Schedule 5

Interface Obligations Mill House

Interface between Care Provider and Housing Provider

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1 Definitions

Authorised Officer	means the Commissioning Team and/or the Contracts Management and Quality Assurance team and/or the Care and Support Sourcing Team and/or the Adults Social Care Team
Care Manager	the Care Provider's on-site manager, whether or not they are the registered manager
Care Provider	the provider chosen to provide services to the Extra Care scheme.
Care Staff	all staff employed by the Care Provider, including agency staff, if applicable
Housing Provider	The Guinness Partnership
Output Specification	the Output Specification of the PFI Contract
Parties	Care Provider and Housing Provider
Scheme Manager	the Housing Provider's on-site manager

2 Principles of interface working

2.1 The Care Provider will work in partnership with the Authorised Officer and the Housing Provider to provide a high quality service to all residents of the scheme in which the Care Provider delivers services.

2.2 Criteria for a successful relationship between the Parties include (but are not limited to) the following:

(a) A shared understanding and commitment to the philosophy of extra care housing by all parties, with the delivery of a quality cohesive service to residents being the common uniting goal.

(b) A strong commitment to a partnership approach.

(c) An open and trusting relationship characterised by respect for specialisms and a willingness to learn and tackle problems and issues together.

(d) Good working relationships at all levels and effective team working built on close co-operation and good communication.

(e) A focus on delivering better outcomes for residents.

(f) Commitment to clear and accessible communication channels for staff and residents

(g) Commitment to joint training and review processes to ensure clear understanding of functions and responsibilities, utilising an on-going

lessons learnt approach to refine and develop a seamless and efficient service to residents.

2.3 The Care Provider will work in close cooperation at all times with the Housing Provider, however, nothing contained within this Schedule should be construed as requiring the Care Provider to act on behalf of the Housing Provider if this puts them in conflict with the principles of the overarching contract with the Council.

2.4 The Care Provider will work closely with the Scheme Manager to ensure that relationships between the parties function harmoniously and represent a seamless service to residents and on-site customers from the local community.

2.5 The Scheme Manager will be the initial point of contact for the Care Provider for housing issues facing the scheme. In schemes where there are Front of House staff employed by the Housing Provider, these individuals will be recognised as secondary contact points for the Care Provider for housing-related issues and may be the first point of contact for reporting damage, repairs, etc.

2.6 For clarity, the Care Provider will continue to approach the Council for any issues directly regarding the delivery of care, either in consideration for a single customer or across the whole scheme.

2.7 The Care Provider must be aware, when sharing information with the Housing Provider, of the need to adhere to data protection legislation and to ensure that the wishes of the customer in regards to the sensitivity of personal data are always taken into account.

3 Communication

3.1 It will be the joint responsibility of the Housing Provider and the Care Provider to ensure good working relationships between all parties on site. It is detrimental to the residents' experiences if onsite staff do not give messages that are consistent with each other.

3.2 If a dispute does arise, which the Care Provider cannot resolve through direct discussions with the Housing Provider, the Care Provider must bring this to the attention of the Council who will seek to find a resolution. At no time should the Care Provider acquiesce to a request from the Housing Provider that forces them to breach the terms of the Agreement between the Care Provider and the Council.

3.3 Within the bounds of confidentiality, the Care Provider in conjunction with the Council will involve the Housing Provider in the development of individual resident's needs assessments and support plans in respect of identifying areas of need in relation to housing-related support.

4 Working Relationship

4.1 It is of paramount importance that working practices are developed between the Care Provider and the Housing Provider to ensure a seamless service experience for any resident in extra care housing.

4.2 The Care Provider's Care Manager, located at the scheme, will be responsible for liaising with the Scheme Manager to develop and manage good working relationships between the service delivery team of the Housing Provider and the on-site care team employed by the Care Provider.

4.3 This may take the form, for example, of ensuring that residents who wish to attend events organised by the Housing Provider's team will be assisted to do so. This will be done by close liaison with the Scheme Manager.

4.4 The Scheme Manager will arrange a programme of activities and events for residents and the local community. The Care Provider will ensure support is provided to residents, where applicable, to attend these events and will work closely with the Scheme Manager to ensure that there is good information between the parties as to the demand for particular activities and events and to ensure that there is a coordinated approach to the management of these activities and events.

4.5 A provider may also be on site to provide catering services to the scheme. It this is the case, the Care Provider will be required to build excellent working relationships between themselves and the Catering Provider to ensure effective delivery of all services. Ultimate responsibility for ensuring that the key interdependencies are recognised sits with the Scheme Manager, however, the Care Provider is required to ensure that excellent working relationships and communication lines exist between themselves and all other partner organisations.

4.6 Scheme Management Meetings will be held on a regular basis (not more than weekly) between the Scheme Manager and the Care Manager. The Care Provider is required to ensure that appropriate representation from their organisation is present at each of these meetings. It is likely that these meetings will be held monthly, except when any new partner is introduced to the scheme, when they will be held weekly and revert to monthly in due course.

4.7 The Care Provider will commit to agreeing and adhering to a joint training programme around organisational roles, processes and building systems.

4.8 The Care Provider, in close liaison with the Housing Provider, will ensure application and adherence to robust safeguarding policies and procedures that, as a minimum, will be in direct line with any current Safeguarding policies and procedures upheld by the Council.

4.9 The Care Provider, in close liaison with the Housing Provider, will ensure application and adherence to robust promotion of Dignity in Care principles.

4.10 The Care Provider commits to working with the Housing Provider and the Catering Provider (where present) to develop additional methods of team building and dialogue with partner organisations.

4.11 The Care Provider will be expected to attend partnership and other meetings as follows:

(a) Scheme Management Meetings. (See paragraph 2.5). Will also include planning for events and activities.

(b) Extra Care Liaison Meetings. These will be held either every six months or annually and will include senior managers from each partner organisation and the Local Authority's contract manager(s).

(c) Allocations Panel Meetings. Face-to-face meetings will be held either monthly or quarterly. If meetings are held quarterly, it is likely that some Panel Meetings will be held via email.

(d) Residents' Meetings. The Care Provider will be required to attend Residents' Meetings when invited by the residents or by the Housing Provider on behalf of the residents.

(e) Where appropriate, the Housing Provider and the Care Provider may attend each other's team meetings.

5 Joint Working Protocol

5.1 The Care Provider will work with the Housing Provider to draw up a Joint Working Protocol that will be signed by both parties and will govern the relationship between the parties for a duration concurrent to that of the Care Contract the Care Provider has between itself and the Local Authority. This Joint Working Protocol will detail roles and responsibilities of both the Care Provider and the Housing Provider and will reflect the contents of this Schedule as well as expanding on work areas such as building security, emergency protocols and procedures, health and safety, etc.

5.2 The Care Provider will provide a copy of this Protocol to the Local Authority prior to signing in order for the Local Authority to ensure that nothing in the protocol contradicts its contract with the Care Provider, or its policies and procedures. This Joint Working Protocol must not be signed until the Local Authority has expressly approved the contents.

5.3 The Joint Working Protocol will be reviewed during mobilisation, at least quarterly for the first 12 months and then at least annually throughout the remaining duration of the service provision.

6 Health and Safety

6.1 The Housing Provider will carry out general building-related risk assessments and safety checks and also PEEPs (Personal Emergency Evacuation Plans) for all residents as soon as possible after they move into the scheme.

6.2 The Care Provider will provide Health and Safety advice to residents in their own apartments and will report all accidents and Health and Safety risks they witness within the site to the Helpdesk/Scheme Manager.

6.3 The Care Provider is expected to engage fully with the Housing Provider to enable the continuous development of safe working practices.

6.4 The Care Provider will be responsible for risk assessing all activities it is contracted to provide. Coordination and review of health and safety will be a standing item at the weekly (monthly) scheme meeting and will form part of the staff induction programme.

7 Building Security

7.1 The Care Provider will ensure that they do not operate in a way which undermines the security protocols of the Housing Provider and will challenge suspect visitors, close security doors, etc. as appropriate.

7.2 The Housing Provider will be responsible for building security and take the lead in any emergency when its staff are on site. The Care Provider is expected to assist in maintaining the security of the scheme during this time, e.g. closing security doors, challenging suspect visitors, responding to door security alarms, etc.

7.3 When Housing Provider staff are not on site, the Care Provider is solely responsible for building security including regulating access to the scheme, welcoming and signing in planned visitors, etc.

7.4 The Housing Provider and Care Provider will agree a lock-up protocol (e.g. stating which doors will be locked when the Housing Provider is not on site and which may be left open for a specified reason or length of time). The scheme residents and the Council should be consulted as part of this agreement.

7.5 If a security breach does occur, the Care Provider will notify the Housing Provider’s on-call manager.

8 Emergency Procedures & Fire Strategy

8.1 The Care Provider will be responsible for taking the lead if an emergency specifically related to the health, wellbeing or care and support of one or more residents occurs (e.g. a fall, a resident being taken ill, etc.). The Care Provider

will inform the Housing Provider's staff as soon as possible, especially if it involves the building or facilities (e.g. someone stuck in a lift).

8.2 The Housing Provider' staff will take the lead if they are on site and there is a general or building emergency (e.g. fire alarm, evacuation, loss of power, etc.). The Care Provider will provide assistance to the Housing Provider's staff.

8.3 The Care Provider will lead on any necessary action if there is a general or building emergency when the Housing Provider's staff are not on site. The Care Provider will follow agreed procedures and inform the Housing Provider's on-call manager as soon as possible. Where possible, the Housing Provider's on-call manager will take responsibility for leading any necessary action. Where this is not possible, the lead will remain with the Care Provider until either the emergency is over or a manager from the Housing Provider is on site and formally takes over this role.

8.4 The Housing Provider will be responsible for the overall Fire & Evacuation Strategies and these will be reviewed on a regular basis. The Care Provider must ensure that all care staff are knowledgeable about these strategies and make staff available for initial training (preferably within one week of their start date) and to take part in weekly fire tests as requested by the Housing Provider.

8.5 Unless directed by the emergency services, the Care Provider will not trigger an evacuation of the scheme without express consent from the Housing Provider's on-call manager.

9 Maintenance and Cleaning

9.1 The Housing Provider will be responsible for all cleaning and maintenance activity relating to the scheme.

9.2 Care Staff will be provided with training on the landlord repairing function and responsibility. The Care Team will receive support and updates from the Housing Provider which may include specialist sessions when equipment such as the telecare equipment is updated and replaced.

9.3 In regards to maintenance and cleaning services the Housing Provider will be responsible for:

(a) Providing training for the care team on landlord responsibilities and the repairs functions

(b) Emptying bins in communal areas and management areas.

(c) Publicising refuse collection days.

(d) Cleaning communal and management areas and facilities.

9.4 The Care Provider will be responsible for:

(a) Supporting residents less able to report repairs to their homes to the Housing Provider.

(b) Reporting any defects, spillages or debris they see in communal areas to the Housing Provider.

(c) Reporting emergency repairs to the Housing Provider.

(d) Supporting residents with the use and operation of equipment in their homes, e.g. heating controls, use of telecare equipment.

(e) Working with the Housing Provider to ensure the scheme is kept in good repair and to a high standard.

(f) Reporting repairs when the Housing Provider's staff are not on site, following procedures laid down by the Housing Provider.

(g) Supporting residents less able to sort their refuse and transport it from their apartment to the bin stores.

(h) Keeping rooms predominantly or only used by the Care Team (e.g. staff laundry, staff rest room, assisted bathroom, overnight facilities) clean and tidy between scheduled cleaning by Housing Provider.

(i) Laundering of bedding used by care staff.

10 Telecare

10.1 The Housing Provider will supply the Care Provider with handsets which will be used to ensure prompt response to emergency calls. The Care Provider is required to ensure that the handsets are distributed to appropriate on-site staff, who are available to respond to emergencies, and that these staff will be able to capably use the handsets.

10.2 The Housing Provider will be responsible for:

(a) The maintenance of the telecare system and equipment

(b) Providing the care staff with training in the operation of the equipment

10.3 The Care Provider will be responsible for:

(a) Responding to emergency calls through the alarm call system

(b) Using due care with the equipment

(c) Informing Housing Provider of any repairs or malfunctions identified

(d) Identifying new staff who require training.

11 Facilities provided by the Housing Provider

11.1 The Housing Provider will be responsible for:

(a) Provision of shared facilities: laundry, staff changing room

(b) Provision of facilities for exclusive use by the Care Provider: Office, Staff Room/Overnight facilities.

(c) Cleaning and maintenance of these facilities

(d) Induction training and refresher training on building systems such as the Fire Alarm System, heating system, etc.

(e) Arranging and administration of Scheme Management Meetings, initially weekly, to be held between the Scheme Manager and the Care Provider.

11.2 The Care Provider will:

(a) Ensure the responsible use of shared facilities but the care teams

(b) Ensure participation of care staff in the building training programme

(c) Participate in Scheme Management Meetings

12 Activities & Events

12.1 Responsibility for room security following an event will be with the event organiser unless other arrangements have been made.

12.2 The Housing Provider will be responsible for:

(a) Assessing the appropriate use of facilities

(b) Planning and organising events

(c) Ensuring an up-to-date events and activities calendar is maintained and promoted

(d) Distributing the events and activities calendar

(e) Making any resident or third party hiring facilities aware of their responsibilities around security and the behaviour of their guests when using the facilities.

12.3 The Care Provider will be responsible for:

(a) Assisting with promoting events to residents and encouraging them to get involved

(b) Attending the regular meetings with the Housing Provider to plan and review activities and events

(c) Providing feedback on events and activities to council and the Housing Provider

12.4 The Care Provider will also:

(a) Support residents less able to attend events by escorting them or encouraging them to attend

(b) Provide input into the planning of events and activities

12.5 If the care team notices any damage caused following an event they are asked to report the issue to the Housing Provider, in line with the responsibility set out in regards to Maintenance and Cleaning above.

12.6 The Housing Provider will be responsible for arranging any repairs and identifying if there is a need to make an insurance claim or to re-charge the resident or external partner for the damage.

13 Anti-Social Behaviour

13.1 The Housing Provider will manage tenancies/leases and take responsibility for acting on any reports of Anti-Social Behaviour (ASB) by residents or their visitors.

13.2 The Care Provider will notify the Housing Provider via the agreed channels of any incidents of ASB, or if their staff are subjected to behaviour by a resident which may be deemed a breach of their tenancy/lease conditions.

13.3 Given the nature of the client group any investigations of ASB will be handled sensitively and the Housing Provider will involve other agencies where appropriate. The Care Provider will also ensure that any staff involved in investigations into ASB will treat all information received sensitively, have due regard to tenants' and/or leaseholders' rights to privacy of information and ensure that no sensitive data is disclosed to parties beyond those investigating any alleged incident.

14 Safeguarding

14.1 Where appropriate, the Care Provider and the Housing Provider will work collaboratively to ensure that all safeguarding principles and practices are

followed as outlined by Cheshire East Council through the Local Safeguarding Children Board and Local Safeguarding Adults Board, and Cheshire East's Domestic Abuse Partnership.

15 Allocations and Lettings

15.1 The Care Provider will work collaboratively with the Housing Provider to ensure that all Allocations and Letting Processes are upheld, that new allocations are managed efficiently and that accurate reporting on the levels of need across the scheme is available.

15.2 The Housing Provider will be responsible for:

(a) Maintaining a profile of the care dependency levels within the scheme

(b) Managing the allocation process including administration of the allocations panel

(c) Visiting the applicant and assessing their suitability for extra care housing (preferably as a joint visit with the Care Provider) and reporting their views to the Allocations Panel

(d) Notifying the Care Provider of voids, lettings, sales and move-in dates of new tenants and leaseholders (where known)

(e) Supporting the resident with arranging their move

(f) Providing the resident with a building induction as part of their move in support.

15.3 The Care Provider will be responsible for:

(a) Visiting the applicant and assessing their suitability for Extra Care Housing (preferably as a joint visit with the Housing Provider) and reporting their views to the Allocations Panel.

(b) Participating in the Allocations Panel

(c) Arranging the delivery of care in line with the Support Plan and Care Plan from the move-in date of new residents.

16 Care Plans and Adaptations

16.1 The Care Provider will have responsibility for the maintenance and regular review of the care plans for individual residents. The Care Provider will ensure that the Housing Provider is consulted on these documents only where this is required to be shared when the needs identified have a direct impact on the

Housing Provider' services (e.g. a direct housing need such as an adaptation to a property).

16.2 If the care plan review identifies the need for an adaptation to the individual's apartment, the Care Provider will notify the relevant Social Care team as well as the Housing Provider.

17 Monitoring and Reporting Arrangements

17.1 The Care Provider is responsible for providing Community Balance data to the Housing Provider and the Council on request and for Allocations Panel Meetings. This should be no more than monthly.

17.2 The Care Provider and the Housing Provider will have dual responsibility to ensure that the Council is fully aware of customer satisfaction against the following indicators:

(a) Compliments and complaints

(b) Formal and informal feedback from commissioners, staff, residents and stakeholders

(c) Incidents and accidents

(d) Focus groups of staff and residents

(e) Resident satisfaction questionnaires and telephone surveys.

18 Dispute Resolution

18.1 In the event of dispute between the parties, in the first instance these will be addressed through management structures and joint meetings between the parties. If the parties fail to reach resolution, then a joint meeting will be attended with the Council present.