

PROTOCOL FOR THE MANAGEMENT OF ESCALATING CONCERNS IN CWM TAF COMMISSIONED SERVICE PROVISION

Cwm Taf Safeguarding Board	Date: March 2018	Status: Approved (A4)	
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1. INTRODUCTION

- 1.1 In May 2009 the then Welsh Assembly Government issued statutory guidance to address the management of escalating concerns, and closures of, care homes that are registered with the Care Inspectorate Wales (CIW) to provide services to adults, including those providing nursing care.
- 1.2 The guidance was issued under section 7 of the Local Authority Social Services Act 1970 and sections 12 and 19 of the National Health Service (Wales) Act 2006. It set out the responsibilities of statutory agencies in this regard, together with ways in which these responsibilities can be discharged.
- 1.3 This Protocol sets out how statutory responsibilities will be met in practice in Cwm Taf, i.e. the County Borough Councils of Rhondda Cynon Taf and Merthyr Tydfil and Cwm Taf University Health Board in accordance with the Welsh Assembly Government's guidance in relation to escalating concerns regarding care homes.
- 1.4 However, this protocol extends the principles of the Guidance to all local authority or health board commissioned services for adults, in particular to domiciliary care and supported accommodation, and will apply equally to these Providers. This protocol will also be used where there are concerns for the performance of Council-owned Care Homes and other Council direct service provision.
- 15. When Providers are being monitored via this protocol, Cwm Taf Safeguarding Adults Board will be informed via the Adults Quality Assurance sub-group and the Adults Operational Committee. Providers in the Escalating Concerns process will be reported at every Quality Assurance sub-group.

2. SHARING INFORMATION AT AN OPERATIONAL LEVEL

- 2.1 The guidance states that statutory agencies need to ensure they have a Joint Inter-agency Monitoring Panel (JIMP), consisting of senior managers from the Commissioning Bodies, in place in order to lead the escalating concerns process and arrangements.
- 2.2 In Cwm Taf, the JIMP will be informed and advised by a Cwm Taf Multi Agency Operational Group (MAOG). The purpose of this group is to gather and share intelligence and concerns relating to service provision within the Cwm Taf area.
- 2.3 Cwm Taf MAOG membership is drawn from
 - Cwm Taf University Health Board,
 - Rhondda Cynon Taf and Merthyr Tydfil County Borough Councils, as sole or joint service commissioners. Specifically, membership will be drawn from the Cwm Taf University Health Board's Continuing NHS Healthcare Team and the County Borough Councils' Purchasing and Commissioning Team, Adult Safeguarding Team, Complaints and the Care & Support Teams.
 - The Care and Social Services Inspectorate for Wales, as the regulatory body, will also have representation on the Cwm Taf MAOG.

- 2.4 The Chair of the Cwm Taf MAOG will be jointly held by the Service Manager for Purchasing & Commissioning for Rhondda Cynon Taf and Merthyr Tydfil County Borough Council and the vice-chair will be jointly held by the Adult Safeguarding Service Manager for Rhondda Cynon Taf and the Safeguarding Principal Manager for Merthyr Tydfil County Borough Council. Where a Rhondda Cynon Taf Provider is being discussed, the Chair will be the relevant Rhondda Cynon Taf manager and when a Merthyr Tydfil provider is being discussed, the meeting will be chaired by the relevant Merthyr Tydfil manager. Administrative support for the Cwm Taf MAOG will be supplied by Rhondda Cynon Taf Business Support staff.
- 2.5 Members of the Cwm Taf MAOG will be sufficiently experienced and qualified in order to analyse and interpret the intelligence gathered and arrive at a measured view of the concerns reported and the degree of risk to service users that these concerns, if verified, represents.
- 2.6 Cwm Taf MAOG will meet every month. However, meetings can be convened between these intervals if it is felt that situations in individual care home settings have become sufficiently acute as to warrant an urgent meeting being convened.
- 2.7 Information and concerns will be collated on an information database, owned by the Chair of the Cwm Taf MAOG. The "Escalating Concerns Information Sharing Form", which is attached as *Appendix 1* is the referral form for the MAOG and can be used by any agency or professional. This should be done as and when concerns arise and/or as a consequence of routine involvement/intervention with the service provider during, for example, Nurse Assessor, Contract Monitoring Officer or care manager visits, from the receipt of suspected adult at risk reports and complaints. Other than in urgent cases (where the Chair will have discretion to add other providers to the agenda), information sharing forms should be received 2 weeks prior to the monthly MAOG meeting and the papers for the MAOG meeting will be sent out a week in advance.
- 2.8 Within the Cwm Taf MAOG meeting, the information gathered on individual service providers is discussed, with each agency representative providing information that they have gathered and then risk assessed. A risk rating is awarded for each provider using the risk assessment tool attached as *Appendix 2*. Agency representatives will also be responsible for sharing information from MAOG with relevant colleagues and services, so that all professionals who have regular contact with the provider and/or its residents are aware of the concerns and risks.
- 2.9 **ORANGE/RED** risk situations are forwarded to the relevant Local Authority JIMP with recommendations, agreed by the MAOG, for authorising appropriate action/s.
- 2.10 **GREEN/YELLOW** risk situations are monitored by the MAOG until they are resolved or have escalated to the point where they become **ORANGE/RED** high risk situations, as agreed by the MAOG, and recommendations are made to the JIMP to authorise appropriate action/s.
- 2.11 Recommendations for appropriate actions will be relayed to the JIMP by the Chair within 5 working days of the MAOG via the Cwm Taf MAOG

Recommendation Form attached as *Appendix 3*. This form will also contain a rationale for the action/s recommended and will be signed off by the Chair of the MAOG on behalf of the Group.

3. JOINT INTER AGENCY MONITORING PANEL (JIMP)

- 3.1 JIMP membership is at senior manager level and drawn from the Local Authorities and Health Board as service commissioners and the Care and Social Services Inspectorate for Wales (CIW) as the regulatory body:
 - Adult Service Director Rhondda Cynon Taf County Borough Council or Head of Adult Services - Merthyr Tydfil County Borough Council (determined by the geographical location of the service provision)
 - Director of Nursing Cwm Taf Health Board
 - Area Manager Care and Social Services Inspectorate for Wales
 - The Chair/Vice-Chair of the Cwm Taf MAOG for the relevant Local Authority
 - Head of Care & Support Service for Rhondda Cynon Taf County Borough Council or principal manager for Care & Support Services for Merthyr Tydfil County Borough Council (determined by the geographical location of the service provision)

The JIMP will be chaired by the Adult Service Director, Rhondda Cynon Taf County Borough Council, or the Head of Adult Services, Merthyr Tydfil County Borough Council.

- 3.2 Membership of the JIMP is at this level within the relevant agencies in order to ensure that the necessary authorisation can be given to the recommendations for appropriate action/s made by the MAOG in relation to service providers that have been risked assessed as ORANGE/RED.
- 3.3 A meeting of the JIMP will be convened when concerns, and recommendations for appropriate actions for their management, are brought to its attention by the MAOG.
- 3.4 The JIMP will be responsible for authorising a range of recommended actions made by the MAOG, including but not necessarily restricted to:
 - Implementing Developmental Action Plans (DAPs) and Corrective Action Plans (CAPs) that have been drafted by the service provider with support from the relevant Commissioning Team via Provider Performance meetings.
 - Sharing the Home's status with the Pan-Wales Commissioning Network
 - Placing partial or complete service suspensions on the service provider
 - Informing external placing agencies of escalating concerns.
 - Withholding, in part or whole, payments to the provider.
 - Termination of main contracts.
 - Formation of a Home Operations Support Group (HOSG)
- 3.5 The JIMP will meet with providers at Responsible Individual level at the point of referral to the JIMP by the Cwm Taf MAOG meeting and then at regular intervals determined by the JIMP whist the risk remains at ORANGE/RED in

order to convey the appropriate weight of concern, and for the possible imposition of punitive measures.

4. <u>DECISIONS OF THE JIMP</u>

- 4.1 The JIMP will decide within 5 working days of receipt of the MAOG recommendations whether the recommended appropriate action/s should be implemented. The JIMP will make decisions on the recommended appropriate action/s as follows:
 - To grant authorisation for the recommended action/s without qualification (this may include a Provider Performance Meeting, led by the Commissioning Teams).
 - To grant authorisation for the recommended action/s but with qualification/s (this may include a Provider Performance Meeting, led by the Commissioning Teams).
 - To request further information/explanation from the MAOG.
 - Not to grant authorisation for the recommended action/s.
 - To direct alternative action/s to be taken.
- 4.2 A record of the JIMP's decision will be made on the "Escalating Concerns Recommendations and Decisions Form", attached as *Appendix 3*.
- 4.3 The decision form may be signed off solely by the Chair of the JIMP for residential and domiciliary care providers, but, for nursing placements, the decision form must also be signed off by the Director of Nursing. Where a decision is made purely in relation to contractual action/s, the Chair of the JIMP can sign the form individually on behalf of the Panel. In the absence of the Chair, this can also be done by the Director of Nursing.
- 4.4 The JIMP will return the completed Decision Form to the Chair of the MAOG. Where the JIMP has made a decision other than to grant authorisation for the recommended action/s without qualification, it must record its rationale for so doing.
- 4.5 The MAOG will implement the decision of the JIMP and monitor progress at its meetings, adjust the risk rating accordingly and report back to the JIMP if necessary. Further Provider Performance Review meetings can be held to monitor the Corrective/Developmental Action Plan. The initial Provider Performance meeting should be held within 5 working days of the recommendations being agreed by the JIMP. Provider Performance Meetings will be led by the Local Authority Commissioning Team, with representation from the Local Health Board (for nursing providers) and from Safeguarding.

5. SERVICE SUSPENSIONS

- 5.1 Where the Cwm Taf MAOG awards a **RED** risk rating to a service provision a recommendation will be made to the JIMP for its removal as a provision of choice from the service commissioners' choice procedures.
- 5.2 In a care home setting, depending upon the nature and extent of the concerns presenting and the arrangements of the care home, the home may accommodate a variety of resident categories within different units for example,

- so the recommendation could be made for either a partial or complete service suspension to be put in place.
- 5.3 In relation to other types of service provision, the service suspension may also be full or partial for example one provider may deliver a number of different services and where the issues from one service do not affect delivery of other services, a partial service suspension may be appropriate.
- 5.4 The Cwm Taf MAOG will be responsible for monitoring how effective the actions authorised by the JIMP have been in addressing the concerns presenting with the service provision.
- 5.5 The risk rating attached to the service provision will be re-evaluated against the level of improvement made to the presenting concerns.
- Where the Cwm Taf MAOG determines that the level of risk has improved to an **ORANGE** rating a recommendation may be made to the JIMP for the service suspension to be relaxed (but not lifted) in order to allow for a limited and phased return to full business. This will be considered with a view to encouraging the provider to continue to strive for improvements but must be balanced against the risk that remains.
- 5.7 Therefore, in order for such a recommendation to be made, a *majority* decision must be reached by members of the MAOG that such an improvement equates to and warrants this relaxation. If a majority decision is not reached by members of the Cwm Taf MAOG, the service provision will continue to be subject to the service suspension as originally applied.
- 5.8 Where the MAOG determines that the level of risk has improved to a YELLOW rating or below, a recommendation may be made to the JIMP for the service suspension to be lifted entirely.
- 5.9 Where the JIMP approves the lifting of the service suspension, this will not necessarily affect the continuation of other measures authorised by the JIMP to run alongside the service suspension as the suite of appropriate actions.
- 5.10 When the JIMP has authorised that an service suspension be applied to or lifted from the service provision, the relevant Chair of the Cwm Taf MAOG will be responsible for communicating this decision to:
 - Relevant Heads of Service and Team Managers
 - Other Commissioning Bodies
 - The Responsible Individual and Registered Manager of the service provider.

CIW will be aware through its representation on the MAOG and JIMP.

GLOSSARY OF TERMS

JIMP - Joint Inter-agency Monitoring Panel.

This is a panel of senior officers from the Commissioning Bodies (the Local Authorities and Local Health Board), who make decisions about actions taken to safeguard service users where service standards are falling below what is expected. The JIMP can decide to impose service suspensions and may take legal advice with a view to the termination of contracts.

MAOG - Multi-Agency Operations Group

The MAOG consists of practitioners and stakeholders from relevant organisations who meet monthly to share intelligence and make recommendations to the JIMP regarding necessary actions.

Provider Performance Meeting

This is a meeting between the Commissioners and the Providers at an operational level which will scrutinise and monitor action plans produced by Providers in order to drive up standards where specific concerns have been identified in MAOG

Corrective Action Plan/Developmental Action Plan

Where a Provider has been risk-assessed as amber or red by the MAOG, a recommendation to the JIMP may be that an action plan should be developed by the Provider so that any deficits can be addressed and resolved. Corrective action plans tend to be more short-term and ensure that there are immediate actions to resolve practice standards that appear to be unsafe.

APPENDIX 1

MAOG Information Sharing Form

When there are concerns about specific Care Homes, information is gathered through a number of sources and although this information is usually shared between agencies/Divisions there is a need to formalise this process in a more timely, structured and formal mechanism. The Escalating Concerns Information Sharing Form has been developed to assist this process. Each agency representative will have responsibility for logging any concerns raised through their individual monitoring procedures thus enabling consistency in the approach.

	Name of Home						
			Designation				
	discussion						
	Agency			Date			
	Please provide detail of your concern:						
Plea	ase detail any evidenc	e to validate conc	ern.	(e.g. service us	ser records, service user/	family	
	dis	closures, staff sup	ervi	sions, training	records)		
Dloo	oso indicato any links to	Contract/Corrigo	Sno	oification Outo	ome and Performance Me	OCHROC	
	table below)	o Culti acu sei vice	Spc	circation Outc	ome and 1 citormance wie	asuics	
1	Please tick areas		V	Please tick areas	<u> </u>		
	Effective and Individual Car	tive and Individual Care Staying Healthy					
Dignified Care			Safe Care				
	ı						
То	be discussed at MAO	G		Yes /	No		
	Date of MAOG						
	utcome of Discussion						

Residential, Nursing and CHC

Outcome and Performance Measures					
1 Effective and Individual Care	V	2 Dignified Care			
People maintain and develop their full potential to be independent		People maintain contact with family and friends and build new relationships within the home and wider environment.			
People feel safe and supported despite their changing care needs		People are an active part of their community in appropriate settings.			
People understand their service plan and how it helps them achieve what matters to them		People build positive relationships with staff.			
People influence how their care is delivered and how activities in the home are organised		People are able to maintain continued access to faith based support and their to specific cultural communities			
People's rights are promoted and upheld.		People enjoy a good quality of life			

3 Staying Healthy	 Safe Care	V
People feel supported and in control of their transition into a care home.	People feel protected from abuse or the risk of abuse.	
People have access to specialist services, and where appropriate, multidisciplinary care that is designed to support rehabilitation after a period of ill health	People feel positively supported and free from discrimination	
People are encouraged and supported to maintain healthy lifestyles	People are supported to make a complaint or comment about the service	
People are supported to meet their nutritional and hydration needs, to stay well or maximise recovery from illness or injury	Deprivation of Liberty Safeguards are used appropriately and in accordance with the Mental Capacity Act 2005.	
Medication is safely administered to the right person at the right time for the right reason,	People are supported to manage their own finances where appropriate and have the capacity to do so.	
The use of Anti Psychotic drugs is regularly reviewed		
People receive appropriate continence care and support		
The communication and wellbeing needs of people with a sensory loss are fully supported		
The emotional health of people living at the care home is good		
People are supported to reduce the risk of injury and harm from falls		

Domiciliary Care

Outcome and Performance Measures					
1 That people will be supported to become as independent as possible in their own homes and reliance on formal service delivery will be reduced	V	2 That people are supported to meet their identified wellbeing outcomes	V		
Packages of care commence at the agreed date & time		Service delivery plans clearly indicate the outcomes and how they will be achieved			
number of unplanned review forms received where there has not been a change in the service users level of need		% of care packages where outcomes are being met at review			
The number of home care packages that remain the same at review		Service user feedback indicates that their wellbeing outcomes are being achieved			
The number of home care packages that increase at review					
The number of home care packages that decrease at review					
3That Vulnerable people are safe from harm		4 That people receive a quality service that is delivered consistently by appropriately trained staff			
Training records — indicate that staff have received health & safety and moving and handling training to the All Wales passport level		CIW reports demonstrate good practice Contract monitoring identifies good practice Learning from complaints process in place Staff are trained to undertake role			
Recruitment records- % audit of staff files that contain appropriate documentation		Rotas show consistency of allocated staff			
Number of POVA's directly relating to poor practice of the agency or staff providing support, resulting in a strategy meeting					
% of missed or late calls (Definition of a late call is over an hour late where as a missed call is a call that has not been received).					

APPENDIX 2

ESCALATING CONCERNS RISK ASSESSMENT

Risks will be assessed and reviewed during the Cwm Taf Multi Agency Operational Group (MAOG) meeting, using the matrix below.

An overall risk rating will be determined by multiplying the Likelihood of the risk (scale of 1 to 4) by the Impact of the risk (scale of 1 to 4).

The colour coding represents the current level of risk rather than the progress made against the required improvements.

			Impact			
Likelihood	Score	Insignificant	Minor	Moderate	Major	
		1	2	3	4	
Almost Certain	4	4	8	12	16	
Likely	3	3	6	9	12	
Possible	2	2	4	6	8	
Unlikely	1	1	2	3	4	

Reporting Process

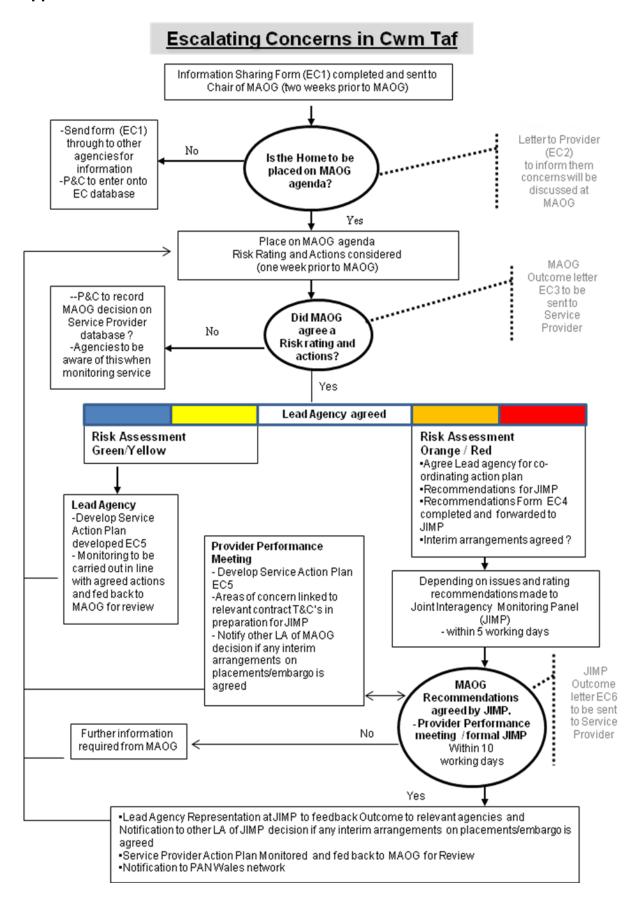
Score	Colour	Actions / Recommendations
1-2	GREEN	Monitored by the MAOG until risks are resolved
3-6	YELLOW	Monitored by the MAOG until risks are resolved or have escalated to the point where they fall within the Higher risk score rating (Orange).
8-9	ORANGE	Recommendations forwarded to the JIMP for authorising appropriate action/s.
12-16	RED	Recommendations forwarded to the JIMP for authorising appropriate action/s, which will include a recommendation for a suspension of business.

APPENDIX 3

Multi Agency Operational Group (MAOG)

Escalating Concerns F	Recommendation and D	ecision Form	
Name of Provider			
Date of MAOG (when recommendate	ntion agreed)		
Risk Assessment Score			
Date Decision Form to be return	ned		
	e) are made by the MAOG followed by individual agencies throu concerns Procedures.		
Identified Concerns			
Recommendations / Rationale for	decision:		
Signed by Chair of MAOG:	Date:		
Decision (at JIMP)			√
I agree recommended action/s wi	thout qualification		
I agree recommended action/s bu			
I require further information/expla		elow)	
I do not grant authorisation for the	e recommended action/s.		
Rationale for decision / Further In	formation required:		
			I
Signed:	Signed:		
<u>Designation:</u> Date:	<u>Designation:</u> Date:		
Dale.	Dale.		

Appendix 4



Appendix 5: EC2 TEMPLATE

Letter to Provider - Responsible Individual copy to Manager if appropriate

My ret: Please ask for: Telephone: Email:	Date:
Dear	
Escalating Concerns at	
	vice name) at the Multi Agency Operational Group (MAOG) recent reviews that were carried out by (insert agencies
procedures for the management The MAOG comprising representations.	Group meetings are held under the provisions of the local t of escalating concerns in <i>(insert service area)</i> in Cwm Taf. ntatives from the Council, Cwm Taf University Health Board as Inspectorate for Wales will be held on <i>(Insert date)</i> .
	sed at the MAOG have already been shared with (insert who nager, Deputy) following the review visit. However, for your ed below.
The main concerns that have be	een highlighted following the reviews include;
- (Insert summary of areas	s of concern and how this was identified)
I will write to you following MAO	G to inform you of the outcome of the discussions.
Yours sincerely,	
Mark Anderton	ices, Rhondda Cynon Taf County Borough Council rthyr Tydfil County Borough Council
Lynda Williams	

Director of Nursing, Midwifery and Patient services - Cwm Taf University

Health Board

Appendix 6: EC3 – Template letter Letter to Service following MAOG meeting

My ref:	
Please ask for:	
Telephone:	
Email:	
Dear	
Deal	-
Escalating Concerns at	

I am writing to you on behalf of the Multi Agency Operational Group (MAOG) and refer to our correspondence dated <u>(insert date of EC2 letter)</u>. As you are aware your service was discussed at the MAOG meeting on <u>(insert date of MAOG)</u>. The discussion at MAOG included feedback following (insert reviewing agencies).

I am writing to you to advise you of the outcome of the meeting of the MAOG in accordance with Cwm Taf Escalating Concerns procedures. Present at the meeting were representatives from the Contracts Team, Reviewing Team, Nurse Assessors, Safeguarding Team, Complaints Team and also CIW where appropriate.

The main focus of our discussion was in relation to the following areas of concern;

(Insert areas of concerns)

The MAOG felt that the concerns noted above warranted a (insert risk rating).

The next stage of the process means that

Green - No further action service monitored through usual contract arrangements

Yellow - Service Action Plan to be developed and outcome to be feedback to MAOG for Review

Amber - Invite to meet with Joint Interagency Monitoring Panel (JIMP), requesting a formal response

and detailed actions to address the concerns. Insert timescale for response.

Red- Invite to meet with Joint Interagency Monitoring Panel (JIMP), requesting a formal response

and detailed actions to address the concerns. Insert timescale for response.

Include any interim conditions on placements/service provision.

The JIMP consists Senior Managers from the Local Health Board and Local Authority and Senior Manager at CIW where appropriate.

If you have any further questions or would like any other information please let me know.

Yours sincerely,

Neil Elliott Lynda Williams

Service Director Adult Services, RCT Or Mark Anderton Head of Adult Services, MT

Director of Nursing, Midwifery and Patient services - Cwm Taf University Health Board

Date:

Appendix 7:		
	Name of Home	
	Corrective Action Plan	
	Data	

Action 1

Ref No.	Required Action	Response from the Home 05-05-17	Rating/ timescale	Monitoring	Outcome of Monitoring Visit

Appendix 8: EC6 LetterEC6a – Template letter
Letter to Service following JIMP meeting

My ref: Please ask for: Telephone: Email:	Date:
Dear	
Escalating Concerns at	
- Insert areas of concern	in the main areas of concern, outlined below,
(Insert risk rating) and a recommendation was	MAOG felt that the concerns noted above warranted the made to JIMP to be placed, phased placements/packages of care etc.
As you are aware the outcome of the JIMP meet and you were informed that an - Insert the agreed condition of placement.	eting confirmed their agreement to the recommendation ents/service
The following actions agreed at the JIMP meeting actions agreed and timescales.	
Yours sincerely,	
Neil Elliott Service Director Adult Services, RCT Or Mark Anderton Head of Adult Services, MT	Lynda Williams Director of Nursing, Midwifery and Patient services - Cwm Taf University Health Board

EC6b – Template letter Letter to Service following JIMP meeting

My ref: Please ask for:	Date:
Telephone:	
Email:	
Dear	
Re: Escalating Concerns at	

I am writing to confirm the outcome of your meeting with the Joint Interagency Monitoring Panel (JIMP) that was held on _(insert date)__. The JIMP meeting focussed on (insert one of the following)

- The concerns raised at MAOG
- progress in addressing the actions set out within the Corrective Action Plan.

As you are aware the Multi Agency Operational Group met on (*Insert date*) where it was acknowledged that whilst work is being undertaken to address these issues the risk rating remained at (*Insert risk rating*)

I would confirm that following the discussion we had with you at the JIMP meeting regarding the above the following areas for action were agreed

(insert agreed actions)

I would reiterate that due to the lack of sufficient progress made (Insert confirmation of current conditions on placements)

- To address the issues raised at MAOG
- In the delivery of the action plan

this has resulted in

- the placing of an embargo on (insert which unit/area the embargo is set)
- The embargo remaining in place
- Imposing other conditions e.g.
 - Placements to be agreed by Service Managers LA and UHB
 - any resident admitted to hospital will need to be re-assessed and their return to your home approved by either the Health Board for CHC and nursing placements or the Local Authority for residential placements.

As discussed at the meeting the JIMP continue to have serious concerns in relation to ______. It was emphasised that if there continues to be a lack of progress in addressing these concerns the Contracting Authorities will need to consider their position in regard to the current contract with the home.

Yours sincerely,	

Neil Elliott Service Director Adult Services, RCT Or Mark Anderton Head of Adult Services, MT Lynda Williams
Director of Nursing, Midwifery and Patient
services - Cwm Taf University Health Board