

Dear Colleague

I hope this email finds you well. Following on from our **7<sup>th</sup> of May** letter regarding Provider Complaints Process and Notification of Dissatisfaction (NoD), please see the 7 service area MS Forms links below to our complaints data request. Can I request that each provider complete the survey allocated link/s below pertaining to your service area by the **10<sup>th</sup> of July**. If your business provides various services, we would request that a form is completed for each particular service area, i.e., Supported Living and Extra Care.

The aim of this data request is to support in the change within commissioning through a restructure as well as form and function of the quality and improvement provision within GCC's Adult Integrated Commissioning Department. The restructure is currently in its consultation phase with the aim of the department changes to be in full effect by the **1<sup>st</sup> September**. We aim to inform our Providers about the new structure after the consultation ends. GCC's Integrated Commissioning Team's key changes include:

- the separation of GCC and ICB commissioning (we will continue to work together, but as separate teams)
- Brokerage, contract management, and provider payments continue as joint functions (carried out by GCC on behalf of the ICB)
- GCC is investing significantly in an expanded quality and provider support function

The complaints whether they are formal (official complaint) or informal (concern or issue / not official), will be included in the quality standards queries in the future Quality Assurance Framework on the PAMMS platform. Providers will not be penalised or risk rated against these surveys as the department only wish to utilise this data for future changes in best practice and team remit and roles. Please see list of survey's below:

Service Type	MS Forms Link
Care Homes	<a href="https://forms.office.com/e/fEHzan19ww">https://forms.office.com/e/fEHzan19ww</a>
Domiciliary Care	<a href="https://forms.office.com/e/VmSWgz7tvC">https://forms.office.com/e/VmSWgz7tvC</a>
Extra Care	<a href="https://forms.office.com/e/8Txqz9jCcS">https://forms.office.com/e/8Txqz9jCcS</a>
Day Opportunities & Centres	<a href="https://forms.office.com/e/BHxQTasi4A">https://forms.office.com/e/BHxQTasi4A</a>
Respite	<a href="https://forms.office.com/e/VwHQxYdr2t">https://forms.office.com/e/VwHQxYdr2t</a>
Supported Living	<a href="https://forms.office.com/e/zwdKc8paQB">https://forms.office.com/e/zwdKc8paQB</a>
Forensic	<a href="https://forms.office.com/e/yggeSiyGNS">https://forms.office.com/e/yggeSiyGNS</a>



I would also like to clarify the Interim Notification of Dissatisfaction (NoD) & New Business Suspension Process outlined in the May 7<sup>th</sup> letter, as there has been some queries regarding the NoD's moving forward.

1. Regardless of whether there is active involvement from the Quality Team, the team routinely reviews intelligence relating to poor practices, engages in dialogue with providers, offers guidance, and ensures that providers are given the opportunity to address any concerns raised. Where concerns persist, the Quality Team may determine that issuing a *Notice of Dissatisfaction* is an appropriate first step in the quality escalation process.
2. Notices are issued in relation to specific areas of the contract, such as poor medication compliance or failure to cooperate during a quality assurance activity. A notice may be issued to an individual service or to a group of services, depending on the circumstances. Each notice will clearly outline the service issue and/or concern and the remedial action/s required to resolve. Notices are issued with a short timescale for compliance and are reviewed every 2–4 weeks, depending on the nature of the concern. Guidance and support are provided throughout the process.
3. At each review point, the notice may be:
  - a. **Satisfied** – where all required actions have been met and significant improvement is evident;
  - b. **Maintained at First Notice** – where some progress has been made, but not all actions have been completed;
  - c. **Escalated to Second Notice** – where little or no improvement has been demonstrated.
4. A maximum of three notices may be issued before consideration is given to suspending the service. Providers will be kept informed of decisions at each stage of the process.

Myself and the team hope that this now clarifies how the interim and potential official future quality escalation and new business suspension process works. However, the quality Leads Semonetta O'Connell (Older People) and Jess Breeden (Disability) would be more than happy to talk you through it.

Sincerely,

Benedict Leigh  
Director of Commissioning  
Adult Social Care