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# SERVICE SPECIFICATION

FOR THE PURCHASE OF

**Kent Integrated Domestic Abuse Service**  
**(1<sup>st</sup> July 2016 – 31<sup>st</sup> March )**

This document defines the  
Kent Integrated Domestic Abuse Service  
purchased by Kent County Council on xxxxxx

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## 1. Introduction

- 1.1. The overarching aim for the jointly commissioned, integrated domestic abuse service is to reduce the impact of domestic abuse on families and communities within Kent and Medway, and keep people safe.
- 1.2. The service will work in partnership to deliver needs led, value for money, high quality domestic abuse support services. The service will be free at the point of access.
- 1.3. KCC is the contracting authority for the Kent Integrated Domestic Abuse Service, working on behalf of the domestic abuse commissioning partnership.
- 1.4. For the purposes of this service, Domestic Abuse includes Domestic Abuse in accordance with the Home Office definition, Stalking, Honour Based Violence, Forced Marriage and Female Genital Mutilation (FGM).
- 1.5. The partnership recognises the valuable role that the service provider fulfils in the promotion of services both within the scheme and within the community. The services funded through this agreement (“the Service/s”) are specified in this service specification (“Service Specification”).
- 1.6. The Service will be required to work in conjunction with Local Housing Authorities, Social Landlords, criminal justice agencies, healthcare organisations and other relevant partner agencies.
- 1.7. Services commissioned by KCC will focus on improving lives by ensuring every pound spent in Kent is delivering better outcomes for Kent’s residents, communities and businesses.
- 1.8. The commissioning partnership reserves the right to review the content and detail of the Service Specification on an annual basis to take account of changes in national policy, priorities and funding. This agreement does not prevent either of us entering into other agreements or contracts for specific negotiated services.

## 2. Service Outcomes

- 2.1. The Service Provider will work in partnership to contribute towards the following outcomes and will consider all opportunities to enhance the aims of the service outcomes:
  - 2.1.1 Mental and Physical Health
  - 2.1.2 Shelter and Accommodation
  - 2.1.3 Family, friends and children
  - 2.1.4 Education, skills and employment
  - 2.1.5 Drugs and alcohol
  - 2.1.6 Finances and benefits
  - 2.1.7 Outlook and attitudes
- 2.2. To support victims of domestic abuse in coping with the immediate aftermath of abuse and empower them to recover from the long term affects of that abuse, with consideration to;

#### 2.1.8 Social interactions

- 2.3. Improved capacity to establish and maintain independent living.
- 2.4. A reduction in the need for interventions by Social Care, Health and Wellbeing Services.
- 2.5. A reduction in level of harm caused by domestic abuse
- 2.6. A reduction in homelessness/repeat homelessness and placement in temporary/emergency accommodation amongst people at risk of Domestic Abuse in Kent.
- 2.7. Effective promotion of the wider impact of domestic abuse.

### 3 Service Objectives

- 3.1 The Service Provider will deliver efficient and effective interventions that meet the needs of service users and contribute to the service outcomes outlined above. The service must be closely integrated with other local services and support networks for children, adults and local communities. In doing this the service must work to:
  - 3.1.1 Reduce the risk of harm posed to victims of domestic abuse in Kent and Medway
  - 3.1.2 Support and enable service users to reduce their dependency on statutory services, by acquiring independent living skills and improving self-reliance,
  - 3.1.3 Empower service users to get the most out of services, maximise opportunities and support their re-integration into local communities,
  - 3.1.4 Provide a seamless journey of support for all service users,
  - 3.1.5 Work closely with Social Care, Health and Wellbeing Services and healthcare services (such as Mental Health Service, Health Visitors, Children's Centres) to enable service users to improve their physical and mental wellbeing, and improve personal, social and family functioning,
  - 3.1.6 Work in partnership with a range of local voluntary and community sector (VCS) organisations to deliver required outcomes in each locality,
  - 3.1.7 Provide a safe and supportive environment for service users which is sensitive, non-judgemental and non-oppressive.
  - 3.1.8 Promote, establish and maintain clear and effective pathways to access appropriate support groups and supplementary services and ensure suitable access for those who need them, especially vulnerable groups and / or individuals,
  - 3.1.9 Build links with local primary care services, health and social care professionals to ensure clear referral pathways,
  - 3.1.10 Assess the needs and safety of children living with service users and provide access to appropriate support, working to enhance parenting practice and improve outcomes for families.
  - 3.1.11 Establish and maintain professional and appropriate working relationships with Local Housing Authorities, Registered Social Landlords, providers of private accommodation, training and education providers, DWP and Job Centre Plus, and other appropriate services
  - 3.1.12 Support and promote the use of peer networks at all stages of service delivery and following move on, to promote capacity building
  - 3.1.13 Implement effective practices and integrated approaches to safeguard vulnerable adults in line with the Care Act 2015,

- 3.1.14 Promote stable lifestyles, community cohesion, social inclusion, and physical and mental wellbeing,
- 3.1.15 To meet the needs of 'hard to reach' groups, including, but not limited to those from LGBT communities, male victims, those from Minority Ethnic Communities and gypsy travellers.
- 3.1.16 To galvanise and develop a co-ordinated community response, forging links with organisations outside of those traditionally working with survivors of domestic abuse to progress wider education and awareness, and reintegration of service users into local communities and workplaces

#### 4. Referral and Assessment

- 4.1 Referrals should be accepted from a wide range of sources including but not limited to the Police and Criminal Justice services, Local Housing Departments, Families and Social Care, Health Services, and service users themselves.
- 4.2 The Service Provider must undertake an appropriate level of screening for the service and will assess and manage risk when accepting referrals.
- 4.3 The comprehensive assessment will:
  - 4.3.1 Undertake a full and appropriate risk assessment, which includes risk of self-harm and harm to others, and implement measures to reduce risk and increase safety,
  - 4.3.2 Identify the service users' immediate and long term needs and goals,
  - 4.3.3 Identify relevant family issues that may have an impact on the ability of the service user to establish and maintain independent living,
  - 4.3.4 Establish which other agencies are involved with the service user,
  - 4.3.5 Establish whether any risk management plans are currently in place, and ensure that all management plans are complementary,
  - 4.3.6 Identify any need for and make referrals to other services (e.g. mental health, counselling or sexual health services),
  - 4.3.7 Ensure that the service user has read and understood how information about them will be handled and shared,
  - 4.3.8 Recognise and build on existing skills and networks

#### 5. Support Planning and review

- 5.1 The service provider must work with the service user (and other parties as necessary) to develop and agree a support and risk management plan on the basis of the comprehensive assessment.
- 5.2 At the support planning stage, service users must receive sufficient, proportionate information, which may include:
  - 5.2.1 Details about the service,
  - 5.2.2 Details of service user involvement, peer support and carer support,
  - 5.2.3 General expectations,
  - 5.2.4 Code of conduct,
  - 5.2.5 Policies and protocols regarding suspension or exclusion from support, including eviction for the accommodation based elements of the service,

- 5.2.6 Health and Safety,
  - 5.2.7 Support Planning and Risk Assessment,
  - 5.2.8 Safety Planning,
  - 5.2.9 Safeguarding,
  - 5.2.10 Move on options and planning (for accommodation based elements),
  - 5.2.11 Emergency Procedures,
  - 5.2.12 Summary of clients goals and the activities that will be undertaken to enable the service user to achieve them,
  - 5.2.13 The complaints procedure
- 5.3 The Service Provider must ensure suitable and appropriate support is in place for all service users, and that needs are reviewed throughout the duration of support.

## 6. Interventions/ Support Packages

- 6.1 In working towards delivering the service outcomes and aims, the service must, as a minimum offer the following support options, with appropriate involvement of local partners:
- 6.1.1 Flexible support provision which responds in a timely fashion to the changing needs of service users and their families,
  - 6.1.2 A holistic triage and assessment service, in collaboration with other Kent and Medway agencies, to identify risk and support needs and divert service users to the appropriate elements of the service,
  - 6.1.3 Appropriate, tailored support to meet the needs of 'hard to reach' groups, including, but not limited to those from LGBT communities, male victims, those from Minority Ethnic Communities and gypsy travellers, including the provision of safe accommodation as required,
  - 6.1.4 Through partnership working, delivery of outreach support to domestic victims residing in the community,
  - 6.1.5 To provide coordinated, suitable access points in local communities across Kent to facilitate access to information and support
  - 6.1.6 The availability of qualified IDVAs to support high risk Domestic Abuse victims
  - 6.1.7 Working with local partnerships, delivery and facilitation of therapeutic and supportive activities to promote independence and future healthy relationships
  - 6.1.8 Clear links and referral pathways to specialist support services for children and young people affected by, or at risk of, domestic abuse
  - 6.1.9 Through partnership working, access to a Sanctuary Scheme to facilitate greater safety for service users choosing to remain in their accommodation
  - 6.1.10 Support for victims and their children in a variety of accommodation settings, based across the County to include refuge and 'safe' accommodation,
  - 6.1.11 A Private Sector Rented Access Scheme (to incorporate deposits, bonds and guarantees as appropriate) predominantly to support people moving on from refuge accommodation to obtain suitable move on accommodation,
  - 6.1.12 Resettlement provision to support people moving on from refuge and temporary accommodation,

6.1.13 Innovative social marketing campaigns and activities to raise awareness of domestic abuse issues within the wider community

6.1.14 Contribute towards the Kent and Medway Domestic Abuse Training Programme

## 7. Eligibility Criteria

7.1 The service is open to residents of Kent aged 16 and over, and their families, or those moving to Kent to flee violence and abuse.

7.2 In exceptional circumstances, and with the support of Social Care agencies, support may be offered to clients under the age of 16

## 8. Priority Groups

8.1 In cases where a waiting list to access the service is operating, it should be managed based on the level of need of the service user, and the risk that they are facing. Waiting lists should not be managed based on the length of time a service user has been waiting.

8.2 When service users are on a waiting list it is the service provider's responsibility to fully assess the risks that they are exposed to and devise a comprehensive safety plan.

8.3 Regular contact with service users on the waiting list must be maintained to monitor changing levels of risk, and facilitate access to alternative, interim services.

## 9. Exclusions

9.1 It is expected that this service will support clients with substance misuse, mental health and offending backgrounds, but in instances where the level of risk and/ or need is deemed to be too high to manage by the service in isolation, the service user should be supported to access more appropriate specialist support, by working in partnership with other service providers.

9.2 The service is not expected to routinely support clients with no recourse to public funds, particularly in refuge accommodation, although each case should be considered on its individual merits.

## 10. Exit

10.1 Exit from the service should be planned, with levels of support reduced gradually until clients are able to live independently. In cases where additional support is required following cessation of the service, the support provider should facilitate links with appropriate agencies and support the service user to access these.

## 11. Settings

11.1 The Service will be delivered in locations that are accessible to service users resident in Kent and will demonstrate a balance of provision to meet local need. This will include provision for outlying areas.

11.2 The Service will utilise existing refuge settings,

- 11.3 The Service will operate during evenings, weekends and bank holidays where demand necessitates.
- 11.4 The Service Provider shall endeavour to ensure that a range of other suitable community settings are used for improved access and engagement.
- 11.5 Delivery of services, and settings used must take into account the differing needs of less represented groups within the sector such as male victims, LGBT victims and gypsy/ traveller victims.

## 12. Equality, Diversity and Accessibility.

- 12.1 All service users, irrespective of age, disability, gender, gender identity, race, religion or belief, sexual orientation, pregnancy and maternity, marriage and civil partnerships should be able to secure access to the same services as the rest of the population.
- 12.2 In the delivery of any services commissioned on behalf of KCC, Service Providers must demonstrate awareness and be responsive to the accessibility and needs of groups described above either in or attempting to access services.
- 12.3 Accessibility relates to (but is not limited to); physical and mental impairment, communication needs, those with a hearing or sight impairment, translation / interpretation if English is not a first language, the expectation with regards to acceptance of individuals defined under gender identification and respect of faith and beliefs.
- 12.4 The Equality Act 2010 replaces the Disability Discrimination Act 1995 (reviewed 2005). Proof of compliance will be required in the form of a current and up to date Access Audit with an action plan outlining any needs and how these will be addressed.
- 12.5 The Service Provider will be required to collect and submit equalities monitoring information on a quarterly basis. This will be used to ensure that all clients regardless of protective characteristics are accessing the service.
- 12.6 The Service Provider shall be required to complete an Equality Impact Assessment (EqIA) annually. The EqIA will cover these characteristics: Age, disability, gender, gender identity, race, religion or belief, sexual orientation, pregnancy and maternity, marriage and civil partnership which need to be assessed against delivery.

## 13. Reporting

- 13.1 To enable accurate and timely reporting to the Commissioner, the Service Provider must ensure that all relevant output and outcome data is recorded and submitted. The Service Provider must ensure that the relevant information complies with requirements for submissions.
- 13.2 Meets the specified data quality standards.
- 13.3 The Service Provider must ensure prompt reporting of activity.

## 14. Service Development

- 14.1 This service will be expected to respond in a timely fashion to changing developments in the sector, evolving to deliver innovative and effective interventions in line with evidenced best practice.



- 14.2 Internal performance reporting must be robust, and able to identify changing demands and needs, with available interventions tailored to meet the needs of the local community.
- 14.3 Changes to the service delivered should be instigated through consultation and collaboration with commissioners, local partners, stakeholders and service users.

### 15. Service Delivery Standards

- 15.1 The needs of service users and risks are assessed on a consistent and comprehensive basis prior to a service being offered, or very shortly afterwards as appropriate.
- 15.2 Needs/risk assessments and support/risk management plans are reviewed regularly.
- 15.3 Needs and risk assessment, packages of support and reviews involve service users and take full account of their views.
- 15.4 Staff carrying out needs and risk assessments are competent to do so.
- 15.5 There is a health and safety policy which is in accordance with current legislation.
- 15.6 The service has a co-ordinated approach to assessing and managing security, health and safety risks that potentially affect all service users, staff and the wider community.
- 15.7 There are appropriate arrangements to enable service users to access help in crisis or emergency.
- 15.8 There are robust policies and procedures for safeguarding in accordance with current legislation, and staff are aware of policies regarding safeguarding and have an understanding of abuse.
- 15.9 Staff are made aware of and understand their professional boundaries.
- 15.10 The service is committed to participating in a multi-agency approach to safeguarding.
- 15.11 Fair access, fair exit, diversity and inclusion are embedded within the culture of the service.
- 15.12 The assessment and allocations processes ensure fair access to the service.
- 15.13 There is a commitment to ensuring fair exit from the service.
- 15.14 Service users are consulted on changes which affect the service they will receive.
- 15.15 Service users are encouraged to participate in the wider community.
- 15.16 There is a written complaints policy and procedure that is linked to service development.
- 15.17 Through partnership working, the service will be outward looking, reaching out to the wider community to embed the support of domestic abuse victims across all areas of the local community, including community groups, local enterprise and businesses.
- 15.18 The service will focus on building self-reliance and resilience within service users, moving away from a culture of dependence.

## 16. Policies and procedures

- 16.1 The Service Provider must have in place suitable and appropriate policies, procedures and protocols covering the following areas:
- 16.1.1 Domestic Abuse Workplace Policy,
  - 16.1.2 Safeguarding children,
  - 16.1.3 Safeguarding adults,
  - 16.1.4 Complaints and Grievances (staff and service users),
  - 16.1.5 Service user and carer complaints,
  - 16.1.6 Equalities and Diversity,
  - 16.1.7 Business continuity and emergency planning,
  - 16.1.8 Health and Safety,
  - 16.1.9 Induction and Training,
  - 16.1.10 Recruitment and Selection,
  - 16.1.11 Disciplinary / Capability (staff),
  - 16.1.12 Data Protection, Confidentiality and Information Security,
  - 16.1.13 Serious Incidents,
  - 16.1.14 Workforce supervision, appraisal and/or performance management,
  - 16.1.15 Peer support and volunteering (including handling of expenses for service users and carers),
  - 16.1.16 Bullying and Harassment ,
  - 16.1.17 Professional boundaries,
  - 16.1.18 Risk assessment and risk management.

## 17. Mental Health

- 17.1 Service users with a mental health diagnosis often have multiple and complex needs, which require a comprehensive, coordinated, seamless, multi-agency response.
- 17.2 Through partnership working, the Service Provider must:
- 17.2.1 Contribute to the development of clear pathways with mental health services to improve access to appropriate services for those identified with Mental health problems. In particular the service will develop robust joint working protocols with the Community Mental Health and Wellbeing Service.
  - 17.2.2 Ensure staff have appropriate levels of training in mental health issues.

## 18. Substance Misuse:

- 18.1 Service users with substance misuse problems may present with multiple and complex needs. These clients require a multi-agency response with joint working between substance misuse treatment agencies to coordinate support.

## 19. Healthcare Services

- 19.1 Service users may present with other healthcare needs which require support from healthcare services. Often this will need a coordinated response. Working in partnership, the Service Provider must contribute to the development of clear pathways with healthcare services to improve access to appropriate services for those identified with other healthcare needs.

## 20. Access to Information and Confidentiality

- 20.1 The Service Provider must comply with the Kent and Medway Information Sharing Agreement and the Data Protection Act 1998.
- 20.2 Information collected and recorded by the Service Provider (or sub-contractors) in regard to service users who engage with the service will be made available to commissioners in line with the Kent and Medway Information Sharing Agreement.
- 20.3 Commissioners will make anonymous any data and information gained as a result of this access. Any information obtained is for the sole purpose of informing the continued development and improvement of commissioned services.

## 21. Partnership Working

- 21.1 The service provider is expected to contribute towards domestic abuse partnership agendas, including involvement in County and Local domestic abuse groups.
- 21.2 The service provider is expected to work in partnership with the full range of suitable organisations to deliver the outcomes required within this specification, co-ordinating partners to eliminate duplication and gaps in service provision.
- 21.3 Representatives from the Service Provider are expected to attend relevant establishment and/or partnership meetings to improve the effectiveness of the service.
- 21.4 The Service Provider will be required to work in close collaboration with any persons appointed by commissioners to undertake an evaluation of the Service.

## 22. Sub-Contracting Arrangements

- 22.1 Sub-contracting and partnership arrangements are actively encouraged within this contract, with the service provider taking responsibility for managing performance of sub contractors, and for ensuring that the delivery network has the flexibility to respond effectively to fluctuations in demand.
- 22.2 The Service Provider must ensure the effectiveness and efficiency of the service and will remain accountable for all services whether provided directly or sub-contracted to other providers.
- 22.3 The Service Provider must ensure that any sub-contractors have the necessary registrations and licences needed to provide regulated interventions and comply with the specification.

## 23. Capacity or Service Delivery Issues

- 23.1 The Service will be required to ensure that there are appropriate staffing arrangements in place to deliver the service.

- 23.2 The Service Provider will alert commissioners to any capacity or service delivery issues in a timely and appropriate way.
- 23.3 The Service Provider must inform KCC of any urgent issues that arise and will work with the commissioning partnership to agree and implement solutions as necessary. This may include the rerouting of resources as necessary.

#### 24. Serious Incidents

- 24.1 Serious incidents requiring investigation are:
- 24.1.1 Unexpected or avoidable death of one or more service users and their dependants or staff or visitors.
  - 24.1.2 Serious harm to one or more service users or staff, visitors or members of the public where the outcome requires life-saving intervention, major surgical/medical intervention, permanent harm or will shorten life expectancy or result in prolonged pain or psychological harm.
  - 24.1.3 A scenario that prevents or threatens to prevent the Service Provider's ability to continue to deliver this service, for example, actual or potential loss of personal/organisational information, damage to property, reputation or the environment, or IT failure.
  - 24.1.4 Allegations of abuse.
  - 24.1.5 Adverse media coverage or public concern about the organisation.
  - 24.1.6 Serious incidents involving controlled drugs.
  - 24.1.7 Breach of information security.
  - 24.1.8 Breach of professional standards.
- 24.2 The Service Provider must ensure that serious incidents are reported to KCC, using the relevant reporting mechanism.
- 24.3 Serious incidents should also be reported to KCC via email.
- 24.4 The Service Provider must attend any relevant Serious Incident meetings as required by the commissioning partnership. The outcome of Serious Incident investigations should inform agency improvement programmes if they are highlighted and evidence of these improvements should be provided.

#### 25. Safeguarding

- 25.1 The Service Provider must comply with the requirements of the Care Act 2015, associated regulations and guidance, taking appropriate action.
- 25.2 The Service will have policies and procedures in place to deal with Safeguarding issues. The policies and procedures safeguard service users from any form of abuse or exploitation and staff will be familiar with and follow these procedures.
- 25.3 The service will comply with the requirement of the Kent and Medway Multi-agency Safeguarding Adults Policy, Protocols and Guidance, and the Kent and Medway Safeguarding Children Policy.
- 25.4 When any Safeguarding issue is suspected the Provider will immediately notify KCC of relevant actions or decisions.

## 26. Service User and Public Involvement

- 26.1 Service User involvement is integral to the development and delivery of the service. The service provider is expected to ensure that service users have meaningful opportunity to contribute to service development.
- 26.2 Service users must be consulted if changes to the service are proposed. The service provider must ensure that service users are supported to participate in any remote consultations conducted.

## 27. Workforce Development

- 27.1 Developing a competent workforce is crucial to ensuring a high standard of service delivery for service users.
- 27.2 The Service Provider will be able to demonstrate that an appropriate level of funding is allocated to the training and development of staff at all grades, including managers.
- 27.3 The Service Provider will have a Workforce Development Strategy in place. This must include:
- 27.3.1 Trainee protocols to ensure:
- 27.3.1.1 All trainees are fully competent within two years.
- 27.3.1.2 No trainee works with service users until fully competent to manage the support needs of the individual concerned.
- 27.3.2 An annual Training Needs Analysis and actions plans to ensure:
- 27.3.2.1 All workers and their line-managers are competent.
- 27.3.2.2 Continuous professional development of the workforce.
- 27.3.2.3 All workers and their line-managers have completed, or are undertaking, a training course regarding child protection that is consistent with the Kent and Medway multi agency procedures and any new guidance or legislation that may be introduced. This must be undertaken as a minimum biannually.
- 27.3.2.4 All line-managers have completed, or are undertaking, a training course in line-management.
- 27.3.2.5 All workers and their line managers are competent in the requirements of working with adolescents
- 27.3.2.6 All workers and their line managers are competent in the requirements of the Kent and Medway Information Sharing Agreement.
- 27.4 The Service Provider must record evidence of competence of all staff employed. This must include core generic competence to work with adults and/or children & young people (depending on their client group).
- 27.5 The service will employ appropriately trained and qualified staff, with sufficient expertise in domestic abuse, mental health, substance misuse and family work.
- 27.6 Qualified IDVAs must be employed as part of this service.

## 28. Workforce Compliance

28.1 The Service Provider will be required to submit workforce statistics and evidence of workforce competence to KCC on request.

## 29. Workforce Recruitment

29.1 During recruitment all job descriptions, person specifications and recruitment processes will be expressed in line with relevant legislation and guidance.

## 30. Communications

30.1 The Service Provider must have in place a comprehensive communications plan and structure. It should include, but is not limited to:

30.1.1 Proactive communications.

30.1.2 Quick and effective responses to media enquiries, of which commissioners must be informed and kept up to date at all times.

30.1.3 Innovative and appropriate communications activity to effectively engage service users.

30.1.4 Regular communications with partners regarding ongoing support provision and access to services.

30.2 The Service Provider is expected to participate in local Public Health activities, campaigns and initiatives such as sexual health campaigns etc.

## 31. Environment and Sustainability

31.1 The service should seek to operate in an environmentally sustainable way and minimise any adverse environmental impact it causes.

31.2 The Service Provider is expected to be prepared for changing climate and should have in place a robust environmental policy and risk based approach that covers the climate impact.

## 32. Business Continuity and Emergency Planning

32.1 The Service Provider must have comprehensive and adequately tested business continuity plans in place in order to ensure continuation of critical services in the event of severe weather, adverse event or major service disruption.

### 33. Performance Management Overview

- 33.1 The Service Provider must performance manage the service effectively in order to ensure that it meets the required standards, delivers the necessary outputs and contributes to the required service outcomes.
- 33.2 KCC will make payments for the service one month in arrears subject to satisfactory performance.
- 33.3 The Provider is required to submit Performance Indicator returns in the prescribed format quarterly within fourteen days of the quarter period end.
- 33.4 Performance Management Meetings will take place on a quarterly basis, during which outputs, outcomes and key themes will be explored.

### 34. Performance Monitoring

- 34.1 Performance in delivering the service outputs and outcomes will be measured by;
  - 34.1.1 Activity and performance monitoring data submitted by the Service Provider.
  - 34.1.2 Unit costing data and value for money information.
  - 34.1.3 Feedback from service users, carers and other stakeholders including complaints, comments, compliments, survey information.
  - 34.1.4 Attainment of prescribed quality standards.
  - 34.1.5 Achievement against outcome standards
- 34.2 The Provider will adhere to the performance targets set by the commissioners.
- 34.3 The Provider will work collaboratively with other agencies and partnerships and actively coordinate the wider contribution to both operational and strategic targets and outcomes.
- 34.4 It is envisaged that the Service shall be subject to formal evaluation through Service Review visits before the contract end date. Such visits may be planned or unannounced and will assess the service against performance targets.