

HEREFORDSHIRE COUNTY COUNCIL

Case study



1. The story so far

The Quality Assurance Framework sets out the approach that Herefordshire Council takes to ensuring local care and support services provide what individual residents need. It is a set of processes with one goal – to deliver high quality care and support services to the citizens of Herefordshire.

Herefordshire's social care services are facing challenging times due to both the county's ageing population and the practical challenges that service delivery in a rural county brings. A key priority for the council, however, is that people can be confident that the care and support they receive will be of high quality and that they will be safe and treated with dignity and respect.

2. Developments

- An intelligence-based dashboard (examples on p29 and p30 of the framework) has been developed as part of the Quality Assurance Framework for care homes, community care, extra care, and supported living.
- There are two dashboards running simultaneously, one for community care (including extra care and supported living) and one for care home providers. Both are live systems, updated continuously. The intelligence used includes: safety and/or quality concerns, safeguarding referrals, bed occupancy, mortality rates, deprivation of liberty safeguards (DoLS) data, Care Quality Commission (CQC) ratings and reablement data, all supplemented by relevant data from other sources.
- Intelligence which indicates increasing levels of risk to the quality of services are managed within the quality and review team and reviewed with a multi-agency panel on a regular basis. Where concerns reach above Level 2 (see below), they are escalated to the directorate leadership team (DLT) with a recommendation they raise the level of concern to 'large scale investigation' status.
- A matrix for allocating weighting using several key risk indicators has been developed to arrive at an overall red, amber, green (RAG) rating which may trigger the need for further investigation.
- When concern about a service is triggered by the RAG rating, the council convenes a multi-agency quality assurance panel (MAQAP) which includes the service provider, CCG, CQC, the police, Healthwatch, safeguarding and others as appropriate.
- The council shared this new approach with providers in two workshops and the presentation can be found [here](#)

There are four levels of concern:

Pre-Level 1

This means contact with the provider is made, requesting baseline information about users of the service and staff training. This, together with information already available from the dashboard, is reviewed and a decision made to either reduce the level of concern and return to routine monitoring, or to escalate to a Level 1 concern with the agreement of the MAQAP.

Level 1

This means site visits by the council to services can be announced or unannounced. These visits occur where there is a degree of concern about the quality of service and that it may be adversely impacting on the outcomes for the people who use it. A service remains at Level 1 until a Service Improvement Plan (SIP) is completed and signed off by the provider and the council.

Level 2

This reflects an increased level of concern which could significantly impact on the service and outcomes for the people who use it. This level involves more extensive visits, again either announced or unannounced. The lead managers for contracts, quality and review and safeguarding meet with the provider to address any issues within

the SIP, agree how to overcome any barriers to progress, agree any additional support needed and a timescale for completion of the SIP.

Level 3 – Large Scale Investigation (LSI)

An LSI is instigated because of serious concerns, including a failure to meet improvements within the given timescale as part of the SIP agreed at Level 2. The process followed is detailed within the Safeguarding Adults Establishment Concern policy – see p27 in the Quality Assurance Framework. All potential LSIs are immediately reported by the MAQAP to the DLT.

As part of the investigation, a SIP is agreed with the provider and partners and reviewed regularly. Service users and/or advocates are also asked for feedback about their providers

3. Benefits of Herefordshire's approach

- Data from multiple sources is collected and held in one place.
- Emphasis is on quality and improvement, rather than cost, and the SIP approach is designed to be a collaborative and supportive process, intervening early where necessary to reduce the likelihood of problems escalating.
- Provides the council and people who use services with assurance that there is a shared commitment to improving the quality of care.

4. Challenges and impacts

- Resources – the process of information gathering is time consuming.
- Relationships with providers have been enhanced because the process is experienced as supportive and all parties invest in improvements. Leadership from knowledgeable, skilled and experienced officers has also influenced positive change in the services who have been part of this approach.

5. Future developments

Self-reporting – the framework allows us to review our providers using a risk-based approach however this has meant our work has focused predominately on providers who may be a cause of concern. We are now embedding self-reporting as a regular part of quality monitoring to ensure we have regular contact with all of our providers, not just those indicating a higher level of risk.

6. Top tips

- Don't underestimate the lead-in time needed to develop new systems.
- Ensure you have enough resources and capacity to update dashboards in real-time.

Contact for more information

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