

Adults and Health Provider Quality Handbook





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Foreword

It would not be possible for the council to meet the Health and Social Care needs of our adult residents and maximise their wellbeing without the incredible Care Providers we have working across our borough. In Newham, around 75% of our annual Adult Social Care budget is spent on commissioned services that deliver critical care and support across Care Homes, Day Opportunities, Domiciliary Care, Extra Care, Supported Living and beyond.

We understand the conditions facing the care provider market in Newham, and nationally, are some of the most challenging we have experienced in modern times. The Coronavirus (Covid-19) pandemic, cost-of-living crisis, and ongoing cuts to public sector budgets have impacted significantly across the sector, resulting in a range of interconnected economic, workforce and quality issues. Despite this, during the pandemic, providers in Newham 'stepped up' and continued to work tirelessly to support our residents - thank you for your dedication, flexibility and support - it is greatly appreciated.

In Newham we care passionately about the residents we support and want to make the borough a centre of excellence for Health and Social Care delivery, but we cannot achieve this goal alone. Safeguarding is everybody's business and we take our statutory responsibility to protect residents incredibly seriously - again, we need to work in partnership with providers to do this effectively.

This document sets out our vision for working in partnership with local providers (both Care Quality Commission registered and not) to improve and sustain the quality of care and support delivered and to maximise resident outcomes. It also sets out our approach to safeguarding within a broader

system of quality improvement - recognising that these factors all link together.

Everything within this document is underpinned by the Council's core '**HEART**' values of 'Honesty', 'Equality', 'Ambition', 'Respect', and 'Together'. A new 'Resident Voice' framework that recognises that the people receiving care are often best placed to determine its quality is central to the approach. We have worked with local Providers to co-produce this document and ensure it meets the needs of all parties - recognising that we all have a role to play in achieving excellence. We hope this document will be useful to Care Providers, council teams and partners alike, and unify us in our shared goal of making services the best they can be for Newham residents.



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Interim Corporate
Director of Adults and
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Councillor Neil Wilson
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Our core principles

In Newham the '**HEART**' values underpin everything we do; and this extends to our work with our partners and providers. The processes and procedures in this document have been designed with the '**HEART**' values in mind, and all of our interaction with Providers should embody this approach.

HONESTY - we will have open and transparent discussions with providers at all times. Issues that exist (no matter how big or small) cannot be addressed without us being clear with ourselves and each other about what they are. Our new 'Provider Voice' survey will enable us to receive honest feedback from local providers about what we as a council are like to work with, and we will use to this reflect on and improve our practice. Linked to this, our assessment of quality will be driven by data to ensure that decision making is evidence-based and objective at all times.

EQUALITY - we see our providers as equal partners. We all have a role to play in delivering and monitoring services, but no one person or organisation is more 'important' than the other - we all have an equal and critical role in ensuring the safety and wellbeing of our residents.

AMBITIOUS - we want Newham to be a centre of excellence for Health and Social Care delivery. For us, this means delivering the best quality services that we can, whilst constantly striving for better, more innovative ways to deliver care and support. Our ambitious strengths based approach is central to everything we do, both internally and when commissioning services, and we want our providers to join us in adopting and embedding this approach.

RESPECT - our approach and communication with providers will be respectful at all times. Linked to this we are committed to a 'no-blame' culture, which focuses on how we can address and learn from issues as opposed to whose fault it was.

TOGETHER - we need to work together, and in close partnership with the Care Quality Commission (where appropriate), and our partners in health if we are going to achieve the level of excellence that we all want for our residents. We will also need to work together with the residents themselves - and our new 'Resident Voice' framework ensures we will do this meaningfully and consistently.

How do we define quality in Newham? Our regulatory framework

The legislation that underpins the framework within which Health and Social Care works (e.g. the Health and Social Care Act, the Care Act, the Children's and Families Act, the NHS Long Term Plan and more recently the Health and Care Bill, Build Back Better and People at the Heart of Care: Adult Social Care Reform) ensures there is a clear, simplified and consistent approach. It also ensures there are mechanisms in place to provide appropriate, fair and transparent eligibility criteria and assessment that involves and values residents' views. It places a duty on Health and Social Care professionals to ensure residents are able to obtain clear information and advice to make informed decisions about their care and support; and receive services that promote their independence and wellbeing and prevent, delay or minimise the impact of their needs. These duties align with priority one of the council's Corporate Plan: A Healthier Newham and Ageing Well and the North East London Integrated Care Board's vision: enabling our population to live healthy lives.

The Care Act also places a duty on local Councils to shape and maintain an efficient and effective market of services for meeting care and support needs. This duty applies to services the Council commissions directly and to other non-commissioned services (including those used by Direct Payment users and self-funders), including universal services and those provided by partners (such as health and the community sector). This responsibility aligns with the Council's Community Wealth Building Strategy.

The Care Act and supporting guidance outlines statutory duties and multi-agency roles and responsibilities related to Safeguarding Adults. There is a key focus on preventing abuse and neglect, ensuring the adult's views and what they

want to happen are central at all times, as well as ensuring our multi-agency response is coordinated and effective if an individual is at risk of, or is experiencing abuse or neglect. This approach is reflected in the London Multi-Agency Adult Safeguarding Policy and Procedures, which Newham Council has signed up to.

A significant proportion of the care and support services the council commissions are regulated by the Care Quality Commission (CQC): the independent regulator of Health and Adult Social Care in England. The CQC registers, monitors, inspects and rates care providers against a set of Fundamental Standards to ensure services are safe, effective, caring, responsive and well led; empowered to hold care providers to account where these standards aren't met.

In addition to these national and regional frameworks, Care Providers are required to meet the requirements stipulated in their Contract with the council as set out in their Service Specification.

Our approach to quality improvement

The council believes a range of information and intelligence needs to be understood to build an accurate and holistic picture of service quality. We also understand the reporting burden on providers can be significant and will aim to reduce this by consolidating and drawing on existing data sources (such as

Capacity Tracker, and the emerging Association of Director of Adult Social Services Quality Standards) wherever possible. Moving forward, all commissioned services will have clear and consistent approaches to monitoring and evaluating quality, drawing information from the below key areas.



An interactive dashboard that pulls together all of the above intelligence into a single place will be developed for each commissioned service. This will ensure a consistent and evidence-based approach to monitoring, evaluating and improving quality. Dashboards, once finalised, will be shared

with care providers on a regular basis to provide a transparent and consistent understanding of quality. The dashboards will help us identify trends and quality concerns as they emerge, enabling us to be proactive as opposed to reactive.

Working together to achieve excellence: our support offer to you

The council is committed to working in partnership with care providers to drive up quality and achieve excellence. As such, we have developed / commissioned the following services to support you to make your services the best they can be. All in the borough and / or with providers with whom we have a contract with will be able to access this support.

Grey matter learning - Newham Council has funded the Grey Matter Learning platform so that it can be free to access for all local providers.

This is a comprehensive, Skills for Care accredited suite of online training courses. There are hundreds of courses to support staff at all levels, and as a Newham provider, you and your staff will have unlimited access to the course content at no cost to you. If areas for improvement are identified, we will be able to link you in with the right training and support to fill these skill and knowledge gaps.

CARE PROVIDER VOICE - Care provider voice - Newham Council commission Care Providers' Voice (CPV) to enable local providers to access high quality resources and recruitment support, and to ensure that the sector's voice is represented at a local and regional level. They will work with the Council to ensure forums address issues that are important to you and seek to collate your views on what it is like to work with the Council. CPV also facilitate peer support networks across the Borough, enabling staff across different organisations to share ideas, challenges and develop collaborative solutions.

We know that staff capacity and capability is one of the key factors that influences service quality. The dedicated Job Brokerage function delivered by

CPV works in partnership with Newham residents and local Care Providers to help identify and retain new quality staff within the sector. As a Newham Provider you will have full access to the Care Provider Voice online job pages free of charge, to list job adverts across North- East London and dedicated Job Broker who will help to understand and address your recruitment needs.

Provider-led quality forums - we work in partnership with CPV to deliver regular provider-led Quality Forums across Newham. These are an opportunity to take forward partnership working and share information: highlighting good working practice and identifying areas for improvement. In addition, such events address the need to continually improve and maintain the quality of services to residents and carers. We use these forums to discuss details of the Council's Market Position Statements and work in partnership with the sector to ensure local needs are met.

Our Commissioning and Quality Assurance teams - our Commissioning and Quality Assurance Teams have been remodelled to give providers more joined up and consistent contact and support throughout the contract delivery period. Moving forward, we will aim for each provider to be allocated a dedicated Commissioning and Quality Officer who will consistently work with you to provide support, advice and guidance. The main aim of the Commissioning and Quality Officers will be to work with providers to meet the activity and performance requirements of the specification and maintain / improve quality. These officers will act as 'critical friends'. They will be honest and clear about any issues that

they have around activity, quality and performance, but will then support in providing and identifying the support that is needed to address these.

London borough of Newham learning and development opportunities - the council has a range of learning and development offers that can be accessed by providers and partners free of charge in the form of e-learning, access to research, online and face to face training (including, but not limited to Safeguarding, Outcomes Stars, and Person Centred Fire Risk Assessments). Our Social Welfare Alliance programme provides any staff delivering resident facing services in the borough with information and referral pathways to support residents around income maximisation, immigration support and advice, early years, housing issues and much more.

Safeguarding adults - every care provider organisation should have Safeguarding Adults policies and procedures in place that reflect the Care and Support Statutory Guidance. Our Safeguarding Governance Team is available to provide guidance on Strategic Safeguarding Adult matters (Person in a Position of Trust, Organisational Abuse, Advice on best practice) related to Care Providers, they can also carry out awareness raising and training sessions on Safeguarding Adults legislation, policies, procedures and best practice. The team can be contacted on Safeguarding.AdultsAdmin@newham.gov.uk or via the main Council Adult Social Care Access Team number **020 8430 2000**

To report a Safeguarding Adult concern - please use the online form available at <https://www.newham.gov.uk/health-adult-social-care/contacting-adult-social-care/1> or contact **020 3373 0440**

Our Deprivation of Liberty Safeguards (DoLS) team - our Deprivation of Liberty Safeguards Team are

available to provide advice and guidance relating to Deprivation of Liberty Safeguards and mental capacity. If there is concern about an individual's ability to make a specific decision, a mental capacity assessment must be carried out.

Where a care provider, referred to as a Managing Authority in the DoLS Code of Practice, believes an individual may be deprived of their liberty, they must submit an application for a DoLS authorisation to the local authority (the supervisory body). This must be submitted through completion of the ADASS Form (1). Once completed and signed, the DoLS application must be emailed to the authority where the person is an ordinary resident - within Newham this is deprivationofliberty@newham.gov.uk

In circumstances where an adult is being deprived of their liberty in their own home, including Supported Living and Shared Lives, an application to the Court of Protection is required and the provider should inform London Borough of Newham Adult Social Care who will explore this further.

Please follow this link for more information on Community DoLS, mental capacity and Deprivation of Liberty Safeguards.

Newham Social Care Academy: The Adults and Health Directorate in the council are developing a Social Care Academy. This will be a framework underpinned by our Workforce Strategy, bringing together our workforce development offer (i.e. entry pathways into our Social Care workforce and career development pathways) and our learning and development offer. The academy is currently in the development stages and is being designed to support the Social Care workforce across Newham. Care providers make up a significant proportion of our Social Care Workforce and will be a central focus of the Academy activity moving forward.



Adopting a holistic picture of quality: the key components

Resident voice - we believe residents are usually best placed to determine the quality of service that they are receiving. We have therefore developed a new Resident Voice survey that will be used to continually gather feedback. This information will be fed into our overarching quality monitoring processes / ratings and fed back to providers on a regular basis to enable to them to respond and improve.

Provider voice - we understand the way we do business with our providers can impact on their ability to deliver safe, high quality care. We want to be a great organisation to work with, and to create the conditions for excellence and innovation. As such, we have developed a 'Provider Voice' survey that will be circulated to all commissioned providers once a year to gather feedback on what we as a council are like to work with, and to identify areas for improvement. We will also use this survey to assess how far we are delivering our 'HEART' values. We will formally share the findings of our annual survey and any action plans we have developed based on these with our providers.

CQC ratings / intelligence - we work in close partnership with our local CQC Inspectors to share 'soft' intelligence and align inspection findings with our overarching monitoring and improvement processes. The latest CQC inspection rating will also feed into our overarching quality threshold rating. As we strive for excellence, our contracts with providers increasingly expect all of our commissioned services to be rated as 'Good' or 'Outstanding'. We will work in partnership with any Providers who are not meeting this threshold to help improve quality.

Contract key performance indicators - every contract has a Specification which has defined outcomes that explain what is to be achieved from the service; clear outputs that are able to measure if the Service is meeting the outcomes; and of these Key Performance Indicators (KPIs) that demonstrate if the provider is meeting the outcomes. KPIs have a target attached and monitor both activity and quality; and are reiterated to providers during Contract Mobilisation. Data that informs Key Performance Indicators often come from a range of internal, partner and Provider sources, but wherever possible, from existing data systems (such as AzeusCare, Electronic Call Monitoring Systems, and Capacity Tracker etc.) to reduce the reporting burden on Providers. Providers may be required to complete and return data to the Council in areas where we are unable to gather the information elsewhere – via online forms to automate this process wherever possible.

Safeguarding adult referrals and outcomes - the number and type of Safeguarding Adult concerns raised by, and about a Provider provides a good indication of the quality of service being provided. We regularly review and thematically analyse Safeguarding Adult data on a Provider by Provider basis to understand where there may be emerging or current risks and use this to build an overall picture of quality. It should be noted that a high number of Safeguarding Adult concerns does not necessarily indicate poor quality. We understand that unfortunately, Safeguarding Adult Concerns can arise in the delivery of care and support services - and timely reporting, how they are responded to and how the learning is used to prevent future incidents is critical. We may have quality in care concerns about a Provider who never raises Safeguarding concerns.

Our Safeguarding reporting and governance procedures for Providers are set out at Appendix 1

Complaints and compliments - complaints and compliments provide valuable feedback about resident satisfaction with our services. Along with other forms of feedback, they provide an opportunity to improve the delivery of services. Complaints must be handled effectively and promptly, and recorded for coordination, analysis and reporting.

Whistleblowing - All Care Providers should have a robust and up to date Whistleblowing Policy that all of their staff are familiar with. Further details on Whistleblowing legislation and best practice can be found [here](#).

Quality notifications - our Quality Notification process allows Health and Social Care professionals including Providers to share any non-safeguarding related concerns they have about the quality of service being delivered by a specific Provider. This could be anything from a concern around staff competency, lateness or poor communication. Page 92 of the Pan-London Multi-agency Safeguarding Procedures provides further detail on how to differentiate between 'Poor Quality of Care' and Safeguarding Concerns. This 'softer' feedback enables us to identify and address any potential quality issues as they emerge and before they escalate. Professionals and Providers should not be afraid to mention their concerns as this will help us to build a culture of continuous improvement. Providers and professionals should report Quality Notifications via this online form. The Quality Notification process is set out at Appendix 1.

Quality & performance meetings - we will hold regular Quality & Performance meetings with all commissioned Providers to reflect on all of the areas listed above. Further detail on this can be found at Appendix 2. The frequency of these meetings will depend on where each Provider sits in our overarching Quality Threshold framework (see section 6) so that they are proportionate to the performance of each provider and the level of support required. The Provider will receive a minimum of two weeks' notice in advance of a meeting. The majority of the meetings will take place face to face at the Provider's premises and will be led by an allocated Commissioning & Quality Officer.

In advance of the meeting the Officer will collate and review key quality and performance data from a range of sources (largely via the interactive quality dashboard). During the meeting the Officer will use the Quality Visit template to validate the data they have collated and assure the quality and performance of the service being delivered. The Officer will meet with the nominated contract manager from the provider at the end of the visit to discuss their findings and give the Provider the opportunity to comment on this, and any other issues that they may be experiencing in relation to contract delivery.

After the visit (and within five working days), the Officer will share their summary report with the Provider and let them know which of the Quality thresholds below they are in. The Officer will work together with the provider to co-produce a SMART and time limited Quality Improvement Plan (QIP) for any Providers who are 'Red' or 'Amber'.

Newham provider quality thresholds

The following table sets out the thresholds that we work to when assessing Provider quality. Data from our quality dashboards will be used to determine which stage each Provider sits in. If a provider meets one or more of the definitions in each area then they will move into that threshold. Our aim is to work in partnership with Providers to move them all into the 'Provider Quality' stage.

Threshold stage	Defined by	Potential action to
Provider of Concern (High or major-risk)	<ul style="list-style-type: none"> ● Section 5.7 of the London Multi-Agency Adult Safeguarding Policy & Procedure; ● Overall CQC rating of 'Inadequate' and / or enforcements related to quality of care; ● A death or significant harm related to a safeguarding concern where there is concern about the action / inaction of the Provider; ● Concerns related to serious abuse or neglect; ● Significant risk to residents as a result of poor quality care, support or environment; ● RED rating from Quality Assurance Visit; ● Criminal proceedings relating to poor care. 	<ul style="list-style-type: none"> ● The process detailed in Section 5.8 of the London Multi-Agency Adult Safeguarding Policy and Procedure; ● The Provider will be discussed at the Council's Provider Risk Management Board (PRAMB) and the North East London Provider Quality Board; ● A 'SMART' Quality Improvement Plan will be put in place and where possible, 'red' actions should aim to be completed within 10 working days; ● Monthly Provider of Concern meetings, chaired by the Director of Quality Assurance, Safeguarding & Workforce Development; ● Possible limit or suspension on new packages and CQC / London DASS network to be notified; ● Reviews of residents to assess level of risk and ensure safety; ● Consideration given to moving Newham Residents out of the service if safety cannot be assured.
Organisational Abuse (High risk)	<ul style="list-style-type: none"> ● Section 14.17 of The Care & Support Statutory Guidance; ● Concern(s) related to serious abuse or neglect by / across an organisation; ● A death or significant harm related to a safeguarding concern where there is concern relates to the the action / inaction of the Provider; ● A Safeguarding Adults investigation where concerns are about organisational abuse with high levels of risk for a number of service users; ● Trends and themes related to safeguarding adult concerns raised. 	<ul style="list-style-type: none"> ● Regular Provider meetings chaired by a Senior Manager in the Strategic Safeguarding Team; ● A 'SMART' Quality Improvement Plan will be put in place and where possible 'red' actions should aim to be completed within 10 working days; ● The Provider will be discussed at the Council's Provider Risk Management Board (PRAMB) and the North East London Provider Quality Board; ● Consideration given to moving Newham Residents out of the service if safety cannot be assured; ● Reviews of residents to assess level of risk and ensure safety; ● Possible limit or suspension on new packages and CQC / London DASS network to be notified.

Newham provider quality thresholds

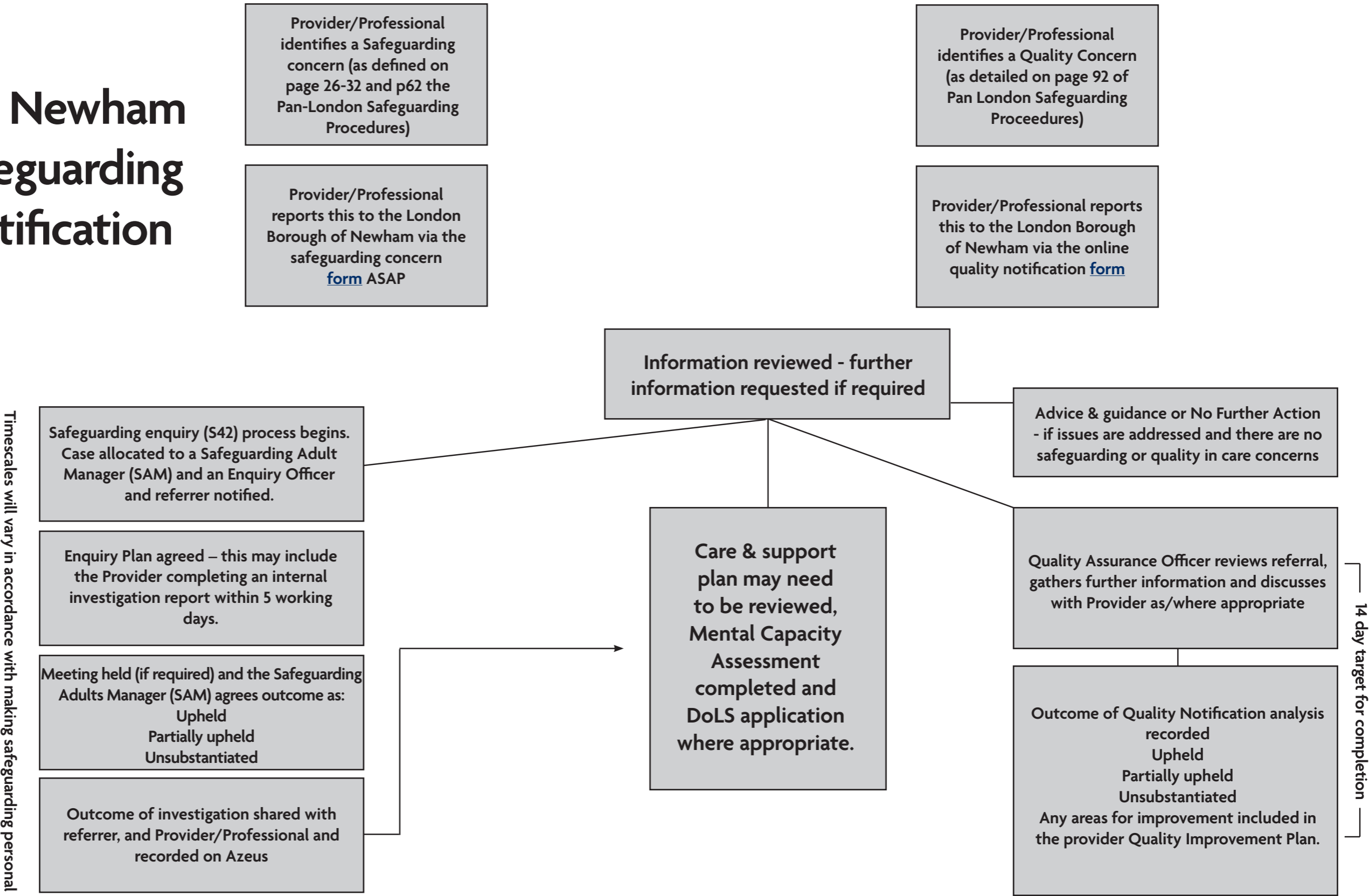
1 To be determined on a contract by contact basis and as set out in the specification / agreed with the commissioner and clearly communicated to the Provider.

2 To be determined on a contract by contact basis and as set out in the specification / agreed with the commissioner and clearly communicated to the Provider.

<p>Provider Improvement (Medium risk)</p>	<ul style="list-style-type: none"> ● CQC rating of ‘Requires Improvement’ in ”Well Led” or “Safe” ● Allegations that the Registered Manager or Senior Staff do not meet the “Fit and Proper Person” test are substantiated; ● Evidence of increased staff turnover and/or lack of a robust recruitment and retention activity; ● Evidence that staff have not received training in line with the training matrix; ● Resident Voice satisfaction score below 80%; ● Contract KPIs below ‘acceptable ’ range ● Lack of evidence of positive practice improvement / learning resulting from s42s or s44s where the Person Alleged To Cause Harm (PATCH) is the Provider; ● Lack of evidence of positive practice improvement / learning resulting from Quality Notifications and/or formal complaints; ● AMBER rating following a Site and Performance Visit in “Well Led” or “Safe” domains. 	<ul style="list-style-type: none"> ● Commissioning and Quality team to work with the provider to develop a SMART, time-limited QIP to improve performance; ● Monthly contact/meeting with the provider to review the QIP (note that the provider will move to Red / Provider of Concern if there is not sufficient engagement with, or progress made against the QIP actions).
<p>Provider Quality (Low or minor risk)</p>	<ul style="list-style-type: none"> ● Overall CQC rating of ‘Good’ or ‘Outstanding’; ● Resident Voice satisfaction score of 80%+; ● All contract KPIs on target (or within ‘acceptable’ range); ● Evidence of positive practice improvement / learning resulting from s42s or s44s where the Person Alleged To Cause Harm (PATCH) is the Provider; ● Evidence of positive practice improvement / learning resulting from Quality Notifications and/or formal complaints; ● Overall GREEN rating with none of the five domains rated as “Inadequate” following a Site and Performance Visit. 	<ul style="list-style-type: none"> ● None - planned bi-annual / annual Quality Monitoring visits in place.



Appendix 1 - Newham provider safeguarding & quality notification process



Note that all three of the pathways above can run in parallel if appropriate. Data on number, status and outcome of all Safeguarding and Quality Notifications for each commissioned provider to show on their Quality Monitoring dashboard, and to contribute to overall Provider Quality Rating. To be discussed with Providers during quality monitoring meetings. Key actions and lessons from all investigations to be included in each Provider's Quality Improvement Plan

Appendix 2 - provider monitoring template (high level)

Each provider will have access to a single, 'live' monitoring template. This will be an excel document that is shared in a secure MS Teams site that can be accessed by both the Council and the Provider at any time to ensure consistency and transparency. The Provider will be required to submit a single, comprehensive set of data and documents once a year - including (but not limited to);

- Policy & Procedure Checklist (to demonstrate that all specified documents are in place & up to date);
- A detailed Training Matrix (setting out staff training status and planned activities);
- A Staffing List (confirming Right to Work, Visa and contract status of all employees).

All other monitoring data will be collected from the areas set out at section 3 of the Provider Handbook from existing sources.

All of the information that has been collated will be validated and reviewed by a Commissioning & Quality Officer from the council on site visit (frequency as dictated by the Provider thresholds at section 6 of the Provider Handbook). The Provider Monitoring Template pulls all of this information together and provides a framework to validate Provider performance against the five core CQC domains of 'Safe', 'Effective', 'Caring', 'Responsive' and 'Well Led'.

	Safe	Effective	Caring	Responsive	Well Led	QIP
Pre-visit data	Score	Score	Score	Score	Score	Single / live QIP which sets out improvement actions in each area
At visit assessment	Score	Score	Score	Score	Score	
Domaine RAG status	R A G	R A G	R A G	R A G	R A G	
Overall Provider status	R A G					

Appendix 2

The evidence that will be reviewed and evaluation criteria that will be used to derive a RAG rating for each area that will be looked at in each area has been clearly defined in the template - to ensure an objective and transparent scoring approach. An example of this is shown below:

At the end of each on-site visit the Commissioning & Quality Officer will meet with a designated Provider officer to discuss ratings for each of the domains, confirm their overall RAG rating and discuss and agree the actions that will added on to their ongoing Quality Improvement Plan (QIP).

If the Provider receives an overall Red rating (i.e. 'Provider of Concern') then the Council will meet with the provider monthly to review progress against the QIP. If the Provider receives an overall Amber rating (i.e. 'Provider Improvement') then they will meet to review the QIP quarterly. Providers who receive a Green ('Provider Quality') rating will be visited twice a year.

Quality Measure	Quality Measure					Scoring/RAG rating of Evidence		
	0	1	2	3	4	Score for this measure	Comments and Actions Agreed for Quality Improvement Plan	
Providers must assess any risk associated with the provision of care and treatment and put mitigation plans in place. 3 residents files reviewed record initials in comments box	The care and treatment care plan has not been risk assessed	Risk assessments have been completed for some elements of the care plan	Risk assessments exist for most areas of the care plan but do not contain enough detail for the risk to be mitigated	Risk assessments exists for all elements of the care plan but the details is incomplete	Risk assessments and mitigation plan exists for all elements of the care plan and are detailed enough to ensure people are safe.			



