

PEOPLE (ADULTS & HEALTH) SCRUTINY PANEL

01 October 2015

Early Warning System

Report of the Director for People

Strategic Aim:	Meeting the health & wellbeing needs of the community.	
Exempt Information	No.	
Cabinet Member(s) Responsible:	Councillor Richard Clifton, Portfolio Holder for Adult Social Care	
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Ward Councillors	n/a	

DECISION RECOMMENDATIONS

It is recommended that the Panel:
1. Notes the content of the report.

1. PURPOSE OF THE REPORT

- 1.1 The purpose of this report is to provide information on the relevant agencies and early warning systems to ensure good practice by registered providers.

2. BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 The report has been written following members seeking assurance that council officers work in a preventative way in their day to day business working with the regulated care sector such as care homes. The purpose of the report is to demonstrate a multi-agency approach and also to clarify each respective agencies statutory responsibility. The below demonstrates officers have systems to identify patters of behaviours that can be indicators of abuse such as neglect but can be reactive to the more common unpredictable instances of suspected abuse or bad practice.

3. QUALITY OF CARE

- 3.1 The local authority holds contracts with all providers that provide care for our most vulnerable citizens. These are registered providers and incorporate either residential care homes or domiciliary care providers. The council monitors the quality of care through contract visits to ensure a number of quality elements such as the environment are suitable, that agreed training is taking place, that care plans are effective or monitoring the number of complaints. If concerns are found officers will draw up an action plan with the provider to assist them and work with them to bring the establishment or practice up to the expected practice standards.
- 3.2 The Council also monitors the registered providers through the reviews of individuals that the council funds. Health do the same for people they fund. These reviews provide feedback on the providers' practice, especially as many providers offer services to multiple council funded individuals.
- 3.3 In addition to the above other professionals are regularly in contact with the provider and are continually scrutinising practice. For example there are GP's, Occupational Therapists, Psychiatric Nurses and District Nurses regularly attending. Also family and friends regularly attend and all will readily report concerns.
- 3.4 Every two weeks our Council Officers come together to discuss care providers to collate intelligence into a risk matrix. This collated intelligence enables Council Officers to identify patterns that are indicators for more serious problems, as well as forming the basis to their visits.
- 3.5 Overall, however, the statutory responsibilities for ensuring standards are maintained by registered providers including care homes are with the CQC (Care Quality Commission). Officers share both soft intelligence and report actual concerns about a provider with CQC. It is CQC's duty to ensure "compliance" and looks specifically at the list below:
 - a) *Safe*: people are protected from abuse and avoidable harm.
 - b) *Effective*: people's care, treatment and support achieve good outcomes, help to maintain quality of life and are based on the best available evidence.
 - c) *Caring*: staff involve and treat people with compassion, kindness, dignity and respect.
 - d) *Responsive*: services are organised so that they meet people's needs.
 - e) *Well-led*: the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around the individual's needs, that it encourages learning and innovation, and that it promotes an open and fair culture.

- 3.6 Against these CQC publish ratings for each provider, as well as an overall rating. The ratings are Outstanding, Good, Requires Improvement and Inadequate. The ratings for all Rutland Care Homes are listed in appendix 1 together with the inspection summaries for all Homes.
- 3.7 If a provider does not meet a good rating but the impact on quality is not significant or there are no widespread concerns, then this will be rated as requires improvement. If the impact on quality is significant or there are widespread concerns then this will be rated as inadequate. It should be noted that CQC may recommend areas for improvement, even though a regulation has not been breached, to help a provider move to a higher rating.
- 3.8 Where a provider is not meeting a legal requirement or struggles to do so consistently, but people using the service are not at immediate risk of harm, CQC may use their power to require a report from the provider. The report must explain the action the provider is taking or proposes to take to meet the relevant legal requirement(s). The Local Authority's Contracts Monitoring Officers will work with CQC at this point. CQC will return to the registered provider to ensure the action plan is being worked to and that standards are coming back to compliance
- 3.9 Beyond this CQC may work with the various bodies to 'enforce' the standards. Depending on the service and the circumstances, they can work with local authorities, regulatory bodies and even the police to ensure that actions are taken.

4. SAFEGUARDING

- 4.1 If CQC have a safeguarding concern, where 'abuse' is suspected (beyond compliance) to have happened, they inform the Local Authority. It is the Council who have the statutory duty for safeguarding vulnerable adults. Reports of suspected abuse come to a SPOC (single point of access) to which all of the above professionals and members of the public have a duty to report into if they suspect 'abuse' is occurring. If CQC believe a registered body has gone beyond compliance infringement and has entered the thresholds for safeguarding then CQC will directly inform officers at the local authority through the SPOC who will at this point take over if officers agree it is a safeguarding matter. This is the decision of the local authority not CQC.
- 4.2 We have established the SPOC over the last 8 months or so and it has proved very effective as now all concerns are reported through our duty system and are captured at one point. This provides us with a wealth of intelligence which we share with fellow agencies and they in turn share their intelligence with us, if necessary, to protect vulnerable people.
- 4.3 Members of the public also call in at the SPOC, sharing their concerns in the community for officers to screen under safeguarding thresholds and intervene if abuse is suspected.

- 4.4 If any safeguarding alert is raised via the SPOC either from CQC or any other agency or provider or from the public, they are all treated with equal concern and receive the same diligence. In the case of a care home a strategy meeting will be held with all involved agencies including CQC, Health and the Police and any other agency with a role or interest who can add to the intelligence gathering and sharing of the risk.
- 4.5 A multi-agency protection plan will then be made with all concerned agreeing to the plan and what actions they need to take within the plan. The Local Authority takes the lead in these at all times but its statutory duty is to cause enquiry to happen. This means the Local Authority will require other agencies to investigate or the provider themselves and will then scrutinise the investigation received to it with the outcome. The course of action is decided at the strategy meeting by the multi-agency representatives. The planned actions are shared with all placing agencies to make them aware and usually advise them to carry out additional reviews and report back to Rutland County Council as the host authority.
- 4.6 In conclusion, a robust system is in place in Rutland County Council to ensure individuals are well cared for by providers and to ensure services are providing what they are contracted to do. In addition, a close working relationship exists between the Council and CQC and other partners ensuring information is exchanged.

5. CONSULTATION

- 5.1 None

6. ALTERNATIVE OPTIONS

- 6.1 None

7. IMPLICATIONS

8. FINANCIAL IMPLICATIONS

- 8.1 The ongoing development of the adult social care service to enable it to develop and meet its statutory duties.

9. LEGAL AND GOVERNANCE CONSIDERATIONS

- 9.1 None

10.1 EQUALITY IMPACT ASSESSMENT

10.1 Issues in relation to E&D are addressed in the RCC contract with the relevant homes and providers.

11. COMMUNITY SAFETY IMPLICATIONS

11.1 None

12. HEALTH AND WELLBEING IMPLICATIONS

12.1 The early warning system has a potential impact on the health and wellbeing of vulnerable service users in the care of regulated providers.

13. ORGANISATIONAL IMPLICATIONS

13.1 None

14. CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

N/A

15. BACKGROUND PAPERS

N/A

16. APPENDICES

N/A

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