

Decision Maker: CARE SERVICES PORTFOLIO HOLDER

**For pre decision scrutiny by Care Services Policy
Development and Scrutiny Committee**

Date: 12th January 2015

Decision Type: Non-Urgent Executive Non-Key

Title: ANNUAL QUALITY MONITORING REPORT

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Ward: Borough-wide

1. Reason for report

1.1 Officers present an annual report to the Policy Development and Scrutiny Committee on quality monitoring of commissioned care services. This report covers the arrangements for monitoring contracts and progress made to raise standards in:

- Domiciliary care, extra care and supported living schemes (Appendix 1)
- Care homes, (Appendix 2)
- Children's services (Appendix 3)

1.2 The report also recommends the addition of 5 care agencies to the Domiciliary Care Framework.

2. **RECOMMENDATION(S)**

2.1 Members of the Care Services Development and Scrutiny Committee are asked to:

- Consider and comment on the report.
- Undertake a programme of visits to Care Homes in the Borough during 2016/17

2.2 The Care Services Portfolio Holder is asked to agree that the providers listed below are added to the Domiciliary Care Framework:

- Daret
- Fabs Homecare
- Independent Care
- Krislight
- LifeComeCare

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: Estimated cost no cost directly arising for the recommendations in the report.
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: 1)Residential and nursing home, 2)domiciliary care, 3) Training 4) children's
 4. Total current budget for this head: £Care homes - £34m pa, Domiciliary Care -£13m pa, Training – Net expenditure - £63,720 Children's Residential Placements -£
 5. Source of funding: Revenue Support Grant
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Staff

1. Number of staff (current and additional):
 2. If from existing staff resources, number of staff hours: 5 FTE Contract Compliance staff in Commissioning Division
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Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is applicable
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Care Homes - 1600, Domiciliary Care - 1200, Children - 290
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 The Policy Development and Scrutiny Committee receives annual updates covering the arrangements for monitoring contracts and progress made to raise standards in services commissioned from third parties. This covering report details the general arrangements for monitoring Adult and Children's residential and domiciliary services. Detailed reports outlining the quality monitoring activity for Domiciliary Care, Extra Care Housing Care Homes, Supported Living Schemes and Children's placements are attached as appendices to this report.

Regulatory Frameworks – Adults

3.2 The regulatory framework covering care homes and domiciliary care agencies for adults is the Health and Social Care Act 2008. Care Quality Commission (Registration) Regulations 2009 and Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 detail the key care standards which providers must deliver. There are 28 regulations and associated outcomes that are set out in this legislation. The CQC monitors for compliance against these Fundamental Standards of Quality and Safety. CQC Compliance reports may identify 'minor', 'moderate' or 'major' concerns against any of the Fundamental Standards.

3.3 These are grouped into 5 key themed areas for the purposes of providing a consolidated rating for each home:

- Safe.
- Effective.
- Caring.
- Responsive to people's needs.
- Well-led.

3.4 The provider also receives an overall summary rating. All these ratings shown below are published on the CQC website. By March 2016 all providers will be rated under this new rating system. The outstanding rating is very rarely awarded and whilst 2 providers have been awarded outstanding in some categories none have yet achieved outstanding as an overall rating.

- Outstanding.
- Good.
- Requires improvement.
- Inadequate.

Bromley Providers ratings are shown below:

Outstanding	Good	Requires Improvement	Inadequate.
0 – (Community Options, Antakol and Clairleigh have each achieved an outstanding rating in 1 key theme)	37	17	0

3.5 Where the CQC identify concerns with a provider they take appropriate action to ensure that the necessary improvements are made to ensure that the care meets the required standards.

3.6 Spreadsheets setting out the current ratings for all the Bromley providers are attached as Appendices 4 and 5. These also show the number of placements funded by the Council, the dates of monitoring visits made by the Council's Contract Compliance Officer and CQC.

- 3.7 The CQC checks that providers have appropriate levels of management and that the registered person for that business has appropriate values and are well motivated. They will also take action if care services judged to be inadequate fail to make required improvements within the required timescales. In the worst cases the CQC will cancel their registration.
- 3.8 The Council has adopted a policy of not making any new placements with a registered provider where the CQC has found the service to be inadequate. If CQC takes action against a provider, the Council's Care Services teams undertake a risk assessment in order to decide what the Council's response should be taken in respect of current service users.
- 3.9 Where a provider is given a rating of Requires Improvement by CQC the Council's Contract Compliance Officer will intensify the level of scrutiny of the provider and the provider's performance is regularly reviewed by the partners at the Care Services Intelligence Group (CSIG).
- 3.10 Where service users have chosen to live out of the borough the contract compliance team undertakes regular checks of the CQC ratings. Care Services are alerted to any issues raised about the quality of care provided and will take follow up action if necessary. Care Services staff reviews service users in residential care regularly in order to ensure that residents continue to be safely placed.

Care Act 2014

- 3.11 In response to the requirements of the Care Act 2014 the department has produced a market position statement which analyses the Council's care requirements and the availability of local services.
- 3.12 The Council has also produced a robust procedure to be adopted in the event of provider failure. However, the Contract Compliance Team monitors the financial health of the providers it contracts with via a credit check and Companies House activities which provides early warning of any problems.

Quality Assessment Framework (QAF)

- 3.13 The Contract Compliance Team uses a QAF to measure the performance of providers against a range of standards in key areas. Standards are graded in four groupings, 'A', 'B', 'C' and 'D'. Level C is based upon the minimum standard of the 'Essential Standards of Quality and Safety' published by Skills for Care. If any area of service is graded level 'D' the provider is required to make immediate improvements as this is unsatisfactory. Grades 'B' and 'A'; provide incentives to Providers to demonstrate continuous improvements in the quality of their service.
- 3.14 The QAF has been adapted for use across Residential Care, Domiciliary Care, Supported Living, Extra Care, Day Care and for all other contracts monitored by the ECHS Contract Compliance Team. All new contracts require the Provider to comply with the QAF. Providers are required to complete an action plan for any areas where they score D. Officers compile the QAF scores, analyse the results and use these to highlight areas where practice needs to be improved at the quarterly forums run by the Council (see 3.24). If necessary Officers commission focused additional training in particular areas.

Safeguarding

- 3.15 Bromley Safeguarding Adults Board funds a comprehensive free training programme which all local providers can access. When safeguarding alerts are raised the Care Management teams

instigate the Council's safeguarding procedures. Contract Compliance officers can be involved in safeguarding investigations and will ensure that providers follow up on learning points or action plans at the conclusion of each case.

- 3.16 The Council's safeguarding manager convenes CSIG which is a regular meeting of officers from the Council, Bromley Clinical Commissioning Group, Bromley Healthcare, Oxleas, and CQC to exchange information and share any concerns about local providers. This ensures that any potential issues with individual or multiple providers are identified early; that investigations progress appropriately and that any learning requirements are factored into monitoring and training programmes.
- 3.17 Details of specific safeguarding events are set out in Appendices 1 and 2. The annual safeguarding report provides detailed information on the outcome of substantiated safeguarding alerts. This was reported to Care Services PDS on 23rd September 2015.

The Care Certificate

- 3.18 The Care Certificate standard was introduced in April 2015 for care workers new to delivering care and replaces the previous Common Induction Standards and National Minimum Training Standards. There are 15 standards to meet within the Care Certificate and Providers themselves assess that the care worker has achieved the required level of competency, then makes the award.
- 3.19 The Contract Compliance team has amended the QAFs to reflect the new requirements and ensure that providers are working towards implementing them. Skills for Care attend the Provider Forums and have made presentations to providers to ensure that they have appropriate information to implement this award. We will continue to work with providers on implementing this award consistently during 2016.

Training

- 3.20 The Council assists in raising the standards in care homes and domiciliary care by organising a comprehensive programme of training. This is designed and delivered in conjunction with Skills for Care, Health partners. During 2016 we will be maximizing resources by linking with neighbouring boroughs where it is cost effective to do so. All local Providers are invited to join a training consortium run by the Council which gives them access to training via taught courses and e-learning for a small contribution towards costs. There are currently 51 members of the consortium. The Council works with providers to ensure that the courses provided are appropriate, timely and assist providers in balancing the competing demands of delivering care and ensuring that staff receive both induction and refresher training.
- 3.21 The training courses address the requirements of the Essential Standards of Quality and Safety. Core training courses in first aid, food hygiene, health and safety and moving and handling form the majority of the training programme. The remaining courses provide valuable learning opportunities for care staff to gain additional skills and knowledge to help them carry out their duties. The programme is regularly updated and reviewed to include training on new legislation. The senior management programme was rolled out during 2015/16, which was well attended and has received very positive feedback.
- 3.22 The Council mapped its training courses to mirror the Care Certificate Standards and have commissioned bespoke training to train Provider staff to undertake Care Certificate assessments. This will be rolled out from January 2015 onwards.

Provider Forums

- 3.23 The Contract Compliance Team runs quarterly provider forums for Domiciliary Care, Care home and Learning Disability service providers. These events are well attended and provide the opportunity for good practice to be shared. Key partners from health regularly attend the forums in order that any shared issues or problems can be raised and discussed and resolution sought. A recurring item at all forums has been how we can jointly improve the management of hospital discharges and how providers can work with health partners in order to avoid inappropriate admissions. Another key area tackled this year was safer recruitment. As part of this work the Borders Agency attended both the Domiciliary Care and Care Home Forums to show providers how to identify forged identity documents.

The Care Market in Bromley

- 3.24 During the last year the NHS has significantly increased its focus on reducing admissions to hospital and facilitating discharge as soon as patients are stable and no longer require acute care. The focus is on facilitating assessment at home where appropriate rather than in a hospital or care home. This policy has put additional pressure on providers in Bromley because it requires them to respond to requests for assessments and to take new admissions or care packages 7 days a week. In order to co-ordinate this initiative a Transfer of Care Bureau has been introduced at the Princess Royal University Hospital which includes staff from all related disciplines, including social care. The Placements Team are continuing to have difficulty in sourcing both care home placements and care packages, particularly at the very short notice given.
- 3.25 In response to the additional pressure during the winter months the team has commissioned 3 block beds in nursing homes, a rapid response domiciliary care service and a maintenance service which enables people to return safely to their own homes. These services are funded by the NHS. The flexible contract with Medequip enables equipment to be provided quickly to facilitate discharges, again funded by the NHS where applicable.
- 3.26 Providers in the care sector all report that they are having increasing difficulty in recruiting suitable care staff. Some neighbouring Councils voluntarily adopted a policy of paying care staff the London living wage which also impacts on the ability of Bromley providers to recruit care workers to work on Bromley contracts. In response to the recruitment difficulties agencies have introduced organisational structures which incentivise staff to remain loyal to an agency in order to gain promotion. Domiciliary Care Agencies frequently offer “golden hello” incentives.
- 3.27 The Council has been commissioning care placements from its Domiciliary Care Framework since 2012. When the framework was set up the Council reserved the right to add new contractors, should one or more of the original Contracts withdraw, or be suspended or removed from the framework. Three providers on the framework are no longer providing care in Bromley (see appendix 2), therefore Commissioners have sought replacement agencies in order to try and meet the demand. The following providers have operated successfully under spot contracts and it is recommended that they are added to the framework:
- Daret
 - Fabs Homecare
 - Krislight
 - Independent Care
 - LifeComeCare

- 3.28 These 5 agencies are delivering care within the rates for domiciliary care set by the Council. Framework rates were frozen for the first 2 years, but were increased in August 2014 by 1.1% and August 2015 by 1.6%.
- 3.29 The introduction of the National Living Wage from April 2016 could have a significant impact on the care sector where traditionally care workers are remunerated at the lower end of average income levels. In Bromley around 95% of adult social care front line service delivery and spend is in the independent sector. The Council's social care contracts require providers to pay at least the National Minimum Wage, currently £6.70 per hour. It is not known how many of them are already paying at the higher National Living Wage (NLW) rate which will take effect for over 25s from 1st April 2016 (£7.20 per hour rising to £9 per hour by 2020). Employers are likely to benefit from changes to corporation tax and National Insurance which should mitigate some of the effect for those who will need to increase pay rates. The Council will consider the contractual position on an individual provider basis and would expect providers to be able to demonstrate the specific impact of the NLW on their costs.

Regulatory Frameworks - Children's Services

- 3.30 Children's services are subject to regulation by Ofsted. Ofsted conduct a full inspection on a 3 year cycle for which they may make a judgement in the following categories:
- Outstanding: a service of exceptional quality that significantly exceeds minimum requirements
 - Good: a service of high quality that exceeds minimum requirements
 - Adequate: a service that only meets minimum requirements
 - Inadequate: a service that does not meet minimum requirements

3.31 For any service receiving a judgement of either Adequate or Inadequate **annual** inspections will be conducted for which the following judgements could be made:

Good progress	The children's home has demonstrated continued improvement in quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the large majority of recommendations that were raised at the previous inspection.
Satisfactory progress	The children's home has maintained quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the majority of recommendations that were raised at the previous inspection.
Inadequate progress	The children's home has failed to address one or more requirements and/or has not met the majority of recommendations and/or the quality of care and outcomes for children and young people that were raised have declined.

3.32 The Central Placements team will only make placements with providers that have a rating of Good or Outstanding. Further information on Children's Services is in Appendix 3.

4 POLICY IMPLICATIONS

- 4.1 National and local policies expect that continuous improvement be achieved in the quality of care delivered in care services serving the local community.

5 LEGAL IMPLICATIONS

- 5.1 Under Section 21 of the National Assistance Act 1948 the Council has a duty to provide or arrange for residential accommodation for persons who by reason of age, illness, disability or any other circumstances are in need of care and attention not otherwise available to them.
- 5.2 Once a person has been assessed as being in need of such care the Council must have regard to the National Assistance Act 1948 (Choice of Accommodation) Direction 1992 which are intended to give clients a choice over where they receive such care arranged or provided by the Council. Such choice has to reflect both the costs of such accommodation as well as its availability.

Non-Applicable Sections:	Personnel & Financial implications
Background Documents: (Access via Contact Officer)	ACS14008 Quality Monitoring of Domiciliary Care, Care Homes and Children's Placements Framework Agreement for the Provision of Domiciliary Care Services.