

Showcase Webinar series 2023

Webinar: Provider Quality Oversight – practice sharing

Monday 13 March 2023



social care
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Buckinghamshire
Council

Social care showcase webinars

SCIE is pleased to be offering a series of webinars on behalf of the Department of Health and Social Care in 2023. We are showcasing local authorities who are taking great strides towards readiness for the charging reforms and social care reform.

➤ [Showcase webinars](#)





Introduction

Ellie Haworth

Social Care Institute for Excellence



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Approaches to Quality

Matilda Moss – Head of Integrated Commissioning

Jessica Thompson- Program Manager Integrated
Commissioning



Aims of the Session



Talk about developing practice



Collaborate



Share knowledge

The Integrated Commissioning Service (ICS)

All Age Prevention
in the Community

All Age Public
Health and
Wellbeing

All Age Mental
Health

All Age Health
Disability

Integration

Housing,
Equipment and
Assistive
Technology

Older People and
Domiciliary Care

ICS Vision

The Integrated Commissioning service (ICT) commissions high quality and value for money health, social care, and prevention services to enable Buckinghamshire residents of all ages to access the right services, in the right place at the right time. We do this by:

- Putting people at the centre of everything we do through actively listening, engaging, and focusing on outcomes
- Developing open, honest and collaborative relationships with providers, residents and stakeholders
- Acting as a catalyst for change and integration by encouraging innovation
- Following an ethical, evidence-based and inclusive approach which seeks to reduce inequalities and improve outcomes
- Supporting resilience and improvement and measuring impact
- Investing in our own staff by developing and sharing knowledge and skills and recruiting new talent



The Challenge

- Pre-pandemic, the service lacked clear processes to support a consistent approach to the quality oversight of commissioned care and support providers.
- Redeployment of staff during the pandemic and restrictions on visits to care settings made it harder for commissioners to identify concerns about quality.
- The pandemic placed significant additional strain on providers.

The pressures of the pandemic led to the rapid development of new approaches to quality. We have continued to develop and embed these as standard practice.

Aims



- Develop and embed clear expectations for commissioners around monitoring providers.
- Set clear expectations for providers about the quality standards expected and how the Council will support them.
- Develop mechanisms to share intelligence and triangulate data to inform a risk-based approach.
- Ensure sound governance to manage these arrangements.
- Ensure the approach is outcomes focused and aligned with regulatory expectations.
- Develop processes in line with good practice, feedback from providers and learning from the pandemic.
- Develop internal audit and review mechanisms to drive continuous improvement.



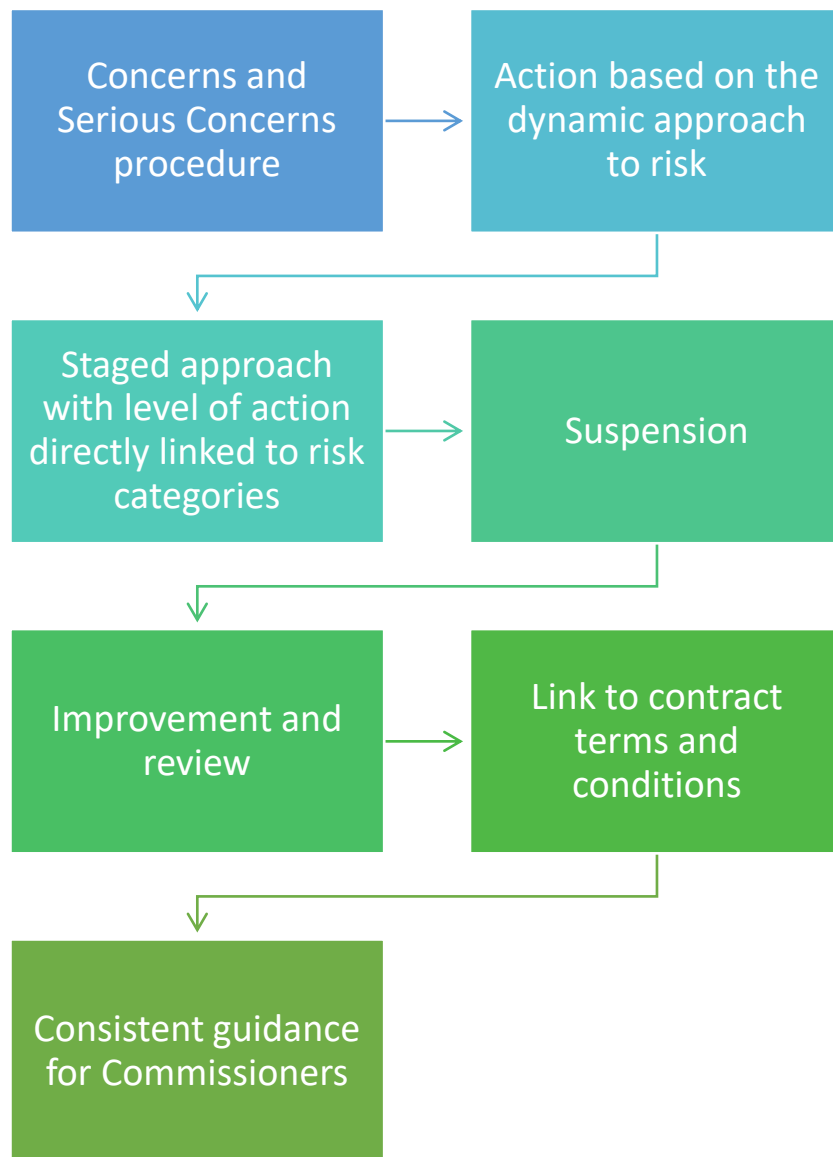
What we've done...

- Risk Matrix and Contract Monitoring Framework for commissioners
- Concerns and Suspensions Procedure
- Implementation of PAMMS for monitoring care and support providers
- Guidance for Commissioners
- Provider facing Quality Monitoring Framework
- Data
- Governance

Risk based Approach

Risk Areas		Risk indicators					Score	Do not enter any text to column J and K	
		1	2	3	4	5	Score	Weighting	Level of risk
CQC or Ofsted Rating. Please apply PAMMS rating if not regulated		Outstanding	Good	Overall Good but with one or more domains rated as Requires improvement	Requires improvement	Inadequate	4	1	4
Information from other sources (e.g. LA's, safeguarding, operations, CCG, Healthwatch, CHC, service users, family and friends)		Other sources have raised no concerns about the service in the last 6 months	Some concerns have been raised about the service in the last 6 months, but concerns are being addressed by the service	Some concerns have been raised in the last 6 months and they are not being addressed by the service	Significant concerns about the service in the last 6 months which are being/have been addressed	Significant concerns about the service in the last 6 months which are not/haven't been addressed	1	1	1
Safeguarding		Low number of safeguarding concerns over a six month period	Minimal safeguarding alerts with no pattern or trend over a six month period	Active S.42 and/or pattern of safeguarding alerts over a period of 4 weeks	One or more safeguarding alerts and/or S.42 that warrant serious concern over a six month period	One or more safeguarding alerts and/or S.42 which have resulted in death and/or the conclusion is organisational abuse	2	2.5	5
Complaints		Low number of complaints resulting in NFA	Minimal complaints but with no pattern or trend	10% > substantiated low level complaints and/or pattern of unsubstantiated complaints	Significant number of whistleblowing and/or higher level complaints		1	2.5	2.5
Financial viability		No financial concerns raised - monitor as part of the usual contract monitoring process	Minor concerns raised - monitor closely but no other specific recommendations	Concerns raised - specific mitigating actions required to be undertaken by contract manager. If this is a key supplier/contract consider whether a risk should be raised on Pentana	Significant concerns raised - parent company guarantee or performance bond recommended. If this is a key supplier/contract consider whether a risk should be raised on Pentana.	Supplier is not financially viable and Contract Manager should arrange alternative provision for the delivery of the service with immediate effect. If this is a key supplier/contract consider whether a risk should be raised on Pentana.	2	1	2
Complexity	1.a	Extra Care	Residential	Residential EMI	Nursing	EMI Nursing	4	1.5	6
	1.b (dom care and supported living)	SL <5hrs shared or 1-1 hrs p/w support	DOM CARE (Spot Bronze/Silver) SL >5hrs shared or 1-1 hrs support	DOM CARE Commissioned (Spot Only GOLD >) SL Significant shared or 1-1 hrs p/w	DOM CARE Move-On/D2A/Commissioned Block SL Complex needs	DOM CARE CHC / Palliative Care significant complex health needs SL Complex 2-1 care Meds & Behaviours that challenge	4	1.5	6
Officers Intelligence		No concerns about the service and/or parent organisation	No concerns about the service but some concerns about the parent organisation	Some concerns about the service and non compliance by the service and/or the parent organisation in addressing the concerns	Concerns that lead to the invocation of the concerns/serious concerns procedure at stage 3 or above	Significant concerns leading to a suspension	1	1	1
Free Text Box, please use this box to record any other soft intelligence you have that may have affected your scores							Provider Risk Rating (PRR)		27.5
Key		<12	12-22	22.5-33	33.5-39				

	PAMMS	PAMMS provider returns	Self assessment	Audit	Monitoring meetings	Relationship management	Further action	Governance and escalation
<12	Full PAMMS assessment every 3 years	Provider return to be completed quarterly	PAMMS self assessment to be completed one month prior to a full PAMMS quality assessment	Yearly Audit schedule provided, outcome and action provided quarterly	Yearly	Commissioner to provide open lines of communication with provider and/or other LA's	If information raises concern complete an announced service visit or gather further intelligence	Share good practice and/ or concerns in ICT quality monitoring meeting
12-22	Full PAMMS assessment every 2 years	Provider return to be completed quarterly	PAMMS self assessment to be completed one month prior to a full PAMMS quality assessment	Yearly Audit schedule provided, outcome and action provided quarterly	Yearly	Commissioner to provide open lines of communication with provider and/or other LA's	If information raises concern complete an announced service visit and consider evoking the concerns procedure where the activation threshold is at stage 1	Share good practice and/or concerns in ICT quality monitoring meeting
22.5-33	Full PAMMS assessment every 12 months	Provider return to be completed quarterly	PAMMS self assessment to be completed one month prior to a full PAMMS quality assessment	Yearly Audit schedule provided, outcome and action provided quarterly	Twice yearly	CO/CM to have regular contact with the provider at a minimum monthly	Consider invoking concerns/serious concerns procedure where the activation thresholds are met for stage 2	Escalation through concerns/serious concerns procedure. Escalate to ICT quality monitoring meeting
33.5-44	Full PAMMS assessment as part of concerns procedure through announced or unannounced visit	Provider return to be completed quarterly	N/A	Yearly Audit schedule provided, outcome and action provided quarterly	Quarterly	Commissioner to have regular contact with the provider at a minimum fortnightly	Consider Invoking concerns/serious concerns procedure where the activation thresholds are met for stage 3	Escalation through concerns/serious concerns procedure. Escalate to ICT quality monitoring meeting
40+	N/A	Provider return to be completed quarterly	N/A	Yearly Audit schedule provided, outcome and action provided quarterly	Quarterly	Commissioner to have regular contact with the provider at a minimum weekly	Consider Invoking concerns/serious concerns procedure where the activation thresholds are met at stage 4 or stage 5	Escalation through concerns/serious concerns procedure. Escalate to ICT quality monitoring meeting



Concerns and Serious Concerns

Poll

Please tell us about your knowledge of PAMMS?

1. We use it to support Provider monitoring in our area
2. We don't use it but know what it is
3. I don't know what PAMMS is

PAMMS



Guidance for Commissioners

- Contract Management Handbook
- Guidance to support quality oversight
- Expert input
- Internal checks and balances (e.g., auditing, reflective sessions) to review how recent work has been embedded, feedback learning and share good practice



Commissioners have told us they feel more confident managing provider concerns

What did we do and why?

A supported living provider which delivers services across a small number of settings in Buckinghamshire was suspended in 2021 following several safeguarding concerns. By early 2022 the provider had completed their improvement plan and the suspension was partially lifted. However, when the next PAMMs monitoring visit was undertaken a couple of months later, the commissioner assessed the service as poor, and the suspension was reinstated. The fact that a new suspension was required so soon raised questions about why this had happened, and whether commissioning could have done anything differently to support a different outcome.

Methodology

A reflective process was run with the commissioners linked to this provider over two sessions in September 2022. The aim of the sessions was to discuss events openly in order to identify any learning that might improve practice in the future. Gibbs' Reflective Cycle Model was used to structure the sessions.

Following this, the reflections from these sessions were shared more widely through the Quality Monitoring Group. This allowed us to:

- Gather and compare wider commissioner experiences of supporting provider improvement
- Consider whether the learning from this individual provider applied more broadly
- Agree actions and next steps collaboratively

Link to service vision

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- Supporting resilience and improvement and measuring impact
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This work links to the underlined elements in the vision. Sharing and exploring the learning from reflective practice through discussion helps us build our knowledge through a cycle of continuous improvement.

Summary of findings

Good practice

- ✓ Whilst there were changes in the lead commissioner for this service, there were good hand-overs between staff. This meant the new commissioner understood what to expect.
- ✓ The lead commissioners had knowledge of the history with this provider and therefore saw current concerns within the context of previous issues.
- ✓ Commissioners felt the Concerns and Serious Concerns Procedure and Commissioning Handbook have had a positive impact since their introduction and supported a dynamic approach to monitoring risk.
- ✓ Although historically family members were not always shared with commissioning by social care, more recently there was evidence of strong joint working. In particular, commissioners fed back that having social workers look at some of the client focused aspects was extremely helpful.
- ✓ There was good communication with other local authorities. We shared our concerns with them, and involved them in discussions about suspension.

What did we do and why?

Over the last two years the Integrated Commissioning Service has been developing a more consistent and robust approach to the quality oversight of commissioned care and support providers. This has included the development of a [Concerns and Suspensions Procedure](#) which sets out the actions commissioners should take in response to provider concerns.

The Concerns and Suspensions Procedure is underpinned by a system of risk ratings that should be used dynamically as concerns about a provider step up or down.

Risk ratings were first used during the Covid-19 pandemic to focus monitoring activity on the areas of highest risk at a time at a time of significant pressure. The approach worked well so it was subsequently incorporated into our business as usual processes.

This audit provided an opportunity to check whether the risk matrix has been embedded consistently and to identify any actions needed to support or improve use of the matrix.

Methodology

A terms of reference for the audit was agreed through the Quality Monitoring Group. Each of the teams that uses the risk rating system was asked to identify a representative to participate. They were asked to select one of their providers and complete an audit questionnaire which explored their use of the risk rating with that provider. This created a sample of seven providers including:

- Five in county providers and two out of county providers
- Three residential / nursing homes; two supported living providers; one domiciliary care provider and one day opportunities provider
- Providers with between 1 and 35 service users and annual contract values ranging from £73k to £1.7m
- A mix of CQC regulated and unregulated services with risk ratings ranging from 11 (minor risk) to 42.5 (major risk)


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Learning from this audit links to the underlined elements of the vision. Sharing and exploring the learning from all audits through discussion helps us build our knowledge through a cycle of continuous improvement.



Quality Monitoring Framework for Commissioned Providers

Clear
expectations

Quality
standards

Monitoring
activity

Transparency
and
collaboration

Response and
action

Good Practice

I feel the approach works well and allows productive solution focussed relationships between the Council/Commissioner/Provider.
Supported Living Provider

Really positive to see clear and concise expectations to work in partnership to drive improvement.
Care Home Provider

This is a great document; it sets out clear expectations and provides an appropriate level of monitoring to both support and scrutinise provider performance in the best interests of people using services. In addition, it aligns nicely with what we do and supports the working relationship we currently have.
Senior Inspector - CQC

Using Data

- Power BI reports
- Care Homes dashboard
- Performance Dashboard

Care home view

Buckinghamshire Council

Number of calls to Immediate Care



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Number of calls

Jan 2022 Apr 2022 Jul 2022 Oct 2022

Reasons for immediate care calls



Care and Support Performance Dashboard

Location	Count	Location in Risk Rating	Count	In-County % of Total	Out of County % of Total	Total Count	Total % of Total	
In-County	293	In-County	270	95.1%	23	7.8%	313	95.1%
Out of County	354	Out of County	30	8.5%	324	91.5%	354	91.5%
Total	647	Total	290	100.0%	354	100.0%	647	100.0%

Location in Risk Rating	Count	In-County % of Total	Out of County % of Total	Total Count	Total % of Total	
In-County	270	95.1%	23	7.8%	313	95.1%
Out of County	30	8.5%	324	91.5%	354	91.5%
Total	290	100.0%	354	100.0%	647	100.0%

Monitoring Reason	Count	% of Total
Enhanced monitoring due to raised risk	37	19.0%
Full MCA assessment as part of concerns procedure through announced or unannounced visit	10	4.0%
Total	70	24.1%

Governance

- Internal Quality Monitoring
- System wide surveillance
- Information sharing
- Co-ordinated response



Case Study

A local provider of older people's residential services came out of the pandemic with 70% of their services suspended due to a range of quality, safeguarding and financial concerns. Our approach meant that system wide resource was appropriately targeted to support the organisation both corporately and through individual services, subsequently leading to risk scores reducing and suspensions being lifted in all but one of the services over a period of 18 months. The Council lead on the approach, but it was a partnership effort including the provider, social care, our health partners and CQC which supported improvements in the quality of care. The process was supported by the governance processes in place which provided forums for system partners to collaborate in finding joint solutions.

What's next?

- Further development of care homes dashboard
- Formalising Internal checks and balances (e.g. auditing, reflective sessions) in to a Quality Assurance Framework
- Updated Provider Failure Policy
- Quality meetings with other Local Authorities



Webinar: Making it real. The Human Approach in Doncaster

Social care showcase webinar number five

Tuesday 21 March 2023. 1.30-3pm

Register for the webinar

<https://www.scie.org.uk/transforming-care/webinars>



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Thank you

If you or your colleagues haven't done so already, why not register for SCIE's occasional newsletter, SCIELine

<https://www.scie.org.uk/myscie/register>



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