The council then expects to work in partnership with the selected provider to ensure that the intended outcomes are achieved consistently and to

expected levels of quality. This is of particular importance in the context of the expected changes in demand over the lifetime of the contract.

Viewing the relationship between the council and service provider as a partnership rather than simply a contractual arrangement is of real importance to the council; we expect the successful provider to recognise that working together in a mutually productive and respectful relationship will achieve better and more consistent service quality and outcomes for service users. The council will provide regular opportunities for all commissioned providers to participate in workshops and other similar forums focused on continuous improvement of service quality and all providers will be expected to participate in these opportunities.

The service model will need to be sufficiently adaptable and flexible to manage the expected increasing demand within the same overall financial resources over the lifetime of the contract.

To help manage demand, the council expects the service provider to channel shift demand throughout the contract period from face-to-face to telephone, and from telephone to the digital portal for **signposting, information and low level advice**, and in doing so freeing up capacity for more complex advice and advocacy. The service provider is expected to ensure that the intended outcomes are achieved consistently and to expected levels of quality.

This channel shift will be subject to a Payments by Results (PbR) element whereby up to 2% of the total annual value of the contract value will be withheld if digital shift targets are not met from year 2 onwards.

This document is the specification for the delivery of an Integrated IAA service. As the specification will form part of the legal basis for the provision of the service, the successful bidder will be expected to achieve the outcomes and requirements within it and the council will monitor compliance.

National context

The service provider must ensure that the service is delivered in a manner which is compatible with the following duties placed on the local authority under the Care Act, 2014:

- Section 1: Promoting individual well-being
- Section 2: Preventing needs for care and support
- Section 3: Promoting integration of care and support with health services
- Section 4: Providing information and advice
- Section 5: Promoting diversity and quality in provision of services
- Section 6: Co-operating generally
- Section 42. Safeguarding enquiry by local authority

The Care Act, 2014 references that all local authorities have a statutory responsibility to provide information, advice, signposting and navigation support to enable people to remain independent, healthy and well.

This includes a responsibility to ensure that all residents have access to comprehensive information and advice about care and support services in

their local area that is accurate, accessible, of high quality and locally relevant.

2. LOCAL CONTEXT

The vision for the integrated information, advice and advocacy service is underpinned by [Tower Hamlets Together outcomes and priorities](#) and [Tower Hamlets Strategic Plan: our borough, our plan 2018-2023](#).

The council is committed to working with the community to design and deliver services that meet the many different needs, bring people together, reduce inequality, and are sustainable, highly valued and well-used.

The IAA service will provide high quality information (which is relevant, accessible and accurate) for all residents who need, or may need support in order to know their rights and to live independently and well.

3. CORE PRINCIPLES

In addition to the aims, objectives and outcomes described in this specification, the Service Provider will at all times deliver the service in accordance with the principles set out below:

A. Dignity and Respect

Service users have the right to be treated with respect and dignity and to have access to consistent, high quality and appropriate information, advice and advocacy. The Service Provider will act at all times in accordance with the Public Sector Equality Duty and will promote equality and respect across all nine equality strands: age, gender, faith, disability, sexuality, ethnic background, marriage/civil partnership, maternity/pregnancy and gender reassignment and will provide a clear statement on their complaints and mediation procedure. Service users should be offered services which are based on their individual circumstances, needs, choices and expectations; they have a right to participate in decision-making; and must be given advice and information where appropriate which will enable them to make informed decisions.

B. Community presence and participation

Service users live within, and are part of the community and all services should maintain and promote a continuing integration. The service itself should be integrated into communities and neighbourhoods to foster a sense of belonging by means of access and use of a range of community facilities, for example to meet with service users or provide drop-in advice sessions or similar. The service will build in service user involvement/co-production in design, development and delivery of services as well as in the monitoring and evaluation of those services.

C. Well-being and independence

The service provider will promote the independence and well-being of service users by providing accurate information and advice, and support/signpost users to services that are appropriate. The service provider will add value

where possible and appropriate access to mainstream services such as housing, education, employment and health services. The service will offer advice and signposting to community and voluntary sector preventative services.

D. Choice

The service provider will support service users in making choices and decisions about their daily lives and activities along with clear information about options, responsibilities and consequences. The service provided will reflect the diversity of people and communities in Tower Hamlets, their different aspirations and access requirements and will anticipate changing needs. Where the service is being provided on a face-to-face basis it will be easy to access in terms of location, opening times, and accessibility and will allow choice in how it is accessed. Information about the service, how it is provided, under what terms and conditions and how it can be accessed, will be provided in order to allow real choices to be exercised.

E. Communication

The Service Provider must ensure that the services provided are responsive to the needs and aspirations of service users, and that communication tools are in place to support this. The Service Provider will work in a way which supports and enables individuals to communicate in their own right, and on their own terms as opposed to communicating on their behalf unless this is the clearly expressed preference of the service user.

F. Neutrality

The council recognises that organisations who deliver IAA services can also provide other types of services such as care and support. In a circumstance where the service provider is also a provider of care and support services, or any other service, the council will require, throughout the duration of the contract, that strong and robust ethical walls be put in place between the service and the service providers other services. The council will not accept a situation where service users are guided, advised, or otherwise encouraged in any way to inappropriately purchase services from the service provider. The Service Provider will be required to operate with absolute neutrality at all times in terms of supporting service users to access the services they choose to access. The existence of such arrangements will, where appropriate, be thoroughly tested during the tender process and at regular intervals during the life of the contract.

G. Supporting families to care for their child

The council's Early Help Offer is a key stakeholder and the service provider will work with this team when an IAA query is for children and young people with special educational needs and/or disabilities from birth to 25, their parents and carers, and people who work with children, young people and their families.

4. DEFINITIONS AND STANDARDS

In addition to the core principles, for the purposes of this service specification, definitions of Information, Advice and Advocacy will be used

as defined by the Advice Quality Standard (AQS) and the Advocacy Quality Performance Mark (QPM).

The service provider will be accredited with the QPM and AQS, and the service will be delivered in line with QPM and AQS standards. The service provider will maintain a quality assurance standard over the lifetime of the contract covering both organisational level quality standards and individual staff quality and competence in delivering the service.

Signposting

Providing information about another organisation or service which undertakes work relevant to the client's needs. The information provided should be provided in a manner that the client can refer to it at a later time and should be sufficient for the client to: a) decide whether this is an appropriate service for them and b) to know how to access the service if they so choose. The client holds responsibility for contacting the service.

Information

An information service gives clients the information they need to know more and do more about their situation. It can include providing information about rights, policies and practices: and about national and local services and agencies. The responsibility for any further action rests with the client.

Advice

An advice service involves a diagnosis of the client's enquiry and the legal issues involved; giving information and explaining options; identifying further action the client can take and some assistance e.g. contacting third parties to seek information, filling in forms. It would usually be completed with one interview although there may be some follow up work. The client would take responsibility for any further action.

Advice with casework

Includes all elements of an advice service as above and also involved taking action on behalf of the client to move the case on. It could include negotiating on behalf of the client with third parties on the telephone, by letter or face-to-face. It will involve the advice provider taking responsibility for follow-up work.

Advocacy

Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain services they need. Advocates and advocacy providers work in partnership with the people they support and take their side. Advocacy promotes social inclusion, equality and social justice.

Specialist Casework

Specialist casework is defined as casework requiring the presentation of complex legal arguments in participating in (amongst other things) their assessment and /or the preparation of their care and support plan.

Care Act Advocacy

This service does **not** include the provision of Care Act Advocacy

5. CORE REQUIREMENTS

The provider will submit a model that will deliver an integrated IAA service

that will offer early help to residents and adult carers and ensure a fully accessible service to help residents to access the right information, advice and help through:

- up-to-date information pages and directory on the digital portal
- telephone based triage/information service that operates as the adult social care 'front door' and an information/advice line (including email, textphone, Skype, text, fax)
- Face-to-face and outreach advice and advocacy in the community
- a lead role in developing a network with existing community health services, social welfare and social care services to share information and best practice and to addresses any gaps/unmet demand in IAA provision across the borough

The service will support the council to manage demand on its adult social care 'front door' by providing free, independent, quality-assured IAA in order to resolve and prevent or delay needs/problems escalating.

The service will work within a network of other health, social welfare and social care provision across the borough to meet the full requirements of the service specification.

Community health, social care and social welfare information will be available on a 24/7 basis on the digital portal and have a wealth of information and advice from across the Tower Hamlets Together partnership supported by a single, up-to-date directory of services for the whole system in a central place.

The provider should be clear that an expected aspect of this service is to spend time talking to, relating with, and understanding the lives of service users and supporting them through the delivery of information and advice in the most appropriate, supportive and enabling way to maximise the service user's independence.

The service must be available in Somali and Bangla.

The provider will be committed to developing strategies to actively increase volunteering opportunities and to actively engage with volunteers to help support the delivery of services.

In order to deliver the service successfully, the provider will ensure expertise and knowledge in the following areas listed below. And provide access to the following information, advice and advocacy as part of delivering a holistic and personalised service that adds value for the service user:

- Employment legislation and best practice
- Benefits and welfare information and advice
- Housing advice and information
- Money management advice
- Volunteering information and advice
- Self-advocacy

The provider will also need to have a detailed knowledge of local infrastructure and services available that may be of benefit to service users

and the ability to signpost to these other services as required including (this list is not exhaustive):

- Befriending and community support networks
- Healthy living advice and support
- Recreation and leisure activities
- Employment including supported employment
- Community meals
- Free travel passes/blue badges
- Social prescribing
- Care Navigators
- Community Health Services

The service will improve the council's ability to establish who has eligible care and support needs. The service delivered by the provider will help to prevent, delay or reduce care and support needs. At the same time it will improve the choice, control and independence of the borough's residents.

To support the council's preventative strategies, the service is to provide a single access point for information and advice to:

- reduce demand on health and council services whose main function is **not** to give information or advice
- reduce demand on the council's customer contact centre where the only reason for contact is to gain information/advice provided by the voluntary sector

The service will operate 8am-6pm Monday-Friday (excluding bank holidays). The service will have a dedicated telephone number and email address. The council's out-of-hours Telecare team will take messages for the service from 6pm to 8am the following morning.

The service will be available borough-wide and accessible from a number of locations, including but not restricted to advice centres. Access to the service will be available through outreach in non-advice settings (GP surgeries, Idea Stores, schools, community centres, etc). Locations will be agreed on a quarterly basis in advance with the council, and promoted through the digital portal as well as through posters in suitable locations in the community such as Idea Stores, community centres, GP surgeries. etc.

6. ELIGIBILITY AND REFERRALS

The service will be available for all people aged 18+ and resident in Tower Hamlets and/or live out-of-borough but are the responsibility of Tower Hamlets Council, including adult carers supporting a borough resident. However, the provider shall not deny access to a younger person who may benefit from the service.

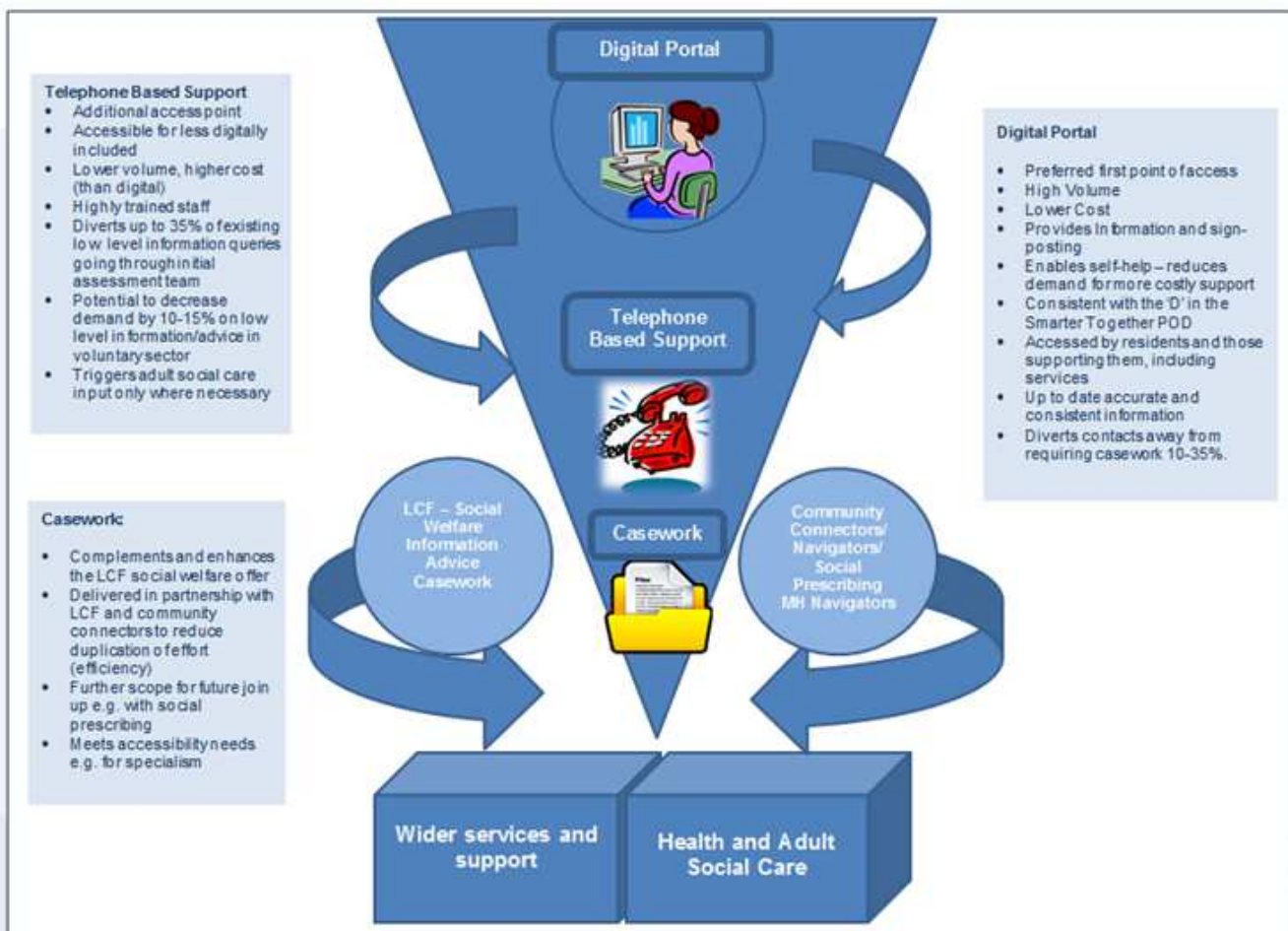
The service will be accessible to residents in the borough and will provide IAA in a manner that empowers service users to achieve maximum choice and control over their lives.

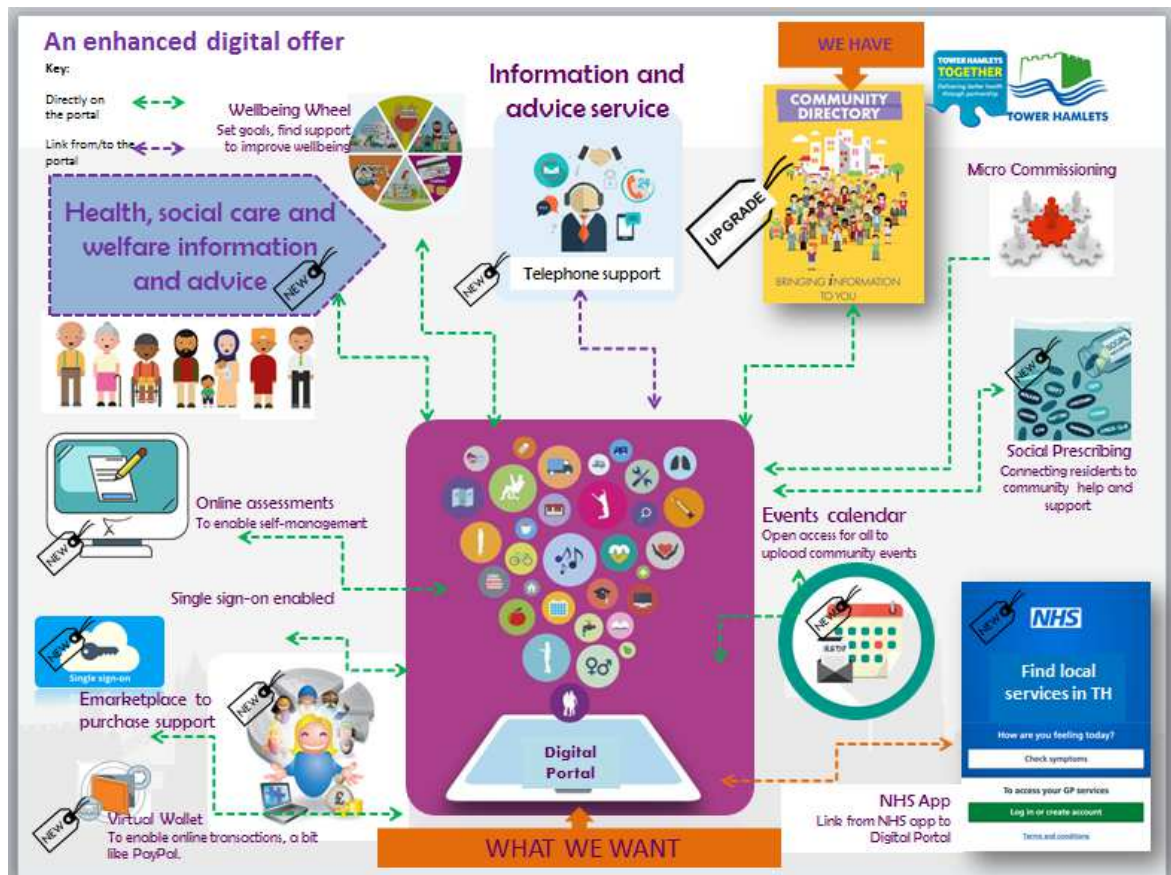
Referrals into the service will primarily be via self-referral or through:

- adult social care (including CMHT and CLDS)
- community health services
- housing advice services
- voluntary agencies

The service will meet the communication needs of those accessing the service inclusive of people who do not have English as their first language, need specialist communication tools, and communicate through informal methods e.g. pictures.

7. THE INTEGRATED INFORMATION, ADVICE AND ADVOCACY SERVICE





8. DIGITAL PORTAL

The council will be responsible for the development and funding of the digital portal and will work with the service provider when implementing new functionality currently not available to provide a better digital experience and offer for residents.

The service provider will work with the council to identify and develop online tools for residents that will enable independence as far as possible and reduce the need for telephone support service.

The provider will be responsible for updating and maintaining accurate content on the digital portal. The provider will ensure that information is in plain English and will work with health, social welfare and social care organisations to ensure that information is accurate and available in a range of accessible formats such as printable leaflets and fact sheets for residents with a range of needs and disabilities.

The provider will ensure that staff are trained to access the administrative tools to the directory of services, and information and advice pages to maintain the integrity of the information on the digital portal. Access to content and the quality of content on the digital portal will be monitored as part of the contract.

The service provider will identify a lead professional who has primary responsibility within the organisation for updating content and the directory pages of the digital portal.

9. HELPLINE

The helpline service will provide appropriate information and advice to residents and act as a front door for adult social care and community health services as well as a gateway for all Tower Hamlets residents to access IAA in health, social welfare and social care, as well as services available in the borough.

The provider will operate a single point of access i.e. one telephone number (local rate) during operating hours. The provider will also operate a single email address. This will ensure that referrals are received and allocated appropriately and response times are noted and met. Referrals will be accepted from statutory services and other organisations and or by self-referral, families/friends/carers etc.

The helpline will be a front door to Adult Social Care (ASC) and community health services. The service will provide a first response service for people wanting to access social care or health services in Tower Hamlets. This includes information gathering, the undertaking of proportionate assessments, signposting and the provision of information and advice, promoting choice and control wherever possible.

Staff will be expected to undertake trusted assessment to promote independence and offer advice on accessing standard equipment which will be listed on the digital portal.

All contacts from residents who are in receipt of social care/ support will be recorded on the council's case management system as well as providers own data management system.

Access to EMIS and Rio (electronic patient records systems) will be made available to give a better understanding of a person's health needs. **Please note: Access is being explored and may not be available at the start of contract but we expect it to be available during the contract period.**

In addition to the above functions, helpline staff will be expected to carry out the following as a minimum, but without limitation, this will include:

- screening of referrals on telephone, email, fax or through the online assessment in order to avoid unnecessary demand on health and social care service
- providing updates on waiting list queries
- message taking for social care practitioners
- identify and process any safeguarding and quality of care issues and refer on to the appropriate social care team/agency
- identify and process any need for urgent response and refer on to the appropriate team/agency
- develop and maintain effective working relationships with the council's Initial Assessment team and the Shorter and Longer Term support services
- Trusted Assessor for community equipment

10. EMAIL

The service provider will manage a dedicated single email account for residents to access the service. The email account will be linked into the online assessment available on the digital portal.

11. TEXT SERVICE AND SOCIAL MEDIA

There will be a dedicated single mobile account for service users to access the service via text. The service provider will put plans in place to further expand the use of text alerts e.g. messaging health and wellbeing messages and alerts.

12. TEXTPHONE

There will be a dedicated single telephone number for service users to access the service via Textphone. The service provider will work with the council to further the use of technology to benefit service users with various communication needs that will include British Sign Language and other communication techniques.

13. SKYPE

A Skype service will be available for residents on who would like a face-to-face meeting over the internet. The provider will resource staff to take face-to-face meetings via Skype.

14. OUTREACH

The helpline will be supported by face-to-face delivery of information, advice and advocacy through outreach in the community at different locations covering the four localities of the borough.

This element of the service will include drop-in-surgeries and appointments based booking to help residents resolve problems they face including welfare benefits, housing, money/debt, employment, immigration, consumer, education, health and social care, family, and personal issues.

IAA outreach will be offered in convenient locations across the borough so that residents can access the service in communities/neighbourhoods they feel part of to maximise access and inclusion.

Outreach locations must provide adequate presence in the four localities of the borough. Examples of outreach locations include:

- GP surgeries
- Pharmacies
- Idea Stores
- Council buildings
- Community centres
- Schools

The effectiveness of outreach locations will be monitored and reviewed quarterly to ensure that locations and set-up are appropriate.

The outreach element of the service may also operate outside of the operating hours at evenings and weekends if a need is identified.

15. IAA NETWORK

Tower Hamlets is split into four localities. The service will deliver an integrated IAA service that brings together existing health, social welfare and social care provision to provide a comprehensive service that maximises opportunities for residents to resolve their problems, maintain their independence, health and wellbeing.

The service provider will take a lead role in creating and maintaining links with existing between health, social welfare and care services in each of the four localities. The service provider will continually work to raise the profile of the IAA service and work in partnership with other information and advice organisations to develop and update information and advice content and the directory listings on the digital portal, and to encourage innovation – in the design of services and the use of technology to improve referral pathways into the service and between the existing health, social care and social welfare provision.

The service will work with key stakeholders to:

- create greater co-ordination of services for residents,
- reduce duplication in the sector
- realise efficiencies for commissioning organisations and providers
- increase sharing of best practice
- develop common protocols across the sector

The Service provider will identify a lead professional who has primary responsibility within the organisation for the development of the network

16. BRANDING

The branding for the service will be developed and owned by the council. The council will work with the provider to build a strong, credible and reliable brand for the service. The provider will deliver and promote the service under this brand and ensure that the brand becomes a reliable and trusted source of IAA on health, social welfare and social care.

17. CO-LOCATION

The service will be expected to work in an integrated way with health and social care. Therefore the co-location of council and health staff to facilitate the sharing of local knowledge and skills, and ensure residents are matched with the appropriate services will be required.

18. SERVICE DELIVERY LOCATIONS AND REQUIREMENTS

The service provider must engage with service users efficiently and effectively to give them the best experience. Service users will be given the

choice to interact with the service provider through digital technology, the helpline and through outreach in the community, and will be supported to do so. It is expected that the service provider will be digitally innovating and adapt to changes in user demands and expectations.

Using the digital portal and other digital technology such as Apps has the potential to make access to information and advice easier, improve residents' quality of life, and get information to a wider group of residents. Digital technology can enable social interaction and can save users time and money. An increasing number of organisations are offering services via digital technology and we would like the service provider to be innovative in this area, bearing in mind that not all residents in Tower Hamlets can access digital technology.

The service provider will need to have a presence in the borough, this can be a combination of fixed hub(s) and mobile outreach by way of surgeries in key locations such GP, health centres, etc. OR simply mobile outreach.

The mobile outreach will need to be delivered at different locations to cover the four localities of the borough. If required, the Council may discuss with the appointed provider the need for relocating some of the outreach points should the data monitoring evidence poor performance and/or attendance.

Therefore, the council does not specifically require the service provider to have a fixed premise in the borough to be able to deliver this service. Instead, the requirement is to make use of the many community buildings and assets available in the borough as well as making use of technology to provide a model of service delivery that meets the aims, objectives and outcomes outlined in this specification in a way that optimises quality and value for money.

In any case, service providers will need to demonstrate:

- Capacity to co-locate staff with council and/or CCG staff to provide an integrated IAA offer bringing together health, social welfare and social care services
- All aspects of the service can be delivered in a timely, responsive and efficient manner at all times
- The Service Provider is able to demonstrate that proposed location(s) do not detract from their ability to add value to the borough and its residents as required by the council in the context of the Social Value Act and the council's strategic priorities including supporting local employment and training, and utilising local suppliers in supply chains whenever possible.
- The Service Provider's proposed location(s) does not prevent the delivery of a flexible service whereby staff are able to meet with service users in community buildings or the service user's home within the borough as requested by the service user.

Any and all premises from which the service is delivered and/or staff are based will be well heated and ventilated; will offer a comfortable environment in which to work/ visit; will comply with DDA standards and with all relevant Health and Safety legislation in order to create a safe environment for staff and service users.

The nature of the service being delivered means that some aspects of the service are delivered from locations which are not owned or otherwise under the control of the service provider (such as community halls, Idea Stores, libraries, GP practices and other venues).

In such situations it will be for the service provider to ensure that the venues being used are in line with the expectations set above. In particular, the provider will need to take care to ensure that the safety and wellbeing of staff and service users is assured, with special attention being paid to lone working and one to one situations.

19. CONTRACT DURATION AND MANAGEMENT

The contract for the Integrated Information, Advice and Advocacy service is being let for a 36 month (three year) period. The Council has included an option, at its sole discretion, to extend the contract for two further periods of 12 months (one year) subject to satisfactory performance, and to the continuing availability of funding.

The contract is being let on a fixed price for the total five year duration of the contract, and it will be for the Service Provider to operate a model of service that is sufficiently flexible and adaptable to continue to deliver the desired outcomes, and to meet the required service standards (including those related to timescales) over the life of the contract.

It is expected that the demand for the service will increase over this period, and the model of service will need to be capable of being scaled accordingly within the price submitted by the service provider.

The council may, during the life of the contract, wish to enter into a dialogue with the Service Provider about varying the scope of the service to encompass new obligations. Any such dialogue would be subject to the council being satisfied that this offered the best value means of responding to any new requirements, and that it could be achieved in a manner consistent with UK Public Procurement Legislation.

The Council will appoint a lead officer to act as the primary point of contact with the Service Provider for the duration of the contract. This lead officer may designate other Council officers to undertake specific roles in relation to the management of the contract and the monitoring of the services delivered under the contract.

The Service Provider will respond in a timely manner to any reasonable requests for information or documentation from the lead officer or designates pertaining to the management of the contract and the delivery of services under the contract.

To aid this, the Service Provider is required to identify an individual who will act as the primary point of contact within the organisation.

Section 25 of this specification provides more detail on the contract monitoring and evaluation arrangements that will be in place over the lifetime of the contract.

20. THE SERVICE PROVIDER'S PROCEDURES

Except where required otherwise by this service specification or other contractual terms and conditions, the Service Provider is free to propose their own working methods. The Service Provider(s) must submit its final proposed methods for delivering the Service for approval to the Council's Lead Officer prior to commencement of the contract.

The Council undertakes to accept the proposed service delivery methods subject to being satisfied that they will enable the efficient and effective delivery of the service requirements, and achievement of the desired outcomes, as described in this service specification. The Service Provider's procedures shall reflect:

- a) a willingness to act reasonably and with due propriety at all time
- b) a commitment to the principle of equal opportunities, and the Public Sector Equality Duty, in service provision and staff recruitment
- c) full compliance with relevant legislative requirements including those relating, without limitation, to the delivery of the service, the organisation as an employer and company law
- d) a commitment to adherence with the highest customer care principles, including ensuring that service users and their carers/relatives are provided with an honest, sensitive, helpful, informative and courteous Service at all times.

The Service Provider's procedures shall not have cause to commit the Council or the NHS to provide services or confer rights outside those provided for by its policies or procedures and by legislation.

The Service Provider will ensure that all necessary procedural documentation is properly maintained and updated as necessary in a timely fashion; and that procedures are communicated to, and understood by, the staff responsible for implementing them.

Service Provider will need to ensure that it has in place, at all times, procedural documentation that provides an overarching operating framework for all aspects of the model of service adopted.

The Service Provider undertakes to make any and all procedural documentation available to the Council's Lead Officer or designated representative on request, and in a timely manner.

The Council reserves the right to propose amendments to the Service Provider's procedural documentation, where, in the view of the Council the proposed amendments would provide a more integrated and seamless relationship with relevant Council procedures.

In such circumstances the Service Provider will normally be expected to accept these amendments unless it can be unequivocally demonstrated that they will result in deterioration in the quality of the service delivered to service users.

21. STAFF TRAINING, QUALIFICATIONS AND COMPETENCIES

The Service Provider must employ, throughout the contract period, a sufficient number of suitably trained and qualified staff with appropriate skills and knowledge to ensure the delivery of a consistently high quality service. The Service Provider will pay the London Living Wage as a minimum to all staff.

Staff involved in delivering the service will have or are working towards a range of qualifications that help to demonstrate individual competence to deliver the service. Examples of relevant qualifications could include:

- Level 3 NVQ in Advice and Guidance
- Level 4 NVQ Diploma in Advice and Guidance
- Level 2 Diploma in Customer Service
- Level 3 Diploma in Customer Service

The Service Provider will ensure that recruitment and workforce is reflective and inclusive of the Tower Hamlets' diverse community. This is particularly important in delivering a sensitive and appropriate service in 'customer-facing' services such as the service to which this specification relates.

There is a particular emphasis on ensuring understanding of duties under the Equalities Act 2010 and on training and learning that enables staff to support a positive risk taking approach in their work with residents.

The Service Provider must ensure that all staff and volunteers, throughout the contract period, are fully trained and able to adhere to the EU General Data Protection Regulation (Regulation (EU) 2016/679) (GDPR).

The Service Provider must maintain, implement, review and adapt a clear and professional policy of ensuring that all staff are provided with the training necessary to carry out their tasks in delivering the service. A Learning and Development Plan, covering all staff involved in delivering the service, must be in place for the duration of the contract and kept up to date.

Staff, including any agency staff employed by the Service Provider in connection with the provision of the service will be working with vulnerable adults. The provider must therefore ensure, throughout the contract period, that all staff who will be working directly with service users have been subject to Enhanced DBS checks via the Disclosure and Barring Service and that a robust and comprehensive safeguarding policy and procedures are in place to protect vulnerable adults and children against any form of improper conduct by staff.

Such conduct may include, without limitation, verbal abuse, emotional abuse, physical abuse, financial abuse and theft of personal possessions including cash, or neglect. The Service Provider must ensure it has mechanisms in place to comply fully with the Tower Hamlets Local Safeguarding Children Board's Child Protection Procedures, and with the Protection of Vulnerable Adults Procedures.

The Public Interest Disclosure Act 1998 provides for the protection of individuals who make certain disclosures of information in the public interest (whistleblowing) and to allow such individuals to bring action in respect of victimisation following such a disclosure. The Service Provider shall produce internal guidelines for staff setting out that:

- it is the responsibility of all staff to act on any suspicion or evidence of abuse or neglect and to pass their information to the responsible person /agency
- whistle blowers will receive support and protection in accordance with the Act; and
- staff can contact the council or a relevant regulatory body in situations where they have concerns about operations and the Service provided.

Volunteers will be integral to the delivery of the service. The provider will work with Tower Hamlets Community Advice Network (THCAN) and Tower Hamlets Council for Voluntary Service (THCVS) to develop strong partnerships to recruit and train volunteers.

The Council has no objection to the use of volunteers in delivering the service subject to an overall assurance that the proposed delivery model will enable the efficient and effective delivery of the service requirements, and achievement of the desired outcomes, as described in this service specification, and that the use of volunteers will not negatively impact on this overriding requirement.

Where the Service Provider proposes volunteers having a role in delivering the service, then the Service Provider will:

- (a) ensure that a designated staff member has the role of co-ordinating the recruitment, training, supervision and development of volunteers;
- (b) ensure that volunteers are recruited, trained, supervised and deployed in line with best practice as promoted by Volunteering England and other representative bodies;
- (c) take up references and necessary checks on all volunteers engaged in delivering the service;
- (d) ensure that volunteers who start placements without a DBS check in place receive on-going supervision from a DBS checked member of staff and do not have unsupervised contact with service users;
- (e) ensure that volunteers undertake relevant training, including Information Governance (GDPR), Safeguarding.
- (f) ensure that processes put in place with regards to the Public Interest Disclosure Act 1998 (as per 8.4 above) are fully accessible to volunteers.

22. PROVIDER RECORDS

The provider shall maintain clear, accurate and proportionate records. The provider must have a data management system that records the source, classification and pathways referrals, equalities data and time spent on each issue, outcomes achieved and customer feedback.

These shall be compatible with confidential exchange of material with the local authority and support contract management. All data management systems and processes will fully comply with GDPR. All provider staff, including volunteers involved in collating data and information shall receive sufficient training and supervision to ensure reports are accurate, complete and consistent.

The provider is responsible for ensuring that information and data is collected for the purposes of evaluating the Key Performance Indicators and monitoring outcomes for service users. In addition, the provider shall periodically provide any further information the council may reasonably require for the purpose of contract monitoring and to fulfil its local authority duties.

The council may reasonably request information on how the provider is carrying out its obligations under this contract and the safety and wellbeing of service users.

The council shall require the provider to enter into a data sharing agreement in order to comply with the terms and conditions of this contract.

The provider will have some (limited) access to Framework-i or Mosaic – the Adult Social Care case management system in order to check information and add case notes as required. **Access to RIO and EMIS may also be available. Please note: Access is being explored and may not be available at the start of contract but we expect it to be available during the contract period**

The provider will ensure that any staff that access Framework-I or Mosaic, or any future council record keeping systems are fully trained and competent in the system before allowing access.

23. QUALITY ASSURANCE AND OPERATIONAL PROCEDURES

The service provider will maintain a quality assurance framework that will cover both organisational level quality standards and individual staff quality and competence in delivering the service. Ideally this quality assurance framework will be based on an established model appropriate to the service, such as Total Quality Management (TQM), ISO 9001 or similar. The framework should also be, however, proportionate to the size of the organisation, and its day to day operation must not detract from delivering the service in an efficient and effective manner.

The service provider will provide the Council with copies of documentation describing its quality assurance framework and operational policies and procedures upon request. The service provider must be able to demonstrate

how these policies and procedures are implemented at an operational level, and how and when they are monitored to ensure quality services are provided. In order to demonstrate compliance with the contractual terms and conditions, including this service specification, the service provider's quality assurance framework and operational policies and procedures will need to include the following as a minimum requirement:

- (a) Employee and volunteer disciplinary policy and procedures
- (b) Employee and volunteer grievance policy and procedures
- (c) Procedure for dealing with gifts to staff, including money and gratuities
- (d) Safeguarding policy and procedures (relating to both children and adults)
- (e) Confidentiality and the protection of information and data about service users (This must reflect the implementation of GDPR)
- (f) Abuse at work - staff protection
- (g) Accident and incident reporting procedure (compliant with all relevant HSE requirements)
- (h) Complaints policy and procedure
- (i) Whistleblowing policy and procedure
- (j) Equal Opportunities Policy
- (k) Recruitment Policy and procedures
- (l) Employee and volunteer supervision policy and procedures
- (m) Monitoring Policy and Procedures (including how service users are engaged in monitoring the quality of service delivered)

This is not an exhaustive list of Policy and Procedure documents but will form the basis of the service provider's quality assurance and operational management framework.

24. CUSTOMER CARE, CONFIDENTIALITY AND COMPLAINTS

The service provider will ensure that the Council's expectations regarding the highest standards of customer care are achieved at all times. These expectations require organisations to ensure that all service users are treated in a non-discriminatory manner, with courtesy and dignity, and that their right to choice and control with regards to their care and support arrangements is respected at all times. The service delivered will be one that promotes and sustains the independence and wellbeing of service users, and enables them to interact with their environment as citizens.

25. COMPLAINTS

The service provider will ensure that complaints from service users or their representatives are dealt with in a professional, courteous and timely manner and that all reasonable attempts are made to resolve complaints locally.

The service provider will at all times, when dealing with complaints, do this in a manner that is consistent with their complaints procedures.

The service provider will ensure that service users are routinely provided with information regarding its complaints procedure, including where it can be viewed.

The service provider will advise the complainant of their right to complain through the Council's complaints procedure, should they remain dissatisfied with the organisation's response to their complaint, and provide the complainant with information about how to access that procedure.

The service provider will provide the Council with an annual report regarding the number and types of complaints received in regards to the delivery of the service and the action taken in response to the complaints.

The service provider will take all reasonable steps to reduce and eliminate failures in service delivery at all times and to take remedial action regarding gaps or shortcomings in service delivery identified as a result of complaints, Members and Ombudsman enquiries. The service provider will respond to such events in a manner that enables it to learn lessons and to apply this learning by improving policy, procedures and practice for the benefit of service users.

The service provider will take all reasonable steps to co-operate with the Council in investigating any complaint under the Council's Complaints Procedure.

The service provider will provide, on request by the Council's lead officer or designates, copies of reports made in respect of investigated complaints about its services to the Council.

26. INCIDENT REPORTING

Adverse incidents (sometimes referred to as serious untoward incidents or significant events) should be reported to the Council, investigated and analysed to establish lessons to be learnt and to identify changes that will lead to future improvements and prevent reoccurrence. An equivalent approach should be taken to 'near-misses'.

The service provider must have a policy, procedures and culture that encourages and supports staff to report adverse incidents and near misses. All incidents and near misses should be reported by staff and fall into three categories:

- Incidents that have occurred
- Incidents that have been prevented
- Incidents that might happen (risks)

27. SERVICE USER INVOLVEMENT IN SERVICE PLANNING AND DELIVERY

The service provider will actively seek service user views and maintain appropriate records of service user feedback including any comments, complaints and/or compliments arising from meetings with service users, questionnaires, focus groups or other forms of engagement.

The service provider will demonstrate how such feedback is shaping and improving service delivery. The service provider will evidence how service users are fully involved in co-producing service plans and decision making with regards to the delivery of the service, and more generally in the operation of the organisation.

28. CONTRACT MONITORING AND PERFORMANCE EVALUATION

This Specification will be reviewed annually in partnership with the Service Provider and partner organisations to ensure all elements of provision are captured and in line with the Council's longer term strategic goals.

Any changes to the specification will be made in accordance with the variation/change control procedures set out in the Contract and will be within the scope envisaged in the original contract documents.

A condition of the contract under which the service is delivered is that monitoring returns are provided by the service provider at an agreed frequency, and that the service provider will ensure that it complies with the reasonable monitoring requirements agreed with the Council.

The service provider will be directly accountable to the Council for its operation of services under this contract and for the performance of those services against this specification.

The service provider will undertake regular monitoring and review of its service including an annual (as a minimum) service user survey, which will be reported to the Council on an annual basis, and will prepare regular reports for monitoring and review meetings with the Council's lead officer or designates. The service provider will ensure that all necessary administrative and record keeping systems are maintained to enable effective monitoring, review, planning and evaluation to take place, and that these systems are subject to regular testing and audit to ensure continuing robustness and relevance.

All payments in respect of this Contract are contingent on the satisfactory and timely presentation of the required monitoring information.

The Council's lead officer or designates will convene regular monitoring meetings at a mutually agreed frequency with the service provider and agree with it what information is to be routinely collected for monitoring and evaluation purposes. As a minimum, but without limitation, this will include:

- a. Performance against the objectives and desired outcomes (defined below)
- b. Budget monitoring information relevant to the service
- c. The financial performance of the organisation as a whole insofar as it relates to performance against this contract (to include the provision of annual audited accounts as soon as these are available)
- d. Information regarding numbers of complaints and adverse incidents, and actions taken in response to these
- e. Information regarding activity levels, and any changes to those levels

- f. Information on any referrals not accepted by the service and the reasons for non-acceptance.

The office base for the service will be visited on a mutually agreed frequency by the Council's lead officer or designates as part of the overall monitoring method. The service provider will make available all relevant documents, files, data and information to the lead officer or designate as deemed necessary for monitoring to be carried out effectively. Reasonable notice of the visit will be given (normally at least 14 days), and of any documents, files, data or information that there is an intention to inspect.

The records and files to be inspected may include, at the discretion of the Council's lead officer, those necessary to ensuring that the service provider is complying with requirements to ensure that employees have a right to work in the UK and that necessary DBS checks have been undertaken, and those, including payroll records, necessary to ensuring that the service provider is complying with London Living Wage requirements.

The Council's lead officer or designates will also visit locations from which the service is delivered, where these are different from the office base, at a mutually agreed frequency. During visits of this type the lead officer or designates will be provided with an opportunity to engage directly with service users to ascertain views on the quality of service being provided.

Following all monitoring visits, the lead officer or designates will write to the service provider detailing any areas of concern arising out of the visit, any further action required by the service provider, and the timescale for undertaking any such actions.

The service provider will provide quarterly monitoring reports in an agreed format to the Council's lead officer. These reports will be submitted within two weeks of the end of each quarter and in accordance with the schedule below, unless there is a specific agreement to operate to a different schedule:

Quarterly period	Deadline for submission of quarterly report
Quarter One: 1st April – 30th June	15 July
Quarter Two: 1st July – 30th Sept	15 October
Quarter Three: 1st Oct – 31st Dec	15 January
Quarter Four: 1st Jan – 31st March	15 April

In addition, an unannounced visit to the project may be made on an annual basis, or more frequently where specific concerns are raised regarding the quality of service being provided. Following any unannounced monitoring visit, the Council's lead officer will write to the service provider detailing any areas of concern arising out of the visit and any further action required by the service provider.

The service provider must ensure that all records, files, data and information relevant to monitoring of the contract is retained for the duration of the

contract.

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29. SERVICE OUTCOMES AND KEY PERFORMANCE INDICATORS

The council will test the effectiveness of the service in managing demand for more intensive social care and health services. By helping residents to access timely and accurate information the service has a critical role in reducing avoidable contacts to statutory services.

Providers shall capture and record outcomes as well as service user feedback in a way that supports continued service improvement and demonstrates how this feeds into real service improvement. The following information will be captured and reordered to evidence impact of the service

Outcome	Output/Activity	KPI	Target
		•	
Outcome 1 Better information and advice to residents so that they can make better choices about their health and wellbeing	Digital Portal <ul style="list-style-type: none"> Evidence of regularly updated and accurate information and advice content Evidence of maintaining an up-to-date directory of services Information on digital portal is written in plain English • 	<ul style="list-style-type: none"> No of people supported to access information through the digital portal No of residents accessing the digital portal independently No of online assessments completed • 	
	Helpline <ul style="list-style-type: none"> Helpline to operate from 8am-6pm Mon-Fri • 	<ul style="list-style-type: none"> Record of client and case note No of calls received No of repeat contacts received Number calls answered in less than 20 secs Number of calls answered in less than 95 secs (<i>includes above</i>) Number of call abandoned 	100% 100% 100%

		<ul style="list-style-type: none"> • No of calls to Voicemail • Number of calls not for the service (wrong number/wrong service) • Total number of outgoing calls • Number of outgoing calls as a result of the following: <ul style="list-style-type: none"> ○ Emails received ○ Phone messages left ○ Letters • Number of phone messages replied to within 48 hours • No of phone messages not replied to within 48 hours • No of emails replied to within 48 hours • No of emails not replied to within 48 hours • No of letters replied to within 48 hours • No of letters not replied to within 48 hours • • No of people provided with information, advice and advocacy • No of people referred to ASC triage • No of people supported to make appointments with other agencies • No of people signposted to other agencies • No of people provided with support forms (benefit, forms, housing forms, travel concessions) • No of people provided with support to 	100% 100% 100% 100% 100% 100%
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		<ul style="list-style-type: none"> deal with financial matters No of people provided with information and advice about housing/accommodation needs No of people contacted for a 3 week follow up call on the service No and % of those providing feedback No of people who responded that are satisfied with the service received No of people who report a positive outcome as a result of the service received 	50% of all contacts
	Outreach <ul style="list-style-type: none"> Details of opening hours and location of outreach activity to be promoted through the digital portal, posters and leaflets Drop in sessions and appointments to be available across the borough Locations should be accessible to reach groups 	<ul style="list-style-type: none"> Record of client and case note No of contacts received No of repeat contacts received No of people provided with information, advice and advocacy No of people referred to ASC triage No of people supported to make appointments with other agencies No of people signposted to other agencies No of people provided with support forms (benefit, forms, housing forms, travel concessions) No of people provided with support to deal with financial matters No of people provided with information and advice about 	100%

		<p>housing/accommodation needs</p> <ul style="list-style-type: none"> • No of people contacted for a 3 week follow up call on the service • No and % of those providing feedback • No of people who responded that are satisfied with the service received • No of people who report a positive outcome as a result of the service • No and who felt supported in making healthy lifestyle choices • 	
	<p>Network</p> <ul style="list-style-type: none"> • Establish links with community organisations and key stakeholders to create greater co-ordination of services for residents, reduce duplication in the sector realise efficiencies for commissioning organisations and providers increase sharing of best practice and develop common protocols across the sector 	<ul style="list-style-type: none"> • No of network meetings with health social care and social welfare services • Minutes from each meeting to be submitted to lead commissioner • 	4 per year
<p>Outcome 2 Reduce demand and costs on health, social care and social welfare</p>	<p>Through digital portal, helpline and outreach</p>	<ul style="list-style-type: none"> • Record of client and case note • No of people referred to ASC triage team • No of people using low level equipment/assistive technology as a 	100%

service by providing information and advice as early as possible		<ul style="list-style-type: none"> result accessing the service No of people signposted to and supported to access wider universal and community services 	
Outcome 3 Residents have access to joined-up information and advice services when they need it to remain independent longer	Through digital portal, helpline and outreach	<ul style="list-style-type: none"> Record of client and case note No of people provided with information, advice and advocacy No of people referred to ASC triage No of people supported to make appointments with other agencies No of people signposted to other agencies No of people provided with support forms (benefit, forms, housing forms, travel concessions) No of people provided with support to deal with financial matters No of people provided with information and advice about housing/accommodation needs 	100%
Payments by Results on digital channel shift	<ul style="list-style-type: none"> Number of residents accessing the digital portal for information and advice to increase by 10% each year from year 2 onwards. Regularly updated and accurate 		10% increase from year 1 of traffic on the digital portal use.

	<p>information and advice content and directory of services.</p> <ul style="list-style-type: none"> • A reduction of calls coming into the helpline by 10% from year two onwards as more people access or are supported to access the digital portal 		<p>10% reduction in phone and face-to-face contact from year 1</p>
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