



London Borough of Enfield

Report title:	Provision of occupational health service
Report to:	Director of HR
Date of Meeting:	N/A
Cabinet Member:	
Directors:	Tinu Olowe/Ian Davis
Report Author:	Julie Mimmagh, Head of HR Operations
Ward(s) affected:	
Key Decision Number	5714
Implementation date, if not called in:	By 1 July 2024
Classification:	Part I Public

Purpose of Report

1. The current contract to provide an occupational health service (OHS) and confidential employee counselling service (EAP) is due to expire on 30 June 2024. This report provides detail of the support provided, its relevance to the Councils workforce and recommends procuring a new contract to start on 1 July 2024 via a mini-tender process utilising an existing framework.

Background and Options

2. The provision of an occupational health service is an essential tool to enable employers to meet their statutory obligations with regards to health and wellbeing and health & safety issues in the workplace and identify preventative measure that can be considered to minimise the risk of

sickness absence and an employees' capability to perform the duties required of their post.

3. Occupational health is a key tool for employers particularly in relation to:
 - a. Ensuring the employer meets its statutory obligations in respect of employee health and well-being
 - b. Protecting the employees from harm and providing guidance and expert advice to creating healthy workplaces
 - c. Conducting pre-employment health assessments to ensure the employer employs people who are fit to undertake the duties of the role being offered to them
 - d. Supporting the employer to reduce sickness absence by supporting early intervention and provision of relevant supporting advice to managers
 - e. Ensuring effective rehabilitation and return to work strategies are in place
 - f. Ensuring the employer are working towards preventing ill health and improving employee health
 - g. Ensuring early intervention is provided in respect of ill health, reducing the need for sickness absence
 - h. Identifying the right reasonable adjustments for disabled people at work
 - i. Providing independent medical assessment relating to Ill-Health Retirement.
4. The Council's current contract to supply occupational health services with Medigold is due to expire on 30 June 2024. The contract spend is approximately £197,000 per annum and was last procured in 2018 for a term of 3 years with the option to extend for a further 1+1 years.
5. The principal requirement of this contract is to provide Occupational Health Services (OHS) and an Employee Assistance Programme (EAP). The OHS supports the reduction and/or prevention of ill health at work and assists with the effective management of health problems to enable managers to effectively manage and control sickness absence. It assists the Council to meet workplace healthcare legislation whilst simultaneously promoting aspects of good health and safety to employees. The EAP service provides confidential counselling and advice to employees.
6. The OHS provides the following core elements:
 - a. Pre-employment health assessments
 - b. In-service referrals and assessments
 - c. Pre-retirement referral (including ill-health medical retirement)
 - d. In-service referrals because of accident/injury at work
 - e. Disability Discrimination Act adjustments/DSE assessments
 - f. Sickness absence case support and advice
 - g. Physiotherapy support
 - h. Critical incident support
7. In addition, the service will provide health surveillance, trend analysis at a corporate and service level.

8. The service can also provide employee lifestyle/health checks, and proactive health promotion at an agreed additional cost as and when required.
9. The EAP service provides access to 24/7 confidential counselling support that includes:
- a. Mental health crisis and trauma
 - b. Additional
 - c. Anxiety
 - d. Bereavement
 - e. Career/job related stress/performance related problems
 - f. Debt advice
 - g. Domestic violence
 - h. Eating disorders
 - i. Gender reassignment
 - j. Health problems
 - k. Legal information
 - l. Matrimonial/domestic settlement problems
 - m. Stress
10. The table below shows usage during the twelve-month period from January to December 2023:

Core Contract	
Pre-employment assessments	602
Pre-employment medicals	12
Management referral – doctor appointment	522
Management referral – nurse appointment	26
GP reports – request and review	7
Ill-health assessments	22
EAP – Counselling & advice sessions	508

Additional Services (charged separately)	
Workstation assessments	24
Night worker assessments	3
Staff wellbeing days	6
Physiotherapy sessions	43

11. The current contract includes an on-site OH Physician now based at Carnegie Building, Enfield Highway since October 2023 (previously located at St Andrews Court). The on-site provision provides an assessable local service. If this is not provided, staff will need to travel to the closest clinic provided by the OH provider which is currently located in central London or Harrow. The additional travel can cause obstacles for some staff, particularly those with mobility issues and increases the number of 'did not attend' (DNA) appointments that are chargeable. During 2023 an on-site clinic was not available until October and the total number of DNA's was 107.

12. The on-site provision provides a OH Physician dedicated to the Council's account. Up to 7 appointments are booked each day and this facility is fully utilised. The cost is currently £1,501.26 per day over 46 weeks per year. This equates to £214.46 per referral which would otherwise be charged at £354 at the supplier site. Therefore, this option is cost effective, provides consistency and is more convenient for staff.
13. Permission is requested to procure a new OH contract to commence on 1 July 2024. Due to the value and expertise required it is recommended that a mini tender from an existing framework is undertaken to select a provider.
14. A review of the Eastern Shires Purchasing Organisation (ESPO), Yorkshire Purchasing Organisation (YPO), and the Crown Commercial Services (CCS) frameworks has been completed and identified that the ESPO framework offers the best value for money. This framework provides the core requirements for the new contract across several possible suppliers and potentially provides a saving compared with current costs.
15. It is proposed that a mini tender process is conducted within the ESPO framework. This will ensure the new provider fully meets the Council's requirements and has the potential to provide further savings. The scoring mechanism will be based on 30% quality and 70% price.
16. It should be noted that any contract procured is likely to incur annual inflationary increases.
17. It is proposed to let the new contract for three years with the option to extend for a further two years on a 1+1-year basis.
18. Included below is the proposed timetable to ensure the new contract is procured in time to ensure a new provider is in place for 1 July 2024:

<u>ITT</u>	15/02/2024
Clarification period closes ("Tender Clarifications Deadline")	22/02/2024
Deadline for a response to the clarification questions	01/03/2024
Return Deadline for Tenders	15/03/2024
Tender Evaluation	18-21/03/2024
<u>Contract Award</u>	
Internal Governance / Approvals	06/04/2024
Notification of Outcome (Intention to Award)	17/05/2024
Standstill period commences	18/05/2024

Expiry of Standstill period (ends at midnight at the end of)	29/05/2024
Contract Award / Award of the Framework Agreement	31/05/2024
Mobilisation commences	01/06/2024
Commencement of Contract / Framework Agreement	01/07/2024

Recommendations

- I. Approval to commence a procurement process for a new occupational health service contract via a mini-tender process utilising the ESPO framework
- II. To let the new contract for a period of three years with the option to extend for a further two years on a one plus one-year basis.

Preferred Option and Reasons For Preferred Option

19. A mini tender process via the ESPO framework as this offers the core requirements for this contract of provides the best value for money

Relevance to Council Plans and Strategies

20. Enfield Council is a large and diverse organisation providing a range of statutory and other services to a local community with a population of c327,000. It is responsible for managing an annual revenue budget of £1.3bn and a 10-year capital budget of £1.8bn. To ensure such a large and complex organisation is effectively led and efficiently managed, the Council needs to be able to attract and retain a range of high calibre and skilled managers and leaders. The Occupational Health services provides support to ensure the Council's workforce is fit to perform the tasks of their role and supports the management and reduction of sickness absence as well as the health and wellbeing of staff, which in turn, have a significant impact on the lives of local

Financial Implications

21. There is revenue budget of £197,000 pa to fund the existing and new Occupational Health contract. This is adequate based on current usage levels.
22. The proposed mini tender to be conducted within the chosen framework may deliver budget savings however this will be reassessed once the mini

tender process is complete. Based on the unit costs listed under the ESPO framework this indicates that savings may be achieved.

Legal Implications

23. The provision of Occupational Health (OH) services within Local Authorities is a key requirement and satisfies the Council's following statutory obligations:
 - a. Discharging its duty of care towards employees under Health and Safety legislation by ensuring employees are physically and mentally fit to undertake their duties.
 - b. Undertaking essential Health Screening as required under Health and Safety legislation and Guidance for Hand Arm Vibration (HAVS), Audiometry and other such screening dictated by the employee's role.
 - c. The provision of reasonable adjustments, as required under Equality legislation, where an employee has a disability impacting on their ability to undertake their duties, and
 - d. Undertaking Ill Health Retirement assessments under the Local Government Pension Scheme (Amendment) Regulations 2008.
24. OH provision supports the health, wellbeing and fitness of the Council's workforce and aligns with the Workforce Strategy 2023-2028 of the Council.
25. The value of the contract being procured exceeds the relevant EU threshold, which means that the Public Contracts Regulations 2015 (PCR 2015) apply to the procurement. The use of a framework is a compliant route to award, provided that the Council can legitimately use the framework and the award process complies with the terms of the framework.
26. The terms of the call-off contract must be consistent with the framework, and in a form approved by Legal Services on behalf of the Director of Law and Governance.
27. The Council's Contract Procedure Rules require that for contracts with a value of £1m or above, sufficient security (e.g. a performance bond or parent company guarantee) from the supplier must be required to manage risk. Where the supplier cannot provide security, but the Council has decided to accept the level of risk, then the Executive Director of Resources must approve the financial risk prior to any award. The relevant Authority Report must set out the reason why it is proposed that the contract should be awarded despite absence of security and what measures are to be taken to manage this risk. Evidence of the form of security required, or why no security was required, must be stored and retained on the E-Tendering Portal.
28. Officers must be mindful that the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) may apply to transfer staff from

the existing provider to the new one and – if so – sufficient timescales should be built into the procurement to allow for the required consultation to be carried out.

29. Due to the nature of the service, and the processing of sensitive personal data involved, there must be suitable provisions in the contract to ensure compliance with the Data Protection Act 2018 and UK GDPR.

Equalities Implications

30. An Equality Impact Assessment Initial screening assessment has been completed. This contract is informed by policy documents such as the Recruitment & Selection policy and the Absence & Attendance policy that are supported by an EqIA.

HR and Workforce Implications (if any, delete if not relevant. Include TU consultation if relevant)

31. The provision of an occupational health service is an essential tool to enable employers to meet their statutory obligations with regards to health and health & safety issues in the workplace and identify preventative measure that can be considered to minimise the risk of sickness absence and an employees' capability to perform the duties required of their post.

Property Implications (if any, delete if not relevant)

32. A room has been made available at Carnegie Building, Enfield Highway, for the provision of the on-site service. This room is available one day each week and is shared with the Integrated Learning Disability Service.

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Signed by Service Director

Tinu Olowe

Director of HR & OD: ... 

Appendices

- Appendix 1 – Framework Comparison and analysis
- Appendix 2 – Service options
- Appendix 3 – Specification for mini-tender process

#Departmental reference number, if relevant: CE 23/039

Framework	Core Offer	Pricing	Current usage	Current/new cost
ESPO	<p>Full range of OH services plus EAP with the option to buy additional support and services (for example an emergency response following a critical incident) Offer includes the following outcomes</p> <ul style="list-style-type: none"> Ensuring Contracting Authorities meet all statutory obligations in respect of employee health and well-being Supporting Contracting Authorities in protecting employees from harm and providing healthy workplaces which promote health and well-being Ensuring Contracting Authorities employ people who are fit to undertake the duties of the roles being offered to them. Reducing employee sickness absence by supporting early intervention and provision of relevant supporting advice to managers Ensuring effective rehabilitation and return to work strategies are in place for Contracting Authorities Ensuring Contracting Authorities are working towards preventing ill health and improving employee health 	Pre-employment referrals (form assessment) £9.50 - £31.90 (Medigold £9.50)	602	Current cost based on unit cost of £20.29 = £12,215 New cost range £5,719 - £19,204
		Management referrals (face to face) £185 - £480 (Medigold £295)	38	Current cost based on unit cost of £354.54 = £13,473 New cost range £7,030 - £18,240
		IHR £150 - £1,200 (Medigold £315)	24	Current cost based on unit cost of £354.54 = £28,800 New cost range £3,600 - £18,240
		EAP £4.75 - £16.63 (Medigold £4.75)	2,943 (Based on headcount)	Current cost based on unit cost of £7.47 = £21,984 New cost range based on current headcount of 3,415 £16,221 - £56,791
		On-site provision per day OH Advisor £533 - £1,128 OH Physician £1,375 -	80	Current cost based on unit cost of £1,501.26 for OHP = £120,101 New cost range £110,000 - £200,000

	<ul style="list-style-type: none"> • Ensuring early intervention is provided in respect of ill health, reducing the need for sickness absence • Supporting the encouragement of early and supportive action from the Contracting Authority • Developing an occupational health strategy which follows relevant advice and guidance • Ensuring employee engagement with the services available • Ensure continuous improvement of the occupational health solution, as well as the Contracting Authority's approach to occupational health within the workplace • Deliver value for money <p>The minimum services are:</p> <ul style="list-style-type: none"> • New employee fitness for role assessments • Management referrals • Insight into unplanned absences • Needs assessment in relation to H&S • Triage service • OH health telephone advice line for managers and HR • Health surveillance checks 	<p>£2,500 (Medigold £1,550, Physician/£550, nurse)</p>		
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	<ul style="list-style-type: none"> • Statutory and Fitness medicals • Workstation/workplace assessments • Manager advice to reduce absence • Statutory advice and guidance in relation to return to work/redeployment/IHR • Ill-Health Retirement referrals and certification • Interactive website • Provision of training and awareness sessions • Case conference reviews • Both remote and on-site service available <p>Offers 14 possible providers. The two most expensive providers do not appear on the CCS or YPO frameworks.</p>			
YPO	<p>Full range of OH services plus EAP with the option to buy additional support and services (for example an emergency response following a critical incident) Offer includes the following outcomes</p> <ul style="list-style-type: none"> • Ensuring Contracting Authorities meet all statutory obligations in respect of employee health and well-being • Supporting Contracting Authorities in protecting employees from harm and 	<p>Pre-employment referrals (form assessment) £11.50 - £15.15 (Medigold £15.00)</p> <p>Management referrals (face to face) £202.00 - £600 (Medigold £214.47)</p>	<p>602</p> <p>38</p>	<p>Current cost based on unit cost of £20.29 = £12,215 New cost range £6,923 - £9,120</p> <p>Based on current unit c Current cost based on unit cost of £354.54 = £13,473 New cost range £7,676 -</p>

	<p>providing healthy workplaces which promote health and well-being</p> <ul style="list-style-type: none"> • Ensuring Contracting Authorities employ people who are fit to undertake the duties of the roles being offered to them. • Reducing employee sickness absence by supporting early intervention and provision of relevant supporting advice to managers • Ensuring effective rehabilitation and return to work strategies are in place for Contracting Authorities • Ensuring Contracting Authorities are working towards preventing ill health and improving employee health • Ensuring early intervention is provided in respect of ill health, reducing the need for sickness absence • Supporting the encouragement of early and supportive action from the Contracting Authority • Developing an occupational health strategy which follows relevant advice and guidance • Ensuring employee engagement with the services available • Ensure continuous improvement of 	<p>IHR £297.95 - £465 (Medigold £355)</p> <p>EAP £7.80 - £7.95 (Medigold £4.75)</p> <p>On-site provision per day OH Advisor £551 - £700 OH Physician £1,414 – 4,200 (Medigold £1,575)</p>	<p>24</p> <p>2,943 (Based on headcount)</p> <p>80</p>	<p>£22,800</p> <p>Current cost based on unit cost of £354.54 = £11,160 New cost range £7,151 - £18,240</p> <p>Current cost based on unit cost of £7.47 = £21,984 New cost range based on current headcount of 3,415 £26,637 - £27,149</p> <p>Current cost based on unit cost of £1,501.26 for OHP = £120,101 New cost range £113,120 - £336,000</p>
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	<p>the occupational health solution, as well as the Contracting Authority's approach to occupational health within the workplace</p> <ul style="list-style-type: none"> • Deliver value for money <p>The minimum services are:</p> <ul style="list-style-type: none"> • New employee fitness for role assessments • Management referrals • Insight into unplanned absences • Needs assessment in relation to H&S • Triage service • OH health telephone advice line for managers and HR • Health surveillance checks • Statutory and Fitness medicals • Workstation/workplace assessments • Manager advice to reduce absence • Statutory advice and guidance in relation to return to work/redeployment/IHR • Ill-Health Retirement referrals and certification • Interactive website • Provision of training and awareness sessions 			
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	<ul style="list-style-type: none"> • Case conference reviews • Both remote and on-site service available <p>Offers 8 possible providers</p>			
CCS	<p>OH & EAP Service split by region Both framework specification and costing is complicated and difficult to navigate.</p> <p>EAP service does not provide an option for face-to-face counselling.</p> <p>Otherwise broadly similar offer to ESPO and YPO</p> <p>Offers the option of 6 possible providers</p>	<p>Pre-employment referrals (form assessment) £5.95 - £19.27 (Medigold £5.95)</p> <p>Management referrals (face to face) £172 - £295 (Medigold £295)</p> <p>IHR £196.18 - £358.92 (Medigold £300)</p> <p>EAP – not costed</p> <p>On-site provision per day OH Physician £1,295 - £1,495</p>	<p>602</p> <p>38</p> <p>24</p> <p>2,943 (Based on headcount)</p> <p>80</p>	<p>Current cost based on unit cost of £20.29 = £12,215 New cost range £3,582 - £11,601</p> <p>Current cost based on unit cost of £354.54 = £13,473 New cost range £6,536 - £11,210</p> <p>Current cost based on unit cost of £354.54 = £28,800 New cost range £4,708 - £8,614</p> <p>Current cost based on unit cost of £1,501.26 for OHP = £120,101 New cost range £103,600 -</p>

		(Medigold £1,495, Physician)		£119,600
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Service Options

The following table shows the service options that can be included in the new contract as either as part of the core contract or optional extras that can be purchased as and when required.

Service	Benefit	Disadvantage	Potential annual cost
Core offer			
OHS <ul style="list-style-type: none"> • Initial triage of referral • Pre-assignment screening based on medical questionnaire • Pre-assignment medical assessment • Management referrals <ul style="list-style-type: none"> ○ Initial triage ○ Telephone review ○ Nurse appointment ○ OH doctor appointment • GP reports • IHR assessments • Attendance at case reviews & hearings • Workstation assessments • Night worker assessments 	Ensures the Council employs staff who are fit to perform the duties of the post. Provides professional support to enable the effective management of sickness absence and early return to work. Enables the Council to defend disability related claims Supports the health & wellbeing of the workforce	Cost of contract, however the overall cost benefits will provide value for money.	£126,349 - £175,000
EAP	A widely recognised benefit offered by most employers. Promotes a positive culture	Not providing this support may lead to higher levels of mental ill-health.	£16,250 - £22,500

	towards mental health & wellbeing Supports staff who are struggling with poor mental health or who are going through a difficult and stressful situation	Staff may not feel supported and valued by the Council.	
Additional Services			
Physiotherapy	Physiotherapy can take some time to obtain via the NHS. Providing this support can reduce sickness absence and/or support staff to return to work. The referral through OH will potentially lead to a quicker assessment, recovery period and attendance at work.	Not providing this support may lead to sickness absence or prolong sickness absence.	£55 - £75 per session
On-site OH doctor	On-site clinic provides a local assessable service for staff and reduces the number of DNA's. Alternative supplier clinics may be in central London or other locations that involve travel. Staff with mobility issues may struggle and be less willing to attend their OHS appointment.	On-site provision costs circa £1,500 per week (£70K pa) The Council provides accommodation for this provision.	£110,000 to £150,000 (this cost is included in the core offer above. If the on-site provision is not provided the referral unit cost will apply that is likely to be higher)
Wellbeing days (staff health assessments)	May identify health conditions at an earlier staff.	Additional cost but there is no obligation to purchase this	

	<p>A key component of being a 'good employer'. Staff value this benefit and feel valued. This is an optional extra and can be purchased as and when required</p>	option.	
Mediation	<p>Support early conciliation of staff disputes and may avoid escalation to a formal grievance Purchased as and when required by service</p>	Additional cost but may save time and costs if the dispute escalates	

Specification for Occupational Health Services for Enfield Council

Introduction – The current Occupational Health Service

1.0 Services to Client Departments

The current Occupational Health Service is the branch of healthcare, which is concerned with the relationship between people's health and work.

The service assists the Council to meet workplace healthcare responsibilities whilst simultaneously promoting aspects of good health, wellbeing, and safety to employees at every level of the organisation.

The occupational health service will conduct advice and guidance to the Council to assist in the effective management of sickness absence and any health-related issues that may impact or prevent an employee from performing the requirements of their role and to advise on reasonable adjustments.

The on-site Occupational Health Service is currently based at Carnegie Building, Hertford Road, Enfield one day per week and consists of an Occupational Health Physician (OHP/Doctor) who works one day per week that provides clinical help and advice, working between 9.00 am to 17.00 pm).

In addition, the service is delivered remotely via a OH clinical team consisting of a telephone service and assessment of medical referral form. There is also an option to provide face to face appointments at one of the supplier's clinics.

The OHS provides the following services either directly or via third party arrangements:

- Pre-employment health assessments.
- DSE reasonable adjustment assessments
- Health education
- On site health screening
- Health surveillance for specific groups
- Advice on health-related topics
- Short/Long term ill health assessments
- Ill-health retirement assessments.
- Employee Assistant Programme which includes a 24/7 365-day service, this also includes telephone and face to face counselling

- Physiotherapy which includes up to six face to face sessions via a manager referral
- Ergonomic workstation assessments

- Short/long term ill health assessments
- Referrals
- Driver licence medicals
- Lower/upper limb assessments
- Back/Neck assessments
- Respiratory
- Cardio
- Abdominal
- Psychiatric, Neurological, Metabolic, Gynaecological and Stress

The OHP and the OHA both undertake the following services:

- . Case management to take account of circa 3400 Council staff (average number of manager referrals per year is around 540 cases and new placement referrals is around 510 per year)
- . Rehabilitation and return to work programmes

The Employee Assistance Programme/ Counselling service consists of a 24/7 phone service, however there is the opportunity for face-to-face counselling which is carried out within the borough of Enfield.

2.0 Services to Schools

Schools within the Borough currently have the option to buy Council Occupational Health Service from the Council's supplier via separate contracts between the supplier and individual schools. This is optional for schools and cannot be guaranteed for the future. Schools utilise the following services but will purchase based on their individual needs.

- Pre-employment health assessments
- Pre-employment health surveillance
- Counselling
- OH Nurse
- Oh Physician
- Immunisation programme and vaccinations
- Advice on health-related topics

- On site health screening
- Health education
- DSE reasonable adjustment assessments
- Case Management

Please note: - The Occupational Health provider will have to negotiate directly with each individual school to identify a Service Level Agreement (SLA)

3.0 Current Service Volumes

Service requirements vary over time. To provide prospective suppliers with some indication of future volumes, the current levels of demand for the service are given below.

The numbers of staff employed on 1 December 2023 by department were:

Department	Number of staff
Chief Executive's	193
Environment & Communities	960
Housing & Regeneration	444
People	1214
Resources	604
Total	3415

The following table shows usage under the current OHS contract during the 12-month period to 31 December 2023:

Core Contract	
Pre-employment assessments	602
Pre-employment medicals	12
Management referral – doctor appointment	522
Management referral – nurse appointment	26
GP reports – request and review	7
Ill-health assessments	22
EAP – Counselling & advice sessions	508
Workstation assessments	24
Night worker assessments	3
Staff wellbeing days	6
Physiotherapy sessions	43

4.0 Specification

4.1 Core Requirements

The service required is outlined in Section 1 above. This section provides more detail and specifies the services expected. Enfield Council are interested in providers who can deliver the following outcomes as part of the core contract:

- Ensuring the Council meets all statutory obligations in respect of employee health and well-being
- Supporting the Council in protecting employees from harm and providing healthy workplaces which promote health and well-being
- Ensuring the Council employs people who are fit to undertake the duties of the roles being offered to them.
- Reducing employee sickness absence by supporting early intervention and provision of relevant supporting advice to managers
- Ensuring effective rehabilitation and return to work strategies are in place for Contracting Authorities
- Ensuring the Council is working towards preventing ill health and improving employee health
- Ensuring early intervention is provided in respect of ill health, reducing the need for sickness absence
- Supporting the encouragement of early and supportive action; including attendance at case management meetings where and when required
- Developing an occupational health strategy which follows relevant advice and guidance
- Ensuring employee engagement with the services available
- Ensure continuous improvement of the occupational health solution, as well as the Council's approach to occupational health within the workplace
- Deliver value for money against agreed KPIs

Core services will include:

- Health Assessment Questionnaires
- Pre-employment health surveillance
- Management Referrals
- Telephone Case Management, and attendance in person when required
- Free online system to track referrals and HAQs
- Triage Nurses

- Short/Long term ill health assessments
- Ill-health retirement assessments
- DSE reasonable adjustment assessments
- Employee Assistant Programme which includes a 24/7 365-day service
- Clinical Telephone Advice Line for managers and HR
- Designated Clinical Administration Team
- Health & Wellbeing Website

Optional Services

In addition to the above the Council will require the option to buy into the following services either throughout the life of the contract or during the contract:

- Remote OHA 1 day per week over 47 weeks
- On site OHP 1 day per week over 47 weeks
- Immunisation and Vaccinations
- Physiotherapy
- Face to face Counselling sessions as well as a telephone EAP service
- Health Education
- On site health screening
- Health surveillance for specific groups
- Advice on health-related topics
- Critical Incident Support

An Occupational Health Nurse/Advisor (OHA) will be required to work one day per week between the hours 9.00am to 17.00pm, 47 weeks per year. Cover is to be provided for holidays and periods of absence by an OHA of equivalent experience and qualifications.

An Occupational Health Physician (OHP) will be required to work 1 day per week from 9.00am to 17.00 pm, 47 weeks per year. Cover is to be provided for holidays and periods of absence by an OHP of equivalent experience and qualifications.

The service is to include an off-site Administration Function at the occupational Health provider's premises available over 52 weeks per year.

The on-site services are to be provided within the Borough of Enfield and will be situated within the borough boundary.

Prospective suppliers have the option of using the premises occupied by the current Occupational Health Service based at Carnegie House, Hertford Road, Enfield.

4.1 Enfield Schools

Schools will liaise and contract directly with the occupational health provider. The occupational Health provider.

- Health Assessment Questionnaire
- Pre-employment health surveillance
- Management Referrals
- Clinical Telephone Advice Line
- Face to face counselling sessions as well as a telephone EAP service
- OH Nurse
- Oh Physician
- Immunisation programme and vaccinations
- Advice on health-related topics
- On site health screening
- Health Education
- DSE reasonable adjustment assessments
- Case Management

4.2 Scope of the Service

Category	Service Provision
Pre-appointment health	<ul style="list-style-type: none">• Where required, employees will have a pre-

screening for existing staff who apply for a different post within the Council	appointment health assessment to assess their fitness
Telephone Case Management referral	<ul style="list-style-type: none"> • For each management referral, the manager has the option of discussing the case (by phone) with the Occupational Health Physician pre-and/or post referral • Management referrals will be written giving as much information as appropriate. A job description and person specification will be included. • Medical reports may be required from external agents and will be obtained with the employee's consent • Case conferences, involving the Occupational Health Physician, manager, and employee • A confidential report to management will be provided with recommendations for an appropriate course of action. This will be designed to ensure that the employee returns to work at the earliest opportunity and include options and probable dates for a return to work. The reply may also include advice about rehabilitation, redeployment, or ill health retirement. The report to the manager will emphasis what the employee can do rather than what they can't do, thereby reflecting service needs • Occupational Health Physician and nursing staff to allocate time for a programme of familiarisation with the workplace so they understand the working environment and therefore the context within which they are giving advice • Managers to be provided with feedback system giving their views on the quality of the service and the customer care so the provider can monitor service satisfaction and make necessary improvements. The contract monitoring officer will provide an overview of feedback and actions taken at contract management meetings with the Council • The contractor will not provide services that are given by the employee's own GP. If advice or counselling on any matters is necessary, the employee will be referred to their GP. If co-operation from the GP is not forthcoming, consideration may be given to authorising specific referral or investigation.
Self-referral	<ul style="list-style-type: none"> • Employees <u>will not</u> be able to self-refer to the OHS
Employee Assistance Programme/Counselling	<ul style="list-style-type: none"> • Contractor will provide a 24/7 free phone counselling support service on a dedicated 24hr telephone support line, which includes immediate assessment by a Counsellor. Experts must be able

	<p>to discuss a wide range of issues, including mental health support, depression, anxiety, stress, and emotional issues.</p> <ul style="list-style-type: none"> • Trained professionals who are highly skilled in listening and providing emotional support must deliver this key service. • There will be an option of six face to face counselling sessions free of charge. Any session over and above the six sessions will be charged at the current rate. This must be agreed by line management.
Vaccinations and blood testing programmes	<ul style="list-style-type: none"> • Will provide a vaccination service for specific groups of permanent employees such as those working in areas requiring hygiene standards. Examples of vaccinations required include: heaf tests; Hep B course as appropriate.
Driver licence medicals	<ul style="list-style-type: none"> • To carry out medicals required for licence renewal by the DVLC
Rehabilitation	<ul style="list-style-type: none"> • The contractor will provide a rehabilitation service where it is considered appropriate. This decision is likely to have been agreed at a case conference and will be an option taken when rehabilitation would result in a quicker return to work.
Health trends	<ul style="list-style-type: none"> • Contractor will monitor sickness absence records, identify trends, provide statistical information, examine specific cases where deemed appropriate, or by referral, and recommend remedial action where required • Monitoring will involve data analysis of specific causes and areas of poor health • Quarterly reports should be provided to the Authorised Officer
Health prevention and promotion events	<ul style="list-style-type: none"> • Assist managers in conducting stress risk management assessments • Assist managers in conducting ergonomic workplace assessments • Give information and advice on workplace health hazards • The contractor will provide general medical guidance to the Council to assist in the improvement of the health and wellbeing of its employees. This advice will include production of educational and health promotion leaflets and other material, and appropriate health screening.
Relationship with the HR function	<ul style="list-style-type: none"> • The contractor will give advice on policies related to health issues when requested e.g., alcohol and drug abuse. • HR staff will liaise regularly with key Enfield managers, including the workplace health and wellbeing and sickness absence, to ensure that

	occupational health remains integrated with and responsive to the Council's Workforce strategy
Valuing diversity	<ul style="list-style-type: none"> • Contractor to provide a signer for staff with hearing difficulties • Contractor to provide an interpreter if required • Contractor will provide advice to client departments on relevant measures to take for the successful implementation of the Disability Discrimination Act, and the Council's policies for the employment of people with disabilities. • Contractor to be able to provide a Physician or Nurse of either gender where requested
Attendance at Employment Tribunals and management meetings	<ul style="list-style-type: none"> • Either the OHA or OHP to attend and the costs to be borne by the contractor
Record keeping	<ul style="list-style-type: none"> • Contractor will maintain accurate and legible records
Maintenance and calibration of equipment	<ul style="list-style-type: none"> • Contractor will maintain all medical equipment in correct operational order
Client / contract monitoring	<ul style="list-style-type: none"> • Monthly meetings – including service usage and trends, feedback reports from managers to be discussed at these meetings • Jointly deal with any formal complaints to enable a speedy response

4.3 Expectations of the Contractor

The contractor will provide a comprehensive and efficient service to the Council. The contractor will take full responsibility for all administration of the service. The contractor must provide sufficient Occupational Health Physician and Occupational Health Nurse input, available at times specified in this document. The Council requires that the above staff possess qualifications relevant to their professional disciplines as well as being fully qualified practitioners.

All occupational health physicians used must be a doctor as prescribed under the Fitness to Practise Standards administered by the General Medical Council (GMC), or EEA equivalent. S/he must also be "qualified in occupational health medicine", i.e. holding a diploma in occupational medicine (D Occ Med) or an equivalent qualification issued by a competent authority in an EEA state (which has the meaning given by the European Specialist Medical Qualification Order 1995) or being an Associate, a Member or a Fellow of the Faculty of Occupational Medicine or equivalent institution of an EEA state. S/he must have completed the relevant medical training and be registered as a doctor with the General Medical Council (GMC)

Occupational Health Nurses will be Registered General Nurses with an Occupational Health Nursing Certificate, Diploma or Degree.

They will be familiar with the major occupational health groups within the Council. The contractor will ensure that a member of the Occupational Health Team (i.e., Occupational Health Physician or Occupational Health Nurse) is always available

during office hours. It is a requirement of the contract that the above post are individuals dedicated to the contract with Enfield. This will ensure continuity and clarity of service. Where a subcontractor is to be used, their details must form part of the submission.

The contractor will be expected to meet all statutory provisions currently in force, as well as those introduced during the performance of the contract. As the provider of expertise in medical matters, the Contractor will be required to lead on all areas pertaining to the provision of occupational health services, in conjunction with the Council's Authorised Officer.

The contractor will ensure that all employees engaged in the provision of the service will make themselves familiar with the service requirements of the Council, the specific occupational requirements of each group within the Council, and individual departmental requirements in relation to ill health, sickness absence and health promotion. The contractor will ensure that its employees regularly visit the workplace as well as attending relevant management meetings when required.

The contractor shall appoint an Occupational Health Contract Manager to oversee the provision of the service on a day-to-day basis. This may be one of the designated staff referred to above.

The service defined in this specification will be provided within agreed timescales. Where requested, the contractor will arrange for any clinical examination to be performed by a member of the same sex as the employee.

Clinical information will be treated as confidential. All information is maintained in a confidential manner. This should ensure compliance with current legislation, including GDPR, Equality Act 2010, Access to Medical Records, Freedom of Information Act (etc) and the Council's policies as amended from time to time. No usage of the data will be allowed without the express permission of the individual. The contractor will make use of all information available, including records maintained by previous contractors and staff.

The contractor will provide adequate security measures to ensure that clinical data is kept safe and is maintained in a manner conducive to good management practice. For example, use of varying levels of passwords, good physical storage, and disaster recovery policies etc.

The contractor may be required to visit employees at home where it has been established that such employees are unable to attend at the location agreed with the contractor. No visits must take place without the prior consent of the employee and manager of the referring client department.

The contractor will provide all appropriate medical equipment as required and maintain it in a safe and secure manner. The contractor will also be required to provide all consumable medical supplies inherent in delivering the required service, including those required for the vaccination and immunisation programmes.

Occupational health contractors have statutory responsibilities, i.e.

- To carry out any requirements under the Council's own stated Health and Safety Policy and the Contractor's own Health and Safety Policy.
- To comply with all statutory duties relating to health, safety, and welfare within the workplace.
- To ensure that all information, including Health Records and monitoring information, is maintained in a confidential manner compliant with various Acts of Parliament, e.g., Data Protection 1984, Access to Health Records 1990 etc.

The contractor will provide the service within normal working hours on a Monday to Friday basis, 09.00 to 17.00. Whilst the nature and form of the service will inevitably depend upon the specific needs of the staff and managers of the service, the contractor will provide some flexibility in the way the support is provided. The Council employs several staff that do not work 'normal office hours.

The contractor and the Authorised Officer will agree a suitable complaints procedure before the commencement of the contract. Complaints will be jointly investigated to ensure that an outcome is provided quickly.

The contractor will assume responsibility for the advice and guidance given and will be required to meet any legal losses resulting from actions taken against the Council because of decisions made based upon proven negligent advice or guidance given by the contractor. The contractor will therefore be expected to provide indemnification against any such claims against the Council.

4.4 Provision of Information

This specification details the standard services required by the Council. All activities must be recorded daily, and a formal report made on a Quarterly basis in electronic transfer format, for corporate purposes. The specific information required is detailed in the table below at Section 5 Key Performance – Health Trends.

The Council may require new, customised reports to be added during the contract. The cost of all reports shall be included as part of the Management Fee.

The contractor will be welcome to present their own systems which would enhance the Council's own HR administration in maintaining full sickness absence records.

The table below highlights the key information required in the submission and the provider will be required to confirm they are able to provide the OH service as stated in this submission, in accordance with the specification of requirements and your response as part of the method statements you submitted. **Providers are required to complete Method statements as detailed in Appendix 2 and the instructions in the IFTC.** The Council specifically requires a monitoring

system that incorporates a data- base for tracking purposes. Examples of such information include details of health monitoring undertaken with outcomes/ results of reviews.

Element	Comments
Service leader & OHA support	
Explain in detail how the OHA/Nurse/Physician will be managed	Please refer to Method Statement Q5a.
Indicate the lead in time for implementation of this service	Please refer to Method Statement Q5b.
Case management/information line	
OH Advice line for managers and Human Resources: <ul style="list-style-type: none"> ▪ Answered by a Case Handler <ul style="list-style-type: none"> • Response time 	Please refer to Method Statement 6a
Explain in detail the process for accessing the case management service and include examples of case management pathways, protocols, and guidance information	Please refer to Method Statement 6b
Explain in detail the process for liaison/cross referral with the OHA/Nurse and OHP for both remote/telephone services.	Please refer to Method Statement 6c
Include examples of your previous work within the public sector in reducing absence. This must be demonstrated.	Please refer to Method Statement 6d
Include an example of <ul style="list-style-type: none"> ▪ A tailored Health Education programme ▪ Musculo-skeletal and healthy back programmes ▪ Stress management and awareness programmes ▪ Disease management programmes ▪ Mental Health Support 	Please refer to Method Statement 7

Element	Comments
•	
Include an example of an assessment for vaccine requirements	Please refer to Method Statement 9
Include an example of a well person screening programme	Please refer to Method Statement 10

5.0 Key Performance Measures

Key Performance	Pre-employment health screening
Service definition	Pre-employment health assessments
Required performance level	<ul style="list-style-type: none"> • Questionnaire assessment and advice to management within 4 working days of receipt of a completed a pre-employment questionnaire • Where a clinical assessment is required by the OH Physician or OH Nurse an appointment will be fixed for no later than 5 working days and advice to management within 5 working days
Performance target	95%
Monitoring tool	Pre-employment health screening register to be maintained by the OHU
Responsibility to monitor	Contract Manager
Special criteria	Where an urgent situation exists arrangements will be made to see the individual at the earliest convenience

Key Performance	Pre-appointment health screening for existing staff
Service definition	Where required (i.e., when an employee is changing to a job that has different requirements e.g., lifting) employees will have a pre-appointment health assessment to assess their fitness
Required performance level	<ul style="list-style-type: none"> • Assessment and advice to management within 4 working days of receipt of a completed a pre-employment questionnaire • Where a clinical assessment is required by the OH Physician or OH Nurse an appointment will be fixed for no later than 5 working days and advice to management within 5 working days
Performance target	95%
Monitoring tool	Pre-employment health screening register to be maintained by the OHU
Responsibility to monitor	Contract Manager
Special criteria	Where an urgent situation exists arrangements will be made to see the individual at the earliest convenience

Key Performance	Management Referral
Service definition	Managers/HR may refer employees who have health related problems.
Required performance level	<ul style="list-style-type: none"> • An appointment with an OH Nurse/Adviser will be made within 3 working days of receipt of a completed referral form • The appointment with an OH Nurse/Adviser will take place within 5 working days • A report will be provided to the referring manager/HR officer within 5 working days of the initial appointment • If an external medical report has been requested from a GP or Specialist, the report to the referring manager/ HR officer will be provided within 5 days of receipt of the report or within 2 days of any subsequent appointment • A manager to have access, either by phone or in a meeting, to an OH Adviser before a management referral is made. Meetings to be arranged within 5 working days of request • Managers to have the option of a case conference (involving the Occupational Health Physician, manager, and employee and/or representative). Meetings to be arranged within 5 working days of request from manager.
Performance target	95%
Monitoring tool	Sickness absence referral register to be maintained by the OHU. The Council's Authorised Officer will periodically review the progress of referral cases to ensure compliance with the required timescales.
Responsibility to monitor	Contract Manager
Special criteria	<p>Where a medical report is required from a GP or Specialist, a delay may occur.</p> <p>Times will apply when full and necessary information has been received from third parties e.g. GP's, HR etc, and that the employee concerned is available for consultation. If no external response has been received after 28 days, then the Contractor will be expected to inform management, as it may be necessary to make an appropriate judgement without outside reports. Exceptions to this will be where failure to deliver is as a clear result of a third</p>

	<p>party outside the influence of the contractor, such as non attendance of a referred employee at short notice, or delay in receiving a GP report. The contractor must demonstrate that any delay was caused by a third party by keeping adequate controls over all activities to demonstrate adherence to the timetable.</p> <p>In exceptional cases, the employee may be seen at home if they are unable to travel to the OH unit.</p>
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Key Performance	EAP Service
Service definition	Provide support to the employee over the full range of work related or personal matter that may impact on workplace performance and seek to resolve those issues where possible.
Required performance level	<ul style="list-style-type: none"> • Provide an online portal and telephone helpline available 24 hours, 7 days a week, 52 weeks per year. • Following initial triage offers telephone, virtual or face to face sessions. • Initial response to employee within 24 hours and where individual counselling or support required appointments offered within 48 hours and actual first appointment within 7 calendar days.
Performance target	95%
Monitoring tool	Appropriate registers to be maintained by the EAP provider that maintains complete confidentiality
Responsibility to monitor	Contract Manager

Key performance	Compliance and Quality Assurance
Service definition	A comprehensive system to monitor audit quality assurance that measures compliance against the requirements of the contract.
Required performance level	<ul style="list-style-type: none"> • All reports are business focused. • New placement reports provide clear objective guidance and advice in relation to fitness for work, reasonable adjustments. • Management referral reports include a clear prognosis of condition and likelihood of returning to work with timeframes. • A clearly defined and managed complaints process including an escalation process. • Where issues are identified a process is in

	<p>place to manage</p> <ul style="list-style-type: none"> Quarterly reporting at contract meetings to include number of audits completed and findings, complaints received including issues and action taken to rectify the issue and including timescales
Performance target	90%
Monitoring tool	Reporting and monitoring of quality assurance process
Responsibility to monitor	Contract Manager

Key Performance	CUSTOMER SATISFACTION
Service definition	On-going customer satisfaction surveys conducted with both employees referred and referring managers.
Required performance level	<ul style="list-style-type: none"> Both referred employees and referring managers are invited to complete a short satisfaction survey Results collated and reported with monthly/quarterly MI data
Performance target	80% Satisfied or Highly satisfied
Monitoring tool	Published reports and review of results at contract monitoring meetings.
Responsibility to monitor	Contract Manager

Key Performance	Employee Assistance Programme/Counselling service
Service definition	The contractor will provide a 24/7 365 days per year EAP/counselling support programme by telephone. Experts must be available who can help employees discuss a wide range of issues.
Required performance level	<ul style="list-style-type: none"> Counsellor who initiates the first contact must act as the case handler throughout the counselling sessions. Continuity is a must throughout the employee/counsellor sessions. Reports to be provided on a Quarterly basis
Performance target	100%
Monitoring tool	Contract monitoring meetings
Responsibility to monitor	Contract Manager

Key Performance	Valuing diversity
Service definition	The contractor will provide the service within the legislative framework and the Council's Valuing Diversity policy
Required performance level	<ul style="list-style-type: none"> • Contractor to provide a signer for staff with hearing difficulties • Advice given to managers / personnel officers to be within the legislative framework and the Council's Valuing Diversity policy • Contractor to be able to provide, without delay in the required timescales, a Physician or Nurse of either gender when requested by an employee or prospective employee
Performance target	100%
Monitoring tool	Contract monitoring meetings
Responsibility to monitor	Contract Manager

Key Performance	Attendance at Employment Tribunals and management meetings
Service definition	OH advisers will attend Employment Tribunals and management meetings. Costs to be borne by the contractor.
Required performance level	<ul style="list-style-type: none"> • OH advisers will attend on behalf of the Council, and give advice to employment Tribunals as required • OH advisers will attend meetings called by management to discuss health related issues
Performance target	100%
Monitoring tool	Contract monitoring meetings
Responsibility to monitor	Contract Manager

Key Performance	Record keeping
Service definition	Accurate record keeping will be maintained by all occupational health staff
Required performance level	<ul style="list-style-type: none"> • Occupational health records will be complete, concise, appropriate, and legible
Performance target	100%
Monitoring tool	Occupational health records
Responsibility to monitor	Contract Manager
Special criteria	Medical and nursing statutory codes of conduct

Key Performance	Maintenance and calibration of equipment
Service definition	All medical equipment will be maintained in correct operational order
Required performance level	<ul style="list-style-type: none"> • All equipment to be serviced / calibrated within 2 months of the required date as identified in the manufacturer's instructions
Performance target	100%
Monitoring tool	Calibration register
Responsibility to monitor	Contract Manager

Key Performance	Client / contract monitoring
Service definition	There will be effective communication maintained between the OH Contract Manager and the Council's Authorised Officer
Required performance level	<ul style="list-style-type: none"> • Monthly meetings with the Authorised Officer to review performance. Feedback reports from managers to be discussed at these meetings • Monitoring information e.g. activity levels across the Council and by department to be provided to the Authorised Officer on a

	monthly basis <ul style="list-style-type: none"> Jointly deal with any formal complaints to enable a speedy response to be given
Performance target	100%
Monitoring tool	Notes of meetings and monitoring information
Responsibility to monitor	Contract Manager
Special criteria	Ad hoc meetings to be arranged where appropriate