Appendix 1

Care Home Commissioning – Conclusions and recommendations of Overview and Scrutiny Committee, responses to recommendations

	Overall comments on the report					
	can be improved. The Co	e Council welcomes the attention being given to the processes surrounding care homes, their commissioning and how they n be improved. The Council notes the significant work already underway across North Central London, in which Haringey is aying a prominent role both strategically and operationally, and which is reflected in the response below.				
	Recommendation	Response (Agreed / Not agreed / Partially agreed)	Who and when	Update – Current Progress, March 2019		
Dev	veloping a skilled and va	lued workforce				
1	To set up a Body to recognise the role and job description of a care worker. This would include care workers within the Domiciliary, care home and nursing home setting. This body would regulate pay and	Not agreed	Charlotte Pomery	The Council has been working with the other four boroughs in North Central London (Barnet, Camden, Enfield and Islington) to develop the Proud to Care portal – a local jobs website for people who would like to start a career in adult health and social care. The portal gives advice about careers pathways, insights into a range of job roles, and also features local jobs with a range of employers. Proud to Care also has a network of ICare Ambassadors who		
	conditions across the care sector. It would also ensure that there was scope for staff to progress in their			go into the community, schools and colleges to share their stories and showcase the range of jobs and careers on offer, both to increase the awareness of caring as a career option and to improve its status within society. Proud to Care North London was set up by the North London		
	careers. Whilst this			Sustainability and Transformation Partnership. It is a		

	would start at a local level, the aim would be to gain national recognition.			partnership between local councils, Clinical Commissioning Groups, NHS Trusts, GP practices and independent care providers across Camden, Islington, Haringey, Barnet and Enfield.
				The Proud to Care Portal is focusing first on recruitment, retention and career progression for care workers across the health and care sector.
				It is worth noting that the Council has adopted the Ethical Care Charter to drive improved standards in home care.
				Taking on a regulatory function as suggested is outside the remit of a local authority and would need careful consideration given by other bodies, notably the Care Quality Commission, operating in this area.
2	To ensure that all care workers receive a yearly appraisal, with pay review, based on an incremental system of pay within grades.	Partially agreed	Charlotte Pomery	It is for providers to work directly with their staff to ensure they have the necessary skills and development and receive appropriate levels of pay. In our quality assurance work, as with that of the Care Quality Commission, we monitor the quality and consistency of the workforce and the infrastructure which supports them, both of which are fundamental elements in delivering quality to users. As part of our service improvement and quality assurance function with providers, we monitor whether staff have appropriate appraisals and supervision and ensure that care home are meeting their statutory and contractual obligations. The Council has signed up to the Ethical Care Charter (which focuses on home care) and is also a LLW Accredited Organisation.

3	To provide accredited training for care workers, whilst ensuring there is a recognised difference of care workers within the care system, for example, frail elderly home care, learning disability care, mental health care. Training courses should be tailored to suit each speciality.	Not agreed	Farzad Fazilat	This responsibility sits with providers rather than with the local authority, except where it is itself a provider. The Council does set up some regular training courses, for example on safeguarding, but also monitors and audits the training provided within the sector which should be led by the needs of the workforce and of the particular specialism.
4	To set up a forum for care workers to meet any issues or ideas to improve care within their settings or working conditions.	Partially agreed	Charlotte Pomery	The Proud to Care portal will, over time, develop this function which will be a useful offer for care workers to learn and develop.
5	To consider working with North Central London partners to develop actions from Recommendations 1-4 on a cross-borough basis.	Partially agreed	Charlotte Pomery	This work is already in place and being developed across North Central London.
Imp	proving care provision ar	nd support for ser	vice users and care	ers
6	To set up an Independent Advocate	Not agreed	Aphrodite Asimakopoulou	There is already an Independent Advocacy service in place in the borough to respond to any issues raised with regard to
	service which would			Care Act assessments and a separate one in relation to

	provide information and			mental capacity.
	support to service users			mental capacity.
	and designated carers,			
	particularly in relation to			
	the first Social Worker			
	review for care			
	assessment.			
7	To ensure that annual	Noted for	Chris Atherton,	Annual reviews are monitored to ensure they are undertaken
	reviews of care	inclusion in the	Principal Social	and should address the wider wellbeing issues for the user as
	provision / placements	specification of	Worker	well as the sufficiency of the provision.
	take place, in order to	requirements for		
	assess whether the	a care		There is an opportunity, in the recommissioning of the
	services provided are	management		Council's care management system currently underway, to
	still appropriate for the	system		specify requirements with regard to ensuring users and
	client. Establish a	oyotom		carers, as well as practitioners, have access to assessment
	secure online portal to			and review documents as a matter of practice. This
	enable service users			recommendation will be fed into this wider piece of work to
				ensure it can be responded to fully.
	and carers (as well as			
	Social Workers) to have			
	easier and faster			
	access to all			
	assessment and review			
	documents in order to a			
	better understanding of			
	any changes to the			
	Service User's care			
	plan. Enable Service			
	Users and Carers to be			
	able to comment			
	directly via this portal			
	with the Social Worker			
	who undertook the			

	assessment in relation to any queries around the care plan. This would allow changes in care to be tracked and rational behind any changes to be explained.			
8	To request that Healthwatch carry out spot checks in every provider where there is a Haringey contract in place, and reports provided to the Local Authority and CCG.	Not agreed	Georgie Jones- Conaghan, Lead Commissioner	The current approach to commissioning HealthWatch is based on a set of statutory requirements and spot checks are carried out in response to themes identified with partners. To carry out spot checks in every provider where there is a Haringey contract would affect the way HealthWatch operates and risk not having a proportionate response to risk and issues in the system. The quality assurance function is carried out by the Council and by the Clinical Commissioning Group (CCG) working together to ensure they know their provider landscape and respond efficiently to issues and risk.

9	To ensure that better information is provided to service users and carers in relation to community provision, via Community Asset Mapping, particularly before admission to a care or nursing home setting. Specific measures could include: • Social workers putting service users and carers in touch with their local Community Care Navigators in appropriate circumstances so that they can get access to other local community groups or services that would be useful to them (e.g. in cases where the	Partially agreed	Charlotte Pomery	The ongoing Voluntary and Community Sector (VCS) Asset mapping includes regularly updated information about over 1,000 local providers. The outward facing information is available publicly at <u>http://bridges.force.com/directory/</u> and is searchable by locality, service type and beneficiary. The Social prescribing tab includes physical activity and exercise and can be selected within cohorts to show activities currently available. Asset mapping has continued and we are keen to incorporate more information and listings as these become verified and known. Local Area Co-ordinators, Care Navigators and many voluntary and community sector organisations are utilising the VCS Directory in order to connect residents up with local support, services and activities, including activities for older people, as well as advertising their current offer. We are establishing an Engagement Forum so that all the existing co-ordinator roles share information on community based activities and issues together, for direct work with residents. We are reviewing information available to users and family carers, although a printed leaflet may not be the preferred medium. We continue to update and refine Haricare in line with changing information and feedback from those using the system.

care' for less	
than 5 days a	
week due to	
budget	
	week due to budget limitations)

10 To ensure that Safeguarding information is to clients and o (e.g. leaflet up contact on not at care homes clear contact r (if home care, within the hom contract).	provided carers on first iceboards) with numbers then	Chris Atherton and Farzad Fazilat	There has been a programme of safeguarding promotion but we will continue to ensure that users and carers have easy access to safeguarding information.
The relationship k	between care provide	rs and the local authority	//CCG
11 To set up quar forums, attend CCG and Cou commissioners service provide raise any issue concerns that about funding. forum should r service provide concerns and identifiable sol the Cabinet Me improve their understanding stress within th and how the C working to ado problems withi	terly Agreed ed by ncil s, for ers to es or they have This eport the ers' any utions to ember to of the ne system council is lress any	Farzad Fazilat	A quarterly Provider Forum (indeed it often meets more frequently) is already in place and offers information sharing, promotion of best practice and opportunities for providers to raise issues. A line of communication to the Cabinet Member is already in place on an informal basis, but will be formalised to ensure that it takes place after each Forum.

		d & e - Agreed		
12	To encourage a dialogue with providers in relation to recommendations 1 – 3, to ensure that there is consistency across the board.	Agreed – subject to the status of the recommendation responses	Farzad Fazilat	This recommendation is being taken forward through the Provider Forum mentioned above.
13	To work with the CCG to address concerns around funding for local providers.	Agreed	Charlotte Pomery	This issue and possible funding solutions are the focus of existing work between the CCG and the Council.
14	To embed Social Workers within the staff of the new GP hubs to enable better coordinated care delivered in a community setting.	Agreed	Jon Everson	The localities work in North Tottenham is progressing integrated working in Locality Teams, which will include a multi-agency offer, including social workers.