

**Lot 3**

**SERVICE SPECIFICATION FOR PERSONAL HEALTH BUDGET EMPLOYER ADVICE AND GUIDANCE**

1. **DESCRIPTION OF SERVICE**
	1. This document details Merton Clinical Commissioning Group (CCG)’s requirements for the provision of Employer Advice and Guidance Services delivered to adults, children and young people who are registered with a Merton GP and have been approved to receive a personal health budget by Merton CCG or its representatives.
	2. The service consists of two elements:
		1. **A Helpline/Triage service** to provide access to immediate information and support relating to Individuals who are or wish to be employers;
		2. **One-to-one support** for Individuals who are or wish to be an employer.
	3. The Required Outputs for this Service are as follows:
		1. Individuals are able to identify and recruit the right people to fulfil the roles identified in their Care and Support plan.
		2. An up to date record of training, skills, experience and details of compliance checks for Health Personal Assistants (HPAs) recruited to support personal health budget holders.
		3. Individuals are assisted and supported to comply with employment legislation including payment of wages, tax and national insurance liabilities, all relevant insurance, and pension enrolment;
		4. Individuals are advised and empowered to manage their employees effectively, maintaining an employment relationship for each role that is recruited to;
		5. HPAs are able to access specialist training or maintain existing training to a required standard; and
		6. Individuals understand their responsibilities as an employer.
2. **SERVICE REQUIREMENTS**
	1. **Standardised Referral Form**
		1. Merton CCG will work with service provider to design an agreed standardised referral form for Merton PHB Support Services
		2. The form and format of the referral will be agreed between the parties as part of the implementation process and must take the form of a secure electronic process.
		3. The referral will contain:
			* 1. The Individual’s name, address, contact details and identifying reference;
				2. Details of any outcomes to be achieved through accessing the service; and
				3. Any communication needs that have to be taken into account in the delivery of the employer advice and guidance service.
	2. **Referrals to the Service**
		1. Individuals requiring access to the services will be registered with a Merton GP and approved to receive a personal health budget:
		2. PHB Direct Payments Officer will refer an Individual to the service provider at any point after the Individual has been assessed as being eligible for a personal health budget. This can occur at the point where the Individual explicitly expresses an interest in becoming an employer, or where the healthcare/NHS professional approves a support plan which contains outcomes which may be met by becoming an employer.
		3. In the first instance Individuals will be referred to online and telephone support including provision of signposting and access to templates, guidance and relevant documents. If this support does not meet their needs, the service provider will offer one-to-one support in a form that is accessible to the Individual.
		4. The service provider will be responsible for determining whether an individual’s needs are best met through one-to-one contact or through telephone or online support. Merton CCG will not determine what proportion of the service should be delivered by Triage/Helpline and what proportion through one-to-one support. The service provider will consider which approach meets the individual’s needs as efficiently as possible whilst encouraging the Individual’s independence
		5. The service provider must accept 100% of all referrals for Employer Advice and Guidance Service from the PHB Direct Payment Officer and/or other nominated representatives of Merton CCG
		6. The service provider will make initial contact with the Individual within 2 (two) working days of the time of referral receipt. As the service is person centred, there will be circumstances where this is not possible because the Individual is unavailable. If this cannot be achieved, the service provider will inform the PHB Direct Payment Officer and record the reasons why in order to support service development. Services will be set up and completed within the timescales described within the relevant service delivery section below.
		7. The service provider will ensure that the services are person-centred and responsive to the needs of the Individual being supported. For this reason it will not always be possible or reasonable to expect services to be delivered within strict timescales. Any deviation from the approved timescales will be recorded by the provider along with the reason why the deviation occurred, to form part of contract management processes. This information will be used within continuous service improvement processes.
	3. **Triage/Helpline**
		1. The service provider will ensure that Individuals wishing to get advice about recruiting a HPA, being an employer, or any aspect of maintaining an employment relationship are able to access information over the telephone and online.
		2. The service provider will check that all Individuals accessing the service are registered with a Merton GP and have been referred by PHB Direct Payment Officer. Those who are eligible will receive support over the telephone or be referred to one-to-one support
		3. The service provider will ensure that Individuals are signposted to the relevant source of expertise or the right authority to be able to address any issues, concerns of gaps in their knowledge. Where the service provider signposts to another organisation, they will ensure that they refer to the most relevant and accessible contact point. Organisations to be signposted to include (but are not limited to):
		4. The Citizens’ Advice Bureau
		5. The Pensions Regulator
		6. Merton Council
		7. Her Majesty’s Revenue and Customs
		8. Advocacy Organisations
		9. Skills for Health
		10. The Advisory, Conciliation and Arbitration Service (ACAS)
		11. Sources of no-cost or low cost training
		12. The service provider will support Individuals who require training on subjects relating to being a good employer, or require training for their HPA on aspects of performing their role to access relevant training. Where possible the service provider will signpost Individuals to no-cost training courses that meet their needs.
		13. If there are no appropriate free training courses available, the service provider will support the Individual to access courses as described in their validated support plan.
		14. The service provider will provide advice to individuals who wish to carry out their own recruitment but require advice on the process and relevant sources of information.
		15. The service provider will ensure that Individuals who wish to recruit their own HPAs have access to an appropriate toolkit to support them in the process, for example to guide them in the creation of job and person specifications, the process of carrying out an interview and information about any appropriate checks they may wish to undertake.
	4. **One-to-One Support**
		1. The PHB Direct Payment Officer will refer Individuals who wish to be an employer and where it is clear that the Individual may wish to be an employer. The service will ensure that these Individuals have access to one-to-one support to understand the implications and responsibilities of being an employer.
		2. The service provider will ensure that Individuals referred for one-to-one support are supported to understand the implications of being an employer, all relevant legislation and good practice, including (but not limited to):
3. Relevant employment law including but not limited to payment of tax, national insurance, and workplace pensions;
4. The importance of Employer’s Liability Insurance and appropriate sources of advice for obtaining relevant insurance cover;
5. The importance of insurance to cover them in the event of having to make redundancy payments, and appropriate sources of advice to for obtaining relevant insurance cover;
6. The Individual’s responsibility to keep up to date with employment law, and sources of information that the Individual may access to do so;
7. Advice on the process of how to recruit a HPA;
8. Generic advice on being a good employer; and
9. Advice to seek an appropriate Disclosure and Barring Service (DBS) check prior to appointing a HPA.
	* 1. However this support is provided, the service provider will ensure that Individuals sign a document (that has been drafted in a format that the Individual is able to understand and is suitable for their needs) stating that they have received and understood the information they have received. All information will be provided in a form that meets the Individual’s communication needs as outlined in their initial referral. Copy of document to be submitted to Merton CCG as part of invoicing arrangement.
		2. The service provider will ensure that all support and advice is appropriate and that Individuals are signposted to appropriate professionals where required. The service provider will take all appropriate steps to avoid giving advice beyond their level of qualification, for example legal or financial advice where relevant qualifications are not maintained.
		3. Where Individuals confirm that they wish to become an employer, the service provider will support them to do so through:
10. Helping people to write job and person specifications for the roles they wish to recruit to
11. Help with advertising appropriately where required
12. Ensuring that requests for application forms are responded to within 2 working days
13. Helping to set up and run interviews including advice and support on appropriate venues
14. Help with the process of selecting and shortlisting candidates
15. Help with relevant paperwork
	* 1. Individuals will be supported to send out and receive correspondence relating to recruitment in a safe way, to avoid them having to use their home address. The service provider will receive related correspondence on the Individuals behalf and will have safe and secure methods in place for passing the correspondence to the Individual, unopened.
		2. Individuals will be supported to use an appropriate safe venue for meeting and interviewing potential employees, to avoid them having to use their home address
		3. The service provider will signpost the Individual to appropriate templates for contracts of employment and support their completion where required
		4. Where Individuals wish to carry out a DBS check, the service provider will ensure that Individuals are signposted clearly to a DBS checking service and are supported to carry out checks. The service and the outcomes of the checks will be accessible and take into account the Individual’s communication needs.
		5. Helping Individuals to set up appropriate contingency arrangements to support HPA holiday entitlement, sickness, or any unforeseen circumstances that prevent a HPA from supporting an Individual
	1. **Health Personal Assistants**
		1. HPAs will be paid in line with Merton CCG’s rate of pay. Information about pay rate will to help Individuals to make informed decisions about an appropriate rate of pay for a HPA based upon required skills and the care package that has been approved by Merton CCG and/or its representatives.
		2. The service provider will compile and maintain a record of HPAs who are currently working for personal health budget holders in Merton. The information record will include details of mandatory and non-mandatory training, skills and compliance checks such as DBS checks.
		3. The service provider will:
			1. Ensure that they gather and hold information about HPAs in the format that has been agreed by Merton CCG.
			2. Ensure that an employer recruiting their own HPA understand that they are required to maintain an up to date HPA record as described in 2.5.2.
			3. Ensure that HPAs are legally entitled to work in the UK, and if they wish to work with more than one Individual they must hold formal self-employed status with Her Majesty’s Revenue and Customs.
			4. Ensure that HPAs state whether they hold a current DBS check, and this information will checked by the service provider and included in the HPA’s record
		4. The service provider will:
			* 1. ensure that the HPA record is updated on a quarterly basis ( every 3 months)
				2. ensure that there is access to sufficient HPAs to be able to respond to demand across Merton, according to the locations, skills, experience and tasks required in the market;
				3. ensure that information about HPAs is presented to Individuals in a way that allows for them to make their own decisions about who to recruit.
	2. **Service Expectation and Response**
		1. All individuals, upon their first communication, are allocated a point of contact, to ensure their requirements are understood and processed quickly, reducing need to repeat information
		2. Individuals understand how to make use of their personal budget, and understand and are able to start using the support available to them.
		3. All Individuals are supported to make use of their account and direct payments effectively, including those with complex communication needs, cognitive impairments, sensory impairments and physical impairments.
		4. All individuals engaged with a service, fully understand the process and timescales applicable to their requirement.
	3. **Accessibility and Opening Times**
		1. The service provider will ensure that their service is accessible at times that meet the needs of the people who use the service, not just office hours Monday to Friday. Services should be flexible enough to meet individual need which may mean support at evenings, weekends or bank holidays.
		2. Services must be provided in locations within the London Borough of Merton that are accessible and adapted to the needs of the individuals requiring support. The service provider must use relevant technology and flexible working methods.
		3. The service provider must understand that mental capacity is broad and relates to many diverse groups of people. It requires a holistic approach to working with people, not relying on their ‘instructions’ but on an assessment of their rights and needs. It requires skills in communicating by alternative means, for example, with people
16. Who have no spoken language
17. Who have sensory impairments
18. Who require a translator
19. Who require an interpreter
20. Who have culturally sensitive needs
21. Who use Makaton
22. Who use signing
23. Who are autistic
	1. In order to reflect the diverse needs of Merton, the service provided must be appropriate to people’s needs, including their disability, race, culture, religion, sexuality, age and gender. The service must also recognise that individuals’ needs can change over time and respond accordingly.
	2. Details of the Individuals communication needs will form part of their referral to the service along with any outcomes that the Individual wishes to achieve.
24. **QUALITY STANDARDS**
	1. **Workforce Development**
		1. The service provider must be run by people who are competent to do so, who recruit and employ Staff who are competent to do the job, who comply with their legal requirements and who operate safe working practices. All service provider organisations must be properly insured and financially sound.
		2. The service provider’s staff will be trained to perform the necessary tasks and complete the required documentation in order to adhere to current and ongoing legislation e.g. legislation relating to safeguarding and mental capacity, and to meet agreed service objectives as set out in the contract specification.
		3. The service provider will obtain any necessary agreement from legal carers or guardians before having any direct contact with any vulnerable person. The service provider will have and carry out an appropriate written policy and set of procedures to safeguard vulnerable people, which will include obtaining appropriate disclosure checks for all employees, volunteers, trustees who will supervise, care for or otherwise have significant direct contact with vulnerable people. Where the service provider is required to amend policies relating to safeguards or protection of vulnerable people they shall do so immediately.
	2. **Adult and Children Safeguarding**
		1. The service provider must have their own safeguarding policy which should be kept updated.
		2. The service provider must act in accordance to the Merton CCG Adult and Children’s Safeguarding Policies and will ensure that they keep up-to-date with any changes to the procedures.
		3. The safeguarding policies details the process of how to report incidents and safeguard vulnerable adults.
		4. The service provider will take all reasonable steps to support and ensure the safety of any vulnerable people they work with.
		5. The service provider should also be aware of and implement procedures around reporting domestic abuse, honour based abuse, forced marriage and other forms of hidden harm.
		6. The following documents will help support service provider to carrying out their safeguarding function:
25. Merton CCG Adult Safeguarding Policy
26. Merton CCG Children Safeguarding Policy
27. The Mental Capacity Act 2005
28. The Care Act 2014
29. Human Rights Act 1998
30. Deprivation of Liberty Safeguards (DoLS) in relation to Supreme Court Ruling of March 2014
	* 1. The service provider should also ensure staff are trained on and act in accordance with safeguarding procedures as detailed above. In addition the service provider must ensure that:
		2. Clients understand what constitutes abuse and know to whom they should report any concerns
		3. Safeguarding of children who may visit the premises is addressed
		4. There are periodic (at least annual) reviews of the effectiveness of safeguarding and protection from abuse policies and procedures and their implementation
		5. Staff induction covers how to recognise and report suspected or actual abuse
		6. There is on-going safeguarding training for staff at all levels which is regularly evaluated and reviewed
		7. DBS (Disclosure and Barring Service) checks for staff and volunteers are carried out prior to commencement of employment and kept up to date
		8. Any staff dismissed are appropriately referred to the Disclosure and Barring service and the policies and procedures clearly set out the process for this
		9. There is a designated, trained and supported safeguarding lead
		10. There is a robust and regularly reviewed whistleblowing policy
	1. **Complaint Procedure**
		1. Merton CCG has a statutory duty to handle complaints about health care as set out in the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.
		2. The service provider is expected to have local complaints procedures for any matter connected with its provision of services commissioned by Merton CCG. The complaint process must be comparable with those operated in the NHS and compliant with the Merton CCG Complaint Policy.
		3. The service provider must have a process by which Individuals, Carers, Merton CCG or Merton Council or any other interested party may make comments, suggestions, complaints and compliments, and a system in place which will ensure that such comments, suggestions, complaints and compliments may be considered fairly and acted upon if appropriate.
		4. The service provider must ensure that the complainant is fully advised of their right to request that the Parliamentary Health Service Ombudsman (PHSO) investigate the handling of their complaint, if they remain dissatisfied. The response to the complainant and details of the investigation must be made available to Merton CCG on request, for the purposes of supporting resolution and for quality assurance purposes.
		5. Individuals and their Carers may approach the Merton CCG or its representatives if they wish to lodge a complaint against the service provider. Merton CCG will investigate complaints in accordance with the Merton CCG’s complaints policy where appropriate. However, it will usually be appropriate for the service provider to undertake the initial investigation and respond to the compliant.
		6. For complaints relating to NHS purchased care provided within the independent sector, the CCG will provide advice to help resolve a complaint. A Lay Conciliator/Mediator may also be provided to support this process where requested. The CCG will also provide advice to any service provider which has concerns about a patient’s use of services or behaviour. The service provider must cooperate in the investigation of any multi-sector complaints (refer to Merton CCG Complaint policy) in which it was involved or any investigation by the CCG when requested by the complainant.
		7. The Merton CCG Complaint Policy will assist the service provider in carrying out their complaint function.
	2. **Information Management and Technology**
		1. The service provider must implement an Information Management and Technology (IM & T) system that is compliant with the underpinning standards, technical specifications and governance requirements in the NHS and other requirements as set out elsewhere within this document.
		2. The Provider must ensure that the IM&T systems and processes comply with
		statutory  obligations  for  the  management  and  operation  of  IM&T  within  the
		NHS, including, but not exclusively:
		3. Common law duty of confidence;
		4. Data Protection Act 1998;
		5. Access to Health Records Act 1990;
		6. Freedom of Information Act 2000;
		7. Computer Misuse Act 1990; and
		8. Health and Social Care Act 2001.
		9. There  is  a  statutory  obligation  to  protect  patient  identifiable  data  against
		potential breach of confidence.
31. **CONTRACT AND PERFORMANCE MANAGEMENT**
	1. **Contract Management**
		1. To facilitate overall communication and joint working, a quarterly contract review meeting will be held between an appropriate officer of the Merton CCG and the service provider to monitor that the service is being delivered in line with specification(s) and to seek resolution of any issues that may occur to improve working practices.
		2. The service provider will provide a quarterly report at least 5 days prior to the contract review meeting.
		3. To facilitate service development the contract review meeting may also include (where possible) commissioners and operational officers from Merton Council or representatives of Merton CCG. These meetings will be used as an opportunity to discuss and negotiate service development and to help the service provider to keep up to date with the requirements of Merton CCG.
		4. The service provider will produce a quarterly summary report on the quality and effectiveness of the service. The report must be submitted to the Merton CCG’s contract manager no later than 15 working days following the last day of that quarter and return the information by month.
		5. Throughout the contract period the service provider is required to provide reports on trends and notable occurrences throughout delivery of the services for further discussion at the quarterly contract review meeting. The format of this data will be mutually agreed between the Merton CCG and the service provider in advance of submission of the quarterly performance report.
	2. **Performance Report**
		1. The service provider will be required to submit quarterly and an annual performance reports to Merton CCG. The report will comprise the following:
32. Service Monitoring Information
33. Key Performance Indicators (KPIs)
34. An Annual Customer Satisfaction Return
	* 1. The format of all reports will be mutually agreed between the Merton CCG and the service provider during the contract implementation process. Merton CCG reserves the right to alter the content of format of the Performance Report upon 1 months’ written notice to the service provider
		2. The reports shall be produced by the service provider in a rolling format, where the past quarters are easily accessible to compare with the current performance
		3. Merton CCG may request that the service provider present the Performance Report or any element thereof at any contract review meeting or other Merton CCG meeting. In such cases the Merton CCG will advise the service provider in advance giving at least 10 working days’ notice of the meeting.
		4. The service provider is advised and hereby acknowledges that feedback will be sought from relevant practitioners such as service users, adult CHC team, PHB Direct Payment Officer and Merton CCG Independent Health Assessor as part of the monitoring process
	1. **Service Monitoring Information**
		1. The reports must contain the following information and must be completed separately for children and adults:
35. The number of enquiries made to the service by:
36. Telephone
37. Digital methods (all internet methods)
38. Other means
39. The number of individuals supported by the service, regardless of how many times each of them uses the service
40. The number of individuals requiring 1:1 support, overall and grouped according to the primary needs identified in referrals for the service.
41. Of the Individuals requiring further support, how many received a 1:1 visit;
42. Of the Individuals requiring 1:1 support, how many were helped directly with HPA recruitment.
43. And of the number provided under (e), how many were assisted with (as a number and as a percentage of the whole in (e)):
44. Understanding their responsibilities as an employer
45. Help to advertise for a HPA
46. Drafting documentation
47. Using the HPA register
48. Interviewing
49. Appointing a HPA
50. All of the above
51. For the HPA Record:
52. Number of HPAs recruited during the quarter;
53. Number of HPAs removed at the end of the quarter ( with reason for removal);
54. Number of HPAs available per care specialism
55. Number of Individuals who directly recruited their HPA.
56. Number of individuals assisted to recruit their HPA
57. Complaints including:
58. Number of complaints – Merton CCG reserves the right to review any complaints made and/or request a random selection for review;
59. Confirmation that the complaint was investigated and completed within the required timescale of the relevant complaint policy; and
60. Conformation of whether the complaint was upheld against the service provider
	* 1. The service provider will include the following information in their quarterly Performance Report:
61. A summary of any safeguarding issues that have occurred in that quarter
62. Whether their Business Continuity Plan was implemented during the quarter, if so, why, and whether it was successful
63. Any service development or innovation that has taken place that quarter
64. Annual statistics regarding ethnicity of individuals using the service
65. One case study per quarter. Case studies should showcasing good practice and how the service provider has responded to issues and developed their service accordingly.
	* 1. At the end of the first quarter of each year of the contract period the provider will provide a copy of their business continuity plan including evidence of testing and outcomes from this process.
	1. **Key Performance Indicators (KPIs)**
		1. The following KPIs and performance measures will be applied to the contract:
66. Those accessing the service digitally have their queries responded to within two working days – 95%
67. Number of customer satisfaction returns completed – 90%
68. Satisfaction with the service received. Satisfaction will be measured by 90% of respondents agreeing that each of the Employer Advice and Guidance statements which apply to them are true – 90%
	1. **The Annual Customer Satisfaction Return**
		1. The service provider will gather feedback from each Individual accessing the service annually. The mechanism for completing this report will be bespoke to the needs of the Individual but may include interviews, surveys, or focus groups amongst others. The mechanisms will be agreed with the Merton CCG in advance of the Commencement Date during the contract implementation process ensuring it is fair, accessible and representative.
		2. The information received through the satisfaction report will focus on the following statements. The service provider will ensure that the following statements relating to the support service are true:
69. In Relation to Advice on Being an Employer:
70. I know how to get advice about being an employer
71. I understood the information I was given about being an employer
72. I could get useful advice about employing somebody when I needed it
73. In Relation to Support to Recruit a Personal Assistant:
	* 1. If I needed to advertise for a HPA, I was happy with how I was helped to do this;
		2. I was able to recruit my HPA quickly;
		3. I could choose where I interviewed my HPA;
		4. If I needed it, I was advised how to interview and choose my HPA;
		5. The people who helped me to find my HPA involved someone who is important to me when choosing my HPA;
		6. The people who helped me find my HPA understood my needs;
		7. The people who helped me find my HPA were good at communicating with me; and
		8. I was able to recruit a HPA that met my needs.
		9. Throughout the contract period, the service provider is required to provide reports on trends and notable occurrences throughout delivery of the services for further discussion at the quarterly contract review meeting. The format of this data will be mutually agreed between Merton CCG and the service provider in advance of submission of the quarterly performance report.
74. **Evidence for Invoice Payment**
	1. Supporting evidence required for invoice paymentwill be agreed in advance of the Commencement Date during the contract implementation process ensuring it is fair, accessible and representative.
75. **Key Documentation**
	1. **Merton CCG PHB Policy**

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1. **Definition of Terms**

**Direct Payments -** payments made to a person who is eligible for a personal health budget and who agrees to receive and use the money to enable them to make their own arrangements to meet their identified needs**.**

**Direct Payments Officer -** The Direct Payments Officer will be responsible for Merton CCG Personal Health Budget Direct Payments and will monitor and ensure that funds are protected by monitoring their usage.

**Direct Payments to a “Suitable Person”** - payments made to an appointed ‘Suitable Person’ (third party) to act on behalf of someone who is eligible for health care support, but who is unable to consent to receiving Direct Payments because they have been assessed as lacking the mental capacity to do so. The role is specified in the Mental Capacity Act 2005.

**Support Plan -** a Support Plan describes how a person will use their personal health budget to meet their needs and achieve agreed health outcomes. It is likely to have a wider scope than a traditional health “care plan”.

**Support Service Organisations -** Support Service Organisations can provide a range of services to support the employment of Personal Assistants, including payroll and ensuring that the requirements of employment legislation are met. They can also provide brokerage support with creating the support plan.

**Support Brokerage –** brokering a support package, including helping people manage their obligations and responsibilities in relation to their budget.

**Personal Health Budget -** an amount of money to support a person’s identified health and well-being needs, planned and agreed between the person and their local NHS team.

**Final Personal Health Budget -** The final budget is an amount of money that is agreed once a support plan has been finalised. This is usually calculated by estimating the costs of the care and support arrangements included in the plan. This is likely to be a more accurate guide to the actual costs of support.The final budget – rather than the indicative personal health budget– is the point at which an approval process takes place.

**Indicative Personal Health Budget -** An indicative budget is an amount of money identified at an early stage in the process to inform care and support planning. It is a prediction of how much money it is likely to cost to arrange the care and support that would be sufficient to meet the assessed health needs and achieve the outcomes in the care plan. The indicative budget is a guide – it should not be used as a limit, a fixed allocation or an entitlement

**Third Party and/or Managed Account with a Third Party –** a support planning organisation that manages the personal health budget money by holding it on the patient’s behalf, and buys or provides the goods and services set out in the care and support plan.