ARGYLL & BUTE COUNCIL

CUSTOMER SERVICES

BUTE AND COWAL AREA COMMITTEE 1st April 2014

CARE AT HOME PROVISION

1. SUMMARY

The purpose of this report is to update the Area Committee on the findings of the 3nd quarterly evaluation of the Care at Home provision within the Bute and Cowal area.

This report has been broken down to show the progress and joint working that has been put into place to ensure that a high quality service is provided, as it is recognised that this service is provided to vulnerable individuals, predominately by lone workers, in the home environment.

2. RECOMMENDATIONS

The remit of the Procurement and Commissioning Team together with the Homecare Procurement Officers is to ensure best value, contract compliance, quality of services and customer satisfaction. This will support Community Services to commission quality Care at Home services via the formal procurement and commissioning procedures.

3. DETAIL

OUTCOME OF TENDER

Within the Bute and Cowal locality, almost 70% of the service has historically been provided by the independent sector. The three providers successful in the framework in Cowal are Care UK, Allied and Carr Gomm. A separate framework contract was awarded on Bute and the providers are Allied, Carr Gomm and Carewatch. 3.5 FTE Homecare Procurement Officers are now in post to ensure the robust review/monitoring of the services to ensure a high quality is maintained.

A condition of the tendering exercise was that all services within the framework would have an electronic call monitoring system to log visits to service users which would minimise missed/late visits and allow the Council to monitor continuity of care. These are now all in place, and operational. This will enhance the service monitoring visits carried out

by the Homecare Procurement Officers due to the reports provided by these systems

CARE AT HOME PROVISION

As at 31st December 2013 an approximate total of 1867 hours are being provided to 235 older people within the Cowal area by external providers. A breakdown of the provision is detailed in the table below:

COWAL

Providers on Framework from tender exercise		Weekly hou	urs commissioned
		Hours at 30 th Sept	Hours at 31 st Dec
1 st preferred provider	Care UK	553	617
2 nd preferred provider	Allied	384	439
3 rd preferred provider	Carr Gomm	73	86

Existing Providers		Weekly Hours Commissioned	
		Hours at 30 th sept	Hours at 31st Dec
Mears Care		382	380
Cowal Carers		273	345
	Total Hours	655	725
Direct Payments		110	110
	Total Hours	765	835

As at 31st December 2013 an approximate total of 2321 hours are being provided to 164 Older People within the Bute area by external providers. A breakdown of the provision is detailed in the table below:

BUTE

Providers on Framework from tender exercise		Weekly commis	/ hours ssioned
		Hours at 30 th Sept	Hours at 31 st Dec
1 st preferred provider	Allied	1289	1387
2 nd preferred provider	Carr Gomm	49	77
3 rd preferred provider	Carewatch	82	82

Existing Providers		Weekly Hours Commissioned	
		Hours at 30 th Hours at 31 st	
		Sept	Dec
Care Plus		884	775
	Total Hours	884	775
Direct Payment		14	14
	Total Hours	898	789

Staff recruitment is an on-going issue in Cowal. This issue is not new to this locality, due to the rural areas involved, however it means the Council continues to purchase services off contract to meet demand. Recruitment is an on-going problem we are facing across the Council area and the Procurement and Commissioning Team, Adult Services and the Independent Providers are working in partnership to identify alternative ways to attract people into the sector.

CONTRACT MANAGEMENT PROCESS

Argyll and Bute Council's Procurement and Commissioning team are responsible for the Contract and Supplier management of these services. This is complimented by the service monitoring and review process carried out by Homecare Procurement Officers and Case Managers. The Procurement and Commissioning Team carry out quarterly contract management meetings that determine the risk rating of each contract. All contracts are risk rated using a combination of Care Inspectorate grades, service concerns and complaints. Additional monitoring is undertaken as required where risk levels increase. There is currently one provider who has enhanced monitoring activity to support performance improvement. In addition, fortnightly contract management meetings are being carried out to assist the provider to focus on their service improvement plan.

A breakdown of the Care Inspectorate grades are detailed in the table below.

Provider	Care Inspection Grades		
	Quality of Care	Quality of	Quality of
	and Support	Staffing	Management
			and
			Leadership
Allied	6	6	5
Careplus	6	5	6
Care UK	5	5	4
Carr Gomm	6	5	6
Cowal Carers	5	5	5
Mears-	3	3	3
Oban/Cowal			

*6– Excellent 3- Adequate 5 – Very Good 2 – Weak 4 – Good 1 - Poor

MONITORING ARRANGEMENTS

An ongoing training schedule has been implemented to the Homecare Procurement Officers and a robust monitoring programme has been put in place with both the Procurement and Commissioning Monitoring Officer and Homecare Procurement Officers having close contact with the external providers and service users.

A detailed list of contact with service users and providers for the quarter is detailed below:

Contact	Total carried out Between 01/10/2013 & 31/12/2013	Council Officer involved
Review of care needs with service users, family and provider	140	Homecare Procurement Officer and/or Care Manager
Quarterly Contract and Supplier Meetings with Providers in line with the Scottish Government Guidance on the Commissioning of Care and Support Services	4	Procurement and Commissioning Team / Social Work
Provider Forums - Reshaping care for Older People meetings.	6	Procurement and Commissioning Team/Social Work/NHS

SERVICE MONITORING VISITS

Training has been provided to all Homecare Procurement Officers on individual service monitoring. A schedule of monitoring visits has been agreed and a process to report the outcome of these visits to the Procurement and Commissioning Team has been developed. This information will feed into the quarterly contract and supplier monitoring meetings. Over the course of these meetings individual risk ratings are adjusted as required. The monitoring activity and results for the quarter are detailed below:

Cowal

<u>Provider</u>	Number of Spot Checks/Monitori ng Visits	Satisfied/ Unsatisfied	Service User Comments
Provider A	2announced 3unannounced	5 Satisfied	Happy with service, no improvements. Times on care plans sometimes differ to logs.
Provider B	6 unannounced	4 Satisfied 2 unsatisfied	Delay in shower installation
			Times on care plans differ, logs not detailed – do not state meal times/ medication
Provider C	2 unannounced	2 Satisfied	Happy with service, care plan could be more up to date.
Provider D	4 unannounced	2 Satisfied 2 Unsatisfied	Happy with service, no improvements
			Arrival/departure times differ
			No continuity of times

Bute

<u>Provider</u>	Number of Spot Checks/Monitori ng Visits	Satisfied/ Unsatisfied	Service User Comments
Provider A	3 announced	3 Satisfied	Happy with service, no improvements.
			Health has improved
			since increased care
			plans
Provider B	9 announced	9 Satisfied	Happy with service, no improvements
Provider C	22 announced	22 Satisfied	Happy with service, no
			concerns
			Health has improved
			since increased care
			plans.

As you can see there has been extensive work carried out this quarter to support the providers and service users. The feedback from the service users and families who have received service monitoring visits has been positive, with 92% of the people spoken to, very happy with the services they are receiving.

SERVICE CONCERNS

There is a clear service concern process in place and from 1st October – 31st December, there has been 6 service concerns received. All service concerns are investigated fully and the Homecare Procurement Officers work closely with the providers to improve any issues raised.

Cowal

<u>Provider</u>	Number of Concerns	Details of Concern	Upheld and appropriate action taken
Provider A	2	Concerns re personal hygiene and communication with new carers. 1 concern is an ongoing investigation.	1 upheld 1 ongoing investigation
Provider B	1	Concerns re late/missed visits. No ID badges for carers	Not upheld
Provider C	2	Concerns re missed and late/early visits. Concerns for health and safety of client	2 upheld

Bute

<u>Provider</u>	Number of Concerns	Details of Concern	Upheld and appropriate action taken
Provider A	1	Concern re care tasks/lack of knowledge	Upheld

For information – The above concerns (6) are the total received in this quarter. The total weekly service currently being delivered by the providers concerned is 4,188 hours per week.

COMPLAINTS

No complaints have been received this quarter

RECRUITMENT/RETENTION

There have been ongoing problems with attracting and retaining staff with the required skills, knowledge and experience within the care at home sector. This is true for both in-house and external providers

4. CONCLUSION

From the evidence gathered, including service users and families input, services are being provided according to the terms and spirit of the contract.

Due to the fluctuations within human services, in terms of demand for services and providers capacity to respond, service concern issues are inevitable. All issues identified within this quarter have been addressed, with the intensive support of the Procurement and Commissioning Team together with the Homecare Procurement Officers to maintain continuous improvement. On-going evaluation and monitoring will ensure good practice and customer satisfaction.

Concern still remains with regards to shortages of staff, resulting in providers being unable to take on packages at short notice. The private providers are actively looking at innovative ways of attracting staff especially within the rural areas. This is a nationally recognised problem across all aspects of the care sector.

5 **IMPLICATIONS**

5.1	Policy	Consistent with Best Value and National Policy on Re-Shaping Older People's Services
5.2	Financial	None
5.3	Personnel	None
5.4	Equalities Impact Assessment	None.
5.5	Legal	None

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