

DECISION-MAKER:		Joint Commissioning Board			
SUBJECT:		Quality Update			
DATE OF DECISION:		August 2021			
REPORT OF:		Director of Quality and Integration			
<u>CONTACT DETAILS</u>					
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STATEMENT OF CONFIDENTIALITY					
Not applicable					
BRIEF SUMMARY					
This paper provides an update on quality in health and care services in Southampton with a specific focus on social care providers.					
RECOMMENDATIONS:					
	(i)	Note the quality report			
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.				
ALTERNATIVE OPTIONS CONSIDERED AND REJECTED					
2.	No alternatives considered as this is intended as an information only item to provide assurance to the Board				
DETAIL (Including consultation carried out)					
3.	Quality Report 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 between Southampton City Council and Southampton area team, NHS Hampshire, Southampton, and Isle of Wight Clinical Commissioning Group.				
4.	The Integrated Commissioning Unit (background/context) The Integrated Commissioning Unit is a joint commissioning team for Southampton City Council and NHS Hampshire, Southampton, and Isle of Wight Clinical Commissioning Group (Southampton area), established in December 2013 and based across both organisations. The Integrated Commissioning Unit aims to deliver efficiencies across departments and improve outcomes for vulnerable adults, children, and families in Southampton by putting the residents at the centre, designing services around them, joining up the delivery of services and adopting a strategic approach to the wider				

determinants of health and wellbeing.

The Quality Assurance Team and the Safeguarding in Provider Services team were brought together when the Integrated Commissioning Unit (ICU) was created to form the Quality and Safeguarding (in provider services) Team. The team comprises the following elements to provide a multi-disciplinary approach to quality assurance and safeguarding in provider services:

- Quality and Safeguarding (in provider services) Team
- The Digital Care Team
- The Enhanced Care Home Quality Team
- The Trusted Assessor
- Children's quality assurance practitioner.

Additional support is also provided to the team via:

- Care Homes Medicines Management Team
- Infection Prevention and Control Team.

5. Good Practice

Currently across Southampton social care providers in the care home and home care market are considered overall to be providing good care. The Care Quality Commission continues to undertake focused inspections based on an assessment of risk and local intelligence with the option of carrying out a comprehensive inspection as necessary.

Further updates to the regulatory framework are being released by CQC regularly.

The current profile of Care Quality Commission ratings across Southampton is:

	<i>Outstanding</i>	<i>Good</i>	<i>Requires Improvement</i>	<i>Inadequate</i>	<i>Not yet rated</i>
Nursing Homes	0 ↔	8 ↔	1 ↔	0 ↔	0 ↔
Residential Homes	1 ↔	41 ↔	5 ↔	0 ↔	1 ↓
Home care providers	1 ↓	36 ↓	2 ↓	0	15 ↑

The nursing home rated Requires Improvement continues to make progress in resolving the concerns identified and the Quality and Safeguarding is monitoring the situation with regular contact to support improvement. The remaining nursing homes have not been formally inspected by the Care Quality Commission since 2018/2019 and new rounds of inspections are likely as the pandemic impact decreases.

Over the past months, several home care providers have de-registered from the market whilst others have been established and are awaiting Care Quality Commission inspection. The change in ratings reflects this movement in the market. The Integrated Commissioning Unit has agreed a process to safely manage quality assurance of off framework providers so that they can be safely commissioned under spot purchase contract arrangements.

6.	<p>The Integrated Commissioning Unit has been proactively supporting the care home and home care sector throughout the pandemic. The bi-weekly video conferencing sessions run by the Quality and Safeguarding and Infection Prevention and Control team, for any social care providers who wish to participate, continue and have been adapted to include training sessions on a range of relevant topics and engaging speakers from outside of the area. These sessions have been running since the start of the pandemic and are a vital link with the care home and home care sector, allowing timely dissemination of new guidelines and discussion about how these are put into practice. More recently, this support has included communications advice related to the publication of care home COVID-19 death data, information on vaccination and the impact of the mandatory vaccination requirements and updated guidance on visiting in and out of care homes/supported living.</p>
7.	<p>Digital Care</p> <p>The Digital Care Team service (part of the Integrated Commissioning Unit) established in 2019 holds responsibility for workstreams related to digital health and social care at a place-based level in Southampton. A need for the service was identified with ever increasing digital health and social care mandatory workstreams having been delegated to local systems by NHS England and the Department of Health and Social Care to project manage and deliver. The team is unique in that it works across both Southampton City Council and the Clinical Commissioning Group and brings together a multitude of digital health/social care workstreams with a mandate to improve partnership working across the health and social care system to improve outcomes for residents.</p> <p>The team completes foundation and enabler projects to support services to become more integrated, efficient, and safer and supports the local priorities of community-based care, keeping people healthy and independent. Over the past 18 months, the team have successfully bid for £110,000 for digital projects (Data Security and Protection Toolkit, NHS Mail, NHS Teams, iPads for Care Homes, RESTORE2 digital (prevention of deterioration) and wellbeing/communication) for Southampton.</p> <p>The Digital Care Team are currently working to roll out RESTORE2 digital to residential and nursing homes, an initiative shown to help carers to identify when a resident may be becoming unwell and to access timely intervention with a view to preventing unnecessary escalation/transfer and improving quality of life. The scheme has also been shown to significantly improve carer confidence and role satisfaction levels, key elements of retaining a highly training, stable and motivated workforce.</p> <p>The Digital Care Team are now looking at how to support the Home First agenda by increasing the markets digital maturity and connectivity, including through NHS mail, data security, access to the Care and Health Information Exchange (CHIE) (enabling care providers to receive rich care information from partner agencies to better care for their service users) and vital signs tools to keep people healthy and out of care.</p>
8.	<p>COVID-19 mandatory vaccination of care home staff</p> <p>From 11 November 2021, new regulations will require all care home workers, and anyone working or volunteering inside the indoor premises of a Care Quality Commission-regulated care home providing nursing or personal care, to be fully vaccinated against COVID-19 unless they have a medical exemption.</p> <p>Key dates:</p>

	<ul style="list-style-type: none"> • 22 July The 16-week grace period started, following approval of the regulations by Parliament • 16 September Any staff or volunteers who are receiving a two-dose vaccine will need to get the first dose by this date in order to be fully vaccinated and be able to continue their role in a care home by the end of the grace period • 11 November The regulations come into force. <p>Currently, across providers in Southampton 72.2% of employed care home staff have received two doses of a Medicines and Healthcare products Regulatory Agency approved COVID-19 vaccine and this position is improving (data obtained from the National Capacity Tracker). Levels of vaccination are similar across registered nurses, care staff and non-care staff. The Integrated Commissioning Unit via the Digital Care Team and Infection Prevention Control Team under the direction of the Care Home Oversight Group continue to provide resources, education and one to one counselling to support care staff to take up vaccination. Reliable video and written information in multiple languages is being disseminated and specific vaccination sessions for lower uptake groups (e.g., Polish and Chinese communities) have been undertaken, as well as using faith premises for vaccination. A review of individual home data on vaccinations is being undertaken to allow more targeted interventions, including local onsite vaccination to occur. The national criterion for medical exemptions is yet to be published but it is likely that this will result in some individuals who are unvaccinated being excluded from the requirement, mitigating the risk further. However, at present levels, the impact of losing this workforce to the market would be significant.</p>
9.	<p>Care Home COVID-19 deaths</p> <p>On 21 July 2021, the Care Quality Commission published a summary of all care home resident deaths involving COVID-19 notified to the commission between 10 April 2020 and 31 March 2021. As has been recognised nationally, the care home sector has been particularly affected by the pandemic and every death is a personal tragedy for individuals and families and the staff caring for them. The published data reflects total numbers of deaths in residents but does not provide any context (for example, the occupancy of the home or the age and complexity of the resident’s needs). Care should, therefore, be taken in interpreting the data as a higher number of deaths does not necessarily equate to any failure in infection control measures or quality standards.</p> <p>Since the start of the pandemic, Southampton City Council and the Quality and Safety Team in the Integrated Commissioning Unit has worked with care homes to support the implementation of all government guidance in relation to COVID-19 as it has become available, including the use of personal protective equipment, hand hygiene, social distancing, regular staff and resident COVID testing and vaccination. Regular support, advice and training has been offered around infection prevention control and other issues through webinars with local specialists and individual support for homes which have had outbreaks.</p>
10.	<p>Quality and Safeguarding in Provider Services Team</p> <p>The primary duties of the Quality and Safeguarding team are to review provider safeguarding concerns received via Adult Social Care Connect (including leading on Section 42 Provider Led Enquiries and/or Large-Scale Safeguarding Enquires) to fulfil the statutory role for Southampton City Council in relation to safeguarding adults and to</p>

	<p>provide quality assurance and improvement support to City providers (care homes, home care providers, extra care settings, supported living and day services).</p> <p>During the pandemic, a rise in safeguarding concerns and the extension of Adult Social Care Connect to seven-day working has increased the number of safeguarding referrals coming into the team. The number of safeguarding referrals awaiting action with the Quality and Safeguarding team has risen from an average of 5-10 to 44 on the case load at any time (averaging 4-5 new referrals per day), along with significant delays to action investigations. This poses a risk to vulnerable individuals in Southampton and to the statutory duties of the local authority. The Quality and Safeguarding team are actively triaging all referrals and prioritising the most urgent/significant cases whilst progressing actions to improve capacity within the team and manage the backlog.</p>
11.	<p>Health providers</p> <p>The wider ICU Quality Team continues to support and monitor health providers utilising the internal governance and assurance functions of those providers which has proved to be a more collaborative approach which supports the future transition to self-governing systems. The Southampton and Southwest Hampshire local Quality Committee, made up of health, social and voluntary sector providers continues to mature.</p> <p>At present, the health system is under unusual and exceptional pressure (akin to high winter demand) due to a combination of activity across the urgent and emergency care pathways, workforce (COVID-19 isolation, other absence, competing demand for social care workforce from hospitality sector), planned care (restoration of elective care services and waiting list initiatives) and flow (access to Home Care / onwards care). System partners are working together to increase flow and capacity.</p> <p>Due to the higher levels of COVID-19 activity, some limited episodes of transmission are occurring but are being managed by the infection prevention and control teams. Norovirus is at normal seasonal levels but due to low prevalence during the winter months from COVID-19 restrictions it is anticipated that increased activity will be seen. All sectors are continuing to promote messaging on hand hygiene, social distancing, and isolation when symptomatic.</p> <p>A review of safeguarding resource across the new Integrated Care System is currently underway with an essential focus on providing designated and specific capacity to Place, based on the boundaries and functions of each local authority area. Within Southampton, as an interim measure pending finalisation of the safeguarding resource and structure, an additional 0.5 WTE of Designated Children’s safeguarding capacity is being brought in to support the new associate Designated Nurse for Children’s safeguarding and Looked After Children.</p>
RESOURCE IMPLICATIONS	
<u>Capital/Revenue</u>	
12	There are no specific resource implications of this paper.
<u>Property/Other</u>	
13	None noted

LEGAL IMPLICATIONS	
<u>Statutory power to undertake proposals in the report:</u>	
14	The Council has a statutory power and responsibility to safeguard individuals receiving services within the Southampton City boundary
<u>Other Legal Implications:</u>	
15	None noted
CONFLICT OF INTEREST IMPLICATIONS	
16	No conflicts of interest are noted
RISK MANAGEMENT IMPLICATIONS	
17	The Council has a responsibility as a commissioner of services to ensure the quality of those services meets an 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.
18	<p>Areas of Concern</p> <p>The main areas of concern currently relate to:</p> <p>Mandatory vaccinations for care home workers: currently one quarter of the workforce does not meet the criteria to continue working past 11 November 2021. Mitigations are in place (see section 9).</p> <p>Capacity and quality in the Home Care market: the lack of capacity amongst on framework providers means that increasing spot purchase of packages of care is being undertaken. A process for 'onboarding' and quality assuring these providers has been agreed.</p> <p>Quality and Safeguarding in Provider Services Team: the increase in safeguarding referrals and resultant delays in resolution poses a significant risk to the population and to the statutory duties of the local authority and is being addressed with urgency.</p>
POLICY FRAMEWORK IMPLICATIONS	
19	The information contained within this report are in accordance with the Council Policy Framework plans
KEY DECISION?	N/A
WARDS/COMMUNITIES AFFECTED:	N/A
<u>SUPPORTING DOCUMENTATION</u>	
Appendices	
1.	None
Documents In Members' Rooms	
1.	Not applicable

Equality Impact Assessment		
Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.		No
Privacy Impact Assessment		
Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out.		No
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	