

## ISLE OF ANGLESEY COUNTY COUNCIL Scrutiny Report Template

<b>Committee:</b>	Partnership and Regeneration Scrutiny Committee
<b>Date:</b>	11 <sup>th</sup> of September 2019
<b>Subject:</b>	Social Services Monitoring Arrangements
<b>Purpose of Report:</b>	Scrutinise Monitoring Arrangement in Social Services.
<b>Scrutiny Chair:</b>	Cllr. Gwilym O Jones
<b>Portfolio Holder(s):</b>	Cllr Llinos Medi Huws
<b>Head of Service:</b>	Alwyn Jones – Interim Director of Social Services Fon Roberts – Interim Deputy Director of Social Services
<b>Report Author:</b> <b>Tel:</b> <b>Email:</b>	Dafydd Bulman - Strategic Transformation a Business Manager 01248 752013 <a href="mailto:DafyddBulma@ynysmon.gov.uk">DafyddBulma@ynysmon.gov.uk</a>  Bethan Williams – Contract Manager 01248 752013 <a href="mailto:BethanWilliams@ynysmon.gov.uk">BethanWilliams@ynysmon.gov.uk</a>
<b>Local Members:</b>	Relevant to all members

### 1 - Recommendation/s

That the Scrutiny committee give consideration to the contract monitoring arrangements Adults and Children and Family currently have in place with details of further review.

### 2 – Link to Council Plan / Other Corporate Priorities

Support vulnerable adults and families to keep them safe, healthy and as independent as possible.

### 3 – Guiding Principles for Scrutiny Members

**To assist Members when scrutinising the topic:-**

- 3.1** Impact the matter has on individuals and communities [**focus on customer/citizen**]
- 3.2** A look at the efficiency & effectiveness of any proposed change – both financially and in terms of quality [**focus on value**]
- 3.3** A look at any risks [**focus on risk**]
- 3.4** Scrutiny taking a performance monitoring or quality assurance role [**focus on performance & quality**]
- 3.5** Looking at plans and proposals from a perspective of:
- Long term
  - Prevention
  - Integration
  - Collaboration

- Involvement

#### 4 - Key Scrutiny Questions

1. The report discusses contract monitoring arrangements for social care. What is the total value of these social care contracts for children and adult services?
2. How does the contracts monitoring framework reinforce the requirements of the Social Services and Wellbeing Act?
3. How does the Service propose to increase its contract monitoring function to include internal provision and within current capacity?
4. What risks are there for Social Services?

#### 5 – Background / Context

##### **Social Care Monitoring report**

##### **1. PURPOSE OF THE REPORT**

The purpose of the report is to provide Members with information on contract monitoring arrangements within Social Care.

##### **2. EXECUTIVE SUMMARY**

Social Care Contracts Team has in place an established contract-monitoring framework that has continued to be developed in conjunction with Providers, partner agencies such as Health, the Care Inspectorate Wales (CIW) and via collaborative working with other North Wales authorities.

As well as feedback from partner agencies, the contract monitoring framework takes into account information from:

- Service User feedback
- Carer / Relative feedback
- Care Management feedback
- Adult Safeguarding referrals
- Corporate Customer Services / complaints process
- Workforce Development Team – staff training and qualifications

The Contract Monitoring Framework is currently being reviewed in order to ensure it reflects what matters to/ what 'good' looks like for, the people who use services, as well as those involved in the delivery of care and support. Feedback from people using services, as well as family carers and paid carers has been sought, and the department intends to embed this in future monitoring processes.

Officers from the Contract Team continue to link in with regional collaborative working - supporting a number of initiatives across North Wales including:

- The North Wales Escalating Concerns process, now reviewed and known as the Quality Services: Delivering What Matters framework.
- The Regional Pre-Placement Agreement (PPA) for Residential Care continues to be developed across the North Wales. It was rolled out to providers during 2017/18 and work has been underway to develop a more co-produced agreement ensuring partnership working with care home providers to deliver quality services to Anglesey residents. A revised outcome focused specification has been drafted although implementation of a final version is currently being delayed following challenge from Care Forum Wales. The aim of the PPA is to strengthen what we expect from Providers of residential care, in terms of what is being commissioned, and what Providers are required to deliver under contract.

Social Care continues working towards the Welsh Government's 'More than Just Words', 'Mwy na geiriau': the Strategic Framework for Welsh Language Services in Health and Social Care. This framework aims to strengthen Welsh Language in health and social care services. Positive progress is being made in this regard, with the need for Welsh language services being built into service planning and delivery, and then reviewed through regular contract monitoring procedures. Feedback from residential care homes indicated that the number of Welsh speakers remained relatively consistent.

In addition, the need to comply with the Local Authority's duty under the Equality Act 2010 continues. This includes the need to ensure that all contracting organisations and the services they deliver adhere to the Authority's Equality Policies and are monitored in doing so.

The regulatory framework for the registration and inspection of care providers has been revised. The Regulation and Inspection of Social Care (Wales) Act (RISCA) came into force on 2 April 2018. Providers were required to re-register with CIW under RISCA and Officers from the Contracts Team are kept updated when re-registration of individual providers is complete.

The Contract team continues to contribute to the North Wales monthly Care Home RAG report, which provides an overview of the state of the Residential Care market by county; highlighting the number of providers under escalating concerns; the number of vacancies, etc. The North Wales RAG report is managed by the Health Board. The RAG reports are then used as both a local and regional tool for mapping the state of the wider Residential

Care market, in terms of under and over-provision, and are used to enable senior managers from across Health and Social Care to better inform the provider market of our future commissioning intentions for the

### **3. RECOMMENDATION**

Members of the committee formulate their conclusions and recommendations based on the information in the report and the discussion at the meeting.

#### **REASON FOR RECOMMENDATION**

To ensure that all internal and externally commissioned services meet quality standards and regulatory requirements.

### **4. BACKGROUND INFORMATION**

Social care commissions a significant proportion of its services from the Independent sector. Consequently, robust processes and procedures are in place to ensure quality services are being provided to the most vulnerable groups in Anglesey (Appendix 1). Social Care contracts with a range of registered providers to deliver statutory social care services. There are five broad categories of services:

- Residential care homes
- Domiciliary care
- Supported Living
- Direct Payments
- Fostering and Residential Placements

#### **4.1 Residential Care Homes**

There are 25 Private Care Home Providers within Anglesey who are registered to provide 590 beds across the county, (as at 31st March 2019).

At present, there are 6 vacancies across residential homes across Anglesey, which indicates there is sufficient supply of beds to meet residential demand. Figures for year 2018/19 show an average of 4 vacant beds per month (where homes have declared their vacancy returns). Recent figures show a reduction in the number of residential placements commissioned by IOACC. The number of beds commissioned by the Council remains relatively static although indications are there is a reduction, reflecting improvements in the referral process and Reablement/domiciliary care process, keeping people in their own homes in the community for longer.

Contract and Monitoring Officers have a programme of work, which includes routine monitoring of residential care homes and supporting homes within the Escalating Concerns process. During 2018/19, no homes were subject to Escalating Concerns. CIW are actively involved in the Escalating Concerns process, as are the Health Board in the

case of nursing homes. Officers are required to inform other Local Authorities when a home is placed under Escalating Concerns. Information is not made publicly available. However, members of the public are able to obtain the latest CIW inspection report in order to understand whether there are any quality concerns.

Officers from the Council continue to work on supporting providers with thematic issues across residential care homes such as improvements for activities for residents, improvements in person-centred care planning and increased provision for and awareness of dementia care. Significant improvements have been made within Residential Care Homes in terms of achieving and evidencing the 9 specific outcomes noted within the monitoring framework. (Appendix 2 and 2.1 demonstrate improvements against the outcome scorings for each Residential Home for the monitoring cycles of 2015 and 2018.)

#### **4.1.1 Engagement Mechanisms for Residential Care Homes**

A key feature of the Adult Social Care contract monitoring approach is to spend time with service users within the care homes to gain their views on the quality of the services provided. The views of carers and families are also captured via questionnaires. Peer monitoring has recently been undertaken within Residential Care Homes on Anglesey and the findings are used to explore and capture the mentors experiences with the homes, assess intervention, and perceived outcomes for residents.

In addition to undertaking questionnaires with service users, Contract Monitoring Officers spend time observing practice and staff interaction within residential care homes. This approach is especially useful for capturing the lived experience of people living with dementia, as observational methods provide invaluable information on the quality of services being provided and are essential where users lack capacity to engage meaningfully with the Contract Monitoring Officer.

The Contract team have adopted the North Wales monitoring framework, which uses more observational based work to capture provider's performance. Initial observational work has proved useful in capturing concerns and working with providers to drive up standards. The Contract Team continue to review and refine methods of capturing feedback in a way that is streamlined, and avoids duplication, and in a way which is focused on 'What Matters' to individuals and the outcomes that are being achieved for the people to whom care is being delivered.

Adult Social Care continue to respond to the Older People's Commissioner for Wales' (OPCfW) national report 'A Place to Call Home?' Positive achievement against the action plan continues to be made, especially in relation to training and advocacy. Progress has been reported back to the OPCfW, and the action plan continues to be delivered and refined in order to improve partnership working with BCUHB, training, and to better connect residential homes with their local community.

The response rate for family/relative feedback has doubled which is pleasing to note, and generally, satisfaction levels across all areas are high with the main areas for

improvement being staffing levels, activities and laundry systems. We know from experience that people living in care homes tend not to 'grumble', so it is all the more important that information is triangulated with other feedback (including Safeguarding and Monitoring Officers' findings).

## **4.2 Domiciliary Care Providers**

Our Domiciliary care contract was re-tendered in June 2018 on a patch-based model, dividing the County into 3 patch areas and awarding each patch to one single provider. This contract model enabled providers to better manage costs through efficiencies in service delivery, providing a more localised service and improving recruitment and retention. A dedicated Transition and Monitoring Manager was appointed specifically for the transition period and has worked closely with providers until the end of March 2019. The contract has now been transferred back to the contracts team who will monitor the 3 providers against a monitoring framework in order to ensure a sustainable, high quality service.

Whilst there have been improvements in recruitment and retention during the year –there has been an increase in the number of people working in care in Anglesey compared to a reduction in 2017/18 - challenges within the sector remains. This is a UK-wide issue although Council officers remain committed to seeking local resolutions to local pressures. The Team work closely with our contracted Providers in order to understand pressures within the sector and identify solutions to help relieve those pressures. Quarterly forums are held with the Providers, to discuss issues affecting the domiciliary care market in Anglesey. Competition from other sectors of employment continues to be cited as an issue. The Council continues to work with Providers to explore how this sector can be made more attractive to potential employees in order to boost recruitment and retain existing staff. On March 5th 2019, Social Care Wales also launched a national campaign for recruitment to social care and early years, outlining that thousands more carers would be needed across Wales by 2030: <https://www.wecare.wales/>. The council is actively supporting this campaign.

The regional workforce strategy and action plan has been endorsed by the Regional Partnership Board and work is now underway across a range of stakeholders. Connections have also been made with the North Wales Economic Ambition Board (NWEAB) and the input from health and social care into the Regional Skills Partnership Board is being strengthened to increase the focus on this critical sector.

There is significant focus on the domiciliary care sector at a local, regional and national level as this presents a high risk area particularly due to the staff recruitment and retention issues and the demand for these services to enable people to remain living at home, to facilitate timely hospital discharge and provide support for carers.

### **4.2.1 Engagement Mechanisms for Domiciliary Care Service Users**

A key feature of the Adult Social Care contract monitoring approach is to ensure service users are given the opportunity to voice their views on the quality of the services provided. Service users complete questionnaires in their own time and these are posted out to them with SAEs for returns.

#### **4.2.2 Engagement Mechanisms for Domiciliary Care Workers**

As part of the work undertaken by the Contracts Team, in monitoring standards in domiciliary care, officers engage with care staff, in order to gain their views on their experience as support workers (terms and conditions, job satisfaction etc.) their views about the quality of services provided and how service delivery impacts on their role. Both face-to-face interviews and questionnaires will be undertaken as part of the monitoring programme.

Feedback received from staff via questionnaires will be used to inform the team's monitoring approach with providers. This serves as an important means of triangulating responses and will enable Officers to pick up any concerns and gather further evidence.

#### **4.3 Supported Living Providers**

At the time of reporting, Adult Social Care has contracts with 4 Supported Living Providers who are supporting up to 49 people with learning disabilities to live in their own/shared homes (16 homes – 'schemes') within Anglesey.

The 4 contracts will be re-tendered during Autumn 2019, with the new contracts to be awarded by April 2020. As part of the tender process, tenants and their families or other advocates will be involved; the Department has agreed a process with Corporate Procurement, which meets the requirements of the Council's Procurement procedures whilst being person-centred for the people being supported. The Learning Disability team has a long tradition of closely involving service users and their families in contract tenders and the selection of new providers, and it is this co-produced way of procuring services that has been most welcomed by service users and their families.

#### **4.4 Direct Payments**

The Client Finance team has a dedicated officer who is responsible for processing and administering the Council's Direct Payments scheme on behalf of the Department. The Officer has worked hard to establish a clear and robust process for handling queries; setting up systems to manage new and ongoing payments in order to streamline existing processes; making monthly payments and managing client contributions, as well as issuing and reviewing payments. These revised processes are now in place and the workload around managing Direct Payments is more manageable.

#### **4.5 Children Services (Fostering and Residential)**

On an annual basis, a desktop monitoring is done on all children services placements. This entails sending out a monitoring questionnaire to each Provider and asking for supporting documents such as rotas and training matrix, once the information is returned a report is written on each Provider. Any concerns at the time of monitoring are shared with the Service Manager. An overview report is then produced to the Head of Service. Currently children services monitoring is being undertaken over the summer months with the report submitted to service managers meeting in September. Any new provider that is currently being commissioned between the annual monitoring is asked to complete the same monitoring once a child is placed in order to gather information/intelligence before the systematic 12 months review process.

Children services currently commissioned a number of placements from the Children's Commissioning Consortium Cymru (4Cs) which has a monitoring team working as part of this consortium. Placement teams and local authority commissioners can use the Children's Commissioning Support Resource (CCSR) to identify suitable placements for children in their care by entering details of the child's requirements and running a search. In addition, Anglesey can issue placement referrals and conduct a tendering process, using CCSR to shortlist the providers who are relevant to the child's needs.

The CCSR database holds details of care settings and monitoring reports for all service providers, including residential homes and foster carers. These are continually updated by care providers and the 4C's monitoring team ensuring that CCSR provides the most up-to-date information possible.

#### **4.6 Monitoring Capacity and Programme**

Social Care has a team of 3, 1 Contract Manager, 1 Contract Officer and 1 Data and Financial Analyst who monitor the performance of external Service Providers.

It is the intention that moving forward into 2019/20 all the Department's internal services which are registered with CIW will also have their performance monitored by the Contract team. This will include internal provision of Supported Living Services, Residential care and Learning Disability day services. This will ensure that our internal services are subject to the same rigorous quality and compliance checks as our external providers.

A clear work programme approach has been implemented and adhered to in order to support the timely monitoring of commissioned Providers (Appendix 1).

- 37 Providers have had a 'full' monitoring visit within a 12-month period during 2018/19 (29 Residential/Nursing Homes including IOACC owned, 4 Supported Living Projects, 4 Day Services).
- 1 Providers (Residential Home) last had their 'full' monitoring visit between 12-18 months although all have had follow up monitoring visits during 2018/19.



The monitoring programme is dynamic and is re-prioritised to reflect any information received on the performance of a particular Provider. If more serious concerns are raised, a 'professionals' meeting will be called to allow CIW, Health, Care Managers and Contract Monitoring Officer to assess the situation. If warranted, the North Wales Escalated Concerns Procedure will be invoked and a suspension may be put in place to prevent the Provider from receiving further work until the situation has improved. If improvement is not achieved, then consideration is given to terminating the contract and transferring the service to other Providers. This is, however, a rare occurrence.

Managers will continue to review and revise the monitoring process to make better use of technology for obtaining feedback, and to streamline report writing, ensuring it is outcomes focused. Monitoring intelligence will be used to re-imagine our contract monitoring approach, ensuring that whilst the necessary statutory requirements continue to be monitored, the bulk of monitoring activity will concentrate on ensuring that 'what matters' to service users and their carers is being delivered. In addition, we will work closely with CIW to better understand where areas of duplication exist between our respective monitoring approaches, and identify areas where our monitoring can be streamlined in line with new monitoring and regulatory requirements of RISCA. We hope to be in a position to start implementing this new monitoring framework in 2020.

#### **4.7 Qualification Levels**

The qualification levels of the staff employed by Providers continue to be monitored closely. CIW require all Provider managers to be suitably qualified before they can be 'registered'. This requirement has provided an increased focus on developing suitably qualified assistant / deputy managers to be in place to support succession planning should the registered manager leave. The required standard for registration of the manager is National Vocational Qualification (NVQ) level 4 or Qualification Credit Framework (QCF) level 5.

In 2014, the Welsh Government developed a new annual return with figures to be recorded as at 31st December. This return monitors the qualification levels of providers. The census also provides information on staff turnover and the number of staff who can speak Welsh.

As of March 2015 58% (=311) of Residential Care Providers Basic Care Staff were qualified (having achieved NVQ level 2 or QCF level 3). In July 2018 this figure was 68% (=406). Of the 30 Care homes within Anglesey to complete the staffing survey all meet the 50% qualification level. It is positive to note that there is a net gain in the numbers of care workers within the sector compared to the net loss noted from the previous year.

The percentages of qualified staff have increased within the care home sector. There appears to be staff moving within care homes, thus retaining the skills within the sector and also new staff coming into domiciliary care. It is important to note that training from the Workforce Development Team is available for all Social Care staff across the county and that staff not yet qualified, may be working towards award and undertaking training.

Progress of this is monitored by officers from the Workforce Strategy and Development team.

The qualifications for health and social care staff are changing and from September 2019 a new suite of qualifications will become mandatory across Wales. This significantly reduces the range of acceptable qualifications to ensure consistency and quality of training is achieved across Wales. This sets the standard for support workers at level 2 and for the first time sees the introduction of 'exams' and increases the level of external assessment. This sits alongside the new Induction Framework for Wales and the requirement by April 2020 for the social care workforce to be registered with Social Care Wales. This is a significant move forward in recognising the professionalism, skills, responsibilities and accountabilities of this workforce.

#### **4.8 Staff Training**

Providers are monitored to ensure that their staff members are trained appropriately to support the needs of the individual service user based upon the requirements of their care plan. The required training includes health and safety related courses such as moving and handling (to 'Passport' standard), emergency first aid at work, infection control and specialist training such as stroke awareness, dementia awareness, mental health awareness, challenging behaviour, and protection of vulnerable adults. Adherence to these standards is closely monitored by the Contract Monitoring and Workforce Officers.

The 'Six Steps' Palliative Care training programme continues to be rolled out, in collaboration with Betsi Cadwaladr University Health Board and our Workforce & Development team, across residential and nursing homes. Contracts and Monitoring Officers are also undertaking the training and will be incorporating a review of the programme within the monitoring framework, in order to ensure homes are continuing to deliver quality assured and outcomes-focused end-of-life care for residents.

Social Care also continues to support Providers to access training via the 'Social Care Workforce Development Partnership', though it remains the responsibility of the Provider to ensure that their staff members are appropriately trained. Providers are also regularly sent updates on the learning and development resources available on the Social Care Wales website.

#### **4.9 Safe Recruitment**

The Safe Recruitment processes used by Providers are monitored closely by the Contract Team. This includes adherence to the Council's Safe Recruitment policy, Welsh Government regulations and NMS and the Safeguarding Vulnerable Groups Act 2006 as amended by the Protection of Freedoms Act 2012. The Local Authority continues to review the Safe Recruitment policy and the guidance to contracted services. Contracts and Monitoring Officers are working with the lead officer to develop a more robust system that will further enhance the team's ability to monitor provider's compliance with safe recruitment.

#### Disclosure and Barring Service (DBS):

- The Provider must ensure that any person employed (or engage as a volunteer) has an Enhanced DBS Check with a check against the Adults and/or Children's Barred List(s). The Enhanced DBS should be renewed every 3 years as a maximum and 4 years as a minimum frequency.
- Any person employed or engaged by the Provider must have their identity verified. This verification of identity must be undertaken face-to-face by a Counter-signatory (or their representative), as recommended by the DBS.
- If the DBS check highlights any offences, cautions or other information the Provider must interview the individual before they are employed or engaged, in order to undertake an appropriate risk assessment. Full records of any interviews/meetings must be kept as these may be required to be inspected by the Contract Team.
- The Provider must not employ or engage any person who is on the DBS Children's or Vulnerable Adults Barred lists to work in 'regulated activity' as this is a criminal offence.

#### Further checks are also carried out as follows:

- References are requested (in accordance with Regulations where applicable) and questions asked about previous disciplinary and conduct matters and whether there were ever any matters of concern.
- Qualification certificates and registration documentation (if applicable) are verified and copies taken.
- If the post is registered e.g. Social Work, to check that the individual is not currently or has been subject to any conduct investigation or hearings by the Registration Body e.g. Care Council for Wales.
- Any gaps in employment history are accounted for and confirmed in writing by the individual.
- In accordance with the Nationality, Asylum and Immigration Act 2006, documents are checked and verified to ensure that the individual has the right to work in the UK.
- Overseas Records: If an individual has worked or lived outside the UK for more than 1 year (or 6 months if in the past 3 years), the employer must make all reasonable attempts to gain that Country's equivalent of DBS check.

The Contract Team visits the premises of Providers to ensure records can demonstrate compliance with the above standards – a minimum of four files are viewed during each monitoring visit. Where non-compliance is identified, this is added to the overall action plan. Depending on the nature of non-compliance e.g. no DBS check in place, the

provider will be asked for evidence of a Risk Assessment or even to redeploy the member of staff until DBS check is returned. For issues such as gaps in employment, this will be subject to action plan follow up. Feedback is provided to CIW for further information.

#### **6 – Equality Impact Assessment [including impacts on the Welsh Language]**

N/A

#### **7 – Financial Implications**

There is one Contract Monitoring Officer funded by the Local Authority to undertake contract monitoring across Adults and Children/Family Services. This post was introduced into the structure in 2016 and made into a permanent post.

#### **8 – Appendices:**

Appendix 1 – Monitoring Framework  
 Appendix 2 – Performance measure outcomes 2015  
 Appendix 2.1 – Performance measure outcomes 2018

#### **9 - Background papers (please contact the author of the Report for any further information):**

Social Services and Well-Being (Wales) Act (2014)  
[http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw\\_20140004\\_en.pdf](http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf)

Regulation and Inspection of Social Care (Wales) Act (2016)  
<http://www.legislation.gov.uk/anaw/2016/2/contents/enacted>

Social Care Wales – resources for Induction Framework and registration process for care workers. <https://socialcare.wales/>

**Appendix 1 – Monitoring Schedule**

Type of Provider	Paperwork used	Type of visit	Frequency of monitoring	Type of monitoring
Residential / nursing Adults on Anglesey	Provider Pre-monitoring questionnaire Provider Health & Safety questionnaire Staff questionnaire Service User / relative questionnaire	Announced site visit - looking at Service User files and staff files. Looking at some policies, accident and incident book, record of complaints and MAR sheets. Look around the Home.	Annual	Announced site visit. Read CIW inspection report
Residential / nursing – out of county	Provider pre-monitoring questionnaire Provider Health & Safety Questionnaire Staff Questionnaire	n/a	Annual	Desk top monitoring – ask for copies of any reports by the host authority, and ask whether there are any issues. Read CIW / CQC inspection report
Supported Living	Provider Pre-monitoring questionnaire Provider Health and Safety Questionnaire Staff questionnaire	Announced site visit - looking at Service User files and staff files. Looking at some policies, accident and incident book, record of complaints and MAR sheets. Look around the Home.	Annual	Announced site visit. Read CIW inspection report
Day Services	Provider Pre-Monitoring questionnaire Provider Health and Safety Questionnaire Staff questionnaire	Announced site visit Look at Service User and staff files. Look at a sample of policies, the accident and incident	Annual	Announced visit

**Appendix 1 – Monitoring Schedule**

		look and have a look around the building		
Children placement	Provider Monitoring form – Providers are asked to complete a form either as a residential setting or as a residential setting which also provides education. Health & Safety questionnaire	n/a	Annual	Desk top monitoring – Ask the host authorities but for copies of reports and any information, but this can be difficult, especially with placements in England. Look at CIW, Estyn and Ofsted reports.

Appendix 2 - Outcome Performance 2015

PROVIDER	Outcome 1 Service users live as independently as possible			Outcome 2 Service users have choice and control over their own lives			Outcome 3 Service users are full citizens, enjoying the same rights as			Outcome 4 Service users have opportunities to fulfill their ambitions,			Outcome 5 Service Users are supported to maintain or improve their			Outcome 6 Service Users feel safe and secure with freedom from dis			Outcome 7 Service Users are treated with dignity and respect			Outcome 8 Service Users are protected from financial abuse			Outcome 9 Service Users receive high quality services			Score	Rank
	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement	Exemplar	Good	Requires Improvement		
A																											120	1	
B																												95	2
C																												85	3
D																												85	3
E																												85	3
F																												85	3
G																												85	3
H																												80	7
I																												80	7
J																												80	7
K																												75	10
L																												65	11
M																												60	12
N																												60	12
O																												55	14
P																												50	15
Q																												50	15
R																												50	15
S																												40	18
T																												40	18
U																												40	18
V																												30	21
W																												5	22
X																												5	22

Y - On HOLD

**Appendix 2.1 - Outcome performance 2018**

Provider	Outcome 1 Service users live as independently as possible				Outcome 2 Service users have choice and control over their own lives				Outcome 3 Service users are full citizens, enjoying the same rights				Outcome 4 Service users have opportunities to fulfil their ambitions				Outcome 5 Service users are supported to maintain or improve the quality of their lives				Outcome 6 Service users feel safe and secure with freedom from fear				Outcome 7 Service users are treated with dignity and respect				Outcome 8 Service users are protected from financial abuse				Outcome 9 Service users receive high quality services				Score	Ranking
	Exemplar	Good	Requires Improvement	Poor	Exemplar	Good	Requires Improvement	Poor	Exemplar	Good	Requires Improvement	Poor	Exemplar	Good	Requires Improvement	Poor	Exemplar	Good	Requires Improvement	Poor	Exemplar	Good	Requires Improvement	Poor	Exemplar	Good	Requires Improvement	Poor	Exemplar	Good	Requires Improvement	Poor						
I-																																					100	1
D																																					100	2
F																																					90	2
T-																																					90	2
U-																																					90	2
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E																																					90	2
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A																																					90	2
V																																					85	3
S-																																					85	3
B																																					80	4
O																																					80	4
C																																					80	4
L																																					80	4
H																																					70	5
G																																					70	5
N																																					65	6
R																																					60	7
Q																																					60	7
W																																					55	8
K																																					55	8
P																																					40	9
Homes previously monitored by the Hub																																						
1																																						
2																																						
3																																						