

**Q 2.3.2 Proposal**

Please provide a detailed description of the design and content of your offer for the provision, including how this meets the requirements outlined within the WHP Specification.

Your response should:

- Provide one example of a participant journey for the Health and Disability group and one other example of a participant journey for one other participant group listed at section 2.11 of the WHP Specification, to illustrate how you will provide a structured programme of interventions for each individual participant from Day 1 of referrals, the rationale for your approach and the intended frequency of these interventions for each of the two participant groups in your examples.
- Explain how you will engage prospective participants at the point of referral to the provision to ensure a high percentage of referrals start on the provision and how you will continue to ensure participants remain actively engaged with your provision in order to maximise outcomes as well as how you will continue to try to re-engage participants who disengage. Please also include why you think these approaches will be effective given what you know about the participant groups.
- Please provide two examples, with each example relating to a separate participant group, of where you have successfully engaged similar participants on relevant current or previous provision, and with what success.
- Outline how your proposal is different to services provided by JCP.
- Explain how an individual participant will receive regular reviews, including the format these will take and why you have chosen this approach. Explain how you will ensure that they progress while participating in the provision and how progress will be measured in these reviews.
- Describe the duration of each stage or intervention of the provision for an individual participant, covering each customer group, the method of delivery e.g. face to face, telephone, web based, individual, group work etc. and a rationale for why this is appropriate for the target participant group.
- Using two examples to cover at least two of the participant groups outlined within the WHP Specification, provide a rationale to clearly demonstrate why your proposed content is suitable for the specified participant groups giving evidence to support this rationale.
- Please provide one example from your organisation's current and/or previous relevant delivery experience of where your proposed approaches have been successful in the past for these groups.
- Explain what in-work support, including for self-employment, you will provide and how you will ensure that it meets an individual participant needs and employer needs to support the achievement of sustained employment.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

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**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to 7 sides of A4, **excluding** the question text and these instructions.

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Reed has designed a delivery model for the Work & Health Programme (WHP) in North East England (NEE) to meet the needs of Disability, Early Access (EA) & Long-Term Unemployed (LTU) groups & to achieve DWP's 3 Critical Success Factors.

**Our Service Overview & how it is distinct to JCP:** Our model is built on: **Intensity:** Our Advisers will have low caseloads [REDACTED], compared to JCP Work Coaches caseloads of c100 (Work & Pensions Committee, 2016), enabling Advisers to provide weekly contact (face-to-face/phone/email/text/skype), fortnightly 1:1 face-to-face meetings & monthly 1:1 face-to-face Action Plan (AP) reviews. This increased contact from the same Adviser & our robust diagnostic ensures participants receive more "personalised, intensive, face-to-face support" than JCP, critical to support participants with multiple barriers into work (CESI, 2015). Participants will also receive support via: Trainers delivering accredited/non-accredited training; & Self-Employment (SE) Advisers providing specialist advice/support to those considering SE. **Integration:** Integration Managers (IM) will build links with local services, recording these, & Reed & Supply Chain (SC) interventions, in our Route Planner Tool (RPT). Advisers use the RPT to identify provision to address participant barriers, with time allocated for case-conferencing with external partners. IMs engage new services to respond to participant needs. **Health Support:** Informed by consultation with Disability Rights UK (DR UK) & our experience of delivering NHS preventative health services to 10,000 patients in the past 18 mths, Health & Wellbeing Advisers (HWA) will deliver our health products & support access to services. **Employer engagement:** Our Employer Services (ES) team will work with employers to increase understanding of disability/health issues & source/adapt jobs to meet participant needs. **Support to Sustain/Progress in Work:** All participants starting work/SE will receive in-work & progression support to help them achieve outcomes, with employers supported to address any workplace issues.

**Delivery Approach:** To ensure NEE coverage, WHP will be delivered by Reed & 11 end-to-end SC partners, delivering support from pre-programme engagement to exit in defined areas. We will deliver from 64 fixed; 23 co-location (defined as timetabled, formalised presence in partner premises); & 14 outreach sites (drop-in sessions to support engagement). All co-location sites have signed declarations with contingency/budget provision should they become unavailable (**Assurance Risks 16 & 17**). To provide an integrated service, 65 Core Stakeholders have agreed to support our WHP delivery (Appendix 7). Reed/SC will operate the same consistent delivery model, apply the same staffing model/caseloads, & use the same diagnostic tools & products.

**The design & content of our proposal comprises 5 stages**, as shown below:

**1. PRE-PROGRAMME ENGAGEMENT:** To maximise referral to start, conversions Advisers will: 1) Provide briefings & marketing materials so JCP Work Coaches/DEAs & signposting organisations understand our WHP offer; 2) Visit JCP offices to engage potential participants, allay any concerns & utilise marketing tools, e.g. success stories. Following PRaP referral, the Adviser will telephone the participant within 2 days to arrange the Initial Appointment (IA). This will take place within 10 days (meeting 100% Start/FTA reporting & recorded in PRaP within 15 days). On the **introduction call**, the Adviser will: • sell the benefits of WHP & our support offer; • identify travel/IA needs, explain all attendance costs (including care) will be reimbursed, & where required, offer support from Community Transport providers; • identify best location for the IA, e.g. offering local outreach venues if preferred by the participant; • explain they are able to bring a friend/Support Worker, as we know this helps engage groups such as refugees or those with substance misuse needs. Participants with additional needs, e.g. hearing impairment, will be contacted by email/text/other preferred method. When the IA is agreed, participants will receive confirmation, including our Welcome Pack & map of how to get to the IA venue by post/email. Advisers will call/text 24hrs before the IA to provide a reminder & address any last-minute concerns. **The IA** (1:1, face-to-face, 30 mins) will focus on the Adviser getting to know the participant, & understand motivation

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for joining WHP (if voluntary) & aspirations & needs. The Adviser will detail our menu of services, explain our complaints/feedback process & agree date/time/venue for next meeting. Participants are informed WHP is ESF-funded & given an ESF leaflet. During the IA, Advisers: confirm/obtain personal data (& consent to share with JCP); complete the ESF1420 form (signed by both parties & sent to DWP within 5 days); & record IA evidence, & all future interactions, on Orion (our participant management system), used by Reed & SC. **Duration: Average referral to start** (days): Disability-8; EA 8; LTU 6. Based on Reed delivery where LTU engage quicker on mandatory contracts.

**2. PROGRAMME ENGAGEMENT:** Through low caseloads, Advisers are able to get to know participants & tailored services. The IA identifies participation needs, e.g. visually impaired require support from Specialist partner, RNIB. Advisers will deliver WHP from fixed/co-location sites, ensuring access for participants, particularly in rural areas.

**Diagnostics & Action Plan (DAP) Meeting** (1:1, face-to-face, 60-80 mins). The participant, with Adviser support, will complete our combined Diagnostic to assess:

**1) Readiness to Work:** Developed by Work Psychologists, it covers 5 areas: Mindset; Health; Employability; Skills & Qualifications; Personal Circumstances; & incorporates clinical mental health (MH) tools (PHQ-9/GAD-7). Using motivational interviewing, Advisers: elicit barriers to work across these 5 areas; identify strengths; & ascertain other services participants are accessing. Advisers will explain our SE offer & identify participants with an interest so they can access our SE support. If a functional skills need is identified, this is added to the AP with participants completing our functional skills assessment in subsequent appointments. Using Diagnostic results, PRaP data & any other available assessments (e.g. Work Capability), Advisers will score participant's Readiness to Work from A (job ready) to C (requires significant support).  
**2) Readiness to Change:** Participants will undertake our 10min psychological survey, designed by behavioural change experts, to indicate their Readiness to Change on a scale of 1-4. This enables Advisers to identify & support participants who are fearful of, or resistant to, the change that comes with entering work. Our two assessments are then plotted on a Matrix (A-C/1-4), providing guidance to Advisers on the interventions to prioritise (e.g. focusing on behavioural change activities first).

**Initial Action Plan (AP):** Informed by the Diagnostic, the participant & Adviser jointly create a bespoke work-focused AP, creating ownership for the participant by offering a choice of interventions to address identified barriers & develop skills. Recognising EA & Disability participants are likely to have more complex needs, we have allocated more time for the DAP, enabling the AP to be completed over 1 or 2 meetings, finalised within 20 days of referral. APs will include agreed SMART actions to remove barriers & measure progress, & reflect any adaptations (e.g. 1:1s booked around caring needs).

**Our Route Planner Tool (RPT)** catalogues local services & referral/eligibility/data-sharing agreements. The RPT filters relevant, local services aligned to the participant diagnostic, enabling Advisers & participants to 'plan a personal route' into work & integrate relevant support. This is valuable for Disability & EA groups who may need to access multiple external services. Details of any new/existing provision the participant is accessing & any case-conferencing agreed (with participant/external agency consent) will be recorded on Orion & in the AP. After the DAP, participants will have a copy of their AP (signed/dated by both parties) & details of their next meeting.

**Regular Reviews:** During their time on WHP (up to 15 months) all participants groups will receive the same frequency of Adviser support: • weekly contact, utilising face-to-face/telephone/email/Skype, based on participant choice; • fortnightly 1:1 face-to-face meetings to deliver AP actions, e.g. referral to in-house course; • monthly face-to-face meetings to review/update APs based on progress/emerging needs. To reflect need, duration of Adviser 1:1s are longer for Disability/EA groups (as shown in our Example Journeys below). Frequency/duration of Adviser support promotes active engagement & a tailored journey. At least quarterly, Advisers will re-assess Readiness to Work &

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Change to measure progress & re-focus activities. Every 6 months, a different Adviser will review progress with participants & provide the option to change Adviser if deemed beneficial. To ensure participants are making progress towards outcomes, Business Managers will use weekly Adviser reviews & Orion MI to assess participant progress against barriers & how long they have been in their current Readiness to Change/Work status, supporting Advisers to identify next steps/actions to achieve progression.

**Digital Tools (Assurance Risks 2/18/22):** These are already in place & will support participants to engage with WHP & will not replace face-to-face support. They include:

- Our Online Portal, including e-learning, e.g. how to gain promotion;
- Ability to contact Advisers via telephone/email/Skype;
- our Reed App (following tutorial to set up job alerts) to search/apply for 250k jobs.

Participants will be supported with: email use; online security; accessing local services; & online jobsearch. If participants do not wish to/cannot use our digital tools, they will access our face-to-face Adviser support.

**Disengagement:** Participants may disengage for a variety of reasons, e.g. loss of confidence at not getting a job. Weekly contact will enable Advisers to build strong relationships with participants & quickly identify those at risk of disengaging. If a participant fails to attend, Advisers make contact within 24hrs (& ongoing) to identify reasons & solutions, & encourage re-engagement (contacting external partners e.g. IAPT, where appropriate). We will inform: DWP of Disability/EA group disengagement /re-engagement; & DWP Decision Making Team if LTU participants fail to undertake mandatory activity. **Duration: Average referral to initial AP completion** (days) will be: Disability 15; EA 15; LTU 12. This is based on Disability/EA groups having more time allocated for the DAP & the option for this to take place over multiple sessions.

**We know our engagement approaches are effective:**

**1. Disability:** We engaged 6,133 people with a disability/health condition on our voluntary ESF Families contracts (2011-15). To maintain commitment, Advisers used motivational interviewing methods & integrated with local health teams to deliver Mental Health Progress Measures (PMs), helping participants manage conditions by creating & following a detailed Plan. Participants at risk of disengaging were identified via 1:1s & case-conferencing & Advisers immediately tried to re-engage via calls/emails & book a 1:1 to address issues. The approach was successful, with 32% of those who completed the Mental Health PM securing a job, & 93% sustaining for 6 months.

**2. EA:** Our Northern Ireland employment contract works with EA groups including: drug/alcohol dependent; care leavers; homeless; & ex-Armed Forces. To maintain engagement, Advisers with low caseloads provide intensive support with longer appointment times & more frequent contact. To date, we have: received 509 EA participant referrals; achieved a 92% referral to start conversion; & supported 27% to enter work (against a 19% target).

**3. PRE-WORK SUPPORT:** During the first 6 weeks, participants will have: a Better Off Calculation to show financial benefits of work; identified at least one realistic Job Goal; a CV tailored to their job goal; & discussed in-work adjustments to ensure health &/or disability is considered from the outset. The participant & Adviser use these activities to identify clear jobsearch criteria, e.g. work patterns & desired wage, which drive vacancy generation & job matching activities. Our support is detailed below, which the Adviser & participant will select from to respond to needs identified in the Diagnostic.

**a) Mindset:** From experience & SC/stakeholder consultation, we know participants often have low confidence/self-belief. Our Behavioural Science informed interventions will help participants to address barriers (particularly those with low Readiness to Change). Support includes: Changing Mindset: Our unique workshop builds confidence & helps recognise & develop behaviours/attitudes important for work & how to market qualities to employers; Character Traits: Modules to develop key traits identified as important by employers: self-awareness; resilience; self-confidence; integrity; working with others; & pro-activity; Planning for Success: Supports participants to identify their obstacles & help to build confidence by supporting them to develop solutions.

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**b) Health:** Poor health is a key issue in NEE, e.g. high levels of long-term sickness in Hull, NE Lincs & coastal Bridlington/Withernsea (Humber ESIF Strategy 2016). Where diagnostics identify a health/disability need, participants in all 3 groups will either have: an Adviser-led Health Review to identify impact on participation or ability to secure work; or those with complex needs (e.g. musculoskeletal (MSK) condition with low Readiness to Change) will have a Specialist Health Review with a qualified Health Professional, from our Specialist partner i2i, to challenge beliefs, focus on capabilities & make work-focused recommendations. Both reviews result in any health actions (e.g. request GP referral to Community MH Team) being integrated into the AP, & delivered by HWAs alongside Adviser support, with HWA/Adviser/participant meetings held to ensure support is integrated. Our HWAs will deliver: • 1:1 behavioural change-led Health Advice on coping strategies, anxiety, smoking cessation & exercise; • Health & Wellbeing courses with modules including nutrition, how to manage stress & benefits of being more active; & • 1:1 Advocacy to support participants to access health services, e.g. jointly attend 1<sup>st</sup> appointment. Local Services: Our Core Health & Social Care Stakeholders have agreed to support our WHP delivery (& will be built into the RPT), including: Insight Healthcare to deliver IAPT services in Tees Valley, Notts. & Derbyshire, Noah's Ark to provide counselling in Halifax, Newcastle Ways to Wellness MSK pilot, & Durham Community Floating Support Team's practical support for those with MH needs. We will fund services to fill identified service gaps, with Specialist partners including: Healthy Working Futures (pain management courses), Working Minds (Cognitive Behavioural Therapy) & Bank House (wellbeing sessions).

**c) Employability:** People who believe they have the skills to conduct effective job search are more likely to be active jobseekers (DWP, 2011). We will build on & not duplicate JCP support, only providing interventions where a need is identified. Our support includes: Workshops to provide/refresh tools to find work, such as CV Building, Application Forms, Identifying Job Goals, Modern Jobsearch (e.g. online applications, Universal Jobmatch) & Effective Interview Skills. As NEE employers stress the importance of work experience (Leeds City Region ESIF Strategy 2014), we will provide Volunteering/Work Placements: These will be short-term, defined roles to build work-specific skills, particularly useful for LTU & EA groups who may have limited relevant work history. Advisers will use the RPT to integrate with Local Services to add value/avoid duplication. Examples of services we have agreed integration with include: **[REDACTED]** who provide skills training & vacancies for the retail, leisure & tourism sectors in the city, digital skills workshops from Fusion Housing (Kirklees & Wakefield) & Education Development Trust's National Careers Service.

**Self-employment** is an important route into work for those with health conditions (DWP 2015) or for participants in rural areas, e.g. Hambleton, Scarborough & Ryedale have the highest NEE SE rates (Nomis 2017). Where participants wish to pursue SE, they will have a dedicated SE Adviser providing support throughout their WHP journey, providing 1:1 support to help identify viable options (linked to the NEE labour market) & produce a business plan. This is supported by our Intro to SE course to explore the financial/practical implications of SE, & our advanced SE Safe Start course covering budgeting & legal obligations, currently achieving a 76% 26-wk sustainment rate.

**d) Skills:** We will help NEE participants & employers to address: low skill levels, e.g. 13% of Nottingham residents hold no qualifications (Nomis); lack of basic skills, e.g. identified as a key issue by Tees Valley LEP; & growth/replacement demand, e.g. the growth in business services forecast by Sheffield City Region (SCR) LEP. Our Sector Tasters will showcase different sectors, helping participants consider alternative jobs/sectors, particularly those with limited work experience (e.g. care leavers) or who need to change careers (e.g. 50+, or disability prevents them doing their previous job). Our Curriculum & Training Team will help participants respond to NEE employer/sector needs by designing bespoke Employer Routeway training linked to local labour market

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opportunities, e.g. [REDACTED] Participants will be upskilled via our in-house Accredited Courses e.g. our L1 in Customer Service will fill skills gaps identified by Derby/Notts employers in Retail & Visitor Economy sectors (D2N2 Skills for Growth 2013) or via Local Provision in the RPT. Funded provision we have agreed integration with include: local colleges, e.g. East Durham College deliver functional skills; ESOL provision to support minority ethnic participants e.g. QED, Bradford; & accredited courses e.g. SIA Security Training & Health & Safety courses via S7Services Ltd & L2 qualifications in Food Hygiene & First Aid from Calderdale Adult Learning.

**e) Personalised Support:** Research shows that a holistic approach to addressing complex/multiple needs has a positive impact on job outcomes (CESI, 2014). Specific participant group/individual needs will be met via agreements with local services or funded Specialist Partners, including: • Ex-Forces: Recognising concentrations of ex-armed forces/families/reservists e.g. in Tyne & Wear & around Catterick Barracks, our Specialist partner, RBLI will provide access to their MoD funded courses bespoke to veterans, & we will fund them to deliver veteran occupational health; • Homeless: Support to address housing needs (e.g. rent arrears), with access to services from our Specialist partner, Shelter, & local providers e.g. Grimsby Doorstep; • Carers: Support to manage caring alongside job seeking & respite support, e.g. from Durham Carers Support; • Substance Misuse: With consent, Advisers work with Recovery Workers to identify/monitor triggers & conduct joint meetings, e.g. agreed with Gateshead Evolve. SC partners also bring established links, e.g. Framework is a member of the Nottingham Recovery Network; • Refugees: Referral to ESOL courses, support to use NARIC to recognise overseas quals, & local services, e.g. interpreters from Open Doors Hull; • Care Leavers: Adviser/HWA build on participant's Pathway Plan (if relevant) & work with services to build networks to reduce isolation/address barriers, e.g. Derbyshire's Care Leavers Project; • Specialist Disability Support: Our Specialist partners include: RNIB (visually impaired); Clarion (hearing impaired); & British Dyslexia Association. **Our Specialist Support Fund** will be used by IMs to source new Specialist partners to meet emerging & future participant needs, long waiting times or service gaps. To ensure our Fund is fully utilised, spend will be monitored monthly.

**Finding the right job:** We take a personalised approach to job-matching, based on individual job goals, barriers & strengths. Our Sector Tasters, Placements, Employer Routeways & ongoing NEE labour market information ensure participants understand roles/sectors prior to job-matching & we will use our Discretionary Fund to support with travel/clothing/equipment costs. Roles will be secured by Advisers & our ES Team: • Advisers use reverse marketing to source jobs with SMEs & provide 1:1 coaching; • RMs source bulk jobs from medium/large employers & provide pre-screening/interview preparation; & • ESOs help SMEs adapt roles for Disability group participants/provide workplace support. We will prioritise Disability Confident/Living Wage employers & those in local growth/key sectors, e.g. [REDACTED]. Prior to becoming SE, participants: complete a SE Checklist to ensure they are ready to start trading; & identify start-up funding (max £1000), with PRaP updated within 5 days of starting SE.

**Duration:** We used Work Programme (WP), Work Choice (WC) & Reed MI to determine duration. Data showed the Disability group take [REDACTED] months to start work: we have adjusted this to [REDACTED] months to reflect our improved WHP service design. **Average**

**duration from start to job entry** (in months) will be: Disability, [REDACTED]; EA, [REDACTED]; LTU, [REDACTED].

**4) IN-WORK SUPPORT (IWS):** Participants starting a job/entering SE will receive tailored IWS. Upon job offer/starting SE, participants attend an **Into Work Meeting** with their Adviser to ensure all support is in place, e.g. childcare. They identify risks to falling out of work/SE & how these will be managed, & agree preferred IWS frequency/method (e.g. phone), with actions jointly agreed in a signed In-Work Plan. **Participant**



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**IWS:** To address needs, Advisers will maintain regular contract, arranged around working hours as agreed in the Plan. This enables Advisers to quickly identify/support anyone at risk of falling out of work/SE or not progressing quickly enough to the earning threshold, & where relevant, provide workplace support or refer to specialist services, e.g. Wellness in Mind, Nottingham. Advisers will ensure any required external support is in place prior to ending IWS. **Progression:** Building on IWS, all participants reaching 90 days in-work/SE or who achieve the £2000 earnings threshold (whichever comes first) are offered a Progression Review with their Adviser, during which they provide 1:1 coaching to help increase salary/hours/get a 2nd job, or review trading to increase revenue if SE. **Employer IWS:** To address employer needs & support outcome achievement, our RMs/ESOs will provide: **Advice:** By signposting employers to relevant materials (e.g. BITC's MSK employer Toolkit) & local provision, including: manager training (e.g. Mind's free MH webinars); ESFA workplace learning provision to upskill their workforce; & local initiatives/providers e.g. Doncaster GTA's Logistics courses; **Workplace support:** ESOs will: visit participants & employers in the workplace to address issues (e.g. fluctuating health issues) providing tailored advice, e.g. Fit for Work, Access to Work & workplace adjustments; & promote benefits of becoming a Disability Confident/Living Wage employer. **Occupational Health:** Employers who need help to support employees with health needs can access our telephone occupational health support, delivered by Specialist partner, i2i. **Duration:** Based on HMRC Real Time Income WPWC data, **average duration** from job entry to job outcome (months) will be: Disability, [REDACTED]; EA, [REDACTED]; LTU, [REDACTED]. Based on: support provided by ESOs for Disability group participants; analysis indicating the Disability group enters work on higher pay; & SE outcomes taking a minimum of 26 weeks.

**5) PROGRAMME EXIT:** All Completers are invited to an Exit Review with their Adviser to: review achievements; complete a final AP agreeing next steps, e.g. signpost to employment services if work is not secured & if appropriate book a JCP appointment. Adviser submits an Exit Report to DWP within 10 days (detailing: contact details; activities undertaken; behavioural changes; quals/skills gained; & destination info), records end date on PRaP & informs JCP. **Duration:** All groups, at least 30 mins.

**EXAMPLE JOURNEYS: 1) Disability** Ed has chronic back pain & meets our Adviser at Derby JCP who describes our services & allays fears about joining WHP. Ed has his IA (30mins) at a community centre to discuss goals/interests & he feels motivated to engage. Ed's DAP (80mins) is held at our Derby office & Ed/Adviser jointly create an AP, with sequenced interventions to: reflect services already accessed; build his strengths; & address barriers. Whilst on WHP, Ed has weekly contact (5-10 mins), fortnightly 1:1s & monthly 1:1 AP reviews (both 40mins) with his Adviser & completes activities, e.g. our Self-confidence workshop (3hrs) & Healthy Living course (3hrs) with a HWA. Ed's DAP identified a MH issue, so he has a Specialist Health Review (1hr) & he discloses his depression. Our RPT identifies Insight Healthcare's IAPT service, so his Adviser encourages Ed to self-refer, which he does, & our Adviser arranges case-conferencing (1hr monthly). Ed is waiting for back pain treatment, so Adviser uses the RPT to identify our Specialist Partner, Healthy Working Futures, who provide physio. A 2wk placement arranged by our RM builds skills/confidence & Ed starts looking for work. He applies for an RM sourced job, is successful & has an Into Work meeting with his Adviser (50min) to discuss workplace adjustments & agree IWS frequency/location. Adviser provides 50mins of IWS weekly. After month 1, Ed requests less frequent contact so IWS reduces to 60mins monthly. Our ESO visits Ed in work & supports him with an Access to Work application. Ed's Progression Meeting (45mins) supports Ed to discuss increasing hours with his employer. An Exit Review (30mins) ensures ongoing external support is in place. **Rationale for content/approach:** Content/structure was co-designed with DR UK. Pre-referral engagement allays fears (Mind, 2014). Durations



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& methods of support reflect low Adviser caseloads, & fortnightly 1:1s allow frequent contact known to 'make a difference' (Learning & Work 2016), provide "opportunity to tailor services" (CESI, 2014) & empower participants to create their journey (DRUK, 2017). Our health reviews, 1:1 support & products drive personalisation. Using learning from social prescribing models, HWA advocacy supports integration & improves service access. RMs/Advisers source jobs & work with employers to address wariness (Centre for MH, 2013). ESO IWS provides targeted & practical employer & participant support, successful in employing this group (Disability Forum, 2016).

**2) LTU** Jo has been jobless for 4 years. At her IA (30min) she discusses: work history; support received to date; & aspirations/needs. Her Adviser ensures Jo understands: support available; expectations; & mandatory elements. A DAP meeting is booked at SC Partner Northumberland Council's Blythe site, & Jo's Adviser calls her 24 hours prior to confirm time & location (10min support call). The DAP meeting (60mins) identifies Jo lacks confidence & skills to access employment. These inform the SMART goals in her AP. Jo's Adviser, using our RPT, identifies interventions including: Reed's Mindset course (18 hours) & locally-funded training from Northumberland Learning & Skills Service. Interventions are sequenced/paced to meet Jo's needs & reviewed at each Adviser face-to-face meeting, where Jo also receives 1:1 support on: CV building; interview techniques; & jobsearch (fortnightly 1:1s & monthly 1:1 AP reviews 30mins, & support calls/emails 10mins monthly). When Jo has gained confidence/skills & is ready to move into work, her Adviser encourages her to undertake supported jobsearch activities. Once Jo finds work she & her Adviser have an Into Work Meeting (30mins) to ensure she understands the role & has a travel to work plan. Once in work, Jo's Adviser maintains contact via calls (15mins weekly month 1, then 20mins monthly as she is doing well) & invites her to a Progression Meeting once she has earned £2000 to discuss future work (45mins). Jo achieves the earnings threshold & completes an Exit Review (30mins). **Rationale for content/approach:** Advisers reinforce mandatory activity, as it is vital participants understand conditionality (CAB, 2013). Durations & support methods are built on our 19 years' experience of supporting LTU participants & in-depth research, e.g. we know continuity, frequent contact & empathy are valued by LTU (DWP 2012) & critical in supporting people into work (DWP, 2007). Our mindset focus builds confidence & motivation, often lacked by LTU from repeated jobsearch without success (CESI, 2015). As low-skilled LTU have a lower chance of returning to work (European Commission, 2016), we will integrate support with skills provision.

**Past Success & Scale (Assurance Risk 1):** We adapted our WP model after Yr1 to improve performance with: lower caseloads & more 1:1 Adviser face-to-face time; integration with IAPT, skills & Careers Service providers delivering from our sites; & new training products to improve mindset & resilience. These approaches, which we have built into our WHP proposal, enabled us to meet & exceed WP MPL performance for Payment Groups (PG) 1/2 (JSA), & 6a/6b (ESA) with success demonstrated below:

	Year 2	Year 3	Year 4	Year 5	Year 6
PG 1 & 2	100%/128%	129%/158%	116%/152%	135%/161%	270%/237%
PG 6a & 6b	79%/120%	159%/206%	102%/180%	271%/262%	132%/163%

Our WP contract has supported 14,660 participants with health needs/disabilities. This built on our previous delivery of Pathways to Work & New Deal for Disabled People contracts which helped 56,454 people & was delivered from 26 sites by 240 Advisers/Health Professionals demonstrating evidence of delivering services at scale.

**Q 2.3.3 Delivering a Personalised Service**

Explain how you will identify: (1) an individual participant's strengths; (2) their barriers to entering work (including, but not limited to, health and disability); and (3) how your provision will take a holistic person centred approach.

In your response, please include details of:

- How you will identify the individual strengths and needs of each participant at the start of the programme and how you will use this information to build a structured, sequenced and personalised individual action plan with goals which are specific, realistic and achievable.
- How local issues and/or barriers relevant to this CPA will impact the customer journey, what these issues and /or barriers are and how you will address their impact on the customer journey.
- How you have identified the third parties within your response which provide existing services to WHP potential participants within the CPA, and how and why your proposal complements, without duplicating, such third party services.
- How you intend to engage with other relevant stakeholders the participant may already be engaging with, and how you will gain the participant's consent to do so, in order to join services up around the participant to improve outcomes. How will you use the information received from other relevant stakeholders to improve the participant's journey?
- How you will assess the on-going relevance and effectiveness of a participant's personalised plan and how you will refresh it over the participant's time on programme.
- Explain how you will manage participant exit from the programme: (1) at the end of the 15 months; (2) if the customer is an early completer (please see paragraph 1.37 of the WHP Specification); and/or (3) when in-work support is ending post 15 months; and describe the process involved.
- How you will ensure all participants have a customer journey which they will value and that demonstrates objectively measurable progression, from both the participant and DWP's perspective, irrespective of outcome. How will you measure the value placed on the customer journey by participants and the progression of participants?
- How will you ensure consistency of service delivery across the whole CPA to ensure all participants receive the same quality of service
- How you will ensure there will be funding to cover any specific customer needs and that this funding, if a separate funding pot, will be set aside to support individual customer needs for the duration of the contract.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

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**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to 4 sides of A4, **excluding** the question text and these instructions.

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Recognising each participant's strengths & barriers are unique, we built a structured model to fully personalise the participant journey with low caseloads [REDACTED]. Reed has 16 years' experience delivering employment & health contracts in North East England (NEE) & Supply Chain (SC) partners are well established in their delivery areas. We will **IDENTIFY THE STRENGTHS & NEEDS** of all participants through:

**Our Initial Appointment (IA):** To arrange the IA, Advisers will call participants to introduce themselves & establish & address accessibility barriers, e.g. by organising & paying for community transport in rural areas or where health conditions limit travel (e.g. with Beverley Community Lift in East Riding) The IA will be an informal face-to-face discussion focusing on immediate needs to build rapport & trust, encouraging participants to share information on barriers & be positive about strengths/aspirations.

**Diagnostics:** conducted at the 1:1 Diagnostic & Action Planning meeting (second appointment) to assess: 1) Readiness to Work: Advisers trained in Motivational Interviewing, Solution-focused & Cognitive Behavioural Therapy techniques ask open-ended questions to elicit full responses & encourage barrier disclosure & strengths identification across 5 categories: *Employability; Skills & Qualifications; Mindset; Health; & Personal Circumstances*. All strengths/barriers are recorded on our Participant Management System & Advisers allocate a score from A (job ready) to C (requires significant support). 2) Readiness to Change: A 10-minute survey, applying behavioural change psychology to measure how prepared participants are to make life changes necessary to enter/sustain work, from 1 (ready to change) to 4 (not ready). Our Initial Diagnostics identify any need for **Additional Assessments** including:

Functional Skills: identifies English, Maths, ICT proficiency, learning style & Additional Learner Needs. Impact: important to diagnose & address early, particularly in areas like Kirklees where 20% of adults are below L1 qualified; Health: delivered by Advisers (or specialist partner i2i for complex needs). Impact: important in areas with high numbers of people with musculoskeletal conditions (e.g. the former industry towns of Mansfield & Bolsover (D2N2 ESIF Strategy)) looking for growth sector jobs such as in the visitor economy, which do not negatively impact their health. Action Plan (AP): The combined results from assessments, barriers, strengths & support already accessed will be summarised in the AP, with Advisers & participants using our **Route Planner Tool** (RPT) to select local interventions directly addressing & linking to individual personal barriers & strengths. The RPT includes: Reed & SC internal provision (e.g. Reed's Positive Thinking Course); existing local funded services (e.g. support for participants with mental health conditions in Staff. Moorlands from Changes Health & Wellbeing); & specialist paid provision addressing service gaps/waiting lists (e.g. pain management & supported self-management courses from specialist partner Healthy Working Futures in Derbyshire & Yorkshire). Advisers & participants will agree & *sequence* realistic, achievable SMART actions covering short (weekly), medium (monthly) & long-term (3-6 months) goals reflecting skills/training needed to access NEE growth sector jobs. The AP provides the basis for person-centred support addressing holistic participant needs.

**NEE & LOCAL ISSUES/BARRIERS & IMPACT:** Consultation with 147 stakeholders informs our understanding of local/NEE-wide issues & participant barriers including: Long-term poor mental/physical health prevalent among NEE jobseekers with 52%+ of ESA Claimants in Chesterfield, York, Nottingham, Sheffield & Leeds presenting with mental health conditions & 16%+ in areas including Ryedale, S. Derbyshire & Hartlepool with musculoskeletal conditions (Nomis, 2017). This is compounded by inconsistent access to health services within NEE, e.g. Newcastle Council told us IAPT services in the city are oversubscribed. Impact: The link between worklessness & poor health (Improving Lives, 2017) requires us to address health barriers to support participants into sustained work. Solutions: We co-designed our participant journey with Disability Rights UK (DRUK) & our model includes: • two clinical assessments in our diagnostic to identify mental health barriers at the earliest stage; • a Health Review at

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the outset ensuring support & job search reflects & addresses health needs; & • specialist Health & Wellbeing Advisers providing advice (e.g. healthy eating, physical activity). Poor public transport connectivity in rural areas, e.g. N. Yorkshire, including Craven & Hambleton, is rated worst in the UK for service access (York & N. Yorkshire Economic Review 2015). Impact: Could limit engagement & access to work due to infrequent public transport, travel times, cost & travel anxiety. Solutions: Advisers in areas over 50% rural have a lower average [REDACTED] & max [REDACTED] caseloads to account for increased travel times to deliver from rural co-location sites (e.g. Buxton where we have agreed co-location with High Peak Council). Advisers & Trainers will agree flexible workshop/training start/end times to account for public transport timings/ distance & will pay travel costs & arrange transport where needed. High numbers of residents with no qualifications, e.g. 12% of adults in Middlesbrough & Rotherham, versus 8% nationally (Nomis, 2017). Impact: Skills shortages limit job options as "there are fewer unskilled jobs in the labour market and this trend is set to continue over the next decade." (Leeds City Region (LCR) Emerging Skills Needs, 2015). Solutions: Recruitment Managers will work with local employers (e.g. [REDACTED]) & our Curriculum & Training Team to quickly develop bespoke training/screening to respond to specific employer needs, tailoring training to local jobs (e.g. we developed a food manufacturing course for [REDACTED] in 5 days helping 12 participants start work). Insecure employment: The North East region has seen the highest proportion of growth in insecure jobs (67% v 17% in London (ONS Q4 2011-16)) & seasonal employment affects participants in Peak District & Coastal areas e.g. Scarborough. Impact: participants face less certainty in work & may need to change jobs more frequently &/or have multiple jobs. They also face difficulties planning for rent, care & other outgoings Solutions: Advisers will: educate participants about the reality of their local labour market; support them to develop skills through in-house courses & external provision &/or consider self-employment to maximise job options; & deliver intensive in-work support to apply for additional/new roles. RMs/ESOs will source jobs in growth sectors, such as logistics in Tees Valley, to minimise short term opportunities.

**IDENTIFICATION OF THIRD PARTIES:** Working with stakeholders (such as Bradford Council) we mapped funded NEE provision relevant to WHP & already have 65 Core Stakeholders with signed declarations who have agreed to support our participants. Mapping will continue post-bid submission, during implementation & throughout the contract. [REDACTED] Integration Managers in post two months prior to WHP start, will meet providers to integrate & align services & add provision details to our RPT (following quality check). They will keep referral details up to date & be the key contact for providers. Core Stakeholders that have agreed to support our delivery include: Advice Services e.g. Noah's Ark (Halifax) will deliver debt advice & counselling; Mental Health e.g. S. Tyneside NHS to deliver psychological therapy & recovery-focussed treatment; Physical Health e.g. supporting participants to access Ways to Wellness' musculo- skeletal social prescribing pilot in Newcastle; Training providers such as North Lindsey College (Scunthorpe) to upskill participants; Ex-Armed Forces: RBLI will deliver MOD-funded bespoke 5-day courses to motivate & support ex-armed forces & families into work; & support for refugees such as translating services, welfare rights advice & social activities from Open Doors Hull. Integration Managers ensure we complement & do not duplicate services by adapting our service locally e.g. our Health & Wellbeing Advisers will not deliver advice on physical activity, if funded provision is in place.

**RELEVANT STAKEHOLDERS/SERVICES:** Advisers will use open questions & motivational interviewing techniques to encourage participants to disclose details of services already accessed at Diagnostic/AP meetings & on-going. Advisers will gain participant permission (via signed Consent Form) & contact other services to

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understand support, avoid duplication & agree contact frequency (e.g. monthly case conference). Advisers will work with other services throughout the participant's journey & invite them to the Into Work Meeting to consult on In-Work Plans. Prior to WHP Exit, Advisers will liaise with services to ensure external support continues. Communications are recorded in the AP. Improving Participant Journey: information sharing helps Advisers & other services to understand on-going needs, (e.g. PROPS NE will help Advisers understand drug addiction triggers via case-conferencing & training) & select & appropriately sequence support to accelerate progression & achieve outcomes.

**ONGOING RELEVANCE/EFFECTIVENESS:** Complex issues may not present via formal assessment, but via ongoing engagement/support (Learning & Work, 2015). Advisers will be trained to identify underlying barriers more likely to be disclosed once trust is established & will identify support, e.g. we have engaged IAPT services such as Talking Matters Northumberland as undisclosed mental health issues will affect participants in all groups. The AP is a 'living document', continually reviewed & updated, responding to: ongoing assessment; participant disclosure; information from other agencies; labour market shifts (e.g. new employers moving to the area) & skills & training needed. **APs will be refreshed** via: short weekly phone calls/face-to-face meetings; so participants receive regular communication; Fortnightly 1:1 face-to-face meetings to provide IAG, review progress & respond to emerging needs; Monthly 1:1 face-to-face Reviews to assess progress against (& sign off) completed SMART actions & identify on-going support. At least quarterly, Advisers will re-assess Readiness to Work/Change to measure progress, review needs & re-focus activities; & 6 Monthly Refresh Reviews from a different Adviser to impartially assess progress & give the option to change Adviser. On Securing a Job, needs will be reviewed at an Into Work Meeting & used to create an In-Work Plan to ensure support is in place, with ongoing, tailored IWS provided to the participant to address any issues.

**Horizon Scanning:** The Regional Director will chair a quarterly Integration Board attended by Reed & SC staff, to: review participant data; Reed Job Index data (salaries/sectors); & employer & stakeholder feedback to identify/forecast NEE social & economic trends. The Regional Director will update our service in response & active communication (email bulletins, daily staff meetings) ensure Reed & SC staff are updated on opportunities, e.g. via the Construction Training & Employment Hub run by Future Regeneration of Grangetown in Redcar & Cleveland.

**WHP EXIT:** Participants will be advised of anticipated WHP end date 3 months in advance & reminded 4 weeks before end to manage expectations & book Exit Review. 15 Month Completers/Early Completers: Exit Reviews will be held in the final 4 weeks of WHP (or on notification of early completion) focused on: distance travelled, support received. End of In-Work Support (IWS): Advisers provide IWS to participants until they reach the salary threshold &/or max WHP time. Exit Reviews will be held face-to-face/by phone within 4 weeks of the end of 182 day IWS limit, reinforcing achievements & identifying ongoing needs. All participants create a joint AP (Exit Review) with their Adviser, focused on career/progression for those in work & next employment steps for those not in work. For those with complex needs, Advisers involve external providers to ensure a support network is in place. For participants not in work, Advisers will book a JCP appointment & participants will complete a feedback questionnaire (to inform our continuous improvement process). All completers: Advisers use Orion to generate an Exit Report with 500 words+ of free text, detailing: contact details; activities undertaken; quals/skills gained; distance travelled; ongoing support needs; final AP.

**A VALUED JOURNEY** which demonstrates progression/distance travelled will be achieved for all participants, via: • Robust Diagnostics: to fully identify participant needs & tailor support to their strengths/barriers; • Intensive Adviser support: to maintain participant motivation & help sequence & coordinate support with other services to maximise integration; • A participant-owned AP, co-developed with their Adviser,

ensuring activities & timescales are agreed, valued & achievable. This provides ***“independence, empowerment & choice”*** which participants value (Gore et al, 2013); • Measuring Distance Travelled: by re-assessing Readiness to Work/Change quarterly Advisers can demonstrate & celebrate participant progress; • Feedback: We involve participants in designing & improving services engaging them via bi-annual focus groups & quarterly surveys; • Exit Reports: shared with DWP & participants to summarise achievements & record outcomes achieved during WHP.

**CONSISTENCY**: Reed & end-to-end SC partners will deliver the full participant journey (pre-programme to exit) & have the same staffing structure & caseloads ensuring participants receive the same high quality service, regardless of provider/geography. We will ensure consistency via: Diagnostics & Products: All providers will use the same diagnostic & be trained in delivering our products (e.g. Mindset & Wellbeing); Customer Service Standards/Minimum Performance Levels: Reed & SC will be monitored by Reed's Compliance & Quality Executives to ensure consistent quality & performance; Consistent Management: SC delivery & management is embedded in our operational structure, not a separate function, & all delivery teams work to the same standards; Participant Management System (Orion): used by Reed/SC to record every participant interaction allowing for consistent performance & quality management; Training: All Reed/SC staff receive the same contract-specific induction & DRUK training to ensure consistent understanding of health conditions; Observations/File Checks: Managers observe all delivery staff monthly & review participant files quarterly to ensure barriers are being addressed; Outcome Monitoring: Business Managers will review MI & identify additional support for any participant group with below average progress; & Participant Feedback via quarterly surveys/suggestion boxes to identify & make improvements.

**SUPPORTING SPECIFIC CUSTOMER NEEDS**: Reed used stakeholder feedback & research to target additional specialist provision (paid for from our WHP budget) to the needs of NEE customers by: • Meeting specific needs of participants with a disability/health condition (e.g. Specialist Partner Clarion will deliver 1:1 & interpreting support); & • Funding specialist provision where we know there are local service gaps, e.g. as there is limited support for the growing number of refugees in Leeds, we engaged specialist partner RETAS to provide tailored group ESOL training & 1:1 support to participants. To respond to emerging needs over the contract, local operational teams will have access to a Specialist Support Fund allowing flexibility via delegation of authority to Business Managers to procure local provision, with spend monitored monthly to ensure it is fully utilised. Integration Managers will continually map provision & service gaps, responding to changes in provision/funding cuts. Each year we will formally review our Specialist Partners (with DWP & local stakeholders) & identify the need for additional Specialist Partners. Reed commits to spending our Specialist Support Fund allocation & has suggested an amendment to the WHP contract to demonstrate commitment. We have a separate budget to fund participant travel, caring costs, clothing & equipment. **Additional Assurance** Risk 1: Reed supported 51,937 DWP Pathways Programme participants with health conditions/disabilities across 20 sites with 212 Advisers & a clinical health team. Reed currently delivers the NHS England National Diabetes Prevention Programme & integrated health contracts to 6,200 participants, rising to 32,000 by 2019. SC partners were selected based on expertise/ability to deliver to people with health conditions, e.g. Durham Council has supported nearly 3,000 Work Programme participants achieving 414% of outcome targets with PG6a group over the last 12 months & is already integrated with local health providers. Reed's Health champions, lead experts in specific conditions, e.g. Autism & Dyspraxia, will provide Reed/SC staff with support & training to promote understanding of health conditions & disabilities.



**Q 2.3.4 Employer Engagement**

Please describe, in respect of each of the participant groups how you will engage with employers within the CPA to achieve Outcomes.

Your response should include a detailed description of:

- How you will engage, throughout the life of the contract, with employers you have identified in Appendix 1 in order to capitalise on the opportunities to achieve Outcomes for participants. Please outline any future employment opportunities you are aware of within this CPA.
- Your rationale behind this approach and how you think it will benefit participants and employers.
- How you will actively promote your services and work with local employers to create a range of employment opportunities for the participant groups, including how you will identify and exploit future developments in the CPA to enable WHP participant groups to access employment opportunities.
- How your approach to working with both local large employers and small and medium enterprises (SMEs) and how your proposal will differ in terms of the in-work support to participants employed by different types of employers, employers with different types of infrastructure and participants with different needs.
- Your in-work support offer for the participant, employer and the self-employed and how this will promote up-skilling participants.
- How you will map participant needs to the employment opportunities within the CPA and how you will educate participants about the realities of their local labour market in context of how it applies to the individual participant.
- The three main challenges faced by local employers and/or sectors in the CPA, whether these are challenges which you could have an impact upon and how you will work with local employers to help them address these challenges (where applicable). If any challenges you have identified are ones which you cannot help address by working with local employers, please explain why not.
- Two examples of where you have successfully engaged with employers during provision of similar size or scope. Each example should include background on the nature and rationale for engagement, how your service successfully placed individuals into employment and helped the employer with a key challenge and what lessons you learnt from this example that you will embed in your approach on the Work and Health Programme.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

**Please complete Appendix 1 detailing key employers in the CPA you will engage with to achieve outcomes for participant groups.**

**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to **5** sides of A4, **excluding** the question text and these instructions.

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In North East England (NEE), Reed & our supply chain (SC) have worked with 13,100+ employers to place Disability, long-term unemployed (LTU) & Early Access (EA) group participants into work on contracts including Work Programme (WP) & Work Choice. Our experience & WHP approach (detailed below) address **Assurance Risks 5 & 6**.

**Resourcing employer engagement:** To engage employers for WHP, we will have a dedicated Employer Services (ES) Team which includes: • **[REDACTED]** NEE Regional Employer Manager (REM): Responsible for implementing & updating our WHP Employer Engagement (EE) Strategy, managing large accounts across Reed/SC, co-ordinating campaigns & sharing best practice; • **[REDACTED]** FTE Recruitment Managers (RMs): Will engage & support large/key employers, generating jobs, work placements & tasters for all groups; • **[REDACTED]** FTE Employment Support Officers (ESOs) will engage SMEs & support them to recruit Disability group participants. ESOs will promote the skills of disabled participants, give advice on adapting roles & provide workplace support.

**To achieve consistency**, the REM will implement & monitor our EE strategy across NEE. Reed & our SC will have the same RM & ESO roles, & all engagement activity will be captured on our participant management system, Orion. RMs & ESOs will work in geographically-based teams enabling them to build on/develop local labour market knowledge & employer contacts. Building on Reed's internal employer engagement training, the ES Team will be trained by our strategic partner, Disability Rights UK (DR UK) in: • Disability Confident campaign; • Benefits of employing disabled people; • Job carving; • Accessible recruitment processes; • Reasonable adjustments; & • support for employers & employees, e.g. Access to Work. Our ES Team will be further supported by: Advisers who are trained to engage SMEs for participant-led singular opportunities using reverse participant marketing; & our Curriculum & Training Team who can quickly develop & deliver bespoke training to meet employer needs (e.g. we developed a food manufacturing course for **[REDACTED]** in 5 days helping 12 people secure work).

**Achieving outcomes:** Our ES Team & Advisers will be responsible for securing the following proportion of all WHP jobs: RM: **[REDACTED]**; ESO: **[REDACTED]**; **[REDACTED]** Self-employment (SE) outcomes; & the remaining **[REDACTED]** sourced by Advisers & directly by participants.

These proportions are based on our previous delivery with adjustments made to reflect Local Authority (LA) level labour markets data, e.g. higher SE rates will be achieved in N. Yorks. & Northumberland, where SE is an important route into work.

**IDENTIFYING EMPLOYERS:** Within Appendix 1 we identify 190 NEE employers (over half are existing Reed/SC relationships such as **[REDACTED]**, **[REDACTED]**) across 9 growth/key sectors to secure vacancies for participants. Appendix 1 is informed by our delivery experience & knowledge of how NEE labour markets differ, e.g. reliance on large employers in Tees Valley (TV), & dominance of small/micro businesses in York, N. Yorks & East Riding (YNYER) LEP. This knowledge has supported us to **identify future employment opportunities** that are relevant to our participants & are in NEE growth/key sectors including: logistics & transport in **[REDACTED]**, Derby/Notts (D2N2) & North Lincs e.g. up to 1,000 jobs from **[REDACTED]** new distribution centre near **[REDACTED]**; professional/ business services in urban centres such as Newcastle & Leeds, & out of town hubs e.g. IBM at Cobalt Park in N.Tyneside; tourism in D2N2 & Leeds City Region (LCR), e.g. Leeds' £162m Thorpe Park leisure & retail development; low carbon in TV, LCR & D2N2 e.g. **[REDACTED]**. Staff turnover will also create replacement demand, e.g. 67,000 jobs in YNYER by 2020. In addition, our WHP proposal recognises that a significant proportion of suitable jobs will come from SMEs. Our approach includes ESOs to increase the number of SMEs providing opportunities for the disability group & Adviser training on how to engage employers to source jobs for all groups.

We will **ENGAGE EMPLOYERS** identified in Appendix 1, & new employers identified during the life of the contract as detailed below. The REM will be in post from Dec-17 to create a NEE EE Strategy prior to contract go-live. This Strategy will ensure all key

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employers (including Disability Confident/Living Wage employers) have an assigned lead contact who will engage (or re-engage if an existing employer contact) to explain WHP & the support we can provide. All employer engagement will be recorded on Orion, enabling the REM to track progress & vacancy generation. The REM will also ensure employer contacts are shared to maximise opportunities, e.g. they will secure an introduction with B&Q, who work with SC partner Framework in Worksop, to access vacancies in B&Q's retail & distribution operations across NEE. Every quarter, the ES Team will formally discuss engagement activity & share best practice & the REM will review/update our Strategy to ensure it remains relevant to the NEE labour market.

**Our engagement approach:** We have developed a **core support offer** which will be used to engage large & small employers, by offering: **A single point of contact** (SPOC) from the initial meeting to discuss recruitment needs & explain our offer, to placing candidates & providing in-work support. By having a SPOC we will embed WHP in their ongoing recruitment process & build long-term relationships. **Flexible Support:** Responding to individual employers' hiring/staff development needs, RMs/ESOs will work with HR staff/managers to co-design bespoke recruitment support, including pre-screening & shortlisting of applicants. **Tailored training:** In response to RMs & ESOs identifying skills/quals sought by employers through horizon scanning, our Trainers will deliver accredited/non-accredited training from our in-house courses & broker links via our partnerships with local training providers so participants have the required skills. **Employer Routeways:** Combining recruitment, tailored training, placement/work trial &/or guaranteed interviews to provide employers with participants who are trained & fully understand the role. Our JCP Retail Routeway contract combined 3 days' training with 2-week placements to help 207 employers fill 324 vacancies. **Advice:** To secure roles for Disability group participants RMs/ESOs/ Advisers provide IAG on attracting, recruiting & supporting participants, & becoming Disability Confident. Employers can also access our occupational health support, via specialist partner i2i.

**PROMOTION:** Our Central Marketing Team will provide ongoing support to our ES Team to develop tailored campaigns. This will include: targeted email campaigns to 25k employers registered on reed.co.uk; sharing case studies & good news stories with local/regional media; & updating our website so employers can see benefits of recruiting participants. Our Marketing Team will support our REM to conduct targeted events, including business breakfasts, jobs fairs & drop-ins at Growth Hubs, business parks & employer forums to promote our offer, e.g. East Midlands Chamber events. Following promotion & generation of leads, our ES Team will work with employers to **create opportunities** for the 3 participant groups, including: explaining job-carving techniques, e.g. remove physical duties (Disability group); promoting job-sharing/part-time hours for Carers (EA group); & offering work trials (particularly useful for LTU).

**FUTURE DEVELOPMENTS:** Our ES Team will **identify** further opportunities via *horizon-scanning* activities including: **Local/regional networks:** RMs will participate in stakeholder & employer networks to stay up to date with local arrangements/plans such as: • Section 106 jobs/training & wider LA opportunities (e.g. retail/leisure development in Northumberland St, Newcastle); • Growth deals (e.g. LCR deal creating 6,000 jobs in Bradford, Calderdale, Kirklees & Wakefield); • new developments (e.g. Nottingham Unity Square); & • Initiatives to align employment, skills & health (e.g. Humber Skills Pledge). **Labour Market Information (LMI):** RMs will conduct quarterly reviews of: • Reed's Job Index which has real-time recruitment data from reed.co.uk (UK's largest jobs site) to analyse labour market/sectoral trends; • LEP labour market analysis & Strategic Plans, e.g. SCR Labour Market Information 2016; & • Other local data, such as Careers Yorkshire & the North East LMI Portal to identify expected growth sectors, skills demand & hard to fill vacancies. Our REM will **exploit** future opportunities by: **Engaging decision makers** (e.g. in LAs) when new developments are at an early stage to influence the design/creation of new skills &/or work initiatives to provide opportunities for all participant groups, e.g. guaranteed interviews &

ring-fenced vacancies; & Integrating our services with existing local brokerage teams (e.g. Newcastle Futures) & employer initiatives to add value & deliver a cohesive service for participants, e.g. [REDACTED]. This horizon scanning & quarterly ES Team meetings feed into EE Strategy updates to drive future outcomes.

**DIFFERENTIATING OUR OFFER:** Our experience shows SMEs & larger employers have distinct concerns/needs. **SMEs** often have: • Less in-house HR expertise & fewer structured practices; • More immediate & specific requirements for single roles; & • Reservations about employing those with a disability/health condition due to concerns around absence/time-off. Our support for SMEs includes: • Intensive guidance from ESOs on making adaptations for Disability group participants; • Use of our sites to conduct interviews; • Support to create a business case to become more diverse; • IAG on recruitment policies; & • help for participants to better manage their health condition. Our experience shows **large employers** often have: • Clearly defined recruitment processes; • Bulk vacancies; • Structured support & staff development practices. To reflect this, our RMs/REM will: • Demonstrate the economic benefit of our fully-funded service; • Co-ordinate/deliver accessible Screening Days for bulk vacancies; • Create bespoke training to prepare participants; & • Deliver co-designed induction training.

**IN-WORK SUPPORT (IWS):** Is provided to participants entering work/SE & employers: **Participants:** The key part of our offer to employers is finding the right candidate who is ready to commence & sustain in work. To achieve this, on job offer, participants attend an Into Work Meeting (IWM) with their Adviser to ensure support is in place. They identify risks to falling out of work & how these will be managed, & agree preferred IWS frequency/method, with actions agreed in an In-Work Plan. Participants will be encouraged to contact their Adviser if any issues arise. Through maintaining regular contact, Advisers will be able to quickly identify & then support anyone at risk of falling out of work. ESOs will provide practical advice (e.g. on workplace adjustments) to help participants settle in to their new role. Progression/Upskilling: Advisers help participants achieve future job goals via: Progression Review (when reach 90 days in-work/£2000 earnings threshold) to identify coaching/skills needed; Career Plan to support promotion/increased hours; & signposting to local in-work skills provision.

**SE Participants:** The IWM includes a SE Checklist to ensure participants are ready to start trading, e.g. book-keeping/insurance in place. SE Advisers support participants to trade, including review of income generation & activities to generate a business pipeline. Progression/Upskilling: Progression Reviews (when reach 90 days' trading) will develop a Growth Plan, identify any additional skills needs (e.g. completing tax returns) & support further access to training/online toolkits.

**Employers:** RMs/ESO will: • signpost to support (e.g. BITC's Mental Health employer Toolkit); • provide details of workplace learning provision to upskill staff; • support to backfill jobs following promotion; & • support on the benefits of being a Disability Confident/Living Wage employer. Recognising that **SMEs** will need more support, ESOs will provide: • workplace support to address issues; • tailored health advice, e.g. Fit for Work, Access to Work; • access to telephone occupational health support from Specialist partner, i2i; & • Disability Awareness mentoring to line managers. Integrated participant & employer support: RMs/ESO will feedback to Advisers on any participant concerns raised by employers (e.g. poor time-keeping) & if participants raise concerns, Advisers will engage RMs/ESO to identify additional support needed by the employer. Where a participant is at risk of falling out of work, Advisers will seek a three-way meeting with the employer (if appropriate) to discuss strategies to remain in work. **MAPPING PARTICIPANT NEEDS:** Our ES Team will source opportunities tailored to meet the needs of participants in all 3 groups. This includes: • Roles suited to those with disability/health conditions, offering increased flexibility or less physically demanding for those with musculoskeletal conditions (high need in County Durham); • Opportunities to overcome low skills, focusing engagement on employers who provide in-work training (e.g. 67% of SCR employers

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provided staff training in the last year), particularly for LTU who often have low skills; • Meet EA group needs such as jobs within local communities for those with limited English (affects high rates of West Yorks residents) & specific employer initiatives, e.g.

**[REDACTED]**. In rural areas, e.g. Derbyshire Dales, our ES Team/Advisers will focus on local SME's to source jobs for those who cannot travel into urban centres & encourage employers to align shift patterns to public/community transport travel times.

We will **map** participant needs to jobs via: • Participant-led Employer Engagement: Advisers will record all participant job goals & specific requirements on Orion. Our ES Team will run weekly Orion reports to collate this at site level to drive local employer engagement activity & employers/sectors to target. • Automated vacancy matching: RMs/ESOs will upload vacancies onto Orion, which automatically matches participants to vacancies that meet their needs. Orion also integrates with our Online Portal's jobsearch facility (includes Universal Jobmatch). • Working with Specialist partners, including Clarion (hearing impaired) & RNIB (visually impaired), who have agreed to broker jobs from their employer networks for our disability group participants.

**Educating participants on local labour market**: Our ES Team will use employer links to understand recruitment pipelines & future skills/job needs at a local level. RMs will provide Reed/SC sites with monthly information on: • local LMI, growth sectors, salaries & trends; • hard/soft skills sought by employers/sectors; & • any feedback from recruiting employers. Advisers will use this to help participants develop realistic job expectations, including advising participants pursuing SE on business idea viability. Our curriculum schedule in each office will be set monthly to respond to participant job goals & skills needed for current/future jobs. RMs will invite employers into our offices to deliver participant talks on types of candidates/skills they are seeking.

**RATIONALE**: Our approach will achieve outcomes as it: builds on our experience of developing employer relationships & vacancies at scale, e.g. on the WP we worked with 8,200 employers supporting 16,500 people into work; & applies analysis of Nomis/ ONS data & LEP/LA economic forecasts. Our approach: has RMs/ESOs to support employers to create jobs for the Disability Group, e.g. 77% of SMEs would be more inclusive if given the right advice (smallbusiness.co.uk); engages large employers to source bulk/entry-level jobs with skills development to help LTU's back into work; & identifies a range of employers offering training & flexible working to meet the varied EA Group needs. **Employer benefits** include: • a fully-funded recruitment service; • pool of candidates they may not have previously accessed; • fully prepared candidates with the right skills; • support from RMs/ESOs to address issues & support progression.

**THREE KEY CHALLENGES** faced by NEE employers/sectors are:

**1. Skills shortages/gaps**, resulting in employers having unfilled vacancies: • In D2N2 there are skills gaps & a lack of proficiency in roles including sales/customer services & machine operatives; • 19% of LCR hard to fill vacancies are due to skills shortages, e.g. in construction; & • NEE employers report poor soft skills, e.g. Humber employers cite candidates often lack communication & team work skills. **Solution**: Our RMs/ESOs will work closely with employers to understand their skills needs, enabling participants to understand the skills they need to develop to secure available jobs. RMs will identify the skills required for future jobs in their monthly labour market updates, enabling Advisers to explore these roles & sectors & required training with participants. Advisers will then support participants to upskill via signposting to funded training provision (e.g. LCR's Skills Service & Adult Education providers) & our in-house accredited training & sector/employer training routeways, designed by our Curriculum & Training Team.

**2. Lack of employer confidence** on employing disabled people was identified via local engagement, e.g. SC partner, Halifax Opportunities Trust, cited employers had a lack of awareness/understanding of making reasonable adjustments, Access to Work & mental health needs. Research by Reed & DR UK (2016) found that 78% of employers cited challenges to hiring disabled people, including lack of staff training on supporting disabled



colleagues. **Solution:** RMs/ESOs will use our experience as a Disability Confident employer to promote benefits of employing disabled people, using employer case studies to highlight successes. To engage employers, increase confidence & secure WHP involvement, RMs/ESOs will outline our fully-funded support offer & how we can help them to hire/support disabled people, by providing: disability awareness mentoring to line managers; signposting to local training, e.g. Remploy's Workplace Wellbeing training; support to access funding for specialist equipment; advice on changing working patterns; & occupational health support via Specialist partner, i2i. Work placements will be used to demonstrate the quality & skills of our participants.

**3. Staff turnover** is particularly high within larger hospitality, public administration & health & social work employers, e.g. 64,000 admin jobs are expected across LCR up to 2026 due to turnover (LCR Economic Assessment, 2016). **Solution:** Our RMs will work with these employers to identify trends, solutions & fully integrate WHP into recruitment practices to support them to quickly fill vacancies. To ensure WHP participants sustain in these jobs: we will match them to roles which meet job/personal criteria; RMs, ESOs & Advisers prepare applicants for the realities of roles/sectors prior to entry; we focus on upskilling/progressing participants & the overall workforce by linking to local skills provision; & our IWS offer for participants/employers proactively resolves issues before becoming critical. We use similar IWS models on our WP contract, resulting in 112% of target sustainments to date (3rd highest contract) (DWP, 2017).

**Successful Engagement: Example 1:** [REDACTED]



**Q 2.3.6 Quality, Management and Assurance of provision**

Please provide a detailed description of how you and your supply chain (where relevant) will ensure the quality and consistency of service delivery through your management practices.

Your response should (in respect of both you and your supply chain (where applicable)):

- Explain how you will monitor and manage the quality of provision to ensure that the standards set within the WHP Specification and your tender will be met from the start of, and throughout the life of, the contract.
- How you will ensure the quality of staff and the frequency and appropriateness of participant engagement, across the entire CPA
- Clearly describe (where relevant) how you will manage and ensure the quality and consistency of delivery by any sub-contractors, stakeholders or specialist provision e.g. site visits, audits and observing delivery.
- Identify how you will continuously improve the quality of delivery of this provision using evidence gathered from the live running of the service, capacity build the supply chain partner (where relevant) and share best practice throughout your supply chain (where relevant). How you will apply this consistently across the whole CPA?
- Explain how you, and your supply chain (where relevant), will obtain feedback from participants and proactively act upon this including details of procedures and timings. How you will apply this consistently across the whole CPA?
- Describe how you, and your supply chain (where relevant), will handle complaints and act on any findings including details of procedures, timescales, escalation routes, how participants will be made aware of these procedures and how you will ensure the impartiality of any decision makers.
- Clearly explain how you, and your supply chain (where relevant), will accurately track and monitor the progress of each participant in the Work and Health Programme so that you can clearly articulate at any given time where these participants are in your participant journey towards achievement of outcomes.
- Explain how your proposals for delivery of services will be put in place without adversely affecting the ability of either your organisation or your supply chain (where relevant) to deliver existing and recently won contracts as well as other contracts which you are bidding for.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

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**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to **4** sides of A4, **excluding** the question text and these instructions.

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Reed's proven & existing Quality Management Framework (QMF) will be applied across Reed & supply chain (SC) delivery to ensure we deliver & manage a consistent, high quality service to participants in North East England (NEE). Our QMF incorporates proven policies/processes (e.g. observation, staff training & participant feedback), which have supported us to achieve quality accreditations including: Matrix; ISO9001; ISO27001; Merlin (Excellent, Jul-16); Ofsted (Grade 2, Nov-13) & Customer Service Excellence. Our QMF already reflects DWP's Customer Charter & ESF requirements, & we will adapt existing systems/processes to achieve Work & Health Programme (WHP) Minimum Performance Levels (MPLs) & Customer Service Standards (CSSs).

**MONITORING & MANAGING QUALITY OF PROVISION:** We will ensure all WHP standards will be met from the start of, & throughout WHP, by applying the following same QMF processes & management practices to all Reed/SC delivery. The below, along with our high-quality staff & management of SC delivery, will demonstrate how our QMF will ensure both Reed & SC will deliver our WHP performance offer.

**Consistent, appropriate staffing:** Reed & our 11 End-to-End Partners (E2Es) will deliver the full participant journey in defined geographies (from pre-programme to programme exit). To ensure all NEE participants receive the same high-quality service, irrespective of local provider/geography, Reed & E2E Partners will have consistent staffing structures, roles & Adviser caseloads (with reduced caseloads in rural areas to account for higher travel times). Reed staffing levels are overseen by our Head of HR during implementation & contract delivery. The SC Implementation Workstream lead will ensure E2E Partners have the required resource for go-live, & the Reed SC Managers (SCMs) will monitor & manage staffing levels & caseload sizes during delivery to ensure they are sufficient to meet all WHP quality/performance elements.

**Clear lines of responsibility:** Our Regional Director (RD): is responsible for overall WHP quality, compliance & performance; will be the DWP point of contact; & will report to our Board-level Ops Director (OD). Reporting to the RD: Operations Managers (OMs) manage Reed performance/quality at a sub-CPA level (Derbyshire, South Yorkshire & West Yorkshire); & SCMs manage E2E performance/quality with SC Business Managers (BMs) overseeing QMF application in their teams. Reporting to our OMs: BMs oversee local Reed performance/quality; & Integration Managers (IMs) manage quality of Specialist & Integration Partners. Our internal teams also support QMF delivery: Compliance verifies processes & ensures CSSs are met (& ESF requirements where required); Quality & Continuous Improvement (QCI) assures quality of all delivery, identifies best practice & implements improvements; HR recruits & trains staff; & Innovation & Change develops & pilots new products.

**Orion, our participant management system:** Will be mandatory for all Reed & E2E staff to use to record participant data, interactions & referrals to other services. Reed & SC staff will gain access only upon completing Orion & data protection training, & will be trained in our WHP Process Manual developed by our Compliance Team. Auto prompts will facilitate compliance by reminding Advisers to complete actions, e.g. conduct Action Plan (AP) reviews monthly. Orion generates real-time MI reports which Managers, Compliance & QCI teams use to monitor quality/CSS achievement at contract/office/cohort/Adviser level, e.g. Referral to Start within 10 days of referral.

**Observations & File Checks:** Reed & SC BMs will be trained in observing Adviser 1:1 & group delivery, assessing quality quarterly against the Ofsted Framework & Matrix Standard. BMs will audit 20% of participant files (pre-work & in-work) per Adviser, each quarter reviewing: quality of APs (e.g. relevance to participant based on diagnostic); frequency of appointments/AP reviews; participant progression; & completed or scheduled activities. Trainers & Health & Wellbeing Advisers will undergo the same process. BMs will address individual issues in ad-hoc/monthly/quarterly 1:1 reviews, & if required, increase the frequency/number of file checks/observations until concerns are addressed. Any identified trends or process issues will be reported to the RD &

QCI team & fed into a contract-level Quality Improvement Plan (QIP).

**Compliance & Quality Meetings (CQM):** The RD, Heads of Compliance & QCI, & Reed Board will meet monthly to review performance against MPLs & CSSs, assess issues & agree corrective actions & timescales. This is supported by bi-annual QCI audits & unannounced spot-checks. Outcomes are reported to the OD with actions (e.g. updating the WHP Process Manual) recorded in the QIP, with actions/changes disseminated to all Reed/SC delivery staff & progress reviewed at the next CQM.

**HIGH QUALITY STAFF:** We will ensure the quality of staff & delivery across the entire CPA through our consistent recruitment, training, performance management processes & staffing structures across Reed & our E2E Partners' delivery:

**Recruitment:** Our assessment centres & SC Due Diligence processes will ensure all staff hold required skills, qualifications & experience, e.g. all Reed/SC Advisers will hold/be working towards L3 in Advice & Guidance, or equivalent, & be experienced in supporting all 3 participant groups. **Induction & Training:** WHP-specific induction training for all Reed/SC staff will ensure understanding of responsibilities, quality & performance targets & processes from the outset. This includes: systems (e.g. use of Route Planner Tool); quality standards (e.g. ensuring APs are SMART); & CSSs (e.g. AP in place within 20 days of referral). Strategic partner, Disability Rights UK, will deliver specialist training to Reed/SC staff to facilitate high quality support to participants with disabilities/health conditions. Reed/SC staff will be provided with a Process Manual detailing all quality & compliance processes, & will complete mandatory annual refresher e-learning. **Delivery Performance:** Reed & SC BMs will monitor & manage staff quality via Quarterly Performance Review (QPR) meetings, supported by Orion MI & monthly reviews. In QPRs, BMs will analyse achievement of targets, discuss performance/quality & set objectives for the next quarter. BMs will agree actions to address quality issues (e.g. 1:1 mentoring from a high-performing staff member), & review performance/quality daily & weekly to monitor improvement & prevent recurrence. QPRs & annual Professional Development Reviews will support ongoing development & high quality delivery. This process is mirrored at BM-level (conducted by OMs), OM-level (conducted by RD) & RD-level (conducted by OD).

**Frequency/appropriateness of engagement:** To maintain engagement, participants will receive: weekly contact (calls/email/face-to-face); fortnightly face-to-face 1:1s, & monthly face-to-face AP Reviews with their Adviser. This will be monitored by the BM/SCMs via Orion reports to ensure participants are receiving intensive & frequent support. Quarterly observations/file checks (above) & monthly caseload reviews between BMs & Advisers will assess participant progress against barriers identified in diagnostics, & suitability of AP activities & sequencing. BMs will consider any external support the participant requires to address individual barriers to work & how Advisers have met this need, e.g. via referral to a Specialist Partner or local service (which may require funding from the Specialist Support Fund). This ensures all participants receive appropriate & timely support. BMs will identify any corrective actions, agree these with Advisers & monitor improvements during 1:1s.

**SUBCONTRACTOR QUALITY:** We will embed our QMF across our SC to ensure quality/consistency & support achievement of our WHP performance offer. This includes: E2Es (described above); Specialists commissioned to meet local gaps/individual needs; & Integration Partners delivering local, complementary services.

**E2E Partners:** All elements of Reed's QMF are detailed in our SC Management Framework, used by our SCMs to monitor/manage E2E performance & quality. Our Compliance Exec & QCI Exec will train/support E2Es to embed the QMF in their delivery. To ensure achievement of quality/performance levels, SCMs will: monitor staff/caseload levels & MPL/CSS achievement via weekly provider calls (supported by Orion MI) & monthly contract performance reviews; conduct quarterly site visits to observe delivery; sample E2E participant files monthly; & train SC BMs to conduct staff

observations monthly. SCMs will address quality/performance issues in a Service Improvement Notice lasting up to 3 months, detailing actions to be completed & providing E2Es with support to address this (e.g. further compliance workshops). A quarterly Service Delivery Board (SDB), attended by Reed/E2E staff, will review contract quality, share best practice & introduce improvements across the CPA.

**Specialist/Integration Partners:** Integration Managers (IM) will monitor: Specialists monthly against quality/performance KPIs agreed in SLAs; & Integration Partners against specific agreed KPIs (e.g. health improvement outcomes), in line with participant volumes. To ensure quality of external provision & that it adds value, we will obtain participant feedback following support/intervention, which will be analysed by our IMs to: determine impact/value for participant groups; identify improvements to local working arrangements; & support re-commissioning/partnership decisions.

**CONTINUOUS IMPROVEMENT (CI):** CI is part of the culture of Reed' (Merlin, 2016)

& will be embedded across Reed & SC delivery using our QMF & structured CI process, overseen by our QCI team. **Improving Quality:** To support identification & implementation of quality improvements across the CPA, all evidence & findings gathered via Orion & QMF delivery are collated by the QCI team who: analyse the data; identify trends/areas of best practice; & update a contract-specific QIP covering Reed & SC delivery. The QIP outlines quality improvement actions required (e.g. specialist staff training), responsibilities & timelines, & is reviewed monthly by our RD, OMs, SCMs & Head of QCI. Every year, our QCI team will work with our RD, OMs, BMs & SC to complete a Self-Assessment Review detailing: progress made; performance against MPLs & CSSs; & improvement actions for the next 12 months (recorded in the QIP). **Capacity Build:** SC support needs will be identified & addressed by SCMs via the weekly provider calls & monthly contract performance reviews. Bi-annually, all SC Partners will complete our Provider Capacity Analysis self-assessment tool to identify areas they wish to develop, with the SCMs/IMs providing support & arranging subject matter experts to help build capacity, e.g. via Finance webinars. **Best Practice:** QIP findings will be discussed at the SDB to ensure actions & best practice are implemented across Reed/SC delivery. The QCI team produce quarterly quality reports & identify best practice from QIPs across all Reed contracts with this shared via the SDB & lessons learnt rolled out across Reed/SC delivery.

**FEEDBACK:** Reed/SC will follow the same process to obtain feedback consistently via: bi-annual participant Evaluation of Service (EoS) surveys, with Reed & E2Es targeted to achieve a 40% EoS response rate & 85% positive response rate; anonymous feedback boxes in delivery sites; course evaluations; Exit Reviews; bi-annual participant focus groups; & bi-annual satisfaction surveys with employers, SC & stakeholders. Our QCI team will collate & analyse Reed & SC feedback quarterly to: identify specific issues & wider trends on a provider/office/participant group basis; include them in the QIP; & work with the RD, OMs, SCMs & BMs to implement actions, escalating concerns to the OD where required. Our QCI team also manage a "You Said, We Did" campaign to highlight the positive impact of feedback.

**COMPLAINTS:** Reed & SC will use the same complaints process, which: will be displayed in all offices; can be provided in different formats, e.g. audio, large print; will be provided in participant Welcome Packs; & explained during the Initial Appointment. SC partners will immediately inform their SCM of any complaints made. Our process is: **1)** Participant encouraged to raise the complaint with their Adviser. If they feel unable to/or are unhappy with the outcome; **2)** The BM tries to resolve the complaint, with findings & remedial actions confirmed in writing within 5 working days. If participant remains dissatisfied; **3)** The complaint is escalated to the OM, involving internal/external parties as needed. If the complaint remains unresolved; **4)** It is escalated to the RD, & then to our OD & Managing Director (MD). At each escalation, the OM/RD/OD/MD will complete an impartial assessment & provide written feedback

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within 10 working days; **5)** If participant remains dissatisfied, they are signposted to the Independent Case Examiner. **Impartiality:** A complaint is never investigated by the subject of the complaint - these cases are allocated to an alternative BM & are recorded by staff independent of local delivery. The OD will update the Board of any complaints quarterly & make details of complaints & resolutions available to DWP. All complaint evidence is collated by our independent Compliance team & closed cases logged by our QCI team to identify trends & service improvements for inclusion in the QIP & CI activities, with complaints a standing agenda item in our monthly CQMs.

**TRACK PROGRESS:** Reed/SC Advisers track progression by agreeing SMART APs with participants & recording all interventions & actions on Orion, e.g. attendance & courses completed. Individual progress is measured via: face-to-face fortnightly participant/Adviser 1:1s; monthly participant/Adviser AP reviews to track progress & set new actions (responding to emerging needs); quarterly re-assessments of Readiness to Change & Readiness to Work to measure distance travelled; 6 monthly reviews with a different Adviser to assess progress; & case-conferencing to review soft outcomes achieved. In-work progress is measured via: achievement of In-Work Plan/Progression Review actions; employer/participant feedback; & progress towards Outcomes. Full records of case notes, diagnostics & APs are available on Orion, also detailing how long a participant has remained in their current Readiness to Change/Work status. This enables Adviser/BM/OM to produce real-time MI reports on any participant's journey towards achievement of outcomes, at any time, & easily identify & target participants not making sufficient progress towards work.

**CAPACITY:** We will mobilise WHP without adversely affecting Reed/SC's existing or future provision through: Dedicated resourcing: Our Implementation Team (Director, 3 Project Managers & 2 Project Execs) has capacity to simultaneously implement multiple contracts. Delivery staff will be dedicated to WHP & supported by experienced OM/RD. Robust infrastructure: Experienced central teams & proven systems underpin our delivery, e.g. PRaP processes & Orion are reviewed as part of overall business health check. We also benefit from the resources of Reed Group's Payroll, Property & IT teams. SC Due Diligence: We have assessed SC capacity to deliver WHP alongside their existing services, & all E2Es have confirmed WHP delivery will not adversely affect their existing/future contracts & provided mitigations to demonstrate how this will be managed alongside commitments. We worked with our SC to ensure they understand requirements including flows, staffing, premises & MPLs/CSSs.

Clear corporate governance: The Reed Board plans & resources for growth, taking into account current capacity & commitments. Contracts are managed as standalone units to ensure ongoing viability in the event of wider changes to the business.

**Additional Assurance Risks (7 & 8):** Throughout our response we explain how our QMF will be effective in ensuring both Reed/SC deliver our WHP performance offer.

**Example of where this has been effective:** On our Steps2Success (S2S) contract in Northern Ireland, our QMF helped identify ways to improve Reed & performance of our 4 SC partners. In 2015, our QCI Team analysed diagnostic MI of nearly 4,000 Reed/SC S2S participants & produced a breakdown of their barriers by provider/ delivery site. This identified that participants faced an average of 6 barriers, with 28% linked to employability skills & 21% to qualification levels. From this, Reed & SC BMs tailored local training offers to address specific cohort skill needs. This supported a 40% increase in job starts within 6 months. By regularly repeating this process, this contributed to our exceeding contract targets & being the highest-performing provider. We achieved a 'Good' grade in our May 2017 S2S Quality Evaluation.

**Q 2.3.7 Supply Chain (a)**

**a)** Please describe your approach to choosing your supply chain partners. If you do not intend to use a supply chain, please do not answer this question and instead answer question **(b)**.

Your response should include as a minimum:

- The likely size of your supply chain, in terms of delivery, on day one and throughout the contract term.
- A clear explanation of your contract management practices with members of your supply chain, including how these abide by the principles of the Merlin Standard.
- How you will provide the Contracting Body with visibility of costs, margin and overall profit of your sub-contractors, including by way of open book accounting.
- How the services that you are contractually obliged to deliver to participants will be divided between your organisation and your supply chain so that in totality all services which you are contractually obliged to deliver to participants will be delivered, and why you have selected your supply chain partners.
- How you will incentivise, support and motivate and performance manage your supply chain throughout the life of the contract.
- How you will ensure individual participant requirements will be covered in totality by your supply chain; and if not what your process will be to engage with specialist providers as and when required.
- How you will ensure continuity of service provision where there is any change within the supply chain.
- Detail your contingency plan for maintaining the entire scope of your proposal within your bid should members of your supply chain withdraw prior to commencement of delivery of this contract.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

Please also complete **Appendix 2** detailing your supply chain partners, including SMEs, and provide a completed **Subcontractor Declaration (Appendix 3)** from all sub-contractors listed in your response to this question.



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**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to **3** sides of A4, **excluding** the question text and these instructions.

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Reed currently manages 87 supply chain (SC) partners across 23 contracts, & in 2016 we scored 100% for SC design & an overall 92% (excellent) grade during our Merlin inspection. To create our North East England (NEE) SC we developed a Work & Health Programme (WHP) Expression of Interest (EOI) to assess potential SC partners against set criteria. The EOI was advertised via: our website; our existing Partner Network of 373 NEE providers; industry websites (e.g. ERSA); & Contracts Finder, with 107 providers applying to deliver services. We assessed EOIs to identify high-scoring partners & held detailed discussions with shortlisted potential partners on funding & delivery expectations, to ensure transparency. The Reed Board confirmed SC selection & contingencies, with Due Diligence completed & final offers agreed with all partners.

**The totality of services we are contractually obliged to deliver** has been divided between Reed & our **[REDACTED] End to End Partners (E2Es)** comprising organisations from public, private & third sectors. Reed & E2Es will deliver the full participant journey (from pre-programme to programme exit), in defined geographies. These are detailed below & demonstrate full NEE coverage.

Reed [REDACTED]	SC Delivery Areas [REDACTED]	
Bradford, Leeds Kirklees, South Yorkshire, Wakefield, Derbyshire & Staff. Moorlands	<ul style="list-style-type: none"> <li>• Co. Durham - <b>Durham Council</b>;</li> <li>• Tyne &amp; Wear - <b>Ingeus &amp; Northern Rights</b>, • Hull &amp; East Riding - <b>i2i</b>, • Nottinghamshire - <b>Framework Housing &amp; E. Mids. Chamber</b>, • York/N Yorks - <b>APM</b></li> </ul>	<ul style="list-style-type: none"> <li>• Tees Valley – <b>Triage</b>,</li> <li>• Calderdale - <b>Halifax Opportunities Trust</b>,</li> <li>• N/NE Lincs – <b>Standguide</b></li> <li>• Northumberland - <b>Northumberland Council</b></li> </ul>

Our **E2E selection rationale** is based on key criteria (aligned to DWP's Critical Success Factors): **Performance**: E2Es achieve targets when supporting WHP participant groups (e.g. Durham Council has achieved +400% of outcome target on Work Programme for ESA payment groups over the last 12 months & Northern Rights has achieved 55% job entry rate on their Work Choice subcontracts in East Durham & Tyne & Wear). **Integration**: E2Es demonstrate links with local services that support job outcomes (e.g. Halifax Ops. Trust works with 46 organisations that provide supported work placements & Triage has a network of support services delivering from its sites including Mind & Switch). **Locally responsive**: E2Es have adapted services to reflect local needs & DDA priorities (e.g. East Mids. Chamber developed a skills training & mentoring package to tackle multi-generational unemployment issues in former coalfield areas; & Framework operates a Bike Club (alongside Wheels to Work support) to overcome local transport issues). **Coverage**: E2Es have the infrastructure to support participants effectively in their areas (e.g. Triage already operates from 3 fixed & 9 co-located sites across Tees Valley & Northumberland Council currently delivers from 11 fixed sites with access to a further 46 local authority locations across the county).

**To ensure all individual participant requirements are met**, we will also work with **Specialist** (contracted, paid) & **Integration** (non-contracted/funded) Partners:

**Our 17 Specialist Partners** will help address complex participant needs & were identified by reviewing NEE participant needs & mapping services & waiting times. We selected initial Specialists using the EOI process above & all have Heads of Agreement in place detailing the services to be delivered & spend/volumes. These comprise:

**1) 5 Pan-CPA Specialists**: Providing support across the whole of the NEE: • **i2i** health professionals will deliver Specialist Health Reviews to participants with complex needs; • **RNIB** & **Clarion** delivering services to those with sensory impairments; • **Shelter** providing advocacy & support to those in insecure housing via an exclusive helpline; & • **British Dyslexia Association** providing assessments to identify dyslexia/other learning disabilities & facilitating access to local services.

**2) 12 Local Specialists**: We have secured agreements with Local Specialists to meet identified needs/gaps. For example: • **Healthy Working Futures** to deliver pain

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management support to high number of claimants with musculoskeletal conditions in Derbyshire & areas of Yorkshire such as Doncaster; • Working Minds for 1:1/group Cognitive Behavioural Therapy interventions in Derbyshire & South/West Yorkshire; • RETAS to provide IAG & advocacy to significant refugee numbers in Leeds; • Autism Plus to deliver supported volunteering to LDD participants to help build work skills; & • Buildforce & RBLI to deliver support & opportunities to veterans. Our other specialists are: Bank House, Insight Healthcare & SOAR (health services); Well Women Centre Wakefield (vulnerable women); BiTC (work placements); & DISC (substance misuse).

In addition to the funding agreed with Specialist providers above, **[REDACTED]** of our Specialist funding is unallocated, forming our **Specialist Support Fund**. This Fund will be used flexibly by both: local teams throughout delivery to quickly commission further provision to meet new/specific participant needs or service gaps; & by our Integration Board (detailed below) to identify specialist needs requiring support across NEE. To ensure this Fund is utilised: local office spend will be monitored against monthly target by the Regional Director (RD); total spend will be reported to DWP annually; & our proposed contract variation will commit us to this spend. Upon contract award, E2Es will commission their own local Specialists building on the Pan-CPA & Local Specialists identified by Reed, to support their own delivery. For example: Northumberland Council will continue to commission local training partner Advanced Industrial Solutions to offer participants employability/training in offshore & renewables, a key local growth sector.

**Integration Partners** deliver funded, complementary services that we will work with to address participant barriers & provide a holistic services. We have agreements to work with 77 partners (65 Core & 12 Ancillary - detailed in *Appendix 7*), including: mental health; musculoskeletal; transport; debt; substance misuse services; & training providers. Our **[REDACTED]** Integration Managers (IMs), operating across Reed/SC will be in post 2 months prior to go-live to formalise agreements enabling us to meet needs from Day One. IMs will record services in our Route Planner Tool (RPT), categorising by need/area/eligibility to enable Advisers to match provision to participant needs, continuously updating the RPT to reflect changes.

**SC Size:** On Day One we will have **[REDACTED]** E2E, **[REDACTED]** Specialist & at least **[REDACTED]** core Integration Partners in place. Throughout the contract, we expect E2Es to remain constant, with Specialists & Integration Partners increasing as additional needs are identified by local teams & new arrangements agreed. A quarterly Integration Board, chaired by the Regional Director (RD) & attended by Reed/SC IMs, OMs & Business Managers, will review participant feedback & any locally unmet needs (identified via our diagnostic MI & Adviser feedback). IMs will use this information to determine which new partners & services to target & establish links with. If we identify a need for new Local Specialists, our Specialist Support Fund will be used & IMs will complete Due Diligence & agree services, volumes & terms (formalised in an SLA).

**E2E Performance Management:** Our **[REDACTED]** FTE SC Managers (SCM), reporting to the RD, will be responsible for E2E delivery. Merlin principles are built into our SC Management Framework, which the SCMs will use to ensure consistent high quality/performance. During implementation, our SCMs will support E2Es to ensure: agreed staffing structures/numbers are in place (via recruitment/TUPE); all staff are trained on our delivery model, processes & Orion, our participant management system; & robust policies are in place (e.g. data security). We will ensure E2Es deliver contractual obligations via: Local targets: We worked with each E2E to identify/agree performance KPIs to reflect their geography & labour market; Performance: Using Orion data, our SCMs manage performance against agreed KPIs via: weekly Provider Support Calls, using our forecasting tool to identify Outcome pipelines & how to improve performance; & monthly Contract Performance Reviews (CPRs) to review performance, Customer Service Standards (CSSs) & KPI achievement, reporting to the RD monthly; & Quality & Compliance: Reed & E2E partners will both follow standardised processes. During implementation, our Compliance

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Team will create a Process Manual outlining use of: tools (e.g. RPT); policies (e.g. safeguarding); & evidence (e.g. self-employment). Our Compliance Exec & Quality & Continuous Improvement (CI) Exec support E2Es to embed compliance, CSSs & quality in delivery. SCMs will conduct quarterly observations & sample participant files monthly to ensure participant needs are met (e.g. those needing specialist support access this provision). We will conduct quarterly participant surveys to identify/action improvements. If concerns occur, our SCMs will issue a Service Improvement Notice lasting up to 3 months, detailing actions to be completed or achieved. SCMs will support E2Es to develop a Service Improvement Plan, with SCMs reviewing progress at weekly calls & CPRs, & supporting E2Es to improve, e.g. via training. If no improvement, E2Es will receive a Contract Default Notice, which if not remedied in 20 days, results in contract termination.

**Specialist/Integration Partner Performance Management:** IMs will manage Specialist & Integration Partners against agreed KPIs (e.g. response time of Shelter's advice line), which will be monitored monthly. Participant feedback will be used to monitor & ensure quality. Our Quality & CI Team will assess the impact of services on participant progress, consider improvements to arrangements & support re-commissioning decisions. We will **Support** all SC Partners via: our SCM/IMs providing ongoing capacity building support, informed by a bi-annual Provider Capability Assessment; & our Central Teams delivering webinars on topics, e.g. finance/business development, to further develop capabilities. E2E delivery is supported via access to Reed: tools (e.g. diagnostic assessments); training courses (e.g. Changing Mindset); & health products. We will **Motivate & Incentivise** all SC Partners by instilling a 'one-team ethos', with best practice & performance league tables shared at quarterly Service Delivery Boards. To incentivise E2Es, we will: pay the Higher Rate Outcome payment when achieved, prior to the whole contract cohort target being achieved; & provide a Contract Completion payment to incentivise delivery to contract end. Specialists will be incentivised by the possibility of re-commissioning, if effective.

**Financial Transparency:** E2Es have completed financial modelling to categorise delivery costs & calculate expected profit margin & overall profit. As part of Open Book Accounting, E2Es will provide: 1) Bi-annual management accounts for WHP. Our Finance Team will review costs, margins & profit throughout delivery; 2) Year End company management accounts; Finance will conduct checks to ensure shared costs allocated to WHP are proportionate & declared profit is in line with projections. They will reconcile E2E's published accounts against management accounts to identify variances. All site/provider costs will be shared with DWP via Annual Contract Review to provide visibility of costs, margins & profit.

**SC Contingency** (*Additional Assurance risks: 9 & 10*): **1) Withdrawal before go-live.** Risk is mitigated via: setting clear expectations of E2Es/Specialists from the outset; providing go-live readiness support; & contingency options identified in each area. If withdrawal occurs, our Head of SC Development will replace E2Es & Specialists with like-for-like contingency providers (with DWP approval) who, with support, can go-live within 6 weeks.

**2) Delivery Continuity:** If E2Es/Specialists withdraw during delivery, we will follow the above process. Risk is mitigated by contracts including notice periods (6 months for E2Es) & exit clauses to support transfer & ensure exiting Partners work with incoming Partners for a staged phasing out/in to avoid service gaps. With all data recorded on Orion, new E2Es have immediate access to case notes, & warm handovers will minimise risk of participant disengagement.

**Example:** On our DWP ESF Hertfordshire contract, an E2E Partner withdrew prior to go-live due to changing business priorities. We immediately contacted our contingency partner who was supported to meet go-live requirements, with no service gap.

**Q 2.3.11 Human Resources, Recruitment & Training**

Detail the human resources (including any known sub-contractor staff) that you will use to deliver and manage this provision.

Your response should include:

- A clear explanation of how you will ensure the staff deployed/recruited on WHP will have relevant skills or experience, covering all customer groups. How you will ensure you and your supply chain partners are consistent across the whole supply chain and how you will ensure all staff are trained to an appropriate standard.
- Minimum and maximum caseload per advisor including a rationale for why this is considered appropriate against your delivery proposal, from day one and through the life of the contract.
- The number of existing staff and those who will need to be recruited through the life of the contract, for you and your supply chain (where applicable).
- A clear description of how you, and your subcontractors, will recruit, train and retain staff to ensure effective delivery of this provision and satisfactory performance from the start of the contract and throughout its lifetime.
- A clear explanation of how you, and your subcontractors, will manage sickness absences and annual leave during peak times, including contingency arrangements for managing the absence while maintaining the quality of service delivery and performance levels.
- How you will manage your staffing level as volumes of participants increase and decrease over the life of the contract.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

**Please complete Appendix 4 to provide human resource details.**

**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to **2 sides of A4, excluding** the question text and these instructions.

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Reed & our 11 end-to-end Supply Chain (SC) partners will deliver the full participant journey, employing [REDACTED] FTE staff (at peak). Our SC will adopt the same roles & staffing structure as Reed, ensuring consistent participant support across North East England (NEE). Our staffing by role/FTE & responsibilities/skills/quals is detailed in *Appendix 4* & ensures relevant skills/experience covering all participant groups. We have already identified essential criteria for all Reed/SC roles, against which Reed/SC HR will screen staff whether TUPE/transferring from other contracts or being recruited. We will check all evidence (e.g. certificates), with candidates assessed against key skills/competencies, e.g. experience helping WHP customer groups. Our recruitment, induction, training & retention processes will be mirrored by our SC.

**RECRUIT, TRAIN & RETAIN:** Our recruitment/training processes are outlined below, addressing **Assurance Risk 13**. To go live on 15/01/18, Reed & our SC require [REDACTED] FTE staff at contract start ([REDACTED] Reed & [REDACTED] SC) who will be deployed/recruited via:

**TUPE:** We assessed Work Choice TUPE liability & apportioned potential staff transfers geographically to Reed & SC, against our WHP defined roles. This identified [REDACTED] potential TUPE transfers. At contract award, our Head of HR will use our established TUPE process to: • engage outgoing Work Choice providers weekly to ensure a smooth transition for contract start; • work to make TUPE a positive experience for transferring staff via workshops to introduce Reed & communicate how we will meet any Fair Deal for Pensions. This process enables us to quickly identify any risks, e.g. TUPE role not transferring to remain on Work Choice, so recruitment can commence. The remaining roles for Day 1 not filled via TUPE, will be filled via: **existing staff**, with [REDACTED] potential Reed/SC staff able to transfer from completing similar contracts, e.g. Work Programme (ensuring transferring staff have relevant skills & experience to support WHP groups); & staff **recruitment** via the process described below.

**Recruitment:** We will begin recruitment on 19/09/17 to meet go-live staffing needs. To ensure effective delivery/high performance from Day 1, we increased Reed/SC staffing levels at contract start to what would be required at month 6 in our model. E.g. our [REDACTED] Integration Managers will be in place by Nov 17 so links with local services are available from Day 1. We will use our proven recruitment methods: maintaining a pre-screened pool of candidates; & advertising roles on reed.co.uk, social media (e.g. LinkedIn), sector websites (e.g. Indus Delta) & local press. All candidates will be assessed against essential role criteria via assessment centre & interview. E.g. to recruit our [REDACTED] specialist Health & Wellbeing Advisers, we will require applicants to have L3 Health Trainer qualification, prior experience of working with people with disabilities, & be trained to ensure fidelity against our health products across Reed/SC delivery (addressing **Assurance Risks 12 & 21**). Successful candidates are given conditional offers, whilst HR completes vetting procedures in line with HMG Baseline Standards, e.g. DBS. SC will mirror our practices & Reed will provide support (e.g. access to pre-screened candidates), with SC progress against the recruitment plan managed by our Project Manager. Our model shows when staff are required & we know average recruitment timescales for all roles (e.g. 30 days from Adviser roles being advertised to job offers accepted) enabling HR & NEE Regional Director & Operations Managers to plan/implement recruitment for new roles across Reed/SC. From go-live staffing, we will use recruitment methods above to employ a further [REDACTED] staff to reach contract peak in May 20, with ongoing activity throughout WHP to address staff turnover.

**Training & Development:** Induction: All Reed/SC staff (new, existing & TUPE) complete role/contract-specific induction training covering: • individual KPIs/Minimum Performance Levels (e.g. time between referral & Action Plan); • systems/processes; • mandatory requirements for long-term unemployed group; • our MI system; • e-

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learning modules (e.g. Health & Safety/Safeguarding); • specialist training e.g. CBT techniques, motivational interviewing & training from our specialist partner, Disability Rights UK in Disability Confidence & Equality; & • details on our specialist & integration partners e.g. how participants can access Shelter's housing support. Ongoing: Reed/SC will provide: qualifications (e.g. L3 Certificate in Education & Training), training bursaries; & shadowing of high-performing staff. Training needs are identified via monthly meetings & quarterly appraisals. Staff complete mandatory refresher training on policies, legislation (e.g. Equality Act, Prevent) & DWP requirements.

Example: Using this approach, between August 2016 & Feb 2017, Reed & our SC successfully recruited & trained [REDACTED] staff across 10 new DWP ESF contracts.

**Retention:** Reed has an 84% staff retention rate at 12mths due to: • competitive starting salaries within the sector's top quartile; • employee benefits & performance related pay/progression; • staff development, with commitment to CPD; • fostering innovation through employee suggestion schemes; & supporting disabled staff as a Disability Confident employer. Our SC has similar processes in place & we will share our own experience & best practice to improve overall retention levels.

**MANAGING ABSENCE:** We built flexibility into our staffing model to cover average of 38 days' annual leave/sickness per staff member taking into account peak times, e.g. Christmas & August. Annual leave/sickness will be proactively managed by Business Managers (BMs) in line with company policy to ensure quality & performance levels. Annual leave must be approved in advance (2 wks' notice) & be max 2 wks duration. If sick, staff must call their manager by 8:30am & any cover needs will be addressed at daily morning meetings, e.g. another Adviser/BM covering appointments. When long-term sickness occurs, caseloads will be reassigned within the team ensuring our max caseload of 50 is not exceeded. For longer absences, our Sickness Absence Policy supports employees back to work. Key management staff absences will be temporarily filled by staff with operational experience from our Business Development &/or Innovation & Change teams). Our SC partners have annual leave/sickness policies in place. Our SC Managers will conduct ongoing monitoring/reviews to ensure these are applied & SC annual leave/sickness do not impact performance/caseloads.

**CASELOAD & STAFFING LEVELS:** We modelled caseload & staffing levels using: • DWP referral volumes; • time-bound activity assumptions for all caseloaded & non-caseloaded roles to provide tailored & holistic services; • local needs (e.g. additional travel time for Advisers in rural areas); & • realistic targets, e.g. [REDACTED] job entries per Adviser per month. This enabled us to identify the right staffing levels to deliver our commitments to participants. Caseloads: Advisers will have maximum caseload of [REDACTED], enabling intensive 1:1 support. In areas over 50% rural (e.g. Selby & Ryedale), Advisers have a lower max caseload of [REDACTED] reflecting increased travel time. Across contract life, our minimum workable caseload per Adviser will be [REDACTED] in order to give Advisers the opportunity to meet monthly job entry targets, recognising that caseloads build from zero at contract start. Reed/SC BMs use Orion, our management system, to monitor caseloads & allocate referrals to ensure caseloads do not exceed maximum. Rationale: Low caseloads enable Advisers time to liaise/case-conference with local services to co-ordinate support, & allow for frequent Adviser contact, known "to make a difference" (Learning & Work, 2016). Staffing levels: Staffing is phased to reflect increasing volumes from go-live (peak May 2020) & decreasing volumes at contract end (reducing staff from January 2023 when referrals cease). Our staffing model identifies, based on our current recruitment averages, when roles need to be advertised so staff are in place & trained in line with referral volumes. When headcount reduces, we support staff to move to other contracts & roles within the Reed Group with redundancies used as a last resort. If referrals increase, we can quickly accommodate them (e.g. Reed/SC BMs take on temporary caseloads). For



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larger/long-term increases, we will recruit/second staff from completing contracts. If referrals are lower, we will increase JCP engagement.

**Q.2.3.13 Delivery Infrastructure**

Please provide details of the delivery infrastructure you will use to deliver this provision, including details of premises, digital support and any outreach services.

Your response should:

- Explain why you consider your delivery infrastructure to be suitable for this provision and the specified participant groups (please see paragraphs 2.11 to 2.19 of the WHP Specification), and how you will ensure consistency across the whole CPA.
- Where applicable, describe any outreach or co-location services that you will provide, how you intend to provide them, the rationale for providing such services and how and why this approach will result in parity of services across the CPA.
- Explain why you consider digital services or other non-face to face services, if appropriate, would be suitable for this provision and the specified participant groups (please see paragraphs 2.11 to 2.19 of the WHP Specification). Please provide two examples of where these services have been successfully deployed on current or previous relevant contracts. Why and how were they successful?
- Clearly describe how your proposal will achieve full coverage and consistency across the entire CPA.
- If you intend to use existing premises, outreach centres or co-location, explain how delivery of this provision will fit with current use.
- If you intend to secure new premises, indicate the timescales for doing so ahead of go-live and your contingency arrangements for ensuring timely delivery of this provision.
- Detail your contingency plans for dealing with fluctuating participant volumes over the life of the contract, including the minimum and maximum volumes that can be handled at any one time without having an adverse impact on your premises proposal. Please provide one example of how you have managed fluctuating volumes on a previous contract.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

**Please complete Appendix 5 to provide your delivery infrastructure details.**

**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

**Present your response at the top of a new page, within these preset margins in Arial font size 12 up to 3 sides of A4, excluding the question text and these instructions.**

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To provide **full coverage** across North East England (NEE), Reed & our 11 Supply Chain (SC) partners will deliver Work & Health Programme (WHP) from a network of: 64 Reed/SC fixed sites (permanent base); 23 co-located sites (timetabled, formalised presence in partner premises); & 14 outreach premises (drop-in sessions to support participant handover/engagement). Full details & map are provided in *Appendix 5*. All sites are easily accessible by public transport & will be ready for go-live on 15/01/2018.

**SUITABILITY:** To ensure our delivery infrastructure is suitable for NEE WHP delivery, we used: • Reed/SC experience of delivering NEE employment, skills & health services, e.g. Reed's current DWP ESF employment contract in Leeds/Bradford & SC partner East Mids Chamber delivers Work Programme (WP) in Nottinghamshire; • Our track record of tailoring delivery to participants in urban/rural areas, e.g. Reed currently co-locate with 10 community venues on our W.Yorks & Harrogate Diabetes Prevention contract to address rural transport barriers; • Analysis of referral volumes, e.g. fixed sites are located in urban/deprived areas such as Sheffield & Hull to meet anticipated higher flows; & co-location sites provide access in rural areas where flows are lower, e.g. High Peak; • Analysis of travel patterns & understanding of rural/coastal issues, e.g. we will work with Wheels to Work Northumberland to provide participants in rural areas with more direct means of transport to our fixed/co-location sites, as we know 32 Northumberland communities are in England's 10% most deprived for access to services (Northumberland Local Authority (LA), 2015); & • Engagement with 147 stakeholders in the last 20 months to inform how best to align delivery with existing services, e.g. Derbyshire Care Leavers Project has agreed our WHP delivery in the county could be delivered alongside their service to support shared customers.

**Meeting WHP participant group needs:** All sites will be friendly & welcoming to support engagement & ongoing attendance, particularly for voluntary participants (Early Access & Disability participants). All fixed/co-located/outreach sites are Equality Act 2010 compliant, enabling full access for Disability participants. Fixed sites will have facilities to support WHP delivery, including: training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards. Facilities will meet specific needs, e.g. adjustable desks & information in different formats (e.g. large print) for Disabled participants, & child friendly areas to enable participation for Carers. Fixed sites are close to: JCP offices (enabling us to align Adviser 1:1s with sign on dates for Long-Term Unemployed) & local services we know participants will need, enabling us to facilitate access, e.g. SC partner Triage's site in Darlington is 450m from the Mind office in St Hilda's House. We will also invite local providers to deliver from our sites to address participant group needs, e.g. Aspire Igen, who deliver the National Careers Service in Yorkshire, have agreed to deliver careers guidance services from our offices.

**CO-LOCATION:** We know from stakeholder engagement & NEE delivery that public transport frequency/time/cost & travel anxiety can prevent participation, e.g. East Riding LA told us public transport frequency is impacting service access (especially in Holderness). To address local transport issues & ensure parity of access, Reed/SC Advisers will deliver from 23 co-located premises, e.g. SC Partner i2i will deliver from agreed co-location sites including Withernsea, East Riding (HU19 2DL). We will agree a timetabled presence in each co-located site to fit with other provision delivered there & ensure participants know when services are available. All co-located sites have 1:1/group facilities, are Equality Act compliant & accessible by public transport, e.g. SC partner APM's co-located Northallerton site (DL7 8PP) is on local bus routes & 800m from the station (Thirsk 7mins). Our Operations Managers (OMs) will annually assess co-location site suitability. Advisers will be provided with laptops & portable printers to enable effective delivery from co-location sites. **Rationale & Additional Assurance Risks** (16 & 17): We are experienced in: delivering from partner sites (e.g. LA offices & Children's Centres); & external services delivering from our sites (e.g. National Careers

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Service & Moneywise). We know co-location improves participant access & contributes to improved health/job outcomes, e.g. co-locating with LA services on our Council contracts helped us achieve a 42% job-entry rate (against a 41% target); & by IAPT delivering from our WP offices, we provided integrated mental health support, contributing to our achieving 280% of job outcome target for Yr 6 (DWP, 2017). We expect all identified WHP co-location sites to be available for contract duration. Where this is not possible, we will apply our process to securing new sites (detailed below).

**OUTREACH:** Advisers will conduct drop-in sessions from JCP, Signposting Orgs & community sites (where possible) to support warm handover & engagement. Reed/SC successfully conduct outreach on other contracts, e.g. SC partner Halifax Opportunities Trust engages participants via weekly presence in Halifax JCP & Children's Centres across Calderdale. **Rationale:** Close working with JCP can improve referral to start conversions, e.g. on our WP, we introduced a warm handover process which reduced ESA fail to attend rate by 5% & quickened referral to start times by 3 days.

**DIGITAL/NON FACE-TO-FACE SERVICES** will supplement, & not replace, our face-to-face Adviser support. It will increase participant engagement by: offering alternative mediums of support; tailoring communication to different participant/group needs; & enabling us to provide intensive support. Participants will: be able to keep in touch with their Adviser via telephone/email/Skype/text (e.g. when poor health may prevent attendance); have access to our Online Portal which includes e-learning & jobsearch functionality (with embedded Universal Jobmatch); be shown how to set up job alerts & apply for jobs on the Reed Mobile App (e.g. enabling Carers to do this in evenings when they have more time); & receive phone/online support from Specialist partners, e.g. Shelter will provide helpline support to those in insecure housing, & has also agreed we can refer onto their online debt provision. Participants not confident in using IT can complete our Digital Inclusion modules to build skills. Participants still uncomfortable will receive face-to-face Adviser support, & those with limited broadband access will be supported to access local Library/community services. **Rationale:** Digital/non-face-to-face support is proven to improve job prospects, particularly for disabled participants, e.g. telephone support can enhance self-management of health (DWP, 2013). **Additional Assurance Risks** (2, 18 & 22): Our digital tools are already built into Reed's IT systems & used on 30 of our existing employment contracts. They are ready for WHP go-live & are easily scalable to meet WHP requirements, e.g. our Online Portal currently has 3,771 users & has no upper limit for new user numbers.

**Example 1:** We trialled our Online Portal on our Northern Ireland Steps2Success contract, receiving positive participant feedback on ease of use & support, especially the interview simulator & jobsearch engine. Results showed the Portal was successful in supporting engagement & adding value to Adviser support (as 265 participants registered & 1,349 job searches conducted). The Portal is available to Reed/SC on all our employment contracts (3,771 current users, completing 6,000+ jobsearch/career development activities per month) & will be used on WHP to continue this success.

**Example 2:** Every participant on our 10 DWP ESF contracts are helped to download the Reed App to supplement Adviser 1:1 support (if they wish). This convenient tool empowers participants & increases jobsearch self-efficacy, making participants more likely to conduct jobsearch activities (DWP, 2011). WHP participants will be supported to use this tool to access local jobs, e.g. the App provides access to 250k+ jobs.

**CONSISTENCY/FULL COVERAGE:** Consistency of access across the entire NEE CPA is ensured via: multiple sites in each LEP area; at least one fixed/co-located site in each Unitary & County area; & supplementary digital/non face-to-face services. Our centrally located & accessible fixed/co-located premises will provide parity of access & service to all participants, including those in rural/coastal areas. Across the CPA, travel times will not exceed 90mins, & in most cases, will be an average of 45mins. Advisers in areas classified as over 50% rural (ONS, 2011), e.g. Northumberland & N.Yorks, will

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have lower caseloads to account for additional travel time & enable the same level of service to be provided. We will review participant referrals, volumes & locations, to identify any new co-location requirements to ensure consistency across the CPA.

**EXISTING PREMISES:** Our sites in Bradford & Leeds have capacity in the buildings to expand for WHP delivery. As part of our due diligence process, SC confirmed existing sites have capacity to accommodate initial & peak WHP flows/staffing & that existing & future contracts will not adversely impact WHP, e.g. with no further WP referrals, SC partner Ingeus confirmed WHP capacity in their Sunderland & Newcastle sites. All SC partners confirmed: lease end dates with commitment to renew or source alternatives if these end during WHP. SC fixed sites & our identified Reed/SC co-location are used to deliver other employment/skills/support services, enabling access to participants, e.g. SC partner Durham LA deliver ESFA-funded training from their sites across the county.

**SECURING NEW PREMISES: Fixed:** The Implementation Property workstream lead will ensure all activities are completed to enable all [REDACTED] new Reed sites will be ready for go-live on 15/01/18, e.g. fit-outs complete by 22/12/17. Our SC workstream will ensure all [REDACTED] new SC sites (e.g. Framework's new Nottingham site) with Reed providing support where necessary. Our Property Team is fully resourced to immediately secure leases on contract award & they will be managed against the Implementation Plan by our Project Manager, ensuring all deadlines are met. Reed has successfully mobilised properties on similar contracts, e.g. in 2016, we set up 16 Reed sites across 10 DWP ESF contracts in rural & urban areas (e.g. Cornwall & Leeds). **Contingency:** We have identified contingencies for fixed sites (e.g. Springwell House, Chesterfield, S41 7BP) & will use serviced offices if there is an unexpected delay in office set-up. As further contingency, we will temporarily locate staff in Reed Recruitment offices (e.g. Bullring House, Wakefield, WF1 3BJ) &/or community or partner sites, e.g. we have explored co-location with CTS Training in Sheffield (S1 2DR) & Rotherham (S60 2AF). **Co-location:** Reed/SC have [REDACTED] signed agreements for co-location (in Appendix 7), which our Property/SC team will formalise at contract award & conduct due diligence, e.g. risk assessments. If co-location sites become unavailable during delivery, our Integration Managers will quickly source contingencies. Reed successfully used this approach to respond to increase in referrals, e.g. within 1 week, we secured 3 new co-location arrangements to deliver our JCP Dynamic Purchasing System contracts.

**FLUCTUATING VOLUMES:** All Reed/SC fixed sites can accept a [REDACTED] change in annual flows to minimise any adverse impact of volume changes, e.g. Reed's Derby site can accommodate 264 additional participants per year. Reed/SC's flexible network of co-location sites & stakeholder links will allow us to quickly provide extra capacity, e.g. SC partner Standguide's co-location site can accept increased flows & Advisers. Additionally, our Property team has capacity to quickly source additional premises to respond to any sudden increase in referrals. As part of our due diligence process, we explained potential volume fluctuations to SC partners & confirmed: they have capacity to take on additional flows; & can maintain sites if volumes decrease (e.g. via their existing/additional funding streams). Our OM's will monitor volumes & if a decrease in volumes is identified: Advisers will conduct more outreach to support JCP/Signposting Orgs to identify referrals; & if a sustained decrease, OM's will re-assess Adviser time spent in co-located sites, with SC mirroring our approach.

**Example:** We successfully managed fluctuating volumes on our DWP JCP Support Contract, with JCP referrals increased rapidly due to recession. To minimise impact on existing delivery: our Property team secured 4 new Reed offices; & our SC Manager supported SC to secure 3 new sites. This enabled us to increase capacity to meet higher volumes (3,000 in Yr 1 to 12,825 by Yr 4), without impacting quality of delivery.

**Q 2.3.15 Management Structure**

Please submit an Organisation Chart alongside the response below. Please note there is no page limit requirements on the organisation chart.

Please provide details of your management structure, systems and processes.

Your response should:

- Describe your proposed management structure for the live running of this provision, including any subcontractor roles directly managed by your organisation (where relevant) and the percentage of time that will be allocated to this contract for each listed role.
- Provide a clear explanation of your capacity to manage this provision, during mobilisation and live running, alongside existing commitments and any potential future commitments.
- Outline the risks you have identified within your management structure and how you will mitigate against them including any escalation routes for both you and your subcontractors (where relevant).
- Clearly describe the systems and processes that will be used to prevent fraud. This should cover providing details of the robust audit trail of evidence that you will implement including but not be limited to: attendance records/action plans, participant consent, evidence to support claims for outcome payments and systems that will be used to prevent fraud for participants in self-employment.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to 2 sides of A4, **excluding** the question text and these instructions.

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Our management structure provides clear lines of responsibility & accountability: Reed Board: Our *Managing Director*, [REDACTED], chairs the Board & is the ultimate accountable decision maker. *Operations Director (OD)*, [REDACTED] is responsible for all operational delivery. *Finance Director (FD)*, [REDACTED] oversees claims, financial reporting & risk management. *Director of Business Development*, [REDACTED], is responsible for the development of new business.

All Programme Management roles below will be 100% dedicated to the Work & Health Programme (WHP) & located in North East England (NEE) to provide local management capacity. The *Regional Director (RD)*, based in our Sheffield office, will: be responsible for Reed & Supply Chain (SC) contract quality & performance & providing management oversight; be the point of contact for DWP; & report to the OD. The RD will manage [REDACTED] *Supply Chain Managers (SCMs)*, *Regional Employer Manager (REM)*, & [REDACTED] *Operations Managers (OMs)*. *SCMs*, based in Newcastle & Sheffield to be near our SC partners, will: manage SC delivery through weekly calls/monthly meetings with SC Business Managers (BMs)/OMs; & report SC performance, quality & risks to the RD weekly. The *REM* will coordinate Reed & SC employer engagement activity & will be based in our Sheffield office. Reed *OMs* will: be based in Derby, Leeds, & Sheffield & be responsible for WHP quality/performance in their specific geography; manage Reed's [REDACTED] *BMs*, [REDACTED] *Integration Managers (IMs)* & [REDACTED] *Recruitment Managers (RMs)*. Reed's *BMs* will: be responsible for local teams' performance; manage *Advisers, Health & Wellbeing Advisers, Trainers & Employment Support Officers*; & be based in our [REDACTED] fixed sites. *IMs* will lead on local integration by developing & maintaining links with external local support services & will be based in Derby, Leeds & Sheffield. *RMs* will engage employers to source jobs & be based across our [REDACTED] fixed sites. This structure will be replicated by our end-to-end SC partners (delivering from Pre-Programme Engagement to Programme Exit). Support Functions: Reed/SC will be assisted through implementation & contract delivery by [REDACTED] specialist teams (see organisation chart) who will ensure WHP is delivered to a consistently high standard.

**CAPACITY:** We have planned & resourced for WHP via: The Board utilising contract management processes & systems to ensure distinct programme management for individual contracts & no over-commitment of resource: A dedicated Implementation Team (Director, [REDACTED] Project Managers, [REDACTED] Project Execs) to mobilise contracts quickly without impacting existing delivery. For example during our 6-month mobilisation of 10 DWP ESF contracts with 27 SC partners & recruitment of [REDACTED] Reed & SC staff, job-entry rates on our N. Ireland Steps2Success contract increased from 29% (Aug 2016) to 32% (Feb 2017), vs 28% target. Delivery: WHP (& future contracts in NEE) will not impact existing services as each contract will have dedicated staff. To resource WHP we will utilise TUPE staff & fulfil all other recruitment needs throughout the life of the contract by working with Reed Recruitment who maintain a dedicated shortlist of pre-screened candidates for us. Reed/SC have 66 existing NEE premises, employer links & established partnerships, providing a strong delivery foundation. All Support Functions will work across contracts, with each contract including central costs to pay for these teams. This ensures capacity increases in-line with our contract base.

**SYSTEMS/PROCESSES:** Reed has robust systems/processes in place, designed to support contract management & **mitigate risk of fraud**. All systems & processes will apply to Reed & SC, with a robust audit trail that meets DWP & ESF requirements. Our Orion Participant Management System records all interactions (e.g. attendance records/action plans); permissions (e.g. signed consent forms); & evidence to support outcome claims. It provides an audit trail of all inputs, evidence & outcomes allowing system activity to be tracked to prevent fraud. Reed & SC staff will be trained/tested



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prior to go-live to ensure compliance & to access Orion via our encrypted, web-accessible, password-protected Citrix system. Reed's systems (used by SC) are ISO9001, ISO27001 & Cyber Essentials Plus accredited & comply with the Data Protection Act 1998. Financial Management: Reed's FD oversees cost management, & financial systems & audits. Our Finance Team will track MI weekly (e.g. job starts, income milestones/earnings threshold achieved) to inform forecasting & verify/prevent fraudulent claims. We will maintain separate accounting records, making records & supporting information available to DWP as part of Open Book Contract Management. Compliance, Quality & Validation: Our Compliance Team (CT) monitors compliance by validating quality measures (e.g. action plans) & outcome claims. They conduct unannounced spot-checks & 6-monthly audits. Reed/SC BMs support compliance by auditing 20% of participant files per Adviser per quarter. Claims processes are built on clear segregation of duties to mitigate risk of fraud, with CT/Finance sitting outside operational delivery to ensure impartiality. At induction Reed/SC staff are trained on compliance processes. After induction, all staff will have access to compliance guides/support from the CT & complete mandatory refresher e-learning. CT will store documentation until 31/12/26 as per DWP/ESF guidance. Our compliance/validation process achieved the lowest average extrapolation rate on job outcomes nationally on Work Programme. Our SC Management Framework details processes used by SCMs. At go-live, this includes: SC staff are prepared for delivery; audit/performance management schedules are agreed; & communication lines with Reed support functions established. SC will adhere to our systems/processes during delivery, managed by SCMs at weekly support/monthly Contract Performance Reviews. At self-employment (SE) job entry, participants complete declarations to confirm they understand responsibilities (e.g. NI/Tax). Advisers then collect Companies House & HMRC registrations/business account details as evidence of SE. Our PRaP team then record a SE job start & confirm details. Advisers regularly confirm the participant is still self-employed via calls/text/emails. At 26 weeks our Finance Team will validate/verify information by contacting the participant prior to claim submission.

**RISKS & MITIGATIONS:** Management staff not in place for go-live: *Mitigation:* RD & an OM are scheduled to be in place in Dec 2017 to mitigate the risk of staff not being in place on 15/01/18. HR will begin TUPE negotiations on contract award to reach transfer agreements swiftly. *Escalation:* Our Head of HR is the recruitment lead & reports risks weekly to the Implementation Board (IB). Urgent risks are escalated to the Reed Board (via OD) to ensure mitigations are quickly actioned (e.g. allocating additional resource to support recruitment). We support SC through implementation & they will have access to our HR function. Where there is a risk SC staff will not be in place, this will be escalated as above with the Reed SC lead reporting to the IB.

Management staff turnover: *Mitigation:* Where turnover occurs there will be a warm handover between outgoing/incoming staff. If there is a gap, existing management staff will assume responsibilities in the short term. To support this, we will have extended notice periods (min. 6 weeks) for key staff (e.g. OMs). *Escalation:* If Reed staff leave, their manager will immediately engage HR to source a replacement. We have systems & processes in place to rapidly recruit candidates (e.g. through Reed Recruitment) & have internal succession plans in place for key management roles (e.g. RD). SCMs will work with SC to understand/plan for key staff changes. If concerns arise they will be escalated to the OM, with Reed support provided if necessary.

SC management structure not in place at any point: *Mitigation:* All SC partners delivering an end-to-end service have signed Heads of Agreement which include the number of staff to be in place throughout the contract. *Escalation:* The SCM will monitor staffing levels weekly & escalate to the RD if staffing falls below agreed levels. If agreed staffing levels are not adhered to within agreed timescales we will issue a Performance Improvement Notice, & if still not addressed replace the SC partner with

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one of our like-for-like contingency providers.

**Q.2.3.16 Performance Rationale**

**PART A**

Please outline the rationale for the Performance Offer as outlined in the CCR.

Your response should:

- Clearly identify each step in how you calculated your Performance Offer and provide a rationale for the baseline offer for each participant group, detailing the key elements of delivery and the associated level of uplift for each element that you expect to make up your Performance Offer. Detail any research, evidence and/or experience from relevant past delivery which underpins your Performance Offer for each participant group including any assumptions and dependencies in each step.
- Clearly identify the key risks to each dependency and to each assumption underlying your Performance Offer being as you have calculated and how you would ensure that you achieved your Performance Offer if any of those risks occurred.
- Clearly explain why you believe that your Performance Offer is achievable and realistic detailing any research, evidence and/or experience from relevant past delivery which underpins your Performance Offer.
- Describe how you will proactively manage the achievement of performance levels and customer service standards as detailed at paragraphs 2.5 and 2.6 and paragraph 4.23 of the WHP Specification or outlined within your response below, by you and your supply chain, including the frequency and level of detail of monitoring activity and trend analysis.
- Identify how you will develop and implement effective solutions to correct failures to meet performance levels and customer service standards in a timely manner and ensure that it does not re-occur, for both you and your supply chain.
- Explain how you will proactively engage with the Contracting Body to notify us of any issues and remedial actions rather than waiting for scheduled review meetings.
- Outline your CSSs in line with paragraph 2.5 of the Specification. Please ensure these are SMART; Specific, Measurable, Achievable, Realistic and Time bound.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

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**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to 5 sides of A4, **excluding** the question text and these instructions.

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Our Work & Health Programme (WHP) Performance Offer for North East England is:

	Disability	Long-Term Unemployed (LTU)	Early Access (EA)
Overall	[REDACTED]	[REDACTED]	[REDACTED]

The steps taken to **Calculate our North East England (NEE) Performance Offer** & research/evidence/experience used to ensure it is **Realistic & Achievable** are below:

**1. Developed a baseline:** We combined HMRC Real-Time Income (RTI) data for Work Programme (WP) & Work Choice (WC) in NEE to calculate baseline performance for the 3 NEE WHP Groups. Recognising DWP's design of WHP will improve performance (e.g. the Selection Tool & Gatekeeper Assurance Function) we applied an uplift to the baseline for Disability & EA Groups. LTU has not been uplifted as WHP eligibility is 2+ years unemployed vs. 1+ years on WP, negating any uplift. The calculation of the NEE baseline from which we developed our Performance Offer is outlined below:

	Disability	LTU	EA
WP/WC Baseline	[REDACTED]	[REDACTED]	[REDACTED]
WHP Design Uplift	[REDACTED]	[REDACTED]	[REDACTED]
<b>NEE Baseline</b>	[REDACTED]	[REDACTED]	[REDACTED]

**2. Local variations:** We mapped WP CPA performance using DWP data to: (i) obtain Job Outcome conversion rates for payment groups (PGs) that partially align to WHP: PG2 (LTU); PG3 (EA) & PG6 (Disability); & (ii) identify geographic variations, e.g. 36% PG2 conversion rate in East Midlands vs 31% in West Yorkshire. We also **analysed local labour market information** & planned investment in LEP strategies to identify areas with high job demand &/or potential for growth, e.g. the 116,000 jobs projected in Tees Valley by 2024 due to replacement demand (Tees Valley LEP) & the 18,000 jobs created in Derbyshire & Notts. by 2021 through the LEP Growth Deal. We used this information to create **local performance targets** reflecting local geographies & labour markets, which combine to achieve our overall Performance Offer.

**3. Selected a high-performing Supply Chain (SC):** We conducted an Expression of Interest process to identify providers performing at or above DWP baseline on similar programmes. Our end-to-end (E2E) SC performance includes: Framework has achieved a 62% job entry rate on their WP contract in Nottinghamshire (from [REDACTED] starts) & 81% of Northern Right's WC job starts have sustained for 13 weeks in East Durham & Tyne & Wear. Our E2E partners will deliver full WHP participant journey from pre-programme engagement to exit. Reed's performance is also at or above DWP baseline data, for example: 42% of PG2 WP starts stay in work for at least 4 months, working an average 26 hours per week, enough to meet WHP earnings threshold.

**4. New delivery elements:** To build on the NEE Baseline we designed evidence-based delivery elements that will lead to performance improvements. These elements will be delivered consistently by Reed & our SC across all delivery sites, & deliver uplifts which contribute to our overall NEE Performance Offer, as outlined below:

New Delivery Elements	Disability	LTU	EA
<b>NEE Baseline</b>	[REDACTED]		
a.) Low Caseload enabling high contact time			
b.) Service design to support health needs			
c.) Diagnostic tools enabling us to target activity			
d.) Service integration & Route Planner Tool (RPT)			
e.) Employer engagement, in-work support (IWS) & self-employment (SE) provision			
<b>Total Delivery Element Uplift</b>			
<b>Overall Reed Performance Offer</b>			

Our rationale for the uplift attributed to each delivery element is below:

a) **Low Caseloads:** Advisers will have low average caseload of [REDACTED]. This is significantly lower than average caseloads of [REDACTED] on WP (National Audit

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Office, 2014) & maximum caseload of 55 on Work choice (DWP, 2013). Advisers working in rural areas (classified as over 50% rural by ONS) such as Staffordshire Moorlands will have lower average caseloads of [REDACTED] to reflect increased travel times required to successfully deliver WHP. Evidence indicates customer satisfaction & performance outcomes are increased by "*smaller caseloads, more personalised & frequent contact*" (Learning & Work Institute, 2016). This will benefit all three WHP groups & is evidenced by our own delivery experience, e.g. our New Deal for Disabled People contract with average Adviser caseloads of 45 achieved job outcome rates of 51%.

b) Supporting Health Needs: Our WHP delivery model was co-designed with Disability Rights UK to ensure we maximise outcomes for Disability participants. This helped us: design our Health & Wellbeing Adviser & Employment Support Officer (ESO) roles; refine interventions & identify specialist training for Advisers. Our Specialist Health Review with a Health Professional provides work-focused recommendations for those with disabilities/complex health conditions & will improve Time to Job & Outcome measures, e.g. currently this intervention supports 25% of participants into work within 6 weeks. This will improve outcomes for the Disability Group as we know participants with health conditions are best supported through access to a "*knowledgeable team who understand disability and illness*" (Mind, 2014).

c) Diagnostic Tools: Our diagnostics uniquely track customer's Readiness to Work by identifying their barriers & motivations, & their Readiness to Change via a short psychological survey utilising behavioural science. The combined result enables Advisers to focus on priority barriers. Our diagnostic, particularly the new focus on Readiness to Change, will improve outcomes across all participant groups based on our successful WP pilot. We expect the impact to be greatest for voluntary groups, e.g. we identified that 58% of disabled participants were not contemplating the change associated with work, often due to a lack of confidence. This allowed us to focus support on confidence & mindset, supporting us to improve PG6 performance.

d) Service Integration: To provide an integrated service, 65 Core Stakeholders have agreed to support our delivery (Appendix 7) via referral relationships & joint-working. Our Integration Managers will build & maintain links captured in our new RPT (an online database of Reed/SC provision & local funded services), & will identify further relationships required & support future plans for local service integration. We know integration improves outcomes as co-locating with Local Authorities on our Council employment contracts helped us achieve 102% of job outcome targets & our experience indicates it will support Disability participants in particular. For example, our integration with IAPT on WP increased our job outcomes for participants with health conditions in the ESA Work Related Activity Group (3-6 month): in Year 5, we achieved 189% of Minimum Performance Level (MPL) WP job outcomes (DWP, April 2017).

e) Employer Engagement, IWS, & SE: We have increased investment in employer engagement based on our previous programmes with: a Regional Employer Manager to co-ordinate/drive activities, [REDACTED] FTE Recruitment Managers (RMs) to source jobs from medium/large employers; & [REDACTED] FTE ESOs to engage SMEs & then provide support with any adaptations or workplace support needed for health/disability participants. Reed/SC Advisers will also be trained to engage small/medium employers (SMEs). We also have more intensive In Work Support (IWS) ([REDACTED] per week in the first month for Disability/EA & ongoing as needed) to support outcomes. This enhanced IWS builds on previous levels to increase sustainment (e.g. on ESF Families we achieved a 73% job sustainment rate). We profiled for [REDACTED] of job outcomes to be via SE (with local variation across NEE), & improved our SE offer by creating SE Advisers to provide specialist IAG, training & IWS.

**5. Applied a Sheffield City Region (SCR) DDA premium**: To reflect the increased

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investment in growth & jobs in SCR (e.g. 36,000 jobs forecast by 2020 & government investment of £211 million), the joined-up approach to employment & skills through the Skills Bank & ongoing commitment to support local service integration, we have applied a Performance Offer premium to SCR (below) which uplifts performance in this area as part of our overall Performance Offer for NEE.

	Disability	LTU	EA
SCR	[REDACTED]		
Non-SCR			
<b>Overall Reed Performance Offer</b>			

The **ASSUMPTIONS & DEPENDENCIES** used to develop our Performance Offer are outlined below, along with **KEY RISKS & MITIGATIONS**:

**1. WHP Starts:** *Risk:* As the majority of referrals will be made by Work Coaches, we are dependent on JCP to ensure we meet our programme starts ([REDACTED] proposed uplift on Disability/EA starts). In addition, we are dependent on JCP to refer our proposed ratio of Disability/LTU/EA. *Mitigation:* Analysis of Claimant data (2 year+ JSA & ESA WRAG claimants in NEE, Nomis 2017) identified 98,000 potentially eligible participants & we are confident our uplift will be achieved as WHP replaces larger programmes. To mitigate the risk of low referrals/incorrect referral mix we have allocated JCP outreach time into Adviser assumptions so we can support/achieve referral targets.

**2. SC:** *Risk:* E2E partner withdraws from our SC pre go-live. *Mitigation:* We had clear, open communication with all SC partners to ensure they understand quality/ performance expectations with signed offers & Heads of Agreement in place. We have a list of like-for-like E2E contingency providers across NEE, who have similar previous performance & can be mobilised in 6 weeks to deliver in allocated areas at any point in delivery. We have experience of quickly mobilising SC, e.g. on DWP ESF Hertfordshire (2016) a SC partner withdrew before contract start. We mobilised another provider within 4 weeks, in time for go-live with participant start & job outcome targets met.

**3. Staffing:** *Risk:* Our Performance Offer is based on quality, trained staff being in place from day 1, increasing as flows increase. *Mitigation:* Across Reed/SC we have: forecasted roles needed at each point of the programme; developed Job Descriptions for all roles; a rapid recruitment process supported by the Reed Group; & developed training for all Reed/SC staff, which will be delivered at induction. To ensure delivery begins on day 1, we have scheduled to hire key staff (e.g. the Regional Director (RD)) in Nov/Dec 2017 & we increased Reed/SC staffing levels at contract start to what would be required at month 6 to enable management teams to focus on initial delivery. If we are unable to attract quality candidates we have financial contingency to adjust salaries. HR will begin TUPE negotiations on contract award to reach transfer agreements swiftly. We have reduced Year 1 performance by 20% to reflect improved staff performance over contract lifetime.

**4. Timing Assumptions:** *Risk:* Delivering our timing assumptions is fundamental to achieving our Performance Offer. We profiled in months: Time on Programme (Disability [REDACTED]; LTU, [REDACTED]; EA, [REDACTED]); Time to Job (Disability, [REDACTED]; LTU, [REDACTED]; EA, [REDACTED]); & Time to Outcome (Disability, [REDACTED]; LTU, [REDACTED]; EA, [REDACTED]). *Mitigation:* Our assumptions are based on internal & DWP data: Time on Programme is based on our delivery of WP & ESF contracts & includes assumptions to reflect participant groups, e.g. lower disengagement rate for LTU as they are mandated; Time to Job is based on Reed/SC job entry data for similar programmes; & Time to Outcome is based on HMRC RTI outcome data provided by DWP for NEE & takes into account for [REDACTED] of participants achieving a 6 month outcome through SE. Operations Managers (OMs) & Business Managers (BMs) will monitor real-time achievement against profiles using our participant management system, Orion. If timing assumptions



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change for specific cohorts, our low caseloads will enable Advisers to focus intensively on participants taking longer to progress into work to meet lower/higher threshold. To **MANAGE PERFORMANCE** we will use our Performance Management Framework (PMF), developed over 19 years' delivery of employment contracts. Adaptable to reflect WHP specific requirements (e.g. RTI outcomes), our PMF is underpinned by robust systems/processes that allow us to track daily performance & analyse trends, to ensure we achieve/exceed contract-specific MPLs & Customer Service Standards (CSSs). Orion will measure WHP specific MPLs/CSSs, e.g. levels of referral backlogs (not above 4%), & 100% of PRaP referrals starting provision. We have built a monthly cohort outcome profile to establish individual/contract KPIs that will drive performance management as follows: Contract: BMs will monitor team performance & review HMRC earnings data to inform our outcome pipeline (e.g. monitoring when participants achieve income milestones). BMs will report data weekly to OM & the RD. The RD will report findings & forecasting reports to our Operations Director (OD), Finance Director & Managing Director at weekly meetings & monthly reviews. Weekly & monthly meetings allow our Board to: have oversight of the contract; regularly analyse performance trends (e.g. outcomes by team); & quickly put in place remedial actions where required. Ongoing reviews of our interventions & staff ratios will also support us to achieve performance targets. Individual: BMs will monitor/manage Advisers & other delivery staff (e.g. Trainers & HWAs) performance via: • daily team meetings to review activity; • reviewing Orion daily/weekly/monthly; • reviewing HMRC data to ensure Advisers target support at participants in work to help achieve outcomes; & • quarterly observations to assess Adviser IAG & Trainer delivery. Our Quarterly Performance Review (QPR) process, supported by monthly reviews, enables BMs to analyse performance from the previous month/quarter (e.g. job entries) & agree actions to drive performance. BMs will have QPRs/monthly reviews with an OM, & OM with the RD, & RD with our OD. **SC Performance**: We have agreed local performance targets & created cohort profiles with E2E SC partners which will be built into Orion reporting so SC & Reed can see performance against profile on a daily basis. SC will use our model, diagnostics, products, quality/performance management processes & will adopt our staffing structure to ensure consistent delivery. Our SC Managers (SCMs) will manage SC MPL/CSSs in line with the Merlin Standard, providing support via: weekly Provider Support Calls (PSCs); monthly Contract Performance Reviews (CPRs) to review KPIs; & quarterly site visits/observations. Quarterly Service Delivery Boards (SDBs), attended by Reed/SC staff, will share best practice & address any collective performance issues. Our PMF allows us to: quickly identify if MPLs/CSSs are not being met; understand the reasons; & improve performance at individual/team/contract level to prevent recurrence. Individual SC partners will be paid Higher Rate Outcomes at the point they occur, regardless of total contract cohort performance to drive performance. **CORRECTING PERFORMANCE LEVELS**: Contract: Performance issues will be identified at weekly/monthly meetings. RD will support OM to identify reasons for underperformance & jointly develop a Performance Improvement Plan (PIP) outlining: • performance improvement actions at team level (e.g. increase employer marketing to generate vacancies); • contract-wide improvements (e.g. develop new training); & • minimum improvement targets/timescales. Achievement against PIP will be reviewed by the RD in weekly meetings & discussed in SDBs to ensure changes are embedded in delivery & any failures do not re-occur. If underperformance continues, it will be escalated to the Board who initiate a service delivery review. Individual: If Advisers are not achieving targets (identified via monthly reviews/QPRs), their BM will identify reasons & work with them to develop a PIP. The PIP will detail: support to address poor performance (e.g. 1:1 coaching); performance improvements expected; & timescales. Performance will be reviewed daily/weekly to monitor improvement & prevent recurrence. If after [REDACTED] the Adviser continues to underperform, they

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will receive a disciplinary warning outlining agreed support & expectations. Continued poor performance will result in their employment being terminated. **SC**

**Underperformance:** SCs will issue SC partners with a Service Improvement Notice (lasting up to [REDACTED]), to outline improvements required. SCs will support partners to develop a Service Improvement Plan detailing the actions they will take.

Actions will be reviewed at PSCs/CPRs, with SCs supporting partners to achieve required performance improvements. If under-achievement persists, SC receive a

Contract Default Notice, which if not remedied in [REDACTED], results in contract termination & triggers SC contingency plans. **ENGAGING WITH DWP:** Our RD will be

DWP's main point of contact & agree reporting procedures outside of review meetings so communication is clear/consistent. This will include sharing profiles/pipeline

information & processes for ad-hoc MI reports & ensuring the timely production of the Monthly Performance Return. If issues occur, the RD will proactively report to DWP

with proposed remedial actions. Where required, the RD will seek agreement from

DWP for proposed actions. Once actions are implemented, the RD will update DWP

on: impact on performance levels & how we will prevent recurrence. For example, prior

to DWP ESF cohort 1 go-live, we identified the ESF 1420 Form was incompatible with our system. We reported this to DWP, who developed an IT Document detailing

compliance requirements & we used this to design a Form embedded within Orion.

This Document & our feedback created a process for new providers to embed within their systems.

Our [REDACTED] **TENDER CSSs** will be monitored/measured by Reed/SC BMs via

Orion. They cover the 5 programme stages: **Pre-Programme Engagement:**

[REDACTED] **Programme Engagement:** [REDACTED] **Pre-Work Support:**

[REDACTED] **IWS:** [REDACTED] **Programme Exit:** [REDACTED]

**Additional Assurance Risk 19:** To deliver & operate our personal support offer we

have: developed Reed/SC Adviser headcount & caseload sizes using an activity basis

(e.g. frequency of interventions); designed a management structure to support Advisers & frontline staff (e.g. 1 BM to 12 direct-reports); selected a SC to cover all areas of

NEE utilising the same diagnostics/products to ensure consistency; & Reed/SC using

Orion to monitor performance. *Evidence:* Reed delivered the DWP Employment Zone

Service from 2004-12, with 83,524 total programme starts & average caseloads of 38.

39% of participants were supported into work, with 70% sustaining employment for 26 weeks, meeting specific DWP delivery & contract targets.

**Q 2.3.17 Performance Rationale**

**PART B**

Please provide an example of an existing contract with DWP of an equivalent or larger scope and scale than the Work and Health Programme, where you failed to achieve the performance offer you made in your tender at any point in the life-cycle of the contract and clearly explain how you have remedied the failure to achieve the level of performance offered in your tender. If you were not able to remedy the failure to achieve the level of performance offered, please explain whether the contract was terminated or whether DWP accepted a lower level of performance. If DWP accepted a lower level of performance, please explain how much lower that level of performance was than the performance offer in your tender and what steps you have taken to ensure that your Work and Health Programme Performance Offer will not lead to the same result. If you do not have any existing contracts with DWP of an equivalent or larger scope and scale than the Work and Health Programme, please provide an equivalent example for another Government Department, or if you have no experience of performance issues, please outline how you would address them, covering any remedial action you would put in place.

**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to 2 sides of A4, **excluding** the question text and these instructions.

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Reed has delivered 88 DWP contracts with a combined value of £500m. The North East England (NEE) Work & Health Programme (WHP) has a value of £113m, at peak will employ [REDACTED] people across Reed & supply chain (SC) operating from [REDACTED] sites (including [REDACTED] fixed sites) to support [REDACTED] participants. We currently deliver as a prime the DWP Work Programme (WP) (2011-2021) & supported 39,189 participants. The contract has a value of £81m. At contract peak, Reed & our SC employed [REDACTED] people & operated from [REDACTED] sites. The performance offer provided in our original tender for the 3 main Payment Groups (PG) is shown below.

Original West London WP Tender	Job Outcomes	Average Number of Monthly Sustainment Outcomes
PG1 JSA 18-24	45.2% (26 weeks)	11.8
PG2 JSA 25+	36.6% (26 weeks)	11.8
PG6 ESA	22.3% (13 weeks)	17

For PG2 we have already achieved 101% of Job Outcome target & expect to reach 108% of target (39.5% conversion) by WP completion & an average of 11.8 monthly sustainment outcomes. However, during the contract life-cycle we experienced issues which impacted performance for PG1 & PG6 against our original tender which we remedied as shown: **PG1:** In Year One we achieved 73.5% of our Job Outcome target. Through the work of our Operations Managers & Continuous Improvement Team we identified during Year One that the key reason for underperformance was a much higher proportion of 18-24 customers than expected having no or very low skill levels. This impacted on our ability to help participants move into work due to competition in the labour market. To improve performance we implemented immediate actions: integrated a functional skills test to provide early identification of skill levels in our diagnostic; & invited skills providers such as Exchange Group to deliver accredited provision in our offices. We created a Curriculum & Training Team to develop new accredited & non-accredited training courses; secured Adult Skills Budget funding from local colleges to deliver qualifications; & instigated a new quality process to formally observe & assess training in line with Ofsted standards. This resulted in 1,777 participants going through our new training courses such as L1 Customer Service & 97% achieving a qualification. **PG1 Outcome:** Performance below shows improvement & then consistently exceeding tender performance offer:

Job Outcome % of target	Year 2	Year 3	Year 4	Year 5	Year 6
	87.6%	113.4%	103.5%	119.7%	278.4%

By contract end, we will achieve 95% of our Job Outcome target, due to 51% of all PG1 referrals having been received in Year 1 when under-performance occurred. We will achieve 11.9 average PG1 monthly sustainment outcomes by contract end.

**PG6:** In Year One we achieved 42% of our Job Outcome target. The cause of our under-performance was the design of our delivery model which initially focused on the use of small group (4-6 people) & online tools such as our portal. Our WP Ops Manager identified performance issues six months after contract start based on job start figures; our Board then agreed an Improvement Plan which sought to improve our delivery model through more training for Advisers on how to run small group sessions & how to support participants to access online tools. Whilst this work had some impact, performance did not increase by as much as expected. Our Board-level Operations Director then, at the start of Year 2, led a review of our delivery model & identified & implemented a move away from small group training & online services to smaller caseloads with more 1-2-1 provision. This led to caseload reductions, enabling longer & more frequent appointments. We also integrated provision with other health providers, for example: our local operations teams engaged IAPT who then co-located in our offices, leading to us introducing 2 clinical mental health assessment tools (PHQ-9 & GAD-7) into our initial diagnostic to

## Schedule 1 Appendix B Part 1 - Tender Response

provide quick IAPT referral. We also used behavioural science with new products to build participant confidence & resilience. Outcome: Our performance is shown below & shows improvement & then significant achievement above tender offer:

Job Outcome % of target	Year 2	Year 3	Year 4	Year 5	Year 6
	47.6%	95.92%	67.3%	197.27%	125%

By contract end, we will achieve 60% of our Job Outcome target, due to 42.7% of all PG6 customers having been received in Year 1 when under-performance occurred. We have achieved average 17 months Sustainment for PG6 & will achieve target at contract end. During WP contract, DWP moved to managing performance against Minimum Performance Levels (MPL) & for PG6 we will achieve 101% of MPL target.

**Steps taken to achieve WHP performance include:**

- Delivery Model: Our NEE WHP model for all 3 groups is built on low Adviser caseloads [REDACTED]. This low caseload facilitates a higher level of 1:1 face-to-face time e.g. participants will receive weekly contact, with both fortnightly meetings & monthly reviews being 1:1 & face-to-face. Our health & disability & early access participants have longer appointments with all participants with an identified health need benefitting from a separate Health Review. Whilst our WHP digital offer includes tools to support participant engagement, our performance offer is not reliant on the use of these tools. In addition, we built activity assumptions into our model for all support roles to ensure we have the right number of staff to deliver the support to participants alongside Advisers e.g. our [REDACTED] Health & Wellbeing Advisers will deliver up to [REDACTED] of support for participants. Our training curriculum will be available across NEE & particularly benefit participants with low skill levels.

- Specialist & integrated provision: We already have [REDACTED] Specialist Partners & [REDACTED] Core & Ancillary Partners (listed in Appendix 7) ensuring our WHP is fully integrated with participants able to access holistic support from Day One. Building on WP experience where we saw that health & skills integration improved performance, we have agreements with [REDACTED] health providers & [REDACTED] training providers. We have also widened our pool of Specialist & Integration Partners with agreements in place with services such as musculoskeletal & substance misuse. To support ongoing integration & respond to new/emerging participant needs we have [REDACTED] FTE Integration Managers in our WHP staffing model.
- Diagnostic: Our WHP will utilise our existing diagnostic tools which includes mental health clinical assessment tools; questions to identify whether a functional skills assessment is required; & our Readiness to Change assessment tool which was trialled in Year 5 of WP delivery. We know our diagnostics correctly identify barriers & lead to the development of personalised Action Plans, as 96% of WP participants in our Evaluation of Service said their Adviser was good at understanding needs (April 2017).

Our profile: To mitigate risk, we have reduced Year One WHP performance by [REDACTED] so delivery issues can be addressed without impacting overall contract performance.

Evidence our approach works: We built improvements above into our ESFA contacts for people aged 18-24 with disabilities & mental health needs launched in June 2016. We have achieved cohort progression outcomes of 41%, 40% & 45% for completed cohorts (40% target) with 28.2% progression outcome contract to date, ahead of profile with 12 months left.

**Additional Assurance risks (11, 12 & 21):** Reed delivered the DWP Employment Zone (EZ) Service from 2004-12, across 29 sites with peak headcount of 281 FTE staff with 83,524 total programme starts. Total contract value was £141m over 8 years. Demonstrating our ability to manage a service at scale, 39% of participants were supported into work, with 70.1% sustaining work (meeting DWP delivery & contract targets). In DWP's final EZ Star Ratings, our programmes were 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> & 5<sup>th</sup> in the national league table, which was based on four metrics: job outcomes & sustained job outcome achieved, Quality & Compliance KPIs.

**Q 2.3.18 Implementation**

Please provide an implementation plan in the form of a detailed Gantt Chart to be attached at **Appendix 6** showing the critical path and interdependencies with supporting narrative.

Your written response, in addition to the Gantt Chart, should include:

- Key milestones, timescales for implementation activities including start and end dates for each activity and the position of the person responsible for each activity and the escalation route for these activities.
- The timeline, including a narrative explaining its rationale, for staff recruitment and training.
- The timeline and key activities to secure and set up your proposed delivery locations.
- The timeline and key activities of engagement with all relevant stakeholders to ensure successful programme go live.
- A narrative to expand on the Implementation Plan which: identifies all key risks and dependencies (e.g. delays to securing premises, recruiting staff, IT etc.); provides a RAG (Red, Amber, Green) rating for each of these risks; and explains how these risks will be mitigated and managed, including the timeframe for doing so to ensure that service delivery will still commence on your proposed date.

**Please review your CPA specific Additional Assurance Report prepared by the Contracting Body to ensure all relevant risks identified in relation to this question are addressed in your response.**

Please note that a page limit does not apply to the implementation plan to be provided at **Appendix 6**.

**Please provide a separate response to this question in relation to each CPA for which you are tendering, clearly indicating to which CPA each response relates. A score of 3 or below for this question will mean that the tender, in relation to the CPA in question, as a whole is unsuccessful regardless of what scores are achieved for other questions.**

Present your response **at the top of a new page**, within these preset margins in Arial font size 12 up to **2 sides of A4**, **excluding** the question text and these instructions.

## Schedule 1 Appendix B Part 1 - Tender Response

Our Implementation Team (Director, [REDACTED] Project Managers (PMs), [REDACTED] Project Execs) will be responsible for implementation, using our Implementation Framework. Their record of successfully mobilising contracts includes: 1) £27m service in N.Ireland (5 Reed & 9 Supply Chain (SC) sites, 10 partners, 40 staff in 3 months); & 2) DWP ESF Employability Support (10 contracts, 16 Reed & 38 SC sites, 27 partners, 150 staff in 6 months). Our approach will **enable every office in North East England (NEE) to accept referrals on [REDACTED]** through: • A pre-implementation period where we have undertaken activities that will accelerate implementation & minimise risk, e.g. identify properties & contingencies; • An Implementation Plan (IP) with [REDACTED] workstreams (e.g. Property, Stakeholder, HR, Service Design) with tasks, responsibilities, milestones & critical path (shown in bold in Appendix 6); • A PM responsible for mobilisation who manages progress & updates the IP, & is supported by workstream leads who report progress to the PM daily; • An Implementation Project Board (meets weekly, chaired by Implementation Director) where workstream leads discuss progress, **escalate** risks & agree mitigations. PM logs risks in a Risk Register & tracks mitigation activity. Any urgent risks are immediately **escalated** to our Implementation Director (& then our Operations Director if needed); & • Weekly reporting of progress/risks to DWP, Devolved Area officials (as required) & the Reed Board, who ensure appropriate resource levels are allocated & contingencies actioned. Key milestones, timescales & responsibilities for workstreams identified as having high levels of risk are below.

**HR [REDACTED]:** Owner, [REDACTED], Head of HR, ensures Reed/SC [REDACTED] go-live staff are in place, trained & have appropriate DBS checks. To minimise risk, we will have the frontline staff needed for month 6 of delivery in place for go-live. Our experience has shown this allows Business Managers to focus on staff training & not recruitment during early delivery. TUPE analysis identified [REDACTED] potential transfers likely meeting Adviser, Trainer, Recruitment Manager & Business Manager go-live needs. *Milestones* include: TUPE transfers complete by [REDACTED], recruitment needs identified & adverts placed by [REDACTED], interviews completed [REDACTED] & induction/ training complete for frontline staff by [REDACTED]. *Key risks:* TUPE staff do not transfer over/insufficient for go-live needs (Likelihood: Amber, Impact: Red). Recruitment/ training not complete for go-live (Likelihood: Green, Impact: Red). *Mitigations:* HR will begin TUPE negotiations with providers on award & meet weekly to reach agreements swiftly. HR will simultaneously recruit for other roles (e.g. SC Managers) by accessing our pool of pre-screened candidates; & advertising on reed.co.uk (UK's largest job website), social media, sector websites (e.g. ERSA) & local/regional press. If TUPE transfers are unavailable/insufficient, HR will advertise for additional roles via the above methods & use external HR specialists to provide further resource if needed. SC will mirror our staffing structure, have agreed go-live staffing/TUPE obligations & will have recruitment/TUPE support from HR & our SC workstream lead. A rolling programme of induction courses for cohorts of Reed/SC staff will ensure staff are fully trained for go-live. HR will develop training materials in advance & pre-arrange training schedules so they are resourced appropriately.

**Property [REDACTED]:** Owner, [REDACTED], Head of Property, will ensure premises are ready for go-live. [REDACTED] of the [REDACTED] Reed/SC fixed/co-located sites in NEE are existing delivery premises, limiting risk. Our property team has identified our new delivery sites & discussed usage & lease cost/duration with landlords (addressing Assurance Report risk 20). *Milestones* include leases signed by [REDACTED], full fit-out complete by [REDACTED] (including voice & data lines), & co-location sites agreed by [REDACTED]. *Key risks:* Properties unavailable at award (Likelihood: Green, Impact: Red), property fit-out not complete by go-live (Likelihood: Green, Impact: Red). *Mitigations:* Our Property team has identified contingency sites



## Schedule 1 Appendix B Part 1 - Tender Response

for our fixed offices (e.g. Friar Gate, Derby) & will use their network of NEE agents to quickly source new office(s) if needed. We maintain a supplier list for office fit-outs so a contractor can be quickly mobilised & due diligence checks will ensure all sites are ready for go-live & meet requirements, e.g. signage, branding & Equality Act compliant. If there is an unexpected delay in set-up, further contingency includes: • use of the 11 NEE Reed Group offices (e.g. Leopold Square, Sheffield); • temporary use of serviced offices; & • base staff in partner premises, e.g. co-location discussed with Blue Apple Training in their Huddersfield site. We have signed agreements for all co-location sites, which our property team will formalise for the duration of WHP. During delivery, Integration Managers will quickly identify & engage contingencies if co-location sites become unavailable with budget provision for WHP duration (addressing Assurance Report risks 16 & 17).

**Stakeholders [REDACTED]:** Owner, [REDACTED], Director of Strategic Partnerships (DSP), will manage strategic relationships (e.g. with the Devolved Area & JCP) & coordinate Route Planner Tool development across Reed/SC, ensuring handover of relationships to Integration Managers. *Milestones* include finalising engagement strategy [REDACTED] & undertaking stakeholder engagement [REDACTED] to [REDACTED]. *Key risk:* Arrangements with local services, e.g. referral & co-location, not in place (Likelihood: Green, Impact: Amber). *Mitigations:* Reed/SC have [REDACTED] [REDACTED] signed declarations from Core Stakeholders who will deliver funded, complementary services to address participant barriers. These declarations cover existing & new delivery areas to address Assurance Report risk 20, e.g. Nova Wakefield has agreed we can refer participants to their Public Health funded Live Well Wakefield service. Our DSP & Business Development Team will maintain relationships between submission & award, & will work with our Integration Managers (in post by [REDACTED]) to mobilise arrangements & record available support in our Route Planner Tool so integrated provision is in place & a consistent service available at go-live.

**Systems [REDACTED]:** Owner, [REDACTED], Head of Systems, will adapt our Orion participant management system to produce required MI reporting & ensure IT infrastructure supports digital tools (online portal, skype, Reed App). *Milestones* include complete Orion system testing by [REDACTED]. *Key risks:* Delay in changes to Orion (Likelihood: Green, Impact: Amber), IT infrastructure unable to support digital tools at scale (Likelihood: Green, Impact: Green). *Mitigations:* Orion is currently used on 11 DWP employment contracts & has undergone 3 months of additional development so contract specific data & reporting functionality can be set up/tested in 1 day if needed. Digital tools are built into our IT infrastructure, already used on 30 of our employment contracts & are easily scalable, e.g. our online portal currently has 3,771 users & no upper limit for new user numbers (addressing Assurance Report risks 2, 18, 22).

**Supply Chain [REDACTED]:** [REDACTED], Head of SC Development (HSCD), will finalise SC agreements & contractual terms. *Key risk:* SC not mobilised for go-live (Likelihood: Green, Impact: Red). *Mitigation:* HSCD & our Implementation Team will support completion of contracts & due diligence to check & continually monitor finances, obligations, infrastructure & resource to ensure SC can deliver a high quality service to participants from go-live. Our [REDACTED] end-to-end SC partners have existing property, staff & partner links to meet the first referral date, e.g. SC partner APM's York & Skipton sites. During implementation our PM will use weekly monitoring calls to review SC mobilisation progress & provide support, e.g. with TUPE obligations. We will provide induction to SC staff, including: working with Reed; policies/procedures (e.g. safeguarding); contract requirements; systems & ICT training; & training on our products to ensure delivery consistency. Our PM will also finalise Service Level Agreements with our [REDACTED] Specialist Partners, establish working practices to integrate services & arrange briefings for Reed/SC staff so they understand specialist

Schedule 1 Appendix B Part 1 - Tender Response

offers. We have identified contingency providers with capacity & experience who can be mobilised should a partner withdraw during/after implementation, which is a low risk.

## Schedule 1 Appendix B Part 1 - Tender Response

## KEY EMPLOYERS

[illegible]

[illegible]

[illegible]

[illegible]



[illegible]

[illegible]

[illegible]



# ORGANISATIONS PROPOSED TO DELIVER SPECIFIC ELEMENTS OF THE SERVICE

Schedule 1 Appendix B Part 1 Appendix 2

NAME OF ORGANISATION including name and email address of your main contact from your subcontractor organisations. (Begin by including your own organisation)	TYPE OF ORGANISATION (Private, Public, Voluntary)	CONTACT NAME AND E-MAIL ADDRESS	ELEMENT(S) OF PROVISION TO BE DELIVERED	PERCENTAGE OF OVERALL DELIVERY	DELIVERY LOCATION(S)
Reed in Partnership	Private	[REDACTED]	end to end delivery	[REDACTED]	Bradford, Kirklees, Leeds, Wakefield, Barnsley, Doncaster, Rotherham, Sheffield, Amber Valley, Bolsover, Chesterfield, Derby, Derbyshire Dales, Erewash, High Peak, North East Derbyshire, South Derbyshire, Staffordshire Moorlands
Advanced Personnel Management Group (UK) Ltd	Private	[REDACTED]	end to end delivery	[REDACTED]	Craven, Hambleton, Harrogate, Richmondshire, Ryedale, Scarborough, Selby, York
Durham Employment and Skills (County Durham Council)	Public	[REDACTED]	end to end delivery	[REDACTED]	Durham
East Midlands Chamber (Derbyshire, Nottinghamshire and Leicestershire)	Private	[REDACTED]	end to end delivery	[REDACTED]	Ashted, Broxtowe, Gedling, Mansfield, Nottingham
Framework Housing Association	Voluntary	[REDACTED]	end to end delivery	[REDACTED]	Bassettlaw, Newark and Sherwood, Nottingham, Rushcliffe
Halifax Opportunities Trust	Voluntary, social enterprise	[REDACTED]	end to end delivery	[REDACTED]	Calderdale
Ingeus UK Limited	Private	[REDACTED]	end to end delivery	[REDACTED]	Gateshead, Newcastle, North Tyneside, Sunderland
Inspire 2 Independence (2) Ltd	Private	[REDACTED]	end to end delivery	[REDACTED]	East Riding of Yorkshire, Kingston upon Hull
Northern Rights Community Interest Company	Social enterprise	[REDACTED]	end to end delivery	[REDACTED]	South Tyneside
Northumberland County Council	Public	[REDACTED]	end to end delivery	[REDACTED]	Northumberland
Standguide Limited	Private	[REDACTED]	end to end delivery	[REDACTED]	North East Lincolnshire, North Lincolnshire
Triage Central Limited	Private	[REDACTED]	end to end delivery	[REDACTED]	Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland, Stockton-on- Tees

NB If there is insufficient space in the above table to include all the organisations proposed to deliver specific elements of the service involved, please attach a supplementary sheet using the same table format.



**Schedule 1 Appendix B Part 1 Appendix 3 – Subcontractor Declarations**





### SUBCONTRACTOR DECLARATION

A letter containing the following declaration should be submitted by each proposed Subcontractor organisation (with the exception of ad-hoc suppliers) and attached to the Tender Form. Please note that we interpret you attaching this document as your agreement to its content. The letter should confirm that a price has been agreed for delivery of the stated element; however, the letter must not include information regarding the actual price agreed.

To: Department for Work and Pensions

Date: 07.04.2017

I confirm that we have agreed in principle with Reed in Partnership, to deliver the following elements of the service described in their Tender:-

End-to-end delivery in the Local Authority areas of:

Craven, Hambleton, Harrogate, Richmondshire, Ryedale, Scarborough, Selby, York.

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signed

Alan Cave, CEO

Per pro: APM UK Ltd, Unit 35 & 40 Newtown Shopping Centre, Birmingham.  
B19 2SS



## SUBCONTRACTOR DECLARATION

A letter containing the following declaration should be submitted by each proposed Subcontractor organisation (with the exception of ad-hoc suppliers) and attached to the Tender Form. Please note that we interpret you attaching this document as your agreement to its content. The letter should confirm that a price has been agreed for delivery of the stated element; however, the letter must not include information regarding the actual price agreed.

To: Department for Work and Pensions

Date: 07/04/2017

I confirm that we have agreed in principle with Reed in Partnership, to deliver the following elements of the service described in their Tender:-

End-to-end delivery in the boroughs of County Durham

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signe

Name

Title: Director Regeneration and Local Services

Date: 07/04/2017

On behalf of:

Durham Employment & Skills – Durham County Council  
Unit 21 & 22 Darwentside Business Park

Chesterfield: Commerce House, Millennium Way, Dunston Road,  
Chesterfield, S41 8ND

 @EMChamberNews

www.emc-dnl.co.uk



## APPENDIX 2

### SUBCONTRACTOR DECLARATION

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To: Department for Work and Pensions

Date: 19 April 2017

I confirm that we have agreed in principle with [Reed in Partnership, to deliver the following elements of the service described in their Tender: -

End-to-end delivery in the boroughs of

- Ashfield
- Broxtowe
- Gedling
- Mansfield
- Nottingham

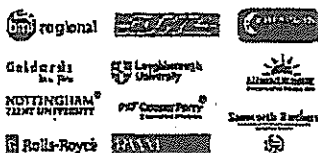
- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signed

(Chief Executive)

EAST MIDLANDS CHAMBER (DERBYSHIRE, NOTTINGHAMSHIRE, LEICESTERSHIRE)  
COMMERCE HOUSE, MILLENIUM WAY, DUNSTON ROAD, CHESTERFIELD, S41 8ND

#### Strategic Partners



#### Petrona



East Midlands Chamber (Derbyshire, Nottinghamshire, Leicestershire). Registered office: Commerce House, Millennium Way,  
Dunston Road, Chesterfield, S41 8ND Registered No. 1705710 Limited by Guarantee.





## APPENDIX 2

### SUBCONTRACTOR DECLARATION

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To: Department for Work and Pensions

Date: 11/04/17

I confirm that we have agreed in principle with REED IN PARTNERSHIP, to deliver the following elements of the service described in their Tender:-

(Please list below elements of service to be delivered).

End-to-end delivery in the boroughs of CALDERDALE

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signed

OPERATIONS MANAGER,  
HALIFAX OPPORTUNITIES TRUST, HANSON LANE ENTERPRISE CENTRE, HANSON  
LANE, HALIFAX, HX1 5PG

DECLARATION



inspire2independence

*a better place to be*

A letter containing the following declaration should be submitted by each proposed Subcontractor organisation (with the exception of ad-hoc suppliers) and attached to the Tender Form. Please note that we interpret you attaching this document as your agreement to its content. The letter should confirm that a price has been agreed for delivery of the stated element; however, the letter must not include information regarding the actual price agreed.

To: Department for Work and Pensions

Date: 10/4/17

I confirm that we have agreed in principle with Reed in Partnership, to deliver the following elements of the service described in their Tender:-

End-to-end delivery in the boroughs of East Riding of Yorkshire, Kingston Upon Hull.

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services

Signed [redacted]

INSPIRE 2 INDEPENDENCE, MILLFIELD LANE, YORK, YO26 6PH

[the person signing the letter should be authorised to sign contractual agreements on behalf of their organisation]

# ingeus

4<sup>th</sup> Floor  
66 Prescott St  
London  
E1 8HG

  
www.ingeus.co.uk

To: Department for Work and Pensions


Date: 21/04/2017

I confirm that we have agreed in principle with Reed in Partnership, to deliver the following elements of the service described in their Tender:-

End-to-end delivery in the boroughs of Newcastle, Sunderland, Gateshead, and North Tyneside.

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signed



 Head of Regional Strategy

On behalf of

INGEUS UK LTD., 4<sup>TH</sup> FLOOR, 66 PRESCOT ST, E1 8HG

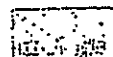
Ingeus UK Limited is registered in England and Wales, Number: 4320853.  
Registered Office: Ingeus UK Ltd, Fourth Floor, 66 Prescott Street, London E1 8HG



European Union  
European Social Fund  
Employment and Skills

The Work Programme is part-funded by the European Social Fund

Delivering services  
on behalf of



Department for  
Work and Pensions



## APPENDIX 2

### SUBCONTRACTOR DECLARATION

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To: Department for Work and Pensions

Date: 10.04.2017

I confirm that we have agreed in principle with Reed in Partnership to deliver the following elements of the service described in their Tender:-

(Please list below elements of service to be delivered).

End-to-end delivery in the boroughs of Bassetlaw; 50% Nottingham ; Rushcliffe ;Newark and Sherwood.

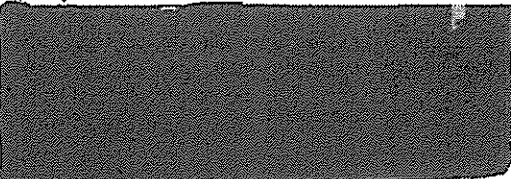
- I have read and understood the specification for the elements of provision which my organisation will deliver.
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- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signed

Framework Housing Association 2017

Registered Charity No. 1060941

Registered Social Landlord No. LH4 184



FRAMEWORK  
VAL ROBERTS HOUSE  
25 GREGORY BOULEVARD  
NOTTINGHAM  
NG76NX

Framework Housing Association 2017

Registered Charity No. 1060941

Registered Social Landlord No. LH4 184



**APPENDIX 2****SUBCONTRACTOR DECLARATION**

A letter containing the following declaration should be submitted by each proposed Subcontractor organisation (with the exception of ad-hoc suppliers) and attached to the Tender Form. Please note that we interpret you attaching this document as your agreement to its content. The letter should confirm that a price has been agreed for delivery of the stated element; however, the letter must not include information regarding the actual price agreed.

To: Department for Work and Pensions

Date: 06.04.17

I confirm that we have agreed in principle with Reed in Partnership, to deliver the following elements of the service described in their Tender:-

(Please list below elements of service to be delivered).

End-to-end delivery in the boroughs of SOUTH TYNESIDE

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
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Signed

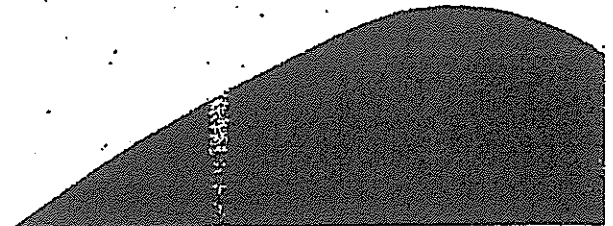
  
DIRECTOR  
NORTHERN RIGHTS, 17-19 UPPER CHARE, COUNTY DURHAM, SR8 1BW

[the person signing the letter should be authorised to sign contractual agreements on behalf of their organisation]

17-19 Upper Chare  
Castle Dene Shopping Centre  
Petoilee  
County Durham  
SR8 1BW

  
[www.northernrights.org.uk](http://www.northernrights.org.uk)

Northern Rights Community Interest Company,  
Registered in England and Wales Reg No 8421155 VAT Reg No 170479588



County Hall  
Morpeth  
Northumberland  
NE61 2EF

**APPENDIX 2**

**SUBCONTRACTOR DECLARATION**

A letter containing the following declaration should be submitted by each proposed Subcontractor organisation (with the exception of ad-hoc suppliers) and attached to the Tender Form. Please note that we interpret you attaching this document as your agreement to its content. The letter should confirm that a price has been agreed for delivery of the stated element; however, the letter must not include information regarding the actual price agreed.

To: Department for Work and Pensions

Date: [10/4/2017]

I confirm that we have agreed in principle with Reed in Partnership, to deliver the following elements of the service described in their Tender:-

(Please list below elements of service to be delivered).

End-to-end delivery in the boroughs of [Northumberland]

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.


# NORTHUMBERLAND

Northumberland County Council

  
Signed

Northumberland County Council  
County Hall,  
Morpeth  
NE61 2EF

*Name and Address of Subcontractor in block capitals*

  
Head of Skills and Employability  
Northumberland County Council  
Northumbria House  
Manor Walks  
Cramlington  
Northumberland  
NE23 8UR

*[the person signing the letter should be authorised to sign contractual agreements on behalf of their organisation]*

**APPENDIX 2****SUBCONTRACTOR DECLARATION**

A letter containing the following declaration should be submitted by each proposed Subcontractor organisation (with the exception of ad-hoc suppliers) and attached to the Tender Form. Please note that we interpret you attaching this document as your agreement to its content. The letter should confirm that a price has been agreed for delivery of the stated element; however, the letter must not include information regarding the actual price agreed.

To: Department for Work and Pensions

Date: 10.04.2017

I confirm that we have agreed in principle with REED IN PARTNERSHIP, to deliver the following elements of the service described in their Tender:-

(Please list below elements of service to be delivered).

End-to-end delivery in the boroughs of North East Lincolnshire and North Lincolnshire.

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signed

— 3<sup>rd</sup> FLOOR ARNDALE HOUSE, CHESTER ROAD,  
STRET福德, MANCHESTER, M32 9ED.

Department for Work and Pensions

Date: 20<sup>th</sup> April 2017

helping people succeed

trage

Triage Central Limited  
Earlsgate House  
35 St Ninians Road  
Stirling  
FK8 2HE

Web: [www.triagecentral.co.uk](http://www.triagecentral.co.uk)

**To Whom It May Concern**

I confirm that we have agreed in principle with Reed in Partnership, to deliver the following elements of the service described in their Tender:-

(Please list below elements of service to be delivered).

End-to-end delivery in the boroughs of Middlesbrough, Darlington, Stockton, Hartlepool and Redcar-in-Cleveland

- I have read and understood the specification for the elements of provision which my organisation will deliver.
- I have agreed in principle the terms of delivery for this provision and I am content that reasonable and appropriate price and payment terms have been negotiated and agreed for delivery of these services.
- I confirm that the agreement in principle allows for recovery of costs, subject to performance.
- I confirm that the agreement in principle allows for my organisation to make the appropriate level of planning and investment to deliver the service.
- I also confirm that we will not further sub-contract any of these Services.

Signed

[Redacted Signature]

[Redacted Name] MBE

Triage Central Limited  
Earlsgate House  
35 St Ninians Road  
Stirling  
FK8 2HE



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## HUMAN RESOURCES

Prime/Supply Chain Organisation	Job Title	Full Time Equivalent (at peak)	Key Responsibilities	Relevant Skills, Experience and Qualifications
Read In Partnership (Prime)	Adviser	[REDACTED]	Will be responsible for: engagement; participant induction; assessment; action planning; motivation; mentoring; addressing participant barriers; sourcing jobs; exit interviews; & in-work support. They will work with participants on a 1:1 basis & use our Route Planner Tool to signpost participants to specialist support.	As a minimum, Advisers will hold/be working towards L3 Employment Services Sector Award (or equivalent) & have exceptional motivation, communication & planning skills. They will have experience supporting Work & Health participant groups to achieve sustained employment.
Supply Chain (comprising: APM, County Durham Council, East Midlands Chamber, Framework, Halifax Opportunities Trust, I2i, Ingeus, Read In Partnership (Prime)	Adviser	[REDACTED]	Will be responsible for: engagement; participant induction; assessment; action planning; motivation; mentoring; addressing participant barriers; sourcing jobs; exit interviews; & in-work support. They will work with participants on a 1:1 basis & use our Route Planner Tool to signpost participants to specialist support.	As a minimum, Advisers will hold/be working towards L3 Employment Services Sector Award (or equivalent) & have exceptional motivation, communication & planning skills. They will have experience supporting Work & Health participant groups to achieve sustained employment.
Read In Partnership (Prime)	Trainer	[REDACTED]	Will deliver group-based accredited & non-accredited courses (e.g. Read's Mindset course), building participant resilience/skills & positive attitudes towards work. They will tailor & deliver group courses to meet participant needs & learning styles.	Will hold/be working towards L3 in Education & Training (or equivalent); have training &/or teaching delivery experience; hold required sector competencies; & strong coaching & teaching ability.
Supply Chain	Trainer	[REDACTED]	Will deliver group-based accredited & non-accredited courses (e.g. Read's Mindset course), building participant resilience/skills & positive attitudes towards work. They will tailor & deliver group courses to meet participant needs & learning styles.	Will hold/be working towards L3 in Education & Training (or equivalent); have training &/or teaching delivery experience; hold required sector competencies; & strong coaching & teaching ability.
Read In Partnership (Prime)	Self-Employment Adviser	[REDACTED]	Will provide ongoing specialist advice & guidance to help participants identify self-employment options & produce a realistic business plan; & deliver our Intro to Self-Employment & Safe Start courses, which introduces self-employment & helps participants understand the financial/practical implications of becoming self-	Will have strong track record of supporting participants to become self-employed, & have excellent communication skills & knowledge of support networks for micro-businesses. Desirable: They will hold/work towards L3 in Education & Training &/or be SFED) accredited, or equivalent.
Supply Chain	Self-Employment Adviser	[REDACTED]	Will provide ongoing specialist advice & guidance to help participants identify self-employment options & produce a realistic business plan; & deliver our Intro to Self-Employment & Safe Start courses, which introduces self-employment & helps participants understand the financial/practical implications of becoming self-	Will have strong track record of supporting participants to become self-employed, & have excellent communication skills & knowledge of support networks for micro-businesses. Desirable: They will hold/work towards L3 in Education & Training &/or be SFED) accredited, or equivalent.
Read In Partnership (Prime)	Health & Wellbeing Adviser	[REDACTED]	Will support participants to better manage their health & wellbeing by: jointly creating Health & Wellbeing Plans with participants; providing healthy lifestyle advice (e.g. diet); delivering our healthy living behavioural change course & specialist health & wellbeing training (e.g. our mood management courses); delivering advocacy	Will: hold L3 Health Trainer accreditation; complete our L3. of our Behaviour Change Competency Framework; be experienced in delivering health support (e.g. social prescribing, behavioural change & lifestyle modification) &/or working in a health & wellbeing environment; & have the ability to motivate
Supply Chain	Health & Wellbeing Adviser	[REDACTED]	Will support participants to better manage their health & wellbeing by: jointly creating Health & Wellbeing Plans with participants; providing healthy lifestyle advice (e.g. diet); delivering our healthy living behavioural change course & specialist health & wellbeing training (e.g. our mood management courses); delivering advocacy	Will: hold L3 Health Trainer accreditation; complete our L3 of our Behaviour Change Competency Framework; be experienced in delivering health support (e.g. social prescribing, behavioural change & lifestyle modification) &/or working in a health & wellbeing environment; & have the ability to motivate

Reed In Partnership (Prime)	Employment Support Officer	[REDACTED]	Will provide active & ongoing workplace-based support to participants & employers once in work. Wit: identify & address emerging barriers/support needs; explore progression opportunities; support employers to access funded in-work training; identify future recruitment needs; & work with our Recruitment Managers to pipeline jobs/secure vacancies.	They will have experience in supporting participants to sustain in work & have excellent problem-solving & communication skills. They will also have experience of supporting employers to access funded support (e.g. Access to Work). It is desirable that they are qualified to a degree level or equivalent.
Supply Chain	Employment Support Officer	[REDACTED]	Will provide active & ongoing workplace-based support to participants & employers once in work. Wit: identify & address emerging barriers/support needs; explore progression opportunities; support employers to access funded in-work training; identify future recruitment needs; & work with our Recruitment Managers to pipeline jobs/secure vacancies.	They will have experience in supporting participants to sustain in work & have excellent problem-solving & communication skills. They will also have experience of supporting employers to access funded support (e.g. Access to Work). It is desirable that they are qualified to a degree level or equivalent.
Reed In Partnership (Prime)	Business Manager (BM)	[REDACTED]	Business Managers will manage the performance & productivity of Advisers, Self-Employment Advisers, Health & Wellbeing Advisers, Employment Support Officers & Trainers. They will support the	Qualified to a degree level/equivalent. Previous experience working in an Adviser role; delivering similar size/scale DWP projects; quality compliance, experience & performance.



Reed in Partnership							Schedule 1 Appendix B Part 1 Appendix 5
DELIVERY INFRASTRUCTURE DETAILS							
Organisation Name(s) (including Prime, Subcontractors, Specialists and ad-hoc)	Delivery Location(s) (including Outreach and co-location sites)	State if Existing/ New sites	Facilities Available	Permanent site, subcontractor site, outreach or co-location?	Public Transport links and proximity to the premises	Confirmation that delivery premises will comply with the Equality Act 2010	
1 Reed in Partnership (prime)	Barnsley - Yorkshire House, 18-30 Shambles St, S70 2SW	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	On Shambles Street with 9 bus routes stopping outside the office, 400m to the bus & train stations for 50+ bus routes (including the 57 to Monk Bretton & Royston & 67 to Worsbrough) & local rail services (e.g. Wombwell 6mins). Bolton-upon-Dearne & Thurnscoe residents can use our Rotherham office if more convenient (13mins/ 18mins by train).	Y	

<b>2 Reed in Partnership (prime)</b>	<b>Bradford</b> - Auburn House, Upper Piccadilly, BD1 3NU	Existing	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	75m from Foster Square station (Shipley 9mins, Bingley 18mins) & 100m to 15 bus routes e.g. 621 to Bowling & 686 to Wyke.	Y
<b>3 Reed in Partnership (prime)</b>	<b>Chesterfield</b> - Markham House, S40 1TG	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	300m from bus station for local routes, e.g. 74 to Staveley & X17 to Boythorpe, & buses to nearby towns, e.g. 82 to Bolsover & 54 to Clay Cross.	Y
<b>4 Reed in Partnership (prime)</b>	<b>Derby</b> - Peat House, 5 Stuart St, DE1 2EQ	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	City Centre site close to rail (Duffield 8mins, Belper 12mins) & 500m to local (e.g. 7 to Normanton, 38 to Sinfen) & county buses (12 to Long Eaton, Y1 to Heanor).	Y
<b>5 Reed in Partnership (prime)</b>	<b>Doncaster</b> - Unit 6 Trafford Court, DN1 1LD	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	450m to train station (Thorne 17mins, Mexborough 12mins & Conisbrough 8mins). Also on local bus routes, e.g. 73 to Balby, 66 to Bentley, 54 to Adwick.	Y
<b>6 Reed in Partnership (prime)</b>	<b>Huddersfield</b> - Suite 9 St George's Quarter, New North Parade HD1 5JP	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets;	Permanent site	50m to train station (9mins to Dewsbury) & 250m from the bus station & 70 local routes, e.g. Newsome (319 bus,	Y

			seating areas with tea/coffee; & job boards			17mins) & Golcar (301 bus, 23mins).	
<b>7 Reed in Partnership (prime)</b>	<b>Leeds</b> - Gallery House, The Headrow, LS1 5RD	Existing	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	500m from the train station & within 400m of 20+ local bus routes such as 51 to Holbeck, 13 to Chapeltown & 49 to Bramley.	Y	
<b>8 Reed in Partnership (prime)</b>	<b>Leeds</b> - 272a Dewsbury Road Beeston LS11 6JT	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	On Dewsbury Road with easy access to Hunslet residents & served by 12 local bus routes including the number 2 to Beeston.	Y	
<b>9 Reed in Partnership (prime)</b>	<b>Rotherham</b> - Unit 9 Ashley Business Court S60 1RU	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	800m from the bus station (50 routes) e.g. X1 to Maltby & 37 to Herringthorpe & Thrybergh. Also 650m from train station (Swinton 9mins).	Y	
<b>10 Reed in Partnership (prime)</b>	<b>Sheffield</b> - St James House, Cathedral Quarter, S1 2EX	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	Centrally located for local bus routes including the 75 to Burngreave & Firth Park, 32 to Southey Green, 20 to Norton & 50 to Mosborough. The office is also 150m from Cathedral tram stop & all 3 lines for access to Meadowhall, Halfway	Y	

					(Mosborough) & Middlewood.	
<b>11 Reed in Partnership (prime)</b>	<b>Wakefield</b> - Cross Street Chambers West, Cross Street WF1 3BW	New	Training rooms; 1:1 rooms; wifi/PCs for jobsearch; printers; telephones; toilets; seating areas with tea/coffee; & job boards	Permanent site	150m to main bus station with 50+ routes, e.g. 119 to deprived area of Lupset, & 400m from the station (Pontefract & Castleford both 20mins).	Y
<b>12 Reed in Partnership (prime)</b>	<b>Buxton</b> - High Peak Council, The Pavilion Gardens, Buxton, St John's Road Buxton Derbyshire SK17 6BE	New	1:1 and Training room, ICT Facilities, such as projectors. chairs and Tables	Co-location	10m from bus stop serving 3 bus routes (no.16, 030 and 58). 500m (6 min walk) to Buxton Train station	Y
<b>13 Reed in Partnership (prime)</b>	<b>Dewsbury</b> - Ravensthorpe Community Centre, 24 Garden street, Dewsbury WF13 3AR	New	Training rooms, wifi/PCs, 1:1 rooms, toilets	Co-location	950m (13 min walk) to Ravensthorpe train station. 300m (4 mins walk) to 6 bus routes e.g. 205 goes into Dewsbury	Y
<b>14 Reed in Partnership (prime)</b>	<b>Leek</b> - Staffordshire Fire and Risk, Leek Community Fire Station Springfield Road, Leek ST13 6LQ	New	Tables, chairs, training and 1:1 room	Co-location	100m to 4 bus routes (e.g. no.18 to Haregate and 165 to Westwood)	Y
<b>15 Reed in Partnership (prime)</b>	<b>Pontefract</b> - CISWO, The Yorkshire Coalfield Resource Centre, Half Penny Lane, Pontefract WF8 4AY	New	Tables, chairs, training and 1:1 room	Co-location	800m (10 min walk) to Pontefract Tanshelf Train station, 45metres to 2 bus routes (e.g. 144 to Castleford)	Y

<b>16 Reed in Partnership (prime)</b>	<b>Swadlincote - South</b> Derbyshire Mental Health Association, Bank House, Top Floor Unit G. Sharpes Estate., Alexandra Rd, Swadlincote DE11 9AZ	New	Tables, chairs, training and 1:1 room and I.T facilities	Co-location	110m to 2 bus links - e.g. 21E goes to Linton and Overseal	Y
<b>17 Framework (Subcontractor)</b>	<b>Bassetlaw - The</b> Dukeries Business Centre, Retford Road, Worksop S80 2PU	Existing	Flexible space currently 1 large training room, ICT suite, networked IT Equipment, Telephone/Fax/ Internet, Stationary, other learning resources, disabled access, ramp, disabled parking, fire exit, water/drinks machines	Subcontractor (Fixed)	Close to the rail station (Retford 10mins) & bus routes 25, 42 & 43 stop outside the office	Y
<b>18 Framework (Subcontractor)</b>	<b>Newark and Sherwood</b> - The Exchange, Water Street, Newark NG241HA	Existing	Newark and Sherwood - Flexible space currently 1 large training room, ICT suite, networked IT Equipment, Telephone/Fax, Internet/Stationary, other learning resources, disabled access, ramp, disabled parking, fire exit, water/drinks machines	Subcontractor (Fixed)	600m to Newark Castle station (Collingham 10mins) & only 50m from 10 local bus routes including 2, 23, 46 & 91.	Y
<b>19 Framework (Subcontractor)</b>	<b>Nottingham - NCVS, 7</b> Mansfield Rd, Nottingham NG1 3FB	New	Office base for delivery staff. Training rooms and 1-2-1 rooms are available to hire	Subcontractor (Fixed)	Multiple tram and bus links within 300m	Y

<b>20</b> <b>Framework</b> (Subcontractor)	<b>Nottingham</b> - The Gate House, Castlegate, Nottingham NG1 5FS	Existing	1 medium training room, ICT suite, interview rooms other learning resources, disabled access, water/drinks machines	Subcontractor (Fixed)	250m to bus and tram routes e.g. L10 to Beeston	Y
<b>21 i2i</b> (Subcontractor)	<b>Goole</b> - The Courtyard, Boothferry Rd, Goole, East Riding of Yorkshire, DN146AE	Existing	Training room/121 room, telephone and wifi access, local parking available	Outreach	Station is 100m, 6 bus routes (e.g. 88 & 155) stop outside the office for easy access	Y
<b>22 i2i</b> (Subcontractor)	<b>East Riding of Yorkshire</b> - Beverley Library, Champney Road, Beverley HU17 8HE	New	121 Rooms, Training Room, ICT Access, Wifi, 15 Desks	Outreach	Central location, near public transport/services 70m from 8 bus routes, e.g. 61 & 143	Y
<b>23 i2i</b> (Subcontractor)	<b>Withernsea</b> -Southern Holderness Resource Centre, 29-31 Seaside Road, Withernsea, HU19 2DL	New	Training room/121 room, telephone and wifi access, local parking available	Co-location	150m to 9 bus routes serving the local area including the 71 & 77	Y
<b>24 i2i</b> (Subcontractor)	<b>Bridlington</b> - Bridlington Business Centre, East Riding Council, Enterprise Way Bessingby Industrial Estate, Bridlington, YO16 4SF	New	Training room/121 room, telephone and wifi access, local parking available	Co-location	300m to 5 bus routes such as 45 & 121 providing access to local residents	Y
<b>25 i2i</b> (Subcontractor)	<b>Hull</b> - Shirethorn House, 7-42 Prospect St, Hull, HU2 8PX	New	Training room/121 room, telephone and wifi access, local parking available	Subcontractor (Fixed)	200m from station (Hessle 14mins, Cottingham 10mins, Beverley 16mins), 50m from 29 bus routes, e.g. 16 to Marfleet	Y

<b>26 i2i</b> (Subcontractor)	<b>Hull</b> - Bransholme Library, 5 Goodhart Road, Bransholme, Hull, HU7 4EE	New	Training room/121 room, telephone and wifi access	Outreach	32m to bus stop serving 7 bus routes (e.g. Simplibus 11 to Kingswood)	Y
<b>27 i2i</b> (Subcontractor)	<b>Hull</b> - Orchard Park Community Centre, Orchard Park Rd, Hull, HU69BX	New	Training room/121 room, telephone and wifi access	Outreach	150 metres to 6 bus routes e.g. Simplibus 4 to North Hull Estate	Y
<b>28 Triage</b> (Subcontractor)	<b>Darlington</b> - Enterprise House, Valley Street North, Darlington, DL1 1GY	Existing	IT Suite(job search area), training rooms, 2x 1:1 rooms, kitchen facilities.	Subcontractor (Fixed)	17 Bus routes all within 300m from office and close to North Road Train station	Y
<b>29 Triage</b> (Subcontractor)	<b>Darlington</b> - DISC, Innovate@ Houndgate, Houndgate, Darlington, DL1 5RF	Existing	Training rooms, kitchen facilities	Outreach	Transport links, walking distance from Bus Station, 50m to bus routes e.g. 16, 29, 72 & X34	Y
<b>30 Triage</b> (Subcontractor)	<b>Hartlepool</b> - Ground Floor West, Maritime House, Hartlepool Marina, Hartlepool, TS24 0UX	Existing	IT Suite (job search area), 2 x Training Room, 1:1 rooms, kitchen facilities, open plan job search areas.	Subcontractor (Fixed)	Good transport links, central to local business district area, 800m from station & 300m to bus routes including 7 to The Headland & 4 to Brus Shops/Hart Station & Owton Manor	Y
<b>31 Triage</b> (Subcontractor)	<b>Hartlepool</b> - Owten Fens, Summerhill Lane, Hartlepool, TS24 4LL	Existing	Training rooms, kitchen facilities, I.T suit, break out areas.	Outreach	6 bus routes within 160m, e.g. no.6 bus to Clavering and 36 to Middlesbrough	Y

<b>32 Triage</b> (Subcontractor)	<b>Middlesbrough</b> - The Co-operative Buildings, 251-255 Linthorpe Road, Middlesbrough, TS1 4AT	Existing	Large IT suite (job search area), 3 training rooms, 2 interview rooms, large open plan area.	Subcontractor (Fixed)	Central location, excellent transport links both train and bus, Within 800m of 45 bus routes including 39 to North Ormesby & 63 to Beechwood. Stockton-On-Tees & Redcar accessible via rail (both 14mins) & buses, e.g. 36 & Sapphire X3	Y
<b>33 Triage</b> (Subcontractor)	<b>Redcar and Cleveland</b> - Grangetown Library, 172 Birchington Avenue, Grangetown, TS6 7LP	Existing	Various training rooms, 121 rooms, meeting rooms, IT access	Outreach	Community location, transport links, more info required 20m from bus routes, e.g. 62, 64, 794, for access to central Redcar & deprived areas such as Eston	Y
<b>34 Triage</b> (Subcontractor)	<b>Redcar and Cleveland</b> - Coast & Country, Westfield Farm, The Green, Redcar, TS10 5NA	Existing	Various training rooms, 121 rooms, meeting rooms, IT access, Outdoor break out areas, Kitchen Facilities	Co-location	Community location with good bus transport links 20m from bus routes, e.g. 62, 64, 794, for access to central Redcar & deprived areas such as Eston	Y
<b>35 Triage</b> (Subcontractor)	<b>Stockton-On-Tees</b> - Stockton on Tees Borough Council, Tithebarn House, High Newham Road, Stockton-On-Tees TS19 8RH	Existing	Various training/meeting rooms, IT suites, 121 and meeting rooms	Co-location	Community location with good bus transport links within 20m of buses e.g. 15, 37, 61	Y
<b>36 Triage</b> (Subcontractor)	<b>Stockton-On-Tees</b> - 19-23 Bridge Road Stockton, TS18 3AA	Existing	Various training, meeting rooms, IT suites	Outreach	Good transport links within 20m of buses e.g. 15, 37, 61	Y



<b>37 Triage</b> (Subcontractor)	<b>Stockton-On-Tees -</b> Darryl House Bridge Road Stockton, TS18 3BW	Existing	Various training, meeting rooms split over 2 floors with IT suite on ground floor	Outreach	Good transport links within 20m of buses e.g. 15, 37, 62	Y
<b>38 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale - Hanson</b> Lane Enterprise Centre HX1 5PG	Existing	Numerous Training rooms, interview rooms, IT suites, workshop, community hub room, accessible kitchen, allotment	Subcontractor (Fixed)	On main transport routes/links 200m to 8 bus routes such as 21, 510 & 532. Close to train station (Sowerby Bridge 6mins, Todmorden 19mins)	Y
<b>39 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale - Jubilee</b> Childrens Centre, Lightowler Road, Halifax, HX1 5NB	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	50m to the Number 21 bus route which goes to Halifax Town Centre (8 mins)	Y
<b>40 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale - Parkinson</b> Lane Childrens Centre, Parkinson Lane, Halifax, HX1 3SL	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	85m from the 542 bus route to central Halifax (9 mins)	Y
<b>41 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale - Warley</b> Road Childrens Centre, Warley Road School, Halifax, HX1 3TG	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	65 metres from 532 bus route & 8 min walk to regular bus routes 590 and 592 providing access to Halifax Town Centre (8mins)	Y
<b>42 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale - Sunshines</b> Childrens Centre, Mount Pellon J&I School, Battinson Road, HX1 4RG	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	150m from no. 21 bus route and 320m to 6 bus routes that all go to Halifax Town Centre (9mins)	Y

<b>43 Halifax Opportunities Trust</b> (Subcontractor)	Calderdale - Siddal Childrens Centre, Siddal Primary School, Backhold Lane, Halifax, HX3 9DL	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	250m from bus links with a 5 min journey to Exley	Y
<b>44 Halifax Opportunities Trust</b> (Subcontractor)	Calderdale - Boothtown Childrens Centre, Rawson J&I Infant School, Boothtown Road, HX3 6PU	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	100m from bus stop with 3 bus routes 22, 22A, 576 to Halifax Town Centre (9mins)	Y
<b>45 Halifax Opportunities Trust</b> (Subcontractor)	Calderdale - New Road Childrens Centre, New Road School, Sowerby New Road, Sowerby Bridge, HX6 1DY	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	Bus stop serving no. 577 bus route 20m away and 800m from Sower Bridge Train Station	Y
<b>46 Halifax Opportunities Trust</b> (Subcontractor)	Calderdale - Todmorden Childrens Centre, Todmorden Community College, Burnley Road, Todmorden, OL14 7BX	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	350m to Todmorden Train station and 120 metres from bus stop serving 3 bus routes	Y
<b>47 Halifax Opportunities Trust</b> (Subcontractor)	Calderdale - Hebden Vale Childrens Centre, Stubbing Home Road, Hebden Bridge, HX7 6AT	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	150m to bus stop serving 5 bus routes. Close to Hebden Bridge Train station	Y
<b>48 Halifax Opportunities Trust</b> (Subcontractor)	Calderdale - Elland Childrens Centre, Boxhall Road, HX5 0BB	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	150m to bus stop serving 6 bus routes and easy access to Halifax Town Centre	Y

<b>49 Halifax Opportunities Trust</b> (Subcontractor)	Calderdale - Field Lane Childrens Centre, Burnsall Rd, Rastrick, HD6 3JT	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	150m to bus stop to nearest bus stop and 500m to 6 bus routes covering Halifax, Huddersfield and Dewsbury areas	Y
<b>50 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale</b> - Innovations Childrens Centre, Cousin Lane, HX2 8DQ	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	300m to bus stop with 2 bus routes (521 & 514) going to Halifax Town Centre (14mins)	Y
<b>51 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale</b> - The Outback Kitchen and Garden HX1 5NB	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	160m to bus stop with no.21 bus route going to Halifax Town Centre	Y
<b>52 Halifax Opportunities Trust</b> (Subcontractor)	<b>Calderdale</b> - Ash Green Childrens Centre, Sunny Bank Road, Mixenden, HX2 8RX	Existing	Nursery, training rooms, interview rooms, health room	Subcontractor (Fixed)	100m from bus stop serving 2 bus routes going to Mixenden and Halifax Town Centre	Y
<b>53 Durham County Council</b> (Subcontractor)	Consett - Unit 21 & 22 Derwentside Business Park, Villa Real, Consett, DH8 6BP	Existing	3 x Training Rooms; 1 x IT suite, 2 x interview rooms	Subcontractor (Fixed)	30m to the Durham Diamond 16 bus route & 150m to 8 more including the 15 & 819	Y
<b>54 Durham County Council</b> (Subcontractor)	<b>Stanley</b> - Louisa Centre, Front Street Stanley, DH9 0TE	Existing	1 x training room with access to PC's for IT training and job searching	Subcontractor (Fixed)	30m from 10 routes such as the 816 & 828	Y

<b>55 Durham County Council</b> (Subcontractor)	<b>Chester-le-Street</b> - Mile House Bridge End Chester-Le-Street, DH3 3RA	Existing	1 x Training room with access to PC's for IT Training and job searching	Subcontractor (Fixed)	50m from local bus routes with access to Newcastle, Stanley, Durham, Peterlee	Y
<b>56 Durham County Council</b> (Subcontractor)	<b>Crook</b> - Unit 13 & 14 Crook Business Centre, DL15 8QX	Existing	1 x Training room with access to PC's for IT Training and job searching	Subcontractor (Fixed)	50m from local bus routes with access to Durham, Bishop Auckland, Darlington	Y
<b>57 Durham County Council</b> (Subcontractor)	<b>Spennymoor</b> - Spennymoor Library, Cheapside, Spennymoor, DL16 6DJ	New	Interview rooms and job searching facilities	Subcontractor (Fixed)	50m to 10 local bus routes including the 8A & 113 to Bishop Auckland	Y
<b>58 Durham County Council</b> (Subcontractor)	<b>Seaham</b> - Seaham CAP, St. Johns Square, Seaham, SR7 7JE	Existing	Interview rooms and job searching facilities	Subcontractor (Fixed)	200m from 7 bus routes such as 215 & 877 & the X21 to Peterlee	Y
<b>59 Durham County Council</b> (Subcontractor)	<b>Durham</b> - Durham City CAP, Millenium Place, Durham City, DH1 1WA	Existing	Interview rooms and job searching facilities	Subcontractor (Fixed)	20m from 6 bus routes including 40A, 64 & indigo 265	Y
<b>60 Durham County Council</b> (Subcontractor)	<b>Barnard Castle</b> - Barnard Castle CAP, Hall Street, Barnard Castle DL12 8JB	Existing	Interview rooms and job searching facilities	Subcontractor (Fixed)	50m from 15 bus routes e.g. 6, 74 & 96	Y

<b>61 Durham County Council</b> (Subcontractor)	<b>Wolsingham -</b> Wolsingham Library, Market Place, Wolsingham DL13 3AB	New	Interview rooms and job searching facilities	Subcontractor (Fixed)	76m from bus stop serving 10 bus routes. Transport links to Crook, Bishop Auckland and Durham.	Y
<b>62 Durham County Council</b> (Subcontractor)	<b>Stanhope - Dales</b> Centre, Stanhope DL13 2FJ	Existing	Interview rooms and job searching facilities	Subcontractor (Fixed)	200m from bus stop serving 6 bus routes. Transport links to Crook, Bishop Auckland and Durham.	Y
<b>63 Durham County Council</b> (Subcontractor)	<b>Weardale - Barrington</b> Hall, St Johns Chapel, Weardale DL13 1QH	Existing	Interview room and access to telephone	Outreach	65m from bus stop serving 2 bus routes. Transport links to Crook, Bishop Auckland and Durham.	Y
<b>64 Durham County Council</b> (Subcontractor)	<b>Middleton in Teesdale -</b> Upper Teesdale Community Association, The Village Hall, Middleton in Teesdale, DL12 0TN	New	Interview room and access to telephone	Co-location	Located in the centre of village with the bus stop 300m away. Transport links to Barnard Castle, Bishop Auckland and Darlington	Y
<b>65 Durham County Council</b> (Subcontractor)	<b>Middleton in Teesdale -</b> Bowlees Visitor Centre, Middleton in Teesdale, DL12 0XF	New	Interview room and access to telephone	Subcontractor (Fixed)	Bus stop is 400m away providing transport links to Barnard Castle, Bishop Auckland and Darlington	Y
<b>66 APM</b> (Subcontractor)	<b>Craven - 1st Floor, High</b> Street House, High Street, Skipton BD23 2HU	Existing	121 area and small jobsearch area	Subcontractor (Fixed)	100m to 18 bus routes such as 14, 73 & 884. 700m to rail station (Cononley 9mins, Settle 26mins).	Y

<b>67 APM</b> (Subcontractor)	<b>Hambleton -</b> Hambleton District Council, Northallerton Business Centre, 97 High Street, Northallerton DL7 8PP	Existing	121 interview area. Training rooms available on booking. Parking available. Located near main high street to support engagement. Short distance to Northallerton Town hall which is where North Yorkshire County Council are based. Good relationships with LA which can support referral generation	Co-location	148m (2min walk) to 5 bus routes (e.g no.72 to Darlington and 80 to Stokesley). The no.72 also goes to Northallerton Train station	Y
<b>68 APM</b> (Subcontractor)	<b>Harrogate- Community</b> House Trust, 46-50 East Parade, Harrogate, HG1 5RR	Existing	121 interview area. No parking available. Located within a drug and alcohol clinic in Harrogate with joint working in place to support clients. For clients who do not wish to be seen in these premises we arrange to meet in another location	Co-location	450m (6min walk) from 10 different bus routes (e.g X4 to Wedderburn) and 800m (10min walk) from Harrogate Train station	Y
<b>69 APM</b> (Subcontractor)	<b>Richmondshire -</b> Borough House Business Centre, 5 Borough Road, Richmond, DL10 4SX	Existing	Training rooms and 121 rooms can be booked daily to support engagement of clients in this rural area. APM have delivered from this location previously for the Job Centre Plus	Co-location	300m (4 min walk) from 31B bus route going to Hurgill and 400m from 31B bus route going to Richmond	Y

			Support contract. JCP actually highlighted this location as a good location for delivery for a small market town				
<b>70 APM</b> (Subcontractor)	<b>Ryedale</b> - Hope Central, 62 - 64 Castlegate, Malton YO17 7DZ	Existing	Training rooms to hire, 121 area available including private interview room. Centre with other delivery partner support available to support management of social barriers including debt support, Youth Support, Marriage Support and community café	Co-location	480m (6 min walk) from Malton Train station and 250m from 13 bus routes (e.g. 194 to Hovingham)	Y	
<b>71 APM</b> (Subcontractor)	<b>Selby-Selby Town</b> Council, The Town Hall, York Street, Selby YO8 4AJ	New	Training rooms, 1:1 room with desks and chairs and a kitchen	Co-location	320m (4min walk) from 12 bus routes (e.g. no.6 and no. 7 to Thorpe Willoughby and 4A to Hemingbrough)		
<b>72 APM</b> (Subcontractor)	<b>Scarborough My Better Life</b> (Yorkshire Coast Homes Ltd ), 4 Gladstone Road, Scarborough, YO12 7BH	Existing	Training rooms to hire, 1-1 area available including private interview room	Co-location	100m from bus stop enabling access from the Town Centre and Barrowcliffe. 0.3 miles away (6 min walk) to Scarborough train station	Y	

<b>73 APM</b> (Subcontractor)	<b>York - Ground Floor</b> Artemis House, Eboracum Way, York YO31 7RE	Existing	Training rooms, interview room, job search area/customer PCs	Subcontractor (Fixed)	Central location in city Centre , with excellent transport links for the local area 100m to 16 bus routes such as the 11 to Heworth, 12 to Foxwood, 2 to Clifton & Coastliner 840 to Malton in Ryedale	Y
<b>74 APM</b> (Subcontractor)	<b>Whitby - Coliseum</b> Centre, Whitby Area Development Trust, Victoria Place, Whitby, north Yorkshire, YO21 1EZ	Existing	Training room, 1-1 area available including private interview room	Co-location	50m to Whitby rail station & 20m to 12 local bus routes including Sapphire X4, Coastliner 840, 91, 95 & 98	Y
<b>75 East Midlands Chamber</b> (Subcontractor)	<b>Ashfield - Ashfield</b> School, Sutton road, Kirkby in Ashfield, Nottinghamshire, NG17 8HP	Existing	2 x training rooms for job search one with 6 PC's all with internet access.	Subcontractor (Fixed)	Close to rail station (9mins to Mansfield), 100m to local buses including 3B to Sutton-in-Ashfield & 3C to Hucknall	Y
<b>76 East Midlands Chamber</b> (Subcontractor)	<b>Broxtowe/Gedling/Rushcliffe/Nottingham - 8</b> Experian Way, NG2 Business Park, Nottingham, NG2 1EP	Existing	2 x training rooms for job search one with 6 PC's all with internet access.	Subcontractor (Fixed)	within 100m of tram stops, close to rail station (Bulwell 13mins, Langley Mill near Eastwood 20mins) & 450m to 30+ bus routes, e.g. 28 to Bilbrough & 48 to Clifton	Y
<b>77 East Midlands Chamber</b> (Subcontractor)	<b>Gedling - Arnold</b> Community Centre, Gedling Road, Arnold, NG5 6NY	New	Meeting room for up to 10 customers. Wifi, disabled access, toilets, kitchen and garden.	Outreach	Situated centrally in Gedling Borough. Six miles from main office. 40 minutes on number 47 bus or 12 minutes (2 miles) on number 46 bus	Y



					from centre of Gedling town.	
<b>78 East Midlands Chamber</b> (Subcontractor)	<b>Mansfield</b> - Ashfield School, Sutton road, Kirkby in Ashfield, Nottinghamshire, NG17 8HP	Existing	2 x training rooms for job search one with 6 PC's all with internet access.	Subcontractor (Fixed)	Close to rail station (9mins to Mansfield), 100m to local buses including 3B to Sutton-in-Ashfield & 3C to Hucknall	Y
<b>79 Ingeus</b> (Subcontractor)	<b>Gateshead</b> - Gateshead International Business Centre, Gateshead Council, Mulgrave Terrace, Gateshead, NE8 1AN	New	Reception, Disabled Access Toilets, Meeting rooms (121 up to 20 person), High Speed Broadband , IT, Free Parking	Co-location	200 meters from Gateshead Interchange and Metro Station offering extensive transport links across Tyneside. 10 min walk to Newcastle city centre	Y
<b>80 Ingeus</b> (Subcontractor)	<b>Gateshead</b> - Springwell Village Community Venue, Fell Road, Springwell Village, Gateshead, NE9 7RP	New	Reception, Disabled Access, Toilets, 121 room, Free Parking	Outreach	8 bus routes 160m from the office e.g no. 23 bus route to Barley Mow and Fab 56 bus route to Newcastle upon Tyne	Y
<b>81 Ingeus</b> (Subcontractor)	<b>Newcastle</b> - First Floor, Bede House, All Saints, Newcastle-upon-Tyne, NE1 2ES	Existing	6 large training rooms, 24 jobstations, two 121 rooms	Subcontractor (Fixed)	Central location, close to transport links Within 150m of buses e.g. 21 to Gateshead, 72 to Blakelaw & Q3 to Byker & Monkchester. 300m to Manors station (to Wallsend, North Shields & Whitley Bay) & 600m to Monument Metro (to Kingston Park & Felling	Y

<b>82 Ingeus</b> (Subcontractor)	<b>Newcastle -Centre</b> West, The Beacon, Westgate Road, Newcastle-upon-Tyne, NE4 9PQ	New	Reception, Disabled Access, Toilets, Meeting rooms for up to 30 people, 121 rooms, Broadband, IT, free parking	Co-location	Based in local community of Westgate Road. 15 min walk to Newcastle city centre and extensive bus and Metro links across the North East. 7 min bus from premise to Newcastle City centre on service 38 and 43	Y
<b>83 Ingeus</b> (Subcontractor)	<b>North Tyneside -</b> Meadow Well Connected, Waterville Rd, North Shields, NE29 6BA	New	Reception, Disabled Access, Toilets, Meeting rooms for up to 30 people, 121 rooms, Broadband, IT, free parking, on site café	Co-location	60m to Meadow Well Metro & local bus routes e.g. 310 & 660	Y
<b>84 Ingeus</b> (Subcontractor)	<b>Sunderland - Lynas</b> House, 12 Frederick Street, Sunderland, SR1 1NA	Existing	2 121 rooms, 3 training rooms, job search areas within training rooms	Subcontractor (Fixed)	Central location, close to transport links. An existing Ingeus office to cover Sunderland & surrounding area. 200m from Sunderland Metro station (to Millfield & South Hylton), & 20 bus routes within 600m, e.g. 2 to Grindon, 39 to Hendon, X5 to Hetton-le- Hole & 8 to Washington	Y

<b>85 Ingeus</b> (Subcontractor)	<b>Sunderland -</b> Washington Millennium Centre, The Oval, Concord Washington NE37 2QD	New	Reception, Disabled Access, Toilets, Meeting rooms for up to 20 people, 121 rooms, Broadband, IT, free parking, on site café		Co-location	50m from bus depot delivering services to Washington Town Centre (service 4 and 84) taking 14 mins. Further services to Sunderland (service 84 and 56 ) taking 38 mins. Service to Newcastle city (service 4 / 56 or X1) taking 45 mins. Sunderland and Newcastle offer further links on Metro system	Y
<b>86 Northern Rights</b> (Subcontractor)	<b>South Tyneside - Ocean</b> Road Community Association, Ocean Road, South Shields NE33 2DW	Existing	One to one private meeting rooms. Training room facilities holding up to 60 people. Access to WIFI. Reception area including café. Disabled parking and toilet facilities on ground floor.		Co-location	280m to South Shields Metro (to Jarrow & Brockley Whins) & 200m from 25 bus routes, e.g. 8, 516 & T503	Y
<b>87 Northumberland and Council</b> (Subcontractor)	<b>LSS, Wansbeck</b> Workspace, Rotary Parkway Ashington NE63 8QZ	Existing	3 training rooms, 1 interview room, additional job search area, Large workspace with desks		Subcontractor (Fixed)	Central and next to transport links within 200m of local bus routes such as the 35, 52 & Sapphire X22	Y
<b>88 Northumberland and Council</b> (Subcontractor)	<b>Northumbria House,</b> Manor Walks Shopping Centre, Cramlington NE23 6UR	Existing	8 Classrooms, 1 interview room, staff desks		Subcontractor (Fixed)	Central and next to transport links. 200m to 15 bus routes such as 19, 43 & 57 & 400m from the rail station	Y

<b>89</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Ashington Training Centre</b> , Freeman Way Ashington NE63 0YB	Existing	5 classrooms, motor vehicle workshop, cycle mechanics workshop and construction workshop	Subcontractor (Fixed)	Within 200m of local bus routes such as the 35, 52 & Sapphire X22	Y
<b>90</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Blyth Adult Learning Centre</b> , Brunel Building, 64 Regent Street, Blyth NE24 1LT	Existing	6 Classrooms , 3 interview rooms and staff space	Subcontractor (Fixed)	300m from 8 local bus routes, e.g. 2, X8 & X11	Y
<b>91</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Morpeth Adult Learning Centre</b> , Cottingwood Lane, Morpeth NE61 1DN	Existing	6 Classrooms , 3 interview rooms and staff space	Subcontractor (Fixed)	500m to 6 local bus routes stopping on Pottery Bank, e.g. 33 & 710; Prudhoe (NE42 5LJ): The office is 600m from the 686 bus route to Crawcrook & the Ten10 to Stocksfield	Y
<b>92</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Bedlington Open Learning Centre</b> , Jubilee Terrace Bedlington NE22 5HB	Existing	4 classrooms and beauty salon and staff space	Subcontractor (Fixed)	Central location-transport links. Less than 50m to 4 bus routes including the 2 & 448	Y
<b>93</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Alnwick Adult Learning Centre</b> , Alnwick NE66 1AX	Existing	3 classrooms and interview rooms and staff space	Subcontractor (Fixed)	Central location-transport links. 100m from 4 bus routes e.g. 418 & T02	Y
<b>94</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Alnwick, St James Church</b> , Pottergate Alnwick NE66 2XR	Existing	1 delivery room, access to additional space and training rooms	Subcontractor (Fixed)	Central location, transport links. 75m to 4 bus routes including T01 & 423	Y

<b>95</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Berwick Adult Learning Centre</b> , Walkergate Library, Berwick upon Tweed TD15 1DB	Existing	5 Classrooms, 3 interview rooms and staff space and meeting rooms	Subcontractor (Fixed)	Central location, transport links. A town centre site 500m from the rail station & only 100m from 20 local bus routes including the 18, 67 & 253	Y
<b>96</b> <b>Northumberland and Council</b> (Subcontractor)	<b>Prudhoe Fuse Media Centre</b> , Moor Road, Prudhoe NE42 5LJ	Existing	5 classrooms, TV Studio, Radio Studio, Recording Studio, Cinema Green Room and Atrium	Subcontractor (Fixed)	Central location with good transport links The office is 600m from the 686 bus route to Crawcrook & the Ten10 to Stocksfield	Y
<b>97</b> <b>Standguide</b> (Subcontractor)	<b>Scunthorpe - Voluntary Action North</b> Lincolnshire, 4-6 Robert Street, Scunthorpe, DN15 6NG	New	x3 training room, x1 1-1 space, resource area with computer for each customer, Wi-Fi, projector, refreshments available, private space for prayer, telephone use, lift.	Subcontractor (Fixed)	Covers N Lincs area & 50m from 28 local bus routes, e.g. 22 to Raventhorpe	Y
<b>98</b> <b>Standguide</b> (Subcontractor)	<b>Grimsby - Grimsby Central Hall</b> , Duncombe Street, Grimsby, NE Lincs, DN32 7EG	Existing	x3 training room, x1 1-1 space, laptop for each customer, Wi-Fi, refreshments/kitchen facilities available, private space for prayer, telephone use, lift.	Subcontractor (Fixed)	400m to 14 bus routes, e.g. 9 to Cleethorpes & HumberFlyer to Laceby	Y
<b>99</b> <b>Standguide</b> (Subcontractor)	<b>Immingham - Immingham Civic Centre</b> , Immingham Town Council, Pelham Road, DN40 1QF	Existing	x1 training room, x1 1-1 space, Wi-Fi, projector, refreshments available, private space for prayer, telephone use, lift.	Co-location	In the heart of the city centre, it is 200m from buses number 5, 5M, S2, S3 which cover the local areas.	Y



**Schedule 1 Appendix B Part 1 – Appendix 6 Implementation**

**[REDACTED]**





# Work and Health Programme Stakeholder Relationship List

Stakeholder Name	Head in Partnership	ICPA	2
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Stakeholder Name	Definition	ICPA	Head in Partnership	ICPA	2
Core	Stakeholder meets one or more of these three conditions they are considered 'Core'				
1. The withdrawal of this stakeholder is an integral part of the customer journey or would materially affect performance.					
OR					
2. The withdrawal of this stakeholder would result in a gap service provision to a customer group or geographic area.					
OR					
3. Greater than 1% of annual CPA national volumes which will directly engage with this stakeholder's service.					
Auxiliary	None of the above conditions are met, but the stakeholder provides a service which represents added value for the customer.				
Stakeholder Name	Definition	ICPA	Head in Partnership	ICPA	2
Supply Chain (Paid) Specialist Partners (17)					
Aulian Plus Limited	Paid Specialist - Support for individuals with learning disabilities and difficulties and work placements in their local community	(REDACTED)	(REDACTED)	(REDACTED)	Yes
South Derbyshire Mental Health Association (Bank of England)	Paid Specialist - Access to mental health services in South Derbyshire	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Business in the Community (BITC)	Paid Specialist - Work placements with their employment network	(REDACTED)	(REDACTED)	(REDACTED)	Yes
The British Dyslexia Association	Paid Specialist - Dyslexia assessments	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Bankforce (Ethos Ltd)	Paid Specialist - Work placements for volunteers in the construction industry	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Carlton UK Ltd	Paid Specialist - Support for individuals who have learning difficulties	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Developing Initiatives for Support in the Community Ltd (DISC)	Paid Specialist - Support for individuals with substance misuse issues	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Healthy Working Futures Ltd	Paid Specialist - Path management and other support for physical and mental health needs	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Institute 2 Independence (I2I)	Paid Specialist - Telephone based specialist health assessments	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Insight Healthcare	Paid Specialist - Pre-empt pathway for individuals with mental health issues	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Royal British Legion Industries Ltd (RBLI)	Paid Specialist - Occupational health support for veterans	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Religious Education and Training Advice Service (RETAS)	Paid Specialist - Support for participants who are religious or religious	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Royal National Institute of Blind People (RNIB)	Paid Specialist - Support for participants who have visual impairment	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Shelter, National Campaign for Homeless People Ltd	Paid Specialist - Telephone based training for participants with housing needs	(REDACTED)	(REDACTED)	(REDACTED)	Yes
SOAH Community	Paid Specialist - Support for individuals with mental health issues	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Well Women Centre Wakefield	Paid Specialist - Support for vulnerable women	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Working Minds CIC	Paid Specialist - Mental health support e.g. CBT/counselling	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Stakeholders (Group) (45)					
Academy Foundation Trust	Further Education provider with trained mentors in our early and further East Midlands Churches of Commerce	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Advanced Technical Solutions	Provides vocational training in different renewable skills	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Aspire-Open Group Ltd	Social Enterprise providing employment, training and advice to work with us to improve and offer guidance, but work with local communities and with our staff to ensure supply chain partners East Midlands Churches of Commerce	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Avon	Community transport for people who are disadvantaged through disability or those in rural communities	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Bevanay Community Ltd	Community transport and co-location to deliver training	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Blue Apple Training	NHS Trust who will support participants to access their NHS services and steps disability programme	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Bradford and District Care NHS Foundation Trust	Access to sectorised placements and hands-on experience on 11th Work Health Programme	(REDACTED)	(REDACTED)	(REDACTED)	Yes
BT	Local Authority Adult Learning services to support Work and Health programme participants to progress	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Calderdale Council	Initiation of services including Bradford Skills House opportunities	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Clifford Health & Wellbeing	Initiation of services including Bradford Skills House opportunities	(REDACTED)	(REDACTED)	(REDACTED)	Yes
City of Bradford Metropolitan District Council	Housing provider in Bradford and Cleburne will work to continue to support tenants back to work	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Coast & Country Housing Ltd	Support for rural communities where participants can access job clubs, community support, and advice in Northumberland	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Community Action Northumberland	Provider of Work Experience and Apprenticeships in construction and engineering	(REDACTED)	(REDACTED)	(REDACTED)	Yes
Construction Works Ltd Ltd	Will deliver pre-employment training and accredited training including Maths, English, ESOL	(REDACTED)	(REDACTED)	(REDACTED)	Yes
CRIS Training		(REDACTED)	(REDACTED)	(REDACTED)	Yes

[illegible]



[illegible]