



## London Borough of Southwark and South East London Clinical Commissioning Group

# Community-based Re-ablement Tender

Appendix 1
Workforce Schedule

#### Introduction

This schedule to the service specification recognises the importance of there being a highly skilled, trained, motivated and empathetic workforce to deliver reablement at Home in Southwark. The schedule has been developed with input from professionals in the area. Taking account, the views of a wide range of stakeholders, including care workers.

It covers five interrelated areas:

- 1. A Work force Statement
- 2. Pre employment and recruitment
- 3. The role and core competencies of the Reablement Care Worker.
- 4. Supervision, appraisals and team working
- 5. Training and qualifications

#### 1. A Work force Statement

Reablement services requires a well trained and empathetic workforce that is well supervised and supported by their line managers. At the same time, the care and support workforce is often under valued by the wider health and social care economy. Although the vast majority of workers do a good job in often difficult situations, this required standard of support and care is not always universally delivered. The re-ablement work force therefore needs to be supported to universally adopt or learn the values, behaviour, skills and competencies required to achieve the best possible individual outcomes, supporting improved independence, self-care and improved wellbeing with service users and to help deliver the the wider strategic objectives of the local health and social care economy.

The Council's Future Vision for Social Care 2016 (Objective 4) explicitly recognises this need:

http://www.skillsforcare.org.uk/Learning-development/Funding/Workforce-Development-Fund/Workforce-Development-Fund.aspx

As a means of delivering this vision, the council is developing a social care academy to support the development of the health and social care work force in Southwark. Although this academy will primarily be involved in enhancing statutory social work's core competencies, there will be opportunities for care at home providers to work with both the council and other partners in the Local Care Network's (LCNs) to develop the local workforce further. This includes various NHS bodies, their peer providers and the voluntary and community sector.

Providers are likewise actively encouraged to access funding for training, such as those from Skills for Care

http://www.skillsforcare.org.uk/Learning-development/Funding/Workforce-Development-Fund/Workforce-Development-Fund.aspx

The Council also maintains a commitment to the Southwark Ethical Care Charter as set out in attachment 3 for general Care at Home which due to the nature of service delivery is a contractual obligation for these services. The emphasis upon training and the recognition of all care and support arrangements and the role of the workforce is still pertinent as is the requirement to pay the London Living Wage as a minimum.

#### 2. Pre employment and recruitment

Local people in Southwark will be a rich source of potential suitable employees to work within social care services. Although many of these individuals may not currently be employment ready. Providers are required to work creatively, through a variety of transparent means to ensure that their recruitment practices provide an opportunity for local people to work in the sector. Service providers will therefore need to demonstrate the social value of their work and work with the Local Job Centre Plus and take full advantage of apprenticeship schemes and other employment ready initiatives in Southwark.

Service providers will also be required to adopt recruitment practices that recognise the importance of a career pathway in care. The link below shows the Skills for Care mini site and the career pathways available:

http://www.skillsforcare.org.uk/Care-careers/Think-Care-Careers/What-is-adult-social-care/What-is-adult-social-care.aspx

When undertaking recruitment, the provider will also need to comply with Southwark's safer recruitment guidance (Set out in Attachment 1 of this schedule)

#### 3. The role and core competencies of the Workforce.

#### The workforce will:

- Need to develop further skills and aptitudes to appropriately support an increasingly frail service user group, who may demonstrate behaviour than some services find challenging.
- Be required to be proactive, engaging and have sufficient confidence to provide feed back to a range of health and social care professionals on a service users' progress, both verbally and in written form.
- During the term of the contract, there is scope that this communication may increasingly be through electronic formats. Therefore staff may be required in the future to demonstrate an ability to use information technology commensurate with their role (SMART phones/Tablets etc)
- Have sufficient training. At a minimum, workers will be required to possess functional skills at level 1 in these areas.

The link below sets out what this is and takes you to the government website. https://www.gov.uk/what-different-qualification-levels-mean/compare-different-qualification-levels

The link below shows a mini site for employers about the current qualification Routes by Skills for Care

http://skillselector.skillsforcare.org.uk/content/employers

Staff will not be expected to undertake work that is beyond the scope of the specification

The behaviours and skills the work force will need to possess when communicating with the service user, their family members or other support networks, will be to:

- Behave at all times in a caring empathic, encouraging and enabling way which respects
  the dignity of the service user and supports them to maximise their optimum level of
  independence, improved ability for self care and wellbeing
- Conversation and discussion with the service user as appropriate as identified in the support re-ablement plan and recognising what is important for the individual as set out in their "Who am I" schedule and in the individual outcomes established
- Carefully explain all actions taken and do so at a pace and in a way which the service user can understand.
- Speak clearly to service users, facing them when speaking, and be mindful of strong accents and people who may have limited hearing, poor eyesight or use hearing or other assistive technology aids to assist them with their communication.
- To get to know and understand the service users' culture and beliefs sufficiently to
  ensure that they are supported in such that these beliefs and values are respected.

- Communicate clearly with the service user, any family members who may be involved in the ways that are most appropriate to the service user and those others involved in their care. Demonstrating the expected verbal and written skills in English is required.
- When the understanding of language is an issue for either the worker or the service user the staff member should be able to seek advice from their manager and act accordingly.
- At all times demonstrating confidentiality and its professional boundaries in the context of information sharing with others- including family members and other people close to the service user.

## When working to support the service user in partnership with other professionals to deliver the outcomes in the support plan, the workforce must be able to:

- Understand the focus of the care is to deliver the outcomes as expressed on the care plan and the development, rebuilding or sustaining of independence and self-care that is provided in a person-centred way.
- At all times to work in a re-abling way, no matter what the task involved. Many adult service users may be recovering from a period(s) of poor health or experiencing the psychological and physical impact of a diagnosis of a long-term debilitating condition. Likewise, for many younger adults as they move from childhood to adulthood, will need to be encouraged to learn as many day-to-day independent living skills as possible. This means knowing the right pace to work at with each individual with a need to (re) build confidence or to support them to learn day to day personal independent living skills.
- Have the confidence and insight to recognise their role as part of a wider multi disciplinary team supporting the service user in their own home. This is not just with other staff employed by their employer, but also with council and NHS staff, voluntary sector agencies and other service providers.
- Have the confidence and level of training and support, to proactively feed back concerns and achievements of individual service users to these other professionals.
- Recording activity and progress on outcomes and goals achieved by and with the service
  user on the care / re-ablement plan kept at the person's home and in any other agreed
  records (ie MAR charts) Workers must be able to write clearly and concisely.
- Contribute directly to review meetings as required including those of Multi-disciplinary Meetings
- Have knowledge of the local community and its resources and enable service users to
  access those community facilities as effectively as possible, and contribute to the
  exploration of innovative care and support solutions which may meet any long term care
  and support needs, such as assistive technology or community based and universal
  services.
- Understand the requirements of safeguarding, have received the appropriate training, and can act effectively in the role of alerter within the Pan London Safeguarding policies.
- Provide the appropriate care to service users who demonstrate behaviour that may be challenging; including that of withdrawal and a lack of engagement, whilst having the good sense of when to record this and raise concerns with their manager and other professionals.

The workforce must be able to undertake a number of tasks and roles to achieve the outcomes as set out in the care plans. These being:

- Manual handling subject to adequate specific training and health and safety requirements
- Adjustment of beds or assistive equipment subject to the appropriate training and health and safety requirements
- Food and beverage preparation and basic food shopping on the basis of appropriate briefing about dietary and nutrition requirements
- Providing personal care and washing the service user in a re-abling way, seeking to
  identify and support improvements in independence and self care, whilst maintaining
  their dignity at all times. Where required, change pads, catheters (as appropriate),
  and making sure that everything is in place correctly- subject to appropriate training
  for some tasks (Such as catheter, tracidec care etc)
- Toileting and maintaining cleanliness and hygiene in relation to emptying and cleaning commodes and other continence aids/pads etc
- Maintain cleanliness of the domestic environment through their support to the service user and where required, delivery of support and care
- Shopping with the service user if identified in the support / re-ablement plan
- Using prepaid charge cards as required within the service users support/reablement plan.
- Sign posting service users who may be lonely and isolated to appropriate leisure
  activities, befriending and cultural/spiritual sources of support and encouraging the
  service user to maintain and develop their personal interests as far as they are able.
- Any other activity consistent with the overall outcomes identified in the care / reablement plan, which is agreed as being appropriate by the service user, the
  worker's manager and other professionals, involved

The handling of money and other financial transactions, including its collection or spending is permissible <u>only with advance authorisation</u> by the manager and on the basis of agreement with the other professionals, involved. The agreement must be noted in the care plan and on all case records together with details of any transactions undertaken.

#### The workforce has a role in preventing the wider well being of service users, eg:

- Ensure that service users are appropriately supported to comply and self manage (where appropriate) their medication regime in line with the outcomes stipulated on their care / re-ablement plan. Please see the medication schedule for further details.
- Supporting people to have good personal hygiene, working with District Nursing and continence services appropriately where required.
- Understanding and recognising trips and falls hazards or other environmental factors that could impact upon the service user's health, independence and well being within their home, and undertake remedial action or report to the appropriate body as required.
- Have an understanding of the health issues affecting a service user and recognising
  when there may be triggers that their health is deteriorating, or they are not
  complying with their treatment and to alert their own organisation/Medical, social care
  professionals or family members as appropriate, in compliance with the support plan.

#### 4. Supervision, appraisals and team working

A good re-ablement work force will be well supervised and supported and feel valued as part of a team. It is a requirement that:

- **Supervisions** All reablement workers receive planned and recorded individual supervision from their designated supervisor on at least a quarterly basis.
- Staff Appraisals All reablement staff have an annual written appraisal which includes a plan for training in the coming year and takes account of feedback from service users and other professionals
- Team working reablement staff should have the opportunity to meet periodically together to ensure that there is effective team working and communications

#### 5. Training and qualifications

#### **Qualifications and Credit Framework (QCF)**

The Care Certificate has replaced the Common Induction Standards that were previously covered by induction training for new staff. The Care Certificate is not a qualification in its own right but a set of standards that all care staff should be assessed as being competent in achieving before delivering care. It is incumbent on the service provider to ensure that all recruits are proficient with these standards and demonstrate the competence required to achieve the outcomes required for service users.

As a minimum the Care Certificate must be fully completed within 12 weeks of starting employment with the service. From 2017 the Care Certificate will become a prerequisite for individuals to proceed to a Level 1 or Level 2 Diplomas. It is a requirement that service providers undertake a rolling programme of training of staff to increase the skills competency within the workforce.

How these diplomas relate to the Care Certificate and other qualification are set out in the table below.

Level	Qualification/Certificate Level		Diploma Equivalent	
3	A level AS		L 3 Extended Diploma	L3 Diploma
			(National Diploma)	(National Certificate)
2	GCSE Grades A – C		L 2 Diploma	
			(1 <sup>st</sup> Diploma)	
1	GCSE Grades D -G		L 1 Diploma	
			(Foundation)	
Entry level	Care Certificate		E 3 Diploma	
			(Foundation)	

#### **Enhancing core competencies**

It is possible to enhance the core competencies of the work force through professional development through innovation and partnership working. There are a number of areas where both people who use re-ablement services and professionals across the local health and social care economy have said that traditional training approaches sometimes do not appear to ensure that the whole workforce are equipped with the core competencies and skills necessary to do the job. The range of areas, although not exhaustive, includes:

- The user perspective on what person-centred care looks like
- What community resources are available in Southwark, particularly to those who are housebound and isolated.
- Working in an enabling way doing with as opposed to doing for as far as possible.
- Reablement and motivation
- Working with others
- Communications skills both verbal and written/IT, with both service users and other health and social care professionals.
- Medication management
- Equipment and assistive technology Practically understanding the main types of equipment that care staff will come across in their day to day work in Southwark
- · Early alerters of service users who are deteriorating
- Recognising trips and falls hazards in peoples own home.
- Condition specific requirements, for example supporting service users living with dementia, Parkinson disease, strokes learning disability / autism, functional mental health problems or alcohol / substance misuse issues.

There is also recognition across the system that resources across the local health and social care economy are increasingly tight. As a result, there is a desire from council, partner NHS organisations and community and user groups across the two local care networks in Southwark, to work with providers to enhance their training plans.

#### **Attachment 1 Recruitment**

service providers will be required to follow Southwark Council's safer recruitment guidance

#### **Checklist - Safer Selection**

#### The application form:

- Is designed (or customised) for work with children or adults
- Asks for full employment history, including part-time to nearest month,
- including gaps, since leaving full-time education (Chair to probe gaps at
- interview)
- Asks about any family relationship with existing employees or employers
- Asks for any other name the applicant has been known by
- Asks whether the candidate is a barred person under Deferred Barring Service (DBS) requirements

#### The person specification listing the required personal characteristics:

- Is devised by someone suitably knowledgeable or trained in selection
- Together with the job description, identifies duty of care / safeguarding
- requirements, including whether the post is in a regulated activity
- Identifies an enhanced DBS check is necessary; will include a request to
- undertake appropriate checks under the Children's Barred List and Adults
- Barred List
- Is sufficiently configured to fully test the suitability of candidates
- Indicates how the requirements will be tested during the selection process
- (e.g. group exercises, personality questionnaire, child abuse inventory,
- observed discussions)

#### Rigorous recruitment processes:

- Gaps in employment history / study are checked by interview panels
- Panel chairs take responsibility to identify referees to be approached
- Panel chairs 'sign off' appointment before a binding contract is formed
- Offers not appointments are 'made subject to'
- Verification of overseas workers suitability: qualifications, criminal records etc.
- Based on the Business Managers' Handbook and Department for Education
- guidelines on recruitment and selection

#### Recruitment processes are as rigorous for:

- Internal transfers to work with children and vulnerable people, including
- Agency, interims, consultants, volunteers or temporary staff

### Rigorous screening of non-staff personnel with unsupervised access to children and vulnerable adults e.g.:

- Volunteers; escort / and transport agencies
- Students on placement
- Consultants
- Contractors

#### Agency, bank, consultants, interim or temporary staff:

- Are not used 'frequently or for long periods'. The benefits of permanency
- should be promoted
- Agency staff are always engaged through Comensura with a safeguarding
- flag. The agency will need to confirm in writing that it has undertaken the
- necessary pre employment checks: identity check, rights to work, 2 references
- medical, DBS & related checks under the Children's Barred List and Adults
- Barred List, right to work, qualification etc
- Understand their responsibilities in line with the code of conduct
- Understand the need to inform the agency of any convictions or investigations
- before and during the engagement with the Council
- Know how to whistle blow / highlight concerns about children / vulnerable Adults

#### Attachment 2 Enhancing core competencies

Below are two examples that through innovation and partnership working, the skills of the workforce can be developed.

#### **Example one: Induction to working in Southwark**

#### The issue:

Stakeholder engagement has shown that work force training does not necessarily universally equip the workforce with the depth of knowledge and understanding to provide the level of person-centred support and care that is expected. It has been expressed that there is an opportunity; relatively early in a worker's employment, to take part in a half day paid induction. This being in addition to and following the award of the Care Certificate. It would aim to:

- To obtain an understanding of the role the service has in delivering the vision for adult social care in Southwark
- To understand how important the service users' voice in shaping, setting individual outcomes and in any delivery of care and support on the ground.

#### How this could be addressed

Set out in the table below, is a dummy half day session that could be delivered on a rolling programme to the workforce.

Item	Details	Partners who could work with to provide this training
The user experience	The voice of the user as to what is important for them when they receive support at home. Need for effective communications, empathy, dignity, kindness and respect along with motivation and encouragement to achieve improved independences, self care and wellbeing.	Service user or one of their representatives from the local voluntary sector (Healthwatch, Age UK)
Introduction to Adult Vision (or Southwark Families Matter priorities for the children's workforce)	Setting out the key priorities as they relate to the workforce, such as emphasis upon outcomes, Reablement, self directive support, Special Educational Needs and Disabilities local offer etc.	Council officer provides a short overview

Southwark's	Care navigation – An overview of	Representative of	
community sector	voluntary and community resources	Consortium of Older people	
	within the borough	Services in Southwark	
Dementia friends session	Understanding of the issues affecting	Local Dementia Champions	
session	people living with dementia and to	identified by the Southwark	
	become a dementia friend.	Dementia Action Alliance	

#### **Example Two: Prevention and reabling**

#### The issue:

Although the service user group will generally be people with long term disabilities or chronic conditions, there is always a potential to work with the service user with even limited capacity, to support them to take steps(no matter how small) to be as independent as possible and to improve their management of their self care. Re-ablement workers are in a unique position. They are some of the few health and social care professionals who will be seeing frail and chronically sick and disabled people in their own homes, usually on a daily basis. The workforce are therefore in a strong position to identify environmental issues within the service users home (trips and falls hazards) or signs that their physical or mental health or the service user is deteriorating, along with opportunities for improvement and change.

#### How this could be addressed

Set out in the table below, is a dummy half day session that could be delivered on a rolling programme to care at home workforce.

Item	Details	Who delivers
Alerting	Highlight things to look out for when a service user/patient's health is declining, when to contact GP/rapid response's etc.	NHS professional /GSST
Trips and falls	Alerting to major trips and falls hazards and sensible low-level precautions	Falls teams within the NHS
Reabling ways of working Equipment	How to install re-abling ways of working into their day to day practice.  Main items in use in Southwark	Council Reablement team / OT OT

#### Attachment 3

	Southwark Ethical Care Charter Criteria	Southwark ethical care charter
1	Time allocated will match needs of clients (not limited to 15mins)	✓
2	No minute-by-minute task-based commissioning or provision	<b>✓</b>
3	Workers will be paid for their travel time	✓
4	Local authorities and service providers will be transparent in their price setting	✓
5	Zero-hour contracts will not be used in place of permanent contracts	<b>✓</b>
6	Local authorities will monitor service providers, including working conditions of staff	<b>✓</b>
7	Service users will be allocated the same worker wherever possible	<b>✓</b>
8	Visits will be scheduled so that workers are not forced to leave to get to another service user	<b>✓</b>
9	Those workers eligible must be paid statutory sick pay	✓
10	Workers will be covered by the occupational sick pay scheme	<b>✓</b>
11	Providers will have a clear procedure for following up concerns about clients	✓
12	Workers will be trained (at no cost to themselves)	✓
13	Workers will be given time to meet co-workers to share best practice	<b>✓</b>
14	Workers will be paid at least the London Living Wage	✓