

Domiciliary Care and Extra Care Services

- 1.1 The Council supports approximately 1,200 people in Bromley to stay in their own homes through the provision of domiciliary care services.
- 1.2 Services are procured from a Framework of Providers which was awarded in August 2012 following a Procurement Exercise. There are 24 providers on the framework, all of whom meet robust quality standards. In order to comply with Financial Regulations, new care packages are offered out to all contracted providers on the Framework. A key feature of the contract is that all providers are required to use an electronic call monitoring system. This assists them to monitor the timings of calls and to investigate any discrepancies in timing with carers.

REGISTRATION

- 1.5 Domiciliary care agencies providing personal care are required to register with the Care Quality Commission (CQC) under the Care Quality Commission (Registration) Regulations 2009 introduced by the Health and Social Care Act 2008. The CQC monitors for compliance against The Essential Standards of Quality and Safety. Compliance reports may identify 'minor', 'moderate' or 'major' concerns against any of the Essential Standards. Where concerns are identified, they will then take whatever they consider to be the most appropriate action to ensure that the necessary improvements are made
- 1.6 The Council continually monitors the registration status of domiciliary care agencies and if at any time there are concerns about this status the contractual arrangements with the agency are reconsidered. All of the agencies contracted to the Borough are registered with the CQC. A schedule of agencies used by the borough with their CQC scores and a record of the contract monitoring visits can be found in Appendix 4.

CONTRACT MONITORING

- 1.7 Contract monitoring meetings are scheduled based on a risk assessment. The Contract Compliance officers use the Essential Standards of Quality and Safety and the Quality Assessment Framework (QAF) to assess performance. They also review recent complaints and comments from Care Services. The frequency of monitoring visits to other agencies is scheduled proportionate to risk and previous performance, each agency is visited at least annually, but agencies with more clients are monitored quarterly. Monitoring covers five key areas:
 - Assessment and Care Planning.
 - Medication

- Protection of Service Users and Staff.
 - Quality Assurance
 - Organisation and Running of the Business.
- 1.8 At the meeting the monitoring officer discusses progress on each key area with the provider and their staff and scrutinises supporting documentation evidence produced. The QAF is used for all monitoring of Domiciliary Care Services so each section of the QAF is completed and a score given. Following each monitoring meeting an action plan is jointly agreed which is then followed up on subsequent visits.
- 1.9 During 2013 officers have identified the following areas for improvement
- Quality Assurance processes undertaken by the agency and the involvement of Service Users in their care.
 - Frequency of staff meetings. There have been improvements in the individual supervision of staff across Agencies, but not much to evidence to demonstrate group supervision and sharing of best practice, or problems.
- 1.10 Monitoring Officers are also using the information from Electronic Call Monitoring systems to ensure that Services Users are receiving calls at the time they expect, for the length of time commissioned.

QUALITY ASSURANCE

- 2.0 A Quality Assurance Officer visits service users and their carers to find out at first-hand how well providers are performing. The information gathered from users is analysed and any issues highlighted are addressed with providers at monitoring meetings and if appropriate are carried forward into action plans. The schedule of quality assurance visits is designed to co-ordinate with the Contract Monitoring schedule.
- Any serious issues are raised immediately with the Agency; otherwise the Agency receives a report at the end of a set of client visits outlining the general feedback.
- 2.1 Key improvement areas identified through quality assurance visits were:
- Service users not being informed in advance of a change of carer.
 - Carers in a rush.
 - Carers not always staying for the full length of the planned visit.
 - Consistency of care worker.
- 2.2 When issues about poor standards of service are raised through contract monitoring or by other stakeholders LBB Officers initially investigate them with

the agency. Often the investigation will result in the setting of an action plan for the agency which is then regularly monitored to ensure that improvements are made and sustained. If standards fail to improve officers may take additional action; for instance the Council will stop making new placements to the agency improvement has been demonstrated.

- 2.3 During 2013 the Council suspended new placements to Harmony Healthcare following concerns raised during a monitoring visit in May 2013 about poor record keeping and recruitment procedures. An action plan was put in place and followed up by the Compliance Officer. The suspension was lifted in August 2013 following a further Monitoring Visit to check on progress.
- 2.4 New placements to Ark were suspended in February 2012 due to a range of problems with communication and missed visits. Work was carried out to demonstrate continued and sustained improvement and the suspension was lifted in May 2013. The lifting of the suspension was dependent on the Agency agreeing to take a limited amount of new work in order that Officers could be confident that the improvement was sustained. The Quality Assurance Officer visited Ark Clients in May and November 2013 to gain independent feedback before a follow up Monitoring Visit in November 2013.
- 2.5 Care UK was suspended from receiving any new care packages in June 2012 as a result of serious concerns over missed visits. There were several meetings with Care UK management and further monitoring visits before Officers considered that Care UK had made sufficient progress to take new care packages again in Bromley. The suspension was finally lifted in July 2013 following a Monitoring Visit to confirm compliance.

COMPLAINTS

- 2.6 Front line Care Services staff take the lead when dealing with informal (unwritten) complaints about agencies. Formal complaints are forwarded to the contract compliance officers by the ACS complaints team for investigation. Investigations are conducted with the relevant agency which is expected to provide any information relevant to the complaint. This may include timesheets, care records from service users' homes and statements from any agency staff involved in the issues raised.
- 2.7 Overall the number of complaints made about domiciliary care agencies has fallen to a low level. During the year 2011/12 there were 15 formal complaints about domiciliary care, a drop from 33 the previous year. In 2012/13 there were 6 formal complaints, whilst from April to November 2013, there have been 7 complaints.
- 2.8 The number of formal complaints received about the services from external agencies has reduced overall during the last few years whilst the number of care hours commissioned has remained relatively stable. In addition to monitoring formal complaints received by agencies the Contract Compliance officer also checks the number of complaints received and resolved by directly by agencies. The actual number of complaints about each agency is set out in the table below.

Care Agency Name	2013/14	2012/13	2011/12	Total	No of clients end Nov 2013
ACSC			1	1	65
ALLIED			0	0	70
ARK HOME HEALTHCARE			1	1	43
AMAZING			1	1	0
BRIDGES	1		1	2	59
BROMLEY MIND			1	1	0
BS HOMECARE		1		1	4
CARE UK		2	2	4	44
CAREMARK	2			2	109
CARE WATCH			0	0	67
DARET HOMECARE				0	11
GENUINE CARE			0	0	0
HARMONY HOMEAID		1	0	1	18
HOMECARE			0	0	0
KENTISH CARE	1		1	2	47
MACKLEY			1	1	9
MIHOMECARE				0	17
REDSPOT			1	1	0
SEVACARE	1			1	12
SURE CARE			3	3	180
VERILIFE	2	1		3	93
WESTMINSTER		1	2	3	96
	7	6	15	28	

EXTRA CARE HOUSING

- 2.9 The contract compliance team also monitor the quality of service provided in Extra Care Housing Schemes for older people which been developed over the last few years. These schemes are governed by the CQC regulations for Domiciliary Care Agencies; the QAF is employed for monitoring care and support and the frequency of monitoring visits is determined by our standard risk assessment tool.
- 2.10 There are 3 Extra Care Housing schemes in borough where tenancy support is provided by the Landlord and care has been commissioned from an external Provider. All schemes have been frequently monitored this year. One of the schemes which opened last year had a high turnover of senior staff earlier this year. This led to problems with staffing levels and practice issues in the direct delivery of care. As a result the Council and the Provider agreed to a short suspension of new placements to the scheme. Officers have met frequently with this provider to monitor progress on these issues and a restructured Management team has delivered improvements in the last few months.

SAFEGUARDING

- 2.9 When safeguarding alerts are received the care management teams instigate the Bromley multi agency safeguarding procedures. Monitoring officers can be involved in safeguarding investigations and always follow up on learning points or action plans at the conclusion of each case. The Council's Adult Safeguarding Manager convenes the Care Services Review Group which brings together safeguarding and contract compliance with the safeguarding lead practitioners and partners from the Clinical Commissioning Group, Oxleas and Bromley Healthcare in order to monitor current information, identify any patterns which need investigation and share any safeguarding concerns about local homes and domiciliary care agencies. This ensures that any potential issues are picked up and factored by into monitoring and training programmes early.
- 2.10 There have been 23 safeguarding referrals so far this year (to end November) compared to 28 in 2012/13. Many referrals concerned suspected financial abuse, physical abuse or neglect. In every case of suspected financial abuse and in many other cases the police are involved and the care worker suspended as a matter of course whilst an investigation takes place. Officers consider all information available to establish the facts, including whether or not there are patterns of complaints or grumbles about the care worker, or from the user. Where allegations against care workers are substantiated they are reported to the Independent Safeguarding Authority (ISA) which has set up a register to prevent their future employment.