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**Attachment A – Hounslow Safeguarding Adults Board – Proposed  
amendments to the Hounslow Provider Concerns Policy and Procedure**

# **Hounslow Safeguarding Adults Board**

## **Provider Concerns Policy and Procedure**

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## Introduction

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This policy sets out how the London Borough of Hounslow will address concerns about how providers support residents within the borough (1). The borough will work closely with Hounslow Clinical Commissioning Group (CCG). This collaboration will endeavour to:

- Strike an appropriate balance between referring cases for safeguarding investigation and an understanding of what other remedies there are available that could tackle and resolve the issue. This document outlines how contracting, commissioning and adult safeguarding processes will work together.
- Ensure providers are required to meet essential/fundamental standards of care and people using services are safeguarded additionally through monitoring by providers and commissioners, regulation and inspection. Residents' welfare should also be secured by good commissioning, contracts management and, for some, by care management or other forms of review.
- Ensure there is effective information sharing between staff responsible for monitoring the performance of care providers and those responsible for investigating safeguarding incidents. This is needed to ensure that coordinated and proportionate action is taken to tackle poor care and that the threshold into safeguarding investigation is kept under regular review.

The Care Quality Commission (2) is a key partner in delivering this function. Representatives for the Metropolitan Police, other local authorities and other agencies will be asked to contribute where necessary. This policy should be read in conjunction with:

- Care Act 2014;
- London Multi Agency Adult Safeguarding Policy & Procedures; (3)
- Care and support statutory guidance; (4)
- Hounslow Safeguarding Adults Board, Safeguarding Adults Review Policy;

This policy will also be used to enable (5) the local authority to support providers in financial difficulty. *It must for so long as it considers necessary (and in so far as it is not already required to do so) meet those of an adult's needs for care and support and those of a carer's needs for support which were, immediately before the*

<sup>1</sup> Safeguarding adults, Roles and responsibilities in health and care services, ADASS, ACPO, LGA, CQC, NHS England 2014

<sup>2</sup> A protocol between the CQC and councils with social services responsibilities. CQC and ADASS January 2011.

<sup>3</sup> [http://www.hounslow.gov.uk/london\\_ma\\_adult\\_safeguarding\\_policy\\_sep16.pdf](http://www.hounslow.gov.uk/london_ma_adult_safeguarding_policy_sep16.pdf)

<sup>4</sup> <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

<sup>5</sup> Care Act 2014 section 48(2)

*registered care provider became unable to carry on the regulated activity, being met by the carrying on of that activity in the authority's area by the provider.* In the context of this document a provider concern investigation would be indicated when there has been an allegation of widespread or systemic abuse or a number of adults at risk have been allegedly abused, or patterns or trends are emerging from data that suggest serious concerns about poor quality of care (6). Failures to meet contract standards that do not result in harm to people using services will be addressed through routine contract management activity. The borough has a responsibility to develop the local market. Contract issues will be reported to the Provider Monitoring Meeting.

### **Definition of a Provider**

A Provider for the purposes of this policy is any health or care provider who delivers support and care to an individual or group of individuals. This would include, but is not exclusive to, the following:

- Domiciliary Care Providers
- Residential Care Homes
- Nursing Homes
- Supported Living
- Private hospitals
- NHS hospitals including mental health provision
- Day Care/Opportunities Providers
- Rehabilitation Units for people who misuse drugs or alcohol

### **Who does this policy apply to?**

This policy and procedure applies equally to all Hounslow residents who receive a service from a provider operating within the borough, irrespective of how the care is funded.

### **Definition of the contracting and safeguarding functions**

The **Continuing Healthcare and Supplier Performance Team** is responsible for managing the relationship with providers from whom the borough purchases services. This includes contracts, addressing services concerns and managing financial performance. Adult safeguarding is defined in the Care Act 2014.

The local authority has a duty to identify *adults in its area with needs for care and support which are being met by the authority or otherwise* (7). It also has a duty to make, or cause to be made, enquiries where it has *reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there):*

- *has needs for care and support (whether or not the authority is meeting any of those needs)*
- *is experiencing, or is at risk of, abuse or neglect, and*
- *as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.* (8)

Information sharing is the key to providing an effective response where there are emerging concerns (9). It is expected that providers will exercise candor in response to any enquiries made (10.)

The Association of Directors of Adult Social Services has agreed how local authorities will work together when a concern relating to a person placed in Hounslow by another local authority is identified. Details can be found here. Adult safeguarding enquiries should not be used as a means of addressing contractual issues.

### **What providers can expect**

While every effort will be made to respect the commercial and operational integrity of provider services, this policy is designed to protect the interests of residents using care services (11). Every effort should be made to conclude any investigation promptly, in a way that is consistent with that objective. An enquiry will be conducted in an open and transparent manner. Allegations and concerns will be put to the provider so that they have an opportunity to respond (12.)

In exceptional circumstances partner agencies (these might include the police and the Care Quality Commission) may ask that disclosures to a provider be delayed. The Head of Safeguarding (Adults) and Quality Assurance may seek legal advice when determining if these requests should be respected.

The following issues will be addressed during any action taken in relation to a Provider (13)

- Protecting continuity of care;
- Assessment and choice;
- Communications, including contingency plans to address media enquiries;

<sup>7</sup> Care Act 2014 section 2(2)(b)

<sup>8</sup> Care Act 2014 section 42

<sup>9</sup> Care and Support Statutory Guidance Issued under the Care Act 2014 Department of Health, Oct. 2014 Paragraph .34

<sup>10</sup> <http://www.cqc.org.uk/content/fit-and-proper-persons-requirement-and-duty-candour-nhs-bodies>

<sup>11</sup> <http://www.rotlaw.com/legal-library/what-is-restraint-of-trade/>

<sup>12</sup> Mary Davis (2) Philip Davis v West Sussex County Council (22 August 2012)

<sup>13</sup> Short-notice care home closures: a guide for local authority commissioners, <http://www.scie.org.uk/publications/homeclosures/>

- Information sharing;
- Legal issues; and,
- Capacity and resources.

### **Accountability**

The local authority officers identified in the procedure described below will be accountable within normal line management arrangements. The Continuing Healthcare and Supplier Performance Team will submit summary reports to the second, confidential, part of the Hounslow Safeguarding Adults Partnership Board. The report will include summary of current activity in relation to:

- Residential and Nursing Care providers;
- Domiciliary Care Providers; and,
- Unregulated Services.

The Safeguarding Adults Team will provide a summary of adult safeguarding activity.

### **Procedure**

This procedure will be in four parts:

1. The coordinating meeting - **Provider Monitoring Meeting**
2. Raising Quality Alerts
3. Collaboration between colleagues in the **Continuing Healthcare and Supplier Performance Team** and **Safeguarding Adults Managers**
4. Investigation of serious identified concerns - **The Hounslow Provider Concern Investigation** and may also be used to coordinate large scale adult safeguarding investigations

### **Roles**

**Director, Joint Commissioning** – The post holder is responsible for:

- oversight of operation of the procedure on behalf of the London Borough of Hounslow and Hounslow Clinical Commissioning Group;
- Approving recommendations to suspend contracting with a local provider;
- Approving the termination of Hounslow Provider Concern Investigations.

**Head of Service Safeguarding (adults), Quality Assurance, Prevention and Care Management** – The post holder is responsible for:

Ensuring the co-ordination between the Safeguarding adults process and the provider concerns process, including raising concerns about the performance of providers, where intelligence has been obtained from the Safeguarding process.

**Joint Head of Continuing Healthcare and Supplier Performance** – The post holder is

- Chairing the Provider Monitoring meetings or arranging for an appropriate alternative chair
- All communication with the provider(s) and their parent company
- Developing action plans with provider(s)
- Communication with commissioners outside the London Borough of Hounslow
- Partnership working with the Care quality Commission
- To inform the Hounslow Safeguarding Adults Board of providers in the provider
- Concerns process
- To keep the Provider concerns Policy and procedure under review

**1. Provider monitoring Meeting**

**Purpose of meeting**

- To identify patterns of concern within local providers
- To coordinate contracting/commissioning action plans across health and social care
- To monitor the management of provider failure
- To ensure effective partnership working
- To liaise with the Care quality Commission

**Frequency of meetings** – Monthly

**Membership**

**Chair** – Joint Head of Continuing Healthcare and Supplier Performance

**Administrative support and coordination of meetings** – Supplier Performance

- Consultant Practitioner, Safeguarding Adults Service, Hounslow Council
- Team Manager, Residential and Domiciliary Care, Continuing Healthcare and Supplier Performance Team, Hounslow Council
- Team Manager, Unregulated Services
- Adult Safeguarding Lead, Hounslow Clinical Commissioning Group
- Team Managers, Adult Social Care and Community learning Disability Team
- Care Quality Commission, Inspection Manager

Members of the Provider Monitoring meeting may delegate attendance to members of their teams.

### **Method of working**

To maintain a spreadsheet (Appendix 1) of all the information received over a year for all local providers, irrespective of whether LBH or CCG purchases services from the provider.

A version controlled version of the spreadsheet will be held in a shared file on the borough's electronic document storage system.

The safeguarding Adults Team will provide a summary of adult safeguarding activity.

## **2. Raising Quality Alerts**

All health and social care practitioners are encouraged to report concerns which do not amount to an adult safeguarding concern so that either isolated or patterns of contractual issues can be addressed. The Quality Alert form and contact details for the Continuing Healthcare and Supplier Performance Team are shown in Appendix 2.

## **3. Collaboration between colleagues in the Contracts team and Safeguarding Adults Managers**

There may be single events or a series of minor quality issues identified during a safeguarding enquiry. A quality alert should always be raised so that Provider Monitoring meeting can identify issues or patterns spanning several sources of information.

The Safeguarding Adults Manager may invite a contracts officer to join safeguarding meetings to facilitate communication with the provider. This includes ensuring that providers respond to specific enquiries, provide actions plans and monitor compliance with agreed actions.

The Safeguarding Adults Manager may conclude an enquiry by delegating a review of actions to colleagues in the Contracts team Adult safeguarding enquiries should not be used as a contract enforcement tool.

#### **4. The Hounslow Provider Concern investigation**

##### **Purpose of meeting**

To coordinate adult safeguarding, contract management and investigations by other agencies that meet the following criteria:

*In the context of this document a provider concern investigation would be indicated when there has been an allegation of widespread or systemic abuse or a number of adults at risk have been allegedly abused, or patterns or trends are emerging from data that suggest serious concerns about poor quality of care.*

**Frequency of meetings** – This will be determined according to circumstances of the individual investigation.

**Membership** – This will be determined according to circumstances of the individual investigation.

- **Chair** – the **Director of Joint Commissioning** will determine who is best placed to chair. This will typically be the **Head of Joint Head of Continuing Healthcare and Supplier Performance**.
- **Administrative support and coordination of meetings** – Supplier Performance Team;
- **The provider, unless there is a clearly documented reason for not involving them in part or all of the meeting.**
- Continuing Healthcare and Supplier Performance team to be determined by
- **Head of Joint Head of Continuing Healthcare and Supplier Performance**
- Adult Safeguarding representation to be determined by **Head of Safeguarding (adults) and Quality Assurance**
- CCG Commissioning lead or delegated officer
- CCG – adult safeguarding lead or delegated officer
- CQC Inspection manager or delegated inspector
- Any other agency which the chair determines it is appropriate to invite. This might include the Police



## **Method of working**

Completion of the risk assessment shown in Appendix 3 before the first meeting by service making a referral. Appendix 3, once approved by the **Director of Joint Commissioning** can be used to trigger an immediate suspension of contracting.

An updated and version controlled copy of Appendix 3 should be completed at each meeting

☐ An action plan based on the following principles will be shown in the minutes of the meeting:

- Protecting continuity of care
- Assessment and choice
- Communications, including

☐ With the people using services and their families

☐ People who fund their own care

☐ Staff within local agencies

☐ Other placing agencies

☐ Contingency plans to address media enquiries:

- Information sharing
- Legal issues
- Capacity and resources

The development of an action plan in collaboration with the provider to be led by the contract management team. This will normally be completed outside the meeting and be reported during the following meeting. In all cases the intention should be to work with a provider while they continue to offer a service.

The meeting may conclude that a suspension of contracting is necessary if the risk to the people using the service is such that it is not confident that a safe appropriate service can be maintained. The meeting may also conclude that a lack of progress in addressing the identified risk(s) and/or a lack of engagement from the provider requires a suspension of contracting.

A suspension is likely to have an impact on the commercial viability of the provider. This can be partially mitigated by asking the provider to voluntarily suspend contracting. This option should always be considered before a suspension imposed by the borough is sought.

A recommendation to suspend (Appendix 4) should be made to Director of Joint Commissioning and copied to the Director of Adult Social Services and the Chief Operating Officer of HCCG. A Provider Improvement Plan (Appendix 4) will be developed in collaboration with the Senior Contracts Manager, Supplier Performance Team in order to bring the suspension of contracting to an end as soon as possible.

## **Appendix 1 – intelligence spreadsheet**

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The London Association of Directors of Adults Social Services will be notified whenever a suspension of contracting is imposed by the borough. This notification will be made by the Supplier Performance Team.

### **Termination of a Provider Concerns Process or suspension of contracting**

A recommendation to conclude a provider concerns process or suspension of contracting (Appendix 4) should be made to Director of Joint Commissioning and copied to the Director of Adult Social Services and the Chief Operating Officer of HCCG.

The following data items are collected for providers in each of the three categories:

#### **Personal Care – home care/ domiciliary care**

1. Provider Name
2. Care Quality Commission score
3. Provider Concerns
4. Quality alerts
5. Safeguarding

#### **Registered providers for residential / nursing care**

1. Provider Name
2. CQC score
3. Quality alert
4. Provider Concerns
5. Safeguarding
6. Client group

**Unregulated Services** (providers of care or support that does not require a registration with the Care Quality Commission)

1. Name
2. Service description
3. Client group
4. Quality alert?
5. Safeguarding

## Appendix 2 – Quality Alert Form

### Quality Alert Form

Service user name	
LAS number	
Address/ placement	

### Type of Service

Domiciliary	
Residential	
Nursing	
Supported living	
Other, please specify	

Provider name	
Source of information	
Direct observation	
Information from third party	
Contact details of third party	
Quality alert notification date	

Please say what you are concerned about  
(If this is a Safeguarding please raise through the safeguarding process)

<b>Have you contacted the provider?</b>	<b>Yes</b>		<b>No</b>	
<b>Have you resolved the problem?</b>	<b>Yes</b>		<b>No</b>	
<p>WHAT ACTION HAS BEEN TAKEN BY THE PRACTITIONER AND THE PROVIDER?</p>				

Name of professional completing this form	
Job Title	
Phone Number	
Email	
Line Manager's contact details	
Date	

### Supply Chain Performance Action

	<b>Yes</b>	<b>No</b>	<b>Date</b>
<b>Entered on database</b>			

<b>Contact with Provider</b>			
<b>Monitoring Visit required</b>			

<b>Details of contact with Provider and agreed action</b>	
<b>Outcome for the service user</b>	
<b>Responsible Officer in Supply Performance Team</b>	
<b>Date</b>	

Please send completed form to [contract.returns@hounslow.gov.uk](mailto:contract.returns@hounslow.gov.uk)

### Appendix 3 – Action Plan [provider x]

Date identified:

Date closed:

Date last updated:

Identified issue (s):



### Chronology – record of related events

Date	Time	Source of information	Event/ issue

## Identify risks and quality issues

Risk number	Description
1	
2	
3	
4	
5	

### Mitigating factors

Risk	Description
1	
2	
3	
4	
5	

### Risk Management Plan

Risk	Action	By whom	When?	Intended outcome

**Appendix 4 - Request to suspend contracting/reinstate contracting [delete as appropriate]**

<b>Provider Concerns Form</b>
<b><u>Author Preparing Report</u></b>  Name:  Service Division:  Contact: (email/phone)  Date:
<b><u>Supplier</u></b>  Name of Supplier:  Title of Contract:  Scheme name or care home name (if applicable):
<b><u>Services Provided</u></b>  Specify service type:  Number of service users:  Hours of care provided:  Risk to other service users:  Value of contract (if known):
<b><u>Background</u></b>
<b><u>Risks identified</u></b>



Please state other services (including contract title) provided by the supplier in Borough (if applicable):
<p>Is a suspension on new placements requested?</p> <p>What is the duration of suspension requested?</p> <p>Is a transfer of existing placements being requested?</p>
<b>Timetable of events prior to completion of this form:</b>
<b>Please provide details of meetings held with the Provider, including a discussion on request for suspension</b>

<b>Please provide details of how the Provider Concerns policy has been followed</b>
<b>Please list supplementary documents that have been provided to the Director with this request</b>
<b>Recommendations:</b>
.

Signature \_\_\_\_\_

Director, Joint Commissioning

Date of approval

## Appendix 5 – Improvement plan to be completed by the provider

	Issue/ concern	Action required	Target time	Lead	Evidence
1					
2					
3					
4					
5					