Report for: Adults & Health Scrutiny Panel, 18 January 2016

Item number: 12

**Title:** The multi agency approach to safeguarding and quality assurance

in relation to the provider market.

Report

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Ward(s) affected: All

Report for Key/

Non Key Decision: Non Key Decision

#### 1. Describe the issue under consideration

1.1 This report outlines the work currently underway to develop a multi-agency approach to safeguarding and quality assurance, with particular reference to the provider market.

#### 2. Recommendations

- 2.1. The Adults and Health Scrutiny Panel is asked to note the following:
  - The work to develop a multi-agency approach to quality assurance and safeguarding, which will affect the provider market

#### 3. Reasons for decision

- 3.1 Section 5 of the Care Act 2014 sets out new duties for Councils with regard to shaping local authorities to facilitate and shape their market for adult care and support as a whole, so that it meets the needs of all people in their area who need care and support, whether arranged or funded by the state, by the individual themselves, or in other ways. The ambition as set out in the Care Act is for local authorities to influence and drive the pace of change for their whole market, leading to a sustainable and diverse range of care and support providers, continuously improving quality and choice, and delivering better, innovative and cost effective outcomes that promote the wellbeing of people who need care and support.
- 3.2 Section 48 of the Care Act places new duties on local authorities to meet need when a care provider becomes unable to carry on a regulated activity because of business failure.
- 3.3 The Council recognises the changing landscape for adult social care both in terms of the Care Act and its own commissioning intentions as set out in the Corporate Plan and the Market Position Statement. The Council is therefore



strengthening its approach to quality assurance and contract monitoring across all provision to ensure a continued focus on quality of provision.

## 4. Alternative options considered

# 4.1 Not applicable

## 5. Background information

- 5.1 As previously reported to the Adults and Health Scrutiny Panel, there is an established safeguarding and quality assurance process in place with regard to providers, based on the approach set out clearly and published in the Market Position Statement 2015. This is complemented by the Haringey Provider Failure Policy which enables the local authority, in the event of business failure, to step in to meet needs of people affected by business breakdown.
- 5.2 The Safeguarding Adults Board now receives regular reports on the level of safeguarding alerts, whistle blowing and quality issues raised with regard to the provider market, keeping all partners appraised of any areas of concern.
- 5.3 Quality assurance in Haringey is important to ensure that services for local residents are safe and operating to a high standard. There is a link between effective safeguarding and effective quality assurance in the provider market and services and providers operating to a high quality are likely to experience fewer safeguarding incidents, and to respond to them more effectively where they do occur, than providers delivering services of a lower quality standard. Quality assurance is also about ensuring that the quality assurance resources that are available are deployed effectively to target on those areas and providers most in need of improvement. There are a range of methodologies and measures that the Council and partners use to assure the quality of services for local residents.
- 5.4 It has been acknowledged that the previous approach to quality assurance has been largely inward looking and whilst holding providers to account has relied on the Council being the primary agency in the process. The new model being developed is one which reflects the multi-agency requirements of the Care Act and where assuring the quality of services is carried out in partnership with a range of stakeholders, including providers, to enable greater understanding, a richer response and wider ownership of the process.
- 5.5 In this new model everyone including people who use services, relatives, carers, providers, staff delivering services including social care staff and health practitioners, safeguarding professionals and regulatory bodies such as the Care Quality Commission and HealthWatch all have a role to play to contribute to the improvement in the quality of care provided for Haringey residents. As members of the Panel will recall from previous reports, there are regular meetings between the Council, the Clinical Commissioning Group and the Care Quality Commission to share intelligence and to undertake planned joint work in addition to work in response to incidents or alerts raised around quality and or safeguarding standards in particular providers.
- 5.6 In order to take this work forward, a new sub-group of the Haringey Safeguarding Adults Board has been established to ensure that local quality



assurance and safeguarding arrangements are effective across all partners. This will be supported by a revised Quality Assurance Framework and an annual work plan. Draft Terms of Reference were presented to the most recent meeting of the Safeguarding Adults Board held in October 2015 for approval following discussion across the partnership. The sub-group will take forward the priorities agreed at a recent workshop considering how partner organisations across Haringey could work together to develop a more joined-up approach to improving quality across health and social care in Haringey. The priorities were identified as better communication and safeguarding across the partnership. Next steps include looking to develop quality champions in each organisation that can signpost people appropriately and facilitate better connections between organisations, ensuring providers are fully engaged in the partnership, extending the invitation to include health and community agencies, undertaking a review of current safeguarding intelligence to identify where more strategic interventions may improve quality across the system and seeking to integrate safeguarding across the partnership through developing a multi-agency approach.

5.7 It is worth noting that the new Pan London Safeguarding Policy and Procedures have very recently been published. The Council now needs time to review the new Policy and make the amendments required to local procedures and practice. It is proposed that flow charts setting out the procedure for raising safeguarding and quality alerts are presented to the Adults and Health Scrutiny Panel at its meeting.

# 6. Contribution to strategic outcomes

6.1. The work set out above contributes to delivery of Priority Two (Healthy Lives) of the Corporate Plan and to delivery of the Care Act 2014.

# 7. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)

- 7.1. Finance and Procurement
- 7.1.1. This report is for noting only and there are no financial implications arising directly out of this report. There are also no procurement issues arising.
  - 7.2. Legal
  - 7.2.1. There are no legal implications arising from the recommendations in the report
  - 7.3. Equality
  - 7.3.1. The care groups affected by safeguarding and quality assurance processes are people with protected characteristics. There will be positive impacts particularly on older people (over 65) and people with disability (including mental health) in responding in a timely and effective way to any quality and safeguarding issues as these will affect delivery of their care and support needs.

## 8. Use of Appendices



9. Local Government (Access to Information) Act 1985