

Template partnership agreement between commissioner, IPS service provider, and Mental Health Trust

Note: This tool forms part of a suite of guidance documents, tools and templates developed by the IPS Grow consortium. It should be read in conjunction with document “2.0 Introduction to IPS Grow delivery tools”. Please ensure you adapt this document fully to comply with local requirements. Further information can be found at www.ipsgrow.org.uk. This tool was last updated June 2018.

1. Background

1.1 The *name of commissioner* and MHEP recognise the strength and value of effective partnerships in contributing to the improvement of the well-being of the *name of commissioner's* communities and meeting its strategic priorities.

1.2 The expectation is that the *name of mental health trust* and the *name of IPS provider* will work collaboratively to improve mental health employment outcomes, as the success of an IPS mental health employment support service can be attributed to the levels of partnership working and integration that is achieved by the organisations involved. The partners to this agreement will actively support the successful delivery of the IPS service and in line with the IPS principles (see Centre for Mental Health IPS principles). It is essential that partnerships between the *name of IPS provider* and *name of mental health trust* work well throughout the contract as the new mental health employment service will be embedded within the mental health teams at *name of mental health trust*.

1.3 This document outlines areas of integration between the IPS provider and *name of mental health trust*. It is likely that as the service is embedded and integrated the IPS Provider and *name of mental health trust* will develop firmer and more integrated plans.

1.4 Strong partnership arrangements are especially important as the IPS provider contract is partly funded by outcomes based payments. Where outcomes are not maximised this may reduce the size of the service the provider can afford to deliver which would have a negative impact on overall employment outcomes delivered.

1.5 The IPS provider and *name of mental health trust* may wish to develop this agreement further or more formally to support the delivery of improved mental health outcomes.

2. Partnership Agreement

Co-location

2.1 Integration is a key principle of IPS and is key to ensuring employment advisors are a genuine part of integrated teams and that health and employment outcomes are thought about holistically with patients.

2.2 We anticipate co-location as a minimum with all relevant secondary care community teams.

2.3 To ensure that co-location works well, the following practical arrangements should be put in place during the implementation period:

- Allocated area/desk space for each of the employment specialists working within the community mental health teams.
- Access and input to relevant clinical information systems.
- IT set up /support in a timely way to ensure employment specialists have access to clinical information systems?
- Data security systems in place and IG training for employment specialists and any member of staff who will be accessing client information.
- Access to relevant internal NHS training

Honorary Contracts

2.4 *name of mental health trust* is to offer an honorary contract to all IPS provider staff who will work within the service.

2.5 The employment specialist will hold a substantive contract with the IPS provider.

2.6 As part of the honorary contract, employment specialists will need to have an up to date DBS check in place from the IPS provider and shared as required with *name of mental health trust*.

2.7 *name of mental health trust* is to have a named HR contact to support the smooth set up of honorary contracts and other HR matters.

Working practices

2.8 In line with the service specification both *name of mental health trust* and the IPS provider will be committed to developing and maintaining strong partnerships including:

- Communicate/agree activity targets in accordance with service specification.
- Identify and address any issues openly and as soon as possible for agreement on individual or joint actions as required.
- Refer any issue that cannot be agreed to *name of mental health trust* /IPS provider managers for resolution.
- If an agreement still cannot be reached then the matter will be escalated to *name of mental health trust* / the IPS provider's senior management for final resolution.
- Regularly review operations for improvement.

- Respect the principles of meaningful partnership working in the development of the service.

2.9 In order to ensure that the new employment service is fully embedded within the mental health team, the following practices should be implemented:

- Documentation of mental health treatment and employment services integrated into a single client record, to avoid duplication and ensure a person-centred approach.
- Employment specialist to have a regular slot at team meetings with secondary care teams
- Employment specialists to attend client review meetings where employment is discussed as part of the support/interventions for clients.
- Quarterly scheduled catch ups with service managers for service reviews to ensure that any issues raised are dealt with.
- Annual report of the IPS Service should be presented to the Trust Board to raise the profile of employment and ensure that the service is treated as a core part of the Trusts work
- Brief annual review of service with senior *name of mental health trust* leads (CE/Directors) and commissioners as part of management meeting.
- *name of mental health trust* management commitment to championing employment.
- Good practice agreement in place to include:
 - Safeguarding, reporting procedures
 - Referral pathway guidance

3 The name of IPS provider's responsibilities

- Allocation of a named line manager to take lead responsibility
- Recruitment, induction and allocation of Employment Specialists.
- All direct costs of Employment Specialist employment
- Individual Employment Specialist performance management and supervision
- Professional development, training and quality improvement
- Attendance at *name of mental health trust* management meetings as agreed
- Liaison with team management to agree actions on any issues arising
- Delivery of the outcomes as specified in the contract

4 The name of mental health trust responsibilities

- Allocation of a manager to take lead responsibility for the partnership
- Provision of an identified supervisor responsible for overseeing each honorary employee's position within *name of mental health trust* teams and offering clinical supervision
- Provision of appropriate operational training and non-clinical staff mandatory training
- Induction, with introduction to all relevant policies and procedures to include organisational and local team induction
- Supporting caseload allocation through strong partnership working
- Ensuring employment outcomes are recorded on clinical information systems and accurate reporting of employment outcomes
- Overall responsibility, with commissioners, for the National Outcome Measure for

employment of people on CPA

5 Oversight of partnership agreement

Name of commissioner will take the lead in overseeing this partnership agreement in collaboration with *name of IPS provider* and *name of mental health trust*. The partnership agreement and its delivery will be reviewed on an annual basis and otherwise as required.

Signatories

Name of commissioner

Signatory

MHEP

Signatory

Name of IPS provider

Signatory

Name of mental health trust

Signatory

Date of partnership agreement

Date of next review