

## Joint Escalation process for non-completion of Quality Assurance Framework Questionnaires – Regulated Providers

As part of the NHS Standard Contract and Contracts with Somerset Council, providers are required to submit performance and management information to the Commissioner.

1. The Provider will complete quality data via the electronic monitoring system on a quarterly basis:
  - Quarter 1: April – June                      Submission date - 15 July
  - Quarter 2: July – September              Submission date - 15 October
  - Quarter 3: October – December          Submission date - 15 January
  - Quarter 4: January – March              Submission date - 15 April
2. Following each quarter, the provider will be required to complete their data by the submission dates shown above.
3. Midway through the submission period Business Support Officer to send a reminder to providers.
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4. Multi-Disciplinary Teams to review quarterly report from the electronic monitoring system to identify any providers who have not submitted a return.

### **First Reminder**

A member of our Quality Team will contact the provider by telephone to remind them of their contractual obligations to complete the quarterly return. An email will be sent to provision manager / administrator to request that the quarterly return is completed within 7 days.

### **Second Reminder**

If a provision has made no submissions for two consecutive quarters, the chair of MDT will send the QAF escalation letter to Manager / Administrator and copying in the Nominated Individual. Also copy to team mailboxes and contracts teams : [ascproviderqualityassurance@somerset.gov.uk](mailto:ascproviderqualityassurance@somerset.gov.uk)  
[somicb.chc.quality@nhs.net](mailto:somicb.chc.quality@nhs.net)

5. If following the second reminder there is no response, consider a visit to the provision (before next quarter report due) to gather the missing data and encourage the provider to engage in the QAF. Quality or Contracts Team to carry out a visit with the provider to support the provider to make future submissions and gain any immediate assurances required.

6. If we were unable to gain immediate assurances, consideration should be given about whether to commence a formal Quality Improvement Process.
7. Commissioning and Quality Board to be informed of the actions taken