POLICY & PROCEDURE FOR MANAGING POOR PERFORMANCE IN COMMISSIONED SERVICES

Document Information

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Scope of Document	Policy, procedures and guidance to be followed to manage poor contracted provider performance.
Objective	To set out a clear and robust framework for responding to and managing poor contractor performance.
Associated Documentation	Joint Policy For Managing Poor Performance In Contracted Residential Care Homes

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Amendment Record

Date	Issue No.	Section/Page	Details of Change	Authorised By:

Amendment Notes

- Documents at draft status are to use letter designations to denote issue status: a,b,c etc.

- Documents at full issue status are to use number designations to denote issue status after full revision: 1.0, 2.0, 3.0, etc.

- For an amendment to a full issue document you are to use number designation to denote issue status: 1.1, 1.2, 2.1, etc.

- On full issue the draft amendment record should be deleted from the above table.

- Notification of the amendment must be sent to the person maintaining the Central Register.

Contents

1   Scope of Policy

This document sets out Blackpool Council and Blackpool CCG joint policy on managing poor performance in commissioned Adult Social Care services.

The procedures are bespoke to Blackpool Council and Blackpool CCG and reflect successful local joint working arrangements. The principles engendered in the policy reflect best practice identified in the following publications:

- Independent Contractors Performance Policy And Procedure - NHS Bury 2011
- Management Of Contractors Policy - NHS Manchester 2011
- Commissioning Skills Development -An Introduction To Performance Management And Decommissioning - NHS Commissioning For London
- Operational Policy For The Performance Management Of Serious Untoward Incidents - NHS Ashton Leigh And Wigan 2009
- Managing Performance Of Independent Contractors Policy - NHS Central Lancashire 2010
- The NHS Performance Framework: Implementation Guidance 2011
- Monitoring Social Care Contracts: A Framework For Good Practice – CSIP 2007
- Joint Commissioning Unit Contract Management Framework Pilot - Performance Procedure Walsall Council 2008
- Independent Contractors Performance Policy And Procedure - NHS Bedfordshire 2010
- Independent Contractors Performance Policy And Procedure - NHS North Central London 2011
- Safeguarding And Quality In Commissioning Care Homes – SCIE 2012
- Performance Framework - NHS North East 2009

In broad terms, a developmental approach will be adopted that reflects mutual dependence and partnership and supports improvements in the first instance. Actions taken will be proportionate to the perceived risks to service users; the seriousness of the issues; whether contractual obligations have been breached; the relationship with the provider, and their view and response to the poor performance.

The policy relates to:

All services with which the Council and CCG both have contracts or service level agreements

The policy:

- Defines what we mean by poor performance
- Defines poor performance indicators and the trigger points for action
- Defines the range of possible responses to poor performance
- Defines roles and responsibilities

2   Principles

Ensuring the quality of services is central to our strategic approach to commissioning. The aim is to have a diverse range of high quality services in Blackpool that contribute to improving and maintaining the health and well-being and quality of life for the people using them. The focus is on the outcomes for all people using the services, not only for those people who Blackpool Council/Blackpool CCG has placed or organised services for.

There are five overarching principles that underpin this policy and procedure and these are:

Transparency	Clear and pre-determined performance measures and interventions
Consistency	A uniform approach across different types of providers
Proactivity	Thresholds for intervention that identify underperformance at an early stage so that it can be swiftly addressed
Proportionality	Intervention is related to risk and appropriate to the local circumstances
Focused On Recovery	Initial interventions focus on recovery and include action to address the root causes of issues

3   Definition of Poor Performance

For the purposes of this policy, a provider is deemed to be performing poorly if:

- The provider is not providing a good quality of service to the people using it and/or
- It is placing the health, well-being and safety of service users at risk.

Poor performance can be categorised under the following headings:

- Serious Concerns
- Underperforming
- Performing/Isolated Issue

There are no positive designations of performance beyond Performing as the focus of this policy is on unacceptable levels of performance.

Indications Of Poor Performance

Concerns about the performance of a service could arise through a number of activities. Concerns may arise as a result of a single incident, or through concerns raised over a period of time. In all cases the aim of any intervention is to minimise risks to the health, well-being, and safety of service users, and to work with contracted services to support improvements in the first instance.

The following sources of information could be indications of poor performance:

Information from CQC:

- Statutory requirements made on a service
- National Standards judged not be met
- Formal enforcement actions being taken

Information arising from investigations of complaints, concerns, and safeguarding referrals:

- Increase in volume
- Emerging patterns or trends in the nature of issues being raised
- Issues where outcomes have not been fully resolved or are inconclusive – for example: where people have retracted allegations; where there is a lack of evidence to substantiate or refute allegations
- Cases where service providers do not co-operate with investigations
- Outcomes where it is evident that there has been a risk to the health, safety and well-being of service user(s)

General:

- High staff turnover and/or frequent changes in management
- Enforcement actions taken by any regulatory body
- Loss of formal accreditation from a recognised body ie: Investors in People, RDB, ISO
- Radical changes in service design, delivery or usage.
- Contractual obligations not being met - service volume, contract standards or service specifications
- Service outcomes differ from other similar local services

4   The Managing Poor Performance Process

REACTIVE CONCERNS
Concerns, Complaints, Whistleblowing, Safeguarding, Health Professionals, Care Management, Healthwatch, CQC

PROACTIVE CONCERNS
Contract Review Visits, KPIs, Audit, Inspection, Scheduled Visits, CQUIN Return Data

SELF REFERRAL

INITIAL ASSESSMENT

Threshold

RISK ASSESSMENT

Threshold

SERIOUS CONCERNS

UNDERPERFORMING

ISOLATED ISSUE / PERFORMING

ACTION

OUTCOME

Threshold

ESCALATION

5   Initial Assessment

The purpose of an initial assessment is to determine whether the concerns that have been reported warrant further action.

Initial assessment should be undertaken by a Contracts Officer and should be carried out to determine whether poor performance exists and whether it requires action to be taken:

- As part of a scheduled contract review, or
- As part of Contracts & Commissioning Performance Management Meetings, or
- In response to concerns being expressed, or
- At any other time the Contracts Officer receives information that may indicate performance concerns.

All cases should be treated individually and objectively, and be based on all of the available evidence.

There are three possible outcomes from an initial assessment exercise:

1   The extent of the poor performance is not sufficient to warrant implementing poor performance procedures.

2   The extent of the poor performance is not sufficient to warrant implementing poor performance procedures but the situation should be monitored at Contracts & Commissioning Performance Management Meetings and or included in the next Contract Review meeting with the provider.

3   The extent of the poor performance is sufficient to warrant implementing poor performance procedures.

A template for Initial Assessment Of Concerns can be found at Appendix 1

6   Risk Assessment

The purpose of the risk assessment is to determine the level of risk that service users are exposed to.

Blackpool Council and Blackpool CCG use a shared risk assessment tool to assess the risk of harm through poor care. Using the tool can assist in making decisions about any action required to address poor performance and in developing action plans to develop specific areas of poor performance.

Risk assessments focus on the impact on service users and the likelihood of the incident occurring again. The following table shows the ranges of impact and likelihood judgments that can made using the risk assessment tool.

	Impact on Service User
Low	One-off issue, unlikely to have any long term affect on service user
Minor	Minor Minor issue where adjustments to the care has minimised the impact on the service user
Moderate	Moderate concern that has had an impact on the service user but this can be resolved through adjustments to care and treatment
High	High impact on the individual service user that requires urgent review of care and treatment
Very High	Very high impact on the service user who requires immediate review of care and treatment

	Likelihood of Reoccurrence
Rare	One-off issue, unlikely to re-occur. Risk management and Control measures in place
Unlikely	Low risk of re-occurrence, Control measures in place.
Possible	Moderate risk of re-occurrence, limited risk management and control measures in place.
Likely	High risk of re-occurrence, Risk management and controls measures do not mitigate risk to individual
Almost Certain	Very high risk of re-occurrence. No risk management or controls in place. Evidence of poor practice.

Judgments about impact and likelihood will be used to determine an overall rating of risk using the following matrix.

		Likelihood				
		Rare 1	Unlikely 2	Possible 3	Likely 4	Almost Certain 5
Impact	Low 1	Low 1	Low 2	Low 3	Moderate 4	Moderate 5
	Minor 2	Low 2	Moderate 4	Moderate 6	High Risk 8	High Risk 10
	Moderate 3	Low 3	Moderate 6	High Risk 9	High Risk 12	Extreme risk 15
	Major 4	Moderate 4	High Risk 8	High Risk 12	Extreme risk 16	Extreme risk 20
	Very High 5	Moderate 5	High Risk 10	Extreme Risk 15	Extreme risk 20	Extreme risk 25

A Template for use in conducting risk assessments can be found at Appendix 2

7   Determining Action To Be Taken

The Adult Social Care Contracts Team is responsible for communicating concerns about contracted services to partner agencies so that an appropriate course of action to be determined in each case. Decisions about actions to be taken will be made on a case-by-case basis and will take account of any related actions already being taken through the Council's or CCG's Complaints Procedures and/or Safeguarding Adults Procedures.

The following may be required to reach a decision about what action needs to be taken.

1. Seek further information about the service from internal staff, eg: Care Managers
2. Request service provider to investigate/respond to the issues and provide further information
3. Request further information and views from other agencies about the service and the situation
4. Seek advice and information from other regulators e.g. Fire, Environmental Health, CQC, Police
5. Undertake a monitoring or investigative visit to the service – conducted by CCG, Adult Social Care Contracts Team, social worker etc as appropriate
6. Carry out unscheduled reviews of service users, seeking their views and those of their representatives
7. Seek information from other internal departments and/or external agencies as appropriate, for example:

- Care Managers & other Social Work staff
- Customer Care Team
- Finance Department
- Regulatory Bodies – Commission for Social Care Inspection
- Police
- Blackpool CCG Continuing Healthcare Team

The decision to take action will be made at the Contracts Team Performance Management Meeting. The options open to the Performance Management Meeting at this stage include:

- Monitor the situation via routine monitoring arrangements and review within specific timescale.
- Increase the frequency of monitoring activity and Contract Review Meetings. (Specific procedures will be maintained for enhanced monitoring.)
- Review the risk rating of the Contract
- Provide advice and information to the service to facilitate improvements.
- Arrange a Risk Summit with involved agencies

Blackpool Council and Blackpool CCG will develop and maintain specific procedures for Performance Management Meetings.

Arranging a Risk Summit is appropriate when more robust action is required to address more serious concerns with performance. The options open to a Risk Summit include:

- Request an Action Plan from the Service stating how they intend to address the issues and their timescales for implementation.
- Re-assessment of need of specific service user(s) - where issues relate to the suitability of the service for an individual(s)
- Request the removal of specific staff members from direct contact with service users – as per Contract. Could be used in cases of suspected abuse, or misconduct.
- If the Service is a Care Home, consider changing the fee band to reflect changes in circumstances, for example, loss of IIP Accreditation
- Temporary suspension of commissioning new placements – pending investigation and/or improvements (Specific procedures will be maintained for suspension)
- Arrange alternative services for existing service users. See Section 8 below for further information.
- Cease commissioning new placements to facilitate a planned termination of the contract with the service provider.
- Termination of Contract

- Validation visit
- Issuing a warning letter or Default Notice to the provider
- Renegotiation of contract
- Suspend payment under the contract
- Decommissioning

Blackpool Council and Blackpool CCG will develop and maintain specific procedures for Risk Summits.

Actions taken will:

- Be timely and proportionate to the perceived level of risk to the health, safety and well-being of service users. Generally, the higher the risks, the more immediate and substantial the response will need to be.
- Reflect the seriousness of the issues, for example, concerns relating to the quality of care will be more serious than administrative problems such as late submission of routine monitoring information;
- Consider the extent of the perceived risks – is the service as a whole at risk or do the issues relate to an individual?
- Take into account the full range of monitoring information held about the service;
- Provide opportunity for a full investigation into the issues raised before final conclusions are drawn and actions taken.
- Consider if the terms of a Contract or Service Level Agreement have been breached;
- Consider the relationship with the service provider and adopt a proportionate response – the response to a high quality provider with few examples of poor performance could be different to the response to a poor provider with an evidence-based history of poor performance;
- Provide opportunity for the contracted service to respond to the issues raised and take their response into account;
- Take into account the ongoing support needs and wishes of all of the people using the service.

In all cases, the Contracts Team is responsible for:

- Identifying the actions to be taken
- Co-ordinating the implementation of the agreed actions
- Formally reviewing progress at a set review date
- Ensuring that the service provider is notified in writing of the outcome of reviews and of any further actions to be taken
- Ensuring that other agencies are kept informed of progress
- Ensuring that contingency planning is underway for the eventuality that the Contract is terminated

The following table shows actions that may be appropriate at differing levels of risk.

Screening	Joint Risk Assessment Judgment	Possible corrective / remedial actions
Performing	Low	Monitor the situation via routine monitoring arrangements and review within specific timescale.
		Increase the frequency of monitoring activity and Contract Review Meetings
		Review the risk rating of the Contract
		Provide advice and information to the Service to facilitate improvements.
	Moderate	Request an Action Plan from the Service stating how they intend to address the issues and their timescales for implementation. See Section 7 below for further information on Action Plans.
		Re-assessment of need of specific service user(s) - where issues relate to the suitability of the service for an individual(s)
Underperforming		Request the removal of specific staff members from direct contact with service users – as per Contract. Could be used in cases of suspected abuse, or misconduct.
		If the Service is a Care Home, consider changing the fee band to reflect changes in circumstances, for example, loss of IIP Accreditation
	High	Temporary suspension of commissioning new placements – pending investigation and/or improvements (see Procedure for Temporary Suspension of Commissioning)
		Arrange alternative services for existing service users. See Section 8 below for further information.
		Cease commissioning new placements to facilitate a planned termination of the contract with the service provider. See Section 8 below for further information.
Serious Concerns	Extreme	Termination of Contract
		Validation visit
		Issuing a warning letter or Default Notice to the provider
		Renegotiation of contract
		Suspend payment under the contract
		Decommissioning

Process charts showing decisions and actions can be found at Appendix 3.

8 Action Plans

Action Plans are used to support a developmental approach to managing poor performance, as opposed to a punitive one. A developmental approach recognises that mistakes happen and that everyone should have the chance to learn from them and to change in order to prevent reoccurrence.

When an Action Plan is required, it should be developed and agreed in partnership with the Service. Where there is support being provided by CCG staff, any action plans in place to support improvement will be included in the Council's action plan.

At this time, there may be a voluntary agreement to limit new placements with the service until agreed changes have been implemented or shown to have effectively resolved the original problem(s). Action Plans will be monitored and reviewed.

An Action Plan template be found at Appendix 4

9 Termination of Contract

A developmental approach may not always achieve the required improvements and concerns about performance may continue. If satisfactory performance is not re-established, if problems escalate or if further concerns arise it may become necessary to consider termination of a contract.

Action Plans will provide an audit trail demonstrating that reasonable time and support has been given to enable provider's to improve performance and that this has not been achieved.

Where evidence demonstrates that the provider cannot provide services at expected standards and as a result may prejudice the health, safety or wellbeing of a service user; or where evidence demonstrates that the provider cannot comply with, and is in breach of the terms and conditions of their contract with the Council and/or CCG then and it will be necessary to consider termination of a contract. The terms of the Contracts set out the mechanisms for this.

The Council's contract deals with termination at Clause 18 Accommodation And Service Agreement

The CCG's contract deals with termination at Module C Clause 32 Agreement For The Provision Of Social, Personal & Nursing Care For Adults In A Residential Setting

Termination may create the need to arrange alternative services for existing service users, possibly at short notice. The disruption this creates must be balanced against the Council's/CCG's duty of care to the people it supports.

The Contracts Officer will be responsible for:

- Co-ordinating the process with the involvement of staff from departments and agencies
- Ensuring that the service provider is notified of the actions to be taken
- Ensuring that other agencies are informed.

The Council and CCG will develop and maintain specific procedures for the termination of a contract and the moving of service users.

10   Appeals by Service Providers

Service Providers may appeal against decisions at any stage. Resolution of disputes will follow the procedure set out in the Contract that the Council and/or CCG has with them.

For Council Contracts: Clause 22 Accommodation And Service Agreement

For CCG Contracts: Module C Clause 26 Agreement For The Provision Of Social, Personal & Nursing Care For Adults In A Residential Setting

Throughout an Appeals process, the health, well-being and safety of service users remains paramount. The Council and CCG reserve the right to make temporary arrangements to ensure that service users are protected whilst disputes are resolved. Interim arrangements will be the minimum that are required to ensure service users' safety.

Appendix 1   Initial Assessment Of Concerns

Criteria		Assessment	Score
1	**What is the nature of the concern?**		
2	**How many people does the concern affect?**	All staff and service users	5
		A number of service users	4
		A single service user	3
		A number of staff	2
		A single staff member	1
3	**How long has it been since the service was last inspected by CQC or regulator?**	Never/ Don't know	5
		More than 2 years	4
		Within the last 2 years	3
		Within the last year	2
		Within the last few months	1
4	**How long has it been since the service was last subject to a monitoring visit?**	Never/ Don't know	5
		More than 2 years	4
		Within the last 2 years	3
		Within the last year	2
		Within the last few months	1
5	**Have there been previous isolated incidents?**	4 or more in the last 12 months	5
		No more than 3 in the last 6 months	4
		No more than 3 in the last 12 months	3
		None in the last 12 months	2
		None in the last 6 months	1
6	**Is there a history of underperformance?**	Judged to be underperforming in the last 6 months	5
		Judged to be underperforming at least twice in the last 12 months	4
		Not judged to be underperforming in the last year	3
		Not judged to be underperforming in the last 2 years	2
		No underperformance	1
7	**Is there a history of serious concerns about the service?**	Judged to be serious concerns in the last 6 months	5
		Judged to be serious concerns at least twice in the last 12 months	4
		Not judged to be serious concerns in the last year	3
		Not judged to be underperforming in the last 2 years	2
		No underperformance	1

8	**Is there any known concern about the service or provider?**	Significant public or internal concern	5
		Some public or internal concern	4
		A little public concern	3
		A little internal concern	2
		None	1

9	**What would be the impact of doing nothing at this stage?**	Possible death of or injury to a service user or member of staff	5
		Threat to wellbeing of a group of service users or staff.	4
		Threat to wellbeing of single service user or staff member.	3
		Organisational embarrassment.	2
		Little or no impact.	1

Appendix 2   Joint Risk Assessment Tool

A tool has been developed for use as an aid to assess the risk of harm through poor care. The tool may assist in making decisions about any action required to address poor standards of care. It should be used to assess the level of risk for a sample group of individual service users and whether any risk identified may affect other vulnerable service users within the same care setting.

Step 1
Using the risk grading tool below identify the impact of care issues for the individual(s) and the likelihood of this

Impact on Service User

Low	One-off issue, unlikely to have any long term affect on service user
Minor	Minor issue where adjustments to the care has minimised the impact on the service user
Moderate	Moderate concern that has had an impact on the service user but this can be resolved through adjustments to care and treatment
High	High impact on the individual service user that requires urgent review of care and treatment
Very High	Very high impact on the service user who requires immediate review of care and treatment

Likelihood of Re-Occurrence of Care Issue

Rare	One-off issue, unlikely to re-occur. Risk management and Control measures in place
Unlikely	Low risk of re-occurrence, Control measures in place.
Possible	Moderate risk of re-occurrence, limited risk management and control measures in place.
Likely	High risk of re-occurrence, Risk management and controls measures do not mitigate risk to individual
Almost Certain	Very high risk of re-occurrence. No risk management or controls in place. Evidence of poor practice.

To obtain the overall risk grade, locate the IMPACT and LIKELIHOOD levels from tables.
The intersecting row/column will produce the resultant risk level.

		Likelihood				
		Rare 1	Unlikely 2	Possible 3	Likely 4	Almost Certain 5
Impact	Low 1	Low 1	Low 2	Low 3	Moderate 4	Moderate 5
	Minor 2	Low 2	Moderate 4	Moderate 6	High Risk 8	High Risk 10
	Moderate 3	Low 3	Moderate 6	High Risk 9	High Risk 12	Extreme risk 15
	Major 4	Moderate 4	High Risk 8	High Risk 12	Extreme risk 16	Extreme risk 20
	Very High 5	Moderate 5	High Risk 10	Extreme Risk 15	Extreme risk 20	Extreme risk 25

	1-3	Low risk
	4-6	Moderate risk
	8-12	High risk
	15-25	Extreme risk

Impact on other Service Users

Low	Not expected to affect other service users
Minor	May have a minor impact on other service users
Moderate	Moderate risk that care issues will have an impact on other service users
High	High risk that care issues will have an impact on other service users
Very High	Very high risk that care issues will have an impact on other service users

Likelihood of Potential Impact on Other Service Users

Rare	One-off issue, unlikely to re-occur. Risk management and Control measures in place
Unlikely	Low risk of re-occurrence, Control measures in place.
Possible	Moderate risk of re-occurrence, limited risk management and control measures in place.
Likely	High risk of re-occurrence, Risk management and controls measures do not mitigate risk to individual
Almost Certain	Very high risk of re-occurrence. No risk management or controls in place. Evidence of poor practice.

To obtain the overall risk grade, locate the impact and likelihood levels from the table.

The intersecting row/column will produce the resultant risk level.

		Likelihood				
		Rare 1	Unlikely 2	Possible 3	Likely 4	Almost Certain 5
Impact	Low 1	Low 1	Low 2	Low 3	Moderate 4	Moderate 5
	Minor 2	Low 2	Moderate 4	Moderate 6	High Risk 8	High Risk 10
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	Very High 5	Moderate 5	High Risk 10	Extreme Risk 15	Extreme risk 20	Extreme risk 25

	1-3	Low risk
	4-6	Moderate risk
	8-12	High risk
	15-25	Extreme risk

	Domain	Responsibilities for populating the Tool	A Care Issues Identified (if no issues identified leave blank)	B Impact on Service user	C Potential Likelihood of re-occurrence	D Overall Risk Grading for service user	E Impact on other Service Users	F Potential of Likelihood of re-occurrence for other Service Users	G Overall Risk Grading for Other Service Users
1.	Behaviour	**Health**							
2.	Cognition	**Health**							
3.	Psychological and Emotional	**Health**							
4.	Communication	**Health**							
5.	Mobility	**Health**							
6.	Nutrition Food – Drink	**Health**							
7.	Continence	**Health**							
8.	Skin including Tissue Viability	**Health**							
9.	Breathing	**Health**							
10.	Drug therapies and medication including symptom control	**Health**							
11.	Altered states of consciousness	**Health**							
12.	Pre admission assessment process	**Social Care Care Management**							
13.	End of Life Care	**Heath**							
14.	Infection Prevention Control	**Contracts Health Care Management**							
15.	Safeguarding	**Contracts Health Care Management**							

	Domain	Responsibilities for populating the Tool	A Care Issues Identified (if no issues identified leave blank)	B Impact on Service user	C Potential Likelihood of re-occurrence	D Overall Risk Grading for service user	E Impact on other Service Users	F Potential of Likelihood of re-occurrence for other Service Users	G Overall Risk Grading for Other Service Users
16.	Mental Capacity Act and Deprivation of Liberty Safeguards	**Contracts**							
17.	Record Keeping	**Health Care Management**							
18.	Complaints Management	**Contracts**							
19.	20. Access and Referral to Primary Care	**Health Contracts**							
21.	Governance and Management	**Contracts Health Care Management**							
22.	Therapeutic Activities including Social Activity	**Contracts Health Care Management**							
23.	Staffing	**Contracts Health Care Management**							
24.	Staff Training	**Contracts**							
25.	Environment and Health and Safety	**Contracts Health Care Management**							
26.	Other								

Step 2

Ensure any immediate action is taken to address any immediate high or extreme risks for the individual(s) service user(s).

Step 3
Review and collate the sample group assessments from step 1.

Identify below any mitigating factors that may reduce the levels of risk

Mitigating Factors that may reduce the risk (consider management, staffing, providers history of working with outside agencies, sustainability)	Comment

Continue on separate sheet if required

Please record any service user/carer views on their care and treatment.

Step 4
Consider collated assessments and any mitigating factors. Assess overall level of risk and any remedial action required.

ACTION PLAN

Risk Level	Insert Tick	Action
Low		Continue with standard monitoring and review by Local Authority and NHS Commissioners.
Moderate		Service provider develops and implements action plan. Increased monitoring and support by Local Authority and NHS commissioners
High		Service provider develops and implements action plan. Increased monitoring and support by Local Authority and NHS commissioners. Consider specific measures to manage service users safety in line with Local Authority and NHS Escalation plan e.g. managing as institutional safeguarding adults referral; involving regulators; meeting with residents and families; alerting primary care; suspension of placements.
Extreme Risk		Service provider develops and implements action plan. Increased monitoring and support by Local Authority and NHS commissioners. Apply specific measures to manage patient safety in line with Local Authority and NHS Escalation plan procedure for unplanned or potential care home closure e.g. in addition to action for "high risk"; planning for alternative care.

Form Completed by:	
Date, time and method of feedback to providers:	
Designation:	
Organisation:	
Telephone:	
E-mail Address:	
Date:	
Signature:	

Appendix 3   Flow Charts

CHART 1

Concerns Received

Initial Assessment

Serious Concerns

Underperforming

Isolated Issue

Go to CHART 2

Go to CHART 2

Options

Standard Monitoring and review within specific timescale
Enhanced Monitoring
Review the risk rating of the Contract
Provide advice and information to the Service to facilitate improvements.

CHART 2

```
                    Serious
                    Concerns or
                    Underperforming
                          |
                          v
                    Joint Risk
                    Assessment
                          |
                          v
                    Risk Summit
                    (Decision on
                    Action)
          |_____|_____|
          v               v               v
    Termination       Suspension      Enhanced
          |               |            Monitoring
          v               v               |
      Options         Go to               v
                      CHART 3          Go to
  Immediate Termination                CHART 4
  Termination With Notice
```

Serious Concerns or Underperforming

Joint Risk Assessment

Risk Summit (Decision on Action)

Termination

Suspension

Enhanced Monitoring

Options

Immediate Termination
Termination With Notice

Go to CHART 3

Go to CHART 4

CHART 3

Suspension

Action Plan & Monitoring

Joint Risk Assessment

Risk Summit (Decision on Action)

Termination

Enhanced Monitoring

Standard Monitoring

Options

Immediate Termination
Termination With Notice

Go to CHART 4

CHART 4

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                    ┌──────────────┐
                    │   Enhanced   │◄─────────┐
                    │  Monitoring  │          │
                    └──────┬───────┘          │
                           │                  │
                           ▼                  │
                    ┌──────────────┐          │
                    │ Action Plan &│          │
                    │  Monitoring  │          │
                    └──────┬───────┘          │
                           │                  │
                           ▼                  │
                    ┌──────────────┐          │
                    │  Joint Risk  │          │
                    │  Assessment  │          │
                    └──────┬───────┘          │
                           │                  │
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                    ┌──────────────┐          │
                    │  Risk Summit │──────────┘
                    └──────┬───────┘
        ┌──────────────────┼──────────────────┐
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┌──────────────┐   ┌──────────────┐   ┌──────────────┐
│ Termination  │   │  Suspension  │   │   Standard   │
│              │   │              │   │  Monitoring  │
└──────┬───────┘   └──────┬───────┘   └──────────────┘
       │                  │
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┌──────────────┐   ┌──────────────┐
│   Options    │   │   Go to      │
│              │   │   CHART 3    │
│  Immediate   │   └──────────────┘
│  Termination │
│ Termination  │
│ With Notice  │
└──────────────┘
```

Appendix 4   Action Plan Template

Concern No.	Nature of Concern	Action Required	Providers response	By Whom? (Person Responsible)	By When? (Date)	Completed By Due Date? (Y/N)	Means by which compliance will be measured and Next Step (Carried Forward, or Changed & Carried Forward, or No Longer Required/ Superseded)
Source							

Appendix 5 Home Closure Plan

PREPARATION					
Action Number	**Due Date**	**Action**	**Responsible Area**	**Designated Person**	**Progress & Notes**
		Agree contract termination/default arrangements	Contracts Team		
		Prepare a list of vacancies	Contracts Team		
		Prepare a list of Blackpool funded residents, nok contact details, capacity, mobility needs, and whether advocate needed and assign workers.	Care Management /CCG		
		Prepare a fact sheet for residents and families detailing how to choose a care home or nursing home and information about any fees and contributions.	Care Management /CCG		
		Identify staff to be available for communication with residents and families	Care Management /CCG		
		Prepare briefing document for staff team involved in communication with residents and families	Care Management /CCG		
		Prepare press statement to include reasons for move and have approved by DASS, Portfolio Holder, and relevant CCG lead.	Care Management /CCG		
		Prepare a joint letter to residents and families to inform of action, process to be followed, and points of contact.	Care Management /CCG		
		Prepare letter to provider regarding notice/termination.	Contracts Team/CCG		
		Set up dedicated telephone line for residents and their families.	Care Management /CCG		
		Arrange transport for residents			

		Inform advocacy/IMCA services of intended action.	Care Management /CCG		
		Inform In House services to be ready in case staff are needed.	Care Management /CCG		
		Prepare packs of documentation for assessment process and issue to identified Social Work team.	Care Management /CCG		
		Assess all residents.	Care Management /CCG		
		Inform all out of area authorities of any affected residents.	Care Management /CCG		
		Assemble blankets, umbrellas, labels, and bags to transport belongings and medications.	Care Management /CCG		
		Provide list of vacancies to Care Management Lead.	Contracts Team		
		Hold readiness meeting	DASS		
		Finalise list of residents and whether capacity assessment/ best interests/advocacy.	Care Management /CCG		
		Complete assessments, care plans and risk assessments in readiness for new homes.	Care Management /CCG		
		Send letter to provider regarding notice/termination.	Contracts Team/CCG		
		Send letter to residents and families informing of action, process to be followed, and points of contact.	Care Management /CCG		
		Inform EDT of plans	Care Management		
		Inform CQC and SCBT	Contracts Team		
		Receiving homes to be asked to provide staff to facilitate introduction and welcome to the home.	Care Management /CCG		
		Arrange transport for resident moves and any specialist equipment to be transferred.	Care Management /CCG		

		Make appropriate arrangements for any pets.	Care Management /CCG		
		Respond to press queries	Contract Team		
		Allocated workers to visit home to explain decision pre transfer	Care Management /CCG		
		Check medication sheets and ensure that medications are appropriately packed to move to new placement. Check controlled drug records.	Care Management/CCG		
		Match care records to meds records and prepare them for moving to new home.	Care Management /CCG		
		Staff at office to contact relatives by telephone and brief them regarding situation and advise of relocations, and determine if relatives want to be present at the time of moving.	Care Management /CCG		
		Provide list of vacancies to residents and families.	Care Management /CCG		
		Provide residents and families with fact sheet detailing how to choose a care home and information about fees and contributions	Care Management /CCG		
		Provide residents and families with a contact to raise any concerns.	Care Management /CCG		
		Ensure belongings are safely packed to allow for planned transfer. Valuables and monies to be included.	Care Management /CCG		
		Provide receiving home with contact details to raise any concerns or issues.	Care Management /CCG		

Appendix 6   Suspension Plan

PREPARATION					
Action Number	**Due Date**	**Action**	**Responsible Area**	**Designated Person**	**Progress & Notes**
		Agree contract suspension	Contracts Team		
		Prepare a list of Blackpool funded residents, nok contact details, capacity, mobility needs, and whether advocate needed and assign workers to review.	Care Management /CCG		
		Identify staff to be available for communication with residents and families	Care Management /CCG		
		Prepare press statement to include reasons for suspension and have approved by DASS, Portfolio Holder, and relevant CCG lead.	Contracts Team/CCG		
		Prepare letter to residents and families to inform of action, process to be followed, and points of contact.	Care Management /CCG		
		Prepare letter to provider regarding suspension.	Contracts Team		
		Inform advocacy/IMCA services of intended action.	Care Management /CCG		
		Prepare packs of documentation for assessment process and issue to identified Social Work team.	Care Management /CCG		
		Inform all out of area authorities of any affected residents.	Care Management /CCG		
		Hold readiness meeting	DASS		
		Send letter to provider regarding suspension.	Contracts Team		
		Send letter to residents and families informing of action, process to be followed, and	Care Management /CCG		

		points of contact.			
		Inform CQC and SCBT	Contracts Team		
AFTER SUSPENSION					
		Respond to press queries	Contract Team		
		Allocated workers to visit home to explain decision pre transfer	Care Management /CCG		
		Assess all residents	Care Management /CCG		

Appendix 7   List of Residents

Name Of Home | | **Anticipated Closure Date** |

Name Of Manager | | **Type of Home** | Residential with/without Nursing

Surname	Forename	Gender (M/F)	DOB	Responsibility for Funding	Frameworki Number	Main Representative	Has Capacity Y/N	Requires Advocate Y/N	Mobility Needs

Appendix 8   Service User Key Contacts

A key contact sheet should be completed by the assessing worker for each resident that they assess.

Resident Name	
DOB	
Name of Worker Completing	

KEY CONTACTS						
Surname	Forename	Title	Relationship	Address	Telephone Number	Additional Information