**Appendix 8**

**Quality Services: Delivering What Matters**

**Cardiff & Vale Escalating Concerns Professionals Escalating Concerns Meeting: Terms of Reference**

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| This document provides partners with a suggested Terms of Reference  for  Professionals Escalating Concerns Provider Meetings which are defined for this purpose as Provider Performance Meetings & Joint Inter-Agency Management Panels. |

1. Context:

There is statutory guidance on dealing with the management of escalating concerns with, and closure of, Care Homes that are registered with the Care Inspectorate Wales (CIW) to provide services for Adults, including those providing Nursing Care. The statutory guidance can be found at: <https://gov.wales/topics/health/publications/socialcare/guidance1/escconcerns/?lang=en>

However, the Cardiff & Vale of Glamorgan procedures extend the activity to practice quality management of all commissioned service settings (not just care homes) for people of all ages who receive managed care and support.

The Social Services and Well-being (Wales) Act 2014 promotes agencies working in partnership to provide improved services; requiring Local Authorities and Health Boards to work together to meet the needs of the local population.

Local Authorities and Local Health Boards also have a duty to respond to concerns about standards of care and protect people (children and adults) at risk in line with Social Services and Wellbeing (Wales) Act 2014 safeguarding regulations and guidance and relevant protection procedures.

1. Approach:

* Professionals Escalating Concerns meetings are held to prevent and / or address issues of increasing or escalating concerns and must be conducted in accordance with the ‘**Quality Services: Delivering What Matters**’ procedures.
* Professionals Escalating Concerns Meetings:
  + Must nominate a consistent chair, responsible for all meetings and communication until resolution of the issue or concern/s to a mutually satisfactory outcome;
  + Must be held as soon as practicable after potential concerns have been identified;
  + Should involve representation from all commissioning partners;
  + Must complete a ‘Risk Assessment’ and determine whether a Provider meeting is appropriate;
  + Must agree objectives / roles / responsibilities / time-scales for addressing any actions (DAP / CAP);
  + Must agree a communication plan and ensure effective management of notices of meetings, issuing meeting agendas and minutes.
* Provider Escalating Concerns Meetings:
  + Must confirm the ‘Terms of Reference’ specific to the individual circumstances under its remit;
  + Must be held as soon as practicable after escalating concerns have been identified and risk matrix commenced;
  + Should involve representation from all commissioning partners and the Responsible Individual for the service where possible or their nominated and accountable representative;
  + Must address all substantial and significant risks identified following completion of the Risk Assessment;
  + Must agree objectives / roles / responsibilities / time-scales for addressing any actions (DAP / CAP);
  + Must manage the issues / concerns to a mutually satisfactory outcome;
* Must agree a communication plan and ensure effective management of notices of meetings, issuing meeting agendas and minutes;
* Safeguarding issues identified during an Escalating Concerns review must be referred to the relevant safeguarding unit / department immediately.

1. The following steps shall apply:

Step 1: Intelligence Gathering:

Professionals feedback (good practice and any issues / concerns) should be routinely gathered and passed to the Hosting Local Authority – this will provide consistency in reporting and assist in formulating a picture of a Service Providers’ on-going performance and service delivery (A template **Professionals Feedback Form** is provided and can be used if required - **Appendix 10** of the Procedures).

Step 2: Professionals Escalating Concerns Group Meeting:

Based on information / feedback / evidence / intelligence available, the appropriate lead officer within the Hosting Local Authority (or delegated lead Commissioning organisation) should determine whether a **Professionals Escalating Concerns** meetingis called ( e.g. PPM / JIMP).

Membership of this meeting will vary and the level of meeting PPM / JIMP will dependent upon the issues identified and may include the following representatives as appropriate; (*The following list is not exhaustive*):

* Service / Operational / Clinical Lead Manager (e.g. Matron)
* Team Manager and or Principal Practitioner with budgetary / placement responsibility
* Contracts / Monitoring Officer / Practice Development Nurse
* Care Co-ordinator / BCU Nurse Reviewer
* Independent Reviewing Officer / Guardian Ad Litem (children & young people)
* Workforce Development / Training lead
* Safeguarding Coordinator(s)
* Relevant Regulatory Inspector
* Police
* Health & Safety Executive
* Representation from other commissioning authorities (within or without the region)

The main objective of these meetings is to conduct a multi-agency assessment of the risks to individuals being supported by the services through sharing of information and evidence around a Service Provider’s performance, (strengths weakness’ and areas for development); enabling shared decision making regarding whether Escalating Concerns status has been reached.

1. Outcome of the Professionals Escalating Concerns Meetings:
   1. Local Resolution / Proactive Monitoring:

Where it is deemed that urgent action is not required and performance does not necessitate any formal (development or corrective) Action Plan, routine monitoring /support and advice will be made available to the Service Provider to resolve issues by the e.g. Contact Monitoring Team, Practice Development Team / Nurse Review Team (BCUHB), Workforce development or local Safeguarding Team /s

* 1. Developmental Action Plan (DAP):

Where it is deemed that there are moderate risks from elements of the standards of service, however people are not at risk of harm and/or quality of life is not significantly affected, a Provider Escalating Concerns Meeting may be held to require the Service Provider to produce a Developmental Action Plan (DAP).

The DAP responds to increasing concerns in an effort to prevent an escalation, requiring significant corrective action and enables a Service Provider to demonstrate how it intends to move forward in specific areas of practice within an agreed timeframe.

A progress report must be provided within agreed timescales. This report should demonstrate progress in the identified areas for development; progress will then be reviewed by the relevant professional bodies (either by visiting the service or monitoring by other appropriate methods)

If at a subsequent meeting the Professionals’ Group are satisfied that the DAP has addressed the concerns to a sufficient and sustainable level then the **Professionals Escalating Concerns Group** will collectively sign off the DAP and monitoring will continue in accordance with **the policy**.

* 1. Corrective Action Plan (CAP):

Where there are substantial or significant risks to the people being supported by the service and / or there are immediate actions required to ensure the safety and wellbeing of service users or staff or where a delay in taking preventative or remedial action could result in the need for termination of an Agreement or cancellation of Registration, the Service Provider is required to produce a CAP (based on the completed **Escalating Concerns Threshold / Risk Assessment Matrix** from the **Professionals meeting**).

The **Professionals Escalating Concern meeting** members will be responsible for monitoring the Service Providers progress and reviewing / evaluating the risks to people supported by the service as well as considering the placing an Embargo on new referrals / placements in accordance with Regional Guidance on the use of Embargo’s within **the policy**. (NB Professionals cannot request or require that a Service Provider instigates a ‘voluntary embargo’; although this may be a course of action taken by the Service Provider).

Local Authority / Health Board representatives (members of the Professionals’ Escalating Concerns Group will be nominated to meet the Responsible Individual for the services or their nominated and authorised representative’s (e.g. Senior Manager /Clinical Lead) to discuss the risk assessment, agree immediate actions and develop a **CAP** within am agreed timescale.

**The Chair** of the **Professionals Escalating Concerns meeting** will explain to the Service Provider that other commissioners will be notified of their Escalating Concerns status and will advise who else will receive formal communication / notification of this (i.e. families /next of kin).

Corrective Action Plans may include monitoring and /or supportive / developmental actions to be taken by the commissioner/s; these will determine areas of responsibility and agreed deployment of resources to maintain the safety and wellbeing of people supported by the service

When a Service Provider has met all or part of the required improvements in the CAP / DAP the **Professionals Escalating Concerns Group** will individually or collectively reassess risk and, based on available evidence, determine whether the Service Provider should remain in Escalating Concerns. The decision to conclude Escalating Concerns must be formally recorded and communicated to all relevant stakeholders including people supported by the services and their relatives.