Managing Sickness Absence in Small and Medium Enterprises Phase 3

SPECIFICATION

CONTENTS

Glossary and Abbreviations

Abbreviation / Term	Meaning
Authority	Means the Secretary of State for Work and Pensions
DWP	Department for Work and Pensions
IPR	Intellectual Property Rights
ICT	Information and Communications Technology
IT	Information Technology
MI	Management Information
MSA	Managing Sickness Absence
NHS	National Health Service
OH	Occupational Health
SMEs	Small and Medium Enterprises
URL	Uniform Resource Locators
VAT Ex	Exclusive of Value Added Tax
WHU	Work & Health Unit

1. Introduction and Background

The Work and Health Unit (WHU) is a joint initiative of the Department of Work and Pensions ("Authority"), the Department of Health and Social Care and other relevant departments and bodies. It aims to improve productivity and labour market participation.

Evidence from the 2016 'Improving Lives: The Work, Health and Disability Green Paper' consultation showed that employers face a number of key barriers to doing more around disability employment:

- a lack of confidence and understanding of what to do, or what support exists
- concern around risks or costs of employing disabled people
- or fear of 'doing or saying the wrong thing'

Employers responding to the consultation consistently said that improved access to information and guidance on how to build inclusive, healthy workplaces would support them to overcome these barriers and do more.

Through an open competition in 2016, the Authority sought innovative proposals for interventions aimed at better supporting Small and Medium Enterprises (SMEs) to manage long-term sickness absences and support early returns to work.

The strategic aims were as follows:

- An increased rate of returns to work within the first 4 weeks of sickness absence
- Innovative ways to support absence management
- Value for money
- Improved links with existing Health systems
- Continued development of staff wellbeing

The project initially ran over 2 phases:

- Phase 1 involved successful Contractors undertaking feasibility studies into their chosen solutions and reporting their findings to DWP.

- Phase 2 involved successful Contractors developing and testing their working prototypes and reporting their findings to DWP.

2. Scope

The Authority requires the Contractor to develop the existing online toolkit (from MSA Phases 1 and 2) based on the findings and recommendations identified. The specific requirements are set out below.

The Contractor will take the current online toolkit developed under MSA Phases 1 and 2 to build on the feedback. The online toolkit was accessed by employees and managers from those SME organisations participating in the previous trial.

The online toolkit brought together expertise in absence management, return to work and SME research, alongside practical know-how, to deliver a stage-based online toolkit for employees with common mental health conditions and their SME employers; it focused on supporting constructive communications within the first four weeks of sickness absence.

It should be noted that the focus of this requirement is development and testing, as opposed to research, therefore it is expected that research will be focused on material relevant to the specified physical health conditions and disabilities, in order to support development of the enhanced toolkit.

It is expected that a significant proportion of any costs will be allocated to the development and testing activities, rather than research.

As part of the governance arrangement in relation to MSA Phase 3, the Authority will establish a Quality Assurance Group (QAG), incorporating WHU policy and communications representatives, focused on employer policy areas.

The QAG will be responsible for reviewing and approving key elements of the online toolkit including development and content to assure WHU Delivery Board that the specified quality standards are being met. The Contractor's Management Plan (see below) will set out the QAG review and approval activities and associated timescales, as agreed between the Authority and the Contractor.

The Contractor must deliver:

- A draft Management Plan in their tender, which contains a time-bound programme of all the activities to be delivered in line with the specified requirements. The draft Management Plan must include how the online toolkit will be tested and evaluated, and build in provisional QAG review and approval points in line with the responsibilities detailed within the Scope. The

draft Management Plan must clearly set out and contain timescales, deliverables, contractual milestones and resource requirements, including key staff. The Contractor is required to work with the Authority to agree the QAG review and approval activities and associated timescales, in order to provide a final Management Plan for incorporation into the Contract within 10 working days of the Contract Commencement Date.

- The Contractor must meet the following contractual milestones:

  o Delivery of final Management Plan;
  o Completion of activity in line with final Management Plan due end Oct 19;
  o Completion of activity in line with final Management Plan due end Dec 19;
  o Completion of activity in line with final Management Plan due end Feb 20;
  o Delivery of Summary Report and final product handover.

- A record of all Intellectual Property Rights (IPR) used and created as part of MSA Phase 3 (the "IPR Activity Log"). The IPR Activity Log must be maintained and periodically shared with the Authority, throughout the contract period.

- Maintenance of the existing Return to Work online toolkit, continuing to restrict access to those organisations involved in the trial for MSA Phase 2:

  o Continue to host the existing Return to Work online toolkit using the current URL: https//returntoworkmh.co.uk
  o Ensure compliance with the following IT accessibility standards:
    ▪ World Wide Web Consortium (W3C) Web Accessibility Initiative (WAI) Web Content Accessibility Guidelines (WCAG) 2.1 AA Standard; and
    ▪ EN 301 549 – Accessibility requirements suitable for public procurement of ICT products and services in Europe.
  o Periodically review and refresh existing content, to ensure accuracy of information and links, throughout the contract period.

- Enhancement of existing Return to Work online toolkit:

  o Focused research (including engagement with relevant subject matter experts and employee/employer representative bodies), development and testing (obtaining and acting upon insight and feedback from test organisations) of an enhanced online toolkit, intended to support earlier and sustained returns to work, continuing the offer of sickness absence and basic references/links to Occupational Health (OH) advice, with equivalent content for people with physical health conditions/ disabilities, including but not limited to:
    ▪ musculoskeletal conditions;
    ▪ respiratory & cardiovascular conditions;
    ▪ visual & hearing impairment;
    ▪ cancer; and
    ▪ physical injuries caused by workplace accidents

- Production of:
  - One animation video to encourage employees and employers to use the guidance on communication which is provided to them as part of the enhanced online toolkit;
  - Examples for employers, showing what to say, and what not to say, for each of the six steps within the online toolkit;
  - One-page quick-view guide to the six steps within the online toolkit;
  - Employee guide to managing conversations and taking action;
  - Employer guide to managing conversations and taking action; helping employers understand the benefits of early intervention and
  - Video case studies which reflect the needs of SME employers, and the key conditions and disabilities around which they need further support to understand how to offer adjustments and improve retention (this would include mental health, physical health impairment as well as visual impairment). The case studies should offer insights into the potential returns on investment or benefits for the employer through taking positive action.
- Ensuring the toolkit is fit for purpose at transfer to the Authority.

- A brief summary report detailing findings from the focused research, development and testing of the enhanced online toolkit, which includes:

  - The survey methodology used;
  - Supporting research to justify approach taken when enhancing the existing online toolkit, identifying any gaps in areas of physical health condition and disability not included;
  - Information regarding user feedback e.g. how the product was received and used by employers and employees and what changes were made as a result of feedback received, helping to identify key barriers and good practice;
  - Details of any links to resources provided by existing health services (OH support, NHS provision etc.), that the enhanced online toolkit interacts with, identifying any issues raised by employers concerning their understanding of OH and how this supports them;
  - Evidence of what worked well and not so well, for whom, why and in what circumstances; and
  - Key barriers, concerns and questions which may prevent users from using the tool to support early return to work from sickness absence and suggested solutions to those barriers, concerns and questions.

The Contractor must be able to demonstrate their competence in the following areas to show that they are able to deliver the specified requirements:

- Technical competence (IT/software development etc.);

- Clear understanding of physical and mental health conditions and disabilities and associated challenges in managing sickness absence;

- Competency in user testing/user experience research;

- The ability to lead and deliver complex research projects;

- Excellent communication skills (both written and verbal);

- Clear management of their Pricing Proposal and Management Plans;

- Clear management of issues arising throughout the contract period;

- Recognition and adherence to all ethical and legal standards; and

- Excellent stakeholder management skills.

3.   Delivery Timescale and Contract Value

The Contractor must show that they are able to deliver the specified requirements and submit all invoices for payment by 31 Mar 2020, within the maximum contract value of £83,000 (VAT Ex). The contractual payment model is set out in the terms and conditions.

4.   Management Information

The Contractor must provide Management Information (MI) to the Authority on a monthly basis throughout the contract period, as follows:

- Progress against the Contractor's Pricing Proposal, in keeping with the contractual payment model;
- Progress against the Contractor's Management Plan, in keeping with the contractual milestone(s); and
- An updated IPR Activity Log.

The Authority will provide a reporting template and IPR Activity Log template to the Contractor within 5 working days of the contract commencement date, which the Contractor must use when updating the Authority.

The reporting template will build on the template utilised for MSA Phase 1 and Phase 2 and will report progress against the final Management Plan, including key milestones; incorporation of the additional physical conditions; identification and completion of case studies within the agreed timescale; user engagement plans and volumes; user testing and feedback.

5.   Performance Management

Performance Management will be undertaken by WHU and Contract Management will be undertaken by the Authority's Commercial Directorate.

The Contractor must attend meetings with the Authority by teleconference, video conference or in person (as determined by the Authority). There will be at least one meeting each month. In these meetings the Authority and Contractor will discuss the activity which the Contractor has undertaken, as well as key findings, progress against key milestones, payment evidence and validation as appropriate and next steps for the Contractor.

The Authority will monitor the performance of the Contractor on a continual basis, using:

- Analysis of monthly MI;
- Performance management;
- Regular business management meetings;
- Quality assessment; and
- User satisfaction feedback

These arrangements aim to identify any performance issues and enable corrective measures to be taken where required.