

Work Programme Leavers : Draft protocol with partners

Introduction

The Work Programme Leavers delivery model relies on the integration of a wide range of local services. Engaging relevant staff at all levels of partner organisations will be important to ensure that partners are able to liaise with WPL providers when designing bespoke packages of support for WPL participants.

The purpose of this protocol is to outline the collaborative working between and to deliver the Work Programme Leavers programme across Greater Manchester. It identifies the respective roles and the ways in which they will provide integrated support by working constructively to join up public services around the needs of the referred service users. The aim is for mental health services, skills provision, local authority services, housing support to be accessed and sequenced in a meaningful and timely way.

Work Programme Leavers

Work Programme Leavers (WPL) is a new programme to support Employment Support Allowance (ESA) claimants into sustained employment. The scheme, which has been co-designed between Greater Manchester and Government, will be built around a key worker model, giving providers the freedom to innovate and design services in the most effective and efficient way possible. By tackling the complex issues of the participants in a cohesive way, it will benefit their employment and life chances, as well as helping to reduce the overall cost of key public service interventions. The coordination of public service delivery will be a benefit to partners in delivery and budget issues.

The purpose of Work Programme Leavers is to:

- Fully integrate and sequence the range of public services available to support the ESA WRAG cohort in Greater Manchester, including skills, health, housing and local government services. By integrating services, an innovative new model will be created with potential to replicate across other priority groups
- Focus on a fully integrated key worker model. They will act as the prime conduit for integrated public sector services for WPL participants. They will be able to access a full range of services and provide bespoke packages for clients to ensure that their personal barriers to employment are tackled comprehensively and in an integrated and sequenced way.
- Provide tangible delivery of the Public Service Reform programme. Quantifiable and qualitative evaluation will identify best practice and learning for transfer to other PSR themes.

- Provide a new way of working and sequencing public services. It is much more than using existing services more effectively and working in Partnership. It is about a fundamental reworking of how services work together to provide integrated delivery and priorities

WPL will see local public services across Greater Manchester delivering access to a range of appropriately integrated, prioritised, and sequenced interventions, giving key workers access to a range of tools to help in the development of bespoke packages of support for participants in the programme. The protocol will be a key component in assuring the providers that the public services will be integrated, prioritised and sequenced.

Overview of Work Programme Leavers

Drawing on evidence of success from existing public service reform programmes, WPL will be built around a key worker model. Working with a small number of claimants (20-40), key workers will be responsible for developing individual programmes of activity to help programme participants enter work. Interventions in these bespoke packages should be:

- Chosen on the basis of the best available evidence.
- Integrated and sequenced, drawing on a range of local public services.
- Delivered on a family rather than individual basis to more effectively change behaviours.

The key purpose of WPL is to support participants into employment that lasts, tackling the range of barriers that may stand in their way. Participants in this programme will be ESA claimants in the Work-Related Activity Group (WRAG). All participants will therefore have one or more health related barriers to work.

Claimants eligible for the programme will have had at least two years of support through the Work Programme, exiting without having moved into a job. From 1 March 2014, around 5,000 participants will be referred to the programme by Jobcentre Plus, referrals will continue for up to two years.

Key workers will provide WPL participants with up to two years support towards gaining sustained employment. Participants who move into employment will also receive a year of ongoing support, helping ensure job starts become sustained employment.

The contract with WPL providers will provide them with access to prioritised, coordinated and sequenced local services, ensuring key workers are able to access the right services at the right time when developing bespoke packages of support. Given the nature of the barriers to work faced by WPL participants, access to health as well as skills related interventions will be particularly important for this programme.

Local authorities are leading the integration of services in their areas and prior to referrals starting, will work with providers to help develop understanding of

the access routes to relevant services. The protocol will be the basis for coordinating and providing pathways to the services.

Evaluating Work Programme Leavers

WPL is a pilot programme. Collecting robust evidence of the impact of the programme is therefore extremely important. An evaluation partner, SQW, has been commissioned to provide ongoing monitoring of the progress of each participant in the programme.

Providers will be required to work closely with the evaluation partner, routinely capturing all information required and participating in regular performance management discussions. This will provide evidence to public sector partners on delivery and impact which will be valuable for service delivery and refinement.

WPL will require a unique approach to tackling the specific barriers to work of each participant. Providers will have the space to work flexibly and will have access to a flexible range of public services. Innovative approaches to working with programme participants will be vital to the success of this programme. The outcome of this programme and the independent evaluation will help shape future commissioning decisions across Greater Manchester, and potentially more widely.

Partner commitments

The partners to this agreement are committed to working together to help deliver integrated local services across Greater Manchester. Partners will commit to

- Putting in place the range of interventions across relevant service areas and provide the scope to reprioritise a proportion of these services for WPL
- ensuring sequencing will take place and coordinate intervention
- identify opportunities to influence future services
- ensure existing responsibilities, prioritisation and integration take account of cohort requirements
- share data with partners

Each partner to this protocol should ensure that all their staff who are affected by it are aware of its contents and the obligations which are formed by the organisations signing up to it.

The table below details specific actions which partners to the protocol could deliver to ensure that WPL is delivered effectively across GM and to ensure strong integration of local services and prioritisation for WPL clients.

<u>Ambition</u>	<u>Actions</u>	<u>Responsibility</u>
<p>The key principle of Public Service Reform is to integrate and deliver public services in the most effective and efficient way possible. Work Programme Leavers will tackle the complex issues facing participants in a cohesive way. This will not only benefit their employment and life chances, it will also help reduce the overall cost of key public service interventions across Greater Manchester. The coordination of public service delivery will therefore benefit partners in delivery and budget issues.</p>	<p>Key Greater Manchester partners are asked to sign up to a protocol which commits them to taking constructive action to make WPL work .</p> <p>An initiation discussion will take place within each locality to describe the integrated delivery model and to secure routes in partner organisations.</p>	<p>The designated lead organisation will sign the protocol and , in partnership with key organisations, will deliver or hold partners to account through their commissioning/ governance arrangements.</p>
<u>Health</u>		
<p>NHS strategic planning to take account of WPL as part of the health service contribution to supporting the long term unemployed back into work and improving health outcomes.</p>	<p>Health & care commissioners to take account of the anticipated needs profile of the WPL cohort and identify a clear proposal for integrating relevant services around that cohort (this may build on similar work for Troubled Families)</p> <p>Health & care partners commit to engage with the WPL providers to agree appropriate referral protocols and ensure</p>	<p>Local health and care leaders to engage with their local authority WPL leads to provide direction and sponsorship to the delivery model.</p> <p>Health strategic change and actions to be championed by NHS England through the Greater Manchester Health and Wellbeing Board.</p>

	<p>fit into the integrated model</p> <p>Health and care commissioners to agree ways to incorporate work and skills outcomes into all relevant commissioning strategies and contracts</p> <p>Each HWBB to identify practical scope for influencing immediate contracting process, to include:</p> <ul style="list-style-type: none"> • CQUINs to be identified across relevant contracts with CCG • Incorporating work as a health outcome into all relevant service and care pathway redesign <p>Ensure prioritisation discussions about contracting and strategic development incorporate impact of improving health outcomes for out of work patients. CCG's to make changes to commissioning strategies and contracts</p> <p>Initial discussions to take place in February 2014 to test that the contracting and partnering process for March 2014 onwards incorporates WPL requirements</p>	<p>GMHWWB to sign up to the protocol and recommend that each HWWB agrees to the protocol</p> <p>Local HWWB to sign up to the protocol</p> <p>Local CCG's</p> <p>Local CCG's and commissioning leads</p>
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<p>By moving towards “ whole system thinking” and widening the definition of risk to reflect the negative impact of worklessness on health, greater links and improvement between health and employment outcomes can be achieved.</p>	<p>A strategic approach to Work and health to be developed and delivery plan produced that enables a cross-sector approach to the development and delivery of health services, focusing attention on a wide range of preventative services.</p> <p>Delivery of education programme to GPs and primary healthcare providers , mental health care, and identified areas of secondary care .</p>	<p>GMHWBB and local HWBB's</p> <p>NHS England & Public Health England in partnership with GM Public Health Network and local HWBB</p>
<p>Integrate “progression to work” into health assessment and care pathways</p>	<p>Develop a health and care model which incorporates a focus on moving into work or staying in work as an integral and routine part of consultations and service delivery</p> <p>Mechanisms are put in place to ensure active referrals are made from primary care to work and skills providers.</p> <p>Adult primary mental health services care</p>	<p>GMHWBB and Local HWBB's</p>

	<p>services to adapt assessment and pathways to specifically include support for remaining in work or moving into work as a key component of treatment and recovery services.</p> <p>Review commissioned public health services to ensure work and skills are outcomes are incorporated into all relevant specifications. In particular, drug and alcohol services need to ensure that pathways include support for remaining in work or moving into work as a key component of recovery services.</p> <p>Assessment of working age adults with long term and complex needs through integrated health and care proposals and associated delivery models incorporate work and skills</p> <p>Effective early intervention in sickness related job absences to accelerate return to work</p> <p>Supporting employers to understand the reasonable adjustments that may be required in order to support some residents to remain in work.</p>	
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