

Decision Maker: Care Services Policy Development and Scrutiny Committee
for Pre-scrutiny
Care Services Portfolio Holder for Decision

Date: 21st January 2015

Decision Type: Non-Urgent Non-Executive Non-Key

Title: ANNUAL QUALITY MONITORING REPORT

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Ward: Boroughwide

1. Reason for report

- 1.1 The Policy Development and Scrutiny Committee receives annual updates on quality monitoring. This report covers the arrangements for monitoring contracts and progress made to raise standards in:
- domiciliary care (Appendix 1)
 - care homes, extra care and supported living schemes (Appendix 2)
 - Children's services (Appendix 3)
- 1.2 The report also recommends the addition of 2 care agencies to the Domiciliary Care Framework.
- 1.3 The Care Quality Commission (CQC) are introducing new ratings for providers and the report proposes changes to the Council's policy in response to poor ratings.
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2. **RECOMMENDATION(S)**

- 2.1 Members of the Performance Development and Scrutiny Committee are asked to:
- Consider and comment on the report.
 - Undertake a programme of visits to Care Homes in the Borough during 2015/16
- 2.2 The Portfolio Holder is asked to agree that the providers listed below are added to the Domiciliary Care Framework:

- Carewatch Bromley
- Always Caring

2.3 The Portfolio Holder is asked to agree the policy set out in para 3.4 to 3.7 which sets out the Council's response to the new CQC ratings.

Corporate Policy

1. Policy Status: Existing policy.
 2. BBB Priority: Supporting Independence.
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Financial

1. Cost of proposal: Estimated cost no cost directly arising for the recommendations in the report.
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: 1)Residential and nursing home, domiciliary care,
 4. Total current budget for this head: £Care homes - £34m pa, Domiciliary Care -£13m pa,
 5. Source of funding: Revenue Support Grant
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Staff

1. Number of staff (current and additional):
 2. If from existing staff resources, number of staff hours: 3 FTE Contract Compliance staff in Commissioning Division
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Legal

1. Legal Requirement: Statutory requirement.
 2. Call-in: Call-in is applicable
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Care Homes - 1000, Domiciliary Care - 1500, Children - 290
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 The Policy Development and Scrutiny Committee receives annual updates covering the arrangements for monitoring contracts and progress made to raise standards in services commissioned from third parties. This covering report details the general arrangements for Adult and Children's services. Detailed reports outlining the quality monitoring activity for Domiciliary Care, Extra Care Housing Care Homes, Supported Living Schemes and Children's placements are attached as appendices to this report.

Regulatory Frameworks – Adults

3.2 The regulatory framework covering care homes and domiciliary care agencies for adults is the Health and Social Care Act 2008. Care Quality Commission (Registration) Regulations 2009 and Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 detail the key care standards which providers must deliver. There are 28 regulations and associated outcomes that are set out in this legislation. The CQC monitors for compliance against these Essential Standards of Quality and Safety. CQC Compliance reports may identify 'minor', 'moderate' or 'major' concerns against any of the Essential Standards. Where concerns are identified, the CQC will then take whatever they consider to be the most appropriate action to ensure that the necessary improvements are made. Spreadsheets setting out the current ratings for all the Bromley providers are attached as Appendices 4 and 4a. These also show the number of placements funded by the Council, the dates of monitoring visits made by the Council's Contract Compliance Officer and CQC.

3.3 The CQC website displays an entry for each registered provider. On the front screen there is a summary of the providers' compliance against each of the 5 key themed areas.

- Treating people with respect and involving them in their care
- Providing care, treatment and support which meets people's needs
- Caring for people safely and protecting them from harm
- Standards of staffing
- Standards of management.

Key to CQC ratings

- ✓ All standards were being met when CQC last checked. (if this service has not had a CQC inspection since it registered, the check may be based on CQC assessment of declarations and evidence supplied by the service themselves)
- X (grey cross) At least one standard in this area was not being met when CQC last checked and required improvements.
- X (red cross) At least one standard in this area was not being met when we last checked and CQC have taken enforcement action.

New CQC Rating system

3.4 The CQC are in the process of introducing a new rating system. The inspectors have been trained and a series of inspections under the new regime have already taken place. Inspections of adult social care services will consider whether the service is:

- Safe.
- Effective.
- Caring.

- Responsive to people’s needs.
- Well-led.

Every care home and adult social care service in England will be awarded one of the following ratings by March 2016.

- Outstanding.
- Good.
- Requires improvement.
- Inadequate.

In addition to changing the ratings the CQC will also be closely checking that providers have appropriate levels of management and that the registered person for that business has appropriate values and are well motivated. They are also consulting on a “special measures” policy which sets out the action CQC will take if care services judged to be inadequate fail to make required improvements within the required timescales. In the worst case the CQC will cancel their registration. The Special Measures policy will take effect from April 2015.

3.5 The Council currently has a policy of not making any new placements with a provider (care home or domiciliary care agency) where the CQC is taking enforcement action (red crosses). If CQC start to take enforcement action against a home the Council’s Care Services teams will undertake a risk assessment of the home in order to decide what action should be taken in respect of current service users. Where a provider is given warning notices (grey crosses) the Council’s Contract Compliance Officer will intensify the level of scrutiny of the provider.

3.6 Officers propose that the Council adopts the policy set out below to respond to the new CQC ratings of Care homes:

Inadequate :	<ul style="list-style-type: none"> • immediately suspend new placements if a Bromley home. • do not propose new placements to out of borough homes • Review existing placements and risk assess – may require moving. • Agenda item for Care Services Intelligence Group(CSIG)
Requires Improvement	<ul style="list-style-type: none"> • Enhanced monitoring by LBB using QAF and CQC action plan. • Agenda item for Commissioned Services Intelligence Group (CSIG)

3.7 Where service users have chosen to live out of the borough the contract compliance team undertake regular checks of the CQC ratings. Care Services are alerted to any issues raised about the quality of care provided and will take follow up action if necessary. Care Services staff review service users in residential care regularly in order to ensure that residents continue to be safely placed.

Quality Assessment Framework (QAF)

3.8 The Contract Compliance Team uses a QAF to measure the performance of providers against a range of standards in key areas. Standards are graded in four groupings, ‘A’, ‘B’, ‘C’ and ‘D’. Level C is based upon the minimum standard of the ‘Essential Standards of Quality and Safety’ published by Skills for Care. If any area of service is graded level ‘D’ the provider is

required to make immediate improvements as this is unsatisfactory. Grades 'B' and 'A'; provide incentives to Providers to demonstrate continuous improvements in the quality of their service.

- 3.9 The QAF has been adapted for use across Domiciliary Care, Supported Living, Extra Care, Day Care and for all other contracts monitored by the ECHS Contract Compliance Team. All new contracts require the Provider to comply with the QAF. Providers are asked to complete an action plan for any areas where the score D. Officers compile the QAF scores, analyse the results and use these to highlight areas where practice needs to be improved at the quarterly forums run by the Council. If necessary additional training is commissioned.

Safeguarding

- 3.10 Bromley Safeguarding Adults Board funds a comprehensive training programme which all local providers can access. When safeguarding alerts are raised the Care Management teams instigate the Council's safeguarding procedures. Contract Compliance officers can be involved in safeguarding investigations and will ensure that providers follow up on learning points or action plans at the conclusion of each case. The Council's safeguarding manager convenes a regular meeting of officers from the Council, Bromley Clinical Commissioning Group, Bromley Healthcare, Oxleas, and CQC to exchange information and share any concerns about local providers. This ensures that any potential issues are identified early; that investigations progress appropriately and any learning requirements are factored into monitoring and training programmes.
- 3.11 Details of specific safeguarding events are set out in Appendices 1 and 2. The annual safeguarding report provides detailed information on the outcome of substantiated safeguarding alerts. This was reported to Care Services PDS on 3rd September 2014 and the link is below: http://www.bromley.gov.uk/downloads/731/safeguarding_adults

Training

- 3.12 The Council assists in raising the standards in care homes and domiciliary care by organising a comprehensive programme of training. Providers are invited to join a training consortium run by the Council which gives them access to courses for a small contribution towards costs. Membership continues to increase every year and there are currently 58 members of the consortium. The Council works with providers to ensure that the courses provided are appropriate, timely and assist providers in balancing the competing demands of delivering care and ensuring that staff receive both induction and refresher training.
- 3.13 The training courses address the requirements of the Essential Standards of Quality and Safety. Core training courses in first aid, food hygiene, health and safety and moving and handling form the majority of the training programme. The remaining courses provide valuable learning opportunities for care staff to gain additional skills and knowledge to help them carry out their duties. These include dignity in care, dementia, diet and nutrition, safe administration of medicines, report writing and infection control. The programme is regularly updated and reviewed to include training on new legislation. In 2014/15 officers identified that management and supervision training could make a positive impact in the local care homes and have designed a specific training programme for more senior workers.
- 3.14 The Council also works with key health partners based in Bromley to identify opportunities for joint health and social care training across all sectors. These initiatives have resulted in training for care workers on shared training programmes for Urinary Tract Infections and

Diabetes Care, Dementia and Falls. Officers will continue to work jointly with health partners at a local and sub-regional level to ensure that we are able to maximize the training funds available in Bromley for the entire local workforce. Joint training programmes also assist to ensure a common understanding of roles between the different disciplines and professions.

Provider Forums

- 3.15 The Contract Compliance Team runs quarterly provider forums for Domiciliary Care and Care home and Supported Living Scheme providers. These events are well attended and provide the opportunity for good practice to be shared between all Care Homes and agencies. Key partners from health regularly attend the forums in order that any shared issues or problems can be raised and discussed and resolution sought. A recurring item at all forums has been the appropriate timing of hospital discharges and how providers can work with health partners in order to avoid inappropriate admissions. Other Key areas tackled during 2014 were involving relatives and carers in care homes and recruitment and management of staff. Officers from the London Ambulance Service and the Fire Service have attended forums during 2014 in order to work on improving practice and better partnership working.

Good Practice Conferences during 2014

- 3.16 The Care Home Compliance Officer ran a conference and follow up workshop for Activity Co-ordinators working in care homes in Bromley. Both of these events were extremely successful, being well attended and highlighting the vast range of resources available within the borough that can be brought into the care home environment. The programmes of activities within homes have significantly improved during 2014 and we expect to see these initiatives sustained.
- 3.17 The Council also hosted “Bromley Cares”, a conference for families and informal carers of people living in care homes in Bromley. The focus of the conference was to ensure that these key partners are clearly aware of the standards of care that can be expected in care homes and are empowered to make comments and complaints in order to seek improvements. The conference was delivered by the Council in partnership with Carers Bromley and Healthwatch Bromley. Ensuring that this information is available to the community helps to ensure that there is a broader range of people continually observing care delivered in the borough. Officers will be running another event for relatives and carers during 2015 with a similar agenda.

The Care Act 2014

- 3.18 The Care Act 2014 which will be implemented from April 2015 includes additional responsibilities for the Council, particularly in regard of having an oversight of the local market for care services. In order to avoid any unexpected disruption in the market Officers monitor the financial health of local providers and tackle them should any problems emerge. .

The Council’s practical responsibilities are extended to arranging alternative care for self-funders should a local provider fail.

The Care Market in Bromley

- 3.19 During the last year the NHS has significantly increased its focus on reducing admissions to hospital and facilitating early discharges as soon as people are confirmed as medically fit. This policy has had a very significant impact on the provider market in Bromley, both care homes and domiciliary care agencies. The Placements Team are finding it increasingly

difficult to source both care home placements and care packages, particularly at the very short notice given.

- 3.20 Providers in the care sector all report that they are having increasing difficulty in recruiting suitable care staff. Some neighbouring Councils have adopted a policy of paying care staff the living wage which also impacts on the ability of providers to recruit carers to work on Bromley contracts.
- 3.21 The Council has been commissioning care placements from its Domiciliary Care Framework since 2012. Three providers on the framework are no longer providing care in Bromley, therefore Commissioners have sought replacement agencies in order to try and meet the demand. When the framework was set up the Council reserved the right to add new contractors, should one or more of the original Contracts withdraw, or be suspended or removed from the framework.
- 3.22 Officers have continued to monitor the quality of work of agencies who are supplying care on spot contracts. They have negotiated with the providers in order to reduce some hourly rates and can therefore recommend that the agencies Carewatch and Always Caring are appointed to the framework. These two agencies are delivering care within the rates for domiciliary care which were set by the Council when the framework was set up in August 2012. The rates were frozen for 2 years and were increased in August 2014 by 1.1%.

Regulatory Frameworks - Children's Services

- 3.20 Children's services are subject to regulation by Ofsted. Ofsted conduct a full inspection on a 3 year cycle for which they may make a judgement in the following categories:
- Outstanding: a service of exceptional quality that significantly exceeds minimum requirements
 - Good: a service of high quality that exceeds minimum requirements
 - Adequate: a service that only meets minimum requirements
 - Inadequate: a service that does not meet minimum requirements

For any service receiving a judgement of either Adequate or Inadequate **annual** inspections will be conducted for which the following judgements could be made:

Good progress	The children's home has demonstrated continued improvement in quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the large majority of recommendations that were raised at the previous inspection.
Satisfactory progress	The children's home has maintained quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the majority of recommendations that were raised at the previous inspection.
Inadequate progress	The children's home has failed to address one or more requirements and/or has not met the majority of recommendations and/or the quality of care and outcomes for children and young people have declined

	since the last full inspection.
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The Central Placements team will only make placements with providers that have a rating of Good or Outstanding. Further information on Children’s Services is in Appendix 3.

4 POLICY IMPLICATIONS

- 4.1 National and local policies expect that continuous improvement be achieved in the quality of care delivered in care services serving the local community.

5 LEGAL IMPLICATIONS

- 5.1 Under Section 21 of the National Assistance Act 1948 the Council has a duty to provide or arrange for residential accommodation for persons who by reason of age, illness, disability or any other circumstances are in need of care and attention not otherwise available to them.
- 5.2 Once a person has been assessed as being in need of such care the Council must have regard to the National Assistance Act 1948 (Choice of Accommodation) Direction 1992 which are intended to give clients a choice over where they receive such care arranged or provided by the Council. Such choice has to reflect both the costs of such accommodation as well as its availability.

Non-Applicable Sections:	Personnel implications, Financial implications
Background Documents: (Access via Contact Officer)	ACS14008 Quality Monitoring of Domiciliary Care, Care Homes and Children’s Placements Framework Agreement for the Provision of Domiciliary Care Services.