

14 September 2020**Agenda Item: 12****REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND
HEALTH****MARKET MANAGEMENT POSITION STATEMENT****Purpose of the Report**

1. The purpose of this report is to provide information to the Committee about some of the work undertaken within the Quality and Market Management Team (QMMT) during the Covid-19 pandemic. Providers across the County have worked very hard during the pandemic to support local people with care and support needs and they continue to do so. The Council has a statutory duty to ensure that there is a robust and sustainable social care market available for people who live in the County and have care and support needs, and that includes people whose care the Council funds and people who fund their own care.
2. This report also gives an update about social care services that have had their contract with the Council suspended; this information is contained in the **Exempt Appendix**.

Information

3. Some information relating to this report is not for publication by virtue of Schedule 12A of the Local Government Act 1972 and is therefore included in an **Exempt Appendix**. Having regard to all the circumstances, on balance the public interest in disclosing this information does not outweigh the reason for exemption because the information would add a limited amount to public understanding of the issues but may damage the financial or business affairs of any person (including the Council).

Provider Forums and Communication

4. When the pandemic started the team developed a Daily Bulletin that shares information and guidance that has been published both nationally and locally. Some of the guidance has been drafted locally by Public Health colleagues to support the local social care market. Some of the guidance shared has included information about Infection Prevention Control (IPC), Personal Protective Equipment (PPE), and visiting care homes.
5. In addition to this a number of forums have continued and taken place virtually and there have been a number of Webinars. Some of these have been for training and support and to share information and be able to answer queries and offer support. There has been a

great deal of information from central government that has changed and been updated very regularly.

6. Over recent months the rate at which guidance has been updated has slowed and the Bulletin is now published three times per week and any urgent information can be shared the same day.

Financial support to Providers

7. The QMMT has also worked with colleagues from Finance and Commissioning and have a very effective process for providers to claim their additional costs due to Covid-19 on a monthly basis. Providers are able to claim for such things as PPE, additional staffing costs, equipment to enable the home to keep in touch with relatives, developing zoned areas within the homes etc. This support has used the government's Sustainability Grant and Infection Control Grant.
8. The Infection Control Grant was given to care homes based on the number of beds that they had whilst for community care providers they were able to use the funds for anything related to IPC including PPE. The funding available has been very well received but a number of providers have requested support regarding lost income but the grant funding cannot be used for that. Some providers have reduced numbers of residents and they are not receiving referrals for placements as they did prior to the pandemic.

Personal Protective Equipment (PPE)

9. Providers are still able to receive PPE from the Council if they are struggling to access their usual suppliers. A very effective process was set up by colleagues from across the Council and at no point did any provider run out of supplies. We also gave supplies to health colleagues, private carers and Personal Assistants.

Care Home Dashboard/NHS Capacity Tracker

10. The Council very quickly established a dashboard that would support the QMMT and other colleagues in monitoring the care homes and community providers such as Home Care in respect of staffing, PPE and the numbers of outbreaks of Covid-19. This tool has been extremely beneficial in enabling the QMMT supporting the care homes with staffing issues, capacity, and ensuring they have sufficient PPE supplies. This 'tool' is used on a daily basis and a daily 'sit rep' is reported to manage risk through the health and social care system.
11. The QMMT is also supporting the care homes to ensure that they are using and updating the NHS Capacity tracker. Providers are required to fill in the system on a daily basis and it asks questions about the workforce, payment to staff, Clinical Lead etc. There have been a number of issues with the system and work is still continuing to feed back issues raised by providers. The team held a webinar about using the system and make regular calls to all providers to offer them support. Receiving one of the government grants was on the condition that the providers agreed to use the system so this work is ongoing.

Care Homes and Home Care Cell (CHHC Cell)

12. This meeting is a sub-group of the Local Resilience Forum (LRF) and is jointly Chaired by the Group Manager Quality Assurance and Citizen Safety and the Chief Nurse of the Mid Notts Clinical Commissioning Group (CCG). A number of workstreams and Task and Finish Groups sit beneath this strategic Group and some of the work includes the following:

Covid Positive Care Homes – Discharge Process

13. To support safe discharges from hospital for people who are Covid positive a checklist process was established. This process enables care homes who are willing to accept Covid positive patients to apply to be on a list of homes that are IPC (Infection Prevention and Control) compliant and that can evidence that their services can safely manage a resident for the required period. What this means is homes that are able to zone their buildings and isolate positive residents for the required period are likely to be compliant. Currently there are seven care homes on the list (two are in the City).

Relief staff recruited to support providers

14. A 'bank' of care staff was made available to support services that had a reduced workforce due to the pandemic. Sometimes staff had to isolate and this could have a devastating effect on the numbers of staff available to work. The staff were recruited to work with care services at short notice and the arrangement worked very successfully with one of the local care homes. Work is underway to see how this type of arrangement could be used on a permanent basis to support the local social care market.

Care Homes and Home Care Operational Partnership

15. The QMMT chair a weekly Care Home and Home Care 'Operational Group'. The group has played a part in joining together all partners who are working with the care homes in Nottinghamshire e.g. the Care Quality Commission (CQC), the City Council, Public Health and CCG colleagues. One of the current pieces of work is having a consistent approach to quality monitoring so that the Council does not put an unnecessary burden on providers at this very difficult time. The providers have also been risk rated so that it can be ensured that there is a sustainable market of services available at all times. Where individual providers have needed additional support the Council has been able to provide this.

Care Homes and Home Care Outbreak Management

16. The QMMT is working closely with Public Health colleagues in continuing the oversight of outbreaks in Nottinghamshire. In the last three months the QMMT has played a huge part in gathering Covid positive data for the care homes in Nottinghamshire. This process will continue but is being reviewed in light of changes to the testing in care homes.

Business as Usual - Quality Monitoring and Quality Audit

17. During the pandemic the majority of the quality monitoring activity has taken place virtually with the team speaking to all providers on a very regular basis and is now looking at how technology can be used more effectively in the future. The annual audits are being planned.

18. Regulated services are inspected and rated by the CQC. An overview of the current ratings for social care homes in Nottinghamshire for the past two years are as follows:

CQC Rating	Number of Services 2019	Numbers of Services 2020
Outstanding	23	32 (21 care homes)
Good	280	281 (249 care homes)
Requires Improvement	60	73 (51 care homes)
Inadequate	14	6 (4 care homes)

19. Since last year there has been an increase in the number of outstanding rated services in Nottinghamshire and a reduction in the number of inadequate services.

Contract suspensions

20. Sometimes it is necessary to suspend a contract with a provider. This means that they continue to provide the service but for a period of time the Council does not give any new work to the provider. This is usually due to concerns about poor quality and when this happens the service is monitored closely, usually through an Action Plan which is monitored to ensure that the required improvements are made and sustained before lifting the contract suspension is considered.

Services that have a contract suspension currently:

Type of service	Number of services	Contract Status	District
Care Home – Older People	7	Suspended	Gedling, Mansfield, Bassetlaw, Newark
Care Home – Younger Adults	2	Suspended	Bassetlaw
Home Based Care	2	Suspended	Mansfield & Ashfield

Other Options Considered

21. No other options have been considered.

Reason/s for Recommendation/s

22. The report provides an opportunity for the Committee to consider any further actions arising from the issues contained within the report.

Statutory and Policy Implications

23. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below.

Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

24. There are no financial implications arising from this report.

Implications for Service Users

25. The Council has a duty under the Care Act 2014 to ensure that high quality services are available for people in Nottinghamshire whether they are funded by the Council or fund their own care either fully or in part. The market shaping duty also requires that the Council works collaboratively with relevant partners including people that use services and their families. The proactive approach of quality monitoring undertaken in Nottinghamshire ensures that every effort is made to ensure that people live independent lives and that their care and support needs are met by high quality care providers that deliver a sustainable service.

RECOMMENDATION/S

That:

- 1) Members consider whether there are any actions they require in relation to the issues contained within the report.
- 2) Members advise how the Committee wishes to monitor the actions /issues contained within the report.

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Constitutional Comments (LW 19/08/20)

26. Adult Social care and Public Health Committee is the appropriate body to consider the content of the report.

Financial Comments (DG 20/08/20)

27. There are no direct financial implications arising from this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

None.

Electoral Division(s) and Member(s) Affected

All.

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