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**Decision Maker:** **ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE**

**Date:** **Wednesday 22 January 2020**

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

**Title:** **ANNUAL QUALITY MONITORING REPORT: CARE HOMES**

**Contact Officer:** Wendy Norman, Head of Contract Compliance and Monitoring  
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**Chief Officer:** Kim Carey, Interim Director of Adult Social Care Services

**Ward:** Borough wide

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1. Reason for report

- 1.1 The Contract Compliance Team closely monitors and reviews the quality of care delivered in care homes, extra care housing and supported living schemes in Bromley. This is done using intelligence gathered from monitoring visits, Care Quality Commission (CQC) ratings; reports and reviews of safeguarding alerts; complaints received by the Council and information shared by our health and third sector partners in Bromley.
- 1.2 This annual report details the findings of the quality monitoring of care homes during 2019 and sets out the work undertaken by the Council and partners to improve the standards of care delivered to people living in residential settings.

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2. **RECOMMENDATION(S)**

- 2.1 The Adult Care and Health Policy Development and Scrutiny Committee is asked to consider the report and to note the actions taken to ensure that Providers maintain and improve the quality of service provided to care home residents.

## Impact on Vulnerable Adults and Children

1. Summary of Impact: The Contract Compliance Team works to ensure that vulnerable adults living in care homes receive the best possible service.
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## Corporate Policy

1. Policy Status: Existing Policy:
  2. BBB Priority: Excellent Council Healthy Bromley:
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## Financial

1. Cost of proposal: Not Applicable
  2. Ongoing costs: Not Applicable
  3. Budget head/performance centre: Residential/nursing care placement budgets in Adult Care and Health portfolio
  4. Total current budget for this head: £40.8m (total gross residential/nursing care placement budgets)
  5. Source of funding: Core funding, client & health contributions
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## Personnel

1. Number of staff (current and additional): 2.5FTE contract compliance officers, .3 FTE Quality and Performance Officer supported by Team Leader and Head of Contract Compliance
  2. If from existing staff resources, number of staff hours:
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## Legal

1. Legal Requirement: This is a contract monitoring report pursuant to CPR 23. There are no specific legal implications arising from this report.
  2. Call-in: Not Applicable:
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## Procurement

1. Summary of Procurement Implications: Not Applicable
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## Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Total residents funded by the Council in Bromley Care Homes benefitting from the work of this team 696.
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## Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: Not Applicable

## 5. COMMENTARY

- 3.1 The vision of the Adult Social Care Division is “to work together with our partners, to ensure that every resident in Bromley needing our support has the right help at the right time to keep them safe and to meet their needs, so that they achieve, thrive and reach their full potential.” The work of the Contract Compliance Team is a key factor in helping to achieve this vision for vulnerable people living in care homes within the community.
- 3.2 The Contract Compliance Team is responsible for monitoring the quality of service delivered in care homes located in the borough. This report sets out these arrangements in detail and gives information on the performance of individual care settings. A linked report on Part 2 of this agenda sets out further information which is not in the public domain.
- 3.3 The Contract Compliance Team uses a comprehensive Quality Assessment Framework (QAF) tool to monitor services. This tool is adapted to make it relevant to each specific setting. The Care Home QAF is attached as Attachment 1. The tool is completed annually for each care setting during a monitoring visit. Each area is rated by the Compliance Officer and the provider is sent a draft report for comment before the report is finalised. The provider is then requested to complete an action plan to make improvements where the current rating is less than satisfactory. The Compliance Officers follow up the successful completion of the action plans during focussed visits during the year.
- 3.4 The contract compliance visits are supplemented by visits by the Performance Quality Officer who focusses on getting feedback about the service from residents and visitors to the scheme and spends time observing the interactions between staff and service users. The officer also observes the management of activities and mealtimes. From time to time the officer joins the meetings that are organised for relatives of service users helping to build up an all-round perspective on the service.
- 3.5 The main aim of the team is to ensure that service users receive a good standard of service from well trained and compassionate staff. If the Contract Compliance team identifies that the care being delivered by a provider does not meet the required standard, or the provider fails to work on their action plan the team takes action depending on the severity of the concerns.
- Check current information with other stakeholders, Safeguarding team, CCG and any other relevant partners involved with ensuring the home delivers on its' improvement plan.
  - Meeting to review concerns with Provider and agree time scales for remedy
  - In agreement with the Interim Director of Adult Social Care Services suspend new placements to the home
  - Request a review of current service users in order to establish their safety and to consider whether an alternative placement would be more appropriate.

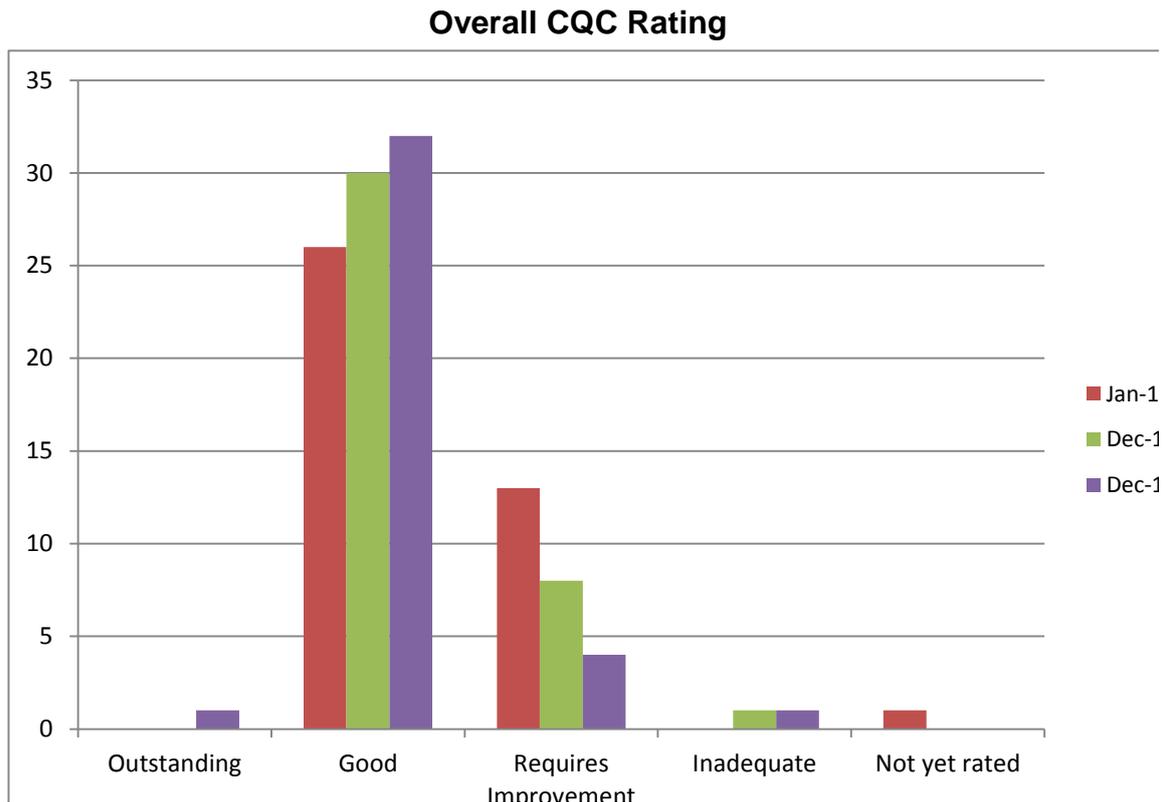
- Ensure that all other partners placing service users in the facility are aware of the problems identified, actions taken and actions required.
- 3.6 The Interim Director of Adult Services, and the Portfolio Holder for Adult Care and Health are kept fully informed of performance issues through regular briefings. The Executive Assistant to the Portfolio Holder also receives monthly updates on the activity of the Contract Compliance Team.
- 3.7 The regulatory framework covering care homes is the Health and Social Care Act 2008. The Care Quality Commission (Registration) Regulations 2009 and Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 detail the key standards which Providers must deliver. There are 28 regulations and associated outcomes set out in the legislation. The Care Quality Commission (CQC) monitors for compliance against these fundamental standards of quality and safety.
- 3.8 The CQC inspect all providers delivering regulated services and publish their ratings. Officers constantly review these ratings and use them alongside the information gathered in LBB monitoring visits to assess the status of the service.
- 3.9 The Council adopted a new policy in January 2018 to ensure that new placements were not made with Care Home Providers rated less than Good by CQC. During the period covered by this report a number of Providers have been inspected by CQC and their ratings have changed. The frequency of CQC inspections is influenced by previous performance and if a home is rated good it could be 30 months until the next inspection. However, if concerns are raised by a local authority or the public, or there is an unexpectedly high level of accident or incident alerts the inspection may be brought forward. If the provider is rated Requires Improvement it will usually be inspected by CQC again within one year.
- 3.10 The CQC checks that providers have appropriate levels of management and that the registered person for that business is well motivated and holds appropriate values. CQC inspectors 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 the CQC rating prominently and informing them of concerns raised by CQC, for example, breaches of regulations. Officers are aware that a home's performance can change relatively quickly in response to a change in manager.
- 3.11 During 2019 officers from the Council and Bromley Clinical Commissioning Group have continued to work together to improve the quality of care for residents in Bromley Care Homes and Extra Care Housing.. Achievements resulting from this work have been:
- The implementation of the Bromley GP Alliance contract to provide enhanced primary care for residential and nursing home residents and Extra Care Housing tenants

- Pharmacist providing support with reviewing medication arrangements in homes.
- The implementation of the Wake Up 2 Care programme, a recruitment and retention initiative to support care homes by recruiting new carers into the profession and supporting them with a training programme and mentoring through the first six months of their employment.
- The introduction of a regular Activities Network meeting for Care Home Activity Co-ordinators to share good practice and develop links across homes (to be held three times a year going forwards).
- Development of a system to better monitor the CQC ratings of out of borough care homes.

3.12 Table 1 and Chart 1 below show the CQC ratings for Care Homes reported for the last 3 years. The number of homes rated good improved during 2019; however one home has recently been rated inadequate. The percentage of Bromley care homes rated good or above has improved over the last three years to 87% at December 2019, compared to 77% in December 2018 and 65% in December 2017.

3.13 The Old Manse, an 8 bed registered care home for people with Learning Disabilities located in Biggin Hill closed in October 2019, there were no Bromley placements in this home. Lauriston House Nursing Home closed at the end of 2019.

Overall CQC Rating	Jan-18	Dec-18	Dec-19
Outstanding	0	0	1
Good	26	30	32
Requires Improvement	13	8	4
Inadequate	0	1	1
Not yet rated	1	0	0



### Analysis of CQC detail

- 3.14 The care homes rated Inadequate and Requires Improvement by CQC are listed below with a short comment on the improvements made since the rating was made. The Contract Compliance Team operates an enhanced monitoring regime with these providers in order to ensure that progress is made and improved care delivery is sustained.

#### Homes rated Inadequate

- 3.14.1 **Fairmount** was rated inadequate in August 2019 and placed in special measures. (5 LBB funded residents) The Council's compliance team has worked in partnership with the adult safeguarding manager and health partners to find ways to support the home to improve. Close monitoring continues and the provider is working towards meeting CQC requirements.

#### Homes rated Requires Improvement

- 3.14.2 **Rowena House** was rated requires improvement in May 2019. (5 LBB funded residents). This was an improvement on the rating of Inadequate in March 2018 and a further improvement of requires improvement rating in November 2018 (where the rating remained inadequate under safe). In May 2019 CQC found the provider to be compliant with regulations and had demonstrated improvements. The rating remained requires improvement as systems and processes implemented had not been

operational for long enough to demonstrate consistent and sustained good practice. The home was rated Good in three out of five domains. The provider worked hard to achieve this position and to implement the recommendations from the CQC and Contract Compliance Team. Officers have evidenced that sufficient improvements have been made and the Council has resumed making placements at this home.

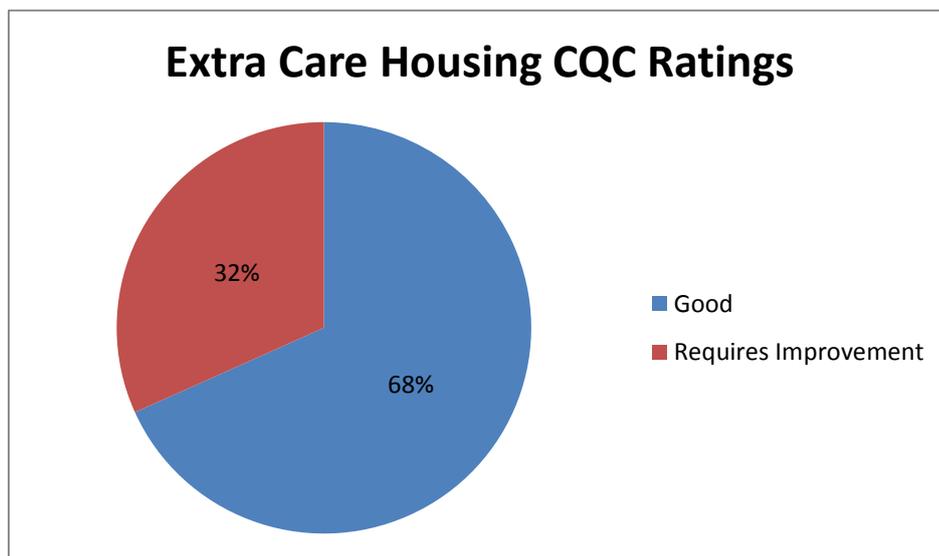
- 3.14.3 **Baycroft** (0 LBB funded residents) was rated requires improvement in August 2018 (overall and in four domains). Baycroft was further inspected and rated requires improvement in September 2019. CQC recognised that improvements had been made to address previous regulatory breaches; the overall rating improved to good in three domains and requires improvement in two domains. Officers have observed that the provider has made progress in some areas, but still has some improvements to make relating to assessment and risk management and quality assurance. Key managerial staff left in July 2019 and a peripatetic manager has been in post in the interim. A new manager started in post in October 2019.
- 3.14.4 **Fairlight and Fallowfield** (6 LBB funded residents) was inspected in May 2019 and rated requires improvement in a report published in September 2019. The individual ratings remained the same as the previous inspection. CQC found that some improvement had been made but that some areas had not been acted on robustly. The manager left following this inspection and a new home manager was recruited from September 2019. LBB officers continue to closely monitor the home and have seen positive action under the new manager.
- 3.14.5 **Jansondean** (10 LBB funded residents) was rated requires improvement in February 2019. There have been 2 changes of manager since this rating was published and the post has recently been recruited to. There has been some progress against CQC recommendations but the management changes have impeded progress. The team will continue to monitor this home closely.
- 3.14.6 Monitoring officers visit all care homes in Bromley irrespective of their current rating. If monitoring officers have concerns about any aspect of the performance of a home which is rated Good by CQC they will share these confidentially with the provider, colleagues in the Council and external partners via the Care Services Intelligence Group. The concerns may be an increased number of safeguarding alerts, accident reports or negative comments received from colleagues or community.
- 3.14.17 Officers will work with the care home concerned to devise an action plan to remedy the areas of concern. Progress will be monitored carefully and in the best instances the problems will be remedied. Where concerns remain the home is identified as a “home to watch” on the monthly dashboard of information about the care homes which is presented to the department’s senior management

3.23 A common problem affecting care homes in Bromley is the ability to recruit and retain well motivated and compassionate care staff and qualified nursing staff. Where homes use agency staff to cover vacancies the council expects home managers to ensure that the quality of the service is maintained through an appropriate level of supervision and internal auditing.

3.24 The recruitment and retention of an appropriately qualified and experienced manager is the key component of ensuring that a home delivers an effective and safe service to its residents. This is a highly skilled and responsible role which requires constant support from a management board in order to ensure that all CQC regulations are covered.

3.25 **Extra Care Housing**

The service delivered in the Council’s six Extra Care Housing schemes is regulated by CQC in the same way as a Domiciliary Care Agency. A chart showing how the current ratings apply to the overall total number of residents is shown below:



3.26 Two ECH schemes (Regency Court and Apsley Court) are currently rated Requires Improvement and are working on improvement plans towards achieving Good. During the year there have been significant improvements in service delivery. The Contract Compliance Team monitors the schemes in the same way as Care Homes and liaises with Commissioners who are managing the contracts.

## 4 PROVIDER FORUMS

- 4.1 Throughout 2019 the Contract Compliance Team ran a range of provider forums to share good practice, drive continuous improvement and encourage networking between providers. These forums were well attended by provider managers and stakeholders from partner organisations.
- 4.2 Care Home Forums are run quarterly. Guest presenters have included the GP Alliance, Speech and Language Therapists, CQC to cover aspects of regulation; Deprivation of Liberty Safeguards, Care Home Pharmacist, Commissioners, Providers sharing good practice, the Alzheimer's Society as well as group discussions on case studies. Feedback from forum attendees has been very positive.
- 4.3 Learning Disability Provider Forums are run three times a year. Guest presenters have included Officers from the London Fire Brigade advising on Fire Safety, an Oxleas Mental Health Team Psychologist, who presented on the topic of bereavement and learning disability, Advocacy for All, Service user presentations and a presentation on Recruitment and Retention.
- 4.4 The Council engages in joint working with Skills for Care in order to access additional free training. During 2019 Bromley hosted two workshop events for Care Home Managers: Improving Your CQC Rating and "Getting Started" working on values based recruitment.
- 4.5 The Council continues to work jointly with the London Fire Brigade. In November 2019 we hosted two workshops, one for Council staff and one for Care Home managers about fire safety in care homes. These reinforced previous training sessions on observing and mitigating the risks of fire in care homes.

## 5 IMPACT ON VULNERABLE ADULTS AND CHILDREN

- 5.1 People living in care homes, extra care housing and supported living schemes are amongst the most vulnerable in the borough. The contract compliance service contributes to ensuring that they live safely, are well-cared for and maximise their capacity for independence.

## 6. LEGAL IMPLICATIONS

- 6.1 This is a contract monitoring report pursuant to CPR 23. There are no specific legal implications arising from this report

<b>Non-Applicable Sections:</b>	<b>PROCUREMENT IMPLICATIONS,</b> <b>POLICY IMPLICATIONS</b> <b>PERSONNEL IMPLICATIONS</b> <b>FINANCIAL IMPLICATIONS</b>
Background Documents: (Access via Contact Officer)	[Title of document and date]