

# **Care Services in Supported Housing Contract Management Strategy**

**'To ensure effective contract delivery and performance with a supportive approach'**

## Version Control

Version number	Created by	Date	Amendment
2	Kate Coleman	27/3/2025	Review of whole document in line with corporate contract management strategy.

## Table of Contents

<b>Version Control .....</b>	<b>1</b>
<b>1. Commissioning, Provider and Contract Management - Roles &amp; Responsibilities.....</b>	<b>3</b>
1.1. Commissioners .....	3
1.2. Provider .....	3
1.3. Contract Management .....	4
<b>2. Care in Supported Housing .....</b>	<b>5</b>
2.1. Strategic Tiers.....	5
<b>3. KPIs .....</b>	<b>6</b>
3.1. PAMMS.....	7
<b>4. Performance Monitoring, Contract Reviews and Site Visits.....</b>	<b>7</b>
4.1. Quality Monitoring.....	8
4.2. Contract Review Meetings .....	8
<b>5. Contract Management Timeframes.....</b>	<b>10</b>
<b>6. Addressing Poor Performance.....</b>	<b>11</b>
<b>7. Contact List for Providers.....</b>	<b>11</b>

# 1. Commissioning, Provider and Contract Management - Roles & Responsibilities

## 1.1. Commissioners

Commissioners are responsible for the current service design/specification, and the forward planning for the ongoing service requirements.

Commissioners will be kept informed of contract performance and delivery via internal meetings and contact with relevant Contract Officers.

Commissioners will have the opportunity to attend contract reviews and be involved in the discussions regarding contract performance and delivery.

Commissioners will identify and propose variations to the contract/specification based on evidenced contract usage, and/or contract performance information.

Commissioners will lead on the collation of information required to inform any future commissioning intentions and will liaise directly with the provider to obtain relevant information where applicable.

## 1.2. Provider

The Provider is responsible for delivery of the contracted service.

The Provider will submit KPI/monitoring returns as outlined in contract and specification – and within this document.

The Provider will maintain regular contact with Contract Officers to ensure they are up to date with any matters which may affect their ability to deliver the contract as specified.

The Provider will respond to requests for investigation/action as required by Contract Officers.

The Provider will respond to proposed variations and their ability/willingness to amend as suggested.

The Provider will ensure any agreed variations are signed and returned in a timely manner.

The Provider will deliver outcomes that demonstrate:

- That Individuals have real control over their care and support and are involved in the planning of their care and support.
- That staff have the experience, knowledge and skills to support a wide range of support requirements including those with complex behaviours and dual diagnosis.
- That they enable Individuals to develop friendships and networks of support in their local communities wherever practical and possible and increase community connections and involvement.
- That they continually review and update support plans to reflect a person's change in needs and aspirations
- That they ensure that support is culturally sensitive and relevant to diverse communities that they operate in.

### 1.3. Contract Management

Contract management is the process of effectively and efficiently managing activity performed under the Care in Supported Housing contract to maximise operational performance and minimise any risks.

The aim of contract management is to ensure:

- The arrangements for service delivery continue to be satisfactory to both parties, LCC and the Provider, and the expected service delivery, efficiency and value for money are being realised.
- The associated risks (to people, reputation and finances) are being managed.
- The provider is co-operative and responsive.
- Both parties understand the obligations under the contract.
- Potential disputes are minimised.
- A professional and objective approach to arising changes and issues can be taken.

The Contract Management Team ensures that commissioned services within Lancashire County Council (LCC) are being delivered in line with their contractual obligations and service specifications. The team ensures that the County Council is receiving good quality services and value for money ensuring effective contract delivery and performance with a supportive approach'.

Contract Officers will identify and propose variations to the contract/specification based on evidenced contract usage, and/or contract performance information. Any proposed variations will be discussed with the lead commissioner in the first instance and the provider prior to any changes. This may include agreeing, issuing and administering contract variations and/extensions and arranging for them to receive the appropriate authorisation with LCC and the provider.

## 2. Care in Supported Housing

This document sets out the Contract Management Team's approach to performance monitoring and the quality assurance of the Care in Supported Housing contract.

Lancashire County Council has adopted a systematic approach to each contract which is assigned to one of four strategic tiers.

Each tier will align to a prescribed Contract Management Strategy, suitable to the importance and risk perceived. The strategy will indicate the time, effort and activities each contract will have applied to it.

### 2.1. Strategic Tiers

The following sets out the criteria to assign a contract to a tier:

1. Assess level of supply complexity, considering the delivery model, the impact of non-performance and the supplier delivering the service, supplies or works contract(s).
2. Assess the value of the contract(s).
3. Assign the contract(s) to the tier appropriate for its value and supply complexity.

The tiers can be broadly described as:

- Tier 1 contracts may involve a high degree of supply complexity or be high in value, or both. Tier 1 contracts are those contracts of key strategic importance to the Authority in its role of delivering services to the public.
- Tier 2 contracts are the contracts that do not qualify to be Tier 1 but retain sufficient strategic importance to warrant a meaningful degree of contract management activity.
- Tier 3 contracts are the contracts that may not require active management, are likely to be low risk or low impact in the case of contract failure.
- Tier 4 contracts are the contracts that require no active contract management, likely due to the low risk and/or low financial value.

The Care in Supported Housing contract has been assigned a Tier 2 Contract & Quality Management strategy, however individual providers may have their tiering changed as required by any change in circumstances.

### 3. KPIs

The Provider must submit a range of 6 KPI's to allow the Authority to ensure compliance with the requirements of the contract.

Ref:	Title:	Regularity:
KPI 1	Service User outcome measures (Outcomes being achieved)	Six Monthly
KPI 2	Spot check visits	Quarterly
KPI 3	Complaints and Concerns	Quarterly
KPI 4	Supporting people to obtain or retain employment	Annually
KPI 5	Delivery of Commissioned Hours	Quarterly
KPI 6	Staff turnover	Quarterly



### 3.1. PAMMS

Submission of KPI's in accordance with the relevant frequency (see point 3 above) is to be made to the Contract Management Team via the **PAMMS** provider portal.

Lancashire County Council is working in collaboration with the Access Group, and specifically the Provider Assessment and Market Management Solution (PAMMS). PAMMS is a system to support quality and contract monitoring in social and enable market intelligence, quality and financial data to be brought together in one real-time place. Lancashire County Council is also working with our neighbouring Authorities (Blackburn with Darwen, Blackpool) and the Integrated Commissioning Board to progress to a consistent way of working with our contracted social care providers.

In using PAMMS we aim to create a more streamlined and efficient system in relation to the submission of your KPIs and the management of data that is submitted. This will be of benefit in terms of capacity for both commissioned care providers when submitting data and Lancashire County Council in terms of managing the returns that are submitted.

The Contract Management Team will review and analyse KPI/monitoring data, and be responsible for addressing any areas of non-compliance, failure to meet, or submit within time frames, agreed KPI's.



PAMMS Provider  
Portal v0\_01.pdf



PAMMS Provider  
Register Guide v1\_02.

## 4. Performance Monitoring, Contract Reviews and Site Visits

Performance monitoring and quality assurance is a regular process undertaken by Lancashire County Council to ensure that providers comply with the requirements of the contract and are performing effectively. The provision of regular information gives LCC an ongoing understanding of the quality and effectiveness of the services.

Performance monitoring will take place continually throughout the lifespan of the contract and will be used to:

- Analyse key performance indicator (KPI) returns and identify areas of good practice and areas for improvement.
- Work with the providers towards service delivery improvements.
- Hold contract review meetings with providers.
- Carry out on site contract monitoring with providers

The objectives of performance monitoring and quality assurance are to ensure:

- Service users are safe.
- Services are meeting the required quality standards.
- Services are delivering value for money.
- Trend analysis and continuous improvement.





## 4.1. Quality Monitoring

Services commissioned within the Care in Supported Housing Contract will be subject to a quality monitoring exercise estimated to take place annually. Contract management will conduct annual site visits to review service delivery. The site visits will consist of a combination of office visits, where validation of business and management arrangements will take place, as well as visits where service is delivered, where environmental and service delivery checks will take place. These checks will be ensuring that relevant policies, procedures, and plans are in place, but also that they are of sufficient quality and person centred.

In the event of negative intelligence, that gives LCC cause for concern, or a CQC inspection has resulted in a provider being rated as 'requires improvement' or 'inadequate' in one or more areas. The Contract Management Team may look to carry out a reactive quality monitoring exercise using this tool, working with the provider and CQC to improve the quality of services being delivered.

It is a contractual obligation that, at any time during the term of the Care in Supported Housing contract, if the provider is inspected by the CQC as "Inadequate" or "requires improvement" and receives an overall rating by the CQC of "inadequate" or "requires improvement" against any one of the CQC's 5 key questions for the office out of which the service provider is operating, for the purposes of delivering services, the provider shall inform the Authority immediately.

The Contract Management Team may also need to consider whether there needs to be a suspension of new commissions implemented, pending the quality assurance review.

Providers are expected to engage in this process and supply the Authority with any information requested pertinent to contract delivery.

## 4.2. Contract Review Meetings

Following implementation, contract review meetings will be on a six-monthly basis. This may be subject to change depending on risk, volume of business or relevant activity. Meeting frequencies may increase or decrease to ensure resources are targeted appropriately.

Contract management will arrange and hold the required contract review meetings (to review and assess contract performance and delivery to identify and look to address issues impacting on contract performance and/or delivery).

Contract management will receive a management report, from the provider, prior to the meeting to enable them to collate the information relating to contract performance for discussion/action at forthcoming contract review. This will include a performance update for the last period, as well as an update on the Annual Service Development Plan where applicable.

Should issues or concerns arise outside of the planned contract review meetings, providers should raise these with the Contract Management Team to ensure resolution can be sought by Lancashire County Council in a timely manner.

### **APL Care in Supported Housing – Contract review report**

**Date/Time/Venue:**

**Attendees:**

**Apologies:**

### **AGENDA**

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ID	ITEM
1	Introduction's & apologies-
2	Minutes from last meeting/matters arising.
3	KPI's
4	Management report and service update
5	Staff recruitment and training
6	Complaints/Compliments
7	Safeguarding
8	Information governance
9	Finance
10	Any other business
12	Date of next review

### 4.3 Ad hoc quality and compliance checks

Contract management may request, on an ad hoc basis, information from the provider in order to validate performance and ensure the service is being delivered in line with their contractual obligations and the service specification.

This may include, but not limited to:

- KPI Validations
- Staff Rota'ing & Daily Records
- Medication Processes, Support Planning and Administration
- Service User Finances
- Safeguarding Adults Policies, Procedures and Practise
- Policies, Procedures and Practise
- Audit of Actuals (actual care delivered) submitted via the Oracle Care Portal
- Review of ISF monies and their management
- Internal Quality Assurance

## 5. Contract Management Timeframes

KPI Submission - Timeframes		
KPI Submission	Period	Submission date
<b>Quarterly</b>		
Quarter 1	1 April to 30 June	15 July
Quarter 2	1 July to 30 September	15 October
Quarter 3	1 October to 31 December	18 January
Quarter 4	1 January to 31 March	15 April
<b>Six Monthly</b>		
Six-month period 1	1 April to 30 September	15 October
Six-month period 2	1 October to 31 March	15 April
<b>Annually</b>		
Annual period 1	1 April to 31 March	15 April

In order to reduce the number of KPI return dates, KPI return periods will be consistent across all service contracts. This will enable market benchmarking and avoid providers reporting on multiple KPI return dates. Contract management will take into consideration any impact this will have on KPI returns where only a partial period is being reported.



## 6. Addressing Poor Performance

Where it has been identified that a provider is not providing a good quality of service to the people using it and/or it is placing the health, well-being and safety of service users at risk contractual action will be taken.

Actions taken will be proportionate to the perceived risks to service users; the seriousness of the issues; whether contractual obligations have been breached; the level of engagement with the provider, and their view and response to the poor performance.

Any action taken will be in accordance with the Adult Social Care Policy and Procedure for Managing Service Provider Quality and Performance in Commissioned Services. See service contract appendix 10.

## 7. Contact List for Providers

Contact	Contact Details
Contract Management Team	Telephone - 01772 531293 Email - <a href="mailto:-contractmgmt.care@lancashire.gov.uk">-contractmgmt.care@lancashire.gov.uk</a>
Care and Public Health Procurement	Email – <a href="mailto:caphprocurement@lancashire.gov.uk">caphprocurement@lancashire.gov.uk</a>
Care Navigation	Phone – 01772 538450 Email: - <a href="mailto:carenavigation@lancashire.gov.uk">carenavigation@lancashire.gov.uk</a>
Care Data Team	Phone – 01772 530200 Email – <a href="mailto:caredatateam@lancashire.gov.uk">caredatateam@lancashire.gov.uk</a>
Customer Access Service	Procurement Customer Access Phone 0300 123 6710 Adults Social Care Customer Access Phone 0300 123 6720 Adults Safeguarding Customer Access Phone 0300 123 6721 Emergency Duty Team Customer Access Phone 0300 123 6722 Email <a href="mailto:CSC.ACScustomerservices@lancashire.gov.uk">CSC.ACScustomerservices@lancashire.gov.uk</a>
Adult Care Payments	Phone – 0300 123 6785 (Option 2) Email - <a href="mailto:EXCH.AdultsPayments@lancashire.gov.uk">EXCH.AdultsPayments@lancashire.gov.uk</a>
Procurement Information Management	Phone – 01772 534966 Email – <a href="mailto:PIM@lancashire.gov.uk">PIM@lancashire.gov.uk</a>

