

**9 September 2019****Agenda Item: 12****REPORT OF THE SERVICE DIRECTOR, STRATEGIC COMMISSIONING  
SAFEGUARDING AND ACCESS****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) including:
  - the quality monitoring and market management and shaping activity across both residential and community care services across the County
  - advising the Committee about the services that currently have their contracts suspended by the Council so that the Committee can consider any issues raised and how it may wish to monitor progress.

**Information**

2. Some information relating to this report is not for publication by virtue of Schedule 12A of the Local Government Act 1972 and is therefore included in an **Exempt Appendix**.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 particular person (including the Council).
3. One of the key roles of the team is to complete annual audits of externally provided care and support services and to undertake monitoring activities where concerns are raised about the quality of care. QMMT officers work closely with the Council's operational teams, safeguarding team, local Clinical Commissioning Groups, Healthwatch and the Care Quality Commission to share intelligence and work in a co-ordinated way to address concerns regarding the quality of care provision in the County.
4. At a recent Team meeting a representative from Skills for Care attended to update the team about grant funding that is available for providers of social care. In the current financial climate it is important that the team encourage and support providers in accessing appropriate grants and support to enable their services to always aim to provide excellent outcomes for people using their services. Grants are available for staff training and some

forums such as 'Managers Networks' which in turn supports leaders within organisations to share best practice and problem solve together.

## QMMT activity and performance information

5. The QMMT has responsibility for monitoring both residential and nursing care homes and community care services across the County for adults over the age of 18 years. In total there are over 360 providers delivering a range of services in Nottinghamshire including:
  - Nursing and residential care homes
  - Home care
  - Day care services
  - Care support and enablement services (supported living)
  - Extra Care/Housing with Care services.
6. Regulated services are inspected and rated by the Care Quality Commission (CQC). A comparison of Nottinghamshire services against other East Midlands authorities as at May 2019 is set out below:

Current overall ratings for active services															
Local Authority	Nursing homes ratings as a % of rated				Of all services % not yet rated	Res homes ratings as a % of rated				Of all services % not yet rated	Domiciliary care agency ratings as a % of rated				Of all services % not yet rated
	IA	RI	GO	OU		IA	RI	GO	OU		IA	RI	GO	OU	
<div>Derby</div>	0	12	88	0	0	0	11	89	0	2	0	16	80	5	33
Derbyshire	2	17	79	2	1	3	15	81	1	4	2	8	89	1	19
Leicester	0	33	62	5	5	0	9	87	4	7	0	14	85	1	29
Leicestershire	0	23	77	0	0	0	17	81	2	3	1	12	84	4	15
Lincolnshire	1	16	82	0	4	2	12	82	4	3	3	13	76	8	24
Northamptonshire	3	21	72	3	2	1	12	78	10	5	0	15	82	4	32
Nottingham	0	43	52	5	5	2	12	81	6	12	0	30	64	6	40
Nottinghamshire	8	30	54	7	3	4	15	76	6	5	1	10	81	8	17
Rutland	0	0	100	0	0	0	22	78	0	0	0	0	100	0	20
IA: Inadequate			GD: Good												
RI: Requires Improvement			OU: Outstanding												

7. Nottinghamshire has the highest number of CQC rated services in the East Midlands and maintains its proactive approach to quality monitoring encouraging partners and stakeholders to adopt a similar approach so that we have a transparent picture about the quality of care and support provided to people living in Nottinghamshire. Within the region Nottinghamshire has:
  - the highest % of Outstanding nursing home services (7%)
  - the second highest % of Outstanding residential home services (6%)
  - the highest % of Outstanding domiciliary care agencies (8%) and the second lowest % of Inadequate domiciliary care agencies (1%).

Although the picture changes regularly, in terms of current challenges, the Council has the highest % of Inadequate nursing homes (8%) and the highest % of Inadequate residential

homes (4%). Some ways in which the team are working to drive improvement and address these current challenges are outlined below.

8. Since the data in the above chart was reported there have been changes in the way the regulator, the CQC, re-inspects services following quality or regulatory concerns. Inadequate services are now re-inspected within six months from the date of the publication of their inspection. In the past they were not re-inspected so quickly and so could remain as Inadequate or Requires Improvement even though improvements had been made. There are three services currently rated Inadequate which have been re-inspected by the CQC and are now rated Requires Improvement. This is also the same for Outstanding services and the CQC have inspected a further two services which have now achieved this rating.
9. The QMMT does target poor performing providers working on intelligence received from a number of sources. It also works very closely with the CQC and shares information with them about the findings of the QMMT audits, quality monitoring visits and quality referrals, Whistleblowers etc. An Inspection Manager from the CQC recently stated that she *"found Nottinghamshire QMMT to be responsive to poorly performing providers. However, some of these providers have been poorly performing for some time and require intervention from CQC to remove them from the market. CQC are now taking more active steps to do so in line with their methodology"*. Whilst the Council is able to terminate a contract with a provider it does not have the legal power to close a service, this can only be done by the regulator which is the CQC. Where this is necessary the Council fully supports the people using the service and also their families to ensure that an appropriate alternative place to live is found.
10. The QMMT, jointly with the CQC and the Clinical Commissioning Group (CCG), has recently carried out a review of the current quality position of Nottinghamshire services rated as Inadequate or rated as Requires Improvement on more than one occasion. There is a risk that services that continue to be rated Requires Improvement may be rated Inadequate at the next inspection if no improvements are made. The CQC analysed the ratings in Nottinghamshire and one the worst performing areas were large nursing homes (50 plus beds) which is a national issue due to the reduced supply of nurses working in care homes.
11. The purpose of the review was to ensure that a monitoring plan is in place for these services and to review what support is available across the partner organisations to support and sustain improvements to the services. An action from the review was to further increase support given to these services for a fixed time period and this will be jointly with CCG partners.
12. These meetings were supported by Optimum colleagues within the team. They focus on workforce planning and development initiatives and support for independent sector care providers. Optimum has commenced working with and supporting the services to look at what is available in respect of training, guidance and support for the management of the services. With regards to the issue identified about a lack of nurses in the sector, the team has been working to support nurses in the sector by accessing training specifically designed to support nurses working in the sector. Some anecdotal feedback from local nurses about the training provided is listed below:

*"The course has given me the opportunity to network with Nurses from a variety of different settings and to understand the challenges that they face. The skills and knowledge that I am developing are also enabling me and my colleagues to support delivery of the right care*

*in the right place thus improving the quality of life and end of life experience of residents and their loved ones, whilst promoting efficient use of limited health and social care resources”*

*“Despite having many years’ experience of working in health care of the elderly services I have learned a significant amount of new information in terms of identifying and planning person centred interventions to improve the experience of those living with frailty”*

*“The quality of the lectures has been amazing. The course has made me question a lot more and not just accept why we do things as a company or in any health aspect. I am now reflecting constantly and putting new ideas in to practice. I am working a lot more with the G.P. and other members of the multi-disciplinary team”*

*“The training has given me confidence to cascade my learning to others which increases their knowledge which in turn gives the residents a better experience of living in a care home”*

13. Also, a buddying approach has been used for a younger adults provider that had quality concerns. Another local home manager that had an Outstanding service teamed up with the home manager and offered support, guidance and shared best practice. The feedback from the provider is that the meetings have been both supportive, inspiring and comforting. Their journey towards an improved quality service continues supported by a range of stakeholders led by the QMMT. This type of approach is being adopted more widely by the whole team.
14. Provider Forums are also another way of getting providers together so that they can share information and problem solve. Providers are able to support each other and also visit each other’s homes to share good practice and offer support. Stakeholders also attend so that they both share information and give support, advice and sometimes also training.
15. The QMMT also carries out regular information sharing meetings with the CQC, CCG and Healthwatch. There was a workshop in July 2019 to review of this process in response to the national Association of Directors of Adult Social Services (ADASS) Memorandum of Understanding, which sets out what information sharing should look like. The information sharing meeting has changed in response to this and it is now on the agenda to discuss any new Inadequate services and services that continue to be Requires Improvement as well as themes and trends around quality issues.
16. CQC quoted that following the workshop *“We think the communication between Nottinghamshire and CQC is excellent and we are confident that the newly reformed information sharing meetings will see improvement in the future of the Nottinghamshire portfolio. This is as we are both being more proactive at identifying repeat requires improvement services for example and dips in performance. The workshops we have held with Nottinghamshire in this regard are being used as a blueprint for how the CQC works with other local authorities in the central east midlands area”*.

## **Nottinghamshire CQC Ratings and Outstanding Services**

17. The CQC has completed 78 inspections of Nottinghamshire services since June 2019 with the following ratings:

- 3 Outstanding
- 43 Good
- 22 Requires Improvement
- 10 Inadequate.

18. The full list of Outstanding services in Nottinghamshire is below:

<b>Other Social Care Services</b>		
<b>Name of Service</b>	<b>Type of Service</b>	<b>Location</b>
Shared Lives	Short Breaks	Countywide
<b>Community based adult social care services</b>		
<b>Name of Service</b>	<b>Type of Service</b>	<b>Location</b>
Right at Home (Nottingham South)	Home care	Nottingham South
Reach Housing & Enablement Services Limited	Care Support and Enablement	Countywide
Reach Learning Disability Care C.I.C	Care Support and Enablement	Countywide
Home Instead Senior Care	Home care	Countywide
Workwise Healthcare Limited	Home care	North Nottinghamshire
Catherine Tam Agency	Home care	Broxtowe
SJW The Wright Care	Home care	North Nottinghamshire
Sherwood Prime Care Ltd	Home care	North Nottinghamshire
<b>Residential social care</b>		
<b>Name of Service</b>	<b>Type of Service</b>	<b>Location</b>
Ashcroft Care Home	Nursing Home	Ashfield
Beech House Care Home	Residential Home	Bassetlaw
Branthwaite Care Home	Residential Home	Bassetlaw
Cherry Holt	Nursing Home	Bassetlaw
Corner House Residential Care Home	Residential Home	Mansfield
Derbyshire House Residential Care	Residential Home	Rushcliffe
Elston House	Residential Home	Newark
Forest Hill	Nursing Home	Bassetlaw
Hatzfeld House	Residential Home	Newark
Kingfisher Court	Residential Home	Ashfield
Landermeads Care Home	Nursing Home	Broxtowe
Lawrence Mews	Residential Home	Broxtowe
Redbank House	Residential Home	Bassetlaw
RoseLea House	Residential Home	Rushcliffe
Sutton House	Residential Home	Ashfield
The Byars Nursing Home	Nursing Home	Newark
The Oaklands	Residential Home	Mansfield
Thistle Hill Hall	Nursing Home	Mansfield
Wren Hall Nursing Home	Nursing Home	Ashfield

19. The Council has also achieved an Outstanding rating for the Shared Lives scheme. The Nottinghamshire County Council Shared Lives Scheme which is managed by the ASCH Direct Services was inspected by the CQC in June 2019 and has been rated as Outstanding. This is a fantastic achievement and the only scheme in this region to achieve this rating.

20. The scheme matches vulnerable people with carers who are assessed and approved by the Shared Lives team. Service users stay with carers in their home either on a long term or a short term arrangement. The main benefit of Shared Lives is that the person lives as part of the carer's family and can become involved in activities in their local community. The scheme was recently featured on BBC Radio Nottingham where really positive stories were shared by people who use Shared Lives.
21. In July 2019 a nursing home in the Newark and Sherwood district, The Byars, was rated Outstanding for the second time and received this rating in all areas (safe, well led, effective, caring and responsive). The Byars is one of only five nursing homes nationally (outside of London) that has achieved this rating. The Byars is a band 5 quality banded service and has been awarded the Dementia Quality Mark (DQM) since its inception in 2013.
22. A further two care homes in Retford have also received the Outstanding rating with the CQC. The homes are Cherry Holt (nursing home) and Branthwaite (dementia residential) both owned by FBC Care Homes. Both homes have always been rated Good with the CQC and have continuously achieved a band 5 quality rating since the process began. Branthwaite has also achieved the DQM since 2013.

### **Revised Quality Audit Tool – All Contracted Services**

23. The QMMT completed a review of the quality audit process in 2018, including two consultation events with all contracted providers. The revised quality audit tool has taken into account the need to capture good and outstanding practice as well as areas that require improvement. There will also be more emphasis in capturing what people say about the service, ensuring that there is feedback from those using the services. This will enable providers to make further improvements if required and also share the positive feedback with their staff teams.
24. The review was carried out alongside the 'Fair Price for Care' review of fees for older person care homes. Bandings for these services have remained the same for 2019/20 with a planned review of the banding mechanism currently underway.

### **Older Person Care Homes - New Contract April 2020**

25. The current contract for older person care homes has been in place for a number of years and there is a requirement for a new contract to be in place. The plan is for the new contract to be standardised in line with other contracts awarded by the Council in that the standard 'NHS Contract' terms and conditions will be used. The review of the contract has been undertaken in partnership with Nottingham City, the purpose of this approach being that care home providers in both the County and City will be working to similar service specifications; this means that the contracts are aligned where possible which is helpful and supportive to providers in that there are not different expectations of them.
26. The contract award process for older person care homes will also be made using the 'Pro-Contract' system which means that care homes are required to complete a tendering exercise on line. The homes will be required to evidence robust information, such as quality assurance processes, and this contract award process will check the financial status of the organisation to give assurance about their financial sustainability.

27. The QMMT held two engagement events with providers in July 2019 (north and south of the County). The purpose of these events was to inform the market of the Council's commissioning intentions, future demand and to advise them of the new contracting process. Support and guidance will also be available and ongoing to all potential providers about how to use the system.
28. There are currently 168 older person care homes that will need to apply for the new contract. The implementation process will commence in October 2019 with the plan that all current care homes will have a contract in place for April 2020.

## **Home based care services**

### **Overview**

29. New contracts for home based care services have now been in place for 12 months. During this time the team has worked with new Lead and Additional Providers to embed the new service model and monitor quality and performance on an ongoing basis. This work is ongoing but progress during the first 12 months includes:
  - approximately 1,600 new packages of care sourced for people in Nottinghamshire
  - a reduction in the number of service users waiting for a service from over 200 in June 2018 to approximately 30 currently
  - reliance on the use of short term/emergency homecare provision has reduced from over 100 this time last year to approximately 24 packages currently
  - the Lead/Additional Provider model has had a real and positive impact in previously 'difficult' areas such as Bassetlaw and Newark & Sherwood. Providers in these areas are now regularly picking up the vast majority of home based care referrals made
  - over 80% of referrals are regularly picked up by providers collectively each fortnight in Bassetlaw, Mid Nottinghamshire and Broxtowe
  - providers are working together to best meet need in particular areas, rather than in competition, and holding regular provider forums to meet, liaise and network
  - some providers have taken positive steps towards building a sustainable social care workforce, for example, by offering guaranteed hours contracts to their care staff and increasing rates of pay in some areas
  - examples of providers delivering good outcomes for service users and shared good practice among providers
  - the introduction of regular customer satisfaction surveys with service users
  - work has begun to involve residents who live in the Housing with Care schemes in feedback sessions and quality monitoring

- the development of the role of the Experts by Experience Group following their involvement in the tender process. The Group has worked directly with providers to address trends raised through the customer satisfaction survey
- one of the Experts has also undertaken staff recruitment with a home care provider in the north of the County and both found the experience extremely insightful
- the Experts by Experience Group is also working with the team to look for ways of further strengthening the service user/carer voice in the quality audit process and members of the team regularly attend the groups meetings.

### **Ongoing focus**

30. Nationally, as well as locally, the homecare market continues to face significant challenges, particularly around recruitment and retention of staff. The Council's new model of Home Based Care and Support Services is designed to build and support capacity in the local market over a 10 year period and Community Partnership Officers within the team continue to work alongside their 'portfolio' of providers to embed and develop this.
31. Home based care contracts now contain a requirement for providers to accept or offer on a minimum percentage of referrals made. Overall acceptances/offers by the Lead and Additional Providers is largely steady across the County, but sometimes below contractual requirement for individual providers. Again, Community Partnership Officers are working with providers to support and address this, this includes considering contractual sanctions where necessary.
32. A further tendering exercise is being planned to increase the number of Additional Providers in most areas. This will support resilience in the overall market for commissioned services and help sustain and improve the overall number of care packages accepted by providers.
33. Work to develop and introduce an electronic portal for commissioning home based care services continues. It is anticipated this will be operational from October this year.
34. Winter pressures planning work is now beginning. Community Partnership Officers are working with all providers to help build and ensure capacity during the winter period and that contingency plans are in place to enable providers to respond to weather alerts and possible increased demand for services.

### **Experts by Experience Engagement Group**

35. The team continues to work alongside the 'Experts by Experience' Engagement Group for home based care and the Group is represented on the Joint Health and Social Care Programme Board that meets monthly.
36. Following completion of the first customer satisfaction service, the Group met with a number of providers to look at how they could improve communication with service users and carers; a key theme arising from the survey. This was a useful and productive meeting and providers took away a number of (often small) changes they could implement to help improve communication on a day to day basis. Community Partnership Officers are now



working alongside the Experts by Experience Group and providers to look at how the impact of these improvements can be monitored on an ongoing basis.

## Home First Response Service Overview

37. The Home First Response Service (HFRS) is a short term rapid response service providing home based care to facilitate discharge from hospital or to prevent unnecessary admission to short term care or hospital due to a temporary crisis at home. The service is a county-wide service and delivered by one provider, Carers Trust East Midlands, to ensure consistency and flexibility. The service commenced in December 2017 and is available seven days a week.
38. From mid-December 2017 to the end of June 2019, 1,941 people have been through the HFRS. A member of the team works proactively with the service and with operational colleagues to ensure service users move through the service in a timely way and that capacity is maximised.
39. Both the HFRS and new home based care processes are contributing to the County Council's excellent performance in respect of Delayed Transfers of Care.

## Optimum

40. Optimum colleagues (a team of three; manager, officer and administrative support colleague) are now integrated in the QMMT and are working alongside Quality Monitoring Officers and Community Partnership Officers to support and develop service quality in a co-ordinated way, using the resources available through the Workforce Development Fund that they administer on behalf of Skills for Care. This joint approach will enable Optimum activities and resources to reflect and be informed by the wider quality work undertaken by QMMT. As part of this, work is being undertaken to raise awareness across the whole team about funds and grants that providers can access in order that staff can offer a wider range of support and information to providers.
41. An action plan is in place for local implementation of the earlier National Recruitment Campaign, which brings together individual projects that Optimum has been working on with providers and partners within the sector over the last 12 months. Surveys are taking place to benchmark current practices and will be re-evaluated towards the end of the year to measure progress against the action plan.
42. A part of this work included the making of a video which featured care staff from a number of local care providers. This is now available on You Tube via the following link <https://www.youtube.com/watch?v=LrNi-VvWSuU&feature=youtu.be> and can be used to promote social care and supporting people to live within their own home environment.
43. Following on from meetings with commissioners and stakeholders, it has been agreed that Optimum will review work streams for 2019-20 to support the provision of quality services whilst retaining aspects of proactive work with local care providers. Key workstreams are:
  - **The Workforce Development Fund** – a successful bid of £112,000 has now been confirmed by Skills for Care (which is a Department of Health fund).

- **The Burdett Trust funded project to develop Advanced Nurse Practitioners in nursing homes** – a £60,000 project over two years, to encourage and support the role of Advanced Nurse Practitioners in nursing care homes. This work is linked with that of the Training Hubs within the Integrated Care System (ICS)
- **Nottinghamshire Independent Sector Recruitment Project** – an investment of £6,000 has been identified for this work to include:
  - the development of a homecare career video to promote working in social care and for providers to use in their own recruitment drives, please see paragraph 42.
  - workshops to improve recruitment and selection practices for homecare and residential services
- **Learning and development interventions** - to support commissioning and quality improvement initiatives and the local recruitment campaign will include management development, coaching opportunities, managers' network meetings and Champions' workshops to deliver knowledge and understanding to meet person-centred needs, health and social care needs.

#### **ICT update - Working with care providers to ensure robust and resilient data security**

44. During July the team made an application for grant funding that was available nationally to complete a time limited project, working with care providers to ensure systems and processes for exchanging sensitive, personal information necessary for commissioning and managing care services for individuals are as robust and resilient as they can be at all times.
45. The application was successful and received excellent feedback from the evaluation process. The project will begin in September 2019 and will focus on the local care sector's ability to 'respond and recover' from any potential cyber-attack or similar incident. The project will work with a small number of local care providers from different service areas to test out continuity plans for exchanging sensitive information securely between the Council and providers if systems should fail. A key element, however, will be to develop legacy learning and improvement that can be applied sector wide.
46. A further benefit of the project is that it will help to ensure local care providers are practicing good data security and that personal information is handled correctly at all times. The project will work alongside other successful projects as part of a national network.

#### **Other Options Considered**

47. No other options have been considered.

#### **Reason/s for Recommendation/s**

48. 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**

49. 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**

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

## **Implications for Service Users**

51. 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**

- 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.

**Paul Johnson**

**Service Director, Strategic Commissioning, Safeguarding and Access**

**For any enquiries about this report please contact:**

Cherry Dunk  
Group Manager, Quality & Market Management  
Adult Social Care and Health  
T: 0115 9773268  
E: [cherry.dunk@nottscc.gov.uk](mailto:cherry.dunk@nottscc.gov.uk)

## **Constitutional Comments (AK 28/08/19)**

52. The recommendation falls within the remit of the Adult Social Care and Public Health Committee under its terms of reference.

### **Financial Comments (DG 28/08/19)**

53. There are no specific 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.

ASCPH670 final