Adult Social Care Scrutiny Commission Report

Adult Social Care - Contracts & Assurance 2018 Annual Quality Report

> Date: 29th October 2019 Lead Member: Councillor Sarah Russell Lead Strategic Director: Steven Forbes



Useful information

- Ward(s) affected: All
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- Report version number: 1

1. Purpose of report

- 1.1 The purpose of this report is to provide the Adult Social Care Scrutiny Commission with an overview of the quality of care provided by the regulated contracted organisations providing support to adult social care service users during 2018/19.
- 1.2 Regulated services are those registered with the Care Quality Commission (CQC), which is the regulatory body for the Department for Health & Social Care.
- 1.3 The report highlights that the overall quality of care and services has improved from 87.4% of providers being compliant at the end of 2017, compared to 95.2% being compliant at the end of 2018.
- 1.4 The Annual Quality Report 2018 is detailed at Appendix 1.

2 Summary

- 2.1 The Council's Contracts and Assurance Services (C&AS), which is part of the Social Care & Education department, oversees 250 contracts/grant agreements, at a value of over £101M per annum.
- 2.2 These contracts are divided into two types, i) Regulated and ii) Non-Regulated.
- 2.3 i) The Regulated services are those registered with the Care Quality Commission (CQC) because they provide personal care, such as bathing, toileting and feeding. These services are deemed to be high risk due to the vulnerability and complexity of the individuals using the service and are inspected by CQC using a risk-based approach. However, they are also subject to an annual Quality Assurance Framework (QAF) assessment, which is a tool developed and used by the C&AS to ensure that providers are compliant with the requirements as detailed in the contract.
- 2.4 The QAF compliments the CQC requirements and is undertaken on an annual basis, whereas the CQC inspections are risk based. The annual QAF assessment often highlights issues of concern/information and intelligence that is shared with CQC, and this has created positive working relationships.
- 2.5 ii) Non-Regulated Services are not subject to CQC inspections, due to the level of personal care delivered. However, they are still subject to the annual QAF assessment to ensure that providers are compliant with the requirements of the

contract or grant agreement.

2.6 Non-compliance will result in remedial actions being taken, this could include support from C&AS, the implementation of an improvement plan, a Notice to Remedy Breach or termination of the contract.

3. Recommendations

- 3.1 The Adult Social Care Scrutiny Commission is recommended to:
 - a) Note the contents of the Annual Quality Report 2018 as detailed at Appendix 1 (Quality of Care report).
 - b) Provide comment / feedback.

4. Supporting information:

- 4.1 Adult Social Care (ASC) supports in the region of 4,500 vulnerable individuals at any one time. This includes older people, people with a learning disability, those with mental health issues and individuals with a physical disability.
- 4.2 As the majority of ASC services are provided by the external market it is necessary to monitor the quality of care to ensure that vulnerable individuals receive the correct type of care and are protected from harm and abuse.
- 4.3 The monitoring is undertaken by the Social Care & Education's, Contracts and Assurance Service (C&AS), who ensure the quality of care is maintained and providers comply with the performance requirements as set out in the contract or grant aid agreement.
- 4.4 These contracts or grant aid agreements, include Regulated and Non-Regulated services. Regulated services are those registered with the Care Quality Commission (CQC) because they provide personal care, such as bathing, toileting and feeding. These include the following:
 - 18 Nursing Care Homes
 - 79 Residential care Homes
 - 21 Domiciliary Care Providers
 - 18 Supported Living Providers
- 4.5 Non-Regulated Services are not subject to CQC inspections, and tend to be provide preventative support, these include:
 - Dementia support
 - Mental health support
 - Carers support
 - Day services/Community Opportunities
- 4.6 All Regulated and Non-Regulated contracts and are also subject to the annual

Quality Assurance Framework (QAF) assessment, which is a tool developed by the C&AS. The QAF is complimentary to the CQC inspection standards and provides a transparent process to ensure that providers are compliant with the requirements of the contract.

- 4.7 In addition to the QAF, officers from C&AS undertake regular announced and unannounced visits to the providers, to observe the quality of care being delivered. These visits can be triggered via a number of reasons, including service user/family complaints, concerns raised by social work staff or other professionals, whistleblowing, CQC intelligence etc. Depending on the nature of concern the visits can take place at any time, for example if there was an issue about the quality of the food or assistance given to individuals to eat, then visits would be coordinated to coincide with meal times. If the concern related to the number of staff on duty in the night the visit would take place at 2am. Where serious concerns are raised, on occasion staff have provided 24/7 observations to ensure service users are safe.
- 4.8 In the first instance the C&AS generally takes a supportive role and works with providers to support them to become complaint with the requirements of the contract. This includes giving them advise on the improvements that are needed and how these can be achieved. This approach has contributed to the increased quality of care and ensures that the provider market is available and stable in the city.
- 4.9 The CQC made the following comment regarding the work of the C&AS: 'the City have the highest percentage of good, and improved Providers. This is down to the relationship that you (Leicester City Council) have with the CQC and joint working' (April 2019).

4.10 Summary of Performance

- 4.11 At the end of 2018, 95.2% of the contracted providers were compliant at the end of the assessment period, compared to 87.4% at the end of 2017.
- 4.12 This improvement is positive and shows that the market is performing well overall. The service will continue to work with the remaining 4.8% of Providers that are non-compliant, via planned actions and visits to ensure they become compliant in a timely manner.

4.13 Regulated contracts

- a) 91% of the 79 Residential Care Home Providers contracted by the City Council and assessed by the CQC were rated as being Outstanding or Good.
- b) 73% of the 18 Nursing Care Home Providers contracted by the City Council and assessed by the CQC were rated as being Outstanding or Good.
- c) 88% of the 21 Domiciliary Care Providers contracted by the City Council and assessed by the CQC were rated as being Good.
- d) 100% of Supported Living providers contracted by the City Council and assessed by the CQC were rated as being Good.

e) Overall in Leicester, the Care Quality Commission rated the services we contract with for Nursing / Residential Care Homes, Domiciliary care and Supported Living as: 3.5% Outstanding, 85.6% Good, 10.4% as Requires Improvement and 0.5% of services rated as inadequate.

4.14 Non-Regulated contracts

4.15 Although not subject of the Quality of Care report the C&AS monitor a number of non-regulated services and as such undertake both annual Contract Assurance Framework visits, contract management meetings aligned with regular monthly monitoring of performance.

5. Details of Scrutiny

5.1 This report seeks to contextualise the Leicester City Council SC&E Quality of Care report 2018/19

6. Financial, legal and other implications

- 6.1 Financial implications
- 6.1.1 There are no direct financial implications arising from this report.

Martin Judson, Head of Finance

6.2 Legal implications

6.2.1 There are no legal implications in this report. There is no personal/confidential information involved. Contract monitoring should continue in accordance with the terms of the contract.

Shireen Eliyas, Legal Officer

6.3 Climate Change and Carbon Reduction implications

There are no climate change implications arising directly from this report.

6.4 Equalities Implications

There are no direct equalities implications in this report

<u>6.5 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)</u>

None

7. Background information and other papers:

7.1 None.

8. Summary of appendices:

8.1 Appendix 1 – Contracts and Assurance Quality of Care Report 2018/19

9. Is this a private report (If so, please indicated the reasons and state why it is not in the public interest to be dealt with publicly)?

No

10. Is this a "key decision"?

No