# Successful Bidders Response – Project DN515967

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Mobilisation

## **Description:**

How will you ensure the delivery of the devices and support is fully operational within the timelines stated in the tender?

Attach a detailed Mobilisation plan from the anticipated end of the standstill period up to 3 months from Contract commencement.

#### **Answer**

Please find attached mobilisation Plan.

Given the tight timescales of this Project we have begun putting in place the building blocks to ensure successful delivery in the event that we are successful with this tender.

Due to the nature of our Charity we are well placed to work with the wide range of vulnerable, excluded individuals targeted by this Project. We are already engaging and commissioned to work in the area of 'Digital exclusion' and this Tender will complement work we are undertaking locally and nationally. We have run several courses for professionals and service users in relation to accessible IT, including a programme on how to stay safe online. This places us well in relation to knowledge, skills and prepared background work that will help ensure this Project is a success.

You will see from the Project Plan we have identified a Project Manager and have qualified workers in place to deliver the Project, all are DBS checked and trained in safeguarding, person centred planning and IT literacy.

We have understanding of local needs, excellent relationships with a range of third sector organisations which will be helpful to the Project including My Sight, Nottinghamshire Deaf Society and Disability Direct with whom we have worked collaboratively.

We are supported by a specialist IT Support company who provide expertise with technical aspects with hardware, software, data security and loading of specific programmes helpful for service users.

We have 70 years experience of supporting People with learning Disabilities, Autism and a range of neurological disorders alongside sensory and visual impairment. Many of our users also have associated physical disabilities. We currently support over 150 service users in our Domiciliary Care service and are very experienced in the challenges of supporting people within their homes with this service continuing throughout the Coronavirus Pandemic.

#### Title:

Service Delivery

## **Description:**

How will you determine the appropriate support needed for vulnerable Service Users and how will you deliver it so they may build confidence to achieve their outcomes?

#### **Answer**

**Initial Assessment** 

- 1. Review of files created by council and partners, discussion with referrers where appropriate.
- 2. Identification of physical barriers to the use of technology and any existing strategies, or equipment already in use. This will enable the team to build on existing skills and knowledge and support the setting of mutually agreed goals and outcomes.
- 3. Identification of any existing sources of support, friends, family support staff.

This initial assessment will give us the opportunity to: download key apps, tailoring devices to individual requirements, allow a connectivity assessment, allow us to risk assess the individuals and establish the conditions of use of equipment before any equipment is delivered,

We will create and use:

- 1. Easy read tools & resources using Somerset Symbols and pictograms to work with individuals to establish the service users' initial level of competence and confidence in using technology and identify any physical or mental barriers to use. The induction session will include:
- 2. A mutual contract between Nottingham Mencap on the safe use of the tablet, loan conditions and care of the equipment. Equipment will come packaged with both hardware, starter pack and support material.
- 3.A Cyber safety session with support material to support the safe use of technology.
- 4. Live demonstrations and 1:1 teaching to be provided.

Induction and reviews will be supported with easy read material and the use of film. The use of short films with captions and downloaded onto YouTube and a clear pathway to the helpline will be established.

Review, Support and Consolidate

Confidence building exercises will be used in between reviews. These tasks will also act as progress markers for our ongoing assessments and support the development of self- ownership of progress, e.g. Online treasure hunt where individuals report back key feature of sites visited. E.g., headings, colours and logos.

After a basic level of competency has been established, we will establish an online "Tec Club" to create an opportunity for peer to peer support, guidance and mentoring to embed successful

independent use. As part of this we will be able to offer access to over 30 courses designed by the Good Things Foundation of which we are a member. The organisation is dedicated to:

"help people to be happier, healthier and better off through the use of digital technology"

To encourage future development of service users' achievement, certificates will be awarded after one year's successful tablet use.

## Title:

Health and Safety

# **Description:**

The cohort of Service Users referred to this service may be at a higher risk of health complications due to Covid-19.

How will you ensure that the service is delivered in a Covid-19 secure way and any risks are minimised when you physically visit to support the Service User?

#### **Answer**

By the beginning of the tender period our staff will have received the vaccine. We work out of a Covid secure building with full access to PPE such as masks, visors, gloves and hand sanitiser. Any interactions that can be undertaken by phone, video link will be. We have significant experience of working in a Covid secure way with vulnerable service users in their homes and understand the particular difficulties in ensuring the safety of both staff and service users.

Regardless of vaccination status we adhere to the 'home visiting' Covid guidelines issued nationally and disseminated through Nottinghamshire Public Health. We react swiftly to changes in guidance. Our staff are tested for the virus weekly(at a minimum).

Where home visits are required, we will telephone in advance (and latterly by video-call) to check whether the service user (or anyone in their bubble/household) has symptoms or is Covid positive. We will explain rules around distancing and that we are wearing PPE to ensure no surprises. We have masks and hand gel for the service user to use if appropriate. The same person will always visit an individual service user. All equipment delivered will be sanitised and we will arrange visits in a schedule that means we reduce the potential for cross contamination. The Tutor will observe social distancing where possible in the most appropriate space and if possible with a window open to allow air circulation. The Tutor will use hand sanitiser before and after the session and wear appropriate PPE and the service user will be offered the same if appropriate.

The tutor will not accept the offer of a drink and will not use their toilet facilities. Surfaces (including the tablet) will be wiped down before and after the session. Any positive cases will be logged ,reported and reviewed.

#### Title:

Service User Outcomes

# **Description:**

How will you monitor the effectiveness of the service and the impact on Service Users specified outcomes?

#### **Answer**

For quantitative assessment we will utilise the Service Specification Performance targets alongside more expansive internal targets as the base set of KPI's and monitor these weekly. We will particularly focus on the demographics of the service user in relation to, for example, their disability, their geographical location, their age, gender and background. This will enable us to quickly identify trends and omissions in the reach of the service

We will discuss with Commissioners whether, under the Ethical Care Charter, Tablet usage figures can be harnessed via the Moda platform could be shared.

We will use the baseline level of knowledge and confidence monitored prior to commencement of work and during each review. Baseline assessments will be built into the initial induction to determine the Service User's ability in the use of technology and their level of basic skills, (numeracy and literacy). Easy read and accessible formats will be used including the use of Somerset Symbols and pictograms. Clear and realistic targets will be agreed by all parties involved in the project and progress monitored against key target outcomes.

Reviews will include, where appropriate, an assessment using a sliding scale 1-10 with pictograms to assess skills, safety, confidence and satisfaction. This might include, for example, use of Zoom, Teams, search engines, social media platforms, email, specific apps (eg the NHS app, Shopping apps, educational portals (eg learn My Way)).

Qualitative methods will include supporting Service Users to film themselves answering questions about their experience of using technology with these film clips documenting a technology journey in case study form. Other Creative ways of enabling people to contribute to documenting their progress will be developed including art, film and creative writing. These will be used to map change in both confidence and skill levels. Our work will be person-centred and tailored to the assessed target outcomes.

Focus groups will be used to gather information and thoughts on the programme's progress.

For the Service User, success will look like:

- -A confidence to leave the scheme and feel happier, healthier and better off through the use of this technology.
- -Feeling better able to manage their wellbeing, more included in their communities.
- -Able to access practical support to help lead happy, healthy lives.
- -Consideration of purchasing their own chosen technology and using it independently.

Given the wide range of groups supported, the key is to ensure that each review of impact is personcentred.

#### Title:

Communication

## **Description:**

How will you ensure accessibility and access for Service Users with a range of abilities and disabilities and what factors will you address to ensure clear communication, training and guidance is provided ensuring equity of service?

Please also outline how you will use the accessibility functions in Android 9 to ensure that it best meets the needs of people with additional needs (e.g visual and hearing impairment)?

#### **Answer**

We will communicate clearly and simply using 'easy read' guides using both pictogram and Somerset Symbols. We have a long and successful history of using easy read systems and this is embedded in our communication and teaching. All our staff are familiar with the use of these methods. This style of communication is useful in communicating with people who have a learning disability, are elderly, have low functional literacy and who may not speak English as a first language.

An assessment in person if required will be carried out in an accessible way for the service user and alongside an explanation of the project and the key conditions of use that need to be understood and agreed by each Service User. We will ensure guides are available in different formats to support our work including the use of simple videos to explain use.

We will work in partnership with our existing contacts at My Sight Nottinghamshire and Nottinghamshire Deaf Society to ensure we are reaching people in the optimum way. We will work with them to ensure that their members know about the service and take account of feedback given. We will identify with these partners any additional Apps and technology which might be useful.

We are members of the 'Good Things Foundation' and the Online Centres network which is an international Social and Digital Inclusion Charity which gives us access to a wealth of material to advance digital inclusion.

We will use the Android Accessibility Suite within Android 9 (Pie) to successfully communicate with people with sight loss or who are hearing impaired. This will include the use of Screen readers including the Talk Back Screen Reader, braille keyboard and 'select to speak' functions. We will ensure the font and background colours are adjusted at the induction stage and ensure service users are familiar with magnification functions. Interaction Controls within this include Voice Access and BrailleBack, which allows connection to a refreshable braille display on their device via Bluetooth and works with TalkBack for combined speech and braille experience, allowing easy interaction and edit features. Audio and On-Screen text, Sound Amplifier, Live Caption and Transcribe and Captioning functions will also be explained where appropriate and used as standard.

Our IT support partner is well acquainted with a variety of additional apps that will benefit particular service users alongside in depth knowledge of the wide variety of social media platforms.

#### Title:

**Device Management** 

# **Description:**

How will you internally manage the referral requests and the demand for the service. Please include in your answer the storage, delivery, and collection of the devices?

#### **Answer**

Batches of devices will be collected in person and taken to a dedicated secure location within our HQ. Only 2 specific staff will have access to the locked store.

Devices will be added to the asset register, checked to ensure functionality and an initial suite of apps installed. Each device will then be prepared in line with assessment and identified needs, including an email address if required. Support material including contact details, easy access help sheets, easy read set up instructions will form a starter kit added to the device with a paper copy included in the package.

Packages will be tracked and delivered by insured, registered mail requiring a signature or delivered in person.

Dedicated administration will update the asset register when devices arrive or leave the premises. Management of referrals and workforce availability will be a standing item at our weekly Senior Management Team meeting with our Deputy CEO line-managing the Project Manager to rapidly resolve any issues.

Referrals will be via approved routes (request forms generated by the Council's Mosaic system) via email or phone and entered onto our dedicated database at time of referral with a time scheduled to action assessment and induction.

We have a vetted, flexible, trained workforce of over 40 staff covering the County who are able to manage peak and troughs in referral rates throughout the project and for increased demand at commencement. We will proactively monitor those not utilising the resource and where possible, assist the user to re-engage. Where this proves unhelpful we will retrieve the device, allowing the maximum number of service users to benefit. The equipment will be wiped and available for re-use within 5 working days.

If demand is particularly slower or higher than commissioner expectation we will discuss with commissioners ways of rectifying this.