

Meeting of South Ayrshire Health and Social Care Partnership	Integration	Joint Board	
Held on	14 th Decem	ber 2022	
Agenda Item:	13		
Title:	Quality Ass	surance Framework – First year update) _
Summary:			
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Author:		son, Senior Manager – Planning, ce and Commissioning.	
Recommendations:			
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Route to meeting:			
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Directions:			
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QUALITY ASSURANCE FRAMEWORK – FIRST YEAR UPDATE

1. PURPOSE OF REPORT

The purpose of this report is to provide IJB members with an update on the Quality Assurance Framework - external providers assurance checks, which are carried out by the HSCP's Commissioning team.

2. **RECOMMENDATION**

- 2.1 It is recommended that the Integration Joint Board
 - i. Note the report attached (Appendix 1)
 - ii. Note the progress made to undertake Quality Assurance evidence and actions
 - iii. Note the effectiveness of the Quality Assurance Framework

3. BACKGROUND INFORMATION

- 3.1 South Ayrshire HSCP created and introduced a refreshed 'contract monitoring' tool during April July 2021. This followed a few years where 'contract monitoring' across external providers was less robust; In part due to covid as well as a period of change where the new procedure of Contract Supplier Management was undertaken by corporate procurement team to ensure that providers KPI's were reported on.
- 3.2 Prior to the Quality Assurance Framework being implemented, resources within the Commissioning team were not able to provide the volume of assurance visit checks as was perhaps required, at that time being more reactive than proactive and supportive. Whilst there was a degree of structure, there was also a degree of inconsistent approach as each service provider group was allocated to different officers who undertook contract monitoring. This was also influenced by the way in which providers gathered and collected monitoring and KPI information. The Quality Assurance Framework has levelled these variations across all providers.
- 3.3 The Quality Assurance Framework was developed during April 2021 June 2021, and the first visit using the framework carried out late June 2021.
- 3.4 During July to October/November, the framework process was applied to a small number of providers to test and review the process to ensure that this was effective, responsive, and positively received by our providers. The providers were at that time identified through the Community Support Oversight Group, based on issues, challenges and concerns shared through that network.



4. REPORT and KEY POINTS

- 4.1 Appendix 1 details a summary report on the Quality Assurance Framework developed and introduced during early summer 2021. The report also provides information on the number of visits undertaken, those with follow up visits and the planned approach which is the aspiration of the HSCP.
- 4.2 Quality Assurance is a key area of focus for the HSCP. Previously, across the HSCP it was recognised that various processes provided evidence of issues, challenges, concerns and of quality It was clear that depending on how that information was received the overall position was not always joined up. The purpose of the Quality Assurance Framework is to bring together information and evidence collectively to then form an assessment of quality of provision.
- 4.3 The process allows interrogation of a range of information; for example: management and leadership; training (provision, content and understanding of the subject); communications between the HSCP and the provider and service user; record keeping; policy and procedures compliance (internal to the provider); compliance with South Ayrshire shared policies; and achievement of Contract outcomes.
- 4.4 The Quality Assurance Framework process allows an 'initial finding' to be discussed at the weekly Community Services?? Oversight Group, resulting in earlier supports or actions to be agreed. The Quality Assurance reports are governed through the Community Service Oversight Group. The range of professionals on that group draw together multi-faceted skills, experience and knowledge base which can support and inform on good practice and pathways to training or learning.
- 4.5 The Quality Assurance Framework will not replace other professional assessments e.g., Care Inspectorate inspections. Whilst it is the responsibility of the HSCP to undertake their own assurance checks, the information will be shared with Care Inspectorate teams who will carry out their own assessment.
- 4.6 Several providers who are commissioned to deliver fostering services are not yet included in the Quality Assurance Framework allocation. These services are subject to regular reviews including care planning reviews which provide appropriate assurance on quality of support.
- 4.7 It is recognised that during the first 6 or so months of implementation, most visits carried out were reactive. The vision and aspiration is to move the majority of Quality Assurance visits to being proactively carried out; in advance and with the aim of preventing critical challenges. The number of planned visits detailed in Section 3 of the adjoining reports sets out the aspiration to be proactive.
- 4.8 Providers will be subject to at least one Quality Assurance visit per year. It will be determined through the gathering and monitoring of evidence and intelligence if further visits are required.



- 4.9 The Quality Assurance Framework will be reviewed for effectiveness, transparency, success and robustness at regular intervals and will be developed to ensure that this offers the HSCP the highest level of assurance as possible. This will include a review of the resources required to deliver against this.
- 4.10 The number of visits exceeds the number of providers. This is explained as 2nd phase of the allocated visits as some areas of business were prioritised in the early stages. This has resulted in some providers now being planned for their annual visit.

5. STRATEGIC CONTEXT

The Quality Assurance Framework provides evidence that the HSCP are meeting people's needs across South Ayrshire are in line with the Strategic Plan 2021 – 2031 objectives:

- that they are supported to age well by keeping them healthy and in their homes for as long as possible.
- being open, honest and friendly.
- Give information on how you can keep active and well; and
- Listen to them and support people to take control of their own care.

6. IMPLICATIONS

6.1 Financial Implications

6.1.1 None from this report.

6.2 Human Resource Implications

6.2.1 None from this report.

6.3 Legal Implications

6.3.1 None form this report.

6.4 Equalities implications

6.4.1 None from this report.

6.5 Sustainability implications

6.5.1 None.

6.6 Clinical/professional assessment

6.6.1

7. CONSULTATION AND PARTNERSHIP WORKING

7.1 N/A



8. RISK ASSESSMENT

8.1. N/A

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6th December 2022