

SCRUTINY PANEL

6 April 2017

EXTERNAL PROVIDER QUALITY ASSURANCE

Report of the Director for People

Strategic Aim:	Meeting the health and wellbeing needs of the community	
Exempt Information	No	
Cabinet Member(s) Responsible:	Mr R Clifton, Portfolio Holder for Health and Adult Social Care	
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DECISION RECOMMENDATIONS

That the Panel:

1. Notes the content of this report and offer comments.

1 PURPOSE OF THE REPORT

- 1.1 To provide an overview of the Quality Assurance process with external providers and to note the changes made.

2 BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 The Council currently commissions services with 11 in-county residential care providers and 12 domiciliary care agencies. The Council has a responsibility to ensure that the services delivered are fit for purpose, meet the needs of the Service Users and comply with Care Quality Commission regulations and relevant legislation.

2.2 How Quality Assurance previously operated:

The Quality Assurance process was shared within the Procurement and Contract Management Team by the two Senior Procurement Officers. The Officers completed annual contract monitoring visits, received quarterly information returns from providers and completed targeted inspections in response to safeguarding and/or compliance concerns. This met the Council's statutory responsibilities and is in line with how other local authorities currently operate.

- 2.3 Officers identified that there were risk associated with this approach to Quality Assurance, particularly given the limited number of Rutland's providers. The

impact of a suspension of placements or collapse of a provider in Rutland would be much greater than in other local authority areas. In addition, officers noted that concerns were being addressed on a reactive basis with providers, rather than working proactively to ensure that issues were prevented or dealt with in their infancy.

- 2.4 To address this, a Business Case was made for the provision of a dedicated Quality Assurance Officer role and this was recruited to in May 2016. This aligned with the Care Act requirements to facilitate and support our local provider market, and enabled a specific role focussed on achieving high quality care for local Service Users.
- 2.5 **Purpose of the Quality Assurance Officer role:**
The main purpose of the Quality Assurance Officer role is to provide a consistent approach to contract and compliance monitoring; ensure joint working with Safeguarding; and establish links with other local authorities' Compliance Teams to support cross-border placements. The role also allows the Council to take a more proactive approach with providers to identify potential issues and resolve more quickly.
- 2.6 **How Quality Assurance now operates:**
Each provider receives an annual contract monitoring visit per year. Where providers are deemed non-compliant in any aspect, an action plan is devised with the provider and regular support visits are scheduled in. The support visits are both to monitor progress and to ensure the provider has the support to improve in a timely manner. An update visit is completed within three months of the date of the initial visit to ensure that all actions have been completed.
- 2.6.1 Where a provider is fully compliant but potential areas for improvement are identified, a similar approach is taken to support the implementation of the improvements.
- 2.6.2 All providers also receive a minimum of quarterly visits to ensure that regular communication is maintained. The number of visits that a provider receives is decided according to the level of support that the provider requires and/or requests.
- 2.6.3 Closer links have been established between the Safeguarding Team and Quality Assurance role. Regular in-house information sharing meetings take place to discuss safeguarding alerts and to plan how to progress these with providers.
- 2.6.4 In addition, a shared 'Live Status List' has been created to ensure that real time information on any concerns is always available to all Adult Social Care staff, reducing the risk of placements being made with providers inappropriately. This list includes information from Leicester and Leicestershire currently, and is being expanded to include information across all local authorities where placements are made. Previously, ASC staff contacted the Senior Procurement Officers for this information at the point a placement was going to be made; the shared list speeds up the process and ensures the information is always available.
- 2.6.5 Social Care Workers undertake joint visits as appropriate with the Quality Assurance Officer which ensures that concerns are looked at both from a safeguarding and a compliance aspect.

- 2.6.6 Safeguarding alerts are distributed to partner agencies and neighbouring local authorities whenever a safeguarding enquiry commences, which ensures a clear line of communication and enables additional information and concerns to be collated.
- 2.6.7 Regular external information sharing meetings between RCC, other local authorities, health commissioners and the Care Quality Commission provide updates on current enquiries and compliance concerns. This ensures that Officers are aware of the situation across neighbouring authorities, and any changes to providers which may have an impact locally.
- 2.6.8 The dedicated Operations Delivery Manager role, which was also introduced in May 2016, focusses on ensuring compliance with The Care Act and internal Quality Assurance. This links with the Quality Assurance Officer to ensure that a consistent approach is taken to Quality Assurance across internal and external providers. The two roles work jointly to deliver the Provider Fora, identify training and workforce issues, and support Care Act compliance.

2.7 **The impact of the revised Quality Assurance approach:**

There has been a positive shift in Care Quality Commission ratings for providers contracted by the Council since the revised approach to Quality Assurance has been introduced:

- i) Previously there were 5 in-county residential providers with 13 ratings of “Requires Improvement” between them; this is now 4 providers with 4 ratings of “Requires Improvement” between them. All in-county residential providers are currently rated as “Good” overall.
- ii) There were 2 domiciliary care providers with 5 ratings of “Requires Improvement” between them; this is now 1 provider with 1 rating of “Requires Improvement”. All domiciliary providers are currently rated as “Good” overall.

Appendix A gives the overall ratings for all in-county contracted providers.

- 2.7.1 There has been significantly improved attendance and participation at the Council’s Provider Fora. The fora are designed to allow open discussions with Council officers in which providers can raise queries or concerns, offer updates on policy and guidance changes, and deliver brief training sessions.
- 2.7.2 There are now not only closer working relationships between the providers and the Council, but also improved communication between the providers themselves. An example of this is the work Officers have undertaken to facilitate shared training resources between providers.
- 2.7.3 Officers are able to evidence several case studies where the new approach has proactively supported a provider and this has had a positive impact on the service overall and also for the service users accessing these services.
- ## 2.8 **Future plans:**
- As part of the Quality Assurance process, there is some additional work planned for this year to run alongside the ongoing safeguarding, compliance and contract monitoring work:

- i. **Fire Awareness Sessions** in partnership with Leicestershire Fire and Rescue Service for both internal and external providers to enable workers to identify potential risks in service users' homes.
- ii. **Landelijke Pravelentiemeting Zorgproblemen (LPZ) Project** due to commence in November 2017, which works with providers to improve service users' physical safety within care homes.
- iii. **Specialist training** for providers such as Dementia Awareness and Understanding Behaviours that Challenge, sourced in response to provider requests.
- iv. **Facilitation of shared resources** to assist providers in accessing NVQ qualifications for their staff.

3 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

- 3.1 The Council has developed a new Quality Assurance process with the Quality Assurance Officer and Operational Delivery Manager role which enables a greater proactive approach to Quality Assurance internally and externally.
- 3.2 This has ensured that there is earlier identification of risks, a reduction in risk and greater assurance that providers within Rutland are delivering safe and high quality services.
- 3.3 Better, consistent communication has been established both internally and externally which enables the Council to ensure that all concerns are dealt with swiftly and effectively.
- 3.4 The improved working relationships with the providers have also led to improved standards in care and consequently better Care Quality Commission ratings.
- 3.5 Further work is planned to ensure that the market within Rutland is stable, to further improve quality, and to ensure that providers have access to relevant qualifications and training.

4 BACKGROUND PAPERS

- 4.1 There are no additional background papers to the report

5 APPENDICES

- 5.1 Appendix A – CQC Ratings for RCC Contracted Providers

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.

Appendix A. Care Quality Commission Ratings

Care Home	CQC prior to May 2016					Date of Inspection	CQC after May 2016				
	Safe	Effective	Caring	Responsive	Well-Led		Safe	Effective	Caring	Responsive	Well-Led
Belton House	R. Impr	R. Impr	R. Impr	R. Impr	R. Impr	13/09/2016	Good	Good	Good	Good	Good
Chater Lodge	R. Impr	R. Impr	Good	Good	Good	17/12/2016	Good	Good	Good	Good	Good
Crown House	Good	Good	Good	Good	Good	02/07/2016	Good	Good	Good	Good	Good
Manton Hall	R. Impr	R. Impr	R. Impr	R. Impr	Good	21/10/2016	R. Impr	Good	Good	Good	Good
Oak House	Good	Good	Good	Good	Good	09/06/2016	Good	Good	Good	Good	Good
Tixover House	Good	Good	Good	Good	Good	11/08/2016	Good	Good	Good	Good	Good
Willowbrook	Good	Good	Good	Good	Good	17/08/2016	Good	R. Impr	Good	Good	Good
Wisteria House	Good	Good	Good	Good	Good	01/02/2016	Good	Good	Good	Good	Good

Provider	CQC prior to May					Date of Inspection	CQC after May				
	Safe	Effective	Caring	Responsive	Well-Led		Safe	Effective	Caring	Responsive	Well-Led
A&R Guardian	No CQC inspection – last RCC contract monitoring visit 01/09/2016. Required improvement, action plan put in place – actions completed 16/02/2017.										
Care In Comfort	No CQC inspection – last RCC contract monitoring visit 02/12/2016. Required improvement, action plan put in place – due for re-visit April 2017.										
Cathedral Home Care	No CQC inspection – last RCC contract monitoring visit 07/12/2016. Required improvement, action plan put in place – due for re-visit April 2017.										
Evolving Care	Good	Good	Good	Good	Good	05/07/2016	Good	Good	Good	Good	Good
For You Healthcare	Good	Good	Good	Good	Good	29/07/2016	Good	Good	Good	Good	Good
Help at Home	Good	Good	Good	Good	R. Impr	06/09/2016	Good	Good	Good	Good	R. Impr
The Caring Company	Good	Good	Good	Good	Good	28/11/2016	Good	Good	Good	Good	Good
Unique Superior Care	R. Impr	R. Impr	Good	R. Impr	R. Impr	01/02/2017	Good	Good	Good	Good	Good
Velvet Glove	Good	Good	Good	Good	Good	14/05/2016	Good	Good	Good	Good	Good

The following providers have not had a CQC inspection after May 2016; therefore there is no measurable impact to the ratings.

Care Home	Date of Inspection	CQC Inspection Ratings				
		Safe	Effective	Caring	Responsive	Well-Led
Aberdeen House	05/10/2015	Good	Good	Good	Good	Good
Rutland Care Village	16/07/2015	Good	Good	Good	R. Impr	Good
The Lodge Trust	30/12/2015	R. Impr	Good	Good	Good	Good
Bluebird Care	28/09/2015	Good	Good	Good	Good	Outsta.
Provision Care	24/12/2015	Good	Good	Good	Good	Good

