

<b>Item No.</b> 11.	<b>Classification:</b> Open	<b>Date:</b> 6 February 2018	<b>Meeting Name</b> Cabinet
<b>Report title</b>		Annual Performance Report for Generic Home Care Contracts 2016-17	
<b>Ward(s) or groups affected:</b>		All	
<b>Cabinet Member:</b>		Councillor Richard Livingstone, Adult Care and Financial Inclusion	

## **FOREWORD - COUNCILLOR RICHARD LIVINGSTONE, CABINET MEMBER FOR ADULT CARE AND FINANCIAL INCLUSION**

In October 2017, cabinet agreed new contracts for Care at Home services, fulfilling our work to ensure that all our homecare services met the Southwark Ethical Care Charter (SECC).

These contracts replace the current arrangements whereby around half of the provision is delivered through contracts with London Care and MiHomecare, and the remainder through individual contracting. Both of the contracts have been in place since 2011, and both were revised in October 2014 to introduce SECC and ensure that the London Living Wage was paid.

This report examines the performance of these two contracts, against the measures established through SECC, as they come to an end.

The report shows how service-users' satisfaction with homecare services has increased since the introduction of the SECC, and how all staff employed under the contract for both providers now have guaranteed hours pay, as opposed to the zero hour contracts many worked on before SECC was introduced.

The report identifies one indicator for which both contractors have not met: retaining staff. Whilst MiHomecare have not been successful in bidding for a new contract, London Care has put in place measures to address this concern going forward.

Cabinet is asked to note the performance of both contractors.

## **RECOMMENDATIONS**

1. That cabinet note the performance of the contracts over its sixth and final full year.
2. That cabinet note the performance of the contracts has largely met the intended outcomes of Southwark's Ethical Care Charter (SECC) which commenced in October 2014 and that service users have expressed their satisfaction with the services through provider feedback mechanisms.
3. That cabinet note the delivery of the contracts over the sixth year has largely met the council's contractual requirements.

4. That cabinet note the gap in meeting one indicator on turnover of staff. This is due to qualified staff leaving the agency in the last year to progress their career. Please see paragraphs 54 to 56.
5. That cabinet note the improvement of the services on the quality issues raised by CQC in their inspections during 2016. London Care achieved a Good CQC rating in all five standards while MiHomecare improved to Good in two out of the five standards – Effective and Responsive.
6. That cabinet note that the award of the new Care at Home contracts was approved in October 2017 and mobilisation to the new providers will be completed by the end of March 2018.

## **BACKGROUND INFORMATION**

7. In January 2011, cabinet approved the award of contracts to two providers of homecare services to London Care and MiHomecare (at that time known as Enara) to deliver home care services to people in the borough for three years with an option to extend for a further two one-year periods (a total of 5 years).
8. In July 2014 the cabinet member for adult care, arts and culture agreed to extend the contracts with London Care and MiHomecare for a period of one year.
9. In June 2015 cabinet agreed to extend the contract for a period of one further year from 1 July 2015 to 30 June 2016. At that time, it was noted that there was also 'individual contracting'<sup>1</sup> taking place to meet increased demand for homecare that cannot be met through these contracts. Individual contracting is around 42% of purchased homecare in the same period. This activity has been wrapped up in the new care at home contracts and will be included in future reports.
10. In March 2015 the cabinet agreed the Gateway 1 for the Home Care Procurement Strategy, known as the 'Care at Home contracts' to undertake a competitive tender to re-commission home care services.
11. In August 2016 the contracts were extended for a further year to allow for the procurement exercise to be undertaken.
12. In July 2017 the contracts were extended until 31 March 2018 to allow for the tender to conclude and the mobilisation of the new Care at Home contracts to take place.
13. Mitie Group announced on 1 March 2017 that they have withdrawn from the domiciliary healthcare market and have formally divested of MiHomecare following a strategic review and robust sales process. The new owner of the business is Apposite Capital which is a well-respected specialist healthcare investor based in the UK who invest in businesses that are committed to making a positive impact by delivering high quality care to its customers. Apposite Capital is committed to working closely with the MiHomecare management team to maintain continuity and quality of care.

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<sup>1</sup> 'individual contracting' – for the purpose of this report means that each package of care has an individual contract with a provider, whereas London Care and MiHomecare have a single contract for numerous packages of care.

14. London Care is part of City And County Healthcare Group which is one of the largest providers of community-based social care services in the UK. City and County Healthcare Group are backed by Graphite Capital, a private equity firm. City and County Healthcare Group acquired London Care in 2009 and is still the owner.

#### **KEY ISSUES FOR CONSIDERATION**

15. In Southwark 1,301 adults received some form of home care service from London Care and MiHomecare during the period 1 July 2016 to 30 June 2017. These two providers delivered 598,981 hours of home care to people in Southwark at a cost of £10 million. Ensuring that each visit meets our expectations of high quality home care is a priority for the council.
16. Recognising that the workforce is a key factor in delivering high quality care, Southwark created the Southwark Ethical Home Care Charter (SECC) which sets out some minimum requirements to be offered to care workers. This was implemented in 2015. This year was the second full year of the SECC for both these contracts.
17. The council is working with both agencies to measure improvements in quality related to the changes made under the SECC and the following indicators are being assessed:
  - Staff recruitment to provide sufficient capacity for both agencies to take on care packages offered to them;
  - Turnover of care staff since continuity and familiarity are key concerns for people in receipt of home care services;
  - Percentage of care staff with vocational qualifications (NVQs/QCFs);
  - Service user-reported experience, and;
  - Offers and acceptance of Guaranteed Hours Contracts by care staff.
18. Intelligence from data collection on all the above activity has been incorporated in assessing the impact of the SECC changes on quality of service provision.
19. The council and providers are committed to working together to continually improve the quality and consistency of home care delivery. In addition to monitoring the key areas noted above, other mechanisms used to manage and monitor the contracts include regular contact between quality and performance staff and the branches (including site visits), evaluation of Quality Alerts and investigating thoroughly any complaints that the council receives.
20. This report provides a summary of performance for these contracts in their sixth year of operation using key performance indicators for the contracts as well as the additional quality measures agreed with the providers related to the SECC.
21. Overall, the delivery of home care services under the two generic home care contracts has met the quality and performance standards of the council by achieving continuous improvement in areas where quality concerns were raised by CQC.
22. Going forward into the new Care at Home contracts which will continue to be monitored through existing staffing resources in the Quality and Performance

Team; there will be a greater expectation on partnership working between the care at home providers and the council social work teams.

23. The Key Performance Indicators (KPI's) have been drawn up, based in part, on the lived experience of home care service users living in Southwark and the ongoing requirements of the council to support vulnerable people to remain at home (as opposed to residential or nursing homes and hospital bed based care). A number of the new KPIs have been shaped by the "I" statements which articulate the outcomes that are most important to the way service users receive the service and are embedded within the service specifications.

## **CONTRACT ACTIVITY 2016 to 2017**

### **Contract Usage**

24. Below is a summary of the usage of the contracts based on commissioned care packages from July 2016 to June 2017 compared with 2015/16:

<b>Provider</b>	<b>Number of hours commissioned 2015/16</b>	<b>Number of hours commissioned 2016/17</b>	<b>Number of service users 2015/16</b>	<b>Number of service users 2016/17</b>
London Care	240,000	250,000	612	587
MiHomecare	364,000	349,000	817	714
<b>Total</b>	<b>604,000</b>	<b>599,000</b>	<b>1,394</b>	<b>1,301</b>

25. The number of hours and service users for MiHomecare has fallen from 2015/16 to 2016/17. MiHomecare state this was due to the sale of the company. In Q1 and Q2 (July to December) a number of staff decided to leave and the agency did not have capacity to accept new packages of care.
26. London Care accepted larger and more complex packages of care although they had fewer clients than MiHomecare during 2016/7.

### **Contract Performance**

27. A number of key measures are used by the Council when assessing the performance and quality of home care services. The following paragraphs provide a brief explanation of each measure followed by a full analysis of the delivery against each measure.
28. Southwark Ethical Care Charter (SECC) performance indicators have been agreed with both providers and are reported by them to the council on a quarterly basis.

### **Service Quality Alerts**

29. Service quality alerts are raised when someone is concerned about the way service is delivered to individual clients. Examples include care workers' punctuality for visits, and poor communication between agency (branch and field staff) with individual service users and/or the Council and similar issues that impact negatively on service provision and the service user experience.

30. Raising service quality alerts is encouraged by both the council and providers as a mechanism to inform and support continuous improvement as this can pick up issues at an early stage. All alerts are logged and followed up by contract monitoring officers in conjunction with social workers and other relevant stakeholders and the information is used by both providers and the council to ensure that service is improved.
31. For the period July 2016 to June 2017 there have been a total of 63 upheld alerts received which is a lower number compared to last year's 82 upheld alerts; with 29 relating to London Care and 34 relating to MiHomecare compared to 33 and 49 respectively for last year. Quality Alerts are mostly about late, clipped, or missed visits. The new Care at Home contracts will operate an electronic call monitoring system CM2000 which will monitor these issues in real time and support the officers for robust contract management.

### **Safeguarding**

32. A Safeguarding concern is raised and investigated where there is an allegation that a service user has been subject to abuse. The abuse can be physical abuse, psychological abuse, financial abuse, neglect, etc. The allegation of abuse may be related to a care worker or a third party.
33. From July 2016 to June 2017 there have been a total of 22 safeguarding allegations with 5 relating to London Care's service users and 17 relating to MiHomecare's service users. This is higher compared to last year where only 9 safeguarding concerns were received.
34. Of the 22 safeguarding allegations received: 9 have been found to be unsubstantiated; 5 were not determined/inconclusive; and 8 have been substantiated.
35. Seven substantiated allegations related to MiHomecare and one related to London Care. The providers have been the source of reporting most of these Safeguarding concerns to us which indicates that the checks they carry out when visiting service users have a positive effect as it identifies malpractice from carers and sometimes other professionals.

### **Complaints and Compliments**

36. Both providers have mechanisms in place to record compliments received from service users and/or their family/friends/informal carers. Equally, both providers have mechanisms in place (formal Complaints Policies) to deal with service user concerns and complaints about service received. Both providers notify the Council of the number of compliments and complaints they have received on a quarterly basis.
37. During the period covered by this report (July 2016 to June 2017) a total of 50 compliments were received by the two providers. Of these 15 compliments were received by London Care and 35 compliments by MiHomecare.
38. During the same period a total of 81 complaints were received by the providers and dealt with using each provider's Complaints Policy. Of these, 26 complaints were received by London Care, of which 19 were upheld; and 55 complaints were received by MiHomecare, of which 32 were upheld.

39. This is a significantly higher number than last year's 26 complaints, where only 6 were received by London Care of which 4 were upheld; and 20 received by MiHomecare of which 16 were upheld. This year's increase is due to the Council's request that providers increase spot visits to service users' homes and telephone calls to inquire about service users' welfare and quality of care. This practice has encouraged service users and their relatives to report their issues and concerns to the providers directly.
40. Occasionally, service users will address their complaint directly to the Council. During the period covered by this report there were only 3 complaints raised with the Council's Complaints Team: 1 related to MiHomecare which was upheld and 2 related to London Care of which one was upheld. This number is a decrease to last year's 7 complaints that the council received which indicates that service users know about the providers' process and feel confident to use it to address their complaints directly with the providers.
41. The council expects providers to use complaints and compliments to help understand where things are going well and where changes need to be made. Some of the changes made by providers as a result of complaints and compliments received include:
- Using team meetings to highlight compliments received to illustrate what service users' see as good care
  - Incorporating actual compliments received (if appropriate and relevant) in customer service training to encourage and embed good practice.
  - In response to a request by the Contract Monitoring Officer for home care, collating compliments received in a file to be able to evidence compliments during the council's monitoring visits and for CQC inspections.
  - Similarly, with complaints, providers have used the real-life scenarios depicted in them at team meetings to highlight errors and poor practice from the service user's perspective.
  - Complaints scenarios (along with examples from Quality Alerts and Safeguarding cases) are also used in induction and refresher training where appropriate to underline the importance of person-centred care and seeing things from a service user's point of view.
  - Where possible they are also used in supervision with individual care workers involved in them to view complaints as positive learning tools to improve the service they provide as well as to identify training and development needs.

### **Regulatory Compliance**

42. In line with all care providers, London Care South London and MiHomecare Brockley (the branches from which home care services for Southwark residents are coordinated and delivered) are regulated by the Care Quality Commission who inspects them and publishes findings of inspections on their website.
43. The Care Quality Commission (CQC) undertakes regulatory inspections of registered services and home care is a registered service. The CQC's approach results in services being rated as:
- Outstanding
  - Good
  - Requires improvement

- Inadequate.
44. The ratings relate to the service's assessment against the following questions:
- Are the services safe?
  - Are they effective?
  - Are they caring?
  - Are they responsive to people's needs?
  - Are they well-led?
45. MiHomecare Brockley was inspected by CQC in November 2016 and the report was published in February 2017 with an overall rating of Requires Improvement. However, two of the five standards had improved from Requires Improvement to Good – Effective and Responsive. The areas that required improvement were two:
- Medicines management was not always safe
  - Carers did not always exhibit Person Centred care.
46. MiHomecare was very quick to start working on improving these areas and drafted a comprehensive action plan which was reviewed monthly. Work against improvements was audited internally on a weekly basis to ensure progress has been made. These improvements have been evidenced by us with visits to the service and holding quarterly meetings with the managers to resolve any ongoing issues in order to ensure the smooth operation of the service.
47. London Care (South London) was inspected by CQC in October 2016 and the report was published in November 2016 with a rating of Good in all five areas.

### **Service User and Carer Views**

48. Most importantly, in order to provide a rounded view of quality and performance, the council actively seeks to understand the views of people who use the services, using a variety of mechanisms. Additionally, both MiHomecare and London Care are required to seek out service user views on the home care services delivered by them and there are a number of agreed mechanisms by which they do so and report their findings to the council.
49. A summary of performance of both providers against each of the measures is set out in the tables later in this report.

### **Southwark Ethical Home Care Charter Indicators**

50. Key performance indicators for assessing implementation of the Ethical Home Care Charter in Southwark were agreed with both providers:
- Staff Recruitment (number of new starters)
  - Staff Turnover
  - Staff Qualifications (NVQs/QCFs)
  - Service User Experience; and
  - Offer of and acceptance of Guaranteed Hours Contracts by staff.
51. For each indicator the council established a baseline to provide a benchmark against which improvements could be measured.

52. The table below shows the baseline measure for each indicator (taken from the average values of the four quarters for 2015-16) and how each agency is performing against these baseline measures per quarter.

<b>London Care</b>					
	<b>Recruitment (number of new starters)</b>	<b>Turnover</b>	<b>Qualifications</b>	<b>Service User Experience</b>	<b>Guaranteed Hour Contracts</b>
<b>Baseline: Average for 2015-16</b>	<b>31.5</b>	<b>3.75%</b>	<b>18%</b>	<b>95% of sample very satisfied/ satisfied</b> <b>2% dissatisfied/ very dissatisfied</b>	<b>100%</b>
<b>Q1: Jul – Sep 2016</b>	17	14%	35%	99.9% of sample very satisfied/ satisfied 0.1% dissatisfied	100%
<b>Q2: Oct – Dec 2016</b>	19	7%	41%	98% of sample very satisfied/ satisfied 2% dissatisfied/ very dissatisfied	100%
<b>Q3: Jan – Mar 2017</b>	41	15.5%	28%	97% of sample very satisfied/ satisfied 3% dissatisfied/ very dissatisfied	100%
<b>Q4: Apr – Jun 2017</b>	20	16%	28%	96% of sample very satisfied/ satisfied 4% dissatisfied	100%
<b>Met standard?</b>	<b>No</b> (Recruitment levels are lower than baseline over 3 Quarters with a spike in Q3 which is over the baseline)	<b>No</b> (Overall increase in staff turnover over the course of 4 Quarters with a decline in Q2).	<b>Yes</b> (Overall increase in proportion of qualified staff over 4 Quarters)	<b>Yes</b> (>90% service users sampled consistently very satisfied/satisfied over 4 Quarters)	<b>Yes</b> (All workers offered guaranteed hours contracts over 4 Quarters)
<b>MiHomecare</b>					

	<b>Recruitment (number of new starters)</b>	<b>Turnover</b>	<b>Qualifications</b>	<b>Service User Experience</b>	<b>Guaranteed Hours Contracts</b>
<b>Baseline: Average for 2015-16</b>	<b>21.5</b>	<b>5.75%</b>	<b>24%</b>	<b>95% very satisfied/ satisfied</b> <b>4.75% dissatisfied/ very dissatisfied</b>	<b>100%</b>
<b>Q1: Jul – Sep 2016</b>	10	15%	42%	97% of sample very satisfied/ satisfied 3% dissatisfied	100%
<b>Q2: Oct – Dec 2016</b>	25	19%	42%	97.5% of sample very satisfied/ satisfied 2.5% dissatisfied	100%
<b>Q3: Jan – Mar 2017</b>	35	8%	43%	98.5% of sample very satisfied/ satisfied 1.5% dissatisfied	100%
<b>Q4: Apr – Jun 2017</b>	40	8%	45%	97% of sample very satisfied/ satisfied 3% dissatisfied/ very dissatisfied	100%
<b>Met standard?</b>	<b>Yes (Recruitment levels are higher than baseline over 4 Quarters)</b>	<b>No (Staff turnover has increased from last year but decreased in the last two Quarters)</b>	<b>Yes (Overall increase in proportion of qualified staff over 4 Quarters)</b>	<b>Yes (&gt;90% of service users sampled consistently very satisfied/satisfied over 4 Quarters)</b>	<b>Yes (All workers offered guaranteed hours contracts)</b>

53. One of the immediate impacts the SECC had was that from July 2015 onwards employees have been offered guaranteed hours contracts 100% of the time from both London Care and MiHomecare which is a big increase from 17% and 28% respectively.
54. One of the more challenging indicators of the SECC for both providers is turnover of staff. This is relatively high this year due to a number of reasons. Both providers state that this is due to qualified staff leaving their agencies to progress their career. Specifically for MiHomecare they reported that staff turnover increased for Q1 and Q2 due to the sale of the company and the uncertainty this caused to carers while negotiations were taking place. MiHomecare expect turnover to remain below 10% going forward which is a good percentage for homecare services operating in London.
55. London Care have now recruited a new and experienced Recruitment Executive who will be initiating and implementing new processes to specifically target carers' retention rate. One way of doing this is by improving the pre-screening interview process and thus increasing retention. Skills for Care report for 2017 that the turnover rate for London was 24% for social care so London Care's turnover is considerably below this percentage with an average of 13% across the four quarters and the same applies to MiHomecare with an average of 12.5% across the four quarters.
56. Recruitment is ongoing for both providers; however for London Care it is lower than last year. This is due to stricter pre-employment checks and changing the recruitment policy and procedure to look at new and innovative ways to recruit the best possible candidates. This is not going to compromise the mobilisation of the Care at Home contracts as the provider has taken action to address this. Already London Care report that their recruitment rates have increased and turnover has decreased considerably and is down to 5% from August onwards.

### **Provider quality assurance and user experience**

57. 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 monitor and improve the quality and safety of their services and ensure that they maintain high standards. We are working with the providers to increase response rates of their annual surveys.
58. In addition to the telephone reviews both MiHomecare Brockley and London Care South London conduct annual surveys for their service users, and the results are summarised below.

### **MiHomecare Annual Survey**

59. The survey for 2016 was scheduled to be sent out in November 2016. Due to Mitie's announcement they would be pulling out of the healthcare market the survey was delayed. As the separation from Mitie and MiHomecare has been completed a survey was issued to all service users. MiHomecare is still receiving surveys back and the work on analysing the data has started. The results of the survey will be available in March 2018.

## London Care Annual Survey

60. London Care's survey for 2017 was sent out earlier this year and although surveys have been returned the work on analysing the data has not been completed yet. Therefore the last full survey report on service users views is from 2016 and findings are summarised below.
61. London Care's survey of Southwark service users achieved a return rate of 25%.
62. Whilst the London Care survey had 3 less questions than the MiHomecare survey, the domains covered by both surveys were very similar, as the responses below illustrate:
- i. 89% of respondents felt involved (totally or somewhat) in planning their care
  - ii. 85% felt they had control (a lot or some) over how their services are provided
  - iii. 89% felt that carers (always or usually) respected their confidentiality, their privacy and upheld their dignity.
  - iv. 88% felt that carers (always or usually) worked at a pace that was comfortable for them and treated their possessions with due care.
  - v. 83% felt that carers (all or most) are competent to provide their service.
  - vi. 70% felt that the number of different carers that visit them are the right number.
  - vii. 47% reported being informed in advance (always or usually) of which care worker(s) were scheduled to attend them, and only 39% reported (always or usually) being informed if the care worker(s) attending them were running late
  - viii. When it came to dealings with office staff, 66% reported feeling (very or quite) happy, 24% were neutral, and 10% were unhappy with their dealings with office staff.
  - ix. 76% were aware of how to complain if they were not happy with the service and 77%, reported feeling comfortable with complaining about the service, with 11% reporting they would not feel comfortable complaining, and 12% didn't know whether they would feel comfortable complaining.
  - x. Overall, 84% reported being "very satisfied" or "satisfied" with the service, with 6% reporting they were "dissatisfied", and the balance of 10% remaining neutral ("neither satisfied nor dissatisfied").
63. London Care have identified areas for development as follows:
- Ensure service users are in control of the service provided and are encouraged to be as independent as possible.
  - Ensure service users are involved in care planning, including involvement of informal carers and family and that care planning is done with an increased focus on supporting client choice and independence.
  - Train office staff to improve customer service, listen to their service users and take action on any concerns expressed (outside of the complaints process) that could improve their service.
  - More consideration to be given to permanently allocating care workers to ensure continuity of care.
  - Monitor carers' standards through regular quality assurance calls with service users and spot-checks on care staff.

- Service users to be reminded how to complain and to whom and to be encouraged to do so when unhappy with the service.

### **Community impact statement**

64. These services are provided to people affected by all nine strands of the Council's equality agenda which are; Race, Gender, Age, Disability, Faith and Religion, Sexuality, Gender re assignment, Marriage and Civil Partnership and finally Child Care and Pregnancy. The diverse nature of Southwark's population is reflected in those people needing care and receiving home care services.
65. 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.
66. The universal services are able to meet a wide range of needs sensitively.

### **Financial implications**

67. The expenditure on contracted homecare for the period July 2016 to June 2017 is £10.0m. This is made up of expenditure with MiHomecare of £5.9m, and expenditure with London Care of £4.1m. The hourly rates paid have allowed for the implementation of the Southwark Ethical Care Charter (SECC) including paying carers at least at the London Living Wage (LLW). The funding of homecare (contracted and non-contracted) includes a contribution from the Better Care Fund and from the Improved Better Care Fund.

## **SUPPLEMENTARY ADVICE FROM OTHER OFFICERS**

### **Director of Law and Democracy**

68. There are no specific legal implications regarding this report, which analyses the performance of the home care contracts with London Care and MiHomecare. cabinet are advised that those contracts have been extended in line with EU procurement regulations and with the council's contract standing orders. Legal advice and assistance continues to be provided to officers in connection with the procurement and award of the new Care at Home contracts which will be fully mobilised by April 2018.

### **Strategic Director of Finance and Governance**

69. The strategic director of finance and governance notes the recommendations of this report and the ongoing work being undertaken in respect of the current procurement. It is also noted that the recent announcement regarding the increase in the LLW will impact on Care at Home contracts and this will be taken into consideration as part of the 2018-19 budget setting process.

## BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Care Quality Commission – Compliance standards		Dimitra Nikoloudaki 020 7525 2891
<b>Link:</b> <a href="http://www.cqc.org.uk/">http://www.cqc.org.uk/</a>		
Skills For Care – The Adult Social Care Sector & Workforce in London 2017		Dimitra Nikoloudaki 020 7525 2891
<b>Link:</b> <a href="http://www.skillsforcare.org.uk">http://www.skillsforcare.org.uk</a>		
Home Care Contract Monitoring Report	160 Tooley Street London SE1 2QH	Dimitra Nikoloudaki 020 7525 2891
<b>Link:</b> <a href="http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=3062">http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=3062</a>		
Home Care Annual Performance Report	160 Tooley Street London SE1 2QH	Dimitra Nikoloudaki 020 7525 2891
<b>Link:</b> <a href="http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=3404">http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=3404</a>		
Home Care Annual Contract Performance Report	160 Tooley Street London SE1 2QH	Dimitra Nikoloudaki 020 7525 2891
<b>Link:</b> <a href="http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CId=302&amp;MId=4550&amp;Ver=4">http://moderngov.southwark.gov.uk/ieListDocuments.aspx?CId=302&amp;MId=4550&amp;Ver=4</a> (Item 10)		

## APPENDICES

No.	Title
Appendix 1	Comparison of performance

## AUDIT TRAIL

<b>Cabinet Member</b>	Councillor Richard Livingstone, Adult Care and Financial Inclusion	
<b>Lead Officers</b>	David Quirke-Thornton, Strategic Director of Children's and Adults' Services	
<b>Report Author</b>	Dimitra Nikoloudaki, Quality and Performance Manager	
<b>Version</b>	Final	
<b>Dated</b>	25 January 2018	
<b>Key Decision?</b>	No	
<b>CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER</b>		
<b>Officer Title</b>	<b>Comments Sought</b>	<b>Comments Included</b>
Director of Law and Democracy	Yes	Yes
Strategic Director of Finance and Governance	Yes	Yes
Director of Adult Social Care	Yes	None
Cabinet Member for Adult Care and Financial Inclusion	Yes	Yes
<b>Date final report sent to Constitutional Team</b>		25 January 2018