
QUALITY ASSURANCE ARRANGEMENTS

SUMMARY REPORT

Purpose of the Report

1. The purpose of this report is to outline the current Quality Assurance arrangements operating across commissioned care and support provision delivered across the Children and Adults Service.

Summary

2. Officers based within the Commissioning and Contracting Team are responsible for the quality monitoring and review of care and support services. The Quality Assurance arrangements that have been put in place ensure services are able to meet the agreed service specification, achieve the required outcomes for service users and carers, are safe, and make the best use of all available resources.
3. The two biggest areas of spend across Adult Social Care are in relation to the provision of Residential and Nursing Care and Domiciliary Care. This paper provides an overview of the current market in relation to these areas.

Recommendation

4. It is recommended that:
 - a) Scrutiny Committee note the Quality Assurance arrangements that are in place.
 - b) Scrutiny Committee note the current position regarding the local provider market operating in Darlington.
 - c) Members ask any questions and request further information.

Suzanne Joyner, Director of Children and Adults

Background Papers

MAIN REPORT

Contracts and Commissioning

Roles and Responsibilities

5. The Contracts and Commissioning Team are responsible for the development and delivery of the Council's commissioning intentions across Adults and Children's Social Care. Commissioning is a key enabler in the transformation of care and support, ensuring services that are delivered are both effective and value for money.
6. Commissioning officers work in partnership with operational staff, private and third sector providers to deliver agreed outcomes for the citizens of Darlington who have a social care need, following the Councils Contract Procedure Rules, to specify, tender and award contracts for social care support for both adults and children.
7. The Commissioning and Contracts Team also undertake the quality monitoring and review of all commissioned services to ensure that they meet the agreed service specification, deliver improved outcomes for service users and carers, are safe and provide value for money. The team also work with partner agencies across the local strategic partnership, in the development of joined up services which deliver better outcomes by working collaboratively. These partners include Health, Housing, Education, CQC, Ofsted, Probation, Police, Independent Sector providers and the Third Sector.

Managing the Market

8. The two biggest areas of spend within Adult Social Care are in relation to the provision of Residential and Nursing Care and Domiciliary Care. An overview of the current market in relation to these is outlined below.

Residential Care

9. Nationally, residential and nursing care is currently facing a number of key risks and challenges, particularly in relation to recruiting and retaining sufficient nurses and care staff, and also in terms of stability of the market with many care homes facing closure.
10. Care homes within Darlington have also experienced an increase in the usage of agency staff. This has impacted on the quality of care provided, with a subsequent need to increase the regularity of quality monitoring of homes, especially those who have had to be placed into Executive Safeguarding Strategy.
11. We currently have 19 Care Homes for Older People in Darlington. Since January 2016 we have seen 2 homes close. A business decision was made by one Provider (BUPA) to close a small residential care home with 21 beds. This decision was made because the home was running at 47% Occupancy, required significant improvements aesthetically and was deemed to be no longer viable. The second

home went into administration following a protracted period in Executive Safeguarding, and a contractual suspension served by CQC. This home was a 67 bed nursing and residential care home that catered for Older People with a Mental Health need.

12. A Quality Standards Assessment for Residential Care services for Older People and Older People with a Mental Health need has been developed which is completed annually.
13. The Quality Standards monitoring visits undertaken this year have resulted in an improvement in Quality against the previous year's assessments.

Quality Standards Outcomes 2015/2016	No Homes	Quality Standards Outcomes 2016/2017	No Homes
Grade A	9/21 - (43%)	Grade A	12/19 - (63%)
Grade B	6/21 - (29%)	Grade B	2/19 - (9%)
Grade C	4/21 - (19%)	Grade C	5/19 - (26%)

14. Of the 12 homes achieving A Grade, 9 homes maintained their A Grading from last year, and 3 homes have improved their rating to be an A Grade. No previously A rated homes have experienced a decline in their ratings.
15. The overall increase in quality of provision seen during 2016/17 has been encouraging, however it should also be noted that one home failed to meet 7 of the 10 measured standards. This particular home has been in Executive Safeguarding Strategy since June 2016. The Care Quality Commission also rated the home as Requiring Improvement in January 2016. The home is an 83 bed home with 3 units caring for Older People with a Mental Health need in both Residential Care and Nursing Care and also General Nursing Care.
16. Commissioning and Contract Officers, together with colleagues from CCG & CQC are working with the Provider to ensure the home remains operational and makes the necessary improvements to provide reassurance that the necessary improvements are being made and that the service being delivered is of high quality.
17. The combination of home closures and suspensions has resulted in the reduction in bed availability in Darlington from 1037 – 930 (11.5%) with current occupancy levels standing at 91%. This situation is being closely monitored by officers and it is hoped that occupancy levels will return to previous levels of 85 – 88% as suspensions are lifted when assurance of necessary quality improvement work has been evidenced.
18. The recent increase in fees agreed the Council in 2016/17, which included an increase to meet the demands of the National Living Wage, was met extremely positively by providers operating in Darlington. It must be noted that this is not the case with other regional and national Local Authorities who are yet to reach agreement on fee rates which their providers.

Domiciliary Care

19. Nationally, Adult Social Care Services are aiming to support individuals in their own homes wherever possible. This has led to an increase in demand for domiciliary care which has impacted on discharges from hospital, with some areas reporting high numbers of delayed discharges. Some council's also have waiting lists of up to 3 months for packages of care.
20. The introduction of the National Living Wage in April 2016 placed additional pressure on domiciliary care providers to increase their pay rates. With the support of UKHCA (UK Home Care Association) providers are requesting rates of £16.70 per hour they consider is a fair price to enable them to operate a viable business. UKHCA report that the average rate in England is £2.00 less than this, at £14.58.
21. In the North of England where pay rates are lower than the South, rates are lower than this with some Authorities paying less than £12.00 per hour. Where councils are not able increase rates to a level acceptable to providers they are making business decisions to end their contract with the Councils, with some providers exiting the domiciliary market altogether.
22. Whilst it has been challenging, the increased demand for packages of support has been met in Darlington. Over the last 18 months, 3 of the 17 providers of domiciliary care have ended their contract with the Council. However, new providers have been sourced to continue providing the service and there are now 3 main providers delivering the majority of domiciliary care within the Borough.
23. Over the past two years, the Council has experienced a demand for services greater than the capacity available through the Framework Contract. 40% of domiciliary care being commissioned from a number of other local providers, many of whom are relatively new to the marketplace. Overall, there has been an increase of 12% in the numbers of off framework hours commissioned between 2015/16 and 2016/17.
24. The number of individuals receiving standard domiciliary support in 2016/17 is comparable with 2015/16, although there has been a small reduction in the number of 15 minute calls and sleepovers. There has also been an increase in the numbers of enhanced hours of support.
25. Expenditure for 2015/16 was £7,753,002 and was projected to be £7,476,877 for 2016/17.
26. The domiciliary care contract will be re tendered in 2017. A revised model of service delivery has been developed which aims to enable providers to meet increasing demand.

Partnership Working

27. As part of our Quality Assurance arrangement, bi monthly information sharing forums are held with colleagues from CQC, CCG Safeguarding Team, Infection Control and Continuing Health Care. This forum enables officers to share

information on good practice or concerns in relation to registered care services operating in Darlington. When significant concerns are raised, joint quality monitoring/inspection visits are undertaken.

28. Information in relation to concerns regarding providers, market capacity, and potential provider failure is also shared at the North East Regional Commissioning and Contracting meeting.