

14 June 2021

Agenda Item: 11

REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE AND HEALTH

MARKET MANAGEMENT POSITION STATEMENT

Purpose of the Report

1. To inform Committee about the work undertaken by the Quality and Market Management Team (QMMT) in response to the Local Authority's statutory duty to ensure that there is a robust and sustainable social care market available for people who live in the County.
2. To provide Committee with 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 Some information relating to this report is not for publication by virtue of Schedule 12A of the Local Government Act 1972 and is therefore included in an Exempt Appendix.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).

Financial support to Providers – Update June 2021

4. The Government announced a further third round of the Infection Control Fund (ICF) Grant. This allocation again has been made available for providers in April 2021 and the funding covers up to June 2021. The same conditions remain with this allocation in that the providers must ensure they complete a monthly return on the spend of their allocation and also complete the NHS Capacity Tracker (for care homes and domiciliary care agencies).

Covid 19 Taskforce

5. In November 2020 the Covid 19 Taskforce was set up to support the market, in particular those services that experienced significant outbreaks which then impacted on service delivery and workforce. This multi-agency group of partners met daily to ensure that there was an overall understanding of where the risks and issues were in the social care market.

At the height of the outbreaks in December/January 2021 there were over 100 services that were being supported by the Taskforce.

6. In March 2021, in line with the national picture, Nottinghamshire experienced a reduction in the number of outbreaks and more recently seeing the number reduce to zero. The Taskforce has responded to this in that the meetings have stepped down to fortnightly. This group can at any point step back up again to support the market and the meetings now focus on supporting services to recover in managing Covid and also support in any changes to guidance which impacts on service provision/delivery.

Emergency Staffing Support

7. The QMMT, jointly with operational colleagues in Adult Social Care, is currently exploring maintaining a support service for care homes that was established back in November 2020. This support service consists of a group of care staff, employed by the Council, who have volunteered to support external care homes during an emergency situation, whether it be Covid or quality related issues. This support was set up to respond to extreme circumstances when a care home's workforce was impacted to the level where urgent staff would be needed to keep a service safe. Whilst the situation with the outbreaks in Nottinghamshire has improved, the QMMT continues to support on an on-going basis the monitoring of risks in respect of the workforce, quality and financial viability.

Information Sharing

8. The QMMT continues to manage and support the well-established Information Sharing processes for the County. There is a meeting held monthly with key partners, the Care Quality Commission (CQC), Clinical Commissioning Group (CCG) and Healthwatch. This meeting supports a joint approach to action planning and next steps in supporting the market.

QMMT Working 7 days

9. Since March 2020 the QMMT has supported the social care market to ensure that there is ongoing delivery of safe care. The support from the QMMT has been available seven days a week, with the team making contact or visiting services outside of the normal working hours. Due to the reduction in outbreaks the team has reverted back to business as usual with auditing and monitoring of services. There are still occasions when the team will need to work outside of normal working hours to respond to escalating quality concerns. The seven day working will be stepped up again if needed in the future to support the market.

Home Care – Early Deterioration in Home Care (Better Care Fund)

10. In September 2020, the Early Deterioration in Home Care Project was set up following a successful bid for Better Care Fund monies by Fosse Healthcare which was joined up with a similar project proposed by the Nottingham and Nottinghamshire Clinical Commissioning Group.
11. The project was set up to explore the concept of how domiciliary care could contribute to the early identification of changes in service users' habits and routines that would identify a significant change in their health and wellbeing.

12. In January 2021, Fosse Healthcare implemented the RESTORE2 Mini Managing Deterioration tool and appropriate escalation pathways within the Newark district, enabling care workers to recognise and respond to 'soft sign' changes of approximately 150 care recipients.
13. Since 8th March 2021, the next phase of the project commenced with the introduction of a new role called the Level 2 Care Worker who have been visiting service users to measure their baseline vital sign readings as well as respond to soft sign concerns raised by carers in the community. They record information digitally using a care app developed by Birdie, including vital sign measurements (such blood pressure checks, temperature etc.) and structured contextual observations, based on the established NEWS2 and SBARD methodologies. Once recorded, this information is shared via NHSmail with the GP practices in the Newark Primary Care Network to provide a clinical response if appropriate.
14. One of the key developments for the project was around the development of a digital application that connects care providers/workers with GPs, emergency services and the NHS to identify and treat soft signs of deterioration before they escalate in to a potential hospital admission. This has enabled detailed observation to be digitally shared with the service users' GP using the digital application developed by Birdie Care.
15. Some of the benefits to the service users and involved professionals are starting to be realised.

Service user and/or family:

- reported an increase in health and wellbeing and peace of mind for both the client and their family
- a number had reported not having their blood pressure taken for a number of months and found this reassuring
- contact with frail and elderly service users who have been detached from their GP/Practice due to Covid 19.

East Midlands Ambulance Service (EMAS)/Paramedics:

- prevented admission to A&E through early detection of underlying health condition(s)
- information is being passed to the clinician (e.g. GP, 111, EMAS) which helps them make earlier, robust clinical decisions (including remotely).

GPs/Practices:

- have baseline readings of service users on the Fosse Healthcare HBC Contract
- are confident in the abilities of the Level 2 Care Workers
- rely on further support that the Level 2 Care Workers are able to offer such as increased visits or monitoring
- growing engagement with the Primary Care Network in Newark.

Digital Technology:

- robust data capture using digital applications developed by Birdie

- improved communication between adult social care and healthcare partners.

Care Workers:

- reduce attrition levels, therefore increasing care continuity
 - provide a genuine career progression pathway within social care.
16. The project is intended to run for a period of 4-6 months. During this time, the academic partners, secured by the East Midlands Academic Health Science Network, will undertake a robust evaluation and provide an objective analysis of outcomes and benefits for service users, home care providers, health systems and their constituent organisations. Securing an academic partner will provide regional and national assurance and credibility and provide a further potential programme for spread and adoption locally and nationally.
 17. The next step for the project is to include in scope the Housing with Care Schemes in Newark including the Assessment Units at Gladstone House. This will broaden the evaluation to include a different subset of data to measure around the health and wellbeing of people in different care settings and those discharged from hospital or the community in the assessment units.
 18. Further funding streams are being explored to extend the current project and provide a longer evaluation timeline. There is also the potential to move the project into other districts.

Home Care – Collaborative Working Between Home Based Care Lead Providers

19. Work is continuing with the Home Based Care Lead Providers to explore and develop collaborative working approaches and to share best practice. A number of meetings have taken place already and will continue to meet on a monthly basis, with meetings being provider led. The providers will share their discussion and work with the County Council at strategic level.

Communication Between Home Based Care Providers – Experts by Experience

20. In March 2021, a Task and Finish Group was created to look at where improvements in communication between Home Based Care Providers and the people they provide care for could be made.
21. The QMMT is working with a group of Experts by Experience to create two separate surveys. The surveys will be used to gain an understanding of the positives and negatives around communication, particularly considering the Covid Pandemic and the impact that this may have had on clear and effective communication channels and where to focus developments and improvements.
22. The first survey will be completed over the telephone with Quality and Contracts Officers (QCO) calling a sample group of people who receive services for each managed home based care provider whilst the second survey will be completed electronically by all managed home based care providers. The Group is keen to ensure a varied cohort of employees complete the provider survey, to ensure that a broad reflection of the communication practices are reported.

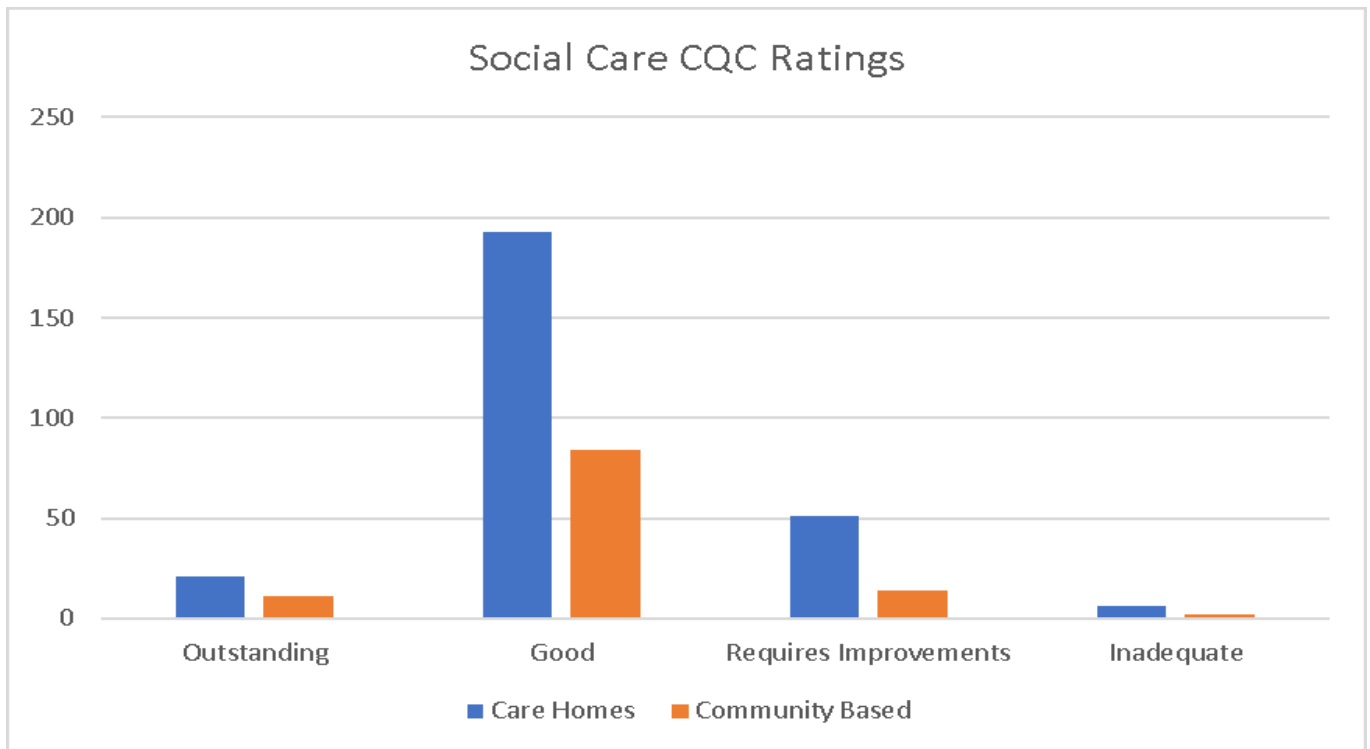
23. Both surveys have been reviewed by the Communications and Marketing Team and the aim is to go live by the end of May for completion at the end of June. Once the survey data is gathered the Task and Finish Group will meet in July to agree workstreams and the information will be shared with providers in Contract Management Meetings and the Home Based Care Forums.

Workforce – Care Friends Licences for Home Based Care Lead and Additional Providers

24. Care Friends is a digital app that can be downloaded to a mobile phone. The app is an employee referral and engagement tool to support social care recruitment by encouraging providers' care staff to share jobs with their friends and contacts. By doing this the staff members can earn points that translate in to cash rewards.
25. Using the Workforce Capacity Fund, the County Council has purchased a number of Care Friends licences to support contracted providers with recruitment.

Quality Monitoring

26. The QMMT continues to provide support through the well-established quality monitoring process. The team is now in the planning stages for implementing their business as usual for the next 6-12 months. The team is planning quality monitoring/audits for the following services:
- Ageing Well Care Homes
 - Living Well Care Homes
 - Home Based Care
 - Housing with Care
 - Supported Living
 - Day Care.
27. The QMMT will maintain the risk assessment of services based on quality data, Covid data, financial information and other intelligence that informed the level of monitoring/support needed. The team will support services as required to ensure good quality service provision.
28. The CQC has not carried out the normal inspection regime in the last year as they would do and this has meant for some services that their inspections are overdue. An overview of the current ratings for care homes in Nottinghamshire for the past two years are as follows:



29. Since the last report there has been a small increase in the number of Inadequate rated services. The number of Outstanding care homes (21 care homes, 11 community based services) remained the same with a small reduction of Good rated services.

Contract suspensions

30. 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, to ensure that the required improvements are made and sustained before lifting the contract suspension is considered.

31. Services that have a contract suspension currently are as follows:

Type of service	Number of services	Contract Status	District
Care Home – Ageing Well	7	Suspended	Gedling, Bassetlaw, Newark, Mansfield, Ashfield
Care Home – Living Well	2	Suspended	Bassetlaw
Homecare	2	Suspended	Newark, Rushcliffe, Gedling

32. Since the previous report to Committee in March 2021 there has been an increase in the number of contract suspensions.

Other Options Considered

33. No other options have been considered.

Reason/s for Recommendation/s

34. 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

35. 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

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

Implications for Service Users

37. 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 (AK 17/05/21)

38. This report falls within the remit of Adult Social Care and Public Health Committee by virtue of its terms of reference.

Financial Comments (DG 14/05/21)

39. 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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