



Integration Joint Board  
Finance, Performance and Quality Committee

8<sup>th</sup> October 2024

This Report relates to  
Item 7 on the Agenda

# Contract Monitoring: Care and Support at Home

*Paper presented by Peggy Taylor*

*For Noting and Discussion*

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

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| <b>1.</b> | <b>Introduction</b>   |
| 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 2023 – 31 March 2024.   |
| <b>2.</b> | <b>Recommendations</b>  |
| 2.1       | <p><b>The IJB Finance, Performance and Quality Committee is asked to:</b></p> <ul style="list-style-type: none"> <li>• <b>Note the outcome of recent contract monitoring of care and support at home commissioned services.</b></li> <li>• <b>Discuss issues raised from recent contract monitoring and suggested actions.</b></li> </ul>   |
| <b>3.</b> | <b>Background and Main Report</b>   |
| 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 £90m per annum which is approximately a quarter of the annual Integration Joint Board (IJB) budget.   |
| 3.3       | The Commissioning Team currently conducts contract monitoring of 29 Care Homes, 28 Care and Support at Home commissioned services and 49 third sector and non-registered commissioned services.   |
| 3.4       | Contracting and contract monitoring are aspects of the commissioning cycle that are concerned with <ul style="list-style-type: none"> <li>• technical aspects of contracts</li> <li>• the monitoring of the quality of what is provided under the terms of those contracts</li> <li>• ensuring that people’s personal outcomes are being achieved</li> </ul>  |
| 3.5       | On behalf of the Health and Social Care Partnership (HSCP) 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: <ul style="list-style-type: none"> <li>• Day Care</li> <li>• Day Centres</li> <li>• Care and Support at Home</li> <li>• Care Homes</li> <li>• Carers Support</li> <li>• Short Breaks</li> <li>• Support services</li> </ul> |
| 3.6       | <u>Care and Support at Home (CASH) Contract Monitoring</u>  |
| 3.7       | ‘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.

- 3.8 Full contract monitoring of CASH provider partners recommenced in May 2023 covering the period 1 April 2022 to 31 March 2023.
- 3.9 Full contract monitoring of CASH provider partners commenced in May 2024, covering the period 1 April 2023 to 31 March 2024. This paper presents the findings of that monitoring exercise.
- 3.10 These findings will also be presented to the HSCP Leadership Group in September 2024 and to the IJBFPQ Committee in October 2024.
- 3.11 A total of 28 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 September 2024.
- 3.12 Appendix 1 provides a sample self-assessment questionnaire for completion by CASH provider partners and includes a list of provider partners.
- 3.13 Appendix 2 provides an overview of contract monitoring processes and the results of the latest CASH Contract Monitoring.
- 3.14 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.
- 3.15 The following table gives a summary of the findings.

|                   |   |
|-------------------|---|
| <b>Compliance</b> | <ul style="list-style-type: none"> <li>• 46% of services have up to date 6 monthly reviews for people who use the service</li> <li>• 79% of services are up to date with mandatory training</li> <li>• 57% of services are up to date with Adult Support and Protection Training (with the remaining services awaiting only new staff to be ASP trained)</li> <li>• 89% of services undertook engagement/satisfaction surveys or gathered feedback</li> <li>• 75% of services are up to date with staff supervisions</li> </ul> <p>Staffing challenges, including recruitment, retention and staff absences as well as management/organisational changes have impacted some provider partners' ability to fulfil some of these contractual obligations.</p> <p>The table in 3.17 below describes some of the actions being taken to address this.</p> |
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**Risk Management**

Risk scores resulting from contract monitoring show that there are 22 services showing no significant risks, 5 providers for whom moderate risks have been identified and 1 is high risk. Risk concerns have been escalated as required and action has been taken or is ongoing. Detail regarding these risks is presented in Appendix 2.

| <b>Risk Score Results</b>                          |                                    |
|--|------------------------------------|
| Note: the higher the risk score the lower the risk |                                    |
| <b>Risk score achieved</b>                         | <b>Number of provider partners</b> |
| 100%   | 0                                  |
| 99% - 75%  | 22                                 |
| 74% - 61%  | 5                                  |
| 60% and below                                      | 1                                  |
|  | <b>28</b>                          |

**Intelligence**

- 32% of services experienced changes to management
- 75% of services experienced minor staffing challenges
- 7% of services experienced significant staffing challenges
- 50% reported changes in organisational structure
- 18% of staff leaving services left for a new job out with the Health and Social Care Sector
- 29% of services reported concerns regarding sustainability including the capacity to pick up and maintain packages of care
- 36% of services recruited staff from overseas

Provider partners have expressed ongoing concerns regarding staff capacity and recruitment. CASH Division and Commissioning are working with providers through the CASH Collaborative to help alleviate some of these pressures. The table presented in 3.17 presents some further actions being taken.

The Care Inspectorate has been inspecting care and support at home services in D&G and the resultant grades have remained fairly high, with grades of 5 or 4 across most categories assessed.

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 as detailed in Appendix 2.

3.16 Issues and Planned Actions

3.17 Some common issues raised by provider partners, the reasons for these and planned action(s) are provided below.

| Issues  | Reasons/Planned Action(s)   |
|---|---|
| <p>32% of the CASH services have experienced changes to management</p> <p>50% of CASH services have experienced changes in organisational structure</p> <p>75% of CASH services experienced minor staff challenges and 7% have experienced significant staffing challenges affecting the service</p> <p>18% of staff who leave CASH are leaving for new jobs out with the health and social care sector</p> <p>25% of CASH services do not have up to date staff supervisions</p> <p>36% of CASH services have recruited staff from overseas</p> <p>43% of CASH services did not use a Digital Care Planning platform</p> | <p>Reflects wider national situation due to longstanding recruitment and retention issues in Health and social care in conjunction with sector pressures.</p> <p>The HSCP developed a partnership workforce plan, working with provider partners to help address these challenges.</p> <p>Provider partners cite staffing shortages, absences and implementation of new systems as key reasons. Some CASH services have commenced international recruitment to help address ongoing social care staffing issues.</p> <p>ETHEL Trial - work with provider partners is underway through the Care at Home Collaborative to test out a digital solution which can reduce feelings of isolation and help to support people to live longer and more independently at home. A year long trial is taking place with the ETHHEL device, which enables remote monitoring and communication between care providers, relatives and people receiving care and support. Early results have shown some positive outcomes and the Partnership will continue with this trial and a full evaluation is planned.</p> <p>Digital Care Planning - work is underway through the Care at Home Collaborative work on digital care planning which now involves 16 provider partners. An evaluation framework is being developed to examine and report on outcomes. This work is being carried out in collaboration with Care Home providers as some common areas where positive outcomes have been identified.</p> <p>Scottish Care delivered roadshows in Dumfries and Stranraer to raise awareness of the benefits of digital technology and held individual follow up sessions.</p> <p>Scottish Care has also provided support to managers in HSC to manage challenges better. This included the 'bounce back better' training programme and further development sessions to support leaders and develop skills are planned. Scottish Care Partners for Integration Team support the Developing the Young Workforce</p> |

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|   | <p>initiative and have worked to raise awareness of social care as a career. As part of this, CASH provider partners joined Scottish Care for a 'Work Ready' day.</p> <p>Scottish Care is setting up locality cluster meetings for care at home service managers to enable targeted support. Issues highlighted from contract monitoring will be shared with Scottish Care to help them design and deliver the necessary support.</p>   |  |
| <p>54% of CASH services have not fully completed 6 monthly reviews for people who use the service</p> <p>21% of CASH services did not meet personal outcomes for people using their service</p> | <p>Provider partners cite staff vacancies, recruitment issues, delays with Social Work reviews and transitioning to new systems of recording.</p> <p>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, Mental Health Directorate 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>29% of partners have concerns about sustainability of the service</p>  | <p>Some provider partners cited sustainability concerns around pricing constraints in relation to ongoing post tender negotiations for the new National Flexible Framework.</p> <p>Post tender negotiations have been ongoing between Scotland Excel, Commissioning and provider partners to try to address. Individual meetings between Commissioning, operational social work and provider partners have also been ongoing to determine challenges faced by provider partners. Commissioning Team to work with CASH Division and the MH Directorate to identify supports.</p> <p>Discussions are ongoing within the Partnership to take to identify supports that can be offered by Commissioning Team in conjunction with CASH Division and operational colleagues, with CASH Division leading on improvement planning.</p> <p>The MH Directorate has also set up a Complex Care Provider collaborative to look at alleviating system pressures. To date focus has been on</p> |  |

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|  | 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. |  |
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3.18 Future Planned Contract Monitoring

3.19 Contract monitoring of care homes and third sector commissioned services for the period 1 April 2023 to 31 March 2024 is currently ongoing. It is expected that those findings will be presented to IJBFPQ committee in January 2025.

**4. Conclusions**

4.1 Results from recent contract monitoring of CASH 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 CASH provider partners has provided information and assurance to the Partnership and identified areas for improvement to inform our Partnership support response.

4.3 Findings indicate that the majority of CASH services (79%) are showing no significant risks. Discussions are ongoing within the Partnership 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 CASH 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 Directorate Leadership Team will consider this report prior to further consideration by Contract Management

Group and HSCPLG.

**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**

|               |   |
|---------------|---|
| <b>EQIA</b>   | <b>Equalities Impact Assessment</b>                                       |
| <b>IJB</b>    | <b>Integration Joint Board</b>  |
| <b>IJBFPQ</b> | <b>Integration Joint Board Finance, Performance and Quality Committee</b> |
| <b>CASH</b>   | <b>Care and Support at Home</b>   |
| <b>CMG</b>    | <b>Contract Management Group</b>  |
| <b>DGC</b>    | <b>Dumfries and Galloway Council</b>                                      |
| <b>DCP</b>    | <b>Digital Care Planning</b>  |
| <b>HSCP</b>   | <b>Health and Social Care Partnership</b>                                 |
| <b>HSCPLG</b> | <b>Health and Social Care Partnership Leadership Group</b>                |
| <b>SAQ</b>    | <b>Self Assessment Questionnaire</b>                                      |