

Decision Maker: EXECUTIVE

Date: For Pre-Decision Scrutiny by the Care Services Policy Development and Scrutiny Committee on 10th January 2017

Decision Type: Non-Urgent Executive Non-Key

Title: CARE HOME AND EXTRA CARE QUALITY MONITORING REPORT 2016

Contact Officer: Wendy Norman, Head of Contract Compliance and Monitoring
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Chief Officer: Doug Patterson, Chief Executive

Ward: Borough-wide

1. Reason for report

- 1.1 This report sets out the monitoring arrangements for Care Homes and Extra Care Housing Schemes in Bromley and comments on performance during 2016. The report also covers the performance of block contracts for nursing beds and Extra Care Housing.
- 1.2 The report also considers the impact of the introduction of the National Living Wage in 2016 on fees and recommends that funds set aside in the contingency budget to fund this increase are released.
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2. RECOMMENDATION

2.1 The Care Services PDS Committee is asked to note and comment on the contents of this report prior to the Council's Executive being requested to:

- i) Agree the drawdown of £1m from the Central Contingency Budget for 2017/18 as set out in paragraph 13.6 of this report.

Corporate Policy

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

1. Cost of proposal: N/A
2. Ongoing costs: N/A.
3. Budget head/performance centre:

Codes: 755*** / 756*** / 757*** / 819*** / 821*** / 824500/1/2				
	Long Term	Respite	Emergency Plcmts	TOTAL
Nursing Care	£8,143,240	£49,000	£409,910	£8,602,150
Residential Care	£23,645,980	£201,830	£474,630	£24,322,440
Mission Care Block Contract	£2,093,610			£2,093,610
Mission Care Spot Placements	£373,830			£373,830
Third Party Payments to Others - Extra Care Housing	£1,857,250			£1,857,250
	£36,113,910	£250,830	£884,540	£37,249,280

4. Total current budget for this head: £37,249,280
 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: 1.5FTE Contract Compliance Staff
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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): 751 placements in and out of borough
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Ward Councillor Views

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

3. COMMENTARY

- 3.1 Where it is appropriate the Council meets assessed needs by making placements available in residential and nursing homes. Service Users are then able to choose their placement, although this can be limited depending on the availability of placements and the user's financial resources. The majority of placements funded by the Council are contracted with individual homes on a spot contract basis (691 in December 2016), supplemented by 60 nursing care beds purchased via a block contract with Mission Care. The Contract Compliance Team closely monitors the quality of care of homes based in Bromley.
- 3.2 The Council ensures that service users have a choice of placements in homes in the borough for which the Council will pay a fair market rate. These rates are monitored and reviewed regularly in order to reflect demand as an inability to make local placements quickly also has a negative impact on the local acute hospital services.
- 3.3 The Council pays up to an agreed ceiling rate, based on criteria that service users have sufficient choice of placements in the borough at those ceiling rates. When it is not possible to place at those rates, a placement will be made above that level. Setting the ceiling rate too low means that providers will offer their beds to other local authorities or full payers as the first option, which will then also cause bed blocking at the hospital etc

MONITORING ACTIVITY

- 3.4 This report sets out the monitoring activity undertaken by the Contract Compliance Team in Care Homes in Bromley during 2016. The report also comments on the performance of the block contract with Mission Care.
- 3.5 For Service Users who are able to live more independently with support Extra Care Housing may be (is) a more appropriate option. The Council has contracts with Mears and Sanctuary Care Ltd to deliver support in the Extra Care Housing schemes at Crown Meadow Court, Regency Court and Sutherland Court.

Contractor	Service	Annual Budget	Contract Term	Expires
Mission Care	60 Nursing Beds	£2,093,610	5 years	1.1.18
Sanctuary Home Care Ltd	Care to tenants in Regency Court	£565,060	71 mths	19.7.2018
Sanctuary Home Care Ltd	Care to tenants in Sutherland Courts	£450,510	72 mths	18.11.2018
Mears	Care to tenants in Crown Meadow Court	£684,861	84 mths	24.3.18

- 3.6 The Council's Care Services Team undertakes reviews of the Bromley funded Individual service users annually, or more frequently if necessary. The Contract Compliance Team monitors the quality of service delivered in each Bromley location using a Quality Assessment Framework covering everything from the quality of accommodation, the state of the building, health and safety, fire safety and business continuity plans, but also focussing in detail on care plans, recording, medication arrangements, staffing and training. Complaints, safeguarding alerts, feedback from service users and their families and Care Quality Commission (CQC) ratings also

form part of the picture that is built up of each home. Compliance officers visit every home in Bromley at least annually, but more frequently where a risk assessment indicates more input is required. This Contract Compliance activity encompasses the service delivered to all residents whether or not they are funded by the Council as many Bromley homes have a high proportion of self-funded residents.

Care Services Intelligence Group (CSIG)

- 3.7 The Council's safeguarding manager convenes CSIG which is 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 with individual or multiple providers are identified early; that investigations progress appropriately and that any learning requirements are factored into monitoring and training programmes.

CQC RATINGS

- 3.8 The regulatory framework covering care services 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 Fundamental Standards of Quality and Safety. CQC Compliance reports may identify 'minor', 'moderate' or 'major' concerns against any of the Fundamental Standards. The fundamental standards are grouped into 5 key themed areas for the purposes of providing a consolidated rating for each home. These are: CQC inspects services against 5 key themed areas which are:

- Safe
- Effective
- Caring
- Responsive
- Well-led

- 3.9 Each individual area is rated separately and together with a summary rating is published on the CQC website.

The ratings are:

- Outstanding
- Good
- Requires improvement
- Inadequate

- 3.10 If the provider is failing to meet an individual standard the CQC will issue a notice of a breach of conditions which has to be remedied within a set timescale. If the provider fails to remedy the warning notice within the given time scales the provider may be put into special measures which if not remedied could result in the registration of the service being withdrawn.

- 3.11 Within the overall CQC rating a home may have individual ratings from different categories. A home could be rated overall "good" while still having an area that "requires improvement", or as "requires improvement" while having an area rated as "inadequate". A home may also be rated overall as "inadequate" whilst having a "good" rating in an area. Therefore it is necessary to consider the individual ratings and overall report about a home together with all other available

current information when considering the performance of a home. Performance sometimes changes relatively quickly, particularly if there is a change of key staff members or internal quality assurance checks are not undertaken.

3.12 A table showing a summary of Bromley Providers CQC ratings is below. The number of providers in the Good category has increased, however during the year four providers were deemed to be inadequate compared with two in 2015. More details about the homes in these ratings are set out below. Appendix 1 sets out the current CQC ratings for all the Bromley providers. It also shows the number of placements funded by the Council and the dates of monitoring visits made by the Council's Contract Compliance Officer and CQC.

Outstanding	Good	Requires Improvement	Inadequate.
0 (0 in 2015)	43 (37 in 2015)	12 (17 in 2015)	2(2 in 2015 1 different provider)

3.13 The CQC checks that providers have appropriate levels of management and that the registered person for that business has appropriate values and are well motivated. CQC inspections work closely with the Contract Compliance officers to ensure that information is shared appropriately and that resources are best used. Providers also have a duty to be transparent with their residents and their representatives which includes displaying their rating and informing them of any changes in rating, breaches etc.

3.14 The Council has adopted a policy of not making any new placements with a registered provider where the CQC has found the service to be **"inadequate"**. If a service receives this rating the Council's Care Services managers, together with the Contract Compliance and Safeguarding Teams in liaison with Health partners undertake a risk assessment in order to decide what action should be taken in respect of existing service users. Depending on the situation service users funded by Bromley could be given the option to move to alternative care homes.

3.15 Where a provider is given an overall rating of **"Requires Improvement"** by CQC the Council's Contract Compliance Officer will intensify the level of scrutiny of the provider and the provider's performance is regularly reviewed by the partners at the Care Services Intelligence Group (CSIG).

Outstanding:

3.16 Very few homes in the country are rated as outstanding in every category. In Bromley 4 providers have received an 'Outstanding' rating in one of the key areas. Antokol Nursing Home, Coloma Court and Community Options (78 Croydon Road) have received an outstanding rating for 'Caring' and Clairleigh Nursing Home has achieved an outstanding rating in the 'Well-led' category.

Good:

3.17 43 Bromley providers have received an overall rating of 'Good' by CQC.

Key areas where good practice was observed across several homes: People were treated with respect and dignity. Social needs of people were met and they were involved in care planning & decision making. The providers effectively liaised with other medical professionals and agencies.

Requires Improvement:

- 3.18 12 providers have received an overall rating of 'Requires Improvement'. A provider receives this rating when 2 or more key areas have been rated as requiring improvement. Each of these providers is working to an improvement plan in order to achieve a 'Good' rating. Key areas which require improvement are: risk assessments to be more robust, effective application of Deprivation of Liberty Safeguards (DoLS) and overall quality assurance which is related to the areas mentioned above. These areas of concern are picked up and used as themes for learning and discussion in the Care Home Forum which is held quarterly throughout the year for Providers.

Inadequate:

- 3.19 St Cecilia's Nursing Home is currently rated as 'Inadequate'. Woodham House, Newlands; Prince George Duke of Kent and The Heathers were also rated Inadequate during the year, but these overall ratings have been improved as set out below.

St. Cecilia's Nursing Home:

- 3.20 St. Cecilia's run by the Leonard Cheshire Foundation received an overall rating of 'Inadequate' in the CQC report published in July 2016. 'Safe' & 'Well-led' categories were rated as inadequate. The provider was found to be in breach of Regulation 17 (Good Governance) & 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Warning notices were served in response to these breaches. The provider was also found to be in breach of Regulation 12 (Safe care and treatment) however a warning notice was not served.
- 3.21 A suspension of new placements was implemented by the Council following this report and current placements were reviewed in order to assess whether service users living in the home were at risk. No service users moved out as a result. The issues that required resolution were around management and the provision of adequate staffing. An enhanced improvement plan was put in place and the performance of home has been monitored regularly. Senior Officers met with the Head of Operations (currently the Home Manager) and will continue to do so in order to ensure that longer term plans for the recovery of the service are robust and improvements made are sustainable. These have also been explored with the Leonard Cheshire Director of Operations for South East.
- 3.22 At a focussed CQC inspection on the 21st September 2016 (report published in November 2016), CQC found the provider had addressed the breaches of Regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and were complaint with the warning notices served during the last inspection. The rating for well-led category was improved to 'Requires Improvement'.
- 3.23 The overall rating continues to be 'Inadequate' as CQC will check on other breaches and improvements required at the next comprehensive inspection of the service. The Contract Compliance team will continue with an enhanced programme of monitoring until the rating is good.

Woodham

- 3.24 In 2015 Woodham House, a small care home for Adults with Mental Ill Health was rated inadequate by CQC. The Council moved the 2 service users funded to live in this home to alternative placements. The Provider subsequently took the decision to formally de-register the home with CQC and is now operating a supported living scheme from this location.

Homes rated as requiring improvement during 2016

Archers Point:

- 3.25 In January 2016, Archers Point received a CQC rating of 'Requires Improvement' for 3 key areas – Safe, Effective & Well-led. Since publication of the CQC report, LBB Contract Compliance Officer has visited the service twice. Significant improvements have been identified in the service during these visits. CQC is due to visit the service again.

Ashling Lodge:

- 3.26 In the CQC report published in February 2016, Ashling Lodge received a rating of 'Requires Improvement' in 4 out of 5 key areas. The Contract Compliance Officer visited the service in March 2016 and agreed an improvement plan with the provider. In the CQC report published in October 2016, the areas requiring improvement have reduced from 4 to 2. The Contract Compliance Team continues to work with the provider to ensure further improvements are made to achieve an overall good rating in the next CQC inspection.

Burrows House:

- 3.27 Burrows House received a rating of requiring improvement in 2 out of 5 key areas in the CQC report published in May 2016. The previous rating for this service was good. The Contract Compliance Officer has visited the service since and has made recommendations to the provider to rectify the concerns identified during the last CQC report. An improvement plan is currently in place.

Fairlight & Fallowfield:

- 3.28 The provider received a rating of requiring improvement in 3 out of 5 key areas in the CQC report published in March 2016. The Contract Compliance Officer has recently visited the service and an improvement plan is being implemented.

Fairmount:

- 3.29 2 out of 5 key areas received a rating of requiring improvement in the CQC report published in December 2015. The Contract Compliance Officer has visited the service twice since publication of this report. The organisation has been taken over by Chislehurst Care Ltd (The Mills Group) in August 2016. Some improvements were identified during the LBB monitoring visit conducted in September 2016; an improvement plan has been agreed with the provider.

Heatherwood:

- 3.30 In the CQC report published in September 2016, 3 out of 5 areas were rated as requiring improvement. The Contract Compliance Officer will re-visit the service shortly; an improvement plan will be agreed with the provider based on the findings of the visit.

Homefield:

- 3.31 This home is part of the block contract with Mission Care. In the CQC report published in November 2015, the provider had received following ratings: **Safe** – Inadequate; **Effective, Responsive, Well-led** – Requires Improvement and **Caring** – Good.. The home is monitored by the Contract Compliance Team on a quarterly basis and the provider has been working on the improvement plan agreed. The overall ratings improved in the CQC report published in June 2016 to: **Safe, Effective, Well-led** – Requires Improvement and **Caring, Responsive** – Good. Homefield's overall rating remains at Requires Improvement:
- 3.32 Action has been taken to improve the service across all areas, including: monitoring of nutrition, management of safeguarding alerts, medication storage, Deprivation of Liberty safeguards, improved quality of personal information in care plans and quality assessment auditing. The service has been consistently rated good for caring.

Lauriston House (residential beds):

- 3.33 In the CQC report published in May 2016, the provider was found to be in breach of Regulation 12 HSCA RA Regulations 2014 - Safe care and treatment - People who use the service were not protected against the risk of unsafe management of medicines. A warning notice was issued against the provider.
- 3.34 During the LBB monitoring visit conducted in July 2016; recommendations were made to the provider to improve compliance and an improvement plan was agreed. In the CQC report published in September 2016; the provider met the requirements of the warning notice issued earlier however received a rating of requiring improvement in 4 out of 5 key areas as the provider was still working on the improvement plan. The Contract Compliance Officer is due to visit the service again; a new action plan will be agreed with the provider based on the findings of the visit.

Maple House:

- 3.35 Maple House received a CQC rating of requiring improvement for 2 out of 5 key areas in the CQC report published in December 2015. The Contract Compliance Officer has visited the service twice since this report and the provider continues to make progress on an improvement plan agreed.

Prince George Duke of Kent:

- 3.36 In the CQC report published in February 2016, the provider received a rating of 'Inadequate' for Safe category and 'Requires Improvement' for other 4 categories. CQC conducted a focussed inspection of the service in May 2016 as a result of which the rating of Safe category was improved to 'Requires Improvement'. A comprehensive CQC inspection was conducted in July 2016, the provider received an overall rating of 'Requires Improvement' with 3 key categories (Effective, Caring & Responsive) being rated as 'Good'. The Contract Compliance Officer has been working closely with the provider and further improvements were seen during the LBB monitoring visit conducted in October 2016.

The Heathers:

- 3.37 In the CQC report published in January 2016, the provider received a rating of 'Inadequate' for Safe category. CQC undertook an enforcement action against the provider - The provider was required to fit an appropriate locking mechanism to the fire exit door so that it cannot be opened, except in the event of a fire when it will automatically release.
- 3.38 The rating for key question 'Is the service safe' was changed from Inadequate to Requires Improvement in the CQC report published in February 2016 as the provider had implemented the actions required to meet the requirements of the enforcement notice issued during the last CQC inspection. In the CQC report published in June 2016; the provider received rating of requiring improvement in 2 out of 5 key areas. The Contract Compliance officer has visited the service since; it was identified during this visit that further improvements have been made in the service. An improvement plan continues to be in place.

Whiteoak Court:

- 3.39 Two out of five key areas were rated as requiring improvement in the CQC report published in July 2016. The Contract Compliance Officer visited the service in September 2016 and observed the provider was working on the improvement plan has been put in place.

Benedict House:

- 3.40 There had been ongoing concerns with the quality of care being delivered in the Benedict House for some time. The Council continued to offer its support to the provider to help drive the required improvements however the owner decided to close the service in August 2016.

The Council worked closely with the provider on the 'Plan of Closure' and ensured that residents were safely transferred to other suitable settings as per their needs.

OUT OF BOROUGH HOMES

- 3.41 Where service users have chosen to live out of the borough the contract compliance team undertakes 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 reviews service users in residential care regularly in order to ensure that residents continue to be safely placed. Social Services Authorities communicate with each other to ensure that new placements are not made in homes where there are concerns for the quality of care.

4. Safe Guarding Alerts and Complaints

- 4.1 Service users are encouraged to make complaints in the first instance directly to the service provider. The Contract Compliance Officer checks the Complaints log at care homes during visits and follows up on these, for example by checking the service user's file and care plans to ensure that actions have been recorded. Where a complaint is not resolved satisfactorily the complainant may approach the Council for assistance. There are relatively few complaints received. Between April and November 2016 the Council received 1 formal complaint about a care home. Between April 2015 and March 2016 there were 4 formal complaints.
- 4.2 A detailed analysis of safeguarding alerts and complaints by home is set out in Appendix 2. Between April and November 2016 the Council received 48 safeguarding referrals about Bromley care homes. Seven of these referrals have been substantiated and investigations are ongoing for 20 referrals. As a comparison between April 2015 and March 2016, 74 safeguarding referrals were raised out of which 22 were substantiated.
- 4.3 The increase in the number of complaints and safeguarding alerts should not necessarily be considered negatively. It is important that service users and their families feel confident to report concerns. Twenty two investigations resulted in a conclusion of substantiated in 2015/16 (28% of investigations). Appendix 2 shows a breakdown of the safeguarding alerts by category. The largest number of incidents are categorised as "neglect or acts of omission". This would include failures with medication, uncaring attitude or poor care by carers, or failure to act in response to problems with service user's health.

All Residents Safeguarding Concerns

- 4.4 Where a risk to all residents in a care home is identified an "all residents" safeguarding case is opened. In this instance the Council works with all relevant partners (CCG, Health Providers, Police, CQC) in order to ensure the ongoing safety of residents. It is normal to require the provider to stop accepting new referrals into the home whilst investigations are ongoing. The Council will undertake reviews of all Bromley funded residents and will also ensure that residents who are self funders are supported.

Rosecroft:

- 4.5 An all Residents Safeguarding Alert was raised for this home in November 2016. Bromley Council, Bromley Healthcare and the police are currently investigating the matter. Care management, Safeguarding and the Contract Compliance Team are working in partnership to ensure safety of all residents in the home. The current CQC rating of this service is Good which improved from a rating of Inadequate in 2015.

5. User/ Stakeholder Satisfaction:

- 5.1 During every monitoring visit Officers take time to talk to residents about their experiences of care and support. They will also observe the interaction between staff and residents. Each provider undertakes its own annual user satisfaction survey. Residents and relatives meetings are conducted to promote inclusion; the feedback received is acted upon. The Contract compliance officer reviews the outcomes of these surveys and meetings as part of the contract monitoring process.
- 5.2 The feedback received as part of these surveys has been satisfactory. Difficulties have been recognised where residents lack the capacity to get involved due to cognitive impairment; a best interest decision has been taken by the provider in such cases.

Council Members Visits

- 5.3 Members of the PDS committee visit care homes during the year and are able to engage with service users and their relatives.

6. NURSING BED BLOCK CONTRACT

- 6.1 The Council has a contract with Mission Care for 60 nursing care beds in Bromley. These are spread across Willet House, Greenfield, Elmwood and Homefield. All homes are rated good except Homefield which requires improvement (see 3.31 -3.32). The Council is closely monitoring the action plan with the expectation that the actions taken will result in the rating improving at the next inspection. Mission Care won this contract following a procurement exercise. The original term of the contract has been extended twice as allowed and will expire on 31.12.17
- 6.2 The occupancy of these contracted beds during 2016 has been 100%. This extremely good performance is sustained due to close partnership working with Mission Care. The contract continues to deliver extremely good value for money. Quarterly contract monitoring meetings are held to review performance and explore issues arising. The key challenge for Mission Care and all providers in Bromley is to attract, recruit and retain a well-motivated and skilled workforce, both carers and nurses and managers. Mission Care has a well-developed practice of “growing its own “work force by recognising potential in staff and promoting them within the group where possible.

7. EXTRA CARE HOUSING

- 7.1 The contract compliance team also monitors the quality of service provided in externally provided Extra Care Housing Schemes for older people. There are 6 schemes in total and care is provided by 3 providers – Bromley In House Care Services, Mears and Sanctuary Support. These schemes are registered and inspected by the CQC as Domiciliary Care Providers. Bromley has a Quality Assessment Framework which is used to monitor care and support and the frequency of monitoring visits is determined by our standard risk assessment tool.
- 7.2 Contract compliance work has been led by user satisfaction levels. These were gathered by the Council’s Quality Monitoring Officer who met individually with a sample of service users. Satisfaction levels were high in Crown Meadow Court and Sutherland Court. Service users at Regency Court expressed concern about communication with carers, continuity of care staff, missed calls and failure to prepare food adequately. The Contract Compliance Officer has met monthly with local and regional managers from Sanctuary Home Care Ltd to ensure their progress against an improvement plan to address these issues. Officers expect the plan to be completed in December 2016.

- 7.3 The summary of complaints and safeguarding alerts is included in Appendix 2. The majority of these are from Sutherland and Regency Courts reflecting the concerns already identified about Sanctuary Homecare's performance. The support contracts for Extra Care Housing are currently subject to a procurement exercise which will be reported separately. Officers will continue compliance visits with this contract.

Bromley and Lewisham Healthwatch

- 7.4 As part of their role as a watchdog of health and social care services Bromley and Lewisham Healthwatch have a statutory power to Enter and View care homes. Healthwatch visited all Bromley's Extra Care schemes during 2015/16. They engaged with 65 residents. An extract from their report stated, " Most tenants said that with their needs for additional support the Extra Care Scheme was appropriate for them. Ninety two percent of tenants said that they were comfortable and felt secure in their living environment."

8. INHOUSE SERVICES – QUALITY ASSURANCE

- 8.1 The Contract Compliance Team was required to focus on external services provided by third party providers under contract. The Director of Adult Care Services has formally requested that the quality assurance for in-house services is undertaken by the contract Compliance Team in future.

9. CHILDRENS PLACEMENTS – QUALITY REPORT

- 9.1 Arrangements for the quality monitoring of placements for children and young people are subject to review

Service Standards

- 9.2 Service provision for children and young people (CYP) under 16yrs is required to comply with the Care Standards set by Care Standards Act 2000 and are regulated and inspected by Ofsted. This includes Residential Parenting Assessment Centres, Independent Foster Agencies (IFAs), Children's Homes, Special Schools, Residential (Boarding) Schools and Secure accommodation (for both remand and welfare placements).
- 9.3 Ofsted conducts a full inspection on an annual cycle for residential units and a 3-year cycle for independent fostering agencies, 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
 - Requires Improvement: a service that only meets minimum requirements
 - Inadequate: a service that does not meet minimum requirements

The Central Placements team only makes placements with providers that have a rating of Good or above.

- 9.4 Care Services PDS will receive a full report on the monitoring of placements for Children and Young People at the meeting in April 2017.

10. RISKS

- 10.1 Providers continue to find it difficult to recruit suitable motivated care and nursing staff. There is also quite a high turnover of managers in some homes which tends to enhance staffing difficulties. Owners are reviewing salaries in order to ensure that they can recruit experienced managers. The Department of Health increased the fee paid for nursing care by 39% for 2016/7 which helped homes with nursing salaries. The Council has also reviewed the rate it pays to care homes during 2016/17.
- 10.2 Some of the homes are in older properties which present challenges for nursing higher dependency residents, but few owners have the appetite for the challenge that undertaking a refurbishment presents, or the funding required for this investment.

11. EMERGING NEEDS

- 11.1 A small number of people with dementia present with challenging behaviour and require additional support and monitoring for a time in order to ensure both their safety and that of other residents. Placements specialising in this type of care are extremely expensive and the only alternative is to provide 1:1 care in the current home which is expensive and unsatisfactory for residents and staff. Some local providers are proposing to set up small units which specialise in this intense level of care. This could be a more cost effective and caring alternative to 1:1 care and will be explored as part of future commissioning arrangements.

12. IMPACT ON VULNERABLE ADULTS

- 12.1 The residents of Care Homes and Extra Care Housing are amongst the most vulnerable residents in the borough. Regular monitoring of the quality of care provided, both via announced and unannounced visits by officers is essential to ensure that provision is satisfactory. It is also critical to ensure that the person responsible for the care home has made appropriate arrangements to check quality assurance and service user feedback and that they have clearly publicised their whistle blowing policy.

13. FINANCIAL CONSIDERATIONS

- 13.1 Providers have been experiencing price rises due to the introduction of the National Living Wage which took effect from April 2016 and is due to rise to £7.50 from April 2017. Officers are in negotiation with providers in order to ensure that the supply of places continues and to allow the providers to continue to provide care at the quality levels that are expected of them.
- 13.2 A number of legal challenges have also been received from the Ombudsman around how robust our ceiling rates are, and recent advice from Counsel is that the Council does not provide sufficient choice for service users.
- 13.3 Given the difficulties officers have experienced in the last few months around agreeing spot placements, the Head of Finance, Director of Commissioning and the Head of Contract Compliance and Monitoring have met with providers to discuss their concerns. It is clear from those discussions that the ceiling rate for 2016/17 (based on 2015/16 prices uplifted by inflation) is not sustainable and for the latter part of this year officers have had no option but to increase the rates paid to providers. This has been done to avoid higher cost placements with providers insisting they are paid a premium (particularly this time of year), providers offering their spot placements to other local authorities and full payers rather than the Council's service users. Ultimately, there is a requirement for vulnerable adults to be placed and if no suitable accommodation is available at the time regardless of the Council ceiling rates, the service users will be placed, at times above these rates. The table below sets out the proposed new rate:-

Ceiling Rates

	<u>Current</u> <u>Per week</u> £	<u>Proposed</u> <u>Per week</u> £
Nursing Homes	648	680
Residential Homes - Physically Frail	560	590
Residential Homes - Elderly Mentally Ill	580	610

- 13.4 In setting the ceiling rate officers have set out a clear criteria based on sufficient choice, local offer as far as possible, and quality. The calculations are based on 2016/17 prices and so will need to be uplifted for 2017/18 as part of the budget process.
- 13.5 The impact of the National Living Wage and the ceiling rate is estimated to be £1m based on 2016/17 prices, so when the increased in the National Living Wage of £0.30 is introduced ,from April 2017, it is inevitable that a further review will be required. Any change in rates will be managed through the Budget Monitoring process.
- 13.6 Funding has been set aside in the contingency to cover this impact

14. LEGAL CONSIDERATIONS

- 14.1 This report sets out the monitoring activity undertaken by the Contract Compliance Team in Care Homes in Bromley during 2016 and comments on the performance during 2016.
- 14.2 The legal framework covering care services 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.
- 14.3 The legal framework for children and young people (under 16yrs) is the Care Standards set out in the Care Standards Act 2000 and are regulated and inspected by Ofsted. This includes Residential Parenting Assessment Centres, Independent Foster Agencies (IFAs), Children's Homes, Special Schools, Residential (Boarding) Schools and Secure accommodation (for both remand and welfare placements).
- 14.4 In accordance with the above legislation/regulations and the individual contractual requirements between the Council and the Providers the Council's Contract Compliance Team are required to monitor the quality of service delivered in each Bromley location and do so by using a Quality Assessment Framework. The Care Quality Commission (CQC) rating also contributes to the overall assessments of each home annually. The Council's safeguarding manager also convenes CSIG which is 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.

Non-Applicable Sections:	Personnel Considerations
Background Documents: (Access via Contact Officer)	(Appendices to be Included)
	Version 3 WN November 2016