

Provider Services (Cumbria Care) Quality Assurance & Governance Framework

Purpose of Report

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- To provide an update and give an overview around the quality assurance and governance frameworks held within Provider Services.

Current position

Provider Services – 28 Regulated Services with CQC inspection results

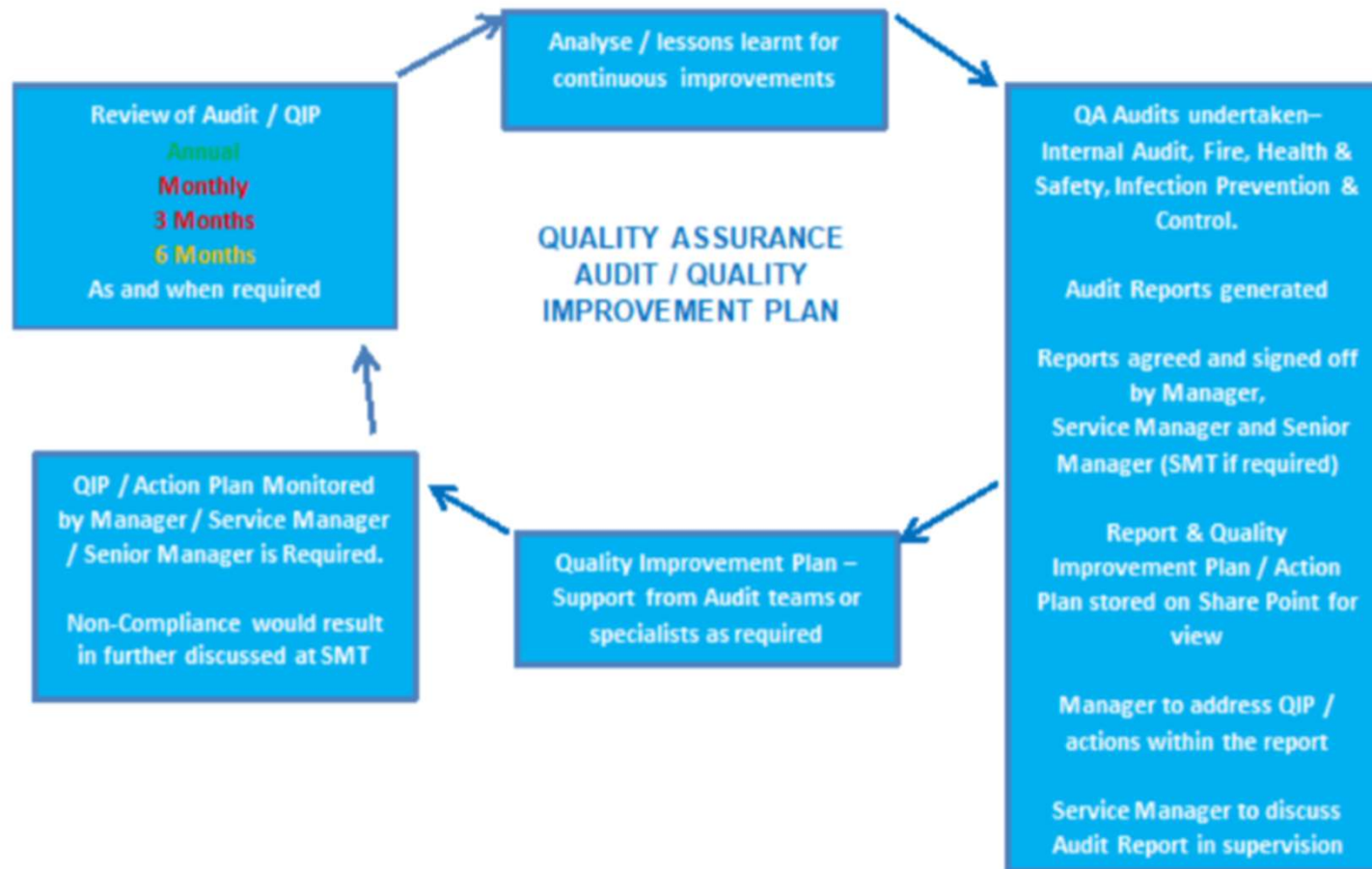
No of registered Services	Outstanding	Good	Requires improvement	Comments
4 Supported Living Services	0	3	0	1 Not yet inspected
3 Support at Home / Reablement Services	0	3	0	
18 Older Adults Residential Services	1	16	1	
1 Disability & Mental Health Residential Service	0	1	0	
1 Shared Lives	0	0	0	Not yet inspected
1 Extra Care Housing Service – (supporting 9 locations)	0	0	0	Not yet inspected

26 Non Regulated Services (Disability and Mental Health / Older People)

Performance Framework and KPI's

Older Adults Residential Service Performance Dashboard 2022 / 2023																			
Monthly Picture: 2022/2023																			
Measure																			
CQC/Audit																			
	CQC Inspection Date	20/01/2020	10/11/2020	07/09/2022	05/11/2019	03/12/2019	27/11/2022		10/10/2018	15/09/2021	09/03/2021		04/12/2019	19/11/2019		27/03/2018	16/10/2019	16/10/2018	16/10/2018
	Overall Rating	Good	Good	Good	Good	Good	Good		Good	Outstanding	Good		Good	Good		Good	Good	Good	Requires Improvement
Occupancy	No. of Registered beds	27	37	60	28	33	40		13	40	23		19	15		60	29	32	60
	No. of Covid Adjusted beds	25	37	59	25	32	38		10	38	23		19	14		58	28	30	57
	No. of beds out of commission (Average in month)	13	12	16	10	10	8		3	9	5		1	1		16	8	2	17
	No. of service users (occupancy) (Average in month)	12	20	42	14	21	29		6	29	18		17	10		40	20	28	40
	% Occupancy of Covid adjusted beds (Average in month)	48%	55%	71%	56%	65%	77%		60%	76%	78%		89%	71%		69%	71%	84%	70%
	% Occupancy of available beds (Average in month)	96%	82%	98%	93%	93%	98%		86%	100%	100%		84%	77%		95%	100%	99%	99%
	Comments																		
Activity	Admissions to permanent beds	2	0	2	0	1	0		0	0	0		0	0		1	0	0	3
	Admissions to interim beds	0	0	0	0	0	0		0	1	0		0	0		0	0	0	0
	Admissions to D2A beds	0	0	0	0	1	0		0	0	0		0	0		0	0	0	0
	Admissions to respite beds	0	4	0	0	0	0		0	0	0		0	0		0	0	0	2
	Admissions to emergency respite beds	0	0	0	0	0	0		0	0	0		0	0		0	0	0	1
	No. of people left permanent beds	0	0	0	1	1	0		0	1	0		0	0		1	0	1	0
Medication Errors	No. of medication errors	6	0	9	0	0	1		2	0	1		0	0		0	0	0	0
	Missed dose	0	0	5	0	0	1		0	0	0		0	0		0	0	0	0
	Wrong dose given	0	0	0	0	0	0		0	0	0		0	0		0	0	0	0
	Given at wrong time	0	0	0	0	0	0		0	0	1		0	0		0	0	0	0
	Given to the wrong person	0	0	0	0	0	0		0	0	0		0	0		0	0	0	0
	Signed for not given	0	0	0	0	0	0		0	0	0		0	0		0	0	0	0
	Missed signature	4	0	3	0	0	0		2	0	0		0	0		0	0	0	0
	Stock discrepancy	0	0	1	0	0	0		0	0	0		0	0		0	0	0	0
	Other	2	0	0	0	0	0		0	0	0		0	0		0	0	0	0
Safeguarding	No. of Safeguarding contacts raised	0	1	0	0	1	0		1	0	2		2	0		1	0	1	2
	No. of contacts passed to Safeguarding	0	0	0	0	1	0		0	0	0		0	0		0	0	0	0
CQC Notifications	CQC notifications (total)	0	3	1	0	1	1		0	2	1		0	0		3	0	1	3
	DOLs/DOL/ LPS	0	0	0	0	0	0		0	0	0		0	0		1	0	0	1
	Serious Injury to Service User	0	2	0	0	0	1		0	1	1		0	0		1	0	1	2
	Abuse / Allegation of Abuse	0	0	1	0	1	0		0	0	0		0	0		0	0	0	0
	Death of a Service user	0	1	0	0	0	0		0	1	0		0	0		1	0	0	0
	Interruptions to Safe Operations	0	0	0	0	0	0		0	0	0		0	0		0	0	0	0
	Incidents involving the Police	0	0	0	0	0	0		0	0	0		0	0		0	0	0	0
DOLs	No. of DOLs referrals submitted but not assessed	0	0	0	0	1	3		0	0	0		1	0		4	0	2	3
	No. of DOLs reviews that are outstanding	6	2	23	3	12	19		1	7	6		1	0		22	7	9	18
Health & Safety	Service users: Fatalities, Major accidents and incidents (RIDDOR)	0	0	0	0	0	0		0	0	0		0	0		0	0	0	0
	Staff: Fatalities, Major accidents, incidents and injuries or over 7 days Absence (RIDDOR)	0	0	0	0	0	0		0	0	0		1	0		0	0	0	0
	Service users: incidents (excluding Falls)	0	0	1	0	0	1		0	0	0		0	0		2	0	0	1
	Service user: Falls	3	5	5	1	4	13		0	7	3		3	0		11	7	2	5
Working Time	No. of staff working in excess of 48 hours over 17 weeks reference period	0	0	0	0	2	0		0	0	0		0	0		0	0	0	2
	No. of staff working in excess of 50 hours in any week	0	0	0	0	0	0		1	0	0		0	0		0	0	0	0

Overall Approach / QA Strategy

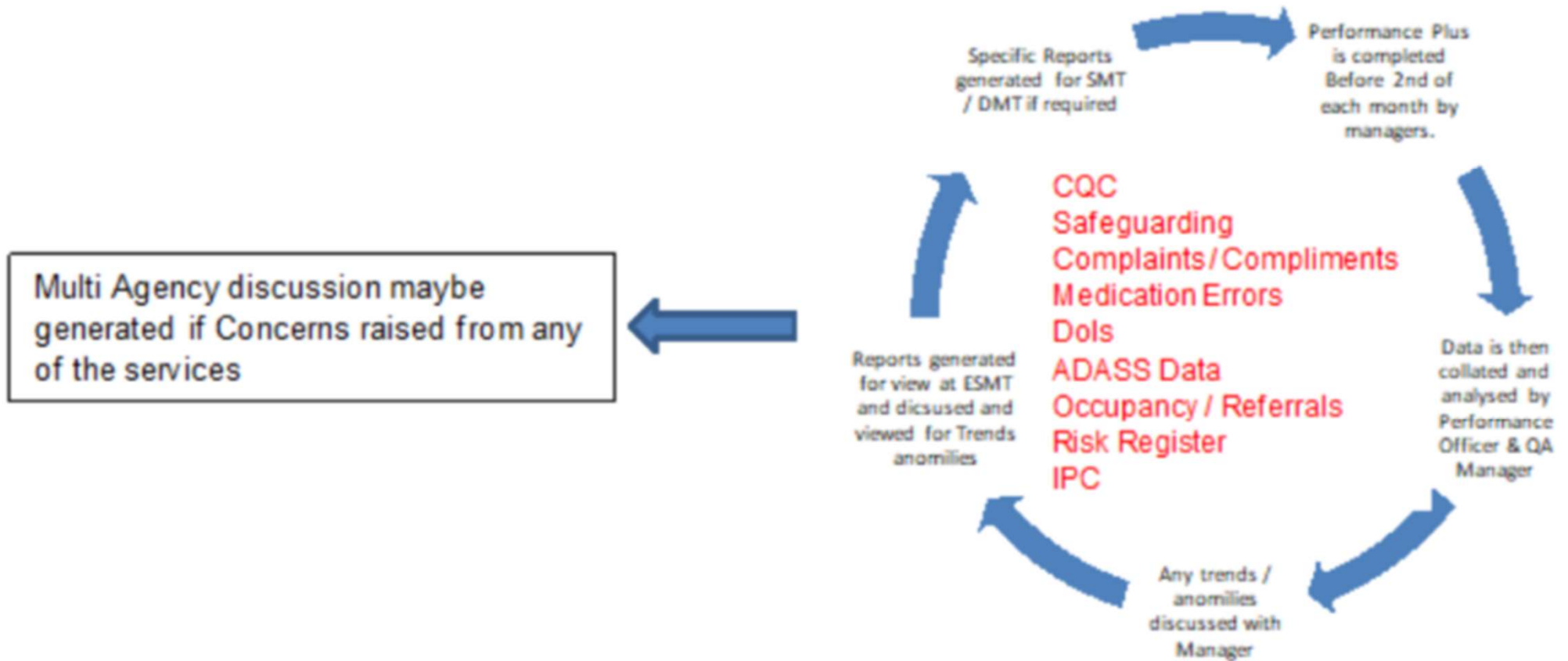


What is a quality concern?

Concern comes in any source – it can come internally or externally, from staff, other professionals, families or service users.

Processes may be different but the outcome should be the same

PERFORMANCE CYCLE



Provider Services Development Plan

Provider Services Programme Plan							
Project Title	Milestones	Project Manager	Dependencies	Internal Lead	Start	End	RAG
Support at Home							
Travel Time Pilot - Reablement South Lakes		Susan Renucci		Ange Dodds	05/08/2021	09/01/2022	
	Travel Time Codes set up in Cygnum				05/06/2021	06/08/2021	
	Communication sent out to all teams concerned				05/06/2021	06/08/2021	
	Quality checks completed				05/08/2021	11/08/2021	
	Go live of pilot				16/08/2021	12/09/2021	
	Review meeting with support staff				24/11/2021	24/11/2021	
	Update TT to pilot				27/11/2021	14/12/2021	
	Review meeting with support staff				12/01/2022	12/01/2022	
	Update TT and monitor				13/01/2022	09/02/2022	
	Monitoring				10/02/2022	23/03/2022	
	Final Review Meeting				23/03/2022	23/03/2022	
	Old south lakes TT codes reoved from system				24/03/2022	31/03/2022	
	6 month review meeting				TBC		
Hire cars for Support at Home		Emma Huddart		Louise Daggart	12/12/2019	01/04/2022	
	Pilot - staff declined to take part				12/12/19	30/02/20	
	Mapping exercise to identify number of cars / locations needed				09/03/21	15/03/21	
	Meeting with DN & DW (identify & discuss sites for vehicles)				16/04/21	06/07/21	
	Visit potential sites to identify parking availability				16/08/21	20/08/21	
	Request / Grant permissions for car parking access				20/08/21		
Support Worker Tablets		Susan Renucci		Lou Daggart			
	Scoping exercise to be carried out on devices				10/02/2022	01/05/2022	
	Devices to be sourced and built				02/05/2022	05/06/2022	
	Devices to be deployed for testing				06/06/2022	12/06/2022	
	Initial testing of devices to be carried out				13/06/2022	30/06/2022	
	Review of initial testing				30/06/2022	30/06/2022	
Cygnum Reporting - TBC		Agnes Adams		Susan Renucci			
Exception Reporting Domiciliary Services							
Trusted Assessment - North ICCs		Susan Renucci		Lou Daggart			
	Meeting with Strata to discuss requirements				23/05/2022	27/05/2022	
	Meeting with ICC Manager to confirm referral requirements				27/06/2022	01/07/2022	
	Develop detailed implementation project plan				04/07/2022	10/07/2022	
Cygnum System Development		Emma Davis		Susan Renucci			
	Preperation completed				10/06/22	10/06/22	
	Service User Purchaser Updated and Complete				04/07/22	04/07/22	
	Service User Contract Jobs Updated and Completed				04/07/22	04/07/22	