



Integration Joint Board
Finance, Performance and Quality Committee

9th January 2024

This Report relates to
Item 7 on the Agenda

Contract Monitoring: Care and Support at Home

Paper presented by Peggy Taylor

For Discussion and Noting

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| List of Background Papers: | Procurement of Care and Support Services Best Practice Guidance (https://www.gov.scot/publications/procurement-care-support-services-best-practice-guidance/) Procurement Reform (Scotland) Act 2014 (https://www.gov.scot/publications/procurement-reform-scotland-act-2014-statutory-guidance/pages/13/) |
| Appendices: | Appendix 1 - Sample contract monitoring Self Assessment Questionnaire and list of Care and Support at Home provider partners Appendix 2 - Contract Monitoring Report Care and Support at Home Appendix 3 - Evaluation Report – CASH Collaborative |

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| 1. | Introduction | | |
| 1.1 | On behalf of the Health and Social Care Partnership (HSCP) the Commissioning Team monitors contracts for all adult commissioned services. | | |
| 1.2 | This paper presents the findings of the contract monitoring of Care and Support at Home (CASH) provider partners for the period 1 April 2022 – 31 March 2023. | | |
| 2. | Recommendations | | |
| 2.1 | <p>The IJB Finance, Performance and Quality is asked to:</p> <ul style="list-style-type: none"> • Note the outcome of recent contract monitoring of care and support at home commissioned services • Discuss issues raised from recent contract monitoring and suggested actions | | |
| 3. | Background and Main Report | | |
| 3.1 | Contract Monitoring is a responsibility under the Procurement of Care and Support Services Best Practice Guidance and the Procurement Reform (Scotland) Act 2014. It is the process of collecting and analysing information from partners and from across the HSCP to determine if contracted services meet contractual requirements and reflect best value in terms of both price and quality of service. It also ensures that the HSCP meets its contractual obligations. | | |
| 3.2 | The HSCP commissions 153 different services from 98 provider partners. The cost of these services totals over £70m per annum which is approximately a quarter of the annual Integration Joint Board (IJB) budget. | | |
| 3.3 | <p>Contracting and contract monitoring are aspects of the commissioning cycle that are concerned with</p> <ul style="list-style-type: none"> • technical aspects of contracts • the monitoring of the quality of what is provided under the terms of those contracts • ensuring that people's personal outcomes are being achieved | | |
| 3.4 | <p>The Commissioning Team monitor adult health and social care commissioned services that have contracts with Dumfries and Galloway Council and NHS Dumfries and Galloway. These are delivered by third sector and independent sector partners and include:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> • Day Care • Day Centres • Care and Support at Home • Care Homes </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> • Carers Support • Short Breaks • Support services </td> </tr> </table> | <ul style="list-style-type: none"> • Day Care • Day Centres • Care and Support at Home • Care Homes | <ul style="list-style-type: none"> • Carers Support • Short Breaks • Support services |
| <ul style="list-style-type: none"> • Day Care • Day Centres • Care and Support at Home • Care Homes | <ul style="list-style-type: none"> • Carers Support • Short Breaks • Support services | | |
| 3.5 | <u>Contract Monitoring Reporting</u> | | |
| 3.6 | <p>Contract monitoring reporting in Dumfries and Galloway centres on the following three aims:</p> <ul style="list-style-type: none"> • To provide assurance to the Partnership that commissioned services are delivered in line with contractual obligations; that they provide best value; and that the Partnership is also meeting its contractual obligations (compliance) • To support the management of risks that may impact on provider partners' | | |

ability to deliver the service and to deliver it to the required quality standards (*risk management*)

- To provide intelligence that supports the development of commissioning strategies, performance reporting and service improvement (*intelligence*)

- 3.7 Appendix 1 provides a sample self assessment questionnaire and sample templates used by Commissioning Officers in reviewing submissions, as well as a list of care and support at home provider partners.
- 3.8 In addition, the Commissioning Team undertake monitoring meetings with provider partners to ensure the self assessment questionnaires reflect day to day practice and check records and files relating to contractual requirements. Combining this with information that the team collates from other sources, such as the Care Inspectorate and other areas of the HSCP helps to develop a wider understanding of provider partner's compliance and level of risk.
- 3.9 In order to inform this provider partners are required to complete a self assessment questionnaire (SAQ) that reflects the terms of their contracts. These are analysed, scored and collated into contract monitoring reports.
- 3.10 Appendix 2 provides an overview of the contract monitoring process and the results of the latest Care and Support at Home Contract Monitoring.
- 3.11 It has been agreed that the resulting reports are shared routinely with the Contract Management Group, for approval before being presented to the HSCP Leadership Group and then the IJB Finance, Performance and Quality (IJBFPQ) Committee.
- 3.12 CASH Contract Monitoring
- 3.13 'Light touch' monitoring of care homes and care and support at home partners commenced in August 2021 for the period 1 August 2020 to 31 July 2021 and the results were presented to IJBFPQ committee on 13 April 2023.
- 3.14 Full contract monitoring of care and support at home recommenced in May 2023 for the period 1 April 2022 to 31 March 2023. This paper presents the findings of that monitoring exercise.
- 3.15 A total of 30 contracts have been monitored. These are all registered commissioned care and support at home provider partners, including providers on the Scotland Excel National Flexible Framework for Care and Support at Home (NFF) and Self Directed Support (SDS) Option 2 contracts. The NFF is due for renewal in April 2024.
- 3.16 The CASH services were monitored between July and October 2023 and Commissioning Officers had individual monitoring meetings with each of the provider partners. Additional follow up meetings were conducted as required.
- 3.17 Analysis of contract monitoring returns and reports from Monitoring Meetings were completed by Commissioning Officers in November 2023. The results are presented in Appendix 2.
- 3.18 Any concerning risks identified and requiring action were escalated to the Contracts Manager in the first instance and then to the Commissioning Liaison Manager for further action in conjunction with operational and social work colleagues where

applicable.

3.19 The following table gives a summary of the findings

| <p>Compliance</p> | <ul style="list-style-type: none"> • 57% of commissioned services reported 6 monthly reviews for people who use the service are up to date • 63% reported mandatory training is up to date • 70% reported Adult Support and Protection Training was up to date • 93% reported undertaking engagement/satisfaction surveys or gathered feedback • 67% reported staff supervisions are up to date <p>Staffing challenges, including recruitment and retention and management/organisational changes have impacted some provider partners' ability to fulfil some of these contractual obligations. The table in 3.21 below describes some of the actions being taken to address this.</p> | | | | | | | | | | | | | | | | |
|--|---|---------------------------|--|--|--|----------------------------|------------------------------------|------|---|-----------|----|-----------|----|---------------|---|--|-----------|
| <p>Risk Management</p> | <p>Risk scores resulting from contract monitoring show that there are 15 services showing no significant risks, 13 providers for whom moderate risks have been identified and 2 are high risk. Risk concerns have been escalated and action taken or is ongoing. Detail regarding these risks is presented in Appendix 2. Go to Page 7</p> <table border="1" data-bbox="472 1099 1193 1440"> <thead> <tr> <th colspan="2">Risk Score Results</th> </tr> <tr> <td colspan="2">Note: the higher the risk score the lower the risk</td> </tr> <tr> <th>Risk score achieved</th> <th>Number of provider partners</th> </tr> </thead> <tbody> <tr> <td>100%</td> <td>0</td> </tr> <tr> <td>99% - 75%</td> <td>15</td> </tr> <tr> <td>74% - 61%</td> <td>13</td> </tr> <tr> <td>60% and below</td> <td>2</td> </tr> <tr> <td></td> <td>30</td> </tr> </tbody> </table> | Risk Score Results | | Note: the higher the risk score the lower the risk | | Risk score achieved | Number of provider partners | 100% | 0 | 99% - 75% | 15 | 74% - 61% | 13 | 60% and below | 2 | | 30 |
| Risk Score Results | | | | | | | | | | | | | | | | | |
| Note: the higher the risk score the lower the risk | | | | | | | | | | | | | | | | | |
| Risk score achieved | Number of provider partners | | | | | | | | | | | | | | | | |
| 100% | 0 | | | | | | | | | | | | | | | | |
| 99% - 75% | 15 | | | | | | | | | | | | | | | | |
| 74% - 61% | 13 | | | | | | | | | | | | | | | | |
| 60% and below | 2 | | | | | | | | | | | | | | | | |
| | 30 | | | | | | | | | | | | | | | | |
| <p>Intelligence</p> | <ul style="list-style-type: none"> • 27% of services reported significant challenges affecting service delivery • 50% of services reported minor staffing challenges • 53% reported changes to senior and/or local management • 50% reported changes in organisational structure • 22% of staff leaving services left for a new job out with the Health and Social Care Sector • 63% of services reported concerns regarding sustainability including the capacity to pick up and maintain packages of care <p>Provider partners have expressed ongoing concerns regarding staff capacity and recruitment. The lingering effects of transitioning out of COVID-19 are also contributing factors. CASH Division and Commissioning are working with providers through the CASH Collaborative on tests of change to help alleviate some of these</p> | | | | | | | | | | | | | | | | |

pressures. The table presented in 3.21 presents some further actions being taken.

Despite these challenges, there are many examples of how resourceful and innovative provider partners have been during this period; in particular the increased use of technology enabled care and digital engagement as well as new ways of delivering care and support.

3.20 Issues and Planned Actions

3.21 Any concerning risks identified and requiring action were escalated to the Contracts Manager in the first instance and then to Commissioning Liaison Manager and beyond where required. Some common issues raised by provider partners, the reasons for these and planned action(s) are provided below.

| Issues | Reasons/Planned Action(s) |
|---|---|
| <p>53% of the CASH services have experienced changes to management</p> <p>50% of CASH services have experienced changes in organisational structure</p> <p>27% of CASH services have experienced significant staffing challenges affecting the service</p> <p>22% of staff who leave CASH are leaving for new jobs out with the health and social care sector –</p> <p>33% of CASH services reported that their staff supervisions are not up to date</p> | <p>Reflects wider national situation due to longstanding recruitment and retention issues in Health and social care in conjunction with sector pressures, including ongoing effects of COVID-19.</p> <p>The HSCP developed a partnership workforce plan, working with provider partners to help address these challenges.</p> <p>Provider partners cite recruitment and retention issues leading to staffing shortages and staff sickness absence as key reasons.</p> <p>Care and Support at Home Divisional Manager and team are working with CASH provider partners on tests of change, including looking at staff terms and conditions and this work is ongoing.</p> <p>Some CASH services have commenced international recruitment and although a lengthy process, some job offers have been made.</p> <p>Scottish Care has also provided support, such as 'bounce back better' to support managers in HSC to manage challenges better.</p> |
| <p>43% CASH partners reported that 6 monthly reviews for people who use the service are not completed</p> | <p>While provider partners cite staff vacancies, recruitment issues and transitioning to new systems</p> |

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|--|--|--|--|
| | <p>37% of CASH partners reported that mandatory training for staff is not up to date</p> | <p>of recording along with a backlog of training following lack of face-to-face training during COVID-19, they report that the backlog is reducing. Staffing challenges are affecting ability to keep training up to date.</p> <p>Discussions have taken place at CMG and HSCPLG to identify supports that can be offered by Commissioning Team in conjunction with CASH Division, Mental Health Directorate and operational colleagues. Commissioning will continue to monitor and follow up with provider partners to help ensure this is rectified going forward. The CASH Division will lead on improvement planning with providers with support from Commissioning, MH and operational social work colleagues.</p> <p>Despite challenges, provider partners provided examples of new ways of working or innovations they have introduced to help meet the outcomes for people they provide care and support for, including technology enable care and Digital Care Planning. Some of these examples are provided at the end of this report.</p> | |
| | <p>63% of partners have concerns about sustainability of the service</p> | <p>Individual meetings between Commissioning, operational social work and provider partners are currently taking place to determine challenges faced by provider partners. Commissioning Team to work with CASH Division and the Mental Health Directorate to identify supports.</p> <p>Discussions have taken place at CMG and HSCLG to identify supports that can be offered by Commissioning Team in</p> | |

conjunction with CASH Division and operational colleagues, with CASH Division leading on improvement planning.

The Care and Support at Home Collaborative has been set up as a partnership between HSCP and participating care and support at home provider partners to look at alleviating system pressures. Work has included a test of change aimed at improving efficiency in picking up packages of care, swapping packages and payment on planned. An evaluation report was presented to recent HSCSLG and an overview of findings is attached at Appendix 3.

The MH Directorate has also set up a Complex Care Provider collaborative to look at alleviating system pressures. To date focus has been on reducing delayed discharges from Midpark and changes to the Supported Accommodation Panel in conjunction with the introduction of the National Support Register. The next area of work identified is to look at how care and support is packaged for this group.

3.22 Future Planned Contract Monitoring

3.23 Contract monitoring of care homes and third sector commissioned services for the period 1 April 2022 to 31 March 2023 is currently ongoing. It is expected that these findings will be presented to IJBFPQ committee in April 2024.

4. **Conclusions**

4.1 Results from recent contract monitoring of care and support at home provider partners has helped identify risks and challenges facing partners and the impact this has had on their ability to meet contractual obligations.

4.2 Contract monitoring of care and support at home provider partners has provided information and assurance to the Partnership and identified areas for improvement to inform our Partnership support response.

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|---------------|---|-------------|-------------------------------------|------------|--------------------------------|---------------|---|-------------|---------------------------------|------------|----------------------------------|------------|--------------------------------------|-------------|---|---------------|--|------------|--------------------------------------|
| 4.3 | Findings indicate cause for some concern and a need to support provider partners. Discussions have taken place at CMG and HSCLG to identify supports that can be offered and to agree next steps to support CASH partners. | | | | | | | | | | | | | | | | | | |
| 4.4 | Subsequent to the contract monitoring process, communication with care and support at home provider partners has been ongoing in order to support improvement, share information and provide contractual advice and support. | | | | | | | | | | | | | | | | | | |
| 5. | Resource Implications | | | | | | | | | | | | | | | | | | |
| 5.1 | The work described in this paper is delivered within existing resources. | | | | | | | | | | | | | | | | | | |
| 6. | Impact on Integration Joint Board Outcomes, Priorities and Policy | | | | | | | | | | | | | | | | | | |
| 6.1 | Ensuring that robust procedures are in place for contract monitoring and reporting of commissioned services will provide assurance to the Partnership that services are being delivered against contracts. It will help ensure that people of Dumfries and Galloway have access to appropriate care and support is in line with the Partnership outcomes. | | | | | | | | | | | | | | | | | | |
| 7. | Legal and Risk Implications | | | | | | | | | | | | | | | | | | |
| 7.1 | Contract Monitoring supports the management of risks that may impact on service provider partner's ability to deliver the service to the required quality standards. | | | | | | | | | | | | | | | | | | |
| 8. | Consultation | | | | | | | | | | | | | | | | | | |
| 8.1 | Appendix 2 sets out the details of the consultation and engagement work undertaken in relation to this contract monitoring. The Contract Management Group and HSCPLG have considered this report. | | | | | | | | | | | | | | | | | | |
| 9. | Equality Impact Assessment | | | | | | | | | | | | | | | | | | |
| 9.1 | An Equality Impact Assessment (EQIA) is not required at this time but may be undertaken if required as work progresses. | | | | | | | | | | | | | | | | | | |
| 10. | Glossary | | | | | | | | | | | | | | | | | | |
| | <table border="1"> <tr> <td>EQIA</td> <td>Equalities Impact Assessment</td> </tr> <tr> <td>IJB</td> <td>Integration Joint Board</td> </tr> <tr> <td>IJBFPQ</td> <td>Integration Joint Board Finance, Performance and Quality Committee</td> </tr> <tr> <td>CASH</td> <td>Care and Support at Home</td> </tr> <tr> <td>CMG</td> <td>Contract Management Group</td> </tr> <tr> <td>DGC</td> <td>Dumfries and Galloway Council</td> </tr> <tr> <td>HSCP</td> <td>Health and Social Care Partnership</td> </tr> <tr> <td>HSCPLG</td> <td>Health and Social Care Partnership Leadership Group</td> </tr> <tr> <td>SAQ</td> <td>Self Assessment Questionnaire</td> </tr> </table> | EQIA | Equalities Impact Assessment | IJB | Integration Joint Board | IJBFPQ | Integration Joint Board Finance, Performance and Quality Committee | CASH | Care and Support at Home | CMG | Contract Management Group | DGC | Dumfries and Galloway Council | HSCP | Health and Social Care Partnership | HSCPLG | Health and Social Care Partnership Leadership Group | SAQ | Self Assessment Questionnaire |
| EQIA | Equalities Impact Assessment | | | | | | | | | | | | | | | | | | |
| IJB | Integration Joint Board | | | | | | | | | | | | | | | | | | |
| IJBFPQ | Integration Joint Board Finance, Performance and Quality Committee | | | | | | | | | | | | | | | | | | |
| CASH | Care and Support at Home | | | | | | | | | | | | | | | | | | |
| CMG | Contract Management Group | | | | | | | | | | | | | | | | | | |
| DGC | Dumfries and Galloway Council | | | | | | | | | | | | | | | | | | |
| HSCP | Health and Social Care Partnership | | | | | | | | | | | | | | | | | | |
| HSCPLG | Health and Social Care Partnership Leadership Group | | | | | | | | | | | | | | | | | | |
| SAQ | Self Assessment Questionnaire | | | | | | | | | | | | | | | | | | |