INVITATION TO TENDER FOR THE PROVISION OF:

Health and Adult Social Care – Speaking up Helpline and Information

Deadline: 24 March 2017

ITT Reference: 60371

**PART B** – Tender Schedules

 (To be returned by Tenderers)

1. Specification
2. Executive Summary
	1. The Secretary of State for Health has made speaking up a key priority and wishes to see a culture across the NHS and social care sector where people are encouraged to speak up about patient safety and other matters of public interest, and are supported when they do so. This service proposition supports that ministerial priority through the provision of a Speaking Up helpline for the NHS and Social Care Employees.
	2. The existing Whistleblowing helpline has been established since 2003 as an independent resource for individuals working in the NHS and Social Care sectors who may wish to raise a concern about the provision of services.
	3. This helpline has been operated by the Royal Mencap Society since January 2011. The current service covers a confidential independent free phone helpline, guidance via email, a website containing information for potential whistleblowers, and includes support and outreach activity.
	4. The current contract comes to an end on 31 May 2017.
	5. The Department of Health wishes to procure a revised service, it should be noted that the specification is different from the existing Whistleblowing Helpline service. The new procurement will be called the “Speaking Up Helpline” which will have a core requirement that is comprised of:

### Establishment of a report within four (4) weeks of contract award to identify and map the current whistleblowing lines across the NHS and Health and Social Care system;

### Provision of a helpline service that provides guidance for NHS and social care workers;

### Provision of general advice about the ‘Speaking Up’ helpline, how to access it and what it covers, to providers of NHS and Social Care Services;

### Support awareness raising activity in relation to the Speaking Up helpline;

### A website and potentially other multichannel approaches that may include social media to increase the effectiveness of delivery;

### The successful supplier will also need to provide Management Data that provides a breakdown that shows:

### Helpline usage data;

### How the helpline is used by NHS and Social Care workers;

### The issues that people are speaking up about;

### The needs of the people who speak up in the NHS and Social Care environment;

### Feedback on the helpline service as requested. This data may be used to inform policy development in respect of Speaking Up. There should not be a substantial cost associated with this aspect of the contract.

* 1. The contract will be for one 10 month and two 12-month periods beginning on 01 June 2017 until 31 March 2020, with an option for extension by up to a further two 12-month periods. The contract will be reviewed annually. This flexibility in length is to ensure this service continues to meet user requirements.
	2. The Department or its representative shall inform the supplier of the requirement for each extension, not later than 3 months before the end of each contract period.
	3. Costs for delivery of the service will be fixed and paid within 30 days maximum in arrears upon submission of relevant invoices.
1. Background to Whistleblowing and the National Guardian
	1. This service proposition supports ‘*Learning not blaming*’, which sets out the government’s response to February 2015 publication of ‘*Freedom To Speak Up’ by* Sir Robert Francis QC.
	2. The creation of the [National Guardian](http://www.cqc.org.uk/content/national-guardians-office) role followed ‘*Freedom to Speak Up’,* and is one of a number of measures introduced to ensure health and care workers are encouraged to speak up, and do not suffer as a result. The National Guardian’s remit covers NHS Trusts and NHS Foundation Trusts, independent healthcare providers who deliver NHS services covered by the standard contract, social enterprises, and trusts put out to franchise or where contracts have been put out to tender for large services, for example community services. However, its focus to date has been on NHS Trusts and NHS Foundation Trusts.
	3. The National Guardian is independent and will help to lead cultural change within NHS Trusts and NHS Foundation Trusts, so that healthcare staff feel confident and supported to “speak up”. The National Guardian shares good practice, reports on national or common themes, and identifies any barriers that are preventing the NHS from having a truly safe and open culture.
	4. The National Guardian leads and supports a network of Freedom To Speak Up Guardians appointed by the Chief Executive of each NHS Trust. All NHS Trusts and NHS Foundations Trusts now have a Freedom to Speak Up Guardian in place, or will appoint to this role very shortly. NHS England is responsible for speaking up in primary care and has issued a new policy on this. This requires all primary care providers to nominate a Freedom to Speak Up Guardian.
	5. Freedom to Speak Up Guardians act to promote speaking up in their organisations, raise awareness, ensure that their organisation is well equipped to support staff who speak up and are able to use speaking up to improve culture.
	6. Freedom To Speak Up Guardians also act as a point of contact for people who wish to speak up, providing an alternative route to existing channels where needed. These Guardians also provide advice and support to the Trusts Board on best practice for handling Speaking Up issues. It is essential that the successful contractor develops effective working relationships with the National Guardian’s Office.
	7. While the infrastructure is being put in place to support people who work within the NHS and primary care, there is little (if any) comparable provision for employees and workers within the adult social care environment.
	8. This service proposition fits well with the adult safeguarding and prevention agenda, underpinning workers and volunteers’ need to be accountable and speak up where they recognise issues with practice or allegations of abuse in the adult social care environment. Naturally, employers across the sector are supportive of their employees in terms of policy and culture, however, the provision of a resource for social care workers adds a layer of support between staff and management discussions, which can enable and empower staff to raise their concerns in the right way to effect change for people accessing services.
	9. The existing helpline was initially established in 2003 as an independent resource for individuals working within NHS and social care organisations who may wish to speak up about matters of concern, including those that may or do affect patient care (including “whistleblowers”).
	10. One of the key features of the helpline is that it is independent of government and, as such, is trusted by the individuals that use the service.
	11. The helpline provides free guidance and information to whistleblowers. It only gives general guidance and signposts potential whistleblowers to other resources that may help them. The helpline does **not** give specific legal advice on the merits of an individual’s case, nor act on individual concerns.
	12. Helpline staff know when they may need to escalate potential safeguarding concerns, which will largely be to the Care Quality Commission (CQC). We would expect the successful contractor to be aware of the need for onward referral of such concerns to the relevant bodies or authorities and the relevant law governing data protection.
2. THE REQUIREMENT

***Outline***

* 1. An organisation is sought to provide a Speaking Up package of services for people who work in the NHS and Adult Social Care sector and for providers of NHS services and Adult Social Care services. The objective of the guidance and signposting helpline is to support people who wish to speak up about matters that affect the delivery of care, particularly patient safety.
	2. We require the Speaking up helpline to provide:
	3. a telephone helpline;
	4. a website;
	5. guidance and ‘signposting’ – available during and outside ‘open hours’;
	6. escalation procedures where issues such as potential safeguarding situations need to be acted upon;
	7. user feedback;
	8. performance data for regular reporting of management information; and
	9. awareness raising / promotion activity.

The target customer base for the helpline service is:

* + NHS workers (including trainees, agency staff, and those that work outside of normal working hours);
	+ Staff employed in the adult social care sector (including trainees, agency staff, and those that work outside of normal working hours);
	+ NHS and social care employing organisations;
	+ Contractors for the NHS and social care sector.
	1. The Department wants the new contractor to provide:
* ‘Intelligent guidance’ for people who wish to speak up from the Health and Adult Social Care sectors, including ‘signposting’ to appropriate material, to support them in ‘speaking up’;
* Access to guidance on “Speaking Up” (including whistleblowing) for organisations within the NHS and social care environment; and
* Promote the helpline to those that may wish to use it.

**The Core Requirement**

* 1. We require the Speaking Up helpline to provide:
* A telephone helpline service;
* A website with responsibility for periodic updates, maintaining the site on behalf of the Department, and maintaining access;
* Guidance and ‘signposting’ – available during and outside ‘open hours’;
* Escalation procedures where issues such as potential safeguarding situations need to be acted upon;
* User feedback and (where possible) demographic data;
* Performance data for reporting of management information; and
* Awareness raising / promotion activity, for example, possible attendance at up to six key conferences a year, webinar bases awareness raising sessions with specific audiences e.g. Clinical Commissioning Groups (CCGs), use of social media and production of promotional leaflets / materials

***Helpline service***

* 1. The minimum operating time of the telephone Speaking Up helpline will be normal business hours, i.e. from 0800 hours to 1800 hours Monday to Friday, with a call back facility (within pre-determined timescales) in the case of telephone callers. During these hours the service will be manned. Depending on demand, these hours may need to be extended.

***Helpline operating procedures***

* 1. The nature of the Speaking up helpline, in particular the telephone service, is such that staff working for the successful bidder will likely be communicating with individuals who may be experiencing a variety of emotional states.
	2. We would expect the successful contract holder to handle calls to its telephone helpline by following operating guidelines that reflect good practice principles. For example:
* Opening the conversation in a welcoming manner;
* Outlining the limits of the assistance the Helpline may provide, in order to manage the callers expectations;
* Identifying the nature of the call / concerns / key request to establish the caller’s needs;
* Summarising and clarifying the reasons for the call, being mindful of serious concerns and escalation procedures (where applicable);
* Signposting the caller to resources that may help them;
* Check the caller’s understanding of the guidance / signposting given;
* Offering the customer a call back, or seeking feedback on the service;
* Closing the call;
* Recording the call for management information purposes.

***Translation service provision***

* 1. NHS and Adult Social Care service provision is varied, employing individuals with a diverse capability and skills mix. It is recognised that some sectors might employ workers where English is not an individual’s first language.
	2. We would expect that the contract holder will have access to relevant translation services to ensure equality of access and treatment of callers’ diverse needs.

***Website***

* 1. The existing contract provides a website, which is currently owned by the Department of Health. As now, the website will be an integral part of the service provided: source and signposting of information, allowing for email communication, and call back requests. It will require periodic review and updating, including linking to appropriate other sources of guidance. The frequency of updates will be agreed on award of contract. We do not anticipate that these arrangements will generate a significant cost to the contract holder.
	2. Under the new contract, ownership of the website and Intellectual Property Rights (IPR) may pass to another body and may, accordingly, require repurposing to meet the needs of that other body, in addition to those of the helpline. This may include future migration of the website to an NHS or gov.uk site.
	3. We would expect that the successful bidder will propose how the transition from the existing website to the new Speaking Up Helpline website can be most effectively delivered whilst seeking to maintain traffic levels and minimise disruption. It is expected that the online traffic to the current wbhelpline.org.uk/ website will be re-routed to any replacement web address.
	4. The successful contractor will be responsible for the website support aspects related to Speaking Up and keeping the website up to date. Ownership of the website may pass to another body who will also hold the intellectual property rights for work, the Speaking Up helpline and its website is currently held at: <http://wbhelpline.org.uk/>

**Guidance and ‘signposting’**

* 1. The nature of the Speaking up helpline, in particular the telephone service, is such that staff working for the successful bidder will likely be communicating with individuals who may be experiencing a variety of emotional states. Calls can be complex and there will be a need to ask questions in a sensitive way.
	2. The core requirement is described as the provision of “intelligent guidance”; to provide guidance relevant to a caller’s situation, and ‘signpost’ to other resources, taking into account the caller’s individual circumstances. This will include, for example, the provision of Freedom To Speak Up Guardian contact details and details of appropriate professional bodies and unions.
	3. The Department expects that within one month of contract award, the supplier will provide the ‘map’ for guidance and signposting. As such we would expect the contract holder to be aware of the implications of callers raising serious concerns, the need for onward referral of such concerns to the relevant bodies or authorities and the relevant law governing data protection.
	4. The core requirement and the additional requirement will not cover the provision of specific legal advice on the merits of an individual’s case nor act on individual concerns.

**Escalation procedures**

* 1. Through initial questioning, it may become apparent that there may be safeguarding issues to consider – where serious concerns, especially those alleging criminal activity or serious patient safety concerns, are raised. The requirement will include consideration of the need for onward referral of such concerns.
	2. We would expect that the contract holder, in developing its ‘process map’ for the guidance and signposting operations, will factor in ‘triggers’ for identifying serious concerns and safeguarding issues.
	3. We would expect that the contract holder can provide the following;
* The organisation may have access to detailed knowledge and understanding of the relevant legal framework, including the Public Interest Disclosure Act 1998, the Employment Rights Act 1996 and data protection legislation; associated case-law, local policies to implement relevant legislation and procedure in both the private and public sector to ensure that consistent advice is given.
* Staff access to legally qualified and appropriately trained individuals in order to provide sound and robust advice to callers on how best to raise concerns, the legal framework; and what protections may be available. This includes being able to explain why certain concerns may not fall within the scope of the protections offered in employment legislation.
* Provision of a secure way to log caller information and email queries that abides by current information security and data protection legislation

**User feedback and demographic data**

* 1. Service provision needs to be outcomes focused with indicators that demonstrate effectiveness of the helpline. This will require the provision of a mechanism for gathering user feedback.
	2. For example, callers could be asked for their views of the quality of service provided at the end of the call (if the caller is willing to participate). Alternatively or additionally, an email could be sent to callers after a call, or the website could include a ‘feedback form’ that allows anonymous comments to be provided. The intention being to identify good practice as well as areas for continuous improvement.
	3. To enable targeted awareness raising of the Speaking Up helpline, capturing of demographic information (including diversity data) is required.
	4. The Department welcomes innovative proposals from bidders as to how user feedback and demographic data might be obtained in a sympathetic and effective manner.
	5. This element of the requirement could be open to review after the first six months, based on feedback received from callers, and the level of data collected.

**Performance data for reporting of Management Information**

* 1. The new contract will require monthly, quarterly, and annual reports, containing information on key objectives and key performance indicators.In addition, theme-based and ad hoc reports may be required. For example, information about particular professional groups, geographic areas, or themes.
	2. It is envisaged that the data listed below will be required to be reported upon as a minimum:
* Total number of calls presented (analysed by service sector; region; gender; workforce status; subject of call (specific criteria); purpose of call (specific criteria); daily performance (calls); average and maximum abandoned delay (calls);
* Insight into issues raised and how these are being handled (including whether callers have already raised an issue, feel that they have suffered detriment, etc)
* Number of calls answered
* Average answer duration
* Total number of calls abandoned
* Total number of calls presented out of hours
* Total number of calls presented Saturday / Sunday
* Number of emails received
* Visitors to website
* New visitors to website (%age)
* Returning visitors (%age)
* Top five pages’ visitors exit from: (list)
	1. Performance information from the current contract is provided in Appendix D MI sample.
	2. We are interested in ways that data capture might enhance our intelligence, for example in relation to vulnerable groups identified by Francis (e.g. ethnicity or workforce group). It is possible, therefore, that the data requirement may change over time to take account of different or emerging needs.

**Awareness raising / promotion activity**

* 1. An element of the requirement will include awareness raising /promotion activity of the Speaking Up helpline. For example, this may include attendance at up to six key conferences per year, or webinar based (or possibly Video Conference) awareness raising sessions with stakeholders,
	2. Freedom To Speak Up Guardians will be a channel for promoting the Speaking Up helpline through their established networks with NHS trusts. Similar routes will need to be established with NHS England to reach primary care services.
	3. However, there is currently no such facility within social care, although it is important to recognise the whistleblowing concerns that exist within this sector. It is envisaged, therefore, that any awareness raising activity is most likely to be in respect of the social care sector, as opposed to the NHS trust and primary care sectors. However, we do not anticipate that this requirement will attract significant cost to the contract.
	4. The Department welcomes innovative proposals from bidders who may have effective mechanisms in place (e.g. use of Social Media) for raising awareness of such a service.

**Additional requirements**

**Profile of the Communication service**

* 1. The Department acknowledges that the telephone helpline is being increasingly accessed by individuals outside of working hours (1800 hours to 0600 hours) and on Saturday and Sunday.
	2. Usage of this facility has increased from 14% of calls presented in 2012 to 36% of calls presented in 2016. Analysis of out of hours calls during 2016 indicates that 67% of calls are made between 1800 hours and 0800 hours Monday to Friday, and 33% of calls are made on Saturday and Sunday.
	3. The Department welcomes innovative proposals, including the use of alternative technology solutions, from bidders describing how this additional requirement could be delivered to serve the customer base effectively.

**Operational requirement**

* 1. The scope of the service is to provide intelligent guidance and signposting to resources and **not** to give specific legal advice on the merits of an individual’s case nor to act on individual concerns.
	2. We expect the helpline service to account for **around 80%** of the contract value.
	3. The Department expects the following to be delivered:
* A telephone helpline that complies with the core requirements outlined in sections 3.4, staffed by trained and competent call handlers who understand service provision within a health and social care setting;
* A website that is maintained and updated and provides access to relevant resources;
* Provide the Department of Health and key partners (e.g. the National Guardian’s Office) with information on people that are speaking up, the matters they are speaking up about and any barriers that they are encountering.

**Skills requirement**

* 1. The Department expects the successful bidder to provide a service where staff are trained and have the relevant skills, competency, training and knowledge to fulfil their role. The service provided needs to take account of the legal framework for whistleblowing, the working terminology used on a day-to-day basis within different providers, culture, language (English may not be an individual’s first language), and the skills mix of people employed within the health and social care sectors. The skills requirement, therefore, for people employed by the contracting organisation needs to take account of these differences.
	2. The Department expects the following to be demonstrated and delivered:
* An employee base, including staff that answer calls, that have been trained and have the relevant knowledge and understanding of the NHS and Social Care current operational practices (including safeguarding) to ensure advice given is appropriate for both the sector and individuals. (Direct experience of working in the health and Social Care fields is desirable, but not essential.)
* A staffed helpline where staff are trained and have the necessary skills, knowledge and competency to answer the calls, and who have access to up to date sources of advice and guidance;
* Staff with the relevant skills, competency and training to deal with potentially anxious and distressed callers;
* Ability to communicate clearly and impartially the guidance on speaking up, appropriate to an individual caller’s needs, the legal framework on whistleblowing and available resources to individual members of NHS staff and Social Care workers or an individual representing a provider of NHS services.
* The Speaking Up landscape is multifaceted and shifting, and the law on whistleblowing can be complex. People working on the helpline will therefore need to keep abreast of developments and relevant case law to inform their guidance.
* Staff must be trained to understand the boundary between providing bespoke guidance and support, and advising on individual cases or providing legal advice, and they must be able to communicate this limitation of the service to each caller;
* Ability to promote the Speaking Up helpline to relevant audiences

**General Points**

* 1. The bulk of the contract value (**around 80%)** will cover costs for:
1. a helpline service on a free phone basis;
2. as outlined in the skills requirement, trained and knowledgeable staff who can guide callers impartially but with authority on their options, the courses of action available to them and signpost callers to relevant resources;
3. telephone guidance to providers of NHS and Social Care Services on speaking up to help providers in managing risks around Speaking Up and to encourage good governance and best practice;
	1. **Around** **20%** of the contract value will cover costs for additional supporting services such as:
4. providing user feedback to the Department and the National Guardians Office, based on the experiences of the callers handled under the contract, to inform future Speaking Up helpline service needs
5. working with relevant employers representative organisations to provide material for distribution in the NHS and social care giving summary advice to individual employees on when and how to Speak Up safely and effectively, and to employers on how to support and respond to responsible Speaking Up; and
6. actively raising the profile of the Speaking Up helpline across the NHS and social care and those providing NHS and Social Care Services
7. providing a series of regular performance reports and other information as requested to the Department to support reviews of the service being provided.
8. Perform quality assurance on all aspects of the programme.
	1. The contract will be for one 10 month period and two 12-month periods upon award, including an option for an extension by up to a further two 12-month periods. The contract will be reviewed annually. This flexibility is to ensure this service continues to meet customer requirements.
	2. The service specified in this tender needs to be live from 01 June 2017 to ensure continuity of service and support for potential people that wish to speak up. A handover and implementation period will be needed from the current provider to the new provider of the service.
	3. One of the key features of the existing helpline is that it is **independent** of government and other organisations and is therefore trusted by people that wish to speak up Whistleblowers to provide them with impartial information and guidance. It takes courage for an individual to speak up and raise concerns and these individuals deserve access to someone who can provide them with clear, impartial, intelligent guidance and ‘signposting’. The Speaking Up Helpline service described in this tender specification will follow the same principles.
	4. The Department of Health considers that the Transfer of Undertakings (Protection of Employment) Regulations 2006 (“TUPE”) may apply in respect of employees currently employed by the Royal Mencap Society who work on the whistleblowing helpline contract.
	5. Bidders should take their own independent legal advice, as appropriate, about any TUPE implications in respect of this procurement.
	6. Tenderers should note that the Department of Health does not offer any indemnity to any person against any costs that may be incurred should the provisions of TUPE apply. Further detail of the Department of Health’s requirements can be found in the Terms and Conditions section.

Invitation to tender for the provision of:

Health and Adult Social Care – Speaking Up Helpline and information

Defined Terms

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| Defined term | Explanation |
| Guidance | Under the core requirement, guidance is signposting individuals to other resources that may enable them to speak up about concerns. It is **not** help, advice and support tailored to an individual case. |
| “Learning not blaming” | *Learning not blaming*, is the Government’s response to three reports on patient safety. It contains several new requirements, structures and arrangements for NHS boards to be aware of and act on. The report details the Department of Health’s response to the Freedom to Speak Up Review consultation, the Public Administration Select Committee’s report *Investigating clinical incidents in the NHS* and Dr Bill Kirkup’s report on failings in care at Morecambe Bay.  |
| Social care workers | Adult social care staff includes social workers and staff employed by the local authority in addition to the staff working in different adult social care settings such as care homes, homecare and supported living services including those employed in the private and voluntary sector as well as the statutory sector. |
|  |  |