

Item No. 12.	Classification: Open	Date: 18 November 2014	Meeting Name: Cabinet
Report title:		Home Care Annual Contract Performance Report	
Ward(s) or groups affected:		All	
Cabinet Member:		Councillor Dora Dixon-Fyle, Adult Care, Arts and Culture	

FOREWORD – COUNCILLOR DORA DIXON-FYLE, CABINET MEMBER FOR ADULT CARE, ARTS AND CULTURE

Our home care services provide an essential support to vulnerable people with social care needs in order to help them live independently and safely in their own homes. The quality of these essential services is vital and our fairer future promises underline our strong commitment to high quality personalised services.

In looking at the quality of services, it is critical to recognise the essential role of the many hundreds of local people who make up the home care workforce and who are on the frontline of delivering this service. Service users and their families rely heavily on home care workers to help them in a compassionate and caring way and the workforce carry out this demanding role to all corners of the borough, every day of the year, in good weather or bad.

As part of the overall agenda to improve the quality of services to our residents, the council is committed to delivering the areas identified in the Ethical Care Charter which recognises and appreciates the workforce and the subsequent huge impact their work has on people’s lives.

The two contracts (with MiHomecare and London Care) have been varied to include the requirements to pay London Living Wage, and will shortly also include travel time, and the requirement to offer a guaranteed hour contract to care workers. These are key areas that have been highlighted both nationally and locally as underpinning improved quality through showing we value the staff that deliver these critical services.

This report details the delivery, quality and performance of home care services provided by MiHomecare and London Care and I am pleased to confirm that both contracts have met the quality and performance requirements of the council.

RECOMMENDATION

1. That cabinet note the delivery of the contracts over the third year has met the council’s requirements and that the council and providers remain committed to working together to continually improve the quality and consistency of home care delivery.

BACKGROUND INFORMATION

2. In January 2011 cabinet approved the award of contracts for two universal contracts to deliver home care services to people in the borough.

KEY ISSUES FOR CONSIDERATION

3. Over 1,000 adults receive some form of home care service in Southwark so ensuring the delivery of good quality and cost effective home care services is an important part of adult social care provision in Southwark.
4. Since June 2011 the new contracting arrangements for Home Care services in Southwark is two borough-wide cost and volume contracts (demand-led) for universal home care.
5. The contracts have agreed minimum volumes of 200,000 hours in year 1, 150,000 hours in year 2 and 100,000 hours in year 3. The amount purchased off the contracts has been in excess of the minimums in years 2 and 3.
6. This report summarises the monitoring of the contracts for the third year of full operation. Appendix 1 details the background data in relation to delivery, performance and quality.
7. The delivery of home care services under the two home care contracts has met the quality and performance standards under the contract over the third year of operation.
8. The council and providers remain committed to working together to continually improve the quality and consistency of home care delivery. The mechanisms used to manage and monitor the contracts include regular contact between quality and performance staff and the branches (including site visits), interviews with a random selection of service users, and senior oversight through monthly safeguarding and quality management meetings.

Contract activity summary

Contract usage

9. Below is a summary of the usage of the contracts based on commissioned care packages from July 2013 to June 2014.

Provider	Number of hours commissioned	Number of service users
London Care	153,600	403
MiHomecare	299,291	801
Total	452,891	1,204

10. There are a number of key measures the council considers when assessing the performance and quality of home care services. The key measures include:
 - Service quality alerts – this is where someone is concerned about the way the service is delivered, for example care worker's punctuality or poor communication
 - Safeguarding – this is where an allegation is received that someone is subject to abuse. This can be financial abuse, physical abuse, neglect etc. It may be an allegation related to a care worker or an allegation related to a third party
 - Complaints and compliments

- Regulatory compliance – all care providers are regulated by the Care Quality Commission who inspects them and publishes their findings on their website.

In order to provide a rounded view of quality, in addition to the metrics above, the council seeks to understand the views of people who use the services and this is detailed in the next two sections.

11. A summary of performance against each measure is noted below:

Service quality alerts

12. The council routinely collects day-to-day service delivery concerns, referred to as 'service quality alerts', which are a good way to identify issues at an early stage way that can inform service improvement and ensure that the delivery of care is personalised to individual needs and wishes.
13. These are distinguished from formal Safeguarding alerts and investigations, and can range from minor concerns to more substantial concerns. Minor concerns would include issues such as poor communication. More substantial concerns would include issues such as timeliness of care worker attendance, missed visits, or ensuring dignity and respect at all times.
14. In some instances more substantial concerns raised through the service quality alerts are also recorded and reported as formal Safeguarding investigations so may be counted in both.
15. Raising service quality alerts is encouraged by both the council and providers as a mechanism to inform and support continuous improvement. All alerts are logged and followed up by contract monitoring officers in conjunction with social workers and other relevant stakeholders.
16. For the period July 2013 to June 2014 there have been a total of 74 upheld alerts received with 39 relating to London Care and 35 relating to MiHomecare. This equates to 16.2 service alerts per 100,000 care hours. The overall average of 16.2 alerts per 100,000 care hours when set against a total of 1204 service users gives a figure of 0.01 alerts per user, which is less than last contract year.

Safeguarding

17. Summary data in relation to safeguarding alerts for the main home care contracts is detailed below. This is where an allegation is received that someone is subject to abuse, which can be financial abuse, physical abuse, neglect etc. It may be an allegation related to a care worker or an allegation related to a third party or a family member.
18. From July 2013 to June 2014 there have been a total of 25 safeguarding alerts with 12 relating to London Care and 13 relating to MiHomecare. This equates to 4.3 safeguarding alerts per 100,000 care hours for MiHomecare and 7.8 for London Care, which as a percentage of service users equates to less than 0.53% per hour for both providers when calculated as a percentage of hours delivered. The performance indicator for this is less than 1% so both providers continue to meet this standard.

19. Of the 25 safeguarding allegations received, 2 have been found to be unsubstantiated, 6 were not determined/inconclusive, 9 have been substantiated, 5 partly substantiated, and the remaining 2 have not yet had an outcome recorded.
20. All safeguarding and quality alerts are fully investigated and the quality and performance team monitor any action points arising from these. The level of safeguarding allegations and upheld is reviewed monthly by the senior managers safeguarding and quality meeting.

Complaints and compliments

21. Formal complaints regarding home care services can be received directly by the council but are also received by the home care providers themselves. Generally but not exclusively in the first instance complaints would be raised with the provider for them to resolve and respond to and this is reflected in the complaints data reported under the contract.
22. During the period covered by this report there was one representation raised with the council's complaints team for MiHomecare. This was not actually a complaint although handled by the complaints team as the query sought to understand the process for quality alerts and the quality assurance/contract management processes. This was clarified and nothing further was received.
23. In addition to complaints received by the council both providers actively encourage service users to use their complaints and compliments process so they can identify areas for improvement and understand what is working well for people.
24. From July 2013 to June 2014 there has been a total of 18 complaints received directly by providers with 10 received by London Care and 8 received by MiHomecare (of these 16 have been upheld, 2 not upheld). From July 2013 to June 2014 there have been a total of 57 compliments received directly by providers with 8 received by London Care and 49 received by MiHomecare.
25. Examples of some of the compliments received by both agencies are as follows:

MiHomecare:

"Just a line to say PM has been outstanding in taking care of me above the call of her duties"

"Dear L - what would we do without you - your help and care knows no bounds. Thank you for all you do for me - you are a truly wonderful carer and I am blessed to have you in my life. Thank you from the bottom of my heart - N&D"

"In the presence of her grandson L I would like to provide you with some positive feedback regarding care worker H. Both Mrs T and L are very happy with the service that H provides and feel that she has a great relationship with Mrs T. Since the package of care has started L feels less stressed and things are going well just as they are" - (from Social Worker SL to agency)

"Dear F - confirming our telephone conversation earlier today regarding my mother EH I will be away for 10 days. I would also like to confirm that so far Mum is pleased with her carers and finds them very friendly and helpful" - JH

"I would like to thank you for your carer who cares for Mrs CO. The lady is fantastic for the help and understanding she is giving to Mrs O. Without her help things could be very difficult. I do not think it's possible to better her. Thank you"

London Care compliments

"My family and I offer our sincere thanks to one of your staff MK. M was kindness herself to me when I was at my most vulnerable. Her unstinting cheerfulness, especially when I was down, was a gift. We would like to show our appreciation to her. I would unhesitatingly ask for her again if I ever happen to need a carer and also recommend her to anybody who needs care". Service User AH and family

"Your carers have done an outstanding job with Mrs S. Please can you pass on my appreciation for all of their hard work and support for the past year" - Social Worker KB

"Just relaying FO's brother's comments from this morning. He said he would like to thank the whole team for looking after his brother and is very impressed by the whole service" - Social Worker SM

"AT (partner of service user GH) has praised care worker P-GM for being an excellent carer and is very impressed with her skills" - London Care Coordinator KM reporting to Branch Manager

"Service user Mr JK's NOK praised our carer CO for doing a thorough job" - London Care Coordinator BR reporting to Branch Manager

"Service user YE has praised carer FO and says she is lovely and would like to have her every week" - London Care Coordinator KM to Branch Manager

Regulatory compliance

26. The Care Quality Commission (CQC) undertakes regulatory inspections of registered services and inspect service delivery against a number of broad headings within which there are 28 outcome measures. Full details of the CQC Essential standards of quality and safety are available as a background document or at http://www.cqc.org.uk/sites/default/files/media/documents/gac_dec_2011_update.pdf
27. The following is a summary of the main headings under which the outcomes are grouped
 - Personalised care, treatment and support
 - Safeguarding and safety
 - Suitability of staffing
 - Quality and management
 - Suitability of management.
28. The CQC makes an assessment against a selection of the outcome domains and report these as compliant, or having minor, moderate, or major concerns.
29. London Care has opened a new branch that is managing the services delivered to Southwark residents. A new branch does need to meet CQC regulatory

conditions to commence operations but as this is an administrative check we are awaiting the first CQC inspection report for this office.

30. In April 2014 (report published June 2014) MiHomecare Brockley were inspected and found to be compliant in all domains. This is the branch that provides care to Southwark clients.

London Living Wage Implementation

31. Following negotiations by the council with MiHomecare and London Care, the London Living Wage (LLW) was implemented in August 2013 for care staff employed by both agencies, as part of the Council's decision to adopt the Ethical Home Care Charter
32. The council is working with both agencies to measure improvements in quality related to the introduction of LLW and the following parameters are currently being assessed:
 - Turnover of care staff
 - Percentage of staff with NVQ qualifications
 - User-reported experience (collected as part of the dataset that both agencies are contractually obliged to provide the council on a monthly basis), both agencies' annual customer feedback surveys, and the annual statutory Adult Social Care user survey carried out by the council with service users.
33. Emerging intelligence on user-reported quality will be incorporated in assessing the impact of LLW on quality of service provision and this year's information will form the benchmark for future measurements.

Staff turnover since introduction of LLW

34. MiHomecare reports enhanced retention for Aug 2013-July 2014 with 123 new care workers recruited and 56 care workers leaving employment, representing a net increase in care workers of 67.
35. London Care reports an overall decrease in Southwark Care Workers for the same period: down from a total of 164 in August 2013 to 140 and the end of July 2014, however part of this decrease is the result of London Care dismissing 29 care workers whose performance was not up to standard.
36. Since July 2014 London Care has implemented enhanced screening procedures for applicants in a bid to recruit better quality staff, as well as widened recruitment channels. This has resulted in improved recruitment, with 17 new care workers of suitable standard being recruited July to September 2014, of which 10 were recruited in September 2014.
37. Both agencies have reported enhanced recruitment of staff, attracting people with the right values resulting in motivated, caring staff with a commitment to work in the care sector. Staff are increasingly putting themselves forward for nomination for NVQ qualifications.

Care workers commencing NVQ qualifications

38. For the period August 2013-July 2014 MiHomecare report 12 care staff commenced working towards NVQ qualifications following the successful completion of their 6-month probationary period
39. London Care information is available for the period July to September 2014. During this time period 11 candidates have been nominated by the agency for NVQs. In addition, to support driving up quality standards, London Care have recently gone into partnership with Lifetime Training to provide all care workers with the opportunity to study for NVQ qualifications after completing 12 weeks probation.
40. This information will form the benchmark against future performance to ensure a full and comprehensive understanding of the impact of introducing LLW and the Ethical Care Charter.

Service user views

41. As home care is delivered to individuals in their own home, the council is continuously reviewing monitoring processes to see how we can better capture good information on the impact the service has on their lives and their experience of the service. There are two main ways we do this:
 - Carewatch – a lay inspection scheme run by Age UK and funded by Esmee Fairbairn Foundation
 - Interviews with service users conducted by the council
42. Carewatch is an innovative approach from Age UK whereby people approach the lay inspectors if they want to discuss their care and related issues and the lay inspector then visits to talk to them. The inspectors feed back on any themes to the council who shares these with providers.
43. Early themes brought to the council's attention related to people needing a review of their support plans and insufficient parking permits available to enable care workers who needed to drive between visits to park close enough. Both issues have been followed up.
44. Analysis from these early visits suggests that those who have met with the lay inspectors were satisfied with the quality of their care. Building from the learnings from the initial phase, the next phase of the project will provide an excellent opportunity to get views from care workers and service users and track the impact of delivery the Ethical Care Charter. The council is working closely with Age UK to promote and assist with this.
45. The council's quality and performance team have also conducted a series of interviews with people who receive home care services. Themes from these meetings were generally positive and included:
 - Service users reported they felt the care workers attending them treated them with respect, sought their consent when providing care, and took account of their preferences
 - They felt safe whilst being provided care, and where other services were involved (e.g. district nurses) felt that their care workers worked with the other professionals harmoniously.

- Similarly, where the use of hoists or other equipment was concerned, service users felt safe and confident in their care workers' knowledge and experience in using such equipment
 - Service users felt confident about making their views known and about complaining about aspects of the service they were not satisfied with.
46. However there was an area identified by a small group through the interviews that they felt less satisfied with, and this was in the consistency of care when their usual care worker is away or sick or over the weekends. This has been raised with both providers.

Provider quality assurance

47. The council requires providers to have extensive quality assurance systems which capture information in a variety of ways. Their systems need to enable them to continuously improve the quality and safety of their services and ensure that they maintain high standards. One of the most important of these mechanisms is the collection of information from service users on what they think of the quality of their service through an annual survey.
48. MiHomecare's annual survey of Southwark customers had a response rate of 14% representing 112 Southwark service users and the survey solicited service users' opinions across 4 domains as set out below.
1. Service users' opinions on individual care workers assigned to provide services to them in their home (About your support workers")
 2. Service users' experience of dealing with branch-based staff ("Our office")
 3. Service users' opinion of MiHomecare as an organisation ("About MiHomecare as an organisation"); and
 4. Service users' opinion on the impact of MiHomecare's services on them ("Your care – how do you feel since receiving care services from MiHomecare")
49. A summary of the findings for domain 1, 2 and 4 are set out below. In relation to domain 3, which focused on MiHomecare as an organisation following recent changes that saw Enara become MiHomecare when the MITIE group acquired Enara, 60% of users felt their care had improved since the change.

Key outcomes from each domain are highlighted below:

Domain 1 – About your Support Workers

- 92% of respondents felt that their allocated workers showed them respect, had a positive attitude and were willing and helpful (Strongly agree/Agree)
- 94% of respondents reported that workers allocated to them were punctual and reliable, satisfactorily completed their duties, and stayed for the full duration of time allocated for visits (Strongly agree/Agree)
- 77% reported that their care workers showed ID badges on arrival (which is standard good practice in home care)
- Overall users reported high levels of satisfaction levels, which is consistent with the councils work to gather feedback through interviews with users.

Domain 2 – Our Office

With respect to their dealings with the branch:

- 91% of respondents felt that office staff are polite and listen to them when they contact branch staff, and when needing to contact the office they felt staff response had been helpful (Strongly Agree/Agree)
- 92% of respondents reported being aware of how to make a complaint; and of those who had made a complaint 83% reported their complaint being dealt with in timely fashion (Strongly Agree/Agree)
- 73% of respondents reported being informed of changes to care provision in timely fashion (Strongly Agree/Agree);
- Satisfaction levels with office staff and users experience of dealing with the local branch were similarly positive to users' views of their care workers. One area for improvement is the communication with users in relation to changes to the arrangements for providing their care, in particular changes of care worker.

Domain 4 – Your care – How do you feel since receiving care services from MiHomecare

- 83% of respondents reported being involved in planning their care and feeling they had choice and control over the care delivered by MiHomecare (Strongly Agree/Agree)
- 95% of respondents felt service provision respected them, their home and their belongings (Strongly Agree/Agree)
- 93% of respondents felt they could speak freely with their care workers and that their care workers made them feel safe in their homes (Strongly Agree/Agree)
- Again these high levels of customer support mirror the views of service users interviewed by contract monitoring staff in the course of inspections of MiHomecare

Whilst recognising the survey had a relatively a low response rate the views expressed are consistent with feedback directly obtained by the council and provide assurances around user experience and satisfaction with MiHomecare's provision to Southwark residents.

50. London Care's annual survey had a response rate of 29.3%, representing the views of 116 Southwark service users. Their survey had a number of options for people to respond to specific issues around service provision by London Care.

A summary of key results were:

- 90% of respondents felt that due regard was paid to confidentiality and privacy; that they were treated with dignity; and shown courtesy and respect (Always/Usually)
- 82% of respondents felt care workers were competent to provide service and worked at a comfortable pace without making them feel rushed.
- 80% of respondents felt involved in care planning
- A high proportion (84%) felt they trusted care workers and that the workers treated their possessions with care.
- Satisfaction with office staff was lower than for care workers, with 54% of respondents saying they were "Very happy" or "Quite happy"
- 73% of respondents acknowledged knowing how to complain, with slightly less of a proportion (67%) saying they felt comfortable making a complaint
- Overall, 83% reported being either "Very Satisfied" or "Satisfied" with the service.

Again, the above broadly mirrors opinions solicited by contract monitoring staff through service user interviews conducted during monitoring visits of London Care.

51. Overall, levels of satisfaction for both agencies are acceptable, with MiHomecare scoring higher than London Care. The scope of both surveys and their approach were different which makes direct comparisons between the two less straightforward. However, both survey results indicate where there is scope for improvement and the council is actively working with the providers and monitoring changes being made. Key areas identified for improvement where we are working collaboratively are in personalising the approach to care and support so that service users feel empowered to participate in the planning, choice and control over their care and support.
52. While providers use the results of their survey to improve practice within their organisation, the surveys show that the majority of people are satisfied with the quality of their care and in important areas like respect, dignity and satisfaction with the service both providers have achieved good results.
53. Overall the assessment of contract delivery, performance and quality taking account of the key measures summarised in this report is that quality and performance indicators have been met over the period covered.

Community impact statement

54. These services are provided to people affected by all six strands of the Council's equality agenda as the diverse nature of Southwark's population is reflected in those people needing care and receiving home care services.
55. Under CQC registration all Home Care providers are required to proactively demonstrate their commitment to equal opportunities and have been assessed to ensure that they have a satisfactory record in relation to diversity.
56. The universal services and the specialist service are able to meet a wide range of needs sensitivity.

Financial Implications

57. The original contract was awarded in June 2011. Since then there has been two variations to the contract terms, the first to implement LLW, and the second will introduce travel time for care workers and ensure they are offered guaranteed hour contracts.
58. Outside the above there are no new financial implications arising from this report.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Strategic Director of Finance and Corporate Services (FCS/14/30)

59. This report notes the delivery of the contracts over the third year has met the council's requirements. The financial implications are detailed in paragraphs 57 to 58 and it confirms there are no new financial implications arising from this decision.

60. The strategic director of finance and corporate services notes the performance and quality assurance indicators. Continued monitoring of this service, including reports to the cabinet member for health, adult social care and equalities will help prevent additional costs associated with poor quality.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Care Quality Commission – Compliance standards		Rochelle Jamieson 020 7525 4270
Link: http://www.cqc.org.uk/		
Home Care Contract Monitoring Report		Rochelle Jamieson 020 7525 4270
Link: http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=3062		
Home Care Annual Performance Report		Rochelle Jamieson 020 7525 4270
Link: http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=3404		
Home Care Annual Contract Performance Report		Rochelle Jamieson 020 7525 4270
Link: http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CId=302&MId=4550&Ver=4		

APPENDICES

No.	Title
None	

AUDIT TRAIL

Cabinet Member:	Councillor Dora Dixon-Fyle, Cabinet Member for Adult Care, Arts and Culture	
Lead Officers	David Quirke-Thornton, Strategic Director of Children's and Adults' Services	
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Key Decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments included
Director of Legal Services	No	No
Strategic Director of Finance and Corporate Services	Yes	Yes
Director of Adult Social Care	Yes	Yes
Cabinet Member	Yes	Yes
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