

Relationship Management Surveys – Analysis

1. Introduction

Surveys were sent to providers and ECC officers asking the same 8 questions (detailed below) to tease out the issues faced by both parties. The survey to providers was re-opened due to initial low response rates.

36 responses were received from providers (less than 10% of the number of email addresses it was sent to). There were 40 responses by ECC officers.

The survey was sent to the whole provider market (and therefore to a mixture of provider types), and to each relevant department within ECC – department listings are below.

The provider questionnaire differed slightly to the ECC officer questionnaire in that it asked them to score ECC not only by question, but by department.

Scores available ranged from 1 (ECC tell providers what they want, with no engagement) to 4 (ECC engage with providers and collaborate). '0' meant the provider had no contact.

2. The Survey

Questions Asked

How well do care providers and ECC share information?
How well do we trust each other?
Inclusion and Involvement in Planning and Key Decisions that Impact Upon Service Users
How integrated is our working?
How well do we manage conflicts?
Do we understand what our respective roles and responsibilities are?
How clear are we of our strategic direction?
How responsive are we to each other's needs?

Departments providers were asked about were as follows:

Adult Operations - Senior Managers
Adult Operations - Service Teams
Adult Operations – Service Placement Team
Safeguarding
Community Agents
Commissioning Officers
Finance
Procurement (aka Category Management)
Contract Management
Quality Improvement

3. Analysis – Provider responses

1. Overall the scores were low to mid for each of the questions. Meaning providers overall feel ECC is more transactional, with some inclusion, in its approach to its relationship with providers.
2. Overall, Responsiveness, Managing Conflicts and Understanding Roles & Responsibilities were the areas with the highest scores. This contradicts some of what has been said in the workshops with providers and ECC officers.
3. Sharing of Information with providers, and Inclusion and Involvement in planning and key decisions, were the lowest scoring out of the 8 questions.
4. Safeguarding is the team with the highest overall score, with understanding of roles and responsibilities being their best score. This shows that a department with clear defined roles is viewed well externally.
5. Finance, overall, had the lowest score.
6. Providers based in the North of the county gave the highest scores, scoring particularly high for Responsiveness and Roles and Responsibilities, and clarity of strategic direction.
7. County Wide providers (i.e. those covering more than one quadrant) also scored ECC high compared to other areas.
8. Providers based in the West were least happy, closely followed by those based in the Mid. Sharing of Information was the lowest score for the area. The South's score was also low, with inclusion and involvement in planning being the biggest issue.
9. Homecare providers scored ECC marginally higher than Residential providers.
10. Overall small providers scored ECC the highest with Responsiveness and Roles and Responsibilities being the two best areas for ECC.
11. Director/Senior managers scored ECC marginally higher than owners and care manager levels.
12. Providers, whose service user base is between 0-25% ECC sourced, gave the highest scores. Scores were particularly high for Responsiveness, Understanding Roles and Responsibilities and Managing Conflicts.
13. Those with between 25-50% ECC service users gave the lowest scores, scoring particularly low on Sharing Information and Inclusion in Planning and Decisions.
14. Procurement and Community Agents had the highest number of 'No Contact' responses (an average of 12 per question). Commissioning Officers had an average of 11 responses and Adult Ops Senior Managers 10.
15. AO Service Teams, SPT and Safeguarding had the fewest 'No Contact' responses with an average of 2 per question.
16. Trust, Inclusion in Planning and How Integrated our Working is were questions with the highest 'No Contact' responses.
17. 2.2 (56%) - ECC's overall average score (based on a score of 1-4, with 4 being inclusive and collaborative).

Looking at the scoring in more depth showed that the majority of responses were either '1' or '4', suggesting those responding were either unhappy with the relationship, or content.

The highest number of '1' scores were given to How well ECC Shares Information & Inclusion and Involvement in Planning. Homecare providers also scored particularly low for How Integrated ECC working is.

Caveats – the results are based on a low response rate. The responses, overall, could not be said to be representative of the total market. For example there were only 3 responses from providers in the West.

Notes on the survey response - The survey was sent out over the August holiday period, so responses were likely fewer due to the timing. The survey was also much longer for providers than for ECC officers, due to being asked to answer questions about each department. It is noted that many more than 36 providers started the questionnaire but did not complete it.

4. Analysis – ECC Officer Responses

1. Sharing of information and Understanding of roles and responsibilities scored highest amongst officers. This contradicts the provider responses, and discussions from the workshops, showing that there is a difference of opinion.
2. Officers scored Trust, between ECC and providers, and Clarity of Direction from within ECC as being the biggest issues.
3. Overall, Heads of Service within ECC scored ECC the lowest, highlighting Trust and Understanding of Roles and Responsibilities as the areas needing most improvement.
4. Manager level again highlighted Trust as the main issue, with Inclusion and Involvement of providers in Planning also needing to be looked at.
5. Comparing the two main groups of responders, those who operate County Wide and those who operate in the North of the county, except for one question (Sharing of information), providers gave ECC higher scores than ECC officers did.

Caveats – although the responses from ECC officers in terms of job roles were varied and therefore representative, the responses were mainly from officers whose job role covered either County Wide or the North of the county. Therefore more local issues in the other areas have not been captured.

Notes on the survey response – There was a wider range of scores compared to the provider response (i.e. more instances of '2' or '3', in comparison). It needs to be noted that the officer survey was much shorter than the provider survey and therefore would less likely be started and not finished.

Final Thoughts

It's clear by results that some providers have little or no issue with their relationship with ECC. It's also clear, that other providers have lots of issues. The data-set is not broad enough to accurately portray all groups but the above does show some trends and, along with the workshop data, helps to identify enough common themes to be discussed and worked upon.

ECC Officer gave differing responses dependent upon job role and the area in which they operate. Again, the data-set would need to be larger to accurately portray the overall view, but what it does show is that Officers recognise there are issues that need resolving. More needs to be done to look at local issues, but such things should progress as the project gains momentum.

Tom Bendy

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