SHEPWAY DISTRICT COUNCIL



**Appendix Ai – Specification (Lot 1)**

**Occupational Health Services**

INTRODUCTION

## 1.1 THE CONTRACT

The Council is seeking to award two contracts – one for Occupational Health services (Lot 1) and one for an Employee Assistance Programme (Lot 2). Both contracts are linked to effective absence management and enhancing the health and wellbeing of staff and it is noted that interested parties may be in a position to bid for both services. The Council may then offer one party to provide both services as one contract or two parties providing Occupational Health and Employee Assistance services independently. Quotes for each lot will be evaluated separately.

The Contracts are anticipated to commence upon 1st January 2017 and will continue for a period of 36 months with a possibility to extend for not more than an additional 24 months unless terminated in accordance with the Conditions of the Contract.

Unless otherwise agreed in writing by the Council, the successful Service Provider shall provide relevant services only to those employees of the Council which are referred on or after the Commencement Date of the Contract. Any employees referred to the incumbent supplier prior to the Commencement Date of the Contract shall remain with the said incumbent supplier.

## 1.2 THE COUNCIL

The Council is based at the Civic Centre, Castle Hill Avenue, Folkestone, Kent CT20 2QY

The District of Shepway is situated on the channel coast about 75 miles from London. It occupies a key strategic position and a gateway to continental Europe.

The district has an area of 140 sq miles (35,700 hectares) and has a natural, high quality environment with a number of distinct landscapes, communities and places of interest. The district is complex; often contrasting in terms of relative affluence and deprivation, with dense urban environments and rural isolation, and it is always changing.

Shepway boasts a rich variety of attractive landscapes, from rolling chalk downland and wooded valleys to marshes. It is fringed by the sea and has a coastline of more than 20 miles. More than 33 per cent of the district falls within the Kent Downs Area of Outstanding Natural Beauty and there are numerous wildlife sites and Sites of Special Scientific Interest. There is a wealth of notable heritage spanning the whole of British history including Iron Age and Roman settlements; medieval churches; Tudor castles and Napoleonic fortifications.

Shepway is home to almost 100,000 people, 47% of the population live in Folkestone and 22% live in the towns of Hythe and New Romney. The number of households is approximately 48,000.

The Council employs approximately 385 staff in a range of occupations. Approximately 80% are based at the Council’s Civic Centre in Folkestone and undertake a range of managerial, administrative, customer service and community based activities. Numerous roles, such as those involved in community safety or environmental protection, are not predominantly office based and work and travel throughout the district. The Council encourages flexible working; the majority of staff “hot desk” at the Council premises rather than having individual and permanent work stations and many work from home or in other locations regularly.

Approximately 15% of staff are manual workers, employed in grounds maintenance roles such as gardeners. The remaining 5% are based at the swimming pool in Hythe.

The Council employs about 20 people who work night shifts.

The required Services will support the corporate aims and business needs of the Council and enable it to meet its legal and moral responsibilities in terms of managing absence effectively, reducing sickness absence, promoting health and wellbeing and ensuring the health and safety of staff.

The Council expects to receive high quality Services from the Service Provider which amongst other things will include excellent communication and a close working relationship with the Council and its managers. The requirement also specifies a need for strong administrative support, fast turnaround times for off-site appointments, specialist reports and telephone support. In particular, the Council requires an Occupational Health service that provides specific advice and recommendations that will reduce absenteeism, enable the timely and successful return to work of absent employees, and support Council management in making decisions relating to absence management and employment.

The Council’s current Absence Management Policy is included as Annex 1.

# LOT 1 – Occupational health

## OUTLINE EXPECTATIONS

1. **Appropriately Qualified Practitioners**

The Service Provider should ensure that all staff working on the contract are qualified, competent, receive regular supervision, are members of the appropriate professional groups at the appropriate level (Members or Fellows of the Faculty of Occupational Medicine, for example), and maintain appropriate training and professional development.

In all cases, Occupational Health Nursing Advisers (OHNA’s), Physicians (OHP’s), Consultants (OHC) or other relevant medical practitioners who provide advice or reports to the Council must be appropriately qualified and experienced in Occupational Health/Medicine in-line with the appropriate Faculty of Occupational Medicine and/or Health and Safety Executive guidelines.

In the case of ill health retirements, the assessment must be undertaken by an Independent Registered Medical Practitioner (“IRMP”) who has not previously advised, given an opinion on, or otherwise been involved in the case and who is qualified in Occupational Health Medicine, registered with the General Medical Council and approved by the Kent Local Government Pension Scheme*.* The Service Provider will be expected to have a sufficient number of qualified personnel to enable this.

1. **Selection of Medical Practitioner and Assessment Method**

Where elements of the service may be provided by an appropriately qualified OHNA, OHP, OHC, or by some other occupational health / medical practitioner or specialist, depending on the particular nature of the case, the Service Provider may decide which professional is both the most appropriate and cost effective to undertake the medical assessment, give advice, and produce reports.

While face-to-face assessments are the preferred assessment method in the majority of cases, the Service Provider may decide that a telephone assessment is either acceptable (i.e. a face-to-face assessment is not required) or necessary (e.g. if the employee cannot attend a face-to-face due to the nature of their illness).

The Service Provider may determine the appropriate professional and assessment method through its triage / paper screening process or based on their assessment at a previous referral.

The Service Provider should ensure that clear criteria exist to assist in making such decisions and all such criteria should be agreed with the Council in advance.

1. **Location**

It is assumed that services will be provided at the Service Provider’s location(s) within the district of Shepway, or within East Kent and with easy access; it is important that the location(s) of the services is convenient to access for our employees.

Please indicate where services may be provided at Council premises or at any other location (such as the employee’s home) as this may be beneficial in some circumstances.

1. **Service Provision**

Services should be consistently provided Monday – Friday, during normal office hours, every week of the year.

The Service Provider will ensure satisfactory staffing levels are available to maintain service standards.

1. **Administration**

All administrative and clerical support in the management of, for example, pre-employment screening, work health questionnaires and resulting screening, management referrals, arranging appointment times, notifying staff of such appointments, producing appropriate reports and completing LGPS documentation et etc, shall be provided by the Service Provider within the costs specified in the schedule.

1. **Standard of Advice and Recommendations**

Occupational Health reports will contain management advice and guidance to the Council that will give objective, clear and unambiguous recommendations in matters such as fitness for work, adjustments, and the provisions / implications of the Equality Act so that appropriate management actions, such as the consideration of reasonable adjustments, redeployment or termination of employment, can be considered.

Where it is not practical to give such clear advice, an explanation should be provided so that any appropriate management actions can still be considered in the absence of such information.

It is therefore expected that expert advice will be provided where necessary on issues where the Council may be put at legal, financial or other risk, such as reputation, due to management or employee actions or inactions.

It is expected that the Service Provider will have an understanding of, and give consideration to, organisational requirements, working environment, relevant Council policy and procedures and the practically and reasonableness of recommendations when giving advice. The Council therefore expects the medical and administrative staff undertaking work on behalf of the Council to become familiar with the functions and services operated by the Council, the range of occupations employed and the environment in which the Council operates in order to be able to provide the Services effectively.

The scope of the advice given should ordinarily relate to the specific questions raised by the Council. However, the Service Provider should act proactively and also include advice that may be useful in supporting health and wellbeing, effective absence management, and making management decisions. Advice on wider matters that may not relate specifically to the referral may be raised separately to the individual referral response.

1. **Medical Investigations**

In order to provide reports containing suitable management advice and guidance the Service Provider should carry out all appropriate investigations for an individual referral and assessment. This may include, for example, the need to arrange a follow up appointment with the same medical practitioner at a later date or another medical professional within the occupational health framework, or the obtaining of a GP or specialist report.

Consent should be obtained from employee and HR Officer as appropriate.

1. **Timeliness of Services**

It is expected that the service provider will arrange appointments, undertake the appointment and provide the resulting advice report and in a timely fashion.

The maximum expected timeframes are:

**Pre-employment Screening & Work Health Questionnaires**: Screened (reviewed and triaged / assessed) within two working days of receipt. If a medical appointment and examination is required to ascertain whether medical clearance can be given, such a medical appointment should then be undertaken in line with the referral appointment timescales below. If further information is required from the referred individual / new employee then that individual should be notified within two working days of the receipt of referral / questionnaire. The resulting assessment should then be provided within two working days of this addition information being received.

**Notification of Appointment**: The HR Officer and the referred employee should be notified of the appointment date and time within two working days of the receipt of completed referral.

**Referral Appointment**: within two weeks (ten working days) of receipt of the completed referral.

**Advice Report:** The HR Officer and referring manager will be provided with a written occupational health report addressing the advice sought within three working days of appointment taking place. This includes “interim reports” if the advice is, for example, that the absence is ongoing and further medical advice is being sought or no advice can currently be provided regarding timescales.

**Specialist Report:** If a specialist or a GP's report is required, approval will be sought from the Council within two working days. If approved, a referral/request will be made by the Service Provider within two working days following this approval.

Where a specialist or a GP's report has been requested, but not received within ten working days the Service Provider will contact the relevant GP or specialist to progress the delivery of the information. The Service Provider will thereafter continue to progress delivery of the report every ten working days until resolved, keeping the Council informed of progress.

Upon receipt of a GP or specialist report the Service Provider will either:

* Notify the HR Officer and referred employee of an appointment within two working of days of receipt of the specialist or GP’s report. This appointment will take place within two weeks and advice report sent to the Council within three working days of the appointment, or
* If no further appointment is necessary, provide an advice report to the Council with three working days of the receipt of the specialist or GP’s report.

The Service Provider should communicate promptly with the Council if an agreed process or timescale cannot be met, and provide the reason for this, so that alternative arrangements may be agreed.

1. **Communication**

The Service Provider should establish in consultation with the Council Representative a contact and communications systems / methodology that enables each member of the Council to contact the Service Provider's contract staff quickly and clearly, to ensure that key information is communicated in a timely fashion and that where necessary clarification of matters within correspondence can be sought and provided quickly.

Electronic communication should be the predominant method where this is appropriate. It is expected that referrals and work health questionnaires will be submitted electronically using a standard form or template agreed with the Service Provider or through, for example, an electronic portal.

Medical advice and guidance resulting from a referral will be given by the Service Provider in writing in the form of medical reports.

The Service Provider will also need to undertake case reviews and discuss and advise on specific cases and results / outcomes with the relevant member(s) of the Council via telephone. If such reviews are at an additional cost to the referral, please indicate the cost of case management reviews in the price schedule.

It is the Council’s expectation that any calls from the Council in connection to the outcome of a referral or ongoing case will be responded to within two working days and, if related to the giving of medical advice, will be responded to by an appropriately qualified Occupational Health professional dealing with that case.

The detail of the initial communications systems / methodology will be subject to ongoing evaluation as a part of the quarterly contract performance and review meetings.

1. **Confidentiality and the Keeping of Records**

Confidential records must be kept by the Service Provider of all referrals and other aspects of delivering the Services to the Council. The service will be confidential to the individual and reports issued by the provider will comply with the access to Medical Records Act.

Health and medical records specific to an individual employee will be kept by the Service Provider as necessary, and at all times in strict accordance with all of relevant legislation in force, including but not restricted to the areas of Data Protection, Access to Medical Reports and Health Records, and Health & Safety.

The Service Provider will be expected to receive personal records from the incumbent service provider, which they must ensure are securely transported and adequately protected against loss.

Upon the expiration or earlier determination of this Contract the Service Provider will be required to pass all personal records on to any successor Service Provider, where this is necessary, in such a condition that enables the next Service Provider to manage that information effectively and in compliance with relevant statutory duties. Any such transfer shall only take place following the receipt of a writing instruction from the Council Representative to the Service Provider.

1. **Consent for Occupational Health referral**

As agreed with the Service Provider, employee consent to a referral will be obtained and employees will be informed of their rights under the relevant Access to Medical Reports Act.

Where the employee opts to see the report before it is supplied, the Service Provider must provide this to the employee in the required timescales and not unduly delay the sending of the report to the Council.

1. **Missed Appointments**

Where a referral or pre-employment medical examination appointment is made and the employee misses the appointment or cancels less than 24 hours before the appointment time, the Service Provider can charge for that appointment if they have been unable to obtain a replacement for that appointment.

The charge will be the same as that for the initial appointment.

Where an appointment is missed or cancelled at late notice, the Service Provider must contact the Council Representative immediately so that they can respond appropriately.

Where practicable, the cancelled appointment should, in the first instance, be offered to another employee from the Council.

If the Service Provider considers it appropriate to offer a new appointment to a person who has missed or cancelled an appointment, then the relevant HR Officer should be informed immediately of the reason for the cancellation and advised of the new appointment date and time.

1. **Management Reports & KPIs**

Key performance indicator reports will be required on a quarterly basis. Such reports should also include management information, statistical data and narrative, relating to activity levels, referral / absence reasons (such as work related stress, musculoskeletal etc), and outcomes and so that areas of concern can be highlighted and absence can be managed effectively. Prior to the commencement of this Contract the detail of the reports required by the Council will be agreed with the Service Provider and thereafter shall be subject to review as a part of the quarterly contract performance and review meetings.

1. **Contract Performance Review**

It is of great importance that the Services meet the requirements of the Council and the Service Provider must have arrangements for ensuring compliance with the Council's stated requirements in relation to confidentiality, data protection, health & safety, equalities and other statutory requirements.

Delayed access to the Services or to reports required by the Council as a part of the Services can have a significant and detrimental impact on the effectiveness of subsequent management action, and the benefit to employees. For this reason the timescales indicated in the specification will need to be closely followed and monitored.

The specific details of the Contract monitoring and if necessary any process improvement planning aspects of the Contract will be agreed between the Council and the Service Provider during the contract run-in process and in any event before the expiration of the first month of delivery of the Services to the Council.

The Service Provider must ensure that the Contract is managed by a nominated Contractor Representative who will co-ordinate the provision of the Services.

The Contractor Representative will attend quarterly contract performance and review meetings, at no extra cost, to review the levels of service undertaken and any quality issues.

Both the Service Provider and the Council will also have the opportunity to discuss during these meetings:

* the general ongoing delivery / performance aspects of the Contract
* occupational health related policy and practice, either in general or related to specific cases
* to seek / suggest changes to the communication or reporting methodology
* to informally raise any issue on a without prejudice basis for discussion / resolution.

The Council may require the Service Provider to attend meetings more or less frequently, particularly in the early stages of the contract, if felt necessary.

The Council will take all actions which it considers both appropriate and reasonable throughout the Contract Term in response to a failure of the Service Provider to meet the stated timescale or quality requirements where attempts to improve have been unsuccessful.

Good performance in respect of the quality and timescales will be taken into account by the Council when considering the possible extension of the Contract Term.

1. **Invoicing**

The Service Provider should invoice the Council monthly ensuring that a breakdown of all Services provided is shown.

The Service Provider must keep sufficient records to justify any charges.

## ESSENTIAL SERVICES

1. The review of work health questionnaires and the undertaking of pre-employment health screening and “health clearance” assessments for successful job applicants once a position of employment has been conditionally offered.

Advice will be expected on:

* 1. Illness, impairment or disability (physical or psychological) that may affect the successful applicant undertake the duties and responsibilities of the post offered
  2. whether duties, responsibilities and working environment are likely to be detrimental to the individual’s health
  3. Recommendations and related guidance (including relating to the provisions of the Equality Act 2010) relating to aids, adjustments, assistance or adaptations to assist the successful job applicant in their employment if appropriate
  4. Information relating to prescribed medications, future treatment or investigations that may affect the successful job applicant

1. Annual health assessments for staff working regular night shifts and staff undertaking manual roles.

If such health assessments require groups of staff to attend medical examinations then such examination should take place on Council premises or at a nearby location in order to minimise disruption to operations.

1. Specific and objective advice and guidance regarding an employee’s fitness for workwhere a current employee:
   1. has become disabled or has a health issue that is affecting their ability to attend work or undertake the full functions of their role;
   2. has a long-term sickness absence;
   3. has a poor attendance record for health reasons, including advice on whether there is any underlying medical reason for short-term or frequent absence;
   4. has poor performance and health issues appear to be a factor;
   5. is part of a formal disciplinary or capability process and an assessment regarding the ability to undertake such processes or impact of health on performance, behaviour or actions is required;
   6. has concerns about health and wellbeing, or their manager has concerns, or any other circumstance where management believe a fitness check is required.
2. Advice regarding medication or other factors that may affect the employee at work
3. Whether, in your medical opinion, the employee falls within the remit of the Equality Act 2010. Reference to the Equality Act and any potential implications must be included in all advice reports.
4. Advice regarding work-related issues affecting health and attendance
5. Specific recommendations regarding temporary and permanent adjustments to, for example, working hours, duties, environment or equipment, that will enable an absent employee return to their post or enable Council managers to consider what might constitute suitable redeployment options. This would include advice regarding reasonable rehabilitation programmes / phased return to work and associated timescales.
6. Advice regarding short and long-term outlook including, for example, whether recovery will be full or partial, or whether conditions may be improving or deteriorating. Advice regarding, for example, the impact of this on the employee, expectations regarding future absence, and other employer considerations as a consequence.
7. Advice regarding future medical appointments, including specialist appointments, operations, treatment etc. Advice regarding the impact of this on the employee, expectations regarding future absence, and other employer considerations as a consequence.
8. Specific advice of recovery timescales and when an absent employee would be able to return to work in any capacity, or when this might be known.
9. Specific advice regarding ill health dismissal. While a managerial decision, if an employee is unable to return to their post or to work in any capacity in the foreseeable future, the Service Provider will investigate and advise on all options (including e.g. adjusted duties, hours and redeployment) which, ultimately, may include dismissal. In these circumstances, clear advice regarding the ability to return to work and, if appropriate, recommendation regarding ill health retirement or dismissal on grounds of ill capability is required.
10. The undertaking of Ill health retirement assessments and completion of associated Local Government Pension Scheme declarations to award Tier One, Tier Two, or Tier Three ill health retirement benefits to current or previous employees with deferred pension.

In ill health retirement cases, an Occupational Health Physician who meets the Local Government Pension Scheme definition of an “independent” consult is required to undertake the medical examination and assessment. This Independent Registered Medical Practitioner ("IRMP") is defined as not having previously advised, given an opinion on, or otherwise been involved in the case and who is qualified in Occupational Health Medicine, is registered with the General Medical Council, and is approved by the Kent Local Government Pension Scheme. In order for ill health retirement benefits to be awarded, the IRMP must certify that as a result of ill health or infirmity of mind or body an employee is permanently incapable of performing the duties of their current employment and:

* 1. Are unlikely to be capable of undertaking gainful employment before their normal pension age (Tier One) or,
  2. Are unlikely to be capable of undertaking any gainful employment within three years of leaving, but likely to be capable before their normal pension age (Tier Two) or,
  3. Are likely to be capable of undertaking gainful employment within 3 years or before their normal pension age if earlier (Tier Three).

Where an employee has had their contracted hours and pensionable pay reduced, the IRMP may also be required to confirm that this was as a result of the medical condition that caused the ill health retirement.

Of course, it is expected that the IRMP will complete all the necessary investigations into an individual employee's health and fitness and have considered and any other options (such as redeployment, adjusted duties) prior to the issuing of a Certificate of Permanent Incapacity.

A copy of this form is enclosed for information as Annex 2.

1. The undertaking of Local Government Pension Scheme Tier Three reviews.

Required 18 months after the award of Tier Three ill health retirement benefits.

If the person in receipt of a Tier Three pension is not in gainful employment after 18 months, an Independent Registered Medical Practitioner ("IRMP") who is qualified in Occupational Health Medicine, registered with the General Medical Council and approved by the Kent Local Government Pension Scheme must undertake a review and check the latest medical position.

The IRMP that undertakes this 18 month review may be the IRMP that originally advised the award of Tier Three ill health retirement benefits.

At this review, IRMP may advise the cessation of the Tier Three pension (i.e. where the person has or is now capable of obtaining gainful employment), the continuation of the Tier Three ill health retirement benefits, or that the award of Tier Two benefits would now be appropriate.

1. Telephone advisory service and case management review. Relevant members of the Council, such as the HR Officer, line or senior manager, may discuss specific cases with the relevant OHNA, OHP, OHC, or other occupational health professional in order to discuss referral outcomes or obtain further advice and guidance to make effective and reasonable management decisions. If such reviews are at an additional cost to the referral, please indicate the cost of case management reviews in the schedule below.
2. Where appropriate, directly advise the individual employee, including on referral to other medical professionals such as GP, Counselling, or support available.
3. Where appropriate, general advice may be requested or given (where it becomes apparent to the Service Provider from their involvement with the Council and absence cases) by the Service Provider on matters within their remit and/or expertise on matters such as trends, clusters of problems, impact or potential impact of organisational practices or change.
4. Where appropriate, the Service Provider may be requested to advise on ad hoc issues that arise. While not necessarily exhaustive, such matters may include:
   1. ergonomic/work place design, potentially including work place assessments
   2. transmittable diseases, potentially including advising an employee(s) who may be distressed or concerned following an incident that was either hazardous or perceived to be hazardous
   3. general health, wellbeing, fitness and nutrition
   4. welfare issues
   5. substance misuse.

If it is not appropriate for the Service Provider to advise on such issues then an explanation should be provided and alternative contacts and sources of advice that the Service Provider may be aware of be given.

1. If required, the Service Provider should provide evidence for, or attend to give evidence to, any court, Employment Tribunal, other legal body or the Council’s insurers relating to any advice, opinion or recommendations given to the Council by them.
2. The Service Provider will be asked for general advice on health/absence related policies and procedures, especially when these are being reviewed.
3. The Service Provider should proactively provide the Council with prompt interpretation/advice concerning any court judgement, medical or legal updates that the Council needs to consider.

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| **KPIs - OH** | | | |
| **Service Level Description** | **Targets** | **Minimum Acceptable Performance** | **Measured by:** |
| Screening of Pre-employment & Work Health Questionnaires and management referrals | Within two working days of receipt | 100% | Quarterly Management Information |
| Notification of Appointments | Within two working days of referral | 100% | Quarterly Management Information |
| Appointment | Within two weeks (10 working days) days of referral | 95% | Quarterly Management Information |
| Advice Report | Made available within three days after consultation | 95% | Quarterly Management Information |

## optional SERVICES

The following optional elements may or may not be taken up by the Council at any time during the Contract and Service Provider should therefore indicate if these are services they can provide, whether they will be at an additional cost, and what that cost shall be:

1. Immunisation programmes.

The Council may offer (but does not require) employees in certain occupations vaccination against Hepatitis B.

The Council may offer annual influenza vaccinations to all employed staff.

1. Training sessions or health and wellbeing courses such as stress management.