

## ITEM 3C

Quality Monitoring Summary Quarters 1 and 2 2017/18	Lead team
<p>In April 2017 the ADASS workbook was replaced by the Providers Assessment Market Management Solution (PAMMS application), an online tool which manages the monitoring process. PAMMS has three sections:</p> <ol style="list-style-type: none"> <li>1. The assessor application - this is where the assessments are completed by the monitoring officer</li> <li>2. The assessment portal - This is where completed assessments are stored and can be viewed by the provider</li> <li>3. The reporting tool - this includes the performance dashboards, including providers' performance across the region.</li> </ol> <p>PAMMS was designed to be more user friendly for providers and commissioners, and allows the collation and analysis of the data collected about providers to be used by commissioners across the region to monitor and assess performance and benchmark performance. The aim is to achieve better outcomes for service users and raise quality across all areas of service delivery. The system includes an interactive action planning process, known as smart tool, which is completed by providers following the monitoring visit, to highlight the areas that require improvement. The proposed actions are validated, monitored and approved by the relevant monitoring team until all actions are complete and improved performance can be sustained.</p> <p>PAMMS also helps identify where Hertfordshire County Council and partners can provide additional support to providers through direct interventions such as workforce development, medicines management and specific training such as Mental Capacity Act (MCA) and Deprivation of Liberty (DoLs) workshops.</p> <p>To support the roll out of the new PAMMS system, training sessions were held between January and March 2017, for all providers and staff involved in the monitoring of services. These sessions have continued throughout the implementation phase of the new system. Over 150 providers have attended training sessions to date and sessions continue to be offered to providers. Training was also extended to CCG colleagues, operational teams, and CQC inspectors.</p> <p>In addition, the multi-agency monitoring protocol has been revised to reflect the new PAMMS application requirements.</p> <p><b>Assessing risk and managing the monitoring timetable for 2017/18</b></p> <p>An annual monitoring schedule is developed by each team based on the East of England risk assessment tool. Providers are prioritised on a risk basis, and those with the highest risk rated score receive monitoring visits in Quarters 1 and 2. This means that each year Qs 1 and 2 have a much higher number of providers being rated as Requires Improvement.</p> <p>The data presented for quarters 1 and 2 shows a lower percentage of providers scoring "Good" due to:</p> <ol style="list-style-type: none"> <li>a) The higher risk nature of the providers monitored in Q1 and Q2,</li> <li>b) A reduced number of providers monitored this year as compared to the previous year in Quarters 1 and 2 due to the implementation of the new system</li> <li>c) The PAMMS system reporting the provider's substantive scores differently to the previous system.</li> <li>d) Assessments with PAMMS system enabling a more detailed report compared to the previous system</li> </ol> <p>It should be noted that the initial roll out of the new PAMMS system has resulted in a lower number of providers</p>	<p>Integrated Accommodation Commissioning Team</p>

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being monitored overall. An evaluation of the challenges both providers and commissioners have experienced with the initial implementation phase has been carried out and a number of changes to internal processes have been made to improve the process in time for Quarter 3 reporting. This is being done in partnership with regional colleagues.	
<b>Day Services- Older People-</b> ACS commissions 16 Day Services for Older People across Hertfordshire that are delivered by 3 external providers - Quantum, Runwood and Age UK. These services are low risk as they do not involve one to one care or lone working, and historically have low levels of concerns and safeguarding incidents. Therefore monitoring of these services has not been prioritised during Q1 and Q2 of 2017/18 to enable more monitoring resource to be committed to homecare.	Integrated Community Support Commissioning Team
<b>Day Services – Older People – Previous scores for 2016/17 Using the east of England Workbook</b> <b>Excellent – 13</b> <b>Good – 2</b> <b>Required Improvement – 1</b> <b>Poor – 0</b>	
<b>LD Day Opportunities (DO) – Q2</b>  There are 56 Day Opportunity services for people with Learning Disabilities across Hertfordshire and due to a low number of Safeguarding incidents and the type of service being provided they are not prioritised for monitoring unless a specific incident or reason is highlighted. Monitoring resource for LD services is limited and is therefore generally focused on Supported Living services.  2 day services were assessed during Q2 (compared to 2 in Q1). One service was of concern regarding management practise following a whistleblowing incident, the second service was visited due to a possible change/reduction in contract. The first service has achieved a “Good’ rating and evidenced sustained improvement regarding management practise, the second service achieved an ‘Excellent’ rating.	Community Wellbeing Team
<b>Scores on EoE workbook in Q2</b> <b>Excellent – 1</b> <b>Good – 1</b> <b>Required Improvement - 0</b> <b>Poor – 0</b>	
<b>Older People’s (OP) Accommodation – Q2</b>  20 OP accommodation providers were monitored and the final reports published in Q2 (compared to 11 published in Q1) from a total of 144 services. However 57 services in total were visited to conduct a contract monitoring visit during Q1 & Q2. 26 reports are in process of being finalised. Most of the contracts monitoring visits were conducted in at least two working days. In addition to these visits 92 drop in visits were carried out to 48 different services. They were mostly related to providing support to managers in care homes to use the PAMMS application and/or to assess issues coming through care concerns and partnership intelligence. This	Integrated Accommodation Commissioning Team

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<p>proactive approach has consistently maintained a lower number of providers failing and entering the serious concerns process.</p> <p>In Q2 60% of providers were rated as either Good or Excellent, which increased from Q1 (27%), but lower than the 82% achieved in the same quarter last year. This is due to the higher number of higher risk rated services monitored in Quarter 2.</p> <p>For Quarter 2, 2 providers received an overall excellent rating, 10 received good and, 8 providers require improvement.</p> <p>The most common standards where providers were under performing were management of medicines, requirements relating to staff recruitment and staff and service users records.</p> <p>All providers that were rated as “requires Improvement” in Quarter 1 have received follow up monitoring visits in Quarter 2 to ensure improvement targets within action plans are all being met.</p>	
<p><b>Score Older People’s Accommodation</b>  <b>Excellent = 2 providers</b>  <b>Good = 10 providers</b>  <b>Required Improvement = 8 providers</b>  <b>Poor = 0 provider</b></p>	
<p><b>Learning Disability Accommodation – Q2</b></p> <p>8 LD providers were monitored and the final reports published in Q2 (compared to 4 published in Q1) from a total of 105. 30 services in Q2 were visited either through a full contract monitoring visit or drop in visit during Q2. The 19 drop in visits was mainly responding to intelligence collected by the commissioning team and/or Adults with Disability Team, in order to assess and prevent provider failure.</p> <p>87% of LD services monitored in Q2 were rated at least good (2 excellent, 5 good and 1 requires improvement)</p> <p>Some of the areas identified as requiring improvement are management of medicines and safety and suitability of premises.</p> <p>Action plans are developed with all providers scoring below Good in any area of the assessment (even if the overall rating is good). Using the smart tool in PAMMS, providers set out key milestones, targets and timescales by which improvements need to be made. Actions are closely monitored by the commissioning team.</p> <p>Monitoring officers have also provided additional training and support for providers to help improve the implementation of the PAMMS system</p>	<p>Accommodation Commissioning Team</p>
<p><b>Score Learning Disability Accommodation</b>  <b>Excellent = 2 providers</b>  <b>Good = 5 providers</b>  <b>Required Improvement = 1 provider</b>  <b>Poor = 0 providers</b></p>	
<p><b>Learning Disability Supported Living – Q2</b></p>	

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<p>There are 62 external Supported Living Providers (172 services) across Hertfordshire and 15 of them have been monitored in Quarter 2 (compared to 20 in Q1). Due to a low level of monitoring resource the LD team constantly review which specific services to prioritise and more than two thirds of those rated as Red (high) and Amber (medium) have already been visited this year with the rest booked in the next few months. The team also respond to concerns raised by Operational colleagues, in house services have not been prioritised.</p> <p>Following assessment in Q2 8 providers achieved a 'good' rating and 7 are in the process of completion of their action plans to address the 'Required Improvement' aspects of their assessment. Themes emerging from the 'Required Improvement' reports include Involvement and information, Personalised care and support, Safeguarding and safety, Suitability of staffing, Quality of management.</p>	Community Wellbeing Team
<p><b>Score Supported Living (in house and external house)</b>  <b>Excellent – 0 provider</b>  <b>Good – 8 providers</b>  <b>Required Improvement - 7 provider</b>  <b>Poor - 0 provider</b></p>	
<p><b>Support at Home Quarter 2 activity:</b></p> <p>There are 36 Support at Home providers requiring a PAMMS monitoring visit during 2017/18. 9 PAMMS reports were published during Quarter 2. 3 had previously been published during Quarter 1 (all rated Good).</p> <p>Of the reports published in Quarter 2, 5 were rated Good, 3 Requires Improvement and 1 Poor.</p> <p>The provider rated as Poor is a spot provider currently supporting 66 Service Users in North Herts and Stevenage, Watford and Three Rivers. Concerns were noted regarding the quality of care planning, late and missed visits and medication administration. Care worker interviews raised concerns about the support provided by management to staff. Service User feedback however was primarily positive. The provider is currently suspended whilst the Monitoring Officer supports them with their improvement action plan. New management is in post and improvements have been noted, and it is expected the suspension will be lifted early in Quarter 3.</p> <p>Two of the providers rated Requires Improvement are working through action plans with their Monitoring Officer to achieve the necessary improvements. These providers are not considered high risk – concerns related to office processes around recording and auditing rather than practice. The providers are working with the Monitoring Officers and are committed to improvements. Care worker and Service User feedback was positive in both cases.</p> <p>One of the providers rated Requires Improvement is considered high risk and is currently receiving increased support and additional monitoring. The provider is a spot provider currently supporting 66 Service Users in East Herts, Broxbourne and Hertsmere. High risk concerns relate to the financial status of the provider. ICS are providing intensive support to this provider.</p>	Integrated Community Support Commissioning (ICS)Team
<p><b>Score Homecare</b>  <b>Excellent – 0 provider</b>  <b>Good – 5 providers</b>  <b>Required Improvement = 3 providers</b>  <b>Poor = 1 provider</b></p>	