

NORTH YORKSHIRE COUNTY COUNCIL

HEALTH & ADULT SERVICES

Process for Suspension of Commissioned Services

The purpose of this document is to make the process for a suspension of a service open and transparent to HAS staff and Providers.

Background

1. North Yorkshire County Council Health & Adult Services Directorate (HAS) maintains a number of Lists of Approved Providers these cover care homes & care homes with nursing, domiciliary & non-residential care services including supported living and non-regulated services (non-regulated is defined as providers who are not regulated by the Care Quality Commission). In some instances these lists may be joint with Children & Young Peoples Services. To be included on one or more of these lists the provider must submit an application, with supporting documentation, and an evaluation process is completed. HAS also commissions services via block contracts or Framework Agreements.
2. Most of the time there are no issues regarding the quality of services being delivered. However, in some instances it may be necessary to take action where the quality of service being delivered falls short of the expected standard. This action may include suspending a Provider from a List of Approved Providers or Framework Agreement or suspending access to a service commissioned via a block contract. The same process is used when monitoring the standard of in house services.
3. Suspension of a service is seen by HAS as a last resort and even when a suspension is implemented, apart from the most serious circumstances, the intention would be to work with the Provider via an agreed action plan to improve the service to a level where the suspension can be lifted. The action plan will contain a timeframe for the improvements and also for reviews of the suspension by HAS.

Grounds for Suspension

4. The Council will consider suspension if there are significant or persistent grounds for concern which prejudice the effective operation of the service or are so serious as to prejudice the Provider's future viability to deliver the service. This will include:
 - Providers for whom CQC has raised verifiable concerns about compliance with the Fundamental Standards.
 - Providers where a number of complaints have been received, investigated and upheld by the Provider or HAS.
 - Providers where a number of Safeguarding concerns (or a significant adult or child safeguarding issue) have been investigated and found to be substantiated. It is acknowledged that the number of issues raised, particularly where they have originated from the Provider themselves, is not in itself a reason for suspension. In fact, a large number of alerts from the Provider may be a positive response on their part showing awareness of safeguarding issues. Also, in cases where issues have

been substantiated the remedial action taken by the Provider will be taken into account.

- Concerns identified during the monitoring process, financial irregularities, lack of insurance, etc. which has been captured in the Provider Risk Profile process.
 - Contract compliance issues, which are serious and recurring.
 - Information obtained from a Baseline Assessment Visit or Quality Assurance Framework Validation Visit.
 - Or a combination of any of the above.
5. In these instances consideration will be given to the circumstances leading to complaints or safeguarding investigations to ensure this is not related to changes in reporting practices within the Provider organisation or other reasonable explanation.
 6. A suspension could also be applied to a Provider with whom HAS is not currently working, i.e. no current placements, but where they have been included onto an Approved Provider List or Framework Agreement and there are significant or persistent concerns.
 7. A suspension would also be applied if any Provider accepted on an Approved Provider List, Framework Agreement or is in receipt of a block contract has a suspension placed upon it by a host Local Authority. The Council will not lift its suspension whilst a suspension is in place by the host Local Authority, if the Provider is delivering services outside of North Yorkshire boundaries.
 8. If CQC issues either a Notice of Proposal or a Notice of Decision to remove a Providers registration then the Council will automatically suspend the Provider, if they are not already suspended. The suspension will remain in place for the duration of any Notice of Proposal or Notice of Decision issued by CQC.

Suspension Process

9. The process will be initiated where the Council has concerns relating to complaints, safeguarding issues or other concerns as detailed in this document. Information that is verified by the CQC relating to areas of non-compliance with the Fundamental Standards or where the CQC have concerns will also be considered.
10. The Quality & Monitoring Team will routinely collate information regarding significant or persistent concerns from Care & Support staff, the Brokerage Team, CQC, other local authorities etc, as well as feedback from Contract Compliance, Quality Assurance Framework Validation Visits and Baseline Assessment Visits, and may collate information regarding all services delivered by the Provider (both within and outside NYCC boundaries) to identify whether the same issues may be present elsewhere in the Provider organisation.
11. If it is felt that it is necessary to suspend the Provider, either as an initial step to ensure the safety of People or following lack of progress in achieving targets agreed in the action plan, the Quality & Monitoring Team will, make a recommendation to HAS's Assistant Director of Quality & Engagement which takes into account the views of relevant staff within HAS, as appropriate. This recommendation will detail whether the suspension relates to new placements or whether alternatives should be considered for those People already placed. Also, where a Provider has more than one service in operation, consideration may be given to the possibility of the issues leading to the suspension affecting their other services and whether these services will also be suspended from the Provider List or Framework Agreement. Where the views of relevant staff within HAS differ to those of the Quality &

Monitoring Team both views will be included in the suspension report presented to HAS's Assistant Director, Quality & Engagement, for a decision.

12. When considering the terms of a suspension, it will be determined whether respite or short term packages can proceed. Where respite / short term packages have already been planned / received, and where making alternative arrangements would be detrimental to the person in receipt of the service, i.e. additional confusion / agitation for someone with dementia, permission may be given for these placements to proceed. This will be considered on a case by case basis and must be agreed by the Assistant Director, Quality & Engagement or Head of Quality & Monitoring in advance of the respite/short term package taking place and shall be recorded.
13. Where a suspension is agreed, HAS shall notify the Provider in writing, and timescales for reviewing the situation will be specified. The letter of suspension shall also include the internet link to the suspensions process and details the Provider's right to appeal.
14. The decision to suspend placements is not made in conjunction with any other statutory organisation, who may also make the independent decision to suspend placements e.g. CCG's.
15. The decision of HAS to suspend placements is in no way linked to the actions of the CQC. A Provider of a Service may be deemed to be meeting the standards set by the CQC; however, HAS may feel that the risks to the Service warrant a suspension of placements.
16. Also, when the decision is taken to implement a suspension the Provider will enter the Collective Care process, if they are not already. The Collective Care Process will run parallel to the suspension process and is a separate process.
17. If a suspended Provider is a known sub-contractor for a Framework Provider, the Framework Provider will be notified of the suspension.
18. The Quality & Monitoring Team may consult with the Council's Direct Payment Service depending on the level of concern's. This may be in the form of a formal meeting or discussion, at which point a decision will be made on whether any Direct Payment customer's should be informed of the Council's decision. Other local authorities in the local regions, CCG's, plus any identified local authorities purchasing services from the Provider will be notified of the decision to suspend.
19. All communication within HAS regarding the consideration of the Provider's status and any subsequent suspension will be channelled through the Quality & Monitoring Management Team. This will prevent a duplication of information and also the crossover of information.
20. Police investigations may at times take precedence and restrict the Council's ability to review a suspension of placements. In these instances the Council will update the Provider, with the consent of the investigating Police Authority.
21. Care Services Managers, Safeguarding Officers and the Quality Assurance & Procurement Officers will liaise regarding identified concerns. Care Services Managers, Heads of Locality Commissioning and Head of Communications will be kept informed of any action taken by the Quality & Monitoring Team.
22. Discussion will take place between Care & Support staff and the Quality & Monitoring Team regarding the appropriateness of informing People using the service, Carers and family

members and agreeing who will pursue this. In circumstances where it is appropriate, the Provider will also be included in the discussions.

23. The Provider shall produce an action plan, including the areas for improvement identified together with realistic timescales for improvements to be made. The action plan shall be agreed with HAS and reviews of the suspension will reflect the dates set by the Provider for progress to be made.
24. The maximum anticipated term of the suspension will be made clear to the Provider. These timescales will reflect the number and nature of the improvements to be made and will be realistic (SMART).
25. The Provider may be invited to a meeting to discuss the suspension chaired by the Quality & Monitoring Team along with the Care Services Manager (and other agencies, which may include other local authorities currently purchasing Services from the Provider, CQC, etc, if appropriate) to discuss the situation. The Provider will be asked to share their proposals for improvement in the Service.
26. All meetings held to discuss concerns and actions to be taken will be recorded, in writing, and will be shared with the Provider within 10 working days of the meeting.

Appeals

27. The Provider will be given 28 days to appeal against the decision to suspend, with any appeal being made in writing to the Assistant Director, Quality & Engagement in the first instance. An (Appeals) form is attached at Appendix A. The Assistant Director, Quality & Engagement will consider the appeal and respond to the Provider within 28 days of receipt of the appeal.
28. If the Provider is dissatisfied with the outcome of the appeal, they can request that the matter is referred to the Council's Corporate Director, Health & Adult Services for consideration. This request must be received by the Council within 7 working days of the date of the first appeal being rejected by the Assistant Director, Quality & Engagement. The Provider's request must state the nature of their appeal and what elements of the initial appeal they do not agree with so that the matter may be considered further. An (Appeals) form is attached at Appendix B.
29. The decision of the Council's Corporate Director, Health & Adult Services will be shared with the Provider within 28 days of receipt of the final appeal. This decision is final.
30. During the appeals process the suspension of placements will remain in place until such a time that a final decision can be shared with the Provider. The Council will ensure that any decision to revoke the suspension will be communicated to the Provider within 24 hours of this decision.

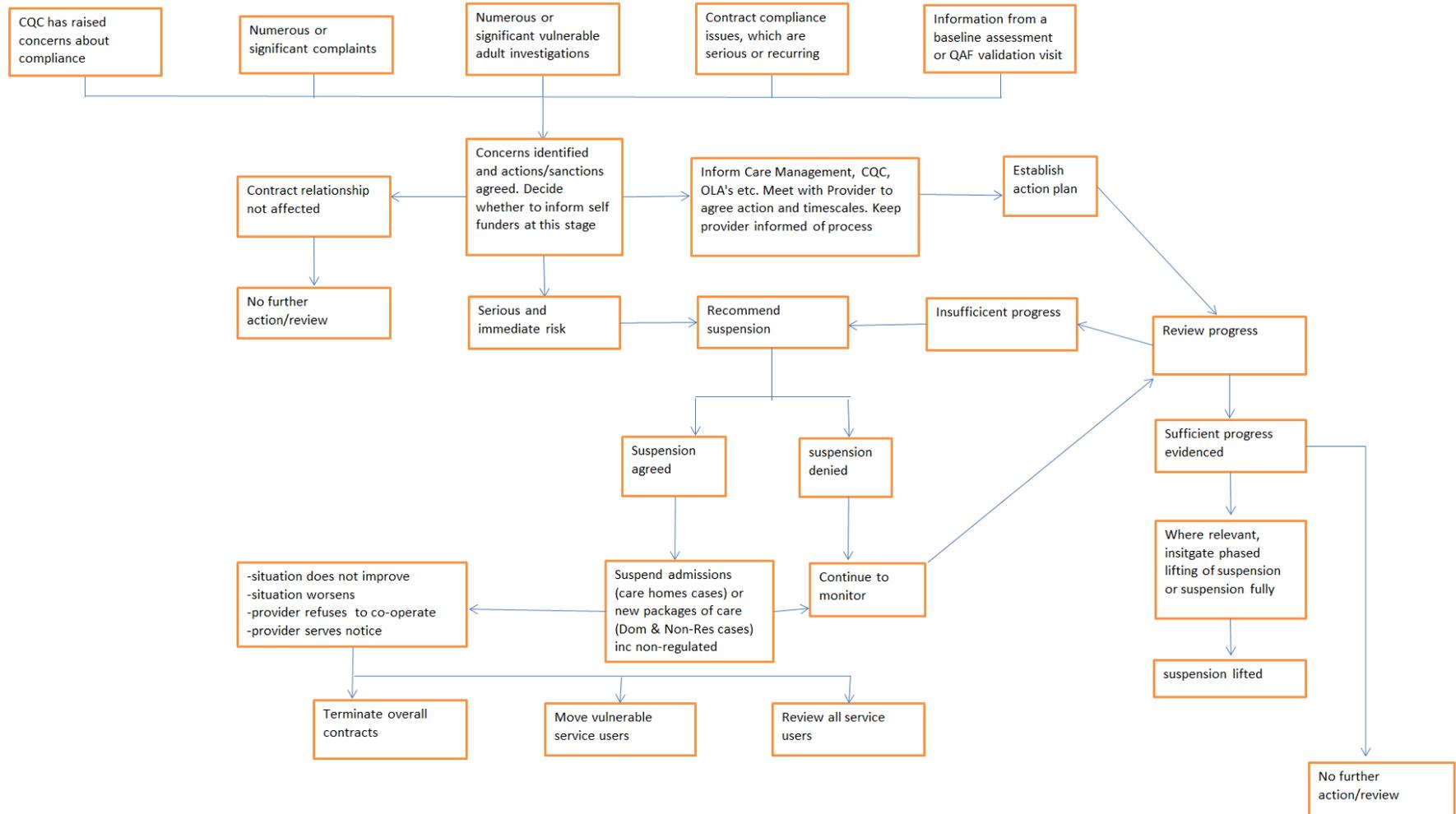
Review of the Suspension

31. The Quality & Monitoring Team is unable to review a suspension without an agreed action plan being implemented. It is the responsibility of the Provider to produce and distribute an action plan based on the concerns identified by HAS. Any action plan shall be agreed with HAS as an accurate reflection of the concerns.

32. The progress towards improvements made by the Provider will be reviewed based on the timescales which will have been agreed in the action plan. This will allow the monitoring of improvements made and sustained and consideration of the on-going suspension.
33. The Quality & Monitoring Team will not review the suspension after each individual piece of work has been completed as this could be cumbersome. However, reviews of the action plan will take place when a sample of improvements can be considered. For example, where an action plan includes agreed timescales for specific pieces of work set for 2 weeks, 1 month and 2 months the first review will take place after 1 month. Where timescales are agreed for 3 months, 4 months and 6 months, the first review would be held at 3 months. Earlier reviews may be undertaken where there are concerns that the service could deteriorate further or there are on-going safeguarding or wellbeing concerns.
34. If the Provider is reviewing a process or paperwork and would like to gain the views of the Quality & Monitoring Team prior to implementation this can be accommodated via telephone discussions or meetings outside of the review process.
35. While a suspension is in place reviewing of People's needs against the Support Plan held by the Provider may take place as well as giving People and/or their relatives/Carers an opportunity for private discussions with a member of staff from the HAS. During this process any safeguarding or wellbeing concerns which are identified will be dealt with through the usual process.
36. During the period of suspension the Quality & Monitoring Team and Care & Support staff will agree the review process and keep each other informed of progress or any additional concerns. The Quality & Monitoring Team will maintain regular contact with CQC and monitor any changes in the Provider's status.
37. If it is felt that the Provider has made and maintained sufficient improvements and this can be evidenced using the action plan, which will have been agreed in all circumstances with the Provider at the commencement of the suspension, the Quality & Monitoring Team will make a recommendation to lift the suspension to the Council's Assistant Director, Quality & Engagement.
38. Consideration will be given to a complete removal of the suspension or phased lifting, where the numbers of new placements would be restricted. The Council's preferred route is to instigate a phased lifting of suspension prior to a complete removal. Where a complete removal of suspension is being recommended to the Council's Assistant Director, Quality & Engagement rather than a phased lifting, additional information will be required on the risks to the service of not instigating the phased lifting. Where Providers have made improvements, close monitoring may be required to ensure standards are being met/maintained in the longer term. In the case of a phased lifting of suspension, the number of placements made will be at the discretion of the Council and a maximum number of placements will be agreed at 4 weekly intervals.
39. It is acknowledged that the published CQC opinion of a Provider may not change, even though all recommendations and requirements may have been achieved. Therefore, as the decision to suspend a service rests with HAS and is independent of any CQC action, the suspension of a Provider may be lifted while the Provider is judged to be a risk by CQC. Where this is the case this decision will be shared with CQC, CCG's, the Brokerage Team and other local authorities.

40. When the suspension is lifted the Provider will be notified in writing and the suspension will be removed from the Provider List or relevant contracting arrangement. The Quality & Monitoring Team will notify Care & Support staff and other interested parties that the suspension has been lifted.
41. If the lifting of the suspension is not agreed by the Assistant Director, Quality & Engagement the Quality & Monitoring Team and a Care Services Manager will continue to work with the provider. This decision will be communicated to the Provider within 24 hours of the decision.
42. The Quality & Monitoring Team will update the Assistant Director, Quality & Engagement at regular intervals and the Assistant Director, Quality & Engagement will continue to monitor the situation regarding the lifting of the suspension. Updates will also be provided to the North Yorkshire Safeguarding Adults Board and Elected Members.
43. Where a service has been suspended for the maximum agreed timescale, the service will be referred to the North Yorkshire Engagement Group, a multi-agency group which monitors the quality of service provision across the county. The group will review the work undertaken to date. If the evidence suggests that the improvements detailed in the action plan cannot be completed within a further maximum timescale of up to 3 months a recommendation will be made to the Assistant Director, Quality & Engagement to terminate the Council's contractual relationship with the Provider. This recommendation will detail the reasons for the recommendation, based on the evidence presented together with a view regarding the appropriateness of people remaining in the service.
44. If it is felt, based on the evidence provided, that sufficient progress could be made within a further maximum timescale of up to 3 months this will be recommended to the Assistant Director, Quality & Engagement and progress will be reviewed again at the end of that period. If sufficient improvement has not been made within the 3 month extension a further recommendation will be made to the Assistant Director, Quality & Engagement to terminate the Council's contractual relationship with the Provider. This recommendation will detail the reasons for the recommendation, based on the evidence presented together with a view regarding the appropriateness of people remaining in the service.
45. The following flow chart illustrates the suspension process.

Process for Suspension of Provider from Approved Provider Lists or Framework Agreements



Suspension Appeal Form (First Appeal)

Name & address of provider:		
Date of suspension by North Yorkshire County Council:		
Date suspension confirmed to the Provider by North Yorkshire County Council:		
Date summary or validation visit form received by Provider:		
Date of appeal:		
Name & designation of the person submitting the appeal:		
Reason for appeal: (any factual inaccuracies identified by the Provider in the Council's decision to suspend)		
Additional documents to support the appeal:		
Decision of Assistant Director, Quality & Engagement:		
Appeal upheld:	YES	NO
Signed:		
Date decision communicated to the Provider:		

Suspension Appeal Form (Final Appeal)

Name & address of provider:			
Date of suspension by North Yorkshire County Council:			
Date suspension confirmed to the Provider by North Yorkshire County Council:			
Date summary or validation visit form received by Provider:			
Date of first appeal:			
Date of final appeal:			
Name & designation of the person submitting the appeal:			
Reason for appeal: (any factual inaccuracies identified by the Provider in the Council's decision to suspend)			
Decision of Corporate Director, Health & Adult Services:			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;">Appeal upheld:</td> <td style="width: 35%; text-align: center; padding: 2px;">YES</td> <td style="width: 35%; text-align: center; padding: 2px;">NO</td> </tr> </table>	Appeal upheld:	YES	NO
Appeal upheld:	YES	NO	
Signed:			
Date decision communicated to the Provider:			