

Adults Scrutiny Panel

Minutes - 20 February 2024

Attendance

Members of the Adults Scrutiny Panel

Cllr Qaiser Azeem
Cllr Jenny Cockayne
Cllr Val Evans (Chair)
Cllr Christopher Haynes (Vice-Chair)
Cllr Bob Maddox
Cllr Rita Potter
Cllr Udey Singh
Cllr Paul Sweet
Cllr Iqra Tahir

Employees

Earl Piggott-Smith
Andrew Wolverson

Scrutiny Officer
Director of Adult Social Care (DASS)

Part 1 – items open to the press and public

Item No. *Title*

- 1 **Welcome and Introductions**
Cllr Val Evans, Chair, welcomed everyone to the meeting and advised it was being live streamed to the press and public. A recording of the meeting would be available for viewing on the Council's website at a future date.
- 2 **Meeting procedures to be followed**
Cllr Evans explained the protocol to be followed during the meeting for asking questions.
- 3 **Apologies**
Apologies were received from the following:

Cllr Dr Michael Hardacre
Cllr Linda Leach
Cllr Rohit Mistry

Cllr Sally Green substitute for Cllr Linda Leach
- 4 **Declarations of Interest**
No declarations of interest recorded.
- 5 **Minutes of previous meeting (20 November 2023)**
Minutes of Meeting 20 November 2023 were approved as correct record.

6 **Minutes of previous meeting (5 December 2023)**

The Minutes of Meeting 5 December 2023 were approved as correct record.

7 **Wolverhampton Adult Social Care Provider Care and Support Review 2024 - 2025**

The Chair invited Andrew Wolverson, Director of Adult Social Care, to present the report on the Wolverhampton Adult Social Care - Provider Care and Support Review 2024/25.

The Director of Adult Social Care advised that members of the panel were being asked to endorse Option 3 which is the preferred option to support the Council to provide market stability in the adult care sector whilst also being financially prudent.

The Director listed the factors that the panel were also being asked to consider when reaching their conclusions, for example, the cost drivers affecting the adult social care market in Wolverhampton.

The Director gave a presentation which set out the background and context to the Council's legal duties under the Care Act 2014 to promote the effective and efficient operation of the adult social care market in Wolverhampton.

The Director advised the panel of the different types of care and support included in the provider review, for example, Home Care and Residential and Nursing and those out of scope.

The Director presented information in support on Option 3 as being preferred option and referred to details in the appendices.

The Director invited panel members to comment on the report and presentation.

The Chair thanked the presenter for the presentation.

A panel member queried if the Director was confident that both the users of the service and the Council were getting value for money and asked for details of the checks and balances in place to give assurance that residents are getting the care that is being paid for.

The Director advised the panel that an exercise was done over 12 months ago which asked care providers for details of their costs as part of preparation for the Market Sustainability and Fair Cost of Care Fund. A reference to the findings will be presented to Cabinet Resources Panel tomorrow which will provide assurance about the level of fees paid.

The Director commented that anyone in receipt of funding from the council will have a social care assessment, which is reviewed annually. The service is working to clear a backlog of outstanding reviews.

The annual reviews provide an opportunity to check if the placement is meeting the care and support needs of the individual. If the person's needs are not being met, then the Council can go back to the care provider to discuss this further.

The Director advised the panel that a review is also done within six weeks of a person being discharged from hospital to put together a package of reablement.

The Director added that the Council will reassess the persons ongoing needs after this initial period. In term of checks on quality the review will allow the service to see what the provider is doing in respect of the fees being paid. The annual care review will also provide a check to see if the level of fees is consistent with what is being paid across the Black Country region by other local authorities.

The Director reassured that panel that information about fee reviews is published and shared with colleagues across the region and commented that the level being paid is broadly in line with other authorities. The Director added that the level of fee for residential and nursing market, changes daily depending on the level of demand and the numbers being discharged from hospital or placed into care on that day.

A panel member commented on concerns about examples of poor care and wanted reassurance that the Council would investigate matters, particular for users who were paying for their services.

The Director commented that hopefully the next agenda item would give some assurance to the panel that the Council will act where a care provider is not providing the level of quality expected. The Director advised that Council has closed care homes previously while accepting the difficulties in arranging alternative care arising from this decision.

A panel member commented on the extent in the past to which care homes accepted residents with complex needs due to financial incentives to fill places and then struggled to meet the needs. There was concern that the Council would only become aware of this issue when something was reported to CQC, which itself is based on a assessment of the quality of care provided at a point in time.

The panel member also queried that given some of these concerns the rationale for awarding longer term contracts based on the proposed fee structure to care providers and wanted details about the timetable for introduction and if the aim was achievable.

The Director advised the panel that the expectation that this would be last time that an annual fee review would be done as the plan moving forward is work with care providers who want to look after the residents of Wolverhampton and their aims reflect those of the Council.

The plan will move away from the current transactional nature of the relationship between the Council and care providers to help them see the wider benefits of a longer-term arrangement. For example, support with training for care workers. The aim of the approach will be for care providers to work in partnership with the Council to deliver the best care to the residents of Wolverhampton.

A panel member asked for further details about the disbenefits for Option 3 and the affect this may have in the future. The panel member also queried the future viability of care providers and referenced concern following the closure of home a few years ago and more recently the increases in wages and utilities affecting the sector.

The panel member queried the arrangements for supporting residents following a closure of a home in the future and the role of the Council in assessing the financial viability of care provider businesses.

The Director reassured the panel that the care market has experienced a period of stability during the last 12 months where only 2 or 3 homes have ceased trading.

The reasons for closure were linked to quality of care rather financial. The Director accepted that it could be argued that this factor could link to financial pressures on the care provider.

The Director added that the key issue affecting the care home viability is the challenges presented by the recruitment and retention of registered care managers. The Council is working with care providers to make sure that they have a succession plan in place.

The Director commented that the Council works with providers who may be in financial difficulties and encourages them to have an open dialogue about the issue and will provide support. For example, where the care home has vacancies and needs help address this issue.

There is a recognition that smaller local independent providers may not have access to additional management support to respond to a situation where the Council has had to suspend new placements because of the poor CQC judgement. The Council will work hard with the CQC to help the provider remain financially viable in recognition of the challenges facing the sector.

The Director added that colleagues in personalised support team with responsibility for managing placements will also be working to build a relationship with care providers.

The Director advised the panel that a draft marketing positioning statement is being developed with the longer-term aim of supporting a shift in the market from residential to home care placements. The Director added that the Council has a higher proportion of long-term placements within residential settings compared to our statistical neighbours and there is work to be done to improve this. As a result, there is a need to support current residential provision and to work with care providers to ensure they are sustainable and financially viable.

The Director added that the Council wants to ensure that it is working with the right providers who can offer the best care to people. To support this the Council's Procurement Team runs financial viability checks on businesses and other published market intelligence to see if a company may be showing signs of possible financial stress.

A panel member asked for details of the support offered by the Council to care providers where quality of care is an issue and how it is promoted.

The Director commented that in the past there would be a crisis response from the Council to a poor CQC rating of a care provider, which would involve the management team and internal home care managers supporting the care home manager for a period.

There is an expectation that the care provider would also be taking action to address the issues of concern highlighted. The aim is to make sure the care provider is on the correct path to improving their CQC rating.

A panel shared concerns about the poor quality of care received from personal assistants funded by direct payments and referred from a reputable care agency. The panel member also queried the work done to check the performance of people, details of the process for adding external agencies to the approved list of providers and how feedback is monitored where concerns are reported.

The Director advised the panel any person getting care arranged by the Council will be subject to an annual review. As part of the initial assessment the Council will consider the tasks that the person needs, and this will determine the direct payment amount. The Director explained that the most people use their direct payments to pay for a personal assistant which they can choose to either recruit directly or use the Council services to manage all the employment issues.

The annual review will provide the opportunity for the person to share any concerns with the social worker about the quality of care and can be referred to the members of the Quality Team. The Director reassured the panel that even where the Council has not been involved in arranging the care that it still has a duty to follow up any quality concerns about a provider in Wolverhampton. The Director urged anyone having a problem with their care provider to contact the Quality Assurance Team to investigate.

The Chair thanked the presenter for the report.

The panel accepted the recommendations as detailed in the presentation.

Resolved:

1. The panel comments on the Wolverhampton Adult Social Care - Provider Care and Support Review 2024 – 2025 to be noted and actioned where appropriate.
2. The panel endorse Option 3 as the preferred option that will support the Council to provide market stability in the care sector whilst also being financially prudent.

8 **Quality Assurance Framework and Suspension Policy 2024 – 2034**
The Chair invited Andrew Wolverson, Director of Adult Social Care, to present report.

The Director advised the panel that the presentation would cover proposed changes to the Quality Assurance Framework and Suspension Policy.

The Director outlined the differences between the current and the new system and the purpose of Quality Assurance Framework. A copy of the presentation is attached.

The Director invited the panel to comment on the draft policy.

The Chair thanked the presenter for the report and invited the panel to comment on the proposed changes.

A panel member expressed concern about proposals to reduce the number of monitoring visits as part of the new working arrangements. The panel member was concerned that care providers under the proposed arrangements would be unwilling to report a serious incident to the Council which could lead to criticism for not taking appropriate early action and suggested this idea should be reviewed.

The Director advised the panel that the Council has been working colleagues in health in developing the plan. The Director reassured the panel that Quality Officers from the Council were not the only individuals responsible for visiting care homes and reporting incidents. The Director commented that the culture does not exist where everyone who visits a care home consider it is part of their responsibility to notice and report issues of poor care quality. The aim of the strategy is to build a relationship with care providers through partnership and cooperation approach.

The proposed Quality Assurance Framework document was developed with partners to look at the number of professionals that visit a care setting and offered them the challenge as why concerns were not raised and reported by colleagues. The launch of the framework is asking partners to think about how they can support identifying issues by providing intelligence about complaints. A new system has recently been introduced to allow people to raise complaints about care providers with the Commissioning Team. The Director highlighted referrals to the Multi-Agency Safeguarding Hub (MASH) team about safeguarding as another source of intelligence that could be used to identify concerns about a care provider, and this would lead to checks of other information which could suggest that there is a more serious issue to be investigated.

The aim is that future monitoring visits will be more intelligence led and occur when there are either serious concerns or various concerns that cannot be monitored as part of the proposed desktop exercise.

The Director added that a new system has been introduced for people to raise any complaints about their care which is reported automatically to the Commissioning Team.

The Director gave further details about the reasons for the change in approach and the benefits in terms of improved quality of care and early identification of issues with care providers.

A panel member queried the Quality Provider Self Assessments form completed by care providers and the specifically the number of complaints would result in a suspension and how a serious complaint would be treated after earlier complaints have been made. The Director advised the panel that a decision about the suspension would be made on a case-by-case basis which is the current policy that will continue under the new proposed policy.

The Director reassured the panel that the Council would not wait until several complaints have been received before acting. If the findings from the Quality Provider Self Assessments suggested there were any quality issues, then this would be followed up and depending on response from the provider would determine a decision on the suspension process. For example, a partial or full suspension or the suspension of certain types of placements.

The panel member reiterated concerns about the willingness of care providers to share concerns which could lead to a possible suspension when considering the financial costs to the business of such a decision. The panel member suggested that one of the quarterly self-assessments could be done by a Quality Assurance officers to provide reassurance. The panel member queried if there were plans to increase

the number of Quality Assurance Officers from four to ten which was the position in 2022.

The Director accepted that care providers may choose not to provide information and that the role of Quality Assurance officers is to visit care providers as part of a moderation process. The Director reassured the panel that conversations have already started with care providers with a focus on the process in helping the owner to understand what is happening in their care home.

The Director commented on the importance for owners to be aware of any issues before a CQC inspection. The issue is more challenging when the owner is not the registered manager and who may only visit the home every three months. The information from the quarterly self-assessment will help care home owners to prepare and address any concerns before an inspection.

The Director explained that the Council will work with care providers to help provide the best possible quality of care to residents and prevent the home from going into failure. The Director added that it would not be in the Council's interest for a care provider to close when considering the level of resources that would be needed to help address issues highlighted by Care Quality Commission (CQC).

The Director reassured the panel that the Council retains right to do spot checks on care providers and that the self-assessment information will be considered along with any complaints submitted.

A panel member suggested that a recommendation from the panel is that self-assessments should be done in conjunction with the Quality Assurance Manager to help identify early risks.

The Director agreed to consider the recommendation and report back to a future meeting.

The Director advised the panel that staffing levels in the Commissioning Team numbers of Quality Assurance Officers was reduced after a restructure of the service about 12 months ago. As a result, the responsibility for quality checks was shifted from Quality Assurance to the Commissioning Team. The Commissioning Team have responsibility for monitoring the care contract on a regular basis. The Director accepted that while the number of Quality Assurance Officers has reduced the number of people with responsibility for quality improvement has increased and each commissioner has a Quality Officer supporting them. In addition, there are also senior commissioners.

A panel member queried the process for members of the public to report any concerns when they visit a care home.

The Director advised the panel that a campaign is planned in response to such concerns about how a member of public can do this. The Director added that the Council would always encourage anyone to use the providers complaints process first to give the home the opportunity to deal with the matter. However, if the person did not want to do this then they should refer the matter to the (CQC) and the contact details should be on display a part of their registration requirements.

The Director advised that the Council is considering providing something similar for the public to report concerns about the quality of care or safeguarding.

A panel member queried what is planned to encourage other professionals visiting care providers homes to provide feedback information that can be used on the proposed Quality Assurance Dashboard. The panel member also queried how the information will be used to identify lessons and help with decision making about early intervention, how this will be monitored and tracked against performance indicators.

The Director advised the panel that the monitoring of the dashboard would be the responsibility of the Quality Officers who will be checking daily to see what other sources of intelligence from other professionals about the quality and safeguarding issues. The Director added that other professionals can report concerns for example, pressure sores, incorrect administration of medication to the Safeguarding Hub and work is being planned to raise awareness about how such concerns can be reported.

The Director commented that the dividing line between an issue is about quality of care or safeguarding can be challenging and highlighted how small concerns can be escalated to be a safeguarding issue.

The importance of the issue of quality of care was highlighted as an issue for all professionals and not just the Council to report.

A panel member queried what checks are done before a care worker is allowed to visit a person in their home. The Director advised the panel that employment checks are done on everyone that provides care, and this would include a right to work and Disclosure and Barring Service (DBS) among others.

The panel supported the recommendations as detailed in the presentation.

The Director agreed to provide a response by 8 March 2024 about the feasibility of the proposal from the panel that one of the quarterly Quality Provider Self Assessments should be done in conjunction with the Quality Assurance Manager and the care provider to help identify early risks.

The panel thanked the presenter for the report and the presentation.

Resolved:

1. The panel comments on the Quality Assurance and Suspension Policy to be noted.
2. The panel comments on the proposed policy to supersede the Policy on Suspension of New Business with Social Care Services (12/10/2015) and Care Provider Failure Procedures (March 2017) for Adult Social Care providers to be noted.
3. The Director of Adult Social Care to provide a response to the panel recommendation for one of the Quality Provider Self Assessments to be done in conjunction with the Quality Assurance Manager and the care provider to help identify early risks by 8 March 2024.

The Scrutiny Officer commented on the draft work programme. The panel were invited to comment on the draft work programme.

The panel thanked the presenter for the report.

Resolved:

The panel agreed to note the report.