

DECISION-MAKER:	Joint Commissioning Board		
SUBJECT:	Quality Update including Provider Failure and Provider Exit Guidance		
DATE OF DECISION:	11 th June 2018		
REPORT OF:	Director of Quality and Integration		
<u>CONTACT DETAILS</u>			
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STATEMENT OF CONFIDENTIALITY	
Not applicable	
BRIEF SUMMARY	
<p>This paper provides an update on quality in social care services in Southampton and is seeking the support of the Joint Commissioning Board for the ongoing use of the Provider Failure and Provider Exit Procedure. This procedure has been developed in line with nationally recognised guidance to support this type of event, and involves both health and social care teams to respond, particularly in the case of a large provider e.g. a care home with nursing or a home care provider who provides home care to a large number of health and social care funded service users.</p>	
RECOMMENDATIONS:	
(i)	Note the quality report
(ii)	Endorse the Provider Failure and Provider Exit Procedure
REASONS FOR REPORT RECOMMENDATIONS	
1.	The quality report is an update for Joint Commissioning Board on quality concerns and good practice in the City and is intended as an information only item to provide assurance to the Board
2.	The Provider Failure and Provider Exit Procedure has been developed by the Integrated Commissioning Unit Quality Team following national best practice and local experience of provider failure or exit. This means that the procedure has been tested to ensure it is applicable to care homes and home care providers, for both provider failure (a situation where the quality or business provided breaks down) and provider exit (a situation where a decision has been made for a provider to exit the local market)
ALTERNATIVE OPTIONS CONSIDERED AND REJECTED	
3	The Council and CCG could have continued without a clear procedure for provider failure and provider exit however this was rejected as it places both organisations at risk of not being able to appropriately manage this type of situation. This would then potentially put service users at risk
4	By not having a clear provider failure and provider exit procedure the Council would not be fulfilling its safeguarding responsibilities

DETAIL (Including consultation carried out)	
5	<p>Quality Report</p> <p>This short update provides an overview of the current good practice and challenges for quality of services that are commissioned by the Integrated Commissioning Unit (ICU) between Southampton City Council and NHS Southampton City Clinical Commissioning Group</p>
6	<p>Good Practice</p> <p>Currently across Southampton social care providers in the care home market are considered overall to be providing good care. Earlier this year the Care Quality Commission identified Southampton as having the highest increase in ratings of good upon re-inspection (↑190%). A small number of providers continue to be monitored by the ICU Quality Team to ensure that care standards are meeting the Care Quality Commission and locally expected requirements. These providers are subject to regular monitoring visits and intelligence review with early intervention when concerns are identified.</p>
7	<p>Home care providers in Southampton are slightly more challenged and a number of these providers have been subject to large scale safeguarding investigations in recent months. This has resulted in some services being suspended from taking new clients for short periods of time to allow providers to correct problems with their services. Additional support has been provided by the Quality Team and other ICU Commissioners to ensure these services meet local and national quality standards.</p>
8	<p>Over the last 6 months the Quality Team has been working with Adult Social Care operational teams within the Council to ensure the internal care homes and home care services provided are also meeting these requirements. Good progress has been made and it is now felt that the two care homes, shared lives scheme and rapid response service are meeting the requirements. Further work is being undertaken to support these services in developing outstanding aspects of service provision and care.</p>
9	<p>The services provided by health and social care providers as part of the Better Care fund are considered to be meeting the quality requirements. There is ongoing quality monitoring in place for all the health led contracts and this is being developed further for those led by social care. During the early part of 2018 there has been a focus on ensuring all contracts awarded via the ICU have clear requirements relating to safeguarding adults and children. Further work planned for 2018 includes ensuring commissioning managers with responsibility for monitoring contracts have a broader understanding of quality assurance and how to support providers who may be weak in this area.</p>
10	<p>The Provider Failure and Provider Exit procedure has been developed by the Integrated Commissioning Unit Quality Team with involvement from Commissioning Managers, Provider Relationships, and Adult Social Care Safeguarding experts. Input has also been sought from emergency planning,</p>

	communications, finance and legal services.
RESOURCE IMPLICATIONS	
<u>Capital/Revenue</u>	
11	There are no specific resource implications of this paper. The provider failure and provider exit procedure requires Council and CCG staff to undertake additional roles similar to those of managing a significant incident or emergency planning type situation.
<u>Property/Other</u>	
12	None noted
LEGAL IMPLICATIONS	
<u>Statutory power to undertake proposals in the report:</u>	
13	The Council has a statutory power and responsibility to safeguard individuals receiving services within the Southampton City boundary
<u>Other Legal Implications:</u>	
14	None noted
CONFLICT OF INTEREST IMPLICATIONS	
15	No conflicts of interest are noted
RISK MANAGEMENT IMPLICATIONS	
16	The Council has a responsibility as a commissioner of services to ensure the quality of those services meets and acceptable standard. In addition the Council has a statutory responsibility under the Care Act to ensure mechanisms are in place to safeguard adults, who may be vulnerable, and are receiving care within the City boundary.
17	<p>Areas of Concern</p> <p>The main areas of concern for quality of services in Southampton at this time relate to the ability of all providers to recruit and retain appropriately trained staff. This applies across all sectors with particular concern in home care services, nursing homes recruiting registered nurses, and some health practitioners including general practitioners (GPs), some specialist areas of practice including mental health and learning disability nurses.</p> <p>Over the last 12 months Southampton has had a small number of social care providers, both care homes and home care services, leave the market either by choice or following failure of services. In light of this and in line with national best practice a provider failure and provider exit procedure has been developed and is presented to the Joint Commissioning Board for endorsement. It is a joint procedure between Southampton City Council and NHS Southampton City CCG, reflecting the work of the ICU and the national move to closer working between health and social care. The document is attached to support endorsement.</p>
POLICY FRAMEWORK IMPLICATIONS	

18	The proposals contained within this report are in accordance with the Councils Policy Framework plans

KEY DECISION?	Yes/No N/A
WARDS/COMMUNITIES AFFECTED:	
<u>SUPPORTING DOCUMENTATION</u>	
Appendices	
1.	Provider Failure and Provider Exit Procedures

Documents In Members' Rooms

1.	Not applicable
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Equality Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.	Yes
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Privacy Impact Assessment

Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out.	No
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Other Background Documents

Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
1.	Not applicable