

To the Chair and Members of the Health and Adult Social Care Committee

The Care Quality Commission (CQC) Inspection and Regulation of Adult Social Care

Relevant Cabinet Member(s)	Wards Affected	Key Decision
All	All	No

EXECUTIVE SUMMARY

1. This report summarises the:
 - Key findings from the CQC's recently published report on the state and quality of domiciliary care services and provision of care in a registered Care Home for adults for the period 2014 to 2017.
 - Comparisons between the CQC's national key findings and the local data and intelligence relating to provision of adult social care in the Doncaster district.
 - Contract monitoring, engagement and other improvement activity undertaken by commissioning staff to support and drive up standards and quality.
 - Recently announced programme of Health and Social Care local system reviews to support those areas facing the greatest challenges to secure improvement.

EXEMPT REPORT

2. No

RECOMMENDATIONS

3. That the report is noted and that the outcomes of each CQC inspection rating going forward are notified to future meetings.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4. The CQC ratings for Social Care provision within the Doncaster Borough demonstrate a largely positive picture with Doncaster comparing well to national benchmarks.

BACKGROUND

5. **KEY FINDINGS FROM THE NATIONAL CQC'S INSPECTIONS OF ADULT SOCIAL CARE SERVICES 2014 TO 2017.**
6. Following the three year programme the CQC identified three characteristics of high-quality care; leadership, culture and person-centred care. In relation to the identification of poor quality care the CQC cited staffing levels, medicines

management and staff training / competencies which are all components of Doncaster Council's contract management approaches.

7. 79% of all CQC regulated adult social care services in England were rated as good or outstanding overall. 19% of services were rated as requires improvement and 2% of services nationally continue to be rated as inadequate.
8. The CQC observed that generally, smaller services were rated better than larger services and Nursing Homes remain their biggest concern 3% of which are currently rated as inadequate nationally.
9. The following comparative summary of ratings demonstrates a largely positive picture with Doncaster comparing well to national benchmarks whilst also identifying mitigating factors and improvement actions

10. Domiciliary Care Agency Ratings

11. Nationally, 82% of domiciliary care agencies are rated good or outstanding compared to 71% in Doncaster. There are no inadequate rated contracted domiciliary care providers in Doncaster compared with 1% nationally. 18% of domiciliary care agencies are rated requires improvement compared to 14% in Doncaster. There are 14% of Doncaster domiciliary care providers newly registered and have not received an inspection which will have an impact on Doncaster's %.

12. Registered Care Home Ratings

13. Nationally 81% of Care Homes are rated good or outstanding compared to 86% of Care Homes in Doncaster. There are 2% (equivalent to 1 Care Home) "inadequate" rated contracted Care Homes in Doncaster compared with 1% nationally. This "inadequate" Care Home within Doncaster closed on Thursday 27th July 2017. 12% of Care Homes in Doncaster are rated "requires improvement" compared to 18% nationally. The local homes that have a "requires improvement" CQC rating are supported by the Council's officers who will monitor the homes Action Plan to ensure that the required improvements are achieved.

14. Nursing Home Ratings

15. 83% of Nursing Homes in Doncaster are rated good or outstanding compared to 68% nationally. There are 4% inadequate rated contracted Nursing Homes (equivalent to 1 Nursing Home in Doncaster) compared with 3% nationally, the Nursing Home in Doncaster is being closely monitored to support the improvements required. 9% of Nursing Homes in Doncaster are CQC rated as "requires improvement" compared to 29% nationally. The Nursing Homes are monitored and supported by Council officers as this is undertaken on behalf of the CCG who provide additional funding to the Council for this service.

16. Doncaster Council Contract Monitoring and Improvement Activity and Approach

17. The Contracts section of the Commissioning Team undertakes the contract monitoring of all externally commissioned Adult Social Care services. The type and number of contracted Providers currently monitored are:

Type of Organisation	Number of Organisations
Home Care	38 (of these 14 are on the Commissioned Care and Support at Home contract with the remaining 14 on the old framework agreement who currently provide services to individuals funded by the Council)
Supported Living	4
Residential Care	66
Nursing Care	23
Voluntary Community Services	20
Day Care	4
Housing Related Support	29
Other	9

18. A recent report published in March 2017 by Independent Age, *Care Home Performance across England* identified Care Homes in Doncaster as having the lowest number of CQC ratings of inadequate/requires improvement in Yorkshire and Humber. This is testament to the joint agency working and robust monitoring arrangements that are in place in Doncaster.
19. There are several different levels of monitoring in place:
20. **Quality and Risk Meetings:** A weekly multi-agency meeting that includes representatives from Council's Contracts Team, CCG, Safeguarding, Community Nurses, Occupational Therapy, Infection Prevention and Control, Workforce Development. A Care Quality Commission (CQC) inspector attends on a monthly basis. The purpose of the meeting is to share information about Providers where there are concerns of poor quality care and safeguarding concerns, to RAG rate the Provider/service and to agree actions. The meeting considers information from all members and this is held within the Quality Issues Log (QIL). For Providers who are consistently demonstrating poor quality care, safeguarding concerns or there are sudden/urgent concerns of poor quality care there is a robust escalation process in place to form a Multi-Disciplinary Meeting to agree action.
21. **Quality Issues Log:** The Quality Issues Log (QIL) captures intelligence and developing issues from various sources (a wide range of professionals both internal and external, feedback from people receiving services and their relatives) identifying themes and trends to enable early intervention in an effort to prevent escalation. Providers are required to submit quarterly performance returns that measure service delivery levels against pre-determined targets. This information is analysed to identify trends and patterns that may highlight any service performance issues both positive and negative thereby providing early indication of any remedial action that may be required.
22. **Quality and Performance Assessment:** All providers have a planned annual contract monitoring review to ensure that they are adhering to all standard health and safety requirements, all regulatory standards and the Council's own 5 service quality outcomes. The assessment is split into 2 parts where the Provider conducts their own self-assessment against each outcome followed by a site visit by the Contract Monitoring Officer who verifies and qualifies the Providers self-assessment, agrees a final score (Outstanding/Very Good/Good/Adequate/Inadequate) offering support and advice with action planning to achieve improvement.

23. **Responsive Quality Monitoring:** This takes place where either a significant concern or an accumulation of low level concerns are identified and as appropriate consists of an unannounced visit which can take place at any time of the day or night as necessary.

24. **Multiple Disciplinary Approach:** This takes place when there are serious concerns of poor quality of care or provider failure requiring more intensive monitoring and action planning.

25. **Working with the Regulator:** The Council has a very good relationship with the CQC regularly sharing information and where there is a high level of concern conducting joint visits and attending Multi-Disciplinary Meetings.

26. **Strategic Meetings:** The Team Manager and Deputy are involved in a number of strategic workforce meetings that are key to the strategic planning and delivery of quality improvement and developing our future contract monitoring activity these include:

- ADASS Regional Commissioning Network
- Care Home Strategy Implementation Project Board (Workforce Manager also attends)
- South Yorkshire and Bassetlaw Quality Surveillance Group
- South Yorkshire and Bassetlaw Care Home Group

27. Care Home Education and Training Evaluation and Support from Workforce Team

28. The Care Home Education and Training Evaluation funded by the Better Care Fund initial scope was to provide the Council with intelligence and improved understanding of education and training practice in Care Homes and to offer recommendations as to the future training requirements in Care Homes. This piece of work has been extended to support the delivery of the priority recommendations identified in the final report and to work closely with the Council's Workforce Team.

29. The Workforce Team supports all of our contracted providers in offering core training that is currently free of charge to enable Care Workers to have a good base knowledge of mandatory training requirements.

30. The Workforce Team facilitates key meetings with providers focusing on sharing best practice and the development of the Provider workforce in the borough.

31. Care Quality Commission Sample System Reviews of Health and Social Care

32. On the 4 July 2017 the Care Quality Commission issued a press release informing of their intention to undertake a programme of local system reviews of health and social care in 12 local authority areas to support those areas facing the greatest challenges to secure improvement.

33. The reviews will consider commissioning across the interface of health and social care together with an assessment of the governance in place for the management of resources.

34. The CQC will look specifically at how people move between health and social care, including delayed transfers of care, with a particular focus on people over 65 years old.

35. The 12 areas for initial review are:

- Birmingham
- Bracknell Forest
- Coventry
- East Sussex
- Halton
- Hartlepool
- Manchester
- Oxfordshire
- Plymouth
- Stoke
- Trafford
- York

36. On completion of each review the findings will be reported to each local authority area's health and wellbeing board. In addition to this the regional branch of the Association of Directors of Adult Social Services, of which Doncaster are a member, will be looking at lessons learnt across the region to ensure good practice is shared and we learn from the above reviews.

37. The CQC intend to identify a further eight sites for review in the coming months. Once all 20 reviews have been completed a national report of key findings and recommendations will be published.

OPTIONS CONSIDERED

38. None applicable

REASONS FOR RECOMMENDED OPTION

39. Not applicable

IMPACT ON THE COUNCIL'S KEY OUTCOMES

40.

	Outcomes	Implications
	<p>All people in Doncaster benefit from a thriving and resilient economy.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Be a strong voice for our veterans</i> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>Quality social care provision is a component of a thriving and resilient economy</p>

	<p>People live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>Quality social care provision promotes safeguarding and independence</p>
	<p>People in Doncaster benefit from a high quality built and natural environment.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	
	<p>All families thrive.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>Quality social care provision support families to thrive.</p>
	<p>Council services are modern and value for money.</p>	
	<p>Working with our partners we will provide strong leadership and governance.</p>	<p>The Council works well with CQC colleagues to promote and develop quality social care provision.</p>

RISKS AND ASSUMPTIONS

41. The generally positive CQC ratings for social care provision within the Doncaster Borough when compared with national data derive from a pro-active contract monitoring and management function within the Council. It is assumed that the Council will want to continue investing at current levels in view of the generally favourable outcomes achieved.

LEGAL IMPLICATIONS

42. Section 1 Localism Act 2011 gives the Council a general power of competence to do anything that individuals may generally do.

Section 2B of the National Health Service Act 2006 (as amended by Section 12 of the Health and Social Care Act 2012) introduced a new duty on Councils in England to take appropriate steps to improve the health of the people who live in their area.

The Care Quality Commission is the independent regulator of health and adult social care in England who make sure that health and social care services provide service users with safe, effective, compassionate, high quality care and encourage care

services to improve.

43. As part of the Care Quality Commission's work they have published a report on the state and quality of domiciliary care services and provision of care in a registered Care Home for adults for the period 2014 to 2017. These findings have allowed that Council to measure how it is doing against national statistics which will also allow the Council to understand and plan how to target the area's for improvement.

FINANCIAL IMPLICATIONS

44. There are no specific financial implications arising from this report.

HUMAN RESOURCES IMPLICATIONS

45. There are no Human Resources implications relating to this report.

TECHNOLOGY IMPLICATIONS

46. There are no direct technology implications in relation to this report.

EQUALITY IMPLICATIONS

47. There are specific equality implications in this report.

CONSULTATION

48. Not applicable

BACKGROUND PAPERS

49. None

REPORT AUTHOR & CONTRIBUTORS

50. Ian Campbell Head of Service: Adults Commissioning
01302 732238 Ian.Campbell@doncaster.gov.uk

Contributors

Rosemary Leek, Contracts Team Manager
Tracey Davill-Kellett, Deputy Contracts Team Manager

Damian Allen
Director of People