

Sandwell M.B.C.
Adult Social Care

Placement Embargo and Suspension Policy

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Foreword – Supporting a Safe, Sustainable and Improving Care Market

Sandwell Council is committed to commissioning and supporting a diverse, high-quality and sustainable adult social care market that delivers safe, effective and person-centred care for residents. We recognise the significant pressures facing the care sector, including workforce challenges, financial constraints and increasing complexity of need, and we are committed to working in partnership with providers, wherever possible, to support improvement, resilience and long-term sustainability.

Our approach to quality assurance and market oversight is built on early identification of risk, proportionate intervention, constructive engagement and shared responsibility for quality. The Council's strong preference is to work collaboratively with providers to understand emerging concerns, agree improvement actions and risk mitigations, and provide appropriate support wherever possible. Most quality issues can and should be resolved through routine monitoring, support and improvement activity.

As part of this approach, the Council operates a graduated escalation framework, designed to ensure that the right level of oversight and support is applied at the earliest opportunity. This begins with weekly place-based operational provider quality meetings, which bring together the Council and partner agencies to share intelligence, identify emerging issues and agree practical actions to support services. Many concerns can be addressed and resolved through this collaborative, operational forum without the need for further escalation.

Where concerns are more complex, persistent or systemic, services may be considered through the Provider Escalation Group (PEG), enabling a more structured, multi-agency assessment of risk, assurance and support needs. In cases where concerns are widespread, serious, or require senior multi-agency oversight, a Senior Strategy Meeting (SSM) may be convened in line with safeguarding arrangements.

Placement embargoes, suspensions and restrictions are therefore not routine tools, but an important and necessary safeguard within this wider system. They are used where additional assurance is required to protect people, manage risk and allow services the space to focus on improvement without the pressure and or risk of new placements. When applied, embargoes and restrictions are intended to be proportionate, evidence-informed and time-limited, supporting structured improvement and risk management rather than penalising providers.

This escalation framework is intended to be supportive, proportionate and flexible, recognising that each service and situation is different. While the Council's seeks to support providers to improve through early intervention and collaborative working, there may be circumstances where risks are assessed as significant and protective action, including a placement embargo or restriction, is required at the earliest opportunity.

This policy reflects the Council's commitment to balancing the protection of people who draw on care and support, fair and transparent decision-making, and the sustainability of the local care market. It sets out clearly how placement embargoes, suspensions and restrictions sit within the Council's wider quality assurance and improvement arrangements, how decisions are governed, and how the Council works with providers, partner authorities and regulators to support safe, reliable and improving services.

1. Purpose of this Policy

This policy sets out Sandwell Council's approach to applying, or agreeing, placement embargoes, suspensions, or restrictions of new placements with providers of adult social care services. A placement embargo has several fundamental intentions:-

- To protect adults already receiving care,
- Enable providers to address concerns,
- Allow time for improvement without pressure from new placements,
- Support proportionate risk management and maintain safe and sustainable services.

A placement embargo does not seek to be a punitive approach and does not represent a determination of fault or wrongdoing. However, its main purpose is to reduce the risk to residents in relation to the provision of their care and support in line with the council's statutory responsibility outlined in the Care Act 2014.

This policy operates as a defined escalation and commissioning control within Sandwell Council's wider Quality Assurance and Improvement Framework for commissioned adult social care services. Embargoes, suspensions, and restrictions are used where additional assurance is required and where risks cannot be sufficiently mitigated through routine or enhanced monitoring, support and improvement activity alone.

This policy should be reviewed alongside Sandwell Council's Quality Assurance and Improvement Framework for commissioned services and the Council's safeguarding and contractual arrangements. For further details, please refer to the following link: [QA Processes for Commissioned Services | Sandwell Council](#)

Nothing in this policy limits the Council's statutory responsibilities (including under the Care Act 2014 and safeguarding duties), contractual rights, or discretion. The Council may depart from this

policy where it is lawful and proportionate to do so, provided that any rationale is documented clearly through the relevant forums.

2. Scope and Application

This policy applies to all adult social care placements commissioned whether these are spot-purchased or facilitated by Sandwell Council, including contractual, framework, spot purchase and cross-border arrangements, where Sandwell Council is acting as the placing or host authority.

The policy applies across relevant commissioned service types (including in-borough and out-of-borough provision) and should be used consistently with the Council's risk-based and proportionate approach to quality monitoring, support and escalation.

3 Quality Assurance, Provider Support and Place Intelligence

Sandwell Council's approach to placement embargoes and suspensions sits within its wider quality assurance and improvement arrangements for commissioned services. Quality assurance activity is designed to identify emerging concerns, provide proportionate support to providers to address issues and improve standards, and manage risk where concerns cannot be sufficiently addressed through routine monitoring alone.

3.1 Provider Support and Improvement Offer

The Council provides support to the provider market through its quality assurance, commissioning and provider support functions, working with place-based partners to reduce duplication and strengthen oversight. Support to providers may include advice and guidance, assurance visits, specialist input (for example clinical, medicines management or health and safety), assistance to develop and monitor improvement plans, workshops and training, and coordinated multi-agency support where appropriate.

3.2 Weekly Place Intelligence and Provider Quality Meetings

Weekly multi-agency provider quality intelligence meetings are held to support proactive care provider support, quality assurance and early intervention based on available intelligence and emerging concerns. The meetings retain an operational focus and enable close to real-time sharing and triangulation of information held by partner agencies.

Potential actions agreed by the weekly meetings can include enhanced monitoring and data analysis; direct clinical support; multi-disciplinary or single-agency assurance activity; activities to seek feedback from people using services; quality improvement activities; referral to external agencies (including the CQC and other partners); and sector-level communications to cascade learning. The meetings also maintain oversight of agreed actions to monitor completion, outcome and effectiveness.

3.3 Escalation Continuum: Weekly Meetings, PEG and SSM

The weekly meetings form the early stages within Sandwell's escalation continuum. Where concerns indicate systemic or organisational issues, or where there is insufficient assurance that risks are being effectively managed, the service may be referred to the Provider Escalation Group (PEG) for further consideration.

Where concerns escalate, persist or indicate heightened risk, matters may progress from PEG to a Senior Strategy Meeting (SSM) under Sandwell's safeguarding arrangements.

While the Council seeks to resolve issues through support and improvement, there is no requirement for a provider to progress through every stage of the quality assurance or escalation process before an embargo is applied. Where information indicates that risk to individuals is significant, immediate, or cannot be adequately mitigated, the Council may consider or implement a placement embargo or suspension at any stage in order to protect people who use services.

4. Decision Making and Routes by Which an Embargo May Be Applied

An embargo may be applied where additional assurance is required to manage risk, including (but not limited to) where:

- safeguarding concerns indicate a need for additional assurance or immediate protective action;
- contractual breaches indicate a risk to quality, safety or compliance;
- a host local authority in which a service is based has imposed an embargo or equivalent restriction through its own quality assurance, safeguarding or governance arrangements;
- concerns are cumulative, persistent or systemic and require escalation through governance routes; or
- persistent or serious breaches are identified through quality assurance, clinical, or health and safety monitoring, or other assurance or regulatory activity.

Embargoes may be applied through quality assurance, safeguarding, contractual, or governance routes, including the Senior Strategy Meeting (SSM) process. Decisions will be recorded with a clear rationale, the route used, review points and the assurance requirements for lifting the embargo.

Where urgent action is required to protect people, the Council may impose an embargo or suspension without prior notice. In such cases, the Council will notify the provider as soon as reasonably practicable, set out the decision in writing, and provide an opportunity for the provider to make representations.

5. Principles Governing Use of Embargoes / Suspensions

All embargo and restriction decisions are protective and precautionary, proportionate, evidence-informed, time-limited, and applied without prejudice. The Council recognises the impact on people using services, staff and providers to the risks identified and

will apply embargoes or restrictions where necessary with the aim of supporting improvement.

The Council will seek to use the least restrictive option capable of effectively managing risk but will prioritise the safety and wellbeing of people using services. Support will be offered as part of the Council's commitment to supporting providers to enable improvements to be achieved.

The Council will have due regard to its public sector equality duty and will consider the potential impacts of embargo decisions on people with protected characteristics, alongside continuity of care and market sustainability considerations.

6. Public Health Led Placement Pauses (Outbreak Management)

In some circumstances, a temporary pause on new placements, admissions or transfers may be required solely as a result of public-health advice, for example where a service is experiencing an outbreak of an infectious disease and Public Health and/or the UK Health Security Agency (UKHSA) has advised that restrictions are necessary to prevent further transmission and to protect individuals, staff and the wider community.

Such action:

- is preventative and protective in nature;
- is time-limited and kept under active review in line with public-health advice; and
- is taken without prejudice, and does not of itself indicate concerns about the quality of care, safeguarding practice, contractual compliance or provider performance.

A public-health-led placement pause is distinct from placement embargoes or suspensions applied through quality assurance, safeguarding, contractual or governance routes under this policy.

Where a pause is applied following public-health advice, the Council will make this distinction clear in its communications with the provider and relevant partners.

The Council will continue to engage constructively with the provider during any public-health-led placement pause, including maintaining routine commissioning and quality oversight. Where separate quality, safeguarding or contractual concerns are identified, these will be considered independently and proportionately under the relevant sections of this policy and will not be assumed or inferred as a result of the public-health action.

6.1. Relationship to Host Authority Actions

Where a service is located outside Sandwell and the host local authority, Public Health authority or UKHSA has imposed, recommended or is operating a placement pause or equivalent restriction due to an outbreak, the Council may mirror or recognise that restriction for placements it commissions or facilitates, in order to ensure a consistent and proportionate approach to risk management.

In doing so, the Council will:

- have regard to the basis and scope of the host authority or public-health advice;
- apply any corresponding placement pause on a without-prejudice basis; and
- keep the position under review in line with updated public-health guidance and host authority communications.

Recognition of a host authority or public-health-led placement pause does not, of itself, constitute a finding of fault or failure by the provider and does not preclude the Council from applying, lifting or varying restrictions in accordance with this policy where circumstances differ or further assurance is obtained.

7. Relationship to Whistleblowing and Safeguarding

Whistleblowing and safeguarding concerns are assessed individually and may require a range of investigative and assurance actions, depending on the concerns raised. Substantiation is not assumed at the point concerns are raised, but equally, potential risks cannot automatically be discounted. Embargoes or restrictions may be applied where the volume, persistence or nature of concerns requires additional assurance or protective action.

This policy operates alongside Sandwell's Safeguarding Procedures, the Care Act 2014 and contractual arrangements.

8. Provider Engagement and Support

The Council will seek to work collaboratively with providers and, wherever possible, to agree the application of a placement embargo or restriction with the provider. This approach supports a shared understanding of the concerns, the risks being managed, and the actions required to achieve improvement, mitigation, or assurance.

Where an embargo or restriction is applied, the provider will be informed of the decision route, rationale (in summary form appropriate to circumstances), expectations, evidence requirements and review timescales. The Council will seek to agree a structured improvement and assurance approach with providers, including clear actions, milestones, reporting requirements, and review points, and will continue to engage constructively with the provider throughout the embargo or restriction period.

Support will be offered to the provider as part of the Council's commitment to working collaboratively with providers to enable improvements to be achieved.

The Council recognises that there may be circumstances where an embargo must be applied without prior agreement (for example, where urgent protective action is required). In such circumstances, the Council will still engage with the provider as early as practicable

to establish a shared understanding and a structured improvement approach.

8.1. Notification to the Provider

Where a decision is taken to apply a placement embargo, suspension or restriction under this policy, the Council will ensure that the provider is formally notified of the decision, either through direct communication at a Senior Strategy Meeting or other formal meeting, and/or confirmed in writing as soon as is reasonably practicable.

Where the decision has not already been communicated directly to the provider through a Senior Strategy Meeting or equivalent formal meeting, the Council will formally notify the provider in writing as soon as is reasonably practicable.

The notification will set out, as appropriate:

- the nature and scope of the embargo, suspension or restriction;
- the rationale for the decision, including whether it arises from quality, safeguarding, contractual, governance or public-health considerations;
- whether the action is being applied on a precautionary and without-prejudice basis;
- the expectations placed on the provider during the period of the embargo or suspension; and
- the arrangements for review, monitoring and potential lifting of the embargo or restriction.

Formal notification does not preclude ongoing dialogue, meetings or support arrangements with the provider, which will continue in line with this section of the policy.

8.2 Communication with Residents, Families and Other Relevant Parties

In certain circumstances, it may be necessary and proportionate for the Council to communicate the application of a placement embargo, suspension or restriction to other affected parties, including:

- residents placed by the Council (or their relatives, advocates or legal representatives, where appropriate);
- other placing or funding authorities; and
- relevant partner agencies.

Any such communication will be:

- considered on a case-by-case basis;
- proportionate to the nature of the risks being managed;
- mindful of the need to avoid causing unnecessary distress or anxiety; and
- framed to reflect whether the action is precautionary, public-health-led, or related to quality, safeguarding or contractual concerns.

Where an embargo or restriction is applied following public-health advice (for example, in response to an outbreak), communications will make clear that the action is preventative and does not of itself indicate concerns about the quality of care or provider performance.

The Council will normally seek to align communications with the provider wherever appropriate, while retaining the right to communicate independently where this is necessary to discharge its statutory duties or to protect individuals.

9. Review, Monitoring and Lifting of Embargoes / Restrictions

Embargoes and restrictions are kept under active review and lifted where sufficient, sustained assurance is demonstrated. Reviews will

be evidence-informed and may draw on quality assurance activity, progress against agreed actions, safeguarding assurance, regulatory engagement and partner intelligence where applicable.

An embargo may be lifted where the Council is satisfied that risk has been reduced to a level that can be managed through routine monitoring and improvement activity and where sufficient and sustained assurance has been demonstrated.

Where appropriate, based on assessed progress and residual risk, an interim, phased lifting of commissioning restrictions may be agreed, with limits on placements within a defined period (typically per week or per month). This may be agreed formally, where the Council continues to actively monitor placement activity, or informally, where the provider is asked to manage the restriction and maintain this oversight independently for a defined period.

In some circumstances, additional reporting requirements may remain for an agreed period following full or partial lifting of embargoes or other commissioning restrictions to support continued Council oversight and assurance.

10. Provider Representation and Review of Embargo Decisions

Where a provider is dissatisfied with the decision to apply a placement embargo or restriction, they may make written representations to the Service Director for Commissioning (or equivalent postholder).

Any representations should:

- Be submitted in writing;
- Clearly set out the grounds on which the provider believes the decision should be reviewed; and
- Where appropriate, include any relevant evidence the provider wishes the Council to consider.

The Service Director for Commissioning, or equivalent postholder, will review the representations and determine whether the decision remains appropriate taking due regard to the information provided.

This process does not constitute a formal appeal, nor does it suspend the operation of the placement embargo or restriction while representations are being considered. The embargo or restriction will remain in place unless and until the Council determines otherwise.

The Council's overriding consideration at all times is the safety and wellbeing of individuals receiving care and support.

11. Failure to Demonstrate Improvement and Escalation

Where required improvements are not demonstrated within agreed timescales, or risk to individuals remains or escalates, the Council may extend the embargo, escalate through PEG or SSM processes, apply contractual remedies, or, where necessary, suspend or terminate contractual arrangements. Consideration to terminate any care provision will be based on evidence and risk assessment, and with due consideration of any potential impacts on individuals in receipt of care.

The existence of an improvement plan or ongoing engagement does not prevent the Council from taking further action where risk escalates or assurance is not achieved.

12. Endurance of Improvement and Re-entry to the Senior Strategy Meeting (SSM) Process

In some circumstances, a provider may enter and exit the Senior Strategy Meeting (SSM) process on more than one occasion over a period of time. This may indicate that, while improvements have been achieved, they have not been sufficiently embedded or sustained, or that underlying governance, leadership or quality assurance

arrangements have not yet matured to a level that provides ongoing assurance.

Where a pattern of repeated escalation is identified, the Council will take a holistic view of the provider's improvement journey, including the nature of previous concerns, the effectiveness and durability of actions taken, and the provider's ability to demonstrate learning and organisational change over time.

In these circumstances, the Council may determine that additional or longer-term commissioning controls are necessary to provide confidence that improvements are enduring and that lessons have been fully learned. This may include:

- maintaining or applying a placement embargo or restriction for a longer period than would otherwise be required; and/or
- considering the appropriateness of the Council's ongoing commissioning relationship, taking account of quality, safety, sustainability and governance factors.

The purpose of this approach is not punitive, but to ensure that improvement is sustained, risks are effectively managed, and people who draw on care and support can have confidence in the consistency and reliability of the service. The Council will continue to engage with providers, setting out the assurance required, the expectations for sustained improvement, and the basis on which any restrictions may be reviewed or lifted.

Decisions in these circumstances will be informed by available evidence, professional judgement and partner intelligence, and will be kept under review in line with the Council's wider quality assurance and improvement arrangements.

13. Interaction with Regulators and Partner Authorities

This policy operates alongside the Care Act 2014, safeguarding procedures, Care Quality Commission (CQC) regulatory processes and cross-border placement responsibilities.

The Council will engage with regulators and partner authorities as appropriate to support coordinated oversight, reduce duplication and strengthen assurance and inform other placing authorities.

14. Transparency and Information-Sharing

Where a placement embargo or suspension is applied, Sandwell Council will take steps to ensure appropriate transparency and information-sharing. This will normally include informing other known commissioners or funders of the service, and the relevant regulator, that a placement embargo has been applied.

This approach reflects established practice across local authorities and the wider health and social care system. Information-sharing supports a shared understanding of what a placement embargo means, the scope of the restriction, and the process for review and improvement, enabling partner organisations to take informed and proportionate decisions within their own responsibilities.

Information-sharing will be proportionate, timely and appropriate to the circumstances, and will be undertaken in accordance with information-sharing, safeguarding and data protection requirements. The purpose of such notification is to support coordinated oversight, promote consistency, reduce the risk of duplication or confusion, and provide clarity about the assurance and improvement activity underway.

Notification to other funders or the regulator does not, of itself, imply fault or wrongdoing and does not represent a determination about regulatory or safeguarding outcomes. It does not replace or limit safeguarding, regulatory or contractual processes, which continue

independently. Engagement with partners will be kept under review and aligned with ongoing assurance and improvement activity.

15. Status of this Policy

This policy reflects established Sandwell Adult Social Care commissioning and safeguarding practice and is intended to provide clarity and transparency. Nothing in this policy limits the Council's statutory responsibilities, contractual rights or discretion.

Appendix 1

Definitions

Provider Escalation Group Process (PEG): PEG means Provider Escalation Group Process. This is the Council's structured provider escalation mechanism, which may include a Provider Escalation Group meeting and related information-sharing with partners (including the regulator where appropriate) to enhance market oversight, agree actions, and coordinate support and assurance.

Senior Strategy Meeting (SSM): SSM means Senior Strategy Meeting. This is the Council's multi-agency senior strategy process convened where significant or systemic quality, safety, or safeguarding concerns are identified, to provide coordinated oversight, agree actions and determine proportionate escalation measures. It is the equivalent to Large Scale Enquiry (LSE) in other areas and operates as part of local adult safeguarding procedures.

Placement Embargo / Suspension: A placement embargo is a temporary decision to pause new placements. It does not automatically terminate contracts, imply substantiated concerns, or require removal of existing service users unless risk necessitates this. Embargoes are applied without prejudice while concerns are investigated or improvements are undertaken. Embargoes may be formally applied or agreed through voluntary means.

Placement Restriction: A placement restriction is a temporary decision to limit the number of new placements a provider may accept within an agreed period. These limits may apply on a weekly or monthly basis. Restrictions may typically be agreed in circumstances where a previous placement embargo or suspension is being lifted while improvements are ongoing and assurance is needed that improvements continue to be embedded or sustained, or

where the assessment of residual risk indicates that reducing the rate of new placements is a proportionate risk management approach.

Without prejudice: For the purpose of this policy, ‘without prejudice’ means the application of an embargo or restriction is precautionary and protective while concerns are reviewed, assurance is gathered, or improvements are monitored; it is not, by itself, a finding of fault or wrongdoing.