Schedule 2

Contract Management, Performance and Quality Assurance

Performance and Quality Assurance Standards

Providers will be monitored against a number of predetermined performance and quality standards which are highlighted in the Schedule.

The objectives of the Performance and Quality Assurance standards are to:

- ensure that the Services are of a consistently high quality and meet the requirements of the Councils;
- provide a mechanism whereby the Councils can attain meaningful recognition of inconvenience and/or loss resulting from the Provider's failure to deliver the level of service for which it has contracted to deliver; and
- Incentivise the Provider to comply with and to expeditiously remedy any failure to comply with the Key Performance Indicators.

The Provider shall, at all times, provide the Services in such a manner that the Key Performance Indicators and Outcomes are achieved. The Provider will also be committed to continuous service development.

1. Quality Specific Standards

The Provider is expected to have in place a robust governance framework and supporting processes, which ensure that it is compliant with appropriate legal requirements and standards. Minimum required policies and procedures are included in Schedule 1 8.6.

All appropriate policies and procedures must be in place following contract award and prior to the service mobilisation phase being completed. The Councils would expect to receive information and assurance that these are current and in place [including with subcontracted services]. Clear and routine review arrangements to maintain effective governance would also be expected. Service users must be made aware of the range of policies which may impact upon their support and be given access to them should they wish.

1.1 Quality Performance Mark

The Provider (and any sub-contracted Provider) is expected to hold and maintain the Advocacy Quality Performance Mark (QPM) or equivalent quality standard for the duration of the contract period. The Councils must be notified if an equivalent standard is to be held.

If the Provider does not hold this prior to the contract start date, they must achieve the QPM within the first year of the contract.

If the Provider is unsuccessful with either achieving or maintaining the QPM they must notify the Councils and include a plan on how they will improve in order to achieve it and undertake a reassessment.

Failure to achieve the QPM following reassessment shall constitute a Service Failure.

2. Performance Indicators

2.1 Performance Management Reporting

The Provider must ensure that a dedicated 'Performance Management Function' is established as part of the contract to provide system wide reporting. The Provider will ensure the effectiveness of such reporting, demonstrating assurance processes for systems and procedures to commissioners and other key stakeholders, and support the continued development of both output and outcome monitoring for the service.

The Provider is required to complete performance checks in relation to Service delivery to ensure that outcomes and contract compliance are being met.

a) The Provider is responsible for having performance and quality assurance processes that are capable of providing evidence of achieving outcomes, quality of Key Performance Indicators
b) It is the Providers' responsibility to submit performance and quality information as per the schedule and failure to complete and return the required information will be dealt with under Service failure and contractual action
c) The Provider must have robust business continuity and contingency plans in place with regards to all levels of Service interruption or disruption. If Service interruption or disruption occurs, the Provider is to notify the contract manager at Cheshire East Council immediately and ensure that alternative provision is sought,
d) The Councils will hold quarterly contract monitoring meetings and the Provider must ensure that their nominated manager(s) attend these meetings.
e) The Councils reserve the right to review or amend the contract management and quality assurance process during the contract term with one months' written notice

Reporting requirements may change over the lifetime of this contract to embrace wider governance reporting structure requirements. For example, following the implementation of LPS further monitoring information will be required.

2.2 Key Performance Indicators

The Councils have set the following Key Performance Indicators (KPIs) and targets, which will be used as part of the Service evaluation. KPI and output data will need to be submitted in line with the reporting frequency noted below.

KPI	Target	Reporting frequency
Number of service briefings delivered at local authority team meetings	Minimum 2 per quarter	Quarterly

Number of service briefings delivered at health partner meetings	Minimum 2 per quarter	Quarterly
Number of service briefings delivered to 3rd party stakeholder / partners	Minimum 2 per quarter	Quarterly
Number of general awareness raising opportunities delivered to the local community using a range of communication methods (i.e. social media, face to face events, promotional material)	Minimum 2 per quarter	Quarterly
Percentage of referrals that have been triaged and allocated to an advocate within 2 days (excluding weekends and bank holidays)	95%	Quarterly
Percentage of referrals where the service user has been contacted within 2 days	90%	Quarterly
Percentage of service users that have had their case resolved to the agreed milestones within the time agreed with the Provider	80%	Quarterly
Percentage of closed cases where referrers have submitted feedback / outcomes questionnaire	75%	Quarterly
Percentage of closed cases where service user feedback has been obtained	30%	Quarterly
Percentage of IMCA reports produced that meet legislative requirements	100%	Quarterly

Providers which fail to reach the relevant KPI targets, or do not adhere to specified timescales for submitting KPI information, will be subject to performance improvement measures.

2.2 Management Information

Alongside KPI data the Provider shall provide a monthly return to the Commissioners providing the following information in relation to the reporting period for both Cheshire East and Cheshire West and Chester. The overarching advocacy intervention types to be reported on are IMCA, RPR, IMHA, Care Act, Continuing Healthcare and Exception Advocacy (for Cheshire West only).

Data Required	Additional information breakdown	Advocacy Type	Reporting Frequency
Number of new referrals	Referral source Age range breakdown	All	Monthly

Total number of hours used	New cases Carried forward cases Referral source	All	Monthly
Number of cases carried forward	Cases carried forward from previous reporting period	All	Monthly
Number of cases closed	In reporting period	All	Monthly
Number of referrals rejected	List of rejection reasons Where rejected referrals referred on to	All	Monthly
Number of cases where service has been withdrawn	List of reasons	All	Monthly
1.2 Reps	Number of referrals Number of hours	IMCA	Quarterly
Litigation friend	Number of referrals Number of hours	IMCA	Quarterly
Number of individual service users	Age range (needs to capture age 16-18 separately) Referral source No of different advocacy interventions supported with	All	Quarterly
Average length of time cases open	Age range break down	All	Quarterly
Court of Protection	Number of cases escalated to court of protection Number of DoLS extended by CoP & RPR instructed without referral	IMCA / RPR	Quarterly
Number of hospital managers meetings attended		IMHA	Quarterly
Care Act - reason for advocacy support	Based on eligibility criteria	Care Act	Quarterly
Prison advocacy	Number of referrals Number of hours	Care Act	Annual
Exception Advocacy (please see 4.7.3.2 of the service specification surrounding service usage)	Type of support delivered	Non statutory / by exception	Quarterly

2.3 Quarterly Narrative Report

The Provider shall complete a quarterly narrative report for each local authority which will provide details of each of the areas identified in the table below.

Area	Information Required
Referrals and cases	• Trends • Unmet needs • Delivery methods – no of face to face, online, telephone • Waiting lists by advocacy type and local authority
Out of Area	• Number of referrals (including source, advocacy type and location) • Number of cases supported by Provider out of area • Number of cases supported by spot purchase arrangement with 3rd party provider • Agreed hourly rates achieved • 3rd party hourly rates
Service Delivery Issues	• Safeguarding • Staffing update including vacancies, recruitment, sickness levels and training update (including volunteers) • Quality mark progress update • Covid-19 challenges • Complaints
Partnership Working and Awareness Raising	• Communications plan update • Partnership organisations linked in with and how • Informal / formal awareness raising carried out in quarter
Outcomes	• Update on Outcomes achieved include methods used and outcome type • Case studies (1 per advocacy type)
Risks	• Commissioners to be made aware of any presenting risks

LPS (when timescales are known)	• Update • Transition plan
Continuous Service Improvement	• Update on 360º feedback with social work teams • Lessons learned
Peer support & volunteers	• Volunteer recruitment • Activity / where volunteers are supporting • Peer support update
Social Value	• Update on achievement of social value outcomes

2.5 Submission of Returns

The Councils are committed to simplifying the collection and analysis of monitoring information and will implement a process which will require submission of information electronically either by email or a secure portal. The Provider is required to have the facility to undertake this. The Provider will strictly adhere to the timescales set out in this Schedule for returning monitoring information and failure to do so will result in service failure and / or contractual action being taken.

In the event that the Provider fails to submit accurate monitoring information in accordance with this schedule, this shall constitute a Service Failure.

Monthly performance and monitoring information should be returned by 14th day of the following month. Quarterly information should be returned as per below schedule:

Quarter	Return by
1 (September to November)	14th December
2 (December to February)	14th March
3 (March to May)	14th June
4 (June to August)	14th September

Contract review meetings to be held approximately one week after the return of the quarterly information.

3. Outcomes

Outcomes can be defined as "what a person wishes to achieve in order to lead their day-to-day life in a way that maintains or improves their health and wellbeing. These outcomes will vary from one person to another because each individual Service User will have different interests, preferences, relationships, demands and circumstances within their lives".

The Provider must deliver a service to meet individual service user and high level service outcomes and the service is to be delivered in line with the ethos and standards as detailed in the Service Specification.

3.1 Outcomes Measures

The high-level service outcomes are listed below. Providers can demonstrate how these outcomes have been achieved through the use of case studies, referrer feedback, service user feedback and performance indicators (examples are included in the table below) Update on outcomes achievement to be detailed in the quarterly monitoring report.

Outcome	Service delivery	Reporting method / tool
Person centred care	Service User at the centre, rather than fitting them into services	Case studies, Feedback Individual service user outcomes
Appropriate workforce to meet needs	Ensure the workforce (Statutory Advocates, Provider and volunteers) has the appropriate skills, competencies, to meet the needs of Service Users accessing the Statutory Advocacy Service	Training matrix, staffing levels
Record keeping	Ensure that there is effective governance and systems in place and that accurate record keeping is provided and maintained for example for audit and reviews	Up to date policy and procedures relating to information governance
Access to a quality service	Ensure up to date, accessible information in respect of legislation, and staff are appropriately trained	Achievement of quality mark
Choice and control	Service users will be represented to express their views, needs, rights and preferences to support them in decisions made about their care, support and treatment	Case studies Feedback Individual service user outcomes
Greater understanding	Service users will have greater understanding of and involvement in the planning of their care and support	Case studies Feedback Individual service user outcomes
Self-advocacy	Service users, family and carers will be better equipped to advocate for themselves in the future. Individuals will have greater confidence, capacity and skills to articulate their needs with or without assistance of an advocate.	Individual service user outcomes Service user feedback – ability to be able to advocate for themselves
Service delivery model	Service users will benefit from a range of advocacy approaches and interventions to meet different requirements, needs and service user groups	Performance and management data

Safeguards from Abuse or Risk of Abuse	Ensure that policies and processes are in place which safeguard Service Users from Abuse or Risk of Abuse, for example appropriate checks such DBS, references, CQC registration	Up to date policy and procedures relating to safeguarding
Right to challenge / complain	Ensure that there is a system in place so that Individuals are informed and empowered and understand their right to challenge / complain	Service user feedback – awareness of complaints procedure

3.3 Individual Outcomes

Individual level service user outcomes may be associated with a number of the high-level outcomes listed above.

The Provider is required to meet individual Service User outcomes using a person-centred assessment, support planning and service delivery approach. Every Service User should have their own outcomes documented and delivered in relation to their own personal needs.

It is the Provider's responsibility to measure and present the impact of individual outcomes of Service Users and the Councils. The format and method for measuring Outcomes will be at the discretion of the Provider; however the Councils reserves the right to request the Provider to alter the format, method or content of the measurement used in order to ensure that the relevant information is obtained and documented.

Service user and referrer feedback surveys are one way of the Provider determining and evidencing that outcomes have been supported and achieved.

The Councils may at their discretion gather Service User insight information. The Councils may ask the Provider to address any issues which are highlighted through this insight information. The Provider will take steps to address the issues raised by the Councils within the timescales set out.

4. Social Value

4.1 Social Value KPIs

The Provider must report against the Social Value KPIs selected during the procurement process. These are based upon each Council's Social Value Framework and/or Policy:

- https://www.cheshireeast.gov.uk/pdf/business/procurement/cheshire-east-social-value-framework-july-21.pdf

- https://www.cheshirewestandchester.gov.uk/your-council/policies-and-performance/council-plans-and-strategies/social-value/documents/social-value-policy-2021-25.pdf

The Provider should apply for, and aim to be successful with their application to, the Social Value Award within the first 12 months of the contract being awarded. The Provider will report on the progress of their application and when they have been successful.
https://www.socialvaluebusiness.com/social-value-award---cheshire-and-merseyside

4.2 Social Value Outcomes

The Provider must also report on the progress / impact / outcomes of the specific Social Value pledges made within their tender submission.

For example:
- Giving staff time / expertise / skills - the provision of staff as volunteers to support local community projects in Cheshire East using the Council's Volunteer Portal https://cheshireeastvolunteers.co.uk/
- Funding / financial contributions - supporting local projects in Cheshire East promoted via the Crowd Funding Portal:
  https://www.spacehive.com/movement/ce/
- Environmental pledges – linked to the priorities within Cheshire East Council's Environmental Strategy and Carbon Neutral Action Plan and Cheshire West and Chester Council's Climate Plan:
  https://www.cheshireeast.gov.uk/environment/carbon-neutral-council/environment-strategy.aspx
  https://www.westcheshireclimateplan.co.uk/

Case studies can be used to demonstrate the Social Value impact achieved by Providers.

5. Data Submission KPIs

The below KPIs are relevant to any information or data which the Provider is contractually obliged to submit to the Councils, including finance data, monitoring returns and any other information as detailed within the Monitoring Schedule or Service Specification.

a) **Timeliness of data and information submissions**
Providers are to submit the required data and information to the Councils as per the stated timescales e.g. weekly, monthly, quarterly
Target: 95%

b) **Accuracy of data and information submissions**

Providers are to submit accurate data and information to the Councils (and are to ensure that any checking processes put in place by the Councils is adhered to prior to submitting the data or information) **Target: 95%**

If data or information is not submitted to the Councils as per the required timescales for three consecutive periods, then this will result in consistent failure and improvement action being taken.

The three periods are proportionate to the set timescales in place within this agreement, e.g. if a data submission is required on a weekly basis and the data has not been submitted for three weeks this will result in service failure.

6. Underperformance by Provider

Should the Councils identify that a Provider is underperforming against the terms of the Agreement:

a) the Councils may without prejudice to its other rights and remedies initiate one or more of the following: a Quality Assurance Form, Quality Assurance Visit or Contract Review Meeting
b) The Provider must produce a Service Improvement Action Plan which will be agreed with the Councils and the Councils may specify additional actions or requirements proportionate to any underperformance
c) Suspension of referrals to the Provider may be initiated where any monitoring or feedback obtained exposes performance issues or incidents relating to breaches in Service delivery, which may also include safeguarding incidents

Where improvements are evidenced and the required standard reached, referrals will be resumed to the Provider, initially with a phased approach which will be decided by the Councils.

6.1 Implementation of Improvement Action Plan

Approval and implementation by the Council of any Improvement Action Plan shall not relieve the Provider of any continuing responsibility to achieve the Key Performance Indicators, or remedy any failure to do so, and no estoppels or waiver shall arise from any such Approval and/or implementation by the Council.

7. Contract Management and Quality Assurance Governance and Validation

7.1 Contract Management and Quality Assurance Meetings

The Provider will be required to attend regular contract management and quality assurance meetings chaired by representatives of the Council. These meetings will be set by the Councils from the Commencement Date and will usually be in three monthly intervals.

The Councils will arrange to meet with the Provider at least every quarter to review its performance against the provisions of this Specification and to discuss its plans for Service improvement. The Councils reserves the right to alter the frequency of these meetings. Wherever possible, the meetings will be arranged by the Councils in such a way that they do not impede the Provider in the delivery of the Service.

7.2 Monitoring and Quality Assurance Visits / Audits

From time to time, officers from the Councils may visit the Provider to verify evidence of service activity and compliance with the requirements of the Agreement and the Specification.

The Councils will decide which Council representatives are to be in attendance at the meetings which may include Council staff from teams other than Commissioning / Contract Management and Quality Assurance.

Monitoring and quality assurance visits can be announced or unannounced and will be carried out by Council representatives. Monitoring and quality assurance visits can be carried out as part of a routine monitoring schedule for Providers to ascertain contract compliance or in response to general or specific concerns. The visits have no set duration and will depend on what aspects of the service are being monitored and quality assured.

The visits or audits can include on-site visits to the Providers offices and Council representatives have the right to access all information in relation to the support planned for or provided to Service Users, including:
   a) Full staff and volunteer records (including DBS checks, insurance details, references, application forms, supervisions / appraisal records, disciplinary records, training records)
   b) Full service user records (including support plans, risk assessments, reviews, referrals to other professionals)
   c) Full complaints records (including details of complaints, investigation, responses to complainants, actions taken)
   d) Full safeguarding records (including details of safeguarding alerts and concerns, enquiries, responses to safeguarding allegations, actions taken
   e) All levels of insurance certificates
   f) Any other documentation deemed relevant by the Council to ensure quality of service delivery

The Council may also undertake spot checks to satisfy itself as to the ongoing quality of service delivery and to validate performance data. Should any issues be identified, the Provider will ensure that remedial action is taken as per the Councils feedback and within the timescale specified at the time of notification or discussion.

Additional or more in-depth inspections or monitoring will be triggered by any of the following:
   a) Failure to meet required Key Performance Indicators or Best Practice elements
   b) Contract monitoring non-compliance

c) Consistent Failure
d) Concerns arising from previous inspections and reviews
e) Concerns arising from Service User or representative feedback
f) Social care or health concerns / feedback
g) Complaints (including verbal, written, formal and informal)
h) Whistle blowing
i) Any other issues deemed to be a risk

8. Consistent Failure

In this agreement, Consistent Failure shall mean:

(a) a failure to meet:

(i) Five or more of the Target KPIs in a rolling twelve-month period
 OR
(ii) One or more Data Submission KPIs in a rolling twelve-month period

[AND/OR]

(c) the Councils serving Two Remediation Notices in a rolling twelve-month period

[AND/OR]

(d) the Provider repeatedly breaching any of the terms of this agreement in such a manner as to reasonably justify the opinion that its conduct is inconsistent with it having the intention or ability to give effect to the terms of this agreement.

Appendix 1. Cheshire East Council Social Value Framework

Priority		Social Value Theme		
High Level Outcomes	**Metrics / Indicators**	**Social**	**Economic**	**Environment**
Healthier, safer and more resilient communities	No. of hours **volunteering** time provided to support **local community projects**	✔	✔	
	Enable and encourage staff on the contract to safely **volunteer** within their community or participate in local support networks - particularly to help people in **most vulnerable groups** (at risk categories), people self-isolating and local essential workers.	✔	✔	
	Volunteering with **environmental** conservation initiatives or engagement in multi-stakeholder and advocacy initiatives around environmental conservation and sustainable ecosystem management - resources invested including time, funds and in-kind contributions	✔		✔
	Donations or in-kind contributions to **local community projects** (£ & materials) (option to use the Cheshire East Crowd Funding Portal)	✔	✔	✔
	Initiatives taken or supported to engage people in **health interventions** (e.g. stop smoking, obesity, alcoholism, drugs, etc.) or **wellbeing initiatives** in the community, including physical activities for adults and children (option to use the Cheshire East Crowd Funding Portal)	✔	✔	
Jobs: Promote Local Skills and Employment **Growth - Supporting Inclusive, Diverse and Responsible Business**	Contract awarded to a **local** organisation based in the borough of Cheshire East	✔	✔	
	Total amount (£) spent in **Local supply chain** through the contract	✔	✔	
	Total amount (£) spent with local **Micro and Small enterprises** within your supply chain through the contract	✔	✔	
	Total amount (£) spent with **VCSEs** within your supply chain			
	No. **SMEs and VCFSEs** within the supply chain	✔	✔	
	Number and % of **local people** (Cheshire East residents) **employed** on contract (FTE) (priority groups 18-24yrs and 50yrs+)	✔	✔	
	No. of **apprenticeships** on the contract within the financial year	✔	✔	
	No. of weeks of **apprenticeships** on the contract that have either been completed during the year, or that will be supported by the organisation to completion in the following years - Level 2,3, or 4+	✔	✔	
	No. of employees (FTE) hired on the contract who are **long term unemployed** (unemployed for a year or longer) as a result of a recruitment programme	✔	✔	

	Percentage of staff on contract paid at least the relevant **Real Living wage** as specified by Living Wage foundation	✔	✔	
	Provision of **expert business advice to VCSFEs and SMEs** (e.g. financial advice / legal advice / HR advice/HSE)	✔	✔	
	Number of **voluntary hours** donated to support **VCSFEs** (excludes expert business advice)	✔	✔	
	No. of **employees** on the contract that have been provided access for at least 12 months to multidimensional **wellbeing programmes** that include flexible working time arrangements; healthy nutrition options; physical health programmes; a health risk appraisal questionnaire; access to health and wellbeing resources (e.g. a tailored health improvement web portal; wellness literature; and seminars and workshops focused on identified wellness issues)	✔	✔	
Promote environmental sustainability	Direct **carbon reductions (CO2e)** (against business as usual) from buildings, fleet, business travel, streetlighting, waste and water use. (specify how these are to be achieved)			✔
	Direct **carbon reductions (CO2e)** in Cheshire East (against business as usual) from energy use e.g. for housing, transport, agricultural, commercial and industrial emissions.	✔	✔	✔
	Reductions in embodied carbon emissions (against business as usual) from construction and production of goods and services.		✔	✔
	Vehicle/fleet emissions monitoring programme on the contract, including data collection (miles, type of vehicle, engine type, emission standard)	✔		✔
	Does the organisation have an **Environmental Strategy or Policy** with measurable and time specific carbon reduction targets in place above and beyond national policy (Net-zero by 2050).		✔	✔
	Initiatives to ensure that the positive impact on **local green space** as a result of the contract will be maximised	✔		✔
	Donations or investments towards initiatives aimed at **environmental and biodiversity conservations and sustainable management projects** for both marine and terrestrial ecosystems (option to use the Cheshire East Crowd Funding Portal)	✔		✔
	Initiatives to **minimise waste, increase recycling** and promote the circular economy.		✔	✔

	% of procurement value subject to recognised **environmental standards** (e.g. ISO14001, PAS2060, FSC, etc.) to control environmental impacts.		✓	✓

Appendix 2. Cheshire West and Chester Council Social Value Priorities

The National TOMS Framework (Themes, Outcomes and Measures) was developed by the National Social Value Taskforce in 2019 and updated in 2021. The TOMS are set out against the four themes of Jobs, Growth, Social and Environment, the table below sets out how these themes map against the Council's corporate priorities.

Corporate Priority	Linked to Social Value Themes			
	Jobs	Growth	Social	Economic
Tackling the climate emergency				✓

A fairer future: Tackling the poverty emergency	✓	✓	✓	
Grow our local economy and deliver good jobs with fair wages for our residents	✓	✓	✓	✓
Support children and young people to make the best start in life and reach their full potential	✓	✓	✓	✓
Enable more adults to love longer, healthier and happier lives	✓	✓	✓	✓
Make our neighbourhoods even better places to call home			✓	✓
An efficient and empowering Council			✓	