



Item No. 18

Meeting Date

Wednesday 10th September 2025

Glasgow City Integration Joint Board Finance, Audit and Scrutiny Committee

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Review of Contract Management Framework for Social Care Purchased Services

Purpose of Report:

To advise the IJB Finance, Audit and Scrutiny Committee of the review of the Contract Management Framework for social care purchased services.

To seek approval from the Committee for the proposed updates to the Contract Management Framework including the introduction of an approach to Supplier Relationship Management.

To seek approval that the Contract Management Framework is to be reviewed on a three yearly basis. Officers may make minor updates within that period but any significant or material changes will be brought before the Committee for approval.

Background/Engagement:

FASC approved the current Contract Management Framework in [June 2023](#).

Contract Management activities are carried out in conjunction with partner providers and other stakeholders as appropriate.

Consultation for this review has been undertaken with colleagues and partner providers.

Governance Route:

The matters contained within this paper have been previously considered by the following group(s) as part of its development.

HSCP Senior Management Team ☐

Council Corporate Management Team ☐

Health Board Corporate Management Team ☐

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	Council Committee <input type="checkbox"/> Update requested by IJB <input checked="" type="checkbox"/> Other <input type="checkbox"/> Not Applicable <input type="checkbox"/>
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Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked to: a) Note the contents of this report; b) Approve the updated Contract Management Framework and timescale for implementation; and c) Approve the Contract Management Framework to be reviewed on a three yearly basis. Officers may make minor updates within that period but any significant or material changes required will be brought before the Committee for approval.
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Relevance to Integration Joint Board Strategic Plan:	
Purchased social care services are critical to the successful delivery of the IJB Strategic Plan. The effective management of contracts for purchased service provision requires a robust and proportionate framework to ensure the delivery and sustainability of high quality social care services. Contract Management activity, including Service Reviews, also contributes to improvements in the commissioning and procurement of future social care services.	

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Purchased social care services contribute to all 9 outcomes.
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Personnel:	Activity under the Contract Management Framework is undertaken with current Commissioning staff resources.
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Carers:	Contracts for services for unpaid carers are subject to the Contract Management Framework.
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Provider Organisations:	Provider organisations are equal partners in the delivery of social care services and integral to the review of services. Partner providers have been consulted as part of this review through the Provider Reference Group.
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Equalities:	None
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Fairer Scotland Compliance:	None
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Financial:	None
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Legal:	Future tender and contract documents will reflect the updated contract management arrangements.
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Economic Impact:	None
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Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	Robust application of the Contract Management Framework will result in improved identification and mitigation of risks in purchased services.
Implications for Glasgow City Council:	Glasgow City Council is the contracting authority for social care services purchased for the HSCP.
Implications for NHS Greater Glasgow & Clyde:	None

1. Purpose

- 1.1. To advise the IJB Finance, Audit and Scrutiny Committee of the review of the Contract Management Framework for social care purchased services.
- 1.2. To seek approval for the proposed updates to the Contract Management Framework and the introduction of an approach to Supplier Relationship Management.
- 1.3. To seek approval that the Contract Management Framework is reviewed on a three yearly basis and that Officers may make minor updates within that period but any significant or material changes required will be brought before the Committee for approval.

2. Background

- 2.1. In June 2023, FASC approved the current [Contract Management Framework \[CMF\]](#). The previous iteration of the CMF had been in place for over a decade and was acknowledged to be no longer providing proportionate or effective oversight of contracts for purchased social care services.
- 2.2. The updated CMF introduced a risk based approach to contract management which sought to target Commissioning activity and resources where it was most needed.
- 2.3. A commitment was given to FASC in 2023 that there would be annual reviews of the CMF with the first taking place in March 2025. It has not been possible to meet that timescale due to the need to prioritise procurement activity and other key Commissioning tasks.
- 2.4. Commissioning staff have been consulted as part of the review, and particular focus was given to identifying inefficiencies in the current processes. Consultation was also undertaken with organisations who provide social care through the Provider Reference Group. This group, which commenced in November 2024, consists of a representative selection of Partner Providers

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who have volunteered to meet regularly and provide input on a range of topics affecting the commissioning, procurement, and delivery of purchased social care services.

- 2.5. The 2023 CMF introduced for the first time for GCHSCP a Supplier Management process. This process has been significantly updated as part of the review of the CMF as noted at Section 4 below.

3. Proposed Revisions and Updates to the Contract Management Framework

- 3.1. The CMF introduced in 2023 significantly improved consistency of practice and governance in relation to contract management, and scope to further reduce the administrative burden and to improve practice was identified through the review. The following revisions to the CMF are proposed:
 - The standard Risk Assessment has been shortened to remove duplication.
 - Improved guidance to Commissioning staff on topics including improved communication, property oversight arrangements, and the assessment of risk where there is incomplete information available.
 - Introduction of a requirement to take account of the views of individuals with lived experience when undertaking a Service Review.
- 3.2 The CMF documents and associated templates have been updated to reflect these proposed changes which will further improve the efficiency and effectiveness of contract management in GCHSCP. The updated CMF is attached as Appendix 1 to this report with the standard Risk Assessment attached at Appendix 2.

4. Provider Relationship Management

- 4.1. The 2023 review identified a need to strengthen oversight of providers who operate across multiple care groups and / or contracts. At that time, it was proposed that a lead officer would be appointed for providers who operate across multiple care groups. This was named Provider Relationship Management to reflect the collaborative approach that is embedded within the CMF.
- 4.2. The initial approach, while helpful in streamlining contract management activity, did not achieve the aim of implementing a robust supplier management approach to ensure that GCHSCP were able to identify risks and take appropriate action across all a Partner Provider's contracts.
- 4.3. To achieve the objective of analysing the aggregate risk and strengthening oversight, the proposed new approach will include a risk assessment along with a mandatory meeting with the Partner Provider with a written record of the meeting.
- 4.4. Where a Partner Provider delivers Services across four or more contracts then a designated officer, usually a Principal Officer, will be responsible for assessing, recording and sharing Provider Relationship Management information for that Partner Provider. They will also be responsible for co-

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ordinating HSCP activity in relation to any identified risks or concerns with the Partner Provider's performance.

- 4.5. As the greatest benefit from a Provider Relationship Management approach would be realised with Partner Providers with a higher number of contracts, those with four or more contracts were identified. A threshold of four contracts was selected to balance the benefits of Provider Relationship Management with the additional resources needed to implement the approach. Twenty two Partner Providers, with a total of 164 live contracts are therefore in scope.
- 4.6. Care has been taken to ensure that duplication between Provider Relationship Management and actions at an individual contract level is avoided. For example, due diligence such as annual checks on Insurance cover and publishing of a Duty of Candour report will be undertaken at an organisational level to avoid multiple requests for information.

5. Implementation and Future Review of the CMF

- 5.1. An implementation plan will be developed to ensure that Commissioning is ready to implement the proposed changes. Updates to Contract Management will be implemented in time for the Provider Service Return in October 2025 while a phased approach will be undertaken to Provider Relationship Management to be fully introduced by April 2026.
- 5.2. Partner Providers will receive communication of key messages for the changes to the CMF and information available on Your Support Your Way Glasgow website and the Staff Updates intranet will be updated.
- 5.3. Feedback from staff and Partner Providers is that frequent changes to the CMF is disruptive and that periods of stability allow more effective contract management. It is proposed that the review of the CMF should be undertaken every three years with a reported report provided to the Finance, Audit and Scrutiny Committee on that review.
- 5.4. If minor changes to the CMF are required between the formal review cycle, for example to reflect updates to legislation or other duties, it is proposed that these will be approved by the Head of Commissioning or another Officer as appropriate. However, if the changes required are significant or materially change the CMF then a further paper will be brought to the Committee for approval.

6. Recommendations

- 6.1. The IJB Finance, Audit and Scrutiny Committee is asked to:
 - a) Note the contents of this report;
 - b) Approve the updated Contract Management Framework and timescale for implementation; and
 - c) Approve the Contract Management Framework to be reviewed on a three yearly basis. Officers may make minor updates within that period but any significant or material changes required will be brought before the Committee for approval.

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Appendix 1

Glasgow City Health & Social Care Partnership

Contract Management Framework for Social Care Purchased Services

September 2025

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1 INTRODUCTION

Glasgow City Health and Social Care Partnership [“the HSCP”] spends approximately 50% of its social care budget with externally contracted partner providers annually.

Contract and Supplier Management activity is vital to delivering service provision which meets the HSCP’s strategic objectives and improves outcomes for the citizens of Glasgow. This document details the HSCP’s Contract Management Framework [CMF] which provides a consistent and comprehensive structure within which the HSCP will monitor and manage the performance of contracts and partner providers across the range of services funded by the Partnership.

The CMF is designed to complement and be informed by regulatory organisations and statutory procedures including the Care Inspectorate, Health Improvement Scotland, Adult Support & Protection and Child Protection legislation. The CMF will augment these approaches and avoid duplication where possible.

Glasgow City Council is the contracting authority for the HSCP’s social care contracts. This document refers to the HSCP, but the role of the Council as the contracting authority is acknowledged in this Framework.

HSCP Commissioning places a significant focus on collaborative and partnership working and through our [Development Plan](#) will continue to review and improve our internal processes. These changes along with the HSCP’s [Strategic Plan](#) and Glasgow City Council’s [Sustainable Procurement Strategy](#) provide the context under which contract and supplier management will operate in Glasgow.

Contract Management is the process of effectively managing the creation, implementation, and review of contracts. It provides a method to monitor performance under the contract whilst managing risk.

Supplier Management refers to working with providers across their whole range of contracts with the HSCP. In this Framework, Supplier Management is referred to as Supplier Relationship Management to reflect the importance of relationship building and collaborative working with partner providers.

Contract Management and Supplier Relationship Management are linked. Effective Supplier Relationship Management requires effective and robust Contract Management methodology/approaches to be in place.

The CMF allows Commissioning Officers to work closely with social care partner providers, colleagues, service users and relevant stakeholders to maximise the quality of services whilst ensuring Best Value is delivered.

The use of a consistent risk-based approach to contract management aims to proactively identify and manage risks to effective service delivery. Alongside an approach which promotes collaborative working, this will support:

- Resources being effectively targeted
- Early identification of potential issues and areas for improvement
- Joint working with relevant partners to resolve issues
- Recognition and promotion of mutual interests in service improvement

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- Identification and sharing of good practice

Consistent use of this Framework will result in improvements in future Commissioning activity and ensure that future contracts and other innovative procurement activities are delivered to the highest standards.

The Contract Management Framework is aligned with best practice across Scotland including other Local Authority models and the Scottish Procurement Journey¹ methodology including Best Practice guidance².

2 BENEFITS OF CONTRACT & SUPPLIER RELATIONSHIP MANAGEMENT

Working collaboratively with providers and partners can deliver benefits by:

- promoting constructive and transparent relationships
- monitoring, managing and continuously improving provider's contractual performance, ensuring overall compliance to Key Performance Indicators and Strategic Outcomes
- working collaboratively to implement improvement action plans in the event of underperformance
- supporting achievement of Best Value
- ensuring that all relevant parties understand their roles and responsibilities in relation to the contract
- providing environment and opportunities for innovation
- reviewing the operation of the contract to identify lessons learned to inform future services or strategies
- developing sustainable procurement benefits with partners
- measuring and maximising the Community Benefits available through the contract

¹ <https://www.procurementjourney.scot/>

² [Procurement of care and support services: best practice guidance - updated June 2021 - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/procurement-care-support-services/best-practice-guidance/updated-june-2021/pages/12.aspx)

3 DEFINITIONS, ROLES, & RESPONSIBILITIES

Contract – Applies to agreements to purchase and provide services irrespective of tendering and purchasing route. Contracts contain the terms and conditions and requirements for purchased social care services.

Commissioning Officer – The agreed key point of contact for the Council to manage and monitor performance against the Contract terms, specification, and KPIs under the CMF. The Commissioning Officer will normally be responsible for Contract Management activities under this Framework.

Commissioning Manager – Takes the lead role on Contract strategy, directing monitoring and review activity in alignment with HSCP strategic plans. The Commissioning Manager is also responsible for owning appropriate actions where issues are identified and assessed as a significant risk.

Contract Management – The process by which the HSCP ensures that a Service complies with the terms and conditions of contracts including any agreed performance indicators.

Enhanced Monitoring – Refers to escalation actions, such as increased frequency of monitoring visits, undertaken by Commissioning staff, where increased risks have been identified. The aim of Enhanced Monitoring is to ensure that risks are reduced and service performance improved.

Head of Commissioning – Has overall responsibility for the activities of Commissioning staff under this Framework and provides leadership and guidance.

Partner Provider – The organisation responsible for service delivery under the Contract. They will identify a key point of contact to work with the Commissioning Officer to meet the obligations of the contract including monitoring the Contract Management Framework.

Principal Officer – Responsible for allocating Commissioning Officers to carry out actions under the Contract Management Framework. The Principal Officer is responsible for reviewing CMF Risk Assessments where an elevated risk has been

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identified and, in discussion with others, agree appropriate escalation actions. They are also primarily responsible for Supplier Relationship Management activity.

Supplier Relationship Management – Refers to collaborative Supplier Management activity with Partner Providers across their contracts with the HSCP.

Provider Service Return – Known as the PSR, this is the core information requested from partner providers on a biannual cycle. There is flexibility within the return to ensure that the data collected is relevant to the Service and Contract.

Routine Monitoring – Refers to actions taken to robustly monitor and assess risk and contractual performance of a service.

Service – What is delivered under the Contract by the Provider. Monitoring of the Provider's performance of the Service and compliance with the Contract is the central task of this Framework.

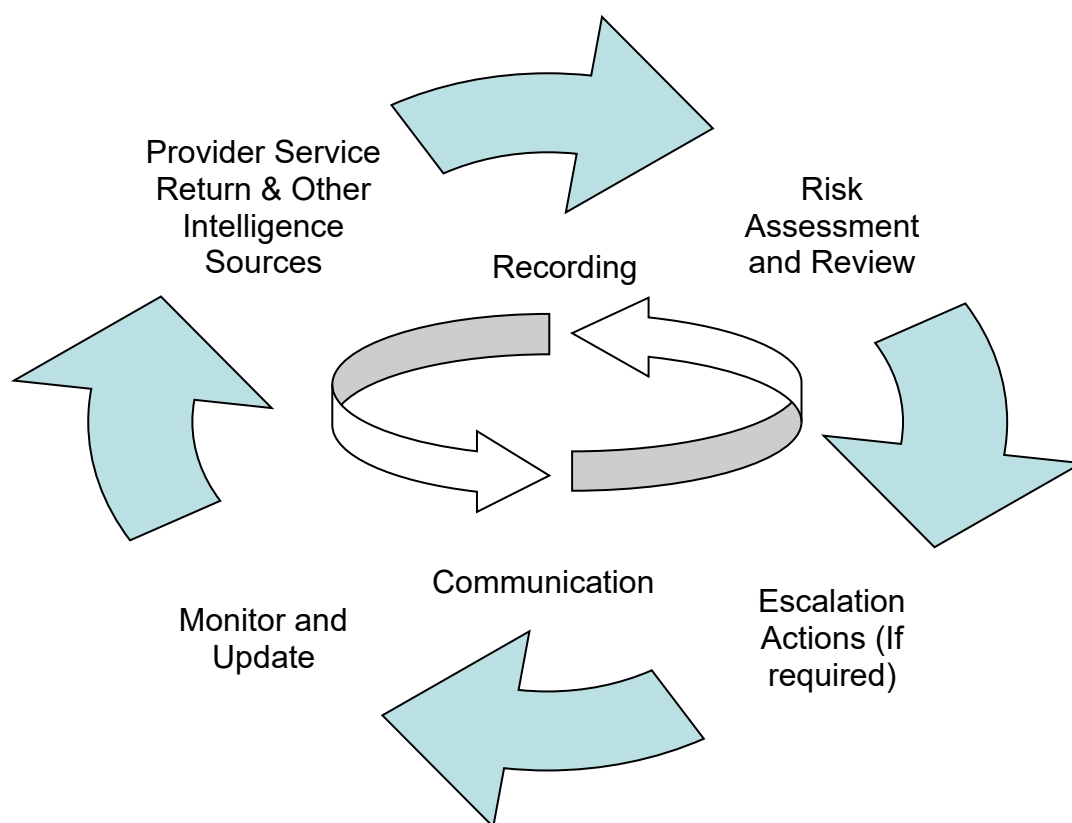
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4 PRINCIPLES OF THE CONTRACT MANAGEMENT FRAMEWORK

Contract Management activity includes the processes of gathering and analysing core information on Contracts and Services.

The CMF is based on a biannual cycle of monitoring activity however there is the flexibility to carry out additional ad hoc activity as required or mandated by circumstances.

The cycle of activity in this Framework is outlined below



The outer cycle shows a continuous progression of activity; information gathering (e.g. the Provider Service Return), Assessment, Actions, and Monitoring. The inner cycle shows the key principles of effective communication and timely, accurate recording.

Where a partner provider delivers Services under a single Contract across multiple care groups, the Commissioning team which has the largest percentage of spend under the Contract will normally lead on the management of the contract under the CMF.

Where a Provider delivers Services across four or more Contracts, then mandatory Supplier Relationship Management actions are required under Section 9 of this Framework in place to co-ordinate an HSCP-wide view of the Partner Provider's performance and any associated risks.

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A suite of documents has been developed to support and manage the CMF and are included as appendices.

5 ESTABLISHING CONTRACT & SUPPLIER MANAGEMENT

It is important that, as part of procurement activity, Contract Management arrangements are planned to ensure effective measures are in place at Contract award.

Commissioning Officers who will be responsible for Contract Management will be identified as part of Contract mobilisation plans. This will allow the officer to familiarise themselves with the terms of the Contract and Service arrangements including relevant Key Performance Indicators and other quality assurance measurements.

Key stakeholders such as statutory agencies, regulators or service user organisations should be identified as early as possible. Commissioning Officers should aim to minimise duplication with other regulatory bodies, for example the Care Inspectorate, and ensure that monitoring activity is proportionate to any identified risks.

Any implication for Supplier Relationship Management activity should be identified during the mobilisation period. It is important that activities are not duplicated between Contract Management and Supplier Relationship Management. Due Diligence and other actions will be prioritised at an organisational level through Supplier Relationship Management wherever appropriate.

Provider representatives identified through the Contract award process will be contacted as soon as practicable to establish effective communication routes. There must be clear communication of the Provider's responsibilities to ensure compliance with the Contract's terms and conditions and the performance metrics and other quality assurance measurements.

6. CONTRACT MANAGEMENT ACTIVITY OVERVIEW

The Contract Management Framework is based on a biannual cycle of information gathering and risk assessment.

The biannual cycle will be achieved through the Provider Service Return [PSR]. The information in the PSR along with additional data and intelligence gathered by the Commissioning Officer (such as reports from partner providers, communication with care managers, service concerns, etc.) will be used to complete a Risk Review & Assessment that will establish the level of risk for the Service for that period.

Additional actions beyond the Risk Review & Assessment are only mandatory where escalated or substantial risks are identified.

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Available additional actions include escalation via the Enhanced Monitoring Report, the agreement of an Action Plan with a Partner Provider, and consideration of the need to undertake a Service Review.

6.1 RISK REVIEW

The core activity within the CMF is to review and assess a Service's risks and performance using the Risk Review & Assessment form. This mandatory activity is completed on a biannual basis after receipt of the PSR.

Risk reviews will be informed by the PSR for the Service and other relevant information available at the time of the assessment. This may include feedback from operational colleagues or other relevant data.

Commissioning Officers will reflect on the previous Risk Assessment (if available) and ensure that the outcomes of any previous actions are noted, and outstanding issues carried forward.

Commissioning Officers have the flexibility to complete the Risk Review & Assessment as a 'desktop' exercise where they deem that they have sufficient information available to make an accurate and robust risk assessment decision. However, Commissioning Officers must consider whether the risk assessment process could be improved by direct discussions with the Partner Provider.

The completed Risk Review & Assessment must always be shared and discussed with the Partner Provider.

6.2 RISK ASSESSMENT

As part of the Risk Review & Assessment form, the Commissioning Officer will complete a Risk Assessment using the template provided at Appendix 2.

The Risk Assessment will produce a risk score which will identify the appropriate risk rating for the service.

In addition, the following risk areas are core to the risk assessment process:

- KPIs / Outcomes
- Service Concerns / Incidents
- Regulator
- Financial Risks

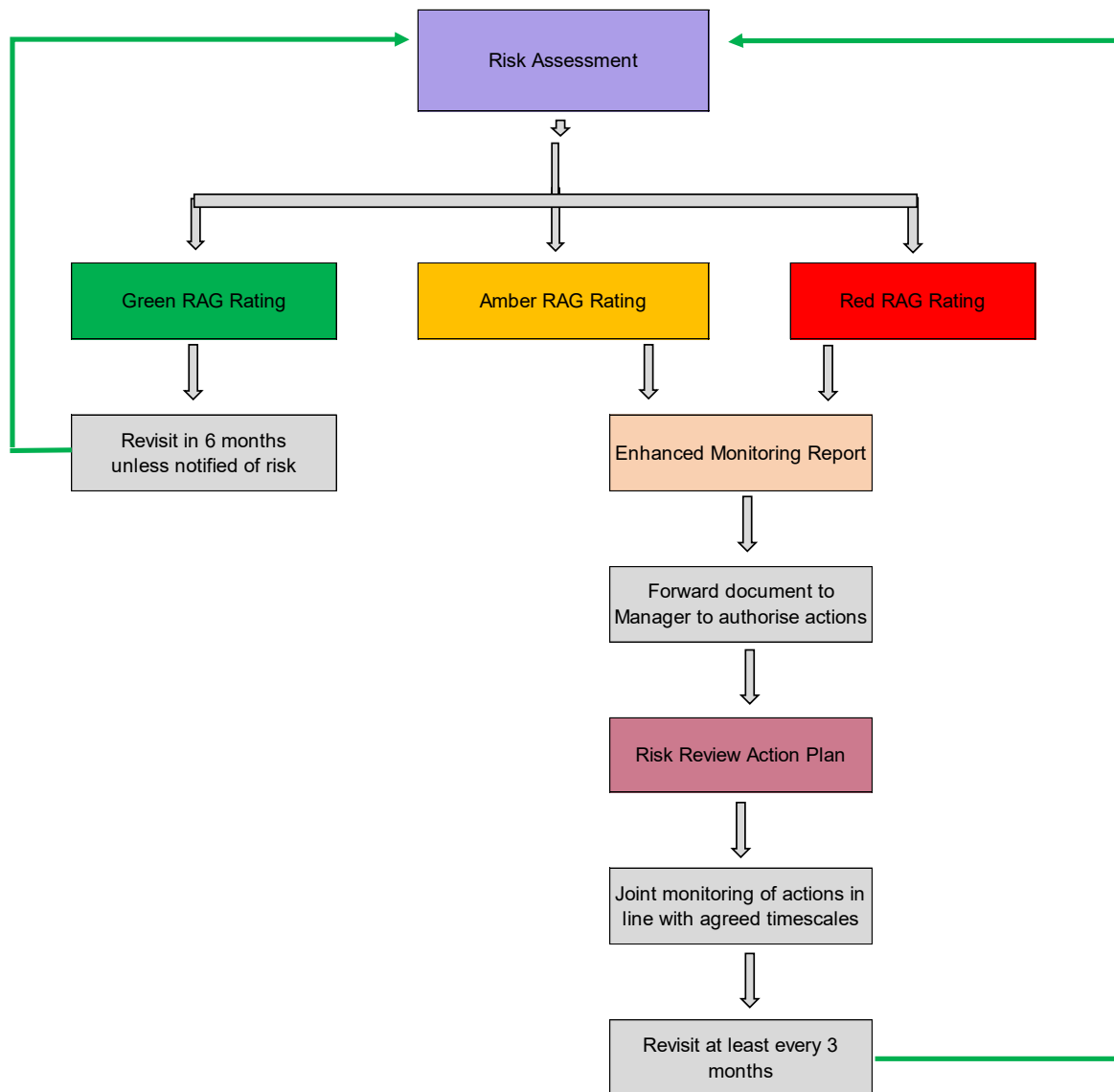
A finding of high risk (i.e. a score of 10) in two or more of these core risk areas will result in an automatic rating of Substantial risk irrespective of the overall Proportionate Risk Score for the service. In addition, consistently poor adherence, or compliance by the Provider to the requirements of the CMF will result in a Substantial risk rating.

A visual representation of this process is shown on the following page:

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GCHSCP Contract Management Framework: Risk Assessment Process



6.3 RISK RATING

Glasgow City HSCP expects that Services will normally be delivered at a Satisfactory (Green) Risk level.

Prompt action must be taken to ensure that Services do not operate at an Enhanced or Substantial Risk level for extended periods of time.

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The factors below are not exhaustive lists. Each assessment and review must be completed based on the available information and circumstances present with actions taken as required.

The three levels of risk are:

Satisfactory Risk – Green on a R/A/G scale – Routine Monitoring

Whilst it is expected that minimal interventions will be required for Satisfactory Risk Services, Commissioning Officers will be vigilant for early indications of increased risk or deteriorating performance and take appropriate steps with the partner provider to prevent greater problems emerging at a later stage.

Those services assessed as Satisfactory Risk will not require the completion of a formal Action Plan.

Possible Factors

- Contract is being delivered within or exceeding expectations with only minor, resolvable issues which do not materially affect service delivery or outcomes
- Partner Provider engages with the HSCP appropriately
- Service Users are effectively engaged with by the Partner Provider
- No Financial issues identified
- Regulator is satisfied with service delivery
- Complaints and Partner Provider concern activity does not disclose any concerns

Escalated Risk – Amber on a R/A/G scale – Enhanced Monitoring

Where it has been assessed that the level of risk has increased to a level where there is an impact on the delivery of the Contract or Service under the Contract then an assessment of Escalated Risk is appropriate.

The Enhanced Monitoring Form is the formal record of the issues and risks present at a Service and must be completed whenever escalated risks are present. Where escalated risks are assessed, the Enhanced Monitoring form will be subject to review and agreement by a Principal Officer.

It will usually be appropriate to conduct a Contract Management Meeting where a Service has an assessment of Escalated Risk. Section 6.5 provides further information about Contract Management Meetings.

Actions to mitigate the identified risks and move the Service back to a Satisfactory level of risk must be identified along with clear timescales for progress.

An Action Plan must be drafted following the Contract Management meeting and agreed with the Partner Provider.

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It is the responsibility of the Commissioning Officer to keep colleagues aware of progress with the Action Plan. This includes consultation and information sharing with relevant Care Managers within Operational teams.

Possible Factors

- Some barriers to Contract delivery with outcomes being missed. Multiple or non-trivial issues identified
- Lack of engagement with risks and issues not remedied by the Partner Provider
- Possible financial concerns with the Partner Provider or Contract
- ASP/CP concerns raised by Operational colleagues
- Regulator has concerns about aspects of service delivery including a reduction in grading scores
- Service concerns
- Complaints

Substantial Risk – Red on a R/A/G scale – Enhanced Monitoring

Where the risk level has increased to the extent that there are concerns about the safety and wellbeing of service users, a threat to the future stability of the Service or Contract, or other serious adverse outcomes then an assessment of Substantial Risk is appropriate.

The Enhanced Monitoring Form is the formal record of the issues and risks present at a Service and must be completed whenever substantial risks are present. Where substantial risks are assessed, the Enhanced Monitoring Form will always be subject to review and agreement by a Commissioning Manager. Identified risks and proposed next steps will be agreed as part of that process.

Consideration will be given to holding a multi-disciplinary meeting involving appropriate external agencies such as the Care Inspectorate. Clear communication routes with the Partner Provider will be in place to ensure any immediate risks are addressed.

Relevant information must be shared with Care Managers within Operational teams including Review or Quality Assurance teams and Health colleagues as appropriate. These colleagues may be invited to any multi-disciplinary meeting arranged.

The Commissioning Manager will be responsible for directing activity by Commissioning to reduce the identified risks.

The Head of Commissioning will be kept informed of actions in relation to the Service.

All Services with a Substantial risk rating will have an Action Plan. This will detail the actions proposed to mitigate risks and progress the Service towards a Satisfactory level. The Action Plan must be kept updated until the Service has returned to a satisfactory level of risk.

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The Commissioning Manager will decide, in consultation with other involved parties, when it is appropriate to review the risks at a Service and consider reducing the assessed risk level.

Regular Contract Management Meetings will be held between the Partner Provider and relevant staff from Commissioning, with others invited where a multi-disciplinary approach is deemed to be appropriate. The aim of these meetings is to review the Action Plan and agree future actions.

Possible Factors

- Significant barriers to Contract delivery with few or no outcomes or KPIs being met.
- Multiple significant or critical issues identified
- Behaviour by the Partner Provider including a failure to engage with monitoring activity and/or a refusal to accept risks and issues
- Significant financial concerns that could endanger service delivery
- Large Scale Investigation or significant ASP/CP concerns
- Regulator has issued an Improvement Notice or taken other similar action

6.4 PROVIDER SERVICE RETURN (PSR)

Partner providers will supply information and data via the Provider Service Return. The PSR includes a core data set for all contracted services and is supplemented by care group or service type questions that will be context dependent. These additional questions will reflect key strategic objectives and performance measurements within the care group. Questions will be subject to periodic review to ensure continued relevancy.

Aligned to the overall biannual cycle of the Contract Management Framework, the PSR is issued twice per year in October and April.

Where a Partner Provider has failed to submit the PSR, it is the responsibility of the Commissioning Officer to raise non-completion with the Partner Provider, identifying the reasons for non-completion and agreeing a plan to ensure future returns are submitted. Unless exceptional circumstances apply, the Partner Provider will also be asked to submit an 'offline' return for that period using the same questions as the PSR. Two consecutive non-completions of the PSR will result in an escalation of the risk rating for the service and enhanced monitoring actions being required.

A Risk Review & Assessment will still be undertaken if a Service has failed to return the PSR, and the failure to comply with the PSR will be reflected in the risk score

6.5 CONTRACT MANAGEMENT MEETINGS

Contract Management Meetings are an important part of the Contract and Supplier Relationship Management processes and provide the Commissioning Officer and the

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Partner Provider with an opportunity to discuss areas of good practice, identified problems, undertake checks on policies, and agree actions that will seek to improve Service delivery under the Contract. This is particularly important where Escalated or Substantial risks have been identified.

The Commissioning Officer will agree the frequency of Contract Management meetings with the Partner Provider, but the following minimum levels must be met:

- Within the start up / contract mobilisation period of the Contract
- Within the first six months of a Contract
- Where an assessment of Substantial Risk has been made
- When a Service Review is being completed
- When Contract exit actions are being undertaken

The aim of Contract Management Meetings is to explore risks already identified, to confirm whether there are additional risks present, and to resolve issues through discussion with Partner Providers. It is therefore advisable to hold the Contract Management Meeting at the Service or Partner Provider's office to allow access to relevant evidence and where appropriate to gain the views of the users of the Service. However, Commissioning Officers and Partner Providers have discretion to agree the most suitable venue for the meeting, which may include the use of virtual meetings.

In line with agreed practice, Commissioning Officers must carry out monitoring visits at least once per year where a Service is being delivered from a Council / HSCP property

Commissioning Officers must balance the convenience and flexibility of virtual meetings with limitations to their ability to obtain in person experience of the Service. Where the service is being delivered from a Council / HSCP property a contract management meeting must be held at least annually on site at the property.

It is important that the record of the meeting is shared with the Partner Provider to ensure clear communication and allow collaboration to achieve the agreed outcomes.

6.6 RECORDING

It is essential that activity under this Framework is recorded accurately and consistently. This allows the HSCP to have assurance and evidence that Contracts are being effectively monitored and appropriate Services are being delivered.

The full list of templates under this Framework are contained in the appendices to this document. These documents will ensure consistent practice across all Contracts for the HSCP and be supplemented by electronic recording through the HSCP's approved software.

Commissioning Officers will record the outcome of their Risk Assessments via the approved spreadsheet or other method to allow performance measurement and reporting.

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6.7 FINANCE

Financial due diligence and assessments are conducted during the tender process and establish that finance related risks are acceptable at Contract commencement.

To ensure ongoing compliance with financial requirements, additional checks may be carried out by HSCP Finance while the Service operates under the Contract. The frequency of these appraisals will be agreed with the relevant HSCP Finance team and will reflect the length, complexity, and risk profile of the Service.

Ad hoc checks by HSCP Finance may also be requested where escalation actions are being undertaken under this Framework. In these circumstances a representative from HSCP Finance will be included in multi-disciplinary discussions as part of the escalation actions.

7 COMMUNICATION

It is essential that communication with the Partner Provider is clear and unambiguous. Commissioning Officers will regularly review the arrangements for communicating with the Partner Provider to ensure that they remain effective.

Officers and Partner Providers must be vigilant that documents containing personal or sensitive information are not communicated by insecure routes.

8 SERVICE REVIEWS

Service Reviews may be completed on a planned or unplanned basis.

The process for review is identical regardless of whether the review has been planned following mandatory timescales or has been directed in response to increased risks, a serious specific issue, or due to a strategic decision.

A Service Review report template is contained at Appendix 7. The Service Review report must be completed for all reviews and give clear recommendations.

The officer authorising the outcome of a review will be either a Principal Officer or Commissioning Manager dependent on the circumstances and level of risk present.

Where more than one Commissioning team is involved in the review then lead responsibility will be aligned to the team with responsibility for Supplier Relationship Management for the organisation.

Given the range of reasons for a Service Review (examples include an unscheduled review due to a Large Scale Investigation, or the potential termination of contract), there is flexibility for Commissioning teams to determine the most appropriate people to be involved in the review process and be present at review meetings. This should be recorded and communicated with the partner provider

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The outcome of the Review must be clearly communicated with the completed Review report shared with the Partner Provider as soon as practicable after completion of the Review.

8.1 PURPOSE OF REVIEWS

The purpose of a Service Review is to assess the performance of a Service and Partner Provider and their contribution towards the agreed outcomes of the Contract. It enables the HSCP to reach a decision regarding the nature of any ongoing involvement with the Partner Provider, to identify areas of good practice or recognise where improvement is required.

For Reviews to be effective, it is important that Commissioning works collaboratively with operational colleagues including Care Managers, Review teams, Health staff, and other appropriate parties such as the Care Inspectorate.

There must always be consideration of how the views of those with lived experience of the Service will be gathered and reflected in the Review.

Collaboration with Partner Providers is also essential to the successful completion of a Review. It is essential that the view of the Provider is recorded on the form and taken into account prior to authorisation of the review.

This collaborative approach will be reflected in the Review recommendations which may include, but not be limited to, the following options:

- Extend the Contract with the option for an action plan
- Seek to vary the Contract
- Terminate the Contract
- Redesign/reconfigure the Service
- Commence tender activity for an alternative Service
- Suspension of referrals/admissions
- Consider reviewing individual Service Users
- Alert colleagues and other statutory bodies
- Any other actions deemed to be appropriate

Once the proposed actions have been authorised, the outcome will be shared with the Partner Provider. Any actions needed to address urgent issues should not be delayed until an Action Plan is agreed and can be progressed in advance of the conclusion of the Review, subject to the approval of the relevant Commissioning Manager.

8.2 PLANNED REVIEWS

Planned Reviews must take place within a timescale that allows sufficient time to plan future service provision. Reviews must be scheduled to ensure that the outcome

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will assist future decisions in relation to the Contract. Care must be taken to schedule reviews in a reasonable timescale where a contract term is less than three years.

A planned review may align with the HSCP's programme of individual Service User reviews. Where a Service Review is being planned on this basis then the Commissioning officer will liaise with the Partner Provider and the relevant HSCP review team.

Where a Contract exists on a rolling basis with no end date (e.g. the National Care Home Contract) OR has a term of more than 3 years then the period between Service Reviews must not exceed 3 years.

8.3 UNPLANNED REVIEWS

Where specific issues have arisen, heightened risks are emerging or have been confirmed, it may be necessary to conduct an unplanned Review. In these circumstances the process and template are identical to a planned review although timescales may be shortened dependant on the urgency of the actions.

Commissioning Officers should ensure that the issues or risks that prompted the unplanned review are reflected in the findings and recommendations of the Service Review form.

Other than following an assessment of Substantial risk, an unplanned review may also be appropriate in the following circumstances*:

- Receipt of complaint(s) or patterns/trends which suggest significant dissatisfaction with a service
- Where significant concerns are raised about a service by service users or their representatives, care managers, the media, the public, etc.
- Notification of serious concerns by another party, such as the Care Inspectorate or other local authorities
- Potential breakdown of the service, which would potentially have significant budgetary impact or requirement for reconfiguration
- Where the model of service no longer complies with Glasgow City Council's strategic or service objectives.
- Where changes to legislation affect existing arrangements or the Partner Provider's ability to provide a service
- Where there is evidence that the Partner Provider is in breach of the terms and conditions of the contract
- Where changes in the service affects its overall cost, leading to concerns about the viability or cost of the service

*Note this is not an exhaustive list of possible factors and each decision on whether to commence a Service Review must be based on the circumstances present.

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9. PROVIDER RELATIONSHIP MANAGEMENT

Provider Relationship Management is the name that the HSCP uses for Supplier Management activity. This ensures that the HSCP takes a holistic and coherent approach to issues and risks that may affect Partner Providers delivering multiple Contracts. It is a vital task within the Contract Management Framework and two templates have been developed for this task.

An annual risk assessment for Provider Relationship Management is at Appendix 6 of this document. In addition, a record for Provider Relationship Management is provided at Appendix 7.

As noted at Section 4 above, where a Partner Provider delivers Services across four or more contracts then a designated officer, usually a Principal Officer, will be responsible for assessing, recording and sharing Provider Relationship Management information for that Partner Provider. They will also be responsible for co-ordinating HSCP activity in relation to any identified risks or concerns with the Partner Provider's performance.

On an annual basis, the designated officer must undertake a Provider Relationship Risk Assessment and complete the linked Provider Relationship Record.

Where risks are assessed as being Escalated or Substantial for the Partner Provider then discussion of future actions will be agreed with the Commissioning Manager and, where appropriate, the Head of Commissioning. Expected actions include, but are not limited to, meeting the management of the Partner Provider and the completion of an Action Plan to mitigate and resolve the identified risks.

Aligned with the overall approach of this Framework, Provider Relationship Management should be undertaken in collaboration and there should be clear communication with the Partner Provider.

All Commissioning teams with a contractual relationship with the Partner Provider must be made aware of any significant information or any risks that may have been identified. This will involve sharing the Provider Relationship Management documents and maintaining the electronic records.

Relevant Operational staff and other key Partners will be updated as appropriate.

It is the responsibility of all Commissioning staff to ensure that the designated officer for Provider Relationship Management is made aware of any relevant issues and concerns in relation to that Partner Provider.

10. CONTRACT EXIT

As a Contract progresses towards its end date, all parties to the Contract are responsible for working collaboratively towards the fulfilment and exit of the Contract whilst planning for future service delivery if required.

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Planning for Contract exit must commence at the earliest possible stage to identify possible risks, any de-commissioning requirements and ensure continuity of Service. Any strategy for Contract exit must include a planned Service Review. Where a Contract will be in place for less than three years, then a Contract Exit review should be planned as part of the Contract Mobilisation actions. This ensures that all parties can prepare for the Service Review.

A key aim of the exit strategy will be to ensure minimum disruption to Service delivery and to Service Users.

The relevant Commissioning Officer will ensure that the Partner Provider is aware of the following requirements in relation to Contract exit:

- An obligation to continue delivering the Service at the same level of quality and to continue to comply with all the obligations in the contract
- Confidentiality on any communications regarding the termination of the Contract
- The transfer or deletion as appropriate of all sensitive or confidential data including any Service User information
- Cooperate with any transition arrangements to a new Service or Partner Provider
- Determining an acceptable method by which the supplier will destroy and remove the Council's proprietary information
- The return or transfer of each party's assets
- Ensuring that the Partner Provider's key personnel with relevant knowledge and expertise remain to deliver the Service during any transition
- The agreed treatment of employees and any obligations to inform or consult under TUPE
- Identify any costs including but not limited to compensation for transition activities, undelivered services and outstanding invoices

A lessons learned exercise should be carried out if early termination of a contract occurs. The outcome of this exercise will be used to inform subsequent procurement actions and service delivery.

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Appendix 2

GCHSCP Contract Management Framework: Risk Assessment

RISK LEVEL

Select a level of risk from 2 to 10 where 2 is the lowest and 10 is highest - 0 must only be selected where a risk area is not relevant to the service. 0 is not a valid score for a low risk.

The descriptors below with scores of 2, 5, 7, and 10 scores give guidance to aid scoring.

Services can be allocated any score from 2 to 10 so can, for example, be awarded a score of 6 for a risk area where it is assessed that this score most accurately reflects the situation.

See guidance below in relation to Core Areas of Risk

Date of Risk Assessment:

Completed by:

CONTRACT					
Risk Level Indicators				ENTER RISK SCORE	
Type / Risk	2	5	7	10	Level of Risk
	Signposting and/or advice only	Low levels of social care. Individuals are able to self-advocate	High level of social care. Individuals with complex needs	High level of social care and/or complex needs delivered in a group living setting	

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Contract Position	Contract/Service Spec in place clearly outlining service requirements and obligations of provider including property/lease considerations	Contract/Service Spec in place but requires review or is unclear. Property/lease arrangements are adequate	No Contract/Service Spec in place but historical evidence of good performance. Property/lease arrangements need updating but are adequate	No Contract or Service Spec in place and low confidence about performance. Property/lease arrangements cause concern.	
Strategic Fit	Service model clearly fits with HSCP Strategic Priorities	Service model largely fits with HSCP Strategic Priorities	Service model not aligned with current HSCP Strategic Priorities, but provider willing to update	Service model not aligned with HSCP Strategic Priorities and provider reluctant or unable to update	

PERFORMANCE

Risk Level Indicators

	2	5	7	10	Level of Risk
KPIs / Outcomes	All KPIs or Outcomes are being met or exceeded	The majority of KPIs or Outcomes are being met or exceeded	A minority of KPIs or Outcomes are being met or exceeded	No KPIs or Outcomes are being met or exceeded	
Service Concerns /	No Service Concerns raised or Incidents requiring action	Service Concerns or Incidents received which relate to minor concerns which the service has resolved or is addressing	Service Concerns or Incidents received which relate to significant concerns but the service has resolved or is addressing	Service Concerns or Incidents received which relate to significant concerns and there have been no adequate steps to resolve	

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MONITORING					
Risk Level Indicators					
	2	5	7	10	Level of Risk
Regulator	Care Inspectorate assesses delivery of Care and Support as, very good or excellent and grades are stable or improving	Care Inspectorate assesses delivery of Care and Support as at least good and grades are stable or improving	Care Inspectorate assesses delivery of Care and Support as at least satisfactory but grades have decreased	Care Inspectorate assesses delivery of Care and Support as weak or unsatisfactory	
Internal Monitoring	Colleagues and internal monitoring activity have provided only positive feedback	Colleagues and internal monitoring has provided broadly positive feedback	Colleagues and internal monitoring has provided broadly negative feedback	Colleagues and internal monitoring has provided only negative feedback about the service	
PRACTICE					
Risk Level Indicators					
	2	5	7	10	Level of Risk
Equality Diversity & Inclusion	Service seeks out and demonstrates best practice in relation to EDI	Service has acceptable EDI policies but practice could be improved	Service has adequate EDI policies which may benefit from updating and practice requires improvement	Service does not have adequate EDI policies or does not implement them adequately	

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Fair Work First	Organisation meets all seven FWF criteria	Organisation meets five or six of the FWF criteria	Organisation meets three or four of the FWF criteria	Organisation only meets one or two or does not meet any FWF criteria	
	Service actively encourages and robustly utilises the input of current and/or former Service Users	Service actively encourages the input of current and/or former Service Users but limited evidence that this used effectively	Service carries out a limited range of activities to encourage the input of current and/or former Service Users with little use made of it	Service does not encourage or utilise the input of current and/or former Service Users	
Co-Production					
MANAGEMENT & STAFFING					
Risk Level Indicators					
Staffing	2	5	7	10	Level of Risk
	Service has appropriate numbers of suitably qualified and competent staff at all times with comprehensive resilience arrangements	Service occasionally fails to have appropriate numbers of suitably qualified and competent staff but there is little impact on service delivery	Service frequently fails to have appropriate numbers of suitably qualified and competent staff and this has a minor impact on service delivery	Service often fails to have appropriate numbers of suitably qualified and competent staff and this has a significant impact on service delivery	

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Management	Management demonstrates competence with no concerns evident	Some weaknesses in local management identified but the organisation is working to address them	Evidence of weaknesses in management through the organisation	Significant weaknesses in management identified and inadequate plans in place to address them	
	FINANCIAL				
Risk Level Indicators					
Annual Spend	2	5	7	10	Level of Risk
	Under £100k	£100k>£225k	£225k>£1M	£1M+	
Financial Risks	Service has been assessed as financially sustainable and operates within financial parameters of contract	No assessment of financial sustainability in the past two years but no evidence of concerns and service operates within financial parameters of contract	Concerns have been identified about the Service's financial sustainability and/or its ability to operate within the financial parameters of the contract but these do not risk the effective delivery of the contract	Service subject to concerns about financial sustainability and/or its ability to operate within the financial parameters of the contract and there is material risk to continued delivery of the contract	

Risk Ratings:	0 to 50 = Satisfactory 50 to 75 = Escalated 75 to 100 = Substantial	Proportionate Risk Score	0
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CORE AREAS OF RISK

The following criteria are defined as core to the assessment of risk. Any Partner Provider must automatically be assessed as a Substantial Risk if they score 2 or more maximum scores of 10 in these areas irrespective of their overall score

Scores will automatically be copied from the selection above

KPIs / Outcomes

0

Service Concerns / Incidents

0

Regulator

0

Financial Risks

0

Assessed Risk Rating:

Satisfactory [Green] Risk Rating - Risk Assessment to be shared with Provider.
No Further Mandatory Actions

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**Escalated [Amber] / Substantial [Red] Risk Rating - Risk Assessment to be shared with Provider
Complete Enhanced Monitoring Report must be completed**

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