SCRUTINY COMMISSION FOR HEALTH ISSUES	Agenda Item No. 5		
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Report of the Executive Director of Adult Social Services

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QUALITY OF CARE HOMES

1. PURPOSE

The report is being presented at the request of the Commission.

2. BACKGROUND

In Peterborough, there are 20 care homes which have beds for older people. Two of these are provided in-house and the rest are in the independent sector. Some provide care for younger adults too, and in addition there are other care homes providing care just for younger people and people with a learning disability. A recent survey conducted by our review and monitoring team (November 2011) found that there were 772 places for older people in the independent homes of which 79 were vacant.

3. HOW HOMES ARE MONITORED

- 3.1 Care homes are regulated by the Care Quality Commission (CQC) and reviewed and monitored by the contract reviewing and monitoring team in NHSP.
- 3.2 CQC is the independent regulator of all health and social care services in England. Its job is to make sure that care provided by hospitals, dentists, ambulances, care homes, in people's own homes and elsewhere meets government standards of quality and safety. The government standards cover all aspects of care, including:
 - Treating people with dignity and respect
 - Making sure food and drink meets people's needs
 - Making sure that that the environment is clean and safe
 - Managing and staffing services
- 3.3 CQC registers care services that meet the standards, inspect them to check that they continue to do so, and take action when they don't. For care homes the standards are:
 - Treating people with respect and involving them in their care
 - Providing care, treatment & support which meets people's needs
 - Caring for people safely and protecting them from harm
 - Standards of staffing
 - Standards of management
- For each standard, a judgement is made against a four-level framework:
 - 1. Compliance with standard
 - 2. Compliance but with minor concerns
 - 3. Compliance but with moderate concerns

4. Non-compliance with major concerns

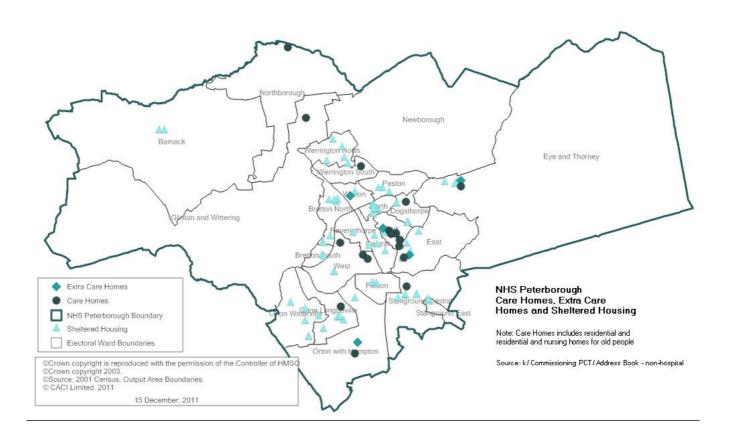
The judgements lead to CQC's subsequent requirements for improvement and, in the case of major concerns, are likely to lead to enforcement action. This replaces the previous star rating system.

- The contract reviewing and monitoring team currently sits within NHSP and reviews and monitors a range of contracts, mostly relating to adult social care. These include the 18 independent residential care homes, 21 domiciliary care services and services provided by the voluntary sector that receives funding from adult social care. From March 2012, this team will be part of Peterborough City Council Adult Social Care Services.
- 3.6 Monitoring officers undertake an annual review of homes and visit more often if concerns have been raised. During their annual visits to the home, they talk to residents, family members and staff about the care provided. They look at the care home's policies and procedures, staff files and ensure that recruitment procedures have been followed adequately, including CRB checks. They also check staff training to ensure that all staff are up-to-date with the safeguarding vulnerable adults training. They also write to residents, family members and staff and ask them to complete a questionnaire on the care provided. They also talk to the social workers involved in reviewing the appropriateness of the service the resident is receiving.
- 3.7 In the near future, the contracts for residential homes will move to the Association of Directors of Adult Social Services (ADASS) regional standard contract. Monitoring will be carried out via an associated workbook which gives a better social care focus to monitoring.
- 3.8 Peterborough Local Involvement Network (LINk) also has the right to enter care homes and review the care being provided. These 'enter and view visits' take place on a regular basis and are shared with CQC and the commissioners.
- The LINk is also part of the Independent Provider Quality Group which reports to the Quality and Patient Safety Committee and has an overview of the quality of care homes..

4. CURRENT PETERBOROUGH POSITION

- 4.1 We are currently developing an adult social care older people's strategy. The strategy has three broad aims:
 - to ensure that older people are able to live at home for as long as they can
 - to ensure that older people, who have been discharged from hospital or need support from adult social care services ,get specialist support and reablement to help them regain their independence
 - to ensure that older people have access to accommodation that is appropriate to their needs.
- 4.2 Older people tell us they want to remain in their own homes for as long as possible. Nationally, the preferred way for providing adult social care is to support people in their own homes to prevent the trauma of an older person having to leave their communities, families and friends and the familiar setting of their own home. Where an older person wishes to move into a more supported housing setting there are also alternative options to residential or nursing care homes.
- 4.3 Within Peterborough, there are just under 80 sheltered housing schemes providing independent housing, generally in either flats or bungalows. There are also five extracare housing schemes, providing 231 units of housing with personal care support directly provided by on-site teams.

4.4 The map below shows the locations of the registered homes and supported housing schemes in Peterborough:



- 4.5 Residential and nursing care homes are facilities to support those with significant social care need who choose to receive that support in a registered care home. The independent homes provide (as of November 2011) 445 residential places and 297 nursing places for older people.
- Dementia care is provided within the Peterborough city area through the two in-house homes and 10 of the 18 independent homes. 407 dementia beds are available in Peterborough. Within the independent sector, dementia care is delivered by four nursing homes and six residential homes. The percentage of beds available in each home for dementia care range from 45% to 100%. The higher percentages apply to the smaller care homes, whose total bed numbers are below 50.

RESIDENTIAL AND NURSING BEDS - PETERBOROUGH DATA COLLECTION FORM

The table below shows the position as reported by each home as at Monday 14 November 2011

Name of Home:

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Registration details	Number of registered beds 360
Older People Residential Older People Nursing	179
Younger People Residential	74
Younger People Nursing	3
Dual registered Residential	115
Dual Registered Nursing	118
Total	849
Ocuppancy status - beds registered for older people	Number of beds
Funded wholly or partly by Peterborough City Council	282
Funded wholly or partly by another Local Authority	58
Self funders aged 65 and over	209
Self funders aged 65 and over in receipt of free nursing care funding	69
Health funded - continuing health care	114
Vacancies	79

4.7 There were, at November 2011, a further 57 people who had chosen to live in a care home outside the Peterborough area – normally to be closer to family – who were being funded wholly or partly by Peterborough.

5. HOW ARE OUR LOCAL HOMES DOING?

- As of November 2011, information from CQC was that ,of the 18 independent care homes, 16 were meeting all the standards, one home was required in June 2011 to improve its standards of caring for people safely and protecting them from harm, and one home did not have any details available.
- The home that needed to make improvements received follow-up visits from the contract reviewing and monitoring team, the last one being in October 2011. Safeguarding was looked at, as well as staffing levels, activities, staff supervision, staff training, medication, nutrition, and continence amongst others. Improvements had been made.
- 5.3 The home with no recent CQC information online is a home that had recently transferred ownership to a well established local provider. The review and monitoring team has visited, as has CQC but its report is not available at present.
- In addition to the independent homes, the two remaining in-house homes (Welland House and Greenwood House) have both been required by CQC to make improvements in a number of areas.
- Welland House in three areas: standards of providing care, treatment and support which meets people's needs; standards of staffing; and standards of management. In August 2011, CQC took enforcement action in respect of Greenwood House in relation to standards of caring for people safely and protecting them from harm by October 2011 this standard was met, but improvement was required in two areas: standards of staffing; and standards of management. Peterborough Community Services has worked hard with

NHSP to put these areas right and focused work continues to ensure these homes now meet the required standards.

6. HOMES DOING WELL

Below are a range of comments from our routine questionnaires and feedback from residents and family members:

6.2 Care home A

A resident on respite for four weeks was very positive about their experience and in the further comments section stated: "thank god I landed at the care home!".

6.3 Care home B

They encourage my mother to join in with the activities, with reading and knitting. Helped her write and post her Christmas cards. They encourage her to eat and take regular exercise. From our point of view, the staff at the care home have enabled us to have peace of mind that mother is safe, cared for properly and are there immediately should there be any health problems.

6.4 Care home C

I am always impressed by the thoughtfulness, patience and cheerfulness of the staff. They are very proactive with my mum's healthcare and quick to get the doctor in when required. Care home is called a care home and that's what it does - it cares for the elderly very well indeed.

6.5 <u>Care home D</u>

They create an environment in which residents are safe, well cared for and in which their needs and individuality are important.

6.6 Care home E

They treat residents with dignity, care and understanding and have staff trained to a high standard. They make everyone feel welcome. Always ready to listen if you have a problem. There are always events for the residents to take part in. The staff are very caring and making sure the residents are happy is something they do very well.

7. HOMES WHERE THERE ARE CONCERNS

- 7.1 We work with CQC and other partners to share information and work directly with care homes where there are concerns.
- 7.2 A few examples are outlined below:

Care home A

Last year, a family member stayed overnight with her father as she knew he was dying and wanted to be with him. She was concerned that a man in the room opposite her father was shouting out for help. No one came to him so she went to get help. After looking for a staff member she eventually walked onto the main lounge/dining area and found two staff members asleep whilst on waking night duty. The family were very upset about this and gave their approval for the Monitoring Officer to speak to the Home Manager. The Monitoring Officer and Contracts Manager from NHS Peterborough met with the Home Manager and there followed an unannounced night spot check of the unit. Two staff members were found asleep on duty. Both were suspended pending further investigation and they were subsequently dismissed. Having identified a management weakness the contracts team checked the log of night time visits and found them to be infrequent and poorly documented. The procedure was revised by the home and is now much more robust.

Care home B

Following concerns raised by CQC about a provider on a Friday afternoon, contracts staff, the Assistant Director responsible, and the strategic safeguarding lead all visited at different times over the weekend. Immediate physical improvements were made to the home, and a continuing action plan is in place which is being regularly reviewed and monitored. There were a number of safeguarding concerns which warranted further investigation and this has been investigated by the relevant care management team and overseen by the strategic lead for safeguarding. At the time of writing this report, we have suspended all new placements at this home. We have involved the local CQC inspector in the safeguarding meetings.

8. THE FUTURE

- Peterborough had an estimated 172,800 people living within the City Council boundary in 2010. Of these, approximately 24,000 were aged 65 and over.
- 8.2 The table below shows Peterborough's population increase by age group to 2021 (percentage).

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reterborough Resident Popula	tion Projections by age grot	up to 2021 (cumulative percentage)

	Thousands										
Year	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
0-19	0.7	1.4	2.0	3.4	4.1	5.2	6.1	7.5	8.6	9.7	11.1
20-44	0.8	1.2	1.6	2.2	2.8	3.0	3.4	3.6	4.2	4.7	5.0
45-64	1.5	2.2	3.7	4.9	6.2	7.4	8.6	10.1	10.6	11.4	12.1
65-74	2.4	7.9	11.1	14.3	17.5	19.8	22.2	23.0	24.6	25.4	26.2
75-84	2.4	3.5	3.5	4.7	7.1	7.1	9.4	10.6	15.3	17.6	21.2
85+	6.9	10.3	13.8	20.7	24.1	27.6	31.0	34.5	37.9	44.8	51.7
Total	1.2	2.3	3.2	4.5	5.6	6.4	7.5	8.4	9.4	10.4	11.3

Source: ONS Sub-national Population Projections, mid 2008

- The increase in the 85+ age group is more than 50% although the whole population increases by just 11%. Alongside the general growth in numbers of older people, there will be a growth in numbers of older people with long term conditions and disabilities: Numbers of older people with a moderate or severe learning disability are forecast to rise by just under 50% from 67 to 100 between 2010-2030; Numbers of older people with a limiting long term illness are forecast to rise 56% from 11,222 to 17,543.
- The number of people with dementia (including early onset) living in Peterborough, will increase from 1,686 in 2010 to 1,882 in 2015 and 2,142 in 2020 an increase of 27% over the next ten years. The largest increase is expected to be seen in women, increasing from 1,074 currently (2010) to 1,309 in 2020 (Dementia UK Report, Alzheimer's Society, 2007). This highlights a high level of need, and work is already underway to address this in the longer-term. Although there is no data around the numbers of people who are unable to access an appropriate residential or nursing home placement, all the residential and nursing home dementia beds are either at capacity or nearly so, strongly suggesting that there must be a number of people unable to access the appropriate level of dementia care. In line with the National Dementia Strategy, we are working with local care providers and clinicians to increase the availability of community-based services to support people with dementia and their families.

9. CONCLUSION

9.1 Very nearly all the care homes for older people in Peterborough meet the required CQC standards. Where the standards are not met, the review and monitoring team works with others including home managers, CQC, our own safeguarding services and social workers to help homes improve and deliver the required standards.

- 9.2 We are not complacent. We have a robust reviewing and monitoring system in place and continually look at how we can improve our own systems. Moving to the ADASS contract is one of those improvements.
- 9.3 We have a good number of extra-care housing units but need more. An additional scheme is being built next year and we are looking to plan the next one after that. We know we need more nursing and dementia beds and we are working with the market to provide 'fit for purpose' modern and homely care homes which meet these needs.
- 9.4 The Adult Social Care Older People's Strategy, presently being developed, will further outline the needs and the wishes of older people in Peterborough to get the support they want. This strategy will link into the council's Housing Strategy.

10. NEXT STEPS

10.1 The Commission to scrutinise and comment on the report and make any recommendations.

11. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

11.1 None

12. APPENDICES

12.1 None

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