

# Sheffield City Council

## Contracts & Partnership Section

**Meeting:** Monitoring Advisory Board

**Date:** Wednesday 31<sup>st</sup> October 2012

**Present:** Cllr Mary Lea (Chair; [ML]) Cabinet Member for Health, Care & Independent Living  
 Andy Hare (AH) Contracts Manager  
 Nicola Afzal (NA) Contracts Manager  
 Brian Coddington (BC) Senior Contracts Officer  
 Louise Coombes Contract Officer  
 Joan Hubbard (JH) Expert Elder  
 Joan Memmott (JM) Expert Elder  
 Rachel Woollen (RW) Programme Officer  
 Deborah Willoughby (DW) Programme Officer  
 Cllr Peter Rippon (PR) Labour Councillor and Chair of North & West Planning Board  
 Lauren Bows (minutes) Assistant Contracts Officer

**Apologies:** Councillor Geoff Smith (GS) Cabinet Advisor for Communities & Inclusion

		<b>Action</b>
<b>1</b>	<p><b>Welcome and Apologies</b></p> <p>Introductions and apologies were noted.</p>	
<b>2</b>	<p><b>Previous Minutes and Matters Arising</b></p> <p>It was agreed that the previous minutes on the 25<sup>th</sup> July 2012 were an accurate record.</p>	
<b>3</b>	<p><b>Home Support Update Report</b></p> <p>BC summarised the distributed report, and informed the board that there are two providers in “amber” risk status (6 contact areas). The Contract &amp; Partnership Team is monitoring the providers closely and will be assisting to support and improve performance. As of the 20<sup>th</sup> September, a decision was made to cease any new packages of care being sent to one of the providers, which affects three contract areas.</p> <p>Missed calls continue to be at minimal levels. The Contracts and Partnership Team are working with the two providers in “amber” to improve performance.</p> <p>Over Q3 all Cost and Volume Providers and the One Spot Provider that utilise the Electronic Call Monitoring System (ECM) will be visited by the Contract and Partnership Team and findings will be fed back into the KPI meeting. .</p> <p>A night care visiting service has been commissioned, using a contract variation to the Cost and Volume contract and Saga is now providing this service. At present no</p>	

	<p>decision has been made about the longer term future of this service.</p> <p>JM asked for clarification on the night care service as it sounded like this service has only just started. BC explained that the night care service was previously provided in-house but this service was now reduced and as an interim measure, Saga have been engaged to continue providing service where required. When the main contracts for Home Support expire, another solution will be required is the night service is still needed.</p> <p>Cllr PR asked why the provider with a hold on packages is not red on the status report.</p> <p>AH confirmed that the amber status was not increased to red due the provider showing willingness to change and capacity to improve. The risk status would change to red if the concerns about management capacity were greater, AH explained that the team did not feel the provider was at this stage.</p> <p>BC added that the status can also reflect something the provider may not have control over. i.e the new Tesco opening reduced staff in branch and therefore the capacity to deliver care.</p> <p>Cllr PR asked how often monitoring visits to this provider would be carried out.</p> <p>BC confirmed that providers in the amber status would receive at least fortnightly visits and regular formal meetings.</p> <p>Cllr PR asked if the visits are unannounced. BC confirmed that most of the visits are planned unless there is a great concern which would require an unannounced visit.</p> <p>AH explained that alternative care providers are contacted to pick up care packages if there is a stop on packages to a cost and volume provider as there is still a need for care in the three contact areas concerned.</p> <p>JH asked if more monitoring would pre-empt problems in the future. BC confirmed that a block contactor has to take the work under the contact. However, spot contactors can be used if necessary. BC confirmed that there are lots of spot contacts that have been able to pick up work if necessary.</p>	
<p><b>4</b></p>	<p><b>Care Homes Update Report</b></p> <p>LC summarised the Care Homes report. An update on monitoring visits was provided confirming that 74 homes out of 123 are fully compliant. Non-routine visits are also carried out if there are increased or significant concerns. One home has closed after increased concerns and 48 residents were moved to other care homes in the city. The residents have been monitored and appear to have settled well in their new homes.</p> <p>10 homes currently have residents who are under safeguarding procedures and of these, 4 have suspensions on new admissions.</p> <p>The Contracts and Partnership Team have currently started to pilot the new Risk Assessment Tool which was brought to the last Board meeting, and most of the homes</p>	

	<p>are in the low risk area on the tool.</p> <p>AH mentioned that although we do not discuss providers' names in the meeting the home that LC was referring to is in the public domain</p> <p>JM commented that the care home closed very fast after it was discussed at the last meeting. JM also asked what will happen to this home in the future.</p> <p>AH confirmed that all the residents were offered a choice of accommodation and that we were very fortunate to have availability in other care homes, this enabled the team to provide everyone with the home of their choice and quickly.</p> <p>AH explained that the decision to close the home was made after a series of events within the home and a loss of confidence in the management. The decision was made with in a meeting of approx 20 professionals including NHS colleagues. The majority of the group made the decision.</p> <p>LC confirmed that we have no control over whether the home reopens. SSC and NHS made the decision to terminate the contract and move residents out but this does not mean the home is unable to reopen under an alternative provider.</p> <p>ML said that this decision will ensure that other care homes are aware that we do not accept poor service.</p> <p>BC confirmed that the building is not owned by the care company that has moved out. The building is still owned by the same landlord. LC confirmed that the building is a purpose built 60 bed care home.</p> <p>ML commented that this property could potentially reopen as a care home again.</p> <p>JH asked if any of the staff have been reemployed by other providers.</p> <p>BC confirmed that we are aware that some staff have found employment with other care homes in the city and redundancy notices were issued at the home. AH confirmed that some staff may be still working for Leyton Health Care.</p> <p>JH asked if any of the staff were responsible for poor care and should they be reemployed else where. BC advised that it is the new employer responsibility to request information on the past employment.</p>	
<p><b>5</b></p>	<p><b>Recognised Provider List Update</b></p> <p>RW confirmed that 17 applications were successful during the last RPL assessment process. RW explained that she has been looking at new ways to develop and improve the process for providers and staff involved in the assessments.</p> <p>The new process will be an open list for providers to apply but with two assessments per year. The first closing date will be the 30th November, and applicants will be informed of the decision by the 1<sup>st</sup> March. Second closing date for applicants is the 31<sup>st</sup> May, and a decision will be made by the 1<sup>st</sup> September, this will continue on a annual cycle.</p>	

	<p>ML and JM both requested some clarification on the Recognised Provider List as they are unsure about the level of knowledge the board had on this item.</p> <p>RW explained the purpose of the list and that this update was purely about the assessment process. RW confirmed that Providers are not put on the list until the assessments have been completed.</p> <p><b>Action:</b> NA confirmed that she will circulate a paper on the process.</p> <p>RW confirmed that all successful providers will be monitored on a light touch basis as there is no contract in place for any of these providers. Monitoring forms will be sent to the provider to check the standard of care.</p> <p>Nicola confirmed that the RPL has been well received and the team has received positive feedback.</p> <p>JM commented that various service users are unsure where to look and this is a good system for the approval of providers.</p>	<b>NA</b>
<b>6</b>	<p><b>Contracts Update</b></p> <p>Recently awarded contracts – The Carers Contract (PIA) started on the 01/10/12. Contracts Officers are currently working closely with both successful organisations and holding regular KPI meetings. AH advised that the contract will be developed over a period of 3 years.</p> <p>Future Tenders – Support planning is being externalised and will now be provided by external organisations. Support Planning has a one off cost attached to it and will come out of the individual’s budget. Commercial Services are now doing all the tenders for Adult Social Care and a timetable for the Support Planners tender will be available shortly.</p> <p>Dementia PIA – AH explained that we are working in partnership with the PCT and the Clinical Commissioning Group (from next year). This is a Dementia service that will offer support and advice.</p> <p>Home support – an enhanced specification for home support, which will focus on provision of a flexible service designed to promote independence, is being drafted and is like to be tendered for in 2013. This will largely meet the need of the people who are currently receiving service through the cost and volume contracts.</p> <p>This is a significant piece of work with a deadline of March 2013. AH confirmed that he will continue to update the board.</p> <p>JH asked what customer involvement was involved in drawing this new contract up.</p> <p>AH confirmed that a questionnaire is going out imminently. The questionnaire includes questions such as ‘what would you change about the service’ and ‘what do you want from a new modernised service’.</p>	

	<p>JM advised that there should be options rather than open questions as service users will not be aware of how it could be. This was confirmed by AH.</p> <p>Extra Care Housing - Roman Ridge and White Willows contract are due to expire soon and these are likely to be extended. A full review will take place by commissioning officers including Housing Independence.</p> <p>Budget - everyone will be aware of current budget pressures. The Contracts and Partnership Team are looking at ways to make savings. Fees and inflationary uplifts are being reviewed.</p> <p>NA confirmed that an updated will be available at the next meeting.</p>	
<p><b>7.</b></p>	<p><b>Extra Care Housing</b></p> <p>BC circulated a report for the four contracted Extra Care schemes and Brunswick Gardens. BC confirmed that if the Board is happy with this format he will continue to use for the next meeting.</p> <p>JM asked for clarification on the percentage information. JM was surprised with the information provided as this did not tally with informal information she had received. BC confirmed that the information on his report was accurate.</p> <p>Information had been received by JM that one of the extra care schemes was “becoming a care home by stealth” but the figures provided do not support this. BC confirmed that people’s needs can change over time and more care and support is sometimes required. BC advised that providers are unable to leave flats empty to wait for a service user with the correct criteria.</p> <p>NA requested clarification, on the table and if it is just for people that are funded by us.</p> <p>LC confirmed that level one are people that are self funded.</p> <p>ML asked that BC &amp; JM discuss this outside the meeting.</p> <p>BC confirmed this email address; <a href="mailto:brian.coddington@sheffield.gov.uk">brian.coddington@sheffield.gov.uk</a>.</p> <p>JM asked how extra care schemes are monitored. BC confirmed that monitoring is the same as Home Support monitoring but includes some additional information. BC confirmed that this information will be reported at future meetings.</p> <p>ML confirmed that this will be a regular item on the agenda.</p>	
<p><b>8.</b></p>	<p><b>Partnership Contracts Quarter 1</b></p> <p>DW summarised the partnership contract reports. AH explained that these are old grants that have rolled up in to contracts.</p> <p>The reports are broken down in to 3 areas with spreadsheets behind to include the output/outcome figures that are received from the provider (e.g. referrals). The information has been summarised on the front page and a RAG rating provided. The</p>	

	<p>report will highlight performance rather than compliance.</p> <p>This report will be shared with the commissioners to highlight areas of concern and help make future decisions.</p> <p>DW informed the board that case studies have also been included in the report. JH asked how this info is obtained. DW explained that the provider has systems in place to collect feedback or relative have sometimes communicated via the provider. More case studies are also available on request.</p> <p>ML asked for clarification on Learning Disability Provider which is in “amber” The provider has commented that funding has been reduced The monitoring officer will investigate this when they received the information. This is a new process so may have been missed in this instance but further information will be obtained and fed back to future Board meetings.</p> <p>JM commented that providers are unfamiliar with the new process as they have been used to sending information in their own format. DW confirmed that there was some confusion at first but most the providers have been visited and hopefully the providers will feel confident when completing these in Q2.</p> <p>JH confirmed that monitoring should all be the same. DW confirmed that all monitoring within the contracts and partnership team is the same. However, the SE Community Assembly to send their own format and this can sometimes confuse the providers.</p> <p>JM explained that one of the older people’s day care service is rated red in terms of attendance and it would be very surprising if there wasn’t a need for this service. Ravenscroft and Newton Grange have recently closed; therefore the change in venue could have caused the low attendance. DW is meeting with commissioning officers to discuss further.</p> <p>DW suggested that this information is summarised. JM confirmed that the reports were useful and welcomed.</p>	
<p><b>9. AOB</b></p>	<p>AH asked that if there were any other areas that Board members would like to cover then other officers could be invited to present reports.</p> <p>Minutes go to Scrutiny.</p>	
<p><b>Time &amp; Date of Next Meeting:</b></p> <p style="text-align: center;"><b>10:00 – 12:00</b></p> <p style="text-align: center;"><b>Wednesday 30<sup>th</sup> January 2013</b></p> <p style="text-align: center;"><b>Committee Room 5, Town Hall</b></p> <p style="text-align: center;">Please send any apologies or agenda items to <a href="mailto:chris.boyle@sheffield.gov.uk">chris.boyle@sheffield.gov.uk</a></p>		