Radar Operating Procedure

Version 2.0

December 2022

Version Control

Version number	Author	Date	Amendment

Radar Operating Guidance v1.0	Beverly Cartwright	November 2017	Created
Radar Operating Guidance v2.0	Tahera Chaudhrey & Susan Shannon	December 2022	Amended following Radar review

			partner consultation survey (May 2022) and forums (June/July/Sept 2022), feedback from forum

			members, chairs, and Sumaiya Sufi/Karen Thompson

1. Introduction

In line with the Care Act 2014, the Lancashire Safeguarding Adults Board (LSAB) member organisations committed themselves to the prevention of abuse and neglect and the improvement in the quality of care delivered to adults with care and support needs.

Radar was introduced, with the shared purpose and the aspiration of multi-agency partners working collaboratively, to address issues of concern about commissioned

adult care providers to achieve sustainable improvements in safeguarding vulnerable adults from abuse and neglect and improving health and care outcomes for people.

Radar depends on multi agency partners working together equally, operating a collective model of accountability and decision-making that works through difficult issues where appropriate. The Radar process supports integration of learning, quality improvement and compliance systems, through sharing of evidence and insight.

This Operational Guidance sets out the approach agreed between the place-based partnerships and organisations within the Lancashire local authority boundary.

This document should be read in conjunction with the Radar Terms of Reference.

1. **Process Owner**

The Radar process, although multi-agency is led and co-ordinated by Lancashire County Council (LCC).

2. Criteria

<u>Radar</u>

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All providers subject to QPIP, CQC Special Measures, and those subject to compliance issues and/or contract suspension.

Radar partners will decide if the named provider, raised as an Early Alert or within Any Other Business, will be added to or remain on the Radar agenda for updating at the next meeting.

Early Alerts

Providers who meet the following criteria may be referred to Radar, at any time, as an Early Alert.

- Providers at risk of organisational failure - this may be planned or unplanned, where a provider has reported potential issues e.g., continued vacancies or staffing issues, that if continued may cause failure or any other reasons.
- Organisational abuse enquiries are ongoing or substantiated and no improvements, or limited improvements, have already been implemented by the provider.

- Where safeguarding enquiries have occurred within a care setting and wider concerns have been identified regarding the quality of care being provided.
- Concerns exist with organisational leadership and/or culture in which senior managers within the setting/organisation are implicated
- Significant breaches of HSCA 2008 (Regulated Activity) Regulations 2014 resulting in Care Quality Commission CQC) inadequate rating.

- Where there are high levels of complaints or a significant complaint, indicative of wider quality issues within the setting/organisation which are a cause for significant concern.
- Where compliance and contract monitoring work identifies a failure to make required improvements.

- Where there is data via the monthly and quarterly quality returns to LCC and CSU – that indicates there may be risks to the needs of the people who use the service.

Any other Business

Providers who meet the following criteria may be referred to Radar as Any Other Business, please note this list is not intended to be prescriptive as we encourage partners who support care providers to raise concerns, knowing they will be discussed by partners at Radar

- May be partner issue/problem, not extreme risk but want to discuss with partners.
- Information updates, these may relate to a significant change, to establish if any other intelligence is available.

- To support management of crossover services where they cross areas/service type – determine one Radar take the lead and keep other Radar chairs/partners updated

Removal for Radar

The named provider will be removed from the Radar agenda when a review of the initial risk has been mitigated and the Radar quorate have agreed no further action is required at this time or satisfactory assurance has been gained. The alerter will be notified of this decision by the organisation who brought the provider to Radar.

The chair can arrange for a more detailed peer review to be undertaken by Radar partners at any time, and certainly where a provider has been on Radar for 12 months, to verify that an up-to-date risk assessment is in place and organisational escalation process has been followed.

Discussion

Prior to the meeting, attendees are required to provide their updates in respect to providers on Radar and request for providers to be included as an early alert or any other business. This will help ensure that attendees can also provide relevant updates for any early alerts or any other business.

Attendees are expected to have reviewed the updates prior to attending the meeting, so that during the meeting, attendees will only need to share new information, which was not included in the update provided pre the meeting. This approach will ensure that maximum time is given to decision making on actions to be taken.

3. Decision Making

Members of the radar group will make decisions based on the information presented. The response 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 and/or where services are deemed to be unsafe and/or service users assessed needs are not being met
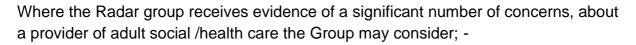
Members will request further information or actions from partner agencies to inform decision making and allocate responsibility and ownership of actions.

The table on page 5, outlines the range of interventions, based on the level of risk, this is not exhaustive, and it is not a requirement to progress through each level. Members

of the radar group will use their expertise and professional judgement to determine the correct level of intervention and escalation.

Where it is agreed that there is low – moderate risk, the provider can be removed from Radar.

Where the Radar group receives evidence of a significant number of concerns, about a provider of adult social /health care the Group may consider; -

- if a suspension of the provider is required.
- If a level 1 or level 2 QPIP is recommended.

In this instance, the relevant officer from LCC/ICB/CSU will follow their respective organisation's policy/procedure and feedback the outcome to the Group.

The following are a menu of interventions

Risk Assessment	Possible corrective / remedial actions
No/Low	Monitor the situation via routine monitoring arrangements and review within specific timescales – this may be the local

	authority, ICB, Safeguarding, CQC, Fire Service etc. undertaking contract reviews, quality or compliance visit.
Low to Moderate	Review the risk rating of the Service
	Provide advice and information to the Service to facilitate improvements.

	Request additional support/intervention from NHS Services, LCC infection prevention visit/audit.
	Arrange a meeting with the provider to give an opportunity, at an early stage in the process, for the provider to respond.
	Request an Improvement/Action Plan from the Service stating

	how they intend to address the issues and their timescales for implementation.
Moderate	Monitor the situation via **targeted** monitoring arrangements and review within specific timescales – this may be the local authority, ICB, Safeguarding, CQC, Fire Service etc. Undertaking contract reviews, quality or compliance visit.

High to Extreme	Enhanced monitoring – Review/step up the frequency of monitoring activity and Contract Review Meetings
	Re-assessment of need of specific service user(s) - where issues relate to the suitability of the service for an individual(s)
	Establish an operational task group to sample check, gather information or undertake a targeted intervention with the provider.

	Request the removal of specific staff members from direct contact with service users. Could be used in cases of suspected abuse, or misconduct.
	Suspension of commissioning new placements – pending investigation and/or improvements (Policy/Procedure for Suspension)

   	Seek legal advice if the provider is not engaging to make improvements and there is potential for breach/default notice.
   	Validation visit

Extreme	Request a contract breach/default notice to be issued to the provider if there are significant concerns with safety and quality or services are in breach of their contract
	Renegotiation of Contract
	Termination of Contract

Decommissioning

4. Information sharing

It is important for partners to raise concerns when they arise. Each organisation has a duty contact system for urgent matters and additional meetings/forums take place outside of Rader, where it is appropriate to raise issues, as immediate action may be required, updates can then be provided at Radar.

Themes from Radar will be shared and discussed with professionals responsible for quality improvement and sharing good practice.

5. Review of operating procedure

This operating procedure will be reviewed and updated in light of experience, learning, any changes in legislation or significant organisational change and within 12 months of last review.