

Question 1.4.2 - Service Delivery 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 IPES Specification.

As a minimum, your response should;

- Provide an example of a participant journey for an IPES participant, recognising different barriers to work and support needs, as outlined in the Specification. Detail how you will provide a structured programme of interventions for each participant from Warm Handover and referral until completion of the participant's IPES provision and the rationale for your approach.
- Detail how you will identify suitable organisations to act as Signposting Organisations and encourage referrals to IPES from these.
- Explain how you will engage participants from the Warm Handover and referral to start on IPES provision to minimise the attrition rate. Outline how you will ensure the Warm Handover positively promotes the IPES provision to the participant, including why you think these approaches will be effective.
- Explain how a Key Worker will be assigned to a participant and maintained throughout a participant's journey and how you will ensure frequent and consistent contact by the Key Worker to meet the support needs of the participant.
- Explain how a Key Worker will undertake regular reviews and ensure measurable progression of each participant in the following areas:
 - 1) Managing their health condition or disability;
 - 2) General self-efficacy;
 - 3) Wellbeing;
 - 4) Job search self-efficacy;
 - 5) Job seeking activity;
 - 6) Experience in a work environment.
- Explain how you will ensure participants remain actively engaged with your IPES provision to maximise outcomes and how you intend to re-engage participants who have disengaged from the IPES provision.

- Explain how you will identify suitable opportunities to support participants to gain the requisite experience of a work environment and how you will ensure this meets participants' individual needs and aspirations.
- Describe the In-Work Support you will provide to participants, including support for self-employed participants.
- Provide details on how you will support the Social Value agenda and how you will ensure you have a consistent approach across the whole CPA.
- Provide details on how you will support IPES to achieve a minimum of 40% direct or indirect spend with SMEs

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. A customer journey diagram may be attached as an annex in addition to the 5 sides of A4; this additional annex must be a maximum of **1** side of A4 and attached as **Appendix 6** on Bravo.

Question 1.4.2 - Service Delivery Proposal

Fedcap Employment was founded in 1935 by 3 disabled veterans to support people with disabilities and other barriers into work. We are experts in disability employment: we successfully led the campaign for the introduction of the Americans with Disabilities Act 1990 and now provide support to 300,000+ disabled/disadvantaged people world-wide each year. In February 2019, we formed our UK business by novating the contracts and staff from 6 DWP ESF programmes. Links to Work (LtW), delivered by former company Working Links (WL). The migration of WL's workforce also brings extensive historic experience/knowledge of the UK employability market, through previous delivery of multiple DWP contracts including e.g. 5 Work Choice (WC) contracts and 3 Work Programme (WP) contracts. Our UK team has used their experience, overlaid with best practice and evidence from Fedcap's global delivery of 180+ disability and employment contracts to develop our IPES proposals.

Participant Journey: All participants will progress through the following core journey, with each stage/element tailored to meet individual barriers/needs.

- 1) Engage & warm handover:** 3-way telephone call with the participant, their Jobcentre Plus (JCP) Work Coach (WC) & our IPES Engagement Co-ordinator (EC) to understand initial needs/barriers to engagement, reassure participants of support available & arrange an initial meeting with an appropriate KW. For participants with e.g. hearing impairment we will provide BSL interpreter skype call & access to our BSL YouTube welcome content. Our 100% outreach delivery model ensures initial meetings are held at a place chosen by the participant – increasing engagement.
- (2) Assessment & planning:** Following eligibility check, our KW will lead the participant through REDACTED (structured questions across 12 employment & health themes), a vocational profiling exercise & our clinical assessment (used by NHS) Work & Social Adjustment Scale (WSAS) to determine impact of conditions on home, social, work situations. REDACTED typically takes 1 hour to complete; however, it can be delivered over multiple, less intense sessions to cater for different learning styles/disabilities e.g. individuals with limited concentration. The KW will complete additional assessments for those with more complex needs, e.g. BKSb to assess skills levels, GAD-7 to identify depression/anxiety & will engage with wider support networks, e.g. GPs, family members (with participant permission) to help inform journey planning. The outputs of assessment inform an individual action plan (AP) with SMART goals tailored around health, disability & employment needs, agreed with/signed by the participant.
- 3) Personalised support/progression:** delivered at a pace appropriate to each participant & including, e.g.: 1:1 coaching/mentoring by KW; specialist condition management; sensory, neurodiversity & substance misuse support; triage meetings with/referral to specialist support (using our REDACTED interventions catalogue, which links directly to REDACTED); online support (for those who are able/wish to access it) via My Digital Passport accounts (with access to assessments, support services, online courses & mental health support); engaging support networks (e.g. peers, family, social care providers); employability training (e.g. CV building, managing conditions at work). Delivery will be mainly 1:1 (except where delivered via specialist partners/services) & participants will have at least 5 hours KW support per month. Delivery methods will be tailored to individual needs, e.g. attending appointments with specialist services, breaking interventions into bite-sized sessions, arranging appointments in quieter times/outside of travel rush hours; Progress will be captured in APs, reviewed/updated every four weeks. JCP WCs will be updated via Case Conferencing.
- 4) Journey to employment:** Using participant's vocational profile, KWs will work with our Occupational Inclusion Specialists (OISs) to identify suitable work experience and/or employment. OISs will specifically target employers suited to individual job goals & needs & will work with employers to tailor recruitment & employment processes to overcome individual barriers. E.g. on-the-job assessments for participants with autism.
- 5) In Work Support (IWS):** participants will continue to receive intensive IWS from their KW (5 hours per month, gradually reducing by 10% each month thereafter). This will include development/delivery of an Employer Support Plan (ESP) in partnership with participant & employer. IWS will be tailored to individual needs, e.g. through

multi-channel delivery (digital, face-to-face, telephone), flexible contact hours to support participants working shifts, access to online community mental health in-work support (Big White Wall); **6) Warm hand back:** following the final AP review, KWs will conduct a warm hand back with the participant & their JCP WC, providing an Exit Activity Plan (EAP) & IPES Progress Report. Additionally, for those in work, KWs will meet their employer to provide a warm handover using an updated ESP, detailing ongoing support requirements & key contacts able to support job sustainability. **Identifying Signposting Organisations (SO):** Generating sufficient starts is a key risk to successful IPES delivery; we have built a robust, multi-channel (e.g. face-face, digital, leaflets/posters, local media) strategy to identify/engage participants directly & through SOs. Fedcap has a proven track record of engaging with referral agencies & is already engaged with SOs in CPA4 & has mapped these relationships into our Stakeholder Plan, built around local geographies / specialisms. E.g. Our delivery team is already engaged with 110+ SOs in CPA4, e.g. JCP, REDACTED. Our CPCs will own/build on the Stakeholder Plan to ensure it is focused/relevant from day 1 through life of contract. CPCs will be assigned to a geographical 'cluster' (defined sub-regions based on Local Authority (LA) boundaries & anticipated IPES flows). They will work peripatetically in their cluster to build relationships with organisations already engaged with individuals eligible/suitable for IPES, encouraging them to make referrals & use their influence to encourage sign-up. They will identify suitable SOs through e.g. local contacts, desk research, attendance at events/forums, word of mouth recommendations from stakeholder / disability experts, & will target e.g. public health commissioned services, REDACTED, LAs, education/training providers, specialist providers e.g. REDACTED Community Mental Health Teams, disability VCSE organisations. To encourage referrals, CPCs will maintain regular engagement via e.g. our LtW Engagement Teams in Swindon & Dorset attended all of the referring JCP's on a weekly basis promoting our services and answering any questions the advisors had; by doing this and building those excellent JCP relationships we received an additional 10 referrals a week (2018); co-locating/floor walking at community hubs/SO premises; providing SOs with promotional materials such as leaflets/posters to help promote/explain the service; share good news stories & job entry rates to promote successes, conduct triage appointments/case conferencing. We understand some SOs, e.g. disability VCSEs, may not have signposted clients onto employment support programmes previously; CPCs will work to address concerns & provide reassurances of the level of support available/positive benefits of work. This will include promoting Disability Confident (DC) agenda, Access to Work & Fedcap's integrated health offer, with robust governance arrangements (reassuring organisations we have necessary support tools/process for their clients). We will also build on our existing excellent relationship with JCP (built on WL's legacy of 19 years delivering in CPA4 geographies) recognising their critical role in delivering IPES. CPCs/KWs will have a strong presence in JCP offices and we will encourage open/transparent communication by attending weekly JCP manager meetings and co-locating where possible. CPCs will be supported by: 1) our Performance Managers (PMs), who will engage SOs at senior level to inform them of IPES & how it complements their services; and 2) our Digital Engagement Co-ordinator who will deliver a targeted digital engagement strategy, e.g. engaging SOs via LinkedIn, Facebook & encouraging SOs to include IPES in their own digital marketing. Our digital marketing strategy helped improve participant online registrations on LtW by REDACTED website traffic increased by REDACTED & Facebook/Twitter followers grew by REDACTED & REDACTED respectively. We will gain approval for each SO from DWP/JCP in line with IPES SO process. **Ending participants from warm handover:** We share excellent working relationships with JCP and have significant experience of facilitating warm handovers through our LtW delivery. We will provide JCP with a freephone number to make referrals directly to our EC & request a brief pen picture on each referred participant to inform the warm handover meeting. During the warm handover (3-way meeting between our EC, the potential participant and their JCP WC

conducted via telephone), our EC will take the time to get to know the participant, put them at ease, answer questions and provide information about the programme and what to expect. Our EC will positively promote IPES through e.g. use of past participant success stories, particularly those with similar barriers; detailing the level and type of support available, e.g. access to trained health professionals who really understand participant barriers; and the benefits of work, including personal, social and economic. ECs will elicit information on participants' disability, barriers to work, aspirations and skills and address any concerns or issues. Our aim will be to ensure every participant feels understood, supported and well-informed from the first contact. We will work with JCP to ensure accessibility, e.g. use of resources such as BSL interpreters, and follow up information about IPES will be provided in a variety of formats, e.g. braille, large font, different languages, to ensure understanding and inclusion. Where possible & with participant permission, we will work with the JCP WC to involve key influencers/supporters in the warm handover, e.g. parent, carer, social worker, to answer questions/provide reassurances of the level of support available. At the end of the warm handover meeting, our EC will provide details of the participant's KW, ascertain their preferred method of contact and agree a time, date and location for the first face to face meeting as soon as possible to minimise drop out (within maximum of 15 days). Participants' will have choice of when/where this is held ensuring they are as comfortable as possible. We will also provide them with the opportunity to invite a support worker or family member to the meeting to increase likelihood of attendance and provide reassurance. Following receipt of PraP referral, our EC will prompt the participant's assigned KW to initiate contact (using preferred method of contact) to introduce themselves, reconfirm the appointment time/location, explain the purpose/content of the first session and start to build a rapport. KWs will continue to maintain contact until the first session, including sending a text appointment reminder on the day. To ensure our process remains effective, we will constantly measure our referral-start ratio and will work to maintain a benchmark of at least **REDACTED**. This approach is based on our LtW referral process, where we are achieving an **REDACTED** referral to start rate. **Assigning KWs:** Our EC will allocate KWs to participants during the warm handover meeting. This will be based on geographical location, availability and, where possible, specialist skill set, e.g. mental health specialist, bilingual in relevant language. To facilitate this, our KWs will possess multidisciplinary expertise across employment, disability & health. This will include specialists in e.g. mental health, physical health, sensory, learning disability, fully qualified and registered with the appropriate professional body, as well as employment specialists with significant experience of supporting people with health conditions/disabilities into work. To ensure frequent and consistent contact, we will: • resource our team sufficiently, with 11 KWs working with caseloads of maximum 33, enabling them to offer at least 5 hour of support (incl weekly face-to-face, monthly progress reviews) per participant per month through life of contract; • arrange KWs into cluster-based teams, with a range of skill-sets/specialisms shared via peer-to-peer support/advice, e.g. professional mentoring. This will ensure every participant has access to the same level of expert employment & health related support, regardless of barriers / geographical location; • deliver a 100% outreach model, taking services to participants, to encourage engagement/frequency of contact. Cluster teams will be built around travel areas to ensure full geographical coverage. • performance managed against frequency / suitability of contact. KWs will be required to update our Management Information (MI) system, PICS, with details of each contact, enabling our Performance Manager to monitor each participant's last contact date via weekly reports, & through caseload review meetings, feedback & caseload progression data. • deliver consistent training to all staff via Fedcap Academy, including disability & work; sensory impairment; mental/physical health awareness; welfare benefits; learning disabilities/difficulties; IPES specific processes. We have ring-fenced **REDACTED** of our budget for CPA4 IPES for staff training & development. This health expertise will help encourage participants to speak opening about support needs & supports

meaningful conversations with health specialist providers. The exact frequency/intensity of support will be led by participant need. Our decision to deliver 100% of the end-to-end service enables us to maintain/monitor consistency of KW support across entire CPA & our investment in training & development ensures all KWs can effectively meet the wide range of participant needs. This approach builds on learning from our existing integrated health model which uses separate KWs & Health Advisors working in tandem & has supported 500+ participants with health-related barriers into work since 2016. **Ensuring Measurable progression:** Assessment runs across the length of an individual's journey; measuring progress, highlighting what is working, and capturing evolving job goals/aspirations as confidence grows. KWs will review APs with participants at face to face meetings every 4 weeks. This will include reviewing progress of the above metrics, recognising progress/achievements, discussing issues/new barriers, agreeing changes to AP and setting targets for achievement/progression by next review. Every 3 months, KWs will undertake a more intensive assessment to formally measure progression in e.g.: *Managing health condition / disability* – using validated clinical tools, e.g. PHQ-9 and GAD-7; *general self-efficacy* – via the personal development themed **REDACTED** questionnaire; *Wellbeing* – WSAS (Work and Social Adjustment Scale (WSAS), used by the NHS, to measure impact of conditions in work, home, social contexts. (on current programmes, WSAS has identified **REDACTED** of participants have improved scores, with **REDACTED** moving down an entire health band, e.g. severe to moderate); *Job search self-efficacy* & Job seeking activity – via **REDACTED** employment theme & evidence of job search/applications *experience in a work environment* – via starts/completion of 16 hours work experience and/or volunteering completed, as recorded in the AP. The results of all re-assessments are constructed into a meaningful visual snapshot of needs, with a 'spider-diagram' that plots assessment results across the 12 areas identified as key drivers of self-efficacy and clearly shows the progress an individual is making towards their job goals. This will be recorded on APs, uploaded to PICS. We will also record job search progress on Find a Job where appropriate. PICS will remind KWs to arrange a date/time for the next AP review/assessment; appointments will be available at suitable locations for the participant. KWs will confirm the next review date during weekly contact with participants. KWs will have individual KPIs to ensure min. monthly AP reviews/quarterly assessments are scheduled, completed & recorded on PICS/customer service standards are met and to deliver participant progression/outcomes. Participant evaluations will be used to help ensure that interventions and work experiences are meaningful. **Maintaining engagement:** To ensure customers do not feel 'part of a process', we have designed an engaging service, with rich and inspiring content, that treats each customer with fairness, dignity and respect and **maximises choice and control at every stage of the journey**. This will begin with vocational profiling to ensure our service is shaped around their personal job goals. KWs will be equipped with tools/techniques to maintain engagement, e.g. motivational interviewing, influencing attitudes, promoting empowerment & personal choice. They will build trusted relationships that encourage participants to raise any concerns/questions to ensure satisfaction and rapid response to any issues / complaints to address issues quickly, before they disengage. We will celebrate individual achievements, no matter how small they seem, and share good news stories about other participant's successes (with permission) to maintain motivation and will encourage sign up to our peer to peer support system, an already established part of our wellbeing service. KWs will engage participants networks/key influencers to encourage them to support the journey towards/into work, e.g. involving them in face to face sessions (with participant permission). E.g. On our LtW programme in Dorset, we invited a participant's Drug and Alcohol practitioner to a multi-agency meeting with our Health Advisor and the participant to facilitate joined up working & support engagement across both services. Our digital offer further supports engagement, providing 24/7 access through participant's Digital Passport – an online portal with access to advice, training, digital CVs, assessment tools and online mental health support. Should a

participant disengage, our KW will contact them within 24 hours to understand the reasons for disengagement. This will include understanding the participant's current situation/concerns, considering possible solutions and asking the participant what they feel an appropriate solution may be. If we are unable to reach the participant, we will attempt to contact them daily over 5 working days, proportionate to their AP. In parallel, we will work with JCP, other agencies, and members of the individual's support network to enlist support to understand the reasons for disengagement, e.g. admittance to hospital, and reignite engagement. All information will be shared with the JCP WC to keep them updated with the progression of the participant.

Identifying suitable opportunities. We will ensure 100% of IPES participants are offered 16 hours of meaningful work experience in a real work environment. This will be driven by the vocational profiling exercise to determine individual job goals & needs. Using this information, OISs will engage employers to source work experience based on what the participant wants to do. They will proactively target suitable employers, encouraging them to use work experience as an alternative recruitment tool to fill vacancies or an opportunity to support CSR/DC agendas by supporting disabled people to build their skills and confidence in the work place. Placement sourcing/matching will take account of individual needs, e.g. caring commitments (flexible hours), access to transport (proximity to home), the local labour market (linking to realistic job outcome), disabilities/support requirements (e.g. workplace adjustments). OISs will use their relationships with employers to tailor opportunities further as required e.g. enabling participants to complete it in bite-size chunks spread out over four weeks, longer if needed; providing in work 'buddy' support; light sensitivity adjustments or an effective seating plan for those with autism. During work experience, the KW will maintain contact with the participant, evaluate work experience in detail and record it on the AP. Additionally; the OIS will obtain feedback from the employer to help inform future placements.

In-work support: KWs continue to provide support to participants through the transition into work and for a minimum of 182 days. This will include continuing to complete quarterly assessments to monitor progression against health & wellbeing metrics. Contact levels will reflect the pre-work stage and be participant led. This will be supported by our OISs, who will use their relationships with employers to involve them in providing IWS. Pre-screening is critical to this, enabling us to set employer expectations & agree/plan adjustments before the participant has even started work. All participants and employers will receive an Employer Support Plan (ESP), developed collaboratively between the participant, the employer, our KW and OIS when a participant is matched with an employer. It will detail the support to be provided by both Fedcap and the employer to ensure the participant sustains & is supported in work. This could include: managing work-life balance, travel training; money management support/financial support for the initial weeks; provision of clothing; tailoring induction/training pathways, recommending reasonable workplace adjustments/supporting access to work applications, mental health awareness, sleep/routine, resilience in the workplace, providing training for managers on how to support individuals with disabilities/learning difficulties, amending shift patterns/working hours to suit need; provision of an KW as a work buddy/coach through the settling in period. For self-employed participants, KWs will signpost our participant to a local Business Advisor and work collaboratively with them to support the start-up, whilst continuing to maintain support to address their wider barriers. For all participants, KWs will support them to build/engage their support network, including e.g. their employer, family, peers, professionals, to help sustain work/progression post IPES provision.

Supporting the Social Value Agenda. Fedcap is a leading social interventions provider; all our services improve the lives of the individuals we support, benefiting their communities and the employers they work for. During implementation we will finalise our IPES social value Action Plan, with defined targets to ensure our provision supports the social value agenda. These will include, for example: (1) **increasing employment opportunities for local people/more disadvantaged people** – we recruit from within the communities we serve.

Our resourcing strategies will ensure new roles are taken by local residents and/or those from disadvantaged backgrounds with the skills and expertise to deliver a quality service; **(2) improving health and wellbeing** – we will deliver support/monthly activities to support the health & wellbeing of IPES staff, e.g. mindfulness programmes, employee assistance programme, lifestyle & wellbeing events. This will result in healthier work environments, decreased absenteeism/staff turnover. The health and wellbeing support offer to participants will reduce health inequalities and support healthier/happier communities with lower health risks/levels of long-term conditions. **(3) Increased community integration** – delivered through our **REDACTED** approach, bringing local provision together to co-deliver services and connecting our IPES participants with their communities through our Rainbow Days (2 days per year where staff & customers are encouraged to undertake a local community project). **(4) Protecting the environment** – through our sustainability strategy/action plan, we work to minimise waste, water usage, energy consumption. We promote green travel to staff/participants and encourage volunteering activities that help create more attractive environments/nicer places to live. We will assign social value champions in each cluster responsible for implementing/reporting on progress against our action plan, this will be overseen by our Delivery Manager for the North to ensure a consistent approach. **Achieving a REDACTED direct/indirect spend with SMEs.** Our national supply chain contracts through our LtW contracts evidences our ability to promote the target of **REDACTED** direct/indirect spend with SME's as these contracts consist of over **REDACTED** SME's and 3rd sector suppliers. We will also support this target through virtue of being an SME and third sector organisation ourselves and through our policies which will ensure that we use SME suppliers.

Question 1.4.4 - Delivering a Personalised Service

Explain how you will identify and provide support for the specific needs and barriers to work of participants including, but not limited to, those detailed at Section 2, the Service Requirement, of the Specification.

As a minimum, your response should;

- Provide details of how you will identify the individual strengths and needs of each participant through the initial needs assessment and how this information will be used to build a structured, sequenced and personalised action plan with goals which are specific, realistic, and achievable.
- Outline how you will identify and understand the impact of barriers to work for each IPES participant and how these will be addressed throughout the participant's time on IPES provision.
- Explain how you will ensure all participants receive on-going, personalised support throughout their time on IPES provision, providing a positive and meaningful experience for each participant.
- Outline how you will assess the on-going relevance and effectiveness of a participant's Action Plan and how it will be updated over their time on IPES provision.
- Outline how you propose to deliver Case Conferencing, as detailed at paragraphs 2.41 – 2.45 of the IPES specification, to help ensure the participant's needs are being addressed through the Action Plan.
- Please specify no more than two quantitative measures to demonstrate that you will deliver Case Conferences as intended, which will become Customer Service Standards (CSSs).
- Explain how you will tailor experience in a work environment to meet the needs of each participant, taking into account their abilities and aspirations.
- Describe how you will build and utilise a sustainable support network for each participant, including addressing any issues arising from negative support networks, and ensuring you engage key stakeholders.

- Explain how you will manage participant exit from the IPES provision including the warm hand-back and describe the process involved.

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.

Question 1.4.4- Delivering a Personalised Service

Our design for IPES is based on Fedcap's rich 80+ year history of supporting disabled individuals to achieve greater societal inclusion and entry into the labour market. Our placed-based person centric proposal is grounded in the belief that one size does not fit all & recognises that every participant is different and will present a different set of complex needs/barriers to work. This could include e.g. a) barriers linked to their health condition, e.g. poor condition management; b) wider issues such as housing needs, substance misuse, intra-family violence; and c) societal barriers, e.g. beliefs, perceptions and prejudices from e.g. themselves, employers, family, health professionals of disabled people's ability, desire or competence to work, and/or workplaces that are not compatible with disabilities. Our multidisciplinary workforce comprises qualified health & employability professionals all equipped with a wide range of tools/techniques to successfully identify/address individual needs & provide an individually tailored service. E.g. applying a work-first approach adopting the principles of Individual Placement and Support (IPS) for individuals with severe mental health needs, and/or the Supported Employment model which is embedded into our delivery (through our relationship with REDACTED) to empower participants to take real ownership of their journey and supports the notion that anyone can be employed if they want to work & enough support is provided. **Identifying individual strengths and needs:** Assessment begins at the first contact. During the warm handover meeting, our Engagement Coordinator (EC) will complete a high-level assessment with the participant and their Jobcentre Plus (JCP) Work Coach (WC) to understand needs/barriers to engagement, e.g. health condition, low confidence/anxiety issues, caring responsibilities, as well as any job preferences/aspirations and work completed with their WC to date. Using this information, the EC will allocate a KW and arrange an initial meeting at an accessible location/time for the participant, e.g. library close to home. KWs are central to the assessment and planning process. They will invest time in getting to know and understand the participant, developing a trusted relationship where the participant feels comfortable to discuss their personal situation, barriers and aspirations. At the Initial Meeting, KWs will complete our strengths-based assessment REDACTED developed with occupational psychologists and social inclusion researchers from REDACTED. REDACTED assesses self-perception across 12 work and social mobility themes: **(1) Stability; (2) Self-Management; (3) Managing Health Conditions; (4) Coping with Lifestyle Challenges; (5) Solving Problems; (6) Working Together and Communicating; (7) Adaptability; (8) Personal Development; (9) Basic and Vocational Skills; (10) Job Search; (11) Staying in Work; (12) Progressing in Work.** It takes c1 hour to complete, but can be completed over several sessions, e.g. for participants with low concentration levels, severe anxiety and/or learning disabilities. Alongside REDACTED the initial assessment will include the evidence-based Work & Social Adjustment Scale (WSAS), used by the NHS, which measures the impact of conditions in work, home and social contexts and provides a benchmark against which we can measure participant progression, e.g. participant wellbeing. Where REDACTED and/or the WSAS identify a need for more in-depth assessment, KWs have access to several additional clinical tools for managing health conditions/disabilities and assessing wellbeing, e.g. PHQ-9 and GAD-7 to identify depression and anxiety needs. KWs will also contact (with permission) other agencies engaged with the participants, e.g. health/care workers, GP, to build a deeper understanding of needs and will complete a vocational profiling exercise to identify participant's career aspirations, work-related capabilities and transferrable skills. The output of our assessment process is an individual Action Plan (AP), agreed between the participant and KW, detailing the

steps/action the participant must take in order to progress towards/into work. APs will include SMART goals tailored around health, disability, employment and social needs and identify target dates for key milestones/reassessments. Each step will be agreed with the participation, so they can fully understand their journey, the next steps and see their progress. It will include a 'spider-diagram' plotting the level of need against each of our 12 REDACTED theme, providing a visual representation against which we can benchmark progress. We use this assessment process on our 6 DWP ESF Links to Work (LtW) contracts, which have assessed the needs of 10,000+ participants and are delivering up to REDACTED of sustained job outcome rate. REDACTED of participants on these programmes state that they feel their KW understands their needs well enough to support them (participant survey 2018). Initial assessment and action planning will be completed within 20 days of starting on the programme, however we recognise this will be an ongoing process as the KW relationship strengthens.

Understanding the impact & addressing barriers to work: Our IPES provision is designed to: **1)** identify and address individual barriers to work via effective coping strategies, access to specialist support, and; **2)** to change societal barriers related to the recruitment of disabled people through e.g. our work with employers, participant support networks and widespread Disability Confident promotional campaigns. Our experience informs us that barriers to work can be wide ranging e.g. lack of employment history, low skills levels, unmanaged health condition/disability, low confidence/motivation, complex family dynamic substance misuse issues, poor/unstable housing or money management/debt issues, history of offending, lack of transport in rural areas, poor employer and wider society perceptions. For example, in the South of England, the main conditions reported by claimants are mental ill health (50%) and musculoskeletal disabilities (12%) (NOMIS, 2017). Prevalence of depression in working age adults diagnosed in the South West of England is at 21% compared to the South East at 14% reflecting the vast differences between the regions (House of Commons Briefing Paper April 2018 Mental health statistics for England: prevalence, services and funding). Using REDACTED and their own motivational interviewing skills, our KWs will draw out these barriers and prioritise them within the individual AP plan. This will inform effective sequencing of support throughout the participant journey, including:

health interventions: e.g. 1:1 condition/pain management, anxiety management, sleep techniques, diabetes awareness. Referrals to partner services such as REDACTED for online mental health, REDACTED own branch in each county), REDACTED – substance misuse throughout the South West (Cornwall, Devon, Dorset and more); REDACTED Drug and Alcohol support throughout Swindon and Wiltshire; **Integrated support:** including joint case working with agencies and community providers and referral to complementary provision such as Job Skiller - CSCS and Fork lift and Tempest Training, Based in Brighton but can be used across CPA4;

Targeted employability interventions & Vocational skills development: selected from a range of available, 1-to-1, small group, online or self-led activity, including REDACTED for confidence, assertiveness, wellbeing groups; (REDACTED for work experience, REDACTED for functional skills 121 and online, REDACTED volunteering placements to help manage nature reserves and/or social experience activities, e.g. foraging workshops organised walks, digital skills/digital CV development for participants with very low digital literacy levels via the REDACTED Our approach is underpinned by our REDACTED Tool, a catalogue of locally available/online interventions maintained by our Community Provisions Coordinator (CPC), which directly links to REDACTED to provide KWs with recommendations of available interventions (Fedcap internal, spot purchase and signposting) in

line with a participant's assessment/AP. KWs will work with the participant to confirm the most appropriate interventions to encourage ownership/agency over their journey. **Ongoing personalised service:** 100% of participants will be assigned a dedicated KW, responsible for delivering on-going, personalised support throughout their entire IPES journey. KWs will help participants navigate through personalised package of interventions and services and at the same time provide support, motivation and confidence building through their 1:1 contact. This will include accessing partner/specialist services, attending appointments with them if required to ensure they get the most out of the intervention. Importantly, we will ensure that each participant feels in control and choice every step of the way. Our KWs will be flexible with meetings and offer appointments around the participant's circumstances and needs, e.g. group sessions delivered 10am-2pm to accommodate school pick up times for parents, shorter sessions for participants who have difficulty concentrating. KWs will be supported by our Occupational Inclusion Specialists (OIS), vocational health specialists with a background in working with employers, to prepare participants for appropriate jobs/sectors. Throughout the journey, our participants will be encouraged to build support networks and access e-learning courses (where required). When the participant is in work, we will formulate an Employer Support Plan (ESP) that is unique to them, developed with their employer to build sustainable In Work Support (IWS). During the in-work phase, the KW will maintain the same contact levels with the participant as in the pre-work phase for the first month, and then slowly reduce by **REDACTED** each month until they exit the programme. The participant will also have access to the full range of specialist interventions/support that may be required throughout their journey. Our OISs will engage with employers of all sizes, educating/supporting them to understand the benefits of recruiting participants with disabilities/health needs. OISs will also work with employers to help identify reasonable adjustments and support them to become more inclusive for people with disabilities and complex needs. Further personalisation is offered via our digital solution, for those who are able/wish to access it, which enables participants to create an individual 'Digital Passport'. This provides access to online support services (tailored to needs), captures achievements, e.g. online certificates, and includes a digital CV. For those that can't or have difficulty accessing digital platforms we will provide a wide range of support including the Good things foundation (29% digitally excluded). **Relevance/Effectiveness of Action Plans (APs):** Reviewing progress is built into every participant's journey. Following the initial AP, constructed within 20 days of start date, every participant will have a review every four weeks with their KW, where the AP is discussed and updated as required. These reviews enable us to assess progress made against activities/timescales in the AP. They allow for rapid course-correction if participants are not progressing in line with expectations. They support short-term, 'bite-sized' goals which are more likely to be realistic, achievable and time bound, especially for customers with learning difficulties or mental health issues. They allow progress to be recognised and achievements to be regularly acknowledged, with recognition for key milestones and a visual 'spider-graph' view of **REDACTED** results that clearly shows the progress an individual is making as they build strengths towards their job goals. Deep reviews with full reassessment will be conducted with all participants every 3-4 months (or following any significant change in circumstances, such as becoming homeless or gaining employment), with a full re-assessment and recalibration of the AP to ensure it continues to be fit for purpose e.g. identifying a customer who is completing all agreed actions but not actually progressing towards work. This will include re-assessment using

REDACTED and the WSAS as a minimum, which will allow us to plot progress against the critical success measures outlined in the specification, e.g. improvements in wellbeing, confidence in managing health condition, self-efficacy in job-search. APs will be updated with the participants using the outcomes of the reassessment and uploaded to PICS (our CRM system) as evidence of progression. As well as accurately measuring distance travelled for every IPES participant, **REDACTED** enables us to pull together trends and requirements at a local/regional/CPA caseload level, measuring the impact / effectiveness of our services across the CPA. For example, on our Links to Work (LtW) contract, where we have a similar integrated health model, there was an average 6-point improvement in WSAS scores for participants citing mental health as a primary concern, with many moving from the category 'Moderately Severe Functional Impairment' to 'Mild Functional Impairment' scores. Additionally, we will complete routine internal customer evaluations focusing on the effectiveness and usefulness of our services e.g. following a recent participant evaluation on our LtW contracts demonstrate that **REDACTED** of participants agreed that attending Health & Wellbeing sessions improved knowledge of managing a condition, and; **REDACTED** agreed that attending meant they felt closer to returning to work.

Delivering Case Conferences: KWs will be alerted, via PICS, to schedule case conferencing (CC) with participant's JCP WC at 3 key intervals in the participants journey, including: **(1)** following development of the AP (within 4 weeks of them starting the programme); **(2)** at month 7 to review progress achieved, and; **(3)** at between month 14 and IPES programme completion (warm hand back). Meetings will be organised by the KW who will liaise with both the participant and the JCP WC to find a suitable time and date. Where possible and agreed with the participant/Jobcentre KWs will invite positive influencers, e.g. family members, social workers, into the final case conferencing (warm hand back) to align services and strengthen the involvement of the participants support network in their ongoing journey in/into work. This will help members of the support network to continue to help the participant once they finish IPES provision. Meetings will be conducted face to face at the jobcentre where possible; however, we will also offer the facility of video and telephone conference in exceptional circumstances. We will engage JCP service leaders during implementation to agree the process for CC. During CC 1 and 2 KWs will support the participant to walk the WC through their AP, discussing progress against key milestones and planned next steps. APs will be shared via secure email prior to the meeting (with participant permission/in line with GDPR). Where secure email is not available, KWs will take a hard copy with them to the meeting. They will seek to obtain WC input on interventions, relevant local labour market intelligence and alignment with other provision. The final CC will focus on facilitating a warm hand back to JCP and discussing the IPES Progress Report to ensure ongoing support is meaningful and builds on the progress made through IPES.

Quantitative measures for Case Conferences: We will commit to the following Customer Service Standard: **(1)** All outcomes of CC will be recorded on the updated AP, uploaded to PICS. **(2)** For **REDACTED** of participants who attend the warm hand back (3rd CC), we will invite a support network representative at the exit meeting e.g. a housing support worker, charity key worker or a social prescribing navigator.

Tailoring work experience: We will offer **REDACTED** of participants 16 hours of work experience in a meaningful work environment, tailored to meet their needs. To ensure work experience relates to participant abilities and aspirations, all participants will complete a vocational profile with their KW and shared with our OIS to inform placement sourcing. Working with the KW to understand individual needs, OISs will match participants to a suitable work experience opportunity, either from our

bank of regular placements or through direct engagement with specific employers. This will take account of e.g. caring commitments (flexible hours), access to transport (proximity to home), the local labour market (linking to realistic job outcome). OISs will use their relationships with employers providing work placements to tailor opportunities to suit individual needs. E.g. enabling them to complete it in bite-size chunks spread out over four weeks, longer if needed; providing in work 'buddy' support; light sensitivity adjustments or an effective seating plan for those with autism. During work experience, the KW will maintain contact with the participant, evaluate work experience in detail and record it on the AP. Additionally; the OIS will obtain feedback from the employer to help inform future placements. **Sustainable support networks:** Building a sustainable support network is the foundation for self-efficacy as it promotes social inclusion (Loneliness Strategy 2018). KWs will use a place-based, person centred approach to build a network of support around each participant able to continue to support them beyond their time on programme. This will include: **a)** engaging key influencers in the participant's life, e.g. via 3-way calls, invitations to review meetings), family members, friends/positive peer relationships, health workers, social care services, GPs, in the participants journey to demonstrate how they can support sustained progression towards/into work; **b)** strengthening participants community connections and helping grow their networks via access to social activities (using our social experience fund), community groups/events, sports/creative/cultural initiatives, local charities, peer mentoring/befriending services. E.g. on LtW in Swindon, we referred our participant to The Deaf Community, to meet up once a month with people in similar situations, resulting in a sustained friendship with a deaf couple who helped him improve his social network. **c)** engaging external services using our **REDACTED** catalogue to broker access to ongoing specialist support e.g. **REDACTED**. KWs will support the participant to access such services and build relationships, e.g. attending meetings with them until they feel confident to go alone. **d)** supporting employers to provide ongoing support for those in work, e.g. through upskilling/coaching and provision of a robust Employer Support Plan (ESP) detailing the participant's individual support needs, key contact details for others in their support network. Where we identify networks may be a negative influence, e.g. family members/health professionals expressing concerns about participants ability to cope with work, KWs will proactively engage them to explain the level of support provided through IPES, including in-work support, the variety of work opportunities available and the positive benefit work can have on an individual. Where we identify issues with and/or detrimental friendship groups/negative relationships, KWs will engage participants with relationship counselling services to help them build resilience/coping strategies and/or encourage the participant to form new more positive relationships through e.g. identifying/attending new social groups or peer mentoring/befriending services. KWs will be trained to recognise and raise safeguarding concerns observed through negative networks, contacting the relevant authority if appropriate, e.g. Local Authority Safeguarding teams. **Managing participants exit:** KWs regularly discuss programme exit with the participant as their journey progresses in order to prepare them for this milestone. As the participant approaches the end of programme, the KW will produce their Exit Activity Plan (EAP). This will capture how the participants employer will continue to support them in their job (if they are in work) and/or the recommended steps to continue their progression, key contacts for ongoing support (including Access to Work)and how to work with their support network/JCP going forward. The EAP will be agreed and shared with the participant at their final face to face IPES session. The KW will discuss any

concerns the participant has and ensure that these are also captured in the EAP. A final copy of the EAP will be shared with the participant within 10 days of them completing the programme. All participants exiting the programme will have continued access to **REDACTED** to support with their ongoing progression. All participants will have ongoing access to their digital passport for ongoing digital support, e.g. **REDACTED** & progress tracking. The KW will also reinforce successes and continue to be motivational and supportive in their approach. To help alleviate any anxiety about programme exit and promote continued self-efficacy/progress, the participant will be encouraged to proactively use their EAP, including sharing it with their employer/support network if they wish. For those in work, our KW will update the ESP and conduct a handover meeting with their employer. The KW will also prepare an IPES Progress Report outlining achievements, progress made and next steps. This will be shared securely with the JCP WC during the final CC session/within 10 days of the participant finishing the programme.

Question 1.4.5 - Employer Engagement and Employer Support Offer

Describe how you will build and maintain effective links with national and local employers and outline the Employer Support Offer you will provide as detailed at paragraphs 2.68 - 2.70 of the IPES Specification.

As a minimum, your response should;

- Outline your approach to working with;
 - local large employers; and
 - local small and medium enterprises (SMEs); and

explain how your approach will differ in terms of the in-work support offered to participants employed by different employers with different types of infrastructure and with diverse needs.

- Explain how you will source, engage and support employers to provide sustained employment opportunities, tailored to each participant's needs.
- Outline how you will capitalise on and develop employment opportunities in the locality to achieve outcomes for participants throughout the life of the contract.
- Outline how you will source and tailor opportunities for experience in a work environment in the local area to meet each participant's abilities and aspirations.
- Describe how you will up-skill employers to ensure they have the capability to support participants in their employment and provide access to appropriate external resources after completion of IPES provision.
- Detail how you will promote the Disability Confident scheme to national and local employers, with an emphasis on those employing IPES participants, to help increase employment opportunities for disabled people.

- Outline how you will facilitate partnership working with employers, specialist services and the participants' wider support networks to support participants to overcome their barriers to work.

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.

Question 1.4.5 - Employer Engagement and Employer Support Offer

Fedcap exists to support the most disadvantaged people into sustainable work. In designing our IPES solution, we have drawn on our 80+ years' experience supporting disabled people into work in the US, the heritage of the UK businesses we have acquired, & direct experience from our existing ESF contracts (through which we supported REDACTED people & worked with REDACTED + businesses in 2018 alone). Our model places the relationship between employers & participants at the heart of what we do. It will incorporate a range of carefully designed, evidence based services that build on e.g. Disability Confident (DC) agenda & supported employment solutions (championed by BASE), to transform the way employers view the recruitment of disabled people & help them to become the best employer they can be. Building on what we know works, we will introduce a new role designed specifically for IPES - our Occupational Inclusion Specialists (OISs), fully qualified and registered vocational health specialists with a background in working with employers. Our OIS will have the clinical expertise to really understand participant's individual health needs & provide detailed guidance/training (including job carving) to employers to match the right person to the right job first time. This will truly drive job sustainability.

Our Approach: OISs will engage & account manage employers, building in-depth understanding of business/workforce structures into order to co-design more inclusive recruitment solutions. This will include: promoting inclusive environments/diverse workforces using Disability Confident (DC) principles & encouraging/supporting DC accreditation; providing 1:1 clinical health/disability expertise to upskill employers to recruit/retain people with disabilities; raising awareness of Access to Work & supporting with applications; advising on reasonable adjustments & effective support mechanisms for specific impairments. OISs will be assigned to a defined geographical 'cluster' (sub-regional areas based on anticipated IPES flows/Local Authority boundaries) & will have sector specialism. They will work as a team to share contacts, intelligence & vacancies at CPA Level. Fedcap takes this approach on our current DWP ESF Links to Work (LtW) contract in Swindon & Wiltshire, which has secured REDACTED job starts and is achieving REDACTED of its 6-month sustained profile (year 2).

Large Employers: whilst we understand all employers share many similar challenges, we know (from 80+ years' working with employers) that typically large employers have fixed recruitment processes, e.g. formal application / interview procedures, driven by a corporate HR function. These can often exclude people with disabilities/health conditions. Our approach, therefore, focuses on engaging HR teams/recruiting managers to help them review/redesign recruitment / workforce management processes to be more inclusive. E.g. depending on the employer, OISs may: undertake assessments of workplace, job roles, policies/procedures against DC principles & agreeing a resulting action plan; encourage structured work experience to help participants build confidence/skills in a safe, non-pressured environment; or co-design employer specific recruitment strategies that bypass formal processes, e.g. pre-work training programmes, tasters, working interviews/work trials, that upskill participants & allow them to showcase abilities. e.g. our LtW Employer Solutions Consultant (ESC) in Swindon worked with REDACTED to tailor a cleaning role at the local hospital for our participant with Asperger syndrome, including supported interview/assessment delivered in our own premises, the ESC attending the first day with the participant as a buddy, changing the work routine to better suit concentration levels. Our focus for large employers will be to provide a professional job matching service, helping employers see the value our participants bring. Engagement will be driven by promotion of DC as a tool

to support Corporate Social Responsibility (CSR) & inclusive growth strategies. **SMEs:** 95% of employers in CPA4 are micro & SMEs; they play a critical role in to reducing the disability employment gap. These employers often have more flexibility to shape roles & support to meet individual needs but can lack time/resources to do so effectively e.g. Workplace Employment Relations Study (2011) highlighted only 14% of SMEs had a HR function. Additionally, the Improving Lives Green Paper highlighted that SMEs particularly wanted the right information and support in place to help them effectively deliver on their existing duties, such as making reasonable adjustments. Our approach, therefore, will focus on: *full vacancy management services* to overcome limited HR resource; *meeting low-volume/niche recruitment needs* via 1:1 participant sourcing/matching; *upskilling/confidence building* via delivery of training/coaching, including workshops on specific disabilities, introduction of supported work experience/trials; *working in partnership with e.g. REDACTED* to reach local employers & promote DC to members to maximise take up; *support to achieve DC accreditation* putting sustainable processes in place to enable ongoing recruitment of people with complex needs. We will also influence employers' view of participants by ensuring that those IPES participants who are able to, set up a 'Digital Passport', a unique & interactive portfolio of online achievement, including a digital CV (via Digital Profile), made up of certificates, video, references, making it easier for smaller employers to see participant strengths. **In work support (IWS):** our IWS offer is similarly flexible; we will develop a bespoke Employer Support Plan (ESP) with the employer & participant prior to the participant starting work, designed to upskill employers to support sustainable support/employment. OISs will deliver IWS to employers to help participants to settle into & then progress in their roles, including e.g. coaching managers/colleagues to make work environments/cultures more inclusive, training 'work buddies' to mentor participants, brokering access to additional support/funding, workshops such as mental health awareness. At the same time, Key Workers (KWs) will deliver IWS to participants, matching the intensity of pre-work support, i.e. 5 hours a month before slowly reducing by REDACTED per month, comprising of e.g. daily check-ups/weekly progress meetings support with ad-hoc or emergency issues e.g. workplace anxiety. For **larger employers** we will work collaboratively with existing HR/training functions to review induction, training and development arrangements & tailor them to suit the needs of our participants, ensuring job sustainability. This could include brokering employer links to specialist services, e.g. BSL interpreters, delivering inductions 1:1 rather than group, increasing the frequency of participant's performance reviews to identify issues early & provide additional support. For **SMEs** our IWS offer will include 1:1 coaching, triage review meetings involving the participant, their manager & their KW, development of personalised progression routes (backfill roles if necessary), training managers to identify issues & put strategies in place to support the participant, including brokering links between managers & participant's wider support networks & continued access to our digital learning & development products to support in-work progression e.g. REDACTED to provide digital inclusion support/training for the c29% of disabled people who are digitally excluded or REDACTED for online mental health support. For self-employed participants, our KWs will offer the same level of in-work support as for those in traditional employment, helping them to continue to manage/address their barriers. KWs will be trained (via Fedcap Academy) to offer IWS/business start-up advice/guidance and will use our REDACTED intervention catalogue to link participants to self-employment services in their local communities e.g.

Samee for self-employment support specifically for disadvantaged people living in M3 and Dorset LEP areas. **Delivering sustained employment opportunities:** Fedcap already has **REDACTED** employer relationships in CPA4 through our delivery of our 2 LtW contracts, which have supported **REDACTED** job outcomes in the last 3 years. OISs will build on these to **source & engage** employers through: **1) Strategic engagement particularly for large employers** – working with e.g. LEPs, Chambers, Local Authorities, to identify growth sectors, inward investment & large capital investments e.g. The first new nuclear power station to be built in the UK in over 20 years; Hinkley Point C in Somerset will provide low-carbon electricity for around 6 million homes, create thousands of jobs and bring lasting benefits to the UK economy. Construction and operation of Hinkley Point C will create 25,000 employment opportunities, up to 1,000 apprenticeships and 64% of the project's construction value is predicted to go to UK companies. There are currently over 3,100 workers on site.**2) targeting growth/high recruitment sectors with sustainable opportunities suitable for some IPES participants**, e.g. care sector and call centres with home working options – ensuring we replace lost opportunities in declining traditional DC sectors such as retail. *Targeting DC employers* – including those already registered as DC & those who express interest as a result of our widespread DC marketing campaigns/events; **4) Direct marketing** e.g. responding to vacancies, cold-calling/emailing – often walking the streets to talk direct to SMEs, advertising, business & trade directories, partnership websites, brochures, raising awareness via social media, good news stories, 'Diversifying your Workforce' seminars; attendance at local business forums/networking; **5) Maintaining relationships** - regular engagement & communication to encourage repeat vacancies. **REDACTED** of our LtW jobs come from repeat employers, and we are preferred recruitment partners for 30 businesses, e.g. **REDACTED** **6) linking with local niche/expert providers** established specifically to support job outcomes for disabled people, e.g. social enterprises. We have engaged with **REDACTED** a supported employment provider in the Swindon & Wiltshire who ring fence their vacancies for people with disabilities. Once engaged, OISs will **support employers** to provide opportunities for participants through e.g. advice/support on adapting recruitment/HR processes to make opportunities accessible, e.g. work trials, working interviews; advice on reasonable adjustments/adaptations for different disabilities, e.g. job carving, Access to Work (AtW) applications; Workforce disability awareness coaching/training, e.g. appropriate management styles; IWS, e.g. access to our digital solution for employers, including webinars, e-learning modules. OISs will encourage employers to sign up to DC, promoting its value/contribution to CSR & available resources, & support HR teams/managers with self-assessments/action planning to achieve Level 2/Level 3 status. Our approach to supporting sustained employment opportunities is recognised by stakeholders, including **REDACTED** who said '*Links to Work continue to support fellow local residents, often with complex health challenges to build their confidence & work skills to maximise their chances of finding long-term, sustainable employment. Their support has already helped **REDACTED** people with complex needs to move into paid employment, making a real difference to their lives & to the strength of our local economy*'. **Capitalising/developing employment opportunities to achieve outcomes:** Our cluster-based approach will ensure OISs are embedded in local employment infrastructures, enabling them to build a detailed picture of existing & emerging employment opportunities over the life of the contract. This will be supported by direct engagement with employers, Chambers, LEPs, JCP, LA employment teams & other employability

providers (e.g. Work & Health Programme) to generate advanced warning of opportunities & feed skills requirements into KWs to inform participant journeys. We will then develop these opportunities into outcomes for participants via: **Job matching services**, candidate searching, selection/matching against employer job description, pre-screening, interviews & follow-ups. In a recent Employer Engagement Survey, **REDACTED** of employers highlighted this as our most valuable service; **Work trials** providing participants an opportunity to showcase their skills to the employer outside of a pressured interview environment & building the confidence of both employer & participant in their ability to successfully do the role. **Sector routeways** where participant/vacancy volumes allow, we will bring groups of employers together to design/deliver bespoke sector specific training linked to guaranteed job outcomes. **REDACTED** of SMEs state this is a valuable recruitment tool which generates job outcomes. For example, we engaged with **REDACTED** who were experiencing unreliable and a high churn of staff for their housekeeping services to offer alternative options to their traditional advert/interview route. With our support, **REDACTED** implemented a two-staged process comprising an informal 'chat' with the Manager in place of an interview followed by a work trial. **Reverse marketing** individuals to employers highlighting their strengths/skills. We have found this particularly effective for smaller employers & for people with more severe learning disabilities/autism. **Job Carving**, working with employers to tailor job descriptions, tasks, working hours to reflect what people with disabilities can do. **Skills & Qualification packages** to upskill participants to meet role specific requirements, e.g. SIA, CSCS, Health & Safety qualifications; **In Work Support** to help employers & participants adapt to their arrangements, supporting gradual build-up of hours and/or tasks/responsibilities (to help meet financial threshold targets) as confidence grows. This will include e.g. ongoing 1:1 support for both employer & participant, brokering access to additional funding/support (e.g. access to work), agreeing in-work mentors/buddies. **Sourcing/tailoring work experience**: 100% of participants will be offered 16 hours of work experience. OISs will encourage the use of work experience to all employers, promoting it as an alternative recruitment option and as an opportunity to support DC compliance. With large employers, we will encourage/support the introduction of structured work experience placements that can be flexed to accommodate the diverse needs of participants. Our aim will be to build a bank of repeat work placement opportunities with trusted employers across the CPA. This will include regular placements with employer partners & vacancy driven placements, designed to lead into a job on completion. We will work with smaller employers to shape specific placements for individuals. All placement sourcing will be driven by engagement with KWs to understand the needs, abilities & aspirations of each individual. This will enable us to match participants to a placement that based on their vocational profile. To support the matching process, OISs will work with employers to adapt work experience to suit specific participant needs, e.g. tailoring tasks, scheduling shift patterns outside of busy commuting times. **Upskilling employers**: OISs will develop trusting & well-informed relationship with employers. OISs will work with employers to develop/deliver a DC action plan to build confidence in supporting employees with complex needs. The content of which will vary for each employer. E.g. larger employer may already be DC but benefit from a review of processes/practices, training for local HR/recruiting managers and/or access to online advice (e.g. webinars, toolkits) on implementing/maintaining DC to ensure processes are inclusive/compliance with DC principles and/or help them progress to the next DC level where

relevant. Employers will also have access to online support via **REDACTED** (to assess needs of their workforce), training (e.g. mental health, disability awareness) SMEs may need additional support to help them achieve DC, e.g. progression planning e.g. higher frequency of supervision sessions & allowance for CPD activities audits e.g. zero hour contracts/Living Wage; disability awareness training; direct coaching/shadowing of workforce; advice on work place adaptations; help to develop disability champions the workplace; & apprenticeship strategy development. All OISs will be trained (via Fedcap Academy) in several specialist areas e.g. mental health first aid. They will deliver workshops covering these topics, aligned to employers' workforce development strategy. OISs will also connect employers to available external support, particularly SMEs. Based on assessment, & using a placed-based model, OISs will connect employers to external support in their locality, including: for large employers • developing relationships with experts e.g. Disability Rights UK; • support with access to work applications for work place adaptations or mental health support workers once IPES comes to an end; for SMEs: • connecting like-minded employers together, via BASE; • appropriate referrals to external training providers e.g. high performing apprenticeship providers for entry 3 learning disability participants; • access to our One-Support provisions database for referrals to VCSE/support services e.g. contacts & referral protocols for community mental health services, e.g. **REDACTED** VCSE Strategic Forum, personal & social development activities, e.g. **REDACTED** a charity that offers services across Devon and Dorset for those facing complex issues, including substance misuse, mental ill health, and other harmful, addictive and offending behaviour, to improve their health, wellbeing and employability. • linking employers with participant support networks, e.g. friends, family, able to support with issues that may arise impacting job sustainability. **Promoting Disability Confident:** OISs will be DC champions, discussing/promoting DC at all early employer interactions to sell the benefits of signing up. For National employers, this will include 'tapping into' CSR agendas & focusing them on having a more diverse & inclusive workforce. We will promote it as part of a wider UK strategy, highlighting the positive press & recognition (e.g. DC awards) becoming a DC leader (Level 3) can bring. For local employers, we will promote DC as a way to access untapped talent/skills in the local labour market. OISs will use their health background to contextualise how DC can support their business growth plans & will break down myths about costly adaptations (e.g. lifts/ramps). We will engage local steering groups, chambers of commerce & LEPs in DC, helping to promote it through their network as another tool to help meet employer needs. In addition, we will promote DC generally through: DC inclusion on all promotional materials sent to employers & on a dedicated page on our website. This will include good news stories/testimonials from other DC employers & details of how to get involved; hosting/promoting DC events; engaging initiatives e.g. Better Health at Work Awards & attending local employer equality & diversity steering groups; running DC 'awards' for our employer partners, recognising good practice in recruiting people with disabilities in newsletters & events; encouraging employers who have achieved DC status to promote it to others in their industry; engaging with other IPES providers to share best practice on engaging employers in DC; encouraging employers to register for DWP's Purple Tuesday campaign (a day to raise awareness/support strategies to recruit disabled (people)– Fedcap has registered our commitments to Purple Tuesday as an employer & will use learning from this campaign to inform future delivery. **Partnership working** will be facilitated by our three key participant facing roles including: **1) KW** who will use their understanding

participant needs, barriers, interests & aspirations to pull together the right network of support to help them move into work & sustain. This includes participant's wider support networks, e.g. family members, Local Authority adult social care teams & GP/nurses, linking them with participant's employer (with participant permission) build lasting relationships that support job sustainability & future recruitment of people with complex needs. **2) Community Provision Coordinators (CPCs)**, will establish/manage relationships across a wide range of stakeholders & specialist support organisations, e.g. JCP, VCSE organisations, statutory services, to co-ordinate support against participant/employer needs. Captured in **REDACTED** (our specialist support catalogue) & available for employers to access, helping to integrate them with local support networks; **3)** using the ESP, our **OISSs** will link employers directly with relevant services and/or create buddy systems, matching disability aware employers with employers starting to recruit disabled people, to act as mentors & share best practice, advice & lessons learned. This will help build employer confidence in their ability to recruit & support disabled people. Our teams will deliver this approach through a cluster-based model, drawing together relevant employers, statutory services & providers at Local Authority level through e.g. local disability forums, employer hosted disability open days, South Somerset Disability Forum and East Hampshire Disability Forum. This will include e.g. public health commissioned services, employability provision, e.g. Work & Health Programme, Troubled Families, Local Authority provision, education & training providers, VCSE specialist provision, e.g. personal & social development activities.

Question 1.4.9 - Supply Chain (b)

Please describe how your organisation will deliver the IPES provision without the use of an end to end supply chain.

Your response should include as a minimum, but not be limited to:

- How you will provide all in-scope Services (see paragraph 1.13 of the IPES Specification) & why you have chosen not to use an end to end supply chain.
- How you will provide the Authority with assurance that individual participants' requirements will be met by your organisation, & if not what your process will be to engage with specialist providers to meet participants' requirements
- A clear explanation of your contract management practices with your specialist delivery partners (where applicable), including how these align to the principles of the Merlin Standard.
- How your delivery & that of any specialist delivery partners will be aligned to the requirements of the contract
- How you will provide the Authority with transparency of costs, including by way of open book accounting, in relation to specialist delivery partners (where applicable).
- How you, or your specialist delivery partners, will incentivise & motivate the work force throughout the life of the contract.
- How you will ensure continuity of service provision.
- Detail your contingency plan for maintaining the entire scope of your proposal within your bid should your organisation need to engage an end to end supply chain partner ahead of the Contract Start Date or during the term of the contract.

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 & these instructions.

Official - Sensitive

Question 1.4.9 - Supply Chain (b)

Delivering all in-scope services: Fedcap Employment will deliver 100% of IPES end to end provision in CPA4 directly. To provide all in scope services, our frontline staffing model comprises: **Community Provision Co-ordinators (CPCs)** engaging JCP/signposting organisations to generate referrals/support early participant engagement & sourcing/managing access to specialist support services in local community in response to participant needs/barriers; **Key Workers (KW)** delivering end to end participant journey including assessment/action planning, bespoke packages of support via group/individual interventions, brokerage to external support via specialist partners/stakeholders & in work support (IWS). KWs will possess multidisciplinary expertise across employment, disability & health, including specialists in mental/physical health, sensory, learning disability, & experience of supporting people with health conditions/disabilities into work; **Occupational Inclusion Specialists (OISs)**, vocational health specialists responsible for engaging employers, sourcing/tailoring work experience & job opportunities to meet participant needs & delivering e.g. disability workshops/mental health awareness, Disability Confident (DC) campaigns/support. Our frontline workforce will operate a cluster-based model (based on Local Authority boundaries & anticipated IPES flows), with teams of KWs, CPC & OIS assigned to each cluster. Staff will work peripatetically pan-cluster, using 100% outreach model to maximise participant engagement – meeting participants in places they are most comfortable. We will review this approach against participant flows in each cluster & have built in flexibility to enable staff to move out of cluster if required, e.g. significantly high/low flows in particular locations. This enables us to respond to changes in referral volumes & target services where most needed. Our digital solution offers additional 24/7 online support/engagement for participants who are able/want to access it. This includes an online 'My Digital Passport' account with tailored services e.g. access to assessments to check own progress, **REDACTED** services catalogue with information & contact details for local support, taster/accredited courses & 24hr online mental health support. We will use specialist partners to support delivery, including: 1) *Fedcap Academy Partners* – expert organisations delivering training / development to upskill our IPES workforce in effectively engaging, supporting & enabling participants/employers to achieve outcomes. E.g. *Society Matters CIC* will train staff in personal budgeting, debt management, access to benefits & navigation through welfare system; *BID Services* (one of UK's largest BSL providers) will train KWs/OISs in supporting people who are deaf, hard of hearing, visually impaired or have dual sensory loss. (Plus direct support for participants, including advocacy, sourcing employment). c) **REDACTED** (training staff in e.g. understanding neurodiversity, how to maximise participant potential. (Plus direct support for participants with neurodiversity related health barriers); *Changing Lives* (substance misuse specialist supporting 17,000 people every year), training staff (& employers) in addictions/mental health. **REDACTED** - staff training to support, promote & develop provision of supported employment methods & endorse/promote quality standards. 2) *Specialist Support Partners* - spot purchase partners captured in our **REDACTED**, managed & added to over life of contract by CPCs to ensure we continue to meet individual need. Examples of specialist partners already engaged include: **REDACTED** (disabilities, mental health, learning disabilities), the **REDACTED** (self-employment Dorset, Isle of Wight), **REDACTED** (housing, mental health floating support, Bournemouth), **REDACTED** (skills), **REDACTED** (homelessness), **REDACTED** (business mentoring, Southampton/Portsmouth) We have also contracted partners to support our digital offer, incl: **REDACTED** – mental health support, available online 24/7 (staffed), including information/self-help programmes e.g. anxiety, sleep, weight management, depression; **REDACTED** – digital inclusion training. *Digital Profile* –digital CV builder to showcase skills/personality to potential employers more creatively. **Rationale:** Following assessment of strengths / risks associated with IPES delivery we concluded the low volumes across such a dispersed geography do not lend

themselves to end to end subcontracting. We are not able to guarantee participant volumes in a particular area or with a specific barrier, making it difficult for potential partners to sustain a KW model. By retaining 100% of end to end delivery, we ensure consistency of KW support throughout the participant journey. We can also realise economies of scale through a single team structure which would be diluted through subcontracting, e.g. funding would need to be spread across additional management, administration/support & participant / employer engagement functions within a supply chain, reducing amount of funding driven to the frontline. This approach enables lower caseload sizes (as we can invest more in frontline KWs) & more time for KW-participant engagement. A single team approach also allows us to effectively maintain consistent quality of support pan-CPA. One performance management regime & one team to roll out improvements across means we can identify/implement continuous improvement activities more swiftly than if we were to have an end to end supply chain. Whilst majority of our contracts use end-to-end SCPs, we do have evidence of delivering this approach effectively. E.g. we currently directly deliver 90% of our DWP ESF Links to Work (LtW) contract in Swindon & Wiltshire, supported by a trusted bank of spot purchase/community providers, achieving **REDACTED** sustained job outcome profile (year 2). **Meeting individual requirements:** KWs will have a range of health & employment specialisms (strengthened through Fedcap Academy), enabling them to share expertise within their teams. **REDACTED** will provide KWs with a range of suitable options for additional specialist support, down to community level. This will include statutory, VCSE & paid for provision, delivering value for money by aligning rather than duplicating existing services/funding streams where available. Directly linked to our assessment tool **REDACTED**. **REDACTED** enables us to continually aggregate customer needs, highlighting specific demand for provision by area, customer group, gender, age etc. It also allows participants to rate service quality, helping KWs & participants select most appropriate and/or highest performing service for their need. Using accurate MI (reported monthly) will also assist in identifying gaps/weaknesses in provision, enabling us to capacity build organisations or source new services as required. Our process for engaging additional service providers includes *identification* – driven by needs analysis of participants over the life of programme; *direct engagement* – to establish signposting/referral arrangements. Any commissioned services will be subject to due diligence; *quality monitoring* – using feedback from KW & participants to inform extent to which service met needs. We will share details of providers listed in **REDACTED** with DWP regularly to a) provide assurances our participants have access to the support they need to address barriers; b) provide analysis of what works for people with complex barriers, informing future commissioning. **Contract Management Processes:** In line with Merlin principles, we will agree Service Level Agreements (SLAs) and/or contracts with all partners. These will cover quality standards, performance management arrangements, dates & volumes (where appropriate) & fees & payments terms. For online provision partners, we will agree a minimum volume purchase for subscriptions, reviewed quarterly. CPCs, supported by our Partnership & Provisions Managers (PPMs), overseen by our National Commissioning Manager (NCM), will manage partners in line with the SLAs/contracts. Quality management approaches will be based on usage. Key national/regional specialists (classified as Tier 3 partners in our supply chain management framework (SCMF)) e.g. our Fedcap Academy partners & specialist partners with higher volumes will be subject to quarterly management meetings to review performance/quality. We will hold quarterly networking events with these partners to share best practice & drive improvement & they will be required to become DC within 1 year of us contracting with them. Smaller, local spot purchase partners (Tier 4) will receive light-touch management focused on reviewing quality/impact on participant progression & feedback. **Aligning to contract:** through: *Dedicated role for partner engagement:* our CPCs will work peripatetically at

community level to build relationships with JCP & signposting agencies to generate referrals as well as specialist provision & stakeholders to help address participant barriers/drive continuous improvement; *Robust processes / procedures*: e.g. warm handover/hand back, assessment/action planning, employer engagement overseen by our quality team using our Customer First quality standard to ensure 100% of delivery meets requirements/customer service standards. All frontline staff will undergo same training/performance management ensuring consistency across entire CPA; *KW model*: delivered through KWs with health-related quals/significant experience of delivering employment support to individuals with health barriers & complex needs. KWs will be assigned based on geography/specialism & will proactively manage a small caseload of participants from referral, through assessment, support to address barriers & into work/IWS. They will continue the same level of support whilst in work gradually reducing. To enable this, we have modelled KW volumes on a caseload of **REDACTED** (optimum size range based on LtW learning, DWP published best practice), which enables 5 hours of KW-participant contact time a month. This includes built in time for weekly contact, monthly face to face meetings & case conferencing with JCP; *intensive pre-work/IWS* – tailored to participant needs & comprising 1:1 coaching/mentoring from KW, referrals to specialist support engagement with support networks, work experience, transition into work, continued progression; *Integrated REDACTED & REDACTED systems*: using MI & analytics to drill down into participant profiles/individual needs to create a tailored programme of support, tapping in to local service networks. Services listed are mapped against spec & will be added to in line with emerging data/insights on needs at CPA/local/individual level. *OISs as vocational health specialists* with right skill set & professional health qualifications to engage employers in DC agenda/support them to tailor processes to become more inclusive/accessible. **Transparency of costs**: Fedcap operates a fair & equal approach to financial arrangements. Fair deal arrangements include: fair & open selection process; equitable fees across the supply chain, no hidden charges for support services; transparent book-keeping, publication of performance data; timely payments for services; & supportive approach to partnership & performance management that seeks to encourage development & quality of service across the network. If appropriate, Fedcap will apply a special case fair deal with smaller VCSEs needing more favourable payment structure to reduce risk & guarantee their viability. We will operate a real time due diligence process on all partners via real time credit & business monitoring. This will be shared with DWP quarterly or upon request. **Motivating workforce**: via: clear/concise individual/team objectives & clarity on roles/responsibilities; competitive benefits package & pay structure e.g. competitive salaries, **REDACTED** x salary life insurance, competitive pension scheme; Regular training/career path development (investing **REDACTED** into staff training/development), delivered through Fedcap Academy using expert partners & e.g. secondment, job shadowing, 'step-up' opportunities (maximising our position as global charity); hosting staff (including specialist partner staff/expert stakeholders) forums/workshops to share best practice, learn from each other & play an active part in delivery strategy / continuous improvement; nominate staff/partners for ERSA awards; provide IPES awards for staff, partners & participants. **Continuity**: we will ensure continuity of provision through 1) consistent staff training via Fedcap Academy. Training is underpinned by development & succession planning for all staff; 2) Quality monitoring activities via our internal quality standard, Customer First (CF), testing quality levels across different staff/locations; 3) standardised operating systems & procedures to support our team in delivering an excellent service; 4) staff retention strategies as outlined above to ensure low rates of attrition & consistency of KW support for participants. **Contingency**: Should we need to engage an end to end partner, we will complete a Merlin compliant commissioning process, led by our NCM & supported CPCs. This comprises:

a widely marketed targeted expression of interest mapped against the requirements of the contract, including issuing available opportunities out to our approved partner framework; posting opportunities on our website, & advertising through industry news sources (e.g. ERSA); scoring against a published scoring matrix to test capability & competence against a range of indicators; Contracts negotiated & signed with successful providers & feedback provided to all applicants; due diligence & onboarding to apprise suppliers of contract specific requirements & our delivery model, including staff training, participant journey walk through, access to PICS. Any end-to-end partners will be closely managed, using our SCMF & CF by CPCs to ensure consistent service/quality pan CPA over life of contract.

Question 1.4.10 - Performance Rationale

Please outline the rationale for the Performance Offer and Outcome Profile as outlined in the Contract Cost Register (CCR).

As a minimum, your response should;

- Clearly identify each step in how you calculated your Performance Offer and Outcome Profile for IPES, including any supporting assumptions
- Detail any research, evidence and/or experience from relevant past delivery which underpins your Performance Offer and Outcome Profile including any assumptions and dependencies.
- Provide a rationale for your Starting Baseline, detailing the key elements of delivery and the associated level of increase/decrease for each element that you expect to make up your Performance Offer. To note, your Starting Baseline does not have to be 0%.
- Clearly explain how you will support and achieve the conversion rate of each outcome offered and your approach to driving evidence-based innovation and continuous improvement in order to achieve year on year improvements in the Performance Offer.
- Please specify your predicted Earnings Performance Indicator (Earnings PI) figures by month for the contract period, as per paragraph 4.5 of the IPES specification.
- Describe how you will proactively manage the achievement of performance levels and customer service standards, as detailed in the IPES 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 act on any findings, including 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 they do not re-occur, for both you and your supply chain.

- Explain how you will proactively engage with the Authority to notify any issues and remedial actions rather than waiting for scheduled review meetings.
- Identify the three main risks to achieving your target performance level in the CPA, how you plan to mitigate these risks and why you think these approaches will be successful.
- Give one example of lessons learned from a situation where you have successfully put in place remedial action to address a performance issue on a relevant current or previous contract that you will deploy on IPES. If you have no experience of performance issues, please outline how you would address them, including any remedial action you would put in place.

You should summarise your performance rationale in the table provided, please see an example below. This is provided for illustrative purposes only, it is not linked to IPES or any performance expectation the Department may have for IPES.

<i>New Delivery Elements</i>	
<i>Starting Baseline</i>	<i>0%</i>
<i>DWP Published Performance Information</i>	<i>+30%</i>
<i>Experience of delivering similar services</i>	<i>+5%</i>
<i>Enhanced employer relationships in geography</i>	<i>+10%</i>
<i>Job Outcome Definition</i>	<i>+5%</i>
<i>Retail Closures in geography</i>	<i>-5%</i>
<i>Total Delivery Element Uplift</i>	<i>45%</i>
<i>Overall Performance Offer</i>	<i>45%</i>

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, these instructions and Table A on page 11.

Question 1.4.10 - Performance Rationale

Section Redacted in entirety

Question 1.4.11 - Quality, Management and Assurance of provision

Please confirm whether you will be using a supply chain and provide a detailed description of how you and your supply chain (where relevant) will ensure the quality of service delivery through your management practices. If your delivery model does not include the use of a supply chain please outline this, and the rationale for not using a supply chain.

Your response should include as a minimum, but not be limited to:

- Explain how you, and your supply chain (where relevant), will monitor and manage the quality of provision to ensure that the standards set within the IPES Specification and your tender will be met from the start and throughout the term of the contract.
- How you, and your supply chain (where relevant), will ensure the quality of staff, frequency and appropriateness of participant engagement.
- Clearly describe (where relevant) how you will manage and ensure the quality of delivery by any sub-contractors e.g. site visits, audits and observing delivery.
- Outline how you will engender collaborative working across the IPES market and the wider market as collaboration evolves, and how this will support continuous improvement of your IPES service and of IPES as a national programme. Your response should include identifying and sharing of best practice, successful delivery methods, and emerging innovation.
- Provide one example of when you have worked collaboratively with a peer or partner organisation to deliver a performance improvement and describe how this was achieved.
- Identify how you will continuously improve the quality of delivery of IPES provision, using evidence gathered from the live running of the service, capacity to build the supply chain partner (where relevant) and share best practice throughout your supply chain (where relevant).

- Describe how you will continually review procedures and share learning with the Authority to improve current and future provision.
- 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.
- 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 IPES participant so that you can clearly articulate at any given time where each participant is in your participant journey towards achievement of outcomes.
- 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 and how you will provide such information for DWP checking.
- Your approach for ensuring continuity of performance during the final 18 months of IPES provision, including how you will monitor and manage performance and participant support to ensure it does not deteriorate during the exit phase of the contract.

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.

Question 1.4.11 - Quality, Management and Assurance of provision

Fedcap Employment will deliver 100% of end to end IPES provision directly. We will use supply chain partners (SCP) to 1) deliver expert training to staff via the Fedcap Academy, e.g. **REDACTED** for Inclusion Awareness Training; 2) provide specific support/interventions on a spot purchase basis. Our rationale is based on analysis of CPA4 geography & profiled flows, concluding that the low volumes across such a dispersed CPA do not lend themselves to end to end subcontracting & 100% direct end-to-end delivery allows for Key Worker (KW) consistency. Our approach will 1) allow us to operate as a delivery single team, responding quickly to referrals & effectively maintaining consistent quality of support pan-CPA; 2) ensure delivery staff have the right skills/tools & access to specialist services to fully meet the range of participant needs. **Monitoring/Managing Quality:** We will monitor/manage service quality via our internal quality standard, Customer First (CF). CF incorporates principals of external standards e.g. ISO 9001, Matrix, Ofsted. & sets out 'what good looks like' against key elements of the participant journey. E.g. KW assignment, assessment/action planning, intensive pre-work support, work experience/job brokerage, in work support. Processes/procedures are designed around Customer Service Standards (CSS) & contract compliance requirements, e.g. signed action plans. All staff, including SCP, must comply with them. Following contract award, our Quality Team (QT) will support our Delivery Manager (DM) & local Performance Managers (PMs) to implement CF quality management practices e.g. setting KW KPIs. PMs will be responsible for gaining assurance that the principals of CF are adhered to from the outset & a robust quality calendar will be agreed, including observations, caseload reviews, customer feedback analysis, sampling of customer records. Intelligence led, themed activities will be planned out within the quality calendar to review specific areas of delivery e.g. in work support, office environment. This activity feeds into contract specific self-assessment reports (SARs) & resulting Quality Improvement Plans (QIP), created by our QT, to ensure independence from operations. Our Community Provisions Co-ordinators (CPC), supported by our central Partnerships & Provisions Manager (PPM), overseen by our National Commissioning Manager (NCM) will use CF to monitor quality & effectiveness of SCPs. Including regular reviews, customer feedback / listening groups, complaints, post provision evaluation, continuous improvement monitoring & best practice sharing. Our PPM will confirm quality monitoring criteria & process with SCPs prior to contract start & this will form part of partner Service Level Agreements (SLAs). **Staff Quality:** Staff are recruited based on qualifications, competence, attitude & skills, e.g. Occupational Inclusion Specialists (OISs) will be vocational health specialists with track record of working with employers. All staff will receive a full suite of training via Fedcap Academy prior to starting & will access role-specific professional development opportunities, e.g. accredited training. PMs will monitor staff quality via performance against MPLs & activities set out in the quality calendar, e.g. observations. We will track participant demographic data to ensure staff have the necessary skill set to support evolving participant base/needs. PMs will provide ongoing support & coaching for staff & monthly 1:1s will be used to discuss performance/areas for improvement & agree any support required. As a minimum, all staff will be formally observed every 6 months by PMs. **Participant engagement:** KWs will upload all participant interaction to PICS, our MI system. This will include time/date/type of contact & any updates to participant Action Plan (AP) e.g. reassessments, CVs, jobsearch, interventions complete, self-efficacy/managing conditions, improvements in health & wellbeing. This will enable us to monitor whether participants are attending in line with minimum service levels (i.e. frequency of contact) & CF standards, as well as progression against action plan/job goals, i.e. measured improvements against our **REDACTED** themes. Using this data, PowerBi reports on participant engagement / progression at a range of levels, e.g. individual participant, cohort, KW caseload, geographical cluster, contract, participant demographic. PMs use these performance reports, along with CF quality regimes, e.g. observation, action plan sampling, participant feedback, to monitor the appropriate/relevance of the support/interventions provided. **Partner Quality:** Proposed SCPs have been

commissioned in line with Merlin Standard principles to ensure high-quality specialist 'wrap-around' intervention/staff training provision. They were selected based on specialism, track record, financial position & external accreditations. CPCs will continue this process to map/engage local specialist support throughout life of contract. Regardless of size, structure, maturity or role in contract delivery, we expect partners to adhere to expectations set out in CF. SCPs will be measured on impact on participant progression, feedback & price to enable PMs to conduct quality/value for money analysis. Irrespective of SCP size/contract value, we will discuss/encourage/support them to become Disability Confident (DC) & will upskill through e.g. DC information packs, 1:1 coaching from OISS. Our offer includes a 'social experience fund', a budget to deliver/pay for community inclusion activities, e.g. local cookery class, Zumba. We will ensure such activities are receipted & benefit/impact on progression (against AP) monitored. **Collaborative Working:** Collaborative working across the IPES market will be delivered through; being active members of national forums, eg the DWP strategic forum, contributing to the agendas and sharing best practice; to bring this to life we commit to producing three thought leadership pieces per year inviting contributions from other IPES providers outlining learning and recommendations for future delivery, in addition our COO will update DWP on all collaboration/improvement activities & provide an end of project evaluation report. Across the wider market we will set up local IPES Governance Boards to engage key stakeholders, including customer representatives agreeing joint working arrangements, e.g. vacancy sharing protocols, co-delivery. Through the Board we will support collaboration projects/pilots & utilise our IPES 'innovation fund' to test new ways of working with other providers. Findings from these Boards will be escalated to national forums. **Example of Collaboration:** On our LtW programme in Swindon and Wiltshire in 2018 we presented at GP Clinical Governance meeting arranged by NHS Wiltshire CCG to promote our LtW contract, increasing joint working to bridge health & employment gap & 90% uplift in referrals from GPs, e.g. **REDACTED**. **Continuous Improvement:** CF uses feedback/real time data to continuously improve services by: identifying improvement opportunities via bi-annual staff observations, ongoing self-assessment, external inspection (e.g. DWP PAT audits), participant engagement (e.g. listening groups, participant feedback/complaints), **REDACTED** progression data, performance vs KPIs; investigation/analysis into root causes of issues and/or reasons for high performance, informed by monitoring/reporting activity, conducted by PM, to develop solutions to improve quality; QIPs to implement quality increasing solutions, which contain specific, relevant & measurable actions set to timescales, with clear owners & review dates. Outputs from all monitoring activities (including QIPs) will be collated/analysed by our QT monthly & shared with PM, DM, COO as recommendations for service improvements. QT will conduct an annual self-assessment against CF, informed by data from quality & continuous improvement activities e.g. performance figures, feedback. Where continuous improvement / reporting processes identify high quality, we will act on this via: PM providing best practice advice; inviting high performing staff to share 'what works' advice with other staff/partners; piloting/trialling new working practices, rolling out where successful. All quality reviews/improvement activities will be recorded on our system, InsightQ, allowing us to report progress/impact of quality improvement activities & track best practice. As a charity, any return on investment realised through continuous improvement activity will be reinvested into improving our IPES provision, e.g. expanding Fedcap Academy offer, strengthening quality/impact of participant facing platforms/self-directed services. Our **REDACTED** system tracks output data from all SCP interventions & allows participants to rate the service. CPCs will conduct monthly reviews of this data, used to inform 1:1 engagement with SCPs to identify areas for improvement. CPCs will facilitate best practice sharing between SCPs through, e.g. partner forums, to support continuous improvement. **Reviewing procedures/sharing learning:** Using CF, our QT will conduct monthly quality audits to check processes/procedures are being followed/are fit for purpose. This will include e.g. conducting observations,

interviewing staff, reviewing of progress against QIPs, to identify if procedures are being followed & whether enhancements have been identified via operational delivery. Where improvements are identified, the QT will update CF & roll out across delivery, consulting with DWP first if required, e.g. significant change to process. Learning will be shared with DWP at monthly performance meetings, in monthly performance returns (MPRs) & additional meetings between our COO & Senior Commercial Colleagues when circumstances require. **Feedback/complaints:** KWs will inform participants of feedback / complaints procedures at induction. Feedback will be gathered via: online surveys, monthly participant listening groups, dedicated feedback phone line/email address & participant feedback boxes at all delivery locations. Process: **Stage 1:** All complaints are acknowledged within 2 working days of receipt. PM undertakes initial discussion /investigation, plans resolution & provide formal written response within 10 working days. **Stage 2:** If necessary, the complaint is escalated to DM who will investigate/review previous resolutions & provide a written response within 10 working days detailing actions to resolve. **Stage 3:** If the participant is not satisfied, we will provide address and/or email of Fedcap's COO, who will review & provide written response containing a proposed resolution within 15 working days. **Stage 4:** If required, we will provide participant with details of Independent Case Examiner's Service. Our process ensures impartiality in complaint handling by providing recourse to individual staff's superiors/senior management, up to COO. *Acting on feedback/complaints:* All feedback/complaints are recorded on a central database which is monitored by the QT & feeds into CF continuous improvement process. Where feedback/complaints data highlights the need to review, improve, or change service delivery this will be communicated as part of monthly contract reviews. The findings will be used by QT to identify gaps in capability/capacity & areas for improvement which will prompt improvement activity. **Tracking/monitoring progress:** KWs will record all participant interactions & achievements against milestones in PICS. This allows KWs/PMs to monitor specific milestones in participant Action Plans, e.g. completion of health intervention, CV created, are being achieved in target timescales. PowerBI Reports enable PMs to review distance travelled/progress against action plans at individual, monthly cohort & CPA /contract level, e.g. % in work, & flag any missed milestones. It also allows us to drill into progress of participants with specific barriers/those who have accessed specific interventions & compare performance across the CPA. Reporting is supported by monthly PM/KW caseload reviews of participant's progress & planned activities. Where participant progression is not demonstrated at the desired pace, the PM will undertake additional quality activities such as reviewing effectiveness of interventions & conducting in-depth caseload reviews resulting in performance improvement plan (PIP) where necessary. **Capacity:** To ensure implementation / delivery of IPES does not adversely affect the delivery of Fedcap's existing/future contracts we will: ringfence resources - frontline staff are dedicated to individual contracts avoiding a clash of priorities, & all management roles are resourced on a contract by contract basis; complete due diligence/assessment of capacity of call-off partners' management & support services against current/future commitments; budget support services annually on existing contract basis with resources (including QT) budgeted in each contract bid, for ensuring contract wins attract the necessary additional resource. We will feedback to DWP via regular senior management meetings & Contract Performance Review meetings throughout life of the contract. **Performance Continuity.** We have profiled staff costs to contract end to ensure same level of service as at peak, including adherence to optimum caseload sizes. KW/OIS time is costed to August 2025 to ensure focus on participant progression, achieving job entries/income thresholds through to contract end. As well as ensuring participants not in work at contract end are signposted to alternative provision via effective handovers with JCP, community partners & stakeholders. PMs will continue to apply CF, with profiled KPIs throughout the exit phase. Contract closure will be governed by full exit plans, data security plans &

programme assurance stencils, shared with DWP to confirm commitment/approach to delivery in final 18 months.

Question 1.4.12 - 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.

As a minimum, your response should;

- Provide details of the delivery infrastructure that you will use for engaging and supporting participants, including premises for face to face contact, and digital services.
- Where applicable, describe any outreach 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 consistency of services across the CPA.
- Provide details of local public transport links and their proximity to the premises that you have identified in response to the above points.
- Detail the facilities available at each location and how these meet any legal requirements, including compliance with the Equality Act 2010.
- Explain why you consider these premises to be suitable for IPES provision.
- Clearly describe how your proposal will achieve full coverage across the entire Contract Package Area.
- If you intend to use existing premises, explain how delivery of this provision will fit with current use and the efficiencies and / or savings you expect to achieve.
- 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 term 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.

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.

Question 1.4.12 - Delivery Infrastructure

Our infrastructure: Following analysis of participant volumes across the large geographical area of CPA4 (84 local Authority districts) and anticipated complexity of needs we have designed a 100% outreach delivery model. We will take our service out into the community & meet participants in places where they feel most comfortable. To facilitate this, we have established a co-location agreement with **REDACTED** to access their 188 locations across CPA4. These include: **Plymouth:** **REDACTED** *Facilities:* IT Suite, 1:1 meeting room, Training/meeting room, health & wellbeing support groups *Transport Links:* Falcon, M6, M36 bus service within 5 minute walk from premises **Bristol:** **REDACTED** *Facilities:* Training/ meeting room, health and wellbeing, support groups, IT suite, 1:1 interview room *Transport Links:* 19, 948 bus services within a 1 minute walk from premises. **Cornwall:** **REDACTED** *Facilities:* Information and advice, debt management, housing support, IT suite, training/meeting room, 1:1 interview room *Transport Links:* 21, 22 bus services within 1 walk from premises. **Southampton:** **REDACTED** *Facilities:* Citizen's Advice Bureau services, Macmillan Cancer Support Project, careers advice service, IT suite, training/meeting room, 1:1 interview room *Transport Links:* Bluestar 7, Bluestar 18, City Red 2 bus services within 3 minute walk from premises. **Portsmouth:** **REDACTED** *Facilities:* Accredited & Non-accredited training, ESOL classes, art therapy, health & wellbeing, IT suite, training/meeting room, 1:1 interview room *Transport Links:* 3, 12, 18 bus services, within 1 minute walk from the premises. **Brighton & Hove Digital** **REDACTED** *Facilities:* Community café, health & wellbeing support groups, IT suite, 1:1 interview room *Transport Links:* 37, 38, bus services within 1 minute walk from premises **Reading:** **REDACTED** *Facilities:* Debt management, social inclusion activities, health & wellbeing, addiction support, IT Suite, training/meeting room, 1:1 interview room *Transport Links:* 1 Jetblack, 2 Lime, 2a Lime, 26 yellow bus services, within 5 minute walk from premises **Wycombe:** **REDACTED** *Facilities:* Housing support, business information sessions, social inclusion groups, IT suite, training/meeting room, 1:1 interview room *Transport Links:* 1, 27, 30 bus services within 4 minute walk from premises. **Gloucester:** **REDACTED** *Facilities:* Debt management, legal services, information and advice, housing support, IT suite, 1:1 interview room *Transport Links:* 66 Gold, 351, 353 bus services within 3 minute walk from premises, 4 minute walk to Gloucester Train Station **Wiltshire:** **REDACTED** *Facilities:* IT *Facilities:* *Transport Links:* bus stop directly outside premises, 2, 56, 83, 11, 25, 26 bus services. We have specifically sourced multiple sites in areas of high deprivation where we expect to service a higher volume of participant. E.g. **REDACTED** & **REDACTED** in Cornwall (Cambourne & Redruth wards are in UK's 10% most deprived); 41% of Dorset's population live in rural areas which presents barriers due to poor transport links, we have identified potential 3 delivery sites to ensure a flexible location can be offered, **REDACTED**. The South West has highest proportion of people who've used drugs in the last year 10.2% compared to 8.4% England & Bristol has the highest proportion of alcohol-related admissions in CPA4. Through our relationship with **REDACTED** our delivery teams will use **REDACTED** to signpost relevant participants in Bristol for substance misuse support. In addition to **REDACTED** locations, our delivery teams will also operate from local community venues e.g. cafes, libraries and leisure centres, offering a truly flexible & responsive service to meet needs, encourage engagement & put our participants at ease. Where possible/agreed locally, we will co-locate in Jobcentre Plus (JCP) premises where we expect higher referrals, e.g. Devonport, Plymouth, Hythe, Southampton, Reading. We will also deliver in work support from employer premises (with agreements). This approach provides opportunities to deliver support in a less formal environment to support participant engagement and retention, and for participants to 'meet the employer', and build familiarity. To facilitate our outreach model, staff will be mobile and equipped to work between these sites on a flexible basis to

provide participants with a choice/access to locations that best accommodate their need. E.g. we would regularly meet participants living in remote parts of Wiltshire (high travel costs/reduced transport links) in e.g. coffee shops, local libraries. We have several customers on the provision who appreciate this flexibility/choice in meeting location due to their physical/mental health, e.g. customers suffering from anxiety & social phobias have fed back that they feel more comfortable in these environments rather than in a JCP office. Taking these small steps in places they feel safe, allows for bigger progression over the duration of the provision. **Outreach Services.** Our resource model has been developed based on staff being mobile & reaching out to work with participants in their safe environment, e.g. local to home, in a private place. In order to accommodate this, our staff will have 'office in a box' mobile technology to deliver assessments, action planning, interventions, action plan reviews and support from any location within CPA4. Key Workers (KWs) will be equipped with a laptop, mobile phone & printer. They will be trained in lone working and ensuring delivery locations meet required security/health and safety standards. This approach will provide a consistent service to all participant across the CPA, removing/reducing access barriers, e.g. for those in rural locations with poor transport links, or individuals with low level mental health (e.g. anxiety)/disabilities which restrict mobility. We recognise that health conditions can fluctuate & mobility, illness or anxiety could limit participant's ability to meet us face to face in some instances. KWs will work to overcome any barriers to face to face engagement, however, to support during these times & during out of hours, we have a blended solution of face to face, telephone & digital support. For example, participants who wish to/can set up a My Digital Passport account, with access to a range of online tools, e.g. training via Digital College, mental health support via **REDACTED**, CV builders via Digital Profile. This takes account of evolving participant preferences, e.g. we know individuals with autism typically have a strong preference for self-serve activities; learning from Working Links' prior delivery, brought across by our novated management & delivery teams, showed a strong uptake of digital services on Work Choice and Work programme, with over 10,000 participants accessing it. All digital/phone support will be balanced with face-to-face and group activities to support relationship building and effectively prepare participants for workplace interactions. For digitally excluded participants (anticipated 29% of IPES cohort, based on research by our partner **REDACTED**, we will provide digital literacy training/support to encourage digital inclusion. All delivery staff will be provided with **REDACTED**, enabling them to book rooms and touchdown in **REDACTED** serviced offices across the CPA. This will ensure staff operating more rurally are able to interact with each other to maintain morale, conduct peer-peer professional mentoring, discuss specific participant cases. **Transport Links:** We know that long travel times are a major barrier to engagement and the inconvenience in accessing services can result in high drop-out rates for voluntary participants. For this reason, we have sourced 180+ sites from which we can deliver. We have mapped our outreach premises to ensure that no participant will have to travel more than 35 minutes via public transport to access our service. Wherever possible, we will reduce this by travelling to the participant, to a location they are comfortable in. To manage this, and ensure effective use of staff time, our PM will review referrals on a weekly basis in conjunction with the KW to establish the most effective approach to managing their planned appointments that minimises travel time whilst meeting customer need. This is supported by our remote contact policies/strategies (skype, telephone, digital self-service), which helps maintain engagement/progression. **Equality Act 2010:** We have confirmed all proposed delivery premises Equality Act 2010 compliant and suitable for people with disabilities and complex needs, including e.g. all have wheelchair access. Locations have a range of facilities, including private space/1:1 room for private conversations, bookable training

rooms, hot desks for staff to touch down to update action plans or meet with partners/stakeholders, and all are WIFI enabled. Staff will be empowered to select/book the most suitable premises for their participant needs. **Suitability for IPES:** we have selected our premises based on their community locations, proximity to places of high deprivation/unemployment & accessibility via local public transport (e.g. all within a 10-minute walk of bus stop/train station). Our approach allows us to tap into local community hubs at low/no cost, enabling us to keep premises costs to a minimum and drive funding to frontline support. All hubs are already being used as centres for services (e.g. libraries) & social activities (e.g. community centres) already accessed frequently by target IPES participants, ensuring maximise service visibility/accessible. Private spaces & WIFI enabled areas ensure KWs are able to deliver a wide range of support. Premises are Equality Act 2010 compliant (suitable for people with disabilities), close to Jobcentres/other support services to improve accessibility for priority groups already engaged with local provision. Co-location e.g. **REDACTED** is co-located with staff from other agencies (e.g. probation, alcohol/drug treatment, housing etc. and supports signposting/referrals to specialist support. **Full pan CPA.** Fedcap already deliver employment support services in CPA4, providing us with detailed understanding of how to cover the entire geography. We will do this through: **1)** over 160 identified outreach locations pan CPA, ensuring a maximum travel time of 45 minutes for all participants. This includes a location in every Local Authority, including remote areas such as the Isles of Scilly where there is only Community Transport available every 2 hours at times; **2)** agreed co-locations in JCP and partner offices, integrating IPES with other service provision; **3)** flexible resource strategy that enables/encourages staff to go to participants using our 'office in a box' capabilities, learning from past contracts has shown taking the service to the participant via outreach/community venues has resulted in **REDACTED** retention rates on a voluntary contract, due to reduced barriers to engagement; and; **4)** ensuring that participant's, via *My Digital Passport*, have access and utilise online resources. Direct face-to-face delivery will be supplemented with Virtual Support delivered over the phone or online, e.g. via online chat with KW and online training modules, making our support more accessible. **Existing premises use & efficiencies.** We have completed a premises assessment to confirm capacity for IPES staff touch-down. This included: • the size (square foot), layout, accessibility and Equality Act compliance of each premises; • the current usage of office and meeting rooms; • the planned and schedule activities in the premises over the next 12 months. **Securing new premises.** We do not intend to secure any new fixed premises for the delivery of this contract. We have an agreement in place to use TGTF outreach venue, and a planned programme of due diligence checks between now and contract go-live. We will continually refresh our premises strategy to ensure that we have the right venues for participants to access. If participant demand requires, we can add to our premises network throughout the life of the contract, 'turning on' access to new spaces for group delivery and one-to-one sessions as required. **Contingency plans:** We have modelled flows by unitary authority to determine the size/number of local premises selected. If volumes via our outreach premises are higher than anticipated / increase over the contract life, our Performance Manager will identify additional locations. When negotiating lease terms and conditions, we seek the most flexible terms possible, allow us to either vacate, downsize in case of an unexpected decrease in referrals. Evidence of our management team's ability to manage such fluctuations can be seen in their delivery of Fair Start Scotland (under former company Working Links), where year 1 referrals were **REDACTED** above profile. We expanded into an additional floor in the Glasgow office on a temporary basis to accommodate this. Conversely, when referrals fell below profile for an extended period in year 3, our team rationalised our estate and adopted a blend of telephone and outreach

services, reducing the Glasgow premises back to one floor and relocating another office (Livingston) to more flexible leased premises in the community.

Questions 1.4.14 - 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 as a minimum, but not be limited to:

- A clear explanation of the Full Time Equivalent (FTE) number of staff, job title, key responsibilities, relevant skills, experience & qualifications for each role and caseload sizes per adviser.
- A clear explanation of how you will ensure the staff recruited will have relevant skills or experience.
- Where applicable, an average caseload size for each staff member should be provided with details of the types of cases and a rationale for why this is considered appropriate against your delivery proposal.
- Details of the number of existing staff and those who will need to be recruited.
- A clear description of how you 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.
- Provide a minimum staff/participant ratio along with full rationale of why you consider this staffing level is appropriate.
- How you will ensure a consistent key worker throughout each participant's time on provision including during In-Work Support, and how you will ensure full consistent cover over the whole geographical area
- A clear explanation of how you will manage sickness absences and annual leave during peak times, including contingency arrangements for managing the absence of key staff while maintaining the quality of service delivery and performance levels.
- How you will manage your staffing level as participant volumes increase and decrease over the life of the contract.

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.

Questions 1.4.14 - Human Resources, Recruitment & Training

Our staffing model leverages experience of the wider Fedcap Group & expertise from the managerial team novated from Working Links (WL). It draws on predictive caseload modelling, using analysis of participant flows, to build a detailed picture of service demand, & is based on our proven integrated health model delivered throughout our current DWP ESF Links to Work (LtW) contracts - currently achieving **REDACTED** of short job profile (rolling 6 months) & provide robust understanding of skills/time required to engage/support participants furthest from the labour market into work. Using a place-based approach our multidisciplinary teams will comprise a mix of the best employment & health expertise available, underpinned by an experienced management team; robust training via Fedcap Academy; & access to professional support/CPD opportunities. The below FTE figures refer to contract peak. **Resources to deliver/manage:** **Chief Operating Officer (COO)** (centrally costed). Our COO **REDACTED** (18 years' welfare to work experience) will have overall responsibility for IPES performance & be accountable lead/senior contact for DWP. He will oversee contract management at strategic level, with responsibility for operational delivery, quality, marketing, partnerships & health & wellbeing. **REDACTED** reports directly to **REDACTED**, **Chief Executive Officer (CEO)** for Fedcap UK. **REDACTED** has 30 years' experience delivering DWP employment contracts, successfully overseeing delivery of e.g. FND, Work Programme, Work Choice. As Fedcap UK is a small organisation, Brian will maintain direct involvement in the performance of IPES including review/sign-off of all quality management process, leading industry thought papers & maintaining senior level relationships with DWP. Our COO will be supported by our **Head of Health & Wellbeing REDACTED**, providing professional support, guidance & clinical governance to delivery staff under our integrated health model. Our COO will line manage our **Delivery Manager (DM) (indirect cost)** for the North, who will drive contract performance/quality, be direct point of contact for DWP performance manager, lead on CPRs, set budgets/targets, plan resources & conduct strategic stakeholder engagement. Our DM has over 10 years' experience managing multi-disciplinary teams to deliver employment contracts, e.g. Work Programme, LtW, Work Choice & will line manage our IPES delivery team, comprising: **Performance Manager (PM)** (2.0 FTE, in post): to oversee/drive all aspects of contract performance, maintain/implement quality improvement actions, & manage key stakeholder relationships. PMs have at least 2 years' experience of managing employment and/or health/disability programmes. **Engagement Co-ordinator (EC)**, (1. FTE) (to be recruited (TBR)): liaising with JCP and to arrange/deliver warm handovers. Our EC will be experienced in customer services, relationship management and will complete Fedcap Academy training. **Community Provision Co-ordinator (CPC)** (3.0 FTE, 1 internal transfer, 2 TBR): mapping, sourcing & reviewing **REDACTED** delivery partners & community provision to ensure it meets needs of every participant. CPCs will engage with JCP and local sign-posting organisations to generate referrals. They will possess extensive local contacts/relationships, including track record of working with JCP. **Key Worker (KW)** (11 FTE, 3 in post, 8 TBR): participants dedicated & consistent point of contact with the service, coordinating their end-to-end journey including: conducting initial assessments; identify/address their barriers & moving them towards/into employment. This includes improving participant wellbeing, increasing self-efficacy & social mobility. KWs will have a mix of employment & health specialisms & exhibit: passion for supporting people; sound judgement; flexibility; strong motivational/coaching skills; ability to manage work, health & personal issues; experience of local specialist networks; & be equipped to engage with local peers/practitioners. KWs will manage max caseloads of 33. **Occupational Inclusion Specialist** (3.0 FTE, 2 in post 1 TBR): will develop relationships with local & national employers to generate employment

opportunities that meet participant needs. They will positively influence societal perceptions about people with complex needs/disabilities, create new vacancies, support with practical workplace reasonable adjustments and empower employers to have a diverse workforce become more inclusive & Disability Confident. OIS will be from a clinical background with expert knowledge of our participants needs & have experience of working directly with employers supporting them to employ people with health issues/disabilities & in-depth knowledge of Disability Confident, Access2Work & local disability support networks. **Finance Administrator** (1.0 FTE, in post): Will assist monitoring & reporting of service, including supporting central Finance, Claims and Compliance teams and creating monthly performance reports. **Digital Engagement** (0.5 FTE, in post): will lead our digital engagement strategy, engaging participants & sign posting organisations via social media channels. Will produce monthly reports using digital engagement stats and collate good news stories (with permission) for social media and DWP. Will have a degree or significant experience in social media marketing. Delivery resources will be supported by our corporate functions e.g.: marketing; quality, IT & info. security; finance; HR; facilities; procurement; and risk assurance. These teams are managed by our Chief Financial Officer (CFO). **Ensuring staff have relevant skills/experience:** The skills, experience, behaviours & qualifications for each role are aligned with service needs, through a best practice review of related professions, e.g. vocational rehabilitation and employment support; and detailed review of the competencies of high performing KWs/OISs supporting comparable groups. Job Profiles for frontline roles are built around the principles of sound judgement, flexibility, and ability to leverage local specialist networks. Our robust/fair recruitment processes select the right people via pre-assessment, group assessment centres (with 1:1/group exercises) & competency-based interviews. **Average caseload sizes:** KW will have maximum caseloads of 33. This will allow them to invest the time & resources required to deliver intensive, personalised 1:1 coaching & support to every participant. This will include: 2 stage one-assess/one-support plan; 5 hours of structured 1:1 support/interventions for participants per month. Hours are designed to be used flexibly, with KW & participant co-designing structured support/activities. Where possible, caseloads will reflect KWs' specialisms, e.g. referrals whose primary health barrier is mental health will be assigned to a mental health specialist. KWs will work together to share expertise/professional mentor each other to ensure all participants receive consistent, expert support appropriate to their needs. At programme peak, we expect 80% of our caseload to be participants receiving pre-work support and 20% receiving in-work support. This approach is based anticipated flows across the geography, comparisons with current & WL past delivery (e.g. Work Choice had caseloads of REDACTED, we recognise for IPES we need to double the intensity of support, reducing the caseload, including in work, size to REDACTED & our primary aim to allow sufficient KW-participant time. **Existing staff:** REDACTED of our front-line delivery staff across CPA4 will novate onto this contract from existing contracts, bringing expertise, relationships & experience. We will recruit REDACTED. Exact numbers are included in role descriptions above. **Staff recruitment:** **Candidate Sourcing:** Advertising the service through specialist recruitment partners (e.g. health recruitment agencies), online, in local newspapers, on social media, via JCP and local community referral agencies; **Candidate screening:** Candidates will be screened for suitability based on their skills, experience, qualifications and attitude; **Interview/Assessment:** Group and individual sessions including interviews with Fedcap management to assess understanding of the role, competency and work-ready assessment/support principles. Candidates for management roles undertake a second interview. For selected staff, we conduct pre-employment checks to ensure all documents have been received/are satisfactory e.g. DBS checks, references. **Staff training & retention.** To ensure quality/consistency of service, all staff

will receive an intensive induction/training programme via the Fedcap Academy, including: IPES working processes and compliance; Introduction to Health, Disability & Work; Mandatory e-learning modules (Safeguarding, Equality & Diversity etc); Mental Health Awareness / Physical Health Awareness; Self-Employment pathways; Social Media training; Motivational Interviewing; Working Peripatetically; webinars showcasing best practice. This will be followed by job-specific development plans, completed over the first 6 months of delivery and delivered via Fedcap Academy partners, including e.g. training to support people with sensory, hearing, visual impairments (delivered by REDACTED services), support for people with neurodiversity issues REDACTED), welfare/benefits advice (REDACTED), support employment methods (REDACTED) We have budgeted in YR1 an initial REDACTED to put all frontline IPES employees through our IPES Academy and a further REDACTED across the life of IPES for employee development. All staff will have personal development objectives & biannual development reviews assessing their progress. Staff retention will be supported by competitive employment packages; ongoing personal development opportunities; short term secondments into continuous improvement taskforces; celebration of achievements, e.g. annual IPES awards for individual/teams; listening to feedback via our quarterly People's Forum. **Staff to participant ratio:** As a smaller company, we can achieve lower corporate costs (only REDACTED of total budget). This, & our 100% Fedcap direct delivery model, has allowed us to build a rich frontline employee to participant ratio of 1:22 which maximises Key Worker (KW) time/support for participants with the additional support of our CPC and OIS. These caseload and participant ratio sizes allow the KW to see participants at least weekly and continue the same support into the in work phase. We have modelled the numbers to deliver the CSSs and have planned for 20% of the caseload to be receiving IWS activities at any one time. **Ensuring consistent support:** All participants will be allocated a named KW who will work with them throughout their entire time on programme. This is facilitated through: low caseload sizes enabling KWs to continue support as the participant enters/progresses in work; effective caseload management system to manage caseloads equally across KWs. By investing in staff training via the Fedcap Academy, we are developing/professionalising their role & ensuring consistent motivation & commitment. KWs will have KPIs against e.g. frequency/methods of contact, action plan reviews/updates, progression rates to ensure all participants receive a consistent standard of support. We acknowledge there may be isolated cases where a change in KW is unavoidable (due to sickness, extended absence, maternity/paternity, departure). We will manage this via a managed handover, informing the participant the reasons and reassuring them of continued support, enabled via transferred case notes/file. To ensure full coverage, we have arranged our frontline teams into 3 clusters, based on Local Authority boundaries, anticipated flows & travel times. KWs will be equipped to work peripatetically across their cluster operating from outreach premises/local community venues, e.g. cafes, libraries, taking the service to the customer (to increase accessibility/engagement). This will be supported by remote support via skype, phone (KW & freephone line to central support), SMS/instant messaging, email and access to our digital support offer to help address issues of accessibility, e.g. remote rural areas, mobility restrictions. **Managing sickness/absence:** To manage absences/leave: 1) We have absence / time off procedures e.g. windows for requesting leave, rules on consecutive days absent; 2) For short term absences, we will re-arrange caseloads among staff, where this does not result in any KW having a caseload higher than 37 3) PMs manage/approve all annual leave, ensuring staff levels remain appropriate at all times. Managers are trained to identify issues/patterns that may lead to absence & intervene to reduce instances/durations, e.g. using 1:1 meetings & return to work plans. Absence levels will be monitored locally/regionally & discussed at People Forums to

identify trends/share best practice. Contingency management for key staff absence is via delegating duties to identified, trained staff, with good access to management support whilst deputising. Workforce planning mapped against participant flows will support early identification of significant variances in staffing needs. **Managing staffing as participant volumes increase/decrease:** We have profiled ramp up & down in staffing based on anticipated referral flows & volume of participants on programme. This peaks in month 16 through to month 48, where we anticipate between **REDACTED** & **REDACTED** participants will be on programme at any one time. Our staffing model reflects this, with KWs being transferred/recruited gradually rising to full capacity at month 16. Our PM will review referrals, starts & caseload sizes as part of ongoing monitoring activity. Where resourcing pressures threaten to exceed caseload tolerances of +/- **REDACTED** we will divert staff on to engagement activities to increase referrals; train staff to cover other roles if required; recruit new staff by contacting previously shortlisted candidates; utilise people from associate pools & facilitate secondments for key roles to rapidly restore stability. Where workforce planning activity identifies a need for staff reductions e.g. as contract winds down this will be managed via flexible working practices, opportunities on other contracts wherever possible, natural wastage, not renewing fixed-term contracts before considering terminating contracts.

Question 1.4.15 - Management Structure

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

Your response should include as a minimum, but not be limited to:

- An organisation chart to describe your proposed management structure for this provision, to be uploaded at question 1.4.15 as **Appendix 4**, including any directly managed subcontractor roles where applicable 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 alongside existing and potential future commitments.
- 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 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.

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.

Question 1.4.15 - Management Structure

Fedcap has delivered employment support programmes for 80+ years and supports 300,000+ people annually. In Feb 2019, we formed our UK business by novating employability contracts & staff of former welfare to work company Working Links (WL). This brought an established & experienced senior management team and proven systems & processes refined through WL's successful management/delivery of 200+ UK government programmes since 2000. **Management Structure:** Fedcap UK is led by **REDACTED** Chief Executive Officer (CEO), who will have strategic oversight of IPES CPA 4 delivery (at least 12% of time dedicated (24% if 2 Lot win) drawing on 30 years' sector experience, including Board membership of industry body ERSA. Reporting into **REDACTED**, Fedcap's Executive Team (ET) includes **REDACTED** as Chief Operating Officer (COO), **REDACTED** as Chief Finance Officer (CFO) & **REDACTED** as Head of Business Development & Strategic Partnerships. This team has combined 50+ years' experience managing employment programmes at WL & were instrumental in the success of its welfare to work contracts, e.g. **REDACTED** played a key role in supporting DWP PAT audits, achieving a strong rating in 2016. Our ET will assure IPES delivery via robust governance & strategic support/guidance around: strategic development & growth, financial/operational stability, compliance, quality, risk management, service development & innovation. Our COO will dedicate 12% of his time (24% for a 2 Lot win) to managing our IPES operational team through the following management structure: • **Head of Health & Wellbeing** (25% apportioned to IPES, centrally costed), **REDACTED** a Chartered Physiotherapist, will have oversight of all health-related delivery/interventions, including 'dotted line' management of delivery staff with a health qualification/specialism to ensure adherence to clinical governance frameworks. • **Delivery Manager (DM)** (40% apportioned to IPES, centrally costed) reporting weekly to ET, oversight of performance & dedicated point of contact for DWP Category Manager & Performance Manager. The DM will line manage **2 FTE Performance Managers (PM)** responsible for day to day delivery/performance management in assigned geography, including managing operational staff, performance against profiles (weekly/monthly reporting), quality improvement, stakeholder engagement. Our PMs have track record in successful management of employment services. • and **our Corporate Operational Support Teams** (centrally costed) including Quality, Marketing, IT and Partnerships, including our National Commissioning Manager, and Partnerships & Provision Managers who will work with local IPES Community Provisions Coordinators (CPCs) to manage specialist partner delivery. Each partner has confirmed their senior lead responsible for IPES delivery & will provide details of quality processes as part of due diligence. Partners will report to and be supported by our CPCs. Independent to the above operational management team, our CFO (12% time dedicated to IPES 24% if 2 Lot win) will manage our Central Services (centrally costed), including Finance, Claims & Validation, HR, IT & Information Security, Risk & Compliance. These functions will: provide compliance checks; interrogate MI/monitor delivery to identify issues/trends to support independent performance management. This segregation of duties ensures independent checks on performance/compliance and a clear path for whistleblowing, if required, outside of operations in line with Audit Committee requirements. Our COO & CFO will report IPES performance to Brian Bell, CEO, weekly and will deliver immediate intervention at first indication of any risk of underperformance, e.g. reallocation of resources, initiating deep dive process review. **Capacity alongside other provision:** we have a **Flexible national management structure** with capacity to focus on IPES through contract implementation/early delivery as our existing contracts wind down. Our COO/DMs will only reduce day to day involvement in IPES once delivery is fully functional, releasing capacity to focus on any future contracts won; we operate **ring-fenced budgets for each contract won**, ensuring it operates as a standalone business unit and sufficient resources are available to ensure success. E.g. 40% DM time is ring-fenced

in the IPES budget for the NE & 100% of PM time. All allocated frontline delivery staff (e.g. KWs, OISs) will work solely on IPES avoiding any impact on existing/future contracts; we have **experience & scale**, we are delivering 6 DWP ESF programmes & 2 Fair Start Scotland contracts currently with annual turnover of **REDACTED**, evidencing ability to manage multiple contracts simultaneously. All future opportunities/potential commitments are assessed against organisational capacity (financial, staffing, back office functions) prior to application/bidding to ensure we only bid for opportunities we are able to manage effectively, and then run as standalone business units with ring fenced budget, resources, profit & loss to ensure no adverse impact on existing delivery. Risks are mitigated through our Risk Management Framework which incorporates measures for early identification, risk review, corrective action plans & continuous improvement. In 2016 our senior management team described above, mobilised structures, systems & processes for 6 ESF contracts whilst maintaining delivery of 3 Work Programme (WP), 5 Work Choice (WC) & 3 MoJ Community Rehabilitation Companies. **Systems & processes used to prevent fraud:** Fedcap has a *zero tolerance against fraud*. Our systems/processes replicate those developed/used by our management team during their time at WL. These supported 100% score on WL's London Work Choice contract CMO audit (Feb '17) and 'no irregularities' rating on an Article 125 audit (March '18). We will communicate commitments to all staff, participants, partners & stakeholders reinforcing it with annual online training ensuring they understand that any suspected fraud will be investigated, & disciplinary action taken (e.g. dismissal; subcontract withdrawal) and may involve Police. We have well-publicised *Anti-Fraud* and *Whistle Blowing policies*. Should any actual/potential fraudulent activity be identified it will be recorded in a **Fraud Register** by our CFO & reported to our Exec & DWP as contractually required. **To ensure a robust evidence trail**, our PICS MI system will record all participant data including progress & claim evidence. Incomplete/overdue actions will be flagged for review to prevent the next stage of activity being completed without an audit trail. **Attendance Records/Action Plans (APs):** Action Plans (AP) will be agreed and signed by participant & KW at the first face to face meeting and uploaded to PICS. All participant subsequent contact/attendance will be recorded on APs, these will be re-signed by the participant at 4-weekly reviews. These will be stored securely in participant files along with any other evidence of attendance/to support claims, e.g. course registers, timesheets, evidence of interventions provided. KW's will update PICS to reflect agreed actions/activities, and supporting evidence e.g. job applications, course completion certificates. **Participant Consent:** KWs will gain participant consent at the initial face to face meeting, with signed forms stored securely on site/online; **Outcome Payments:** our robust multi-stage validation process supports prevention of fraud in both employment and self-employment outcomes: **Employed outcomes:** Our Finance, Claims and Validation team will forecast lower/higher achievement date based on PICS data (hours worked x hourly rate) to estimate an achievement date & compare to actual achievement date. Following employment outcome notification, Finance & Claims team will undertake a full review of in work support notes to ensure the participant is still and that they being supported. An EVT will be completed (collected by central, independent team with no performance targets) on job entry to enable PRAP entry & act as a validation of job. **Self-employed Outcome Payments:** KWs will update PICS with self-employment start/evidence (e.g. JCP benefit claim closure letter, certified copies of HMRC documents uploaded, bank statements). This will be submitted to DWP (via PRaP) within 90 days of outcome being met. Prior to submission of claims: PMs will conduct participant file checks (PICS & paper) for accuracy & evidence; our CT reviews all claims, running weekly reports to capture all appropriate files; conducts a completeness and compliance check on each participant file and evidence document; and applies a status reference to all records e.g. claim submitted, enabling tracking i.e. who

submitted the claim and claim date ensuring a robust audit trail; our Validation Team will conduct independent checks, contacting the participant to check they are still in business and their start date. We will follow the same process for Specialist Customer Record Participants. All contract data will be stored in accordance with ISO27001 principles, GDPR requirements, Information Security Policy, Data Protection, Storage & Handling Guidelines.

Question 1.4.17 - Implementation

Please provide an implementation plan in the form of a detailed Gantt Chart to be attached at **Appendix 5** showing the critical path and interdependencies with supporting narrative.

Please confirm you will be ready to receive first referrals from Jobcentre Plus on 2nd December 2019 and evidence how you will ensure the required standards for the contract are met from the start of referrals.

Your response should include as a minimum, but not be limited to:

- Confirmation of your ability to commence delivery on 2nd December 2019 (first referral date) and be ready to start providing services in Accordance with the Authority's requirements.
- Key milestones and timescales for activities including start and end dates for each activity and the position of the person responsible for each activity.
- The timeline for staff recruitment and training.
- The timeline and key activities to secure and set up your proposed delivery locations.
- A narrative to expand on the Implementation Plan which: identifies all key risks (e.g. delays to securing premises, recruiting staff, IT etc.); provides a RAG (Red, Amber, Green) rating for each of these; and explains how they will be mitigated and managed, including the timeframe for doing so to ensure that service delivery will commence on your proposed date.

Please note that a page limit does not apply to the implementation plan to be provided at **Appendix 5**.

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.

Question 1.4.17 - Implementation

Fedcap is prepared for full service go-live across CPA4 from 2nd December 2019. Evidence of our ability to meet this date & ensure contract standards are met from the start of referrals includes: **Track record**, our UK workforce have novated from former UK welfare to work provider Working Links (WL), bringing with them a wealth of experience of implementing new contracts over large/diverse geographies to time/budget. This includes: Links to Work (LtW) DWP ESF contracts in 6 CPAs (including Dorset and Swindon & Wiltshire in CPA4) worth combined **REDACTED**; 3 Work Programme contracts across Scotland, Wales & South West, requiring recruitment/TUPE of 618 staff & set up of 42 existing/21 new premises; 5 Work Choice contracts requiring readiness to support people with disabilities/health conditions within 26 weeks; **An identified Implementation Team** with key work stream leads is in post & ready to support IPES implementation immediately following contract award. This team will be led by our Project Manager (PM **REDACTED**), who has been involved throughout bid stage & has clear understanding of IPES contract requirements/our proposed delivery model; **Established local relationships** e.g. existing working arrangements with Jobcentre Plus & other signposting organisations able to support referrals from day 1; existing support catalogue of specialist services in CPA4 (added to during bid process) to help address participant barriers; employer relationships built through current delivery able to provide work experience/job opportunities from go-live. **Our Implementation Plan**, attached at appendix 5, sets out key activities, timescales, milestones, owners & interdependencies for successful implementation. It is underpinned by PRINCE2 methodology & based on timetable outlined in IPES spec, i.e. preferred bidder notification 15th August 2019, go-live 2nd December 2019. Our plan details activities already in progress, reflecting our upfront investment in 'at risk' workstreams with long lead-times, e.g. Fedcap Academy set up. Key activities, owners, milestones & dates include: **Governance**, PM, project board set up (20/03/2019), Contract negotiations (29/08/2019-04/09/2019) Legal Counsel, contract signing (04/09/2019). **Staff recruitment/training**: Staff recruitment managed by **REDACTED** Head of HR, will commence 13 weeks prior to contract start. We have already developed job descriptions for all roles & identified existing high performing staff to transition to IPES from current delivery to fill key posts, e.g. Performance Manager. Frontline roles will be advertised internally & externally by 29/08/19, interviews completed by 04/10/19. Recruitment strategies will proactively target suitable candidates through advertising via e.g. specialist local recruitment agencies. DBS clearance will be complete by 18/10/19 & job offers/acceptance confirmed 14/10/19. All staff will undergo an intensive induction w/c 11/11/19 & training via the Fedcap Academy week commencing 18/11/19. This will be managed by **REDACTED** Head of Health & Wellbeing & include delivery from key partners, e.g. **REDACTED**. This will ensure all recruited & re-deployed staff are adequately trained ahead of go-live. **Premises**, **REDACTED** Estate Co-ordinator), including arrangements for staff touchdown areas in existing premises / **REDACTED** serviced offices (via gold membership) & confirming agreement with **REDACTED** to access their 188 local community venues across CPA4 by 30/10/19. Any additional outreach site agreements will be completed by 31/10/19. **IT**, **REDACTED** Head of IT, PICS configuration (30/10/19) set up of IT hardware 15/11/19, System Configuration 02/12/19, **REDACTED** 21/10/19. **Supply Chain**, **REDACTED** National Commissioning Support Manager, sourcing & due diligence/verification checks on spot purchase partners by 21/11/19. Intervention partner Development of academy model 31/07/19, Merlin Self-

Assessment Submission 30/08/19, Development of annual stakeholder plan 09/12/19. Contract processes, **REDACTED** Quality Assurance Manager, Customer Service Standards, KPIs & reporting mechanisms 21/08/19, Validation of customer journey 24/05/19, operational/contract compliance processes 30/08/19. Stakeholders **REDACTED**, Partnerships & Provisions Manager, (handover to Community Provisions Coordinators once in post) spot Purchase negotiations 21/11/19, Conduct verification & due diligence checks 16/11/19, Ongoing identification of intervention partners to 13/05/26. Our Project Manager will review all milestones/progress via daily dialogue with implementation team & chairing weekly cross-work stream meetings. The Project Manager will report to our Executive Team fortnightly to provide progress updates, highlight risks & issues, & agree key strategic decisions. **Risks:** We have identified following risks (rated red (R), amber (A) or green (G)): **Delays to contract award / signing (G):** impacting set up time. We have invested in up front activities, e.g. identifying staff for internal transfer, in principle agreement with premises partner, **REDACTED**). This means we can be ready to deliver in short timescales. **Securing right people with right skills (A):** our HR team has worked with our Head of Health & Wellbeing to design suitable job specifications that support our integrated health model. Critical activities are already underway, e.g. upskilling existing workforce, designing candidate attraction strategies, identifying channels for sourcing candidates. Should there be any temporary staff shortfall at go-live or during ramp up we will re-deploy experienced staff from existing contracts being decommissioned &/or offer interim secondment opportunities to existing staff/partner staff. We have similar roles already in place on existing contracts to support this, e.g. existing Health Advisors can transition to IPES KW role. We have budgeted an enhanced recruitment offer (KW salaries **REDACTED** above industry average), and development opportunities to attract high-caliber candidates; **Premises Delays (G)** Our 100% outreach model includes with firm arrangements in place with TGTF's outreach facilities & additional room hire built into our Contract Cost Register (e.g. Regis Gold Membership). **IT delays (G)** Our systems are based on proven PRaP interface processes e.g. for ESF. Our IT team has already conducted initial system analysis to reflect IPES requirements & any development will be completed/fully tested by 30/10/19. We will conduct continual system testing throughout implementation & once live. Supporting our 100% outreach model, KW will use office in a box solution, arrangements with O2 for phone tethering are already in place. In 2016, we rolled out a new system on six LtW contracts, with development, full system integration, testing & training all delivered ahead of contract go live. **Specialist partner withdraws (G):** we have selected partners to deliver a combination of staff training & specialist spot purchase support for participants, with 100% of end-to-end delivery provided in-house by Fedcap. This minimises risk to service implementation/quality. If a specialist partner withdraws, we will revisit the 60+ expression of interests received from potential partners & invite additional Eols from our Approved Partner Framework, applying our merlin compliant selection process. All partner organisations will undergo due diligence/verification to identify any risks/areas of concerns/development prior to contract start. We will agree Service Level Agreements (SLAs) with key partners, covering quality, performance, anticipated volumes, set up timelines, fees & payments. **Difficulties engaging JCP/Signposting orgs (R):** We have profiled/planned recruitment of Community Provisions Coordinators (CPCs) from 11/11/19 date to begin engaging JCP / signposting organisations to market IPES prior to go-live; **Changes in political landscape (A):** impacting e.g. employers' ability/willingness to grow/recruit. Our Occupational Inclusion Specialists will work with employers from contract

award to support growth strategies/build confidence in recruiting disabled people. All risks will be managed using Government Commerce Management of Risk (MoR) principles. Our Project Manager will collate risks from implementation team partners, key local stakeholders. Risks will be analysed/scored against likelihood / impact each week & cross-referenced with our corporate Regional Risk Register. Mitigating actions will be identified, implemented & monitored. Risk Registers are reviewed by our Chief Finance Officer, with significant risks escalated to Executive Team. Post go-live, we will continue to manage risks as described. All changes to service delivery, e.g. new partners in response to local needs, will be managed via change control process overseen by our Chief Operating Officer, in line with DWP processes.

Question 1.5.2 - Delivering a Personalised Service Tender Assurance

Provide an example of when you have delivered a personalised employment support service to a participant with complex needs and/or multiple barriers to work. **You should redact all participant personal data that you provide to DWP as part of your responses.** Your example should be drawn from your DWP Employment Programme Contract, and should include as a minimum:

- How you identified the complex needs and/or barriers to work;
- How you identified and allocated an advisor/member of staff with the appropriate skills and qualifications;
- The nature and extent of the tailored and in depth support you identified and provided;
- How you monitored and adapted the support over the full length of provision;
- How you ensured continuity of support for the participant;
- The progress that was made towards meeting the participant's complex needs and/or overcoming the participant's barriers to work;
- The overall outcome for the participant;
- The lessons you learnt and how you embedded these lessons into your ongoing delivery.

The answer to this Tender Assurance ITT Question will be included in the quality evaluation but will **not** be subject to Commercial Dialogue or open for amendment in the IPES Final Offer.

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.

Question 1.5.2 - Delivering a Personalised Service Tender Assurance

Section redacted in entirety

**Question 1.5.3 - Stakeholder Engagement & Management Process
Tender Assurance Question**

Explain how you built strong working relationships with a network of diverse stakeholders to support the delivery of your DWP Employment Programme Contract. **You should redact all participant personal data that you provide to DWP as part of your responses.** Your response should include as a minimum:

- How you developed a knowledge of national and local stakeholders and identified which of the stakeholders' services were relevant to the participants under the programme;
- How you ensured participants, across the entire geographical area of your DWP Employment Programme Contract, were able to access support from stakeholders;
- How you identified any risks and challenges in the operation of the stakeholder network and how you responded to ensure delivery was not adversely affected;
- The lessons you learnt and how you embedded these lessons into your ongoing delivery.

The answer to this Tender Assurance ITT Question will be included in the quality evaluation but will **not** be subject to Commercial Dialogue or open for amendment in the IPES Final Offer.

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.

Question

Section redacted in entirety

Question 1.5.4 - Jobcentre Plus Engagement Process Tender Assurance Question

Explain how you developed and maintained a strong relationship with Jobcentre Plus in order to assist in the delivery of services to participants under your DWP Employment Programme Contract. **You should redact all participant personal data that you provide to DWP as part of your responses.** Your response should include as a minimum:

- How you worked with Jobcentre Plus in order to obtain a clear understanding of participants needs and/or barriers to work;
- How you supported participants during the transition from Jobcentre Plus to your organisation in order to foster the confidence of participants;
- How you ensured ongoing interventions with Jobcentre Plus were tailored and meaningful in order to improve the support provided to participants;
- The steps you took to ensure services could continue to be delivered to participants during periods when Jobcentre Plus was less able to provide support (e.g. due to pressures on Jobcentre Plus resources, system outages, etc.);
- The lessons you learnt and how you embedded these lessons into your ongoing delivery.

The answer to this Tender Assurance ITT Question will be included in the quality evaluation but will **not** be subject to Commercial Dialogue or open for amendment in the IPES Final Offer.

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.

Question

Section redacted in entirety

Question 1.5.5 - Employer Engagement Process Tender Assurance Question

Explain:

- i. how you successfully engaged with national employers in order to support participants to find work, and
- ii. how you successfully engaged with local employers in order to support participants to find work.

Each response should be drawn from your DWP Employment Programme Contract, and should include as a minimum:

- How you engaged with the employers;
- How you selected employers and ensured employers would be appropriate for each participant;
- How your organisation worked with employers to support participants while the participants were in work in order to ensure employment was sustained;
- The lessons you learnt and how you embedded these lessons into your ongoing delivery.

You should redact all participant personal data that you provide to DWP as part of your responses

The answer to this Tender Assurance ITT Question will be included in the quality evaluation but will **not** be subject to Commercial Dialogue or open for amendment in the IPES Final Offer.

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.

**Question 1.5.5 - Employer Engagement Process Tender Assurance
Question**

Section redacted in entirety

Question 1.5.6 - Service Delivery – Adapting to Change Tender Assurance Question

Provide an example of when you have successfully adapted your delivery and/or business model to respond to significant changes in external factors outside of your control (e.g. changes relating to politics, local demographics, or the economy). Your example should be drawn from your DWP Employment Programme Contract, and should include as a minimum:

- The process you followed to deliver that response effectively;
- The risks associated with the process which you used;
- How you ensured your delivery of services to participants was not affected;
- How you ensured you continued to meet the performance and service levels of your DWP Employment Programme Contract;
- The timeframes in which you managed the change;
- The lessons you learnt and how you embedded these lessons into your ongoing delivery.

You should redact all participant personal data that you provide to DWP as part of your responses

The answer to this Tender Assurance ITT Question will be included in the quality evaluation but will **not** be subject to Commercial Dialogue or open for amendment in the IPES Final Offer.

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.

**Question 1.5.6 - Service Delivery – Adapting to Change Tender
Assurance Question**

Section redacted in entirety

**Question 1.5.7 - Performance Management – Continuous Improvement
Tender Assurance Question**

- i) Explain what steps you took, under your DWP Employment Programme Contract, to continuously improve the ways in which you delivered the contractual services to participants throughout the entire contract period, and how this directly contributed to performance improvement (i.e. improvement to contractual Minimum Performance Levels (MPLs) / Key Performance Indicators (KPIs)).

Your response should include as a minimum:

- How you identified the area(s) where changes could be made in order to improve service delivery and performance;
- The process you adopted for implementing the changes needed to improve service delivery and performance;
- How you monitored the effect of the changes you made;
- The lessons you learnt and how you embedded these lessons into your ongoing delivery.

- ii) Provide an example of how you recovered performance after a significant failure to meet contractual Minimum Performance Levels (MPLs) / Key Performance Indicators (KPIs), this must demonstrate a failure that resulted in you implementing internal performance improvement activity. Your example should be drawn either from your DWP Employment Programme Contract, or another contract that you hold with DWP for the delivery of employment related services.

Your example should include as a minimum:

- How you identified the nature and scale of the underperformance;
- The approach you took to improve performance and the timescales that were involved
- How you monitored progress and the reporting arrangements you put in place
- The lessons you learned and how you embedded these lessons into your on-going delivery

You should redact any participant personal data that you provide to DWP as part of your response.

The answer to this Tender Assurance ITT Question will be included in the quality evaluation but will **not** be subject to Commercial Dialogue or open for amendment in the IPES Final Offer.

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.

**Question 1.5.7 - Performance Management – Continuous Improvement
Tender Assurance Question**

Section redacted in entirety