



Item No. 8

Meeting Date **Wednesday 5th September 2018**

Glasgow City Integration Joint Board Finance and Audit Committee

Report By: Stephen Fitzpatrick, Assistant Chief Officer, Older People Services and South

Contact: Clare Hughes, Head of Residential and Day Care Services

Tel: 0141 420 5558

**CARE INSPECTORATE ACTIVITY WITHIN
DIRECTLY PROVIDED OLDER PEOPLE'S RESIDENTIAL AND DAY CARE SERVICES
AUGUST 2017 – JULY 2018**

| | |
|---------------------------|---|
| Purpose of Report: | To provide the IJB Finance and Audit Committee with a summary of Care Inspectorate activity within directly provided older people's residential and day care services in the period August 2017- July 2018. |
|---------------------------|---|

| | |
|-------------------------------|---|
| Background/Engagement: | <p>The Care Inspectorate is the independent regulator of social care and social work services across Scotland formed under the Public Service Reform (Scotland) Act 2010. Statutory inspections of care homes for older people and day care services for older people are carried out once a year and once every three year respectively. This cycle of inspection is a minimum standard and services may also be subject to further inspection and scrutiny activity including investigation of complaints.</p> <p>The Care Inspectorate also has responsibility for registration of care homes for older people and day care services.</p> <p>Inspection reports are published on the Care Inspectorate public website. Managers carry out engagement sessions with residents, staff and family members around inspection activity.</p> |
|-------------------------------|---|

| | |
|-------------------------|--|
| Recommendations: | <p>The IJB Finance and Audit Committee is asked to:</p> <ul style="list-style-type: none"> a) note the findings of this report in respect of the range of provided residential and day care services inspected and trends in relation to grades awarded; b) note the introduction of a new quality framework and revised inspection methodology following the introduction of new Health and Social Care Standards in April 2018; and c) note the progress in relation to Tomorrow's Residential and Day Care service reform programme. |
|-------------------------|--|

Relevance to Integration Joint Board Strategic Plan:

These services are integral to the IJB's strategy for delivering high quality care and effective outcomes for the city's most vulnerable older people.

Implications for Health and Social Care Partnership:

| | |
|--|--|
| Reference to National Health & Wellbeing Outcome: | This report is relevant in relation to national outcomes 3,4,7,8 & 9 |
|--|--|

| | |
|-------------------|------|
| Personnel: | None |
|-------------------|------|

| | |
|----------------|------|
| Carers: | None |
|----------------|------|

| | |
|--------------------------------|------|
| Provider Organisations: | None |
|--------------------------------|------|

| | |
|--------------------|------|
| Equalities: | None |
|--------------------|------|

| | |
|-------------------|------|
| Financial: | None |
|-------------------|------|

| | |
|---------------|------|
| Legal: | None |
|---------------|------|

| | |
|-------------------------|------|
| Economic Impact: | None |
|-------------------------|------|

| | |
|------------------------|------|
| Sustainability: | None |
|------------------------|------|

| | |
|--|------|
| Sustainable Procurement and Article 19: | None |
|--|------|

| | |
|--|--|
| Risk Implications: | There is particular focus on continuous improvement within Riverside Care Home following its first inspection in March 2018. |
| Implications for Glasgow City Council: | This report confirms an overall pattern of high inspection grades for these services and a generally high level of confidence in the Council's registered services for older people. |
| Implications for NHS Greater Glasgow & Clyde: | None |

1. Purpose of Report

- 1.1 This report provides Finance and Audit Committee with a summary of Care Inspectorate activity across directly provided residential and day care services for older people in the Period August 2017 to July 2018.
- 1.2 Detail is also provided on the new quality inspection framework for older people's residential services and an update on Tomorrow's Residential and Day Care programme of service reform.
- 1.3 The Care Inspectorate published a total of 14 inspection reports during the reporting period in respect of the following directly provided services:
 - 8 Older People's Residential Care Homes
 - 6 Older People's Day Care Services

2. New Health and Social Care Standards

- 2.1 The new Health and Social Care Standards came in to effect in April 2018. The "Standards" are made up of headline outcomes and descriptive statements which set out the standard of care a person should expect when using health and social care services in Scotland.

The headline outcomes are:

1. I experience high quality care and support that is right for me.
2. I am fully involved in all decisions about my care and support.
3. I have confidence in the people who support and care for me.
4. I have confidence in the organisation providing my care and support.
5. I experience a high quality environment if the organisation provides the premises.

- 2.2 The "Standards" are underpinned by five principles: dignity and respect, compassion, be included, responsive care and support and wellbeing. The principles reflect the way that older people who requires our services should experience our care. Managers will use the standards to self-

evaluate services with the ambition of achieving an aspiration to provide sector leading care for Glasgow's most vulnerable older people.

- 2.3 More detail on the new standards can be found at www.newcarestandards.scot

3. Quality Framework for Care Homes for Older People

3.1 The Care Inspectorate is developing new inspection frameworks which reflect the ambition of the new Health and Social Care Standards. These are focussed on wellbeing and the difference that high quality care and support makes to people's lives. A new quality framework is in place for inspection of older people's care homes and the new methodology underpinning this will be utilised for all inspections from August 2018. Work is ongoing within the Care Inspectorate and new frameworks will be rolled out incrementally to other care settings thereafter.

3.2 The Care Inspectorate tested the new framework across a number of older people's care homes between November 2017 and May 2018. Directly provided care homes were involved in these pilot inspections.

3.3 The new quality framework is focussed on outcomes and how well people experience our care. There are six "key questions" the first of which is:

- How well do we support people's wellbeing?

To understand what contributes to that there are four further "key questions":

- How good is our leadership?
- How good is our staff team?
- How good is our setting?
- How well is our care and support planned?

Under each question there are three to four "quality indicators". (Appendix 1)

The final "key question" is:

- What is our overall capacity for improvement?

Appendix 1 provides an illustration of the "key questions" and "quality indicators".

3.4 A six point scale is retained to evaluate performance across quality indicators during inspections.

- 6 Excellent Outstanding or sector leading
- 5 Very Good Major Strengths
- 4 Good Important Strengths
- 3 Adequate Strengths just outweigh weaknesses
- 2 Weak Important weaknesses – priority action required

- 1 Unsatisfactory Major weaknesses – urgent remedial action required

Appendix 2 provides descriptors of the grading scale.

More detail on the new inspection framework can be found at:
www.careinspectorate.com/index.php/inspections/new-inspections.

4. Care Inspectorate Grades – Residential Care Homes

- 4.1 Table 1 outlines the grades awarded by the Care Inspectorate for all older people’s residential services delivered by Glasgow City HSCP. Grading detail is provided for the last two inspections.

Table 1.

| Care Home | Date of inspection | Care and Support | Environment | Staffing | Management and Leadership |
|---------------|--------------------|------------------|-------------|----------|---------------------------|
| Crossmyloof | April 2018 | 5 | 4 | 4 | 4 |
| | May 2017 | 2 | 4 | 2 | 2 |
| Davislea | July 2018 | 5 | | 5 | |
| | July 2017 | 5 | 5 | 5 | 5 |
| Drumry | July. 2018 | 4 | 5 | 5 | 5 |
| | Aug. 2017 | 4 | 5 | 4 | 5 |
| Forfar | July. 2018 | 5 | 5 | | |
| | Sept.2017 | 5 | 4 | 5 | 5 |
| Rannoch | Nov. 2017 | 5 | 4 | 4 | 4 |
| | Sept.2016 | 5 | 4 | | |
| Hawthorn | Dec. 2017 | 5 | 6 | 5 | 5 |
| | Jan. 2017 | 4 | | | 5 |
| Orchard Grove | Feb. 2018 | 4 | 5 | 5 | 5 |
| | Feb. 2017 | 5 | | | 5 |
| Riverside | March 2018 | 3 | 5 | 3 | 3 |

- 4.2 Crossmyloof Care Home received a further inspection in April 2018. The inspection was unannounced and carried out as part of a test pilot using the new inspection methodology. The grades awarded reflected the findings of the inspection team as outlined below:

How Good are Outcomes for People Experiencing Care?

People experience compassion, dignity and respect = Grade 5

People have good quality of life as a result of their care and support = Grade 5

People’s health benefits from their care and support = Grade 5

How good is our leadership?

Quality assurance and improvement is led well = Grade 4

How good is our staff team?

Staff have the right knowledge, Competence and development to care and support people. = Grade 4

How good is our setting?

The setting promotes and enables people's independence. = Grade 4

How good is our delivery of key processes?

Assessment and care planning peoples' needs and wishes. = Grade 4

- 4.3 Riverside Care Home opened to residents in June 2017. The initial inspection raised concern around key areas of performance which are detailed in Appendix 3. Inspectors recognised that the service requires time to settle following transition from three older care homes. A robust action plan is in place to support staff to improve the quality of care provided.
- 4.4 All 8 HSCP residential care homes were subject to inspection in the reporting period. 7 out of the 8 care homes received a Grade of 4 or above in all four quality indicators.

5. Care Inspectorate Grades – Day Care Services

- 5.1 Table 2 outlines the grades awarded by the Care Inspectorate for 6 older people's day care services delivered by Glasgow City HSCP. Grading detail is provided for the last two inspections.

Table 2.

| Day Care Service | Date of inspection | Care and Support | Environment | Staffing | Management and Leadership |
|-------------------------|---------------------------|-------------------------|--------------------|-----------------|----------------------------------|
| Budhill | Aug. 17 Aug. 14 | 4 5 | 5 | 4 5 | 4 |
| Corkerhill | March '18 Feb. '15 | 5 4 | 4 | 4 4 | 4 |
| Crossmyloof | Aug '17 Feb. '15 | 5 5 | 4 | 5 5 | 4 |
| Glenwood | Aug. '17 Sep. '14 | 5 5 | 6 5 | 5 | 5 |
| Oran Street | Dec. '17 Nov. '14 | 5 5 | 4 | 5 | 5 5 |
| Wallacewell | Feb '18 | 5 | 6 | 5 | 5 |

- 5.2 Hawthorn Day Care was inspected at the end of July 2018. The final report has not yet been published however feedback from the Care Inspectorate was extremely positive describing the service as sector leading and a centre of excellence for older people. The service was awarded a Grade 6 - Excellent across all quality themes inspected including care and support.

- 5.3 All Day Care Services that received an inspection in the reporting period received a Grade of 4 or above in all four quality indicators.

6. Requirements and Recommendations

- 6.1 A total of 5 requirements and 3 recommendations were made during the reporting period across all 8 residential care services. Detail is provided in Appendix 3.
- 6.2 There were no requirements and 5 recommendations made across the 6 day care services that received an inspection during this period. Detail is provided in Appendix 3.
- 6.3 All requirements and recommendations have a robust action plan attached to them to ensure improved performance and quality of service provision.

7. Tomorrow's Residential and Day Care Service Reform Programme

- 7.1 The first three of the HSCP new 120 bedded purpose built care homes are now well established and operating at full capacity. These three homes are Hawthorn House in Possilpark, Orchard Grove in Toryglen and Riverside Care Home located in the Commonwealth Games Village.
- 7.2 Operational planning is already underway to deliver the last two new build care homes on Blawarthill and Leithland Road sites in 2019. The care home on the Blawarthill site will be 70 bedded and is a direct replacement for Rannoch House and 'Drumry Care Home. Residents have chosen "Victoria Gardens Care Home" as the name for their new home. Leithland Road will be 120 bedded with an integrated day care service attached. Residents have chosen "Meadowburn Care Home" as the name for their new home. Meadowburn will be a direct replacement for Forfar Avenue, Davislea and Crossmyloof care homes.
- 7.3 Delivery of Tomorrow's Residential and Day Care programme will also achieve a total of six new purpose built day care units. These units will replace current day care facilities which are no longer fit for purpose in line with the strategy to provide in house registered services to older people with more complex needs. To date four new units have successfully opened and service users and staff from nine existing services relocated. Planning is already underway to manage the successful opening of Woodside Day Care at the end of this year with the final site at Leithland Road projected for completion in 2019.

8. Recommendations

8.1 The IJB Finance and Audit Committee is asked to:

- a) note the findings of this report in respect of the range of provided residential and day care services inspected and trends in relation to grades awarded;
- b) note the introduction of a new quality framework and revised inspection methodology following the introduction of new Health and Social Care Standards in April 2018; and
- c) note the progress in relation to Tomorrow's Residential and Day Care service reform programme.

The quality indicator framework

| Key question 1: How well do we support people's wellbeing? | Key question 2: How good is our leadership? | Key question 3: How good is our staff team? | Key question 4: How good is our setting? | Key question 5: How well is our care and support planned? |
|---|--|--|--|--|
| 1.1. People experience compassion, dignity and respect | 2.1. Vision and values positively inform practice | 3.1. Staff have been recruited well | 4.1. People experience high quality facilities | 5.1. Assessment and care planning reflects peoples' needs and wishes |
| 1.2. People get the most out of life | 2.2. Quality assurance and improvement is led well | 3.2. Staff have the right knowledge, competence and development to care for and support people | 4.2. The setting promotes and enables people's independence | 5.2. Families and carers are involved |
| 1.3. People's health benefits from their care and support | 2.3. Leaders collaborate to support people | 3.3. Staffing levels and mix meet people's needs, with staff working well together | 4.3. People can be connected and involved in the wider community | |
| 1.4. People are getting the right service for them | 2.4. Staff are led well | | | |
| Key question 6: What is the overall capacity for improvement? | | | | |

The Six- Point Scale

The six-point scale is used when evaluating the quality of performance across quality indicators.

| | | |
|---|----------------|--|
| 6 | Excellent | Outstanding or sector leading |
| 5 | Very Good | Major strengths |
| 4 | Good | Important strengths, with some areas for improvement |
| 3 | Adequate | Strengths just outweigh weaknesses |
| 2 | Weak | Important weaknesses – priority action required |
| 1 | Unsatisfactory | Major weaknesses – urgent remedial action required |

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for people which are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** will apply to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

An evaluation of **good** applies to performance where there is a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

An evaluation of **adequate** applies where there are some strengths but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Performance which is evaluated as adequate may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established, or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.

An evaluation of **weak** will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect peoples' experiences or outcomes. Without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for people. It is likely that people's welfare or safety will be compromised by risks which cannot be tolerated. Those accountable for carrying out the necessary actions for improvement must do so as a matter of urgency, to ensure that people are protected and their wellbeing improves without delay.

Appendix 3

Requirements and recommendations received across residential and day care services in the reporting period.

Requirements

8 residential services inspected: 5 requirements received

6 day care services inspected: 0 requirements received.

All 5 requirements made in residential services were in relation to the inspection of Riverside care home.

1. The service provider must ensure that staff adhere to best practice when they are responsible for managing, administering medication (aligned to how this is prescribed) and accurately record medications given to each resident taking account of "Guidance about medication personal plans, review, monitoring and record keeping in residential care services" through Care Inspectorate Hub.

2. The service provider must ensure that personal care plans:

state individuals' specific health needs and associated risks, provide clear and accurate information and guidance for staff on how to meet the identified needs and risks.

evidence that assessment tools are used effectively and accurately to identify individuals' needs and are regularly reviewed and updated to include changes as a result of a planned care review.

3. The service provider must ensure that staff undertake but not limited to the following training: promoting positive behaviour, adult support and protection (including reporting procedure) and moving and assisting.
4. The provider must make proper provision for the health, welfare and safety of service users and provide services in a manner which respects their privacy and dignity. In order to do this they must:

Ensure that a full pre-admission assessment takes place. This should include, where possible, information from the service user, their family and health care professionals involved in their current support. This should be documented and detail the rationale for the decision made to admit individuals.

Review the current needs of each resident, align staffing levels to meet the identified needs, ensure staff are equipped with the right skills and ensure appropriate deployment of staff throughout the home.

5. The provider must make proper provision for the health, welfare and safety of service users and provide services in a manner which respects their privacy and dignity. In order to do this they must:

Ensure that accidents and incidents are recorded and appropriately reported both internally and when appropriate externally to Social Work and Care Inspectorate (when they are of an adult support and protection nature)
ensure measures to reduce risk of harm to residents and staff are recorded.

Recommendations

8 residential services inspected: 3 recommendations received
6 day care services inspected: 5 recommendations received.

Residential

Crossmyloof care home received 2 recommendations:

- 1 Anticipatory Care Planning needs to be put in place as the section in the care plans sampled "Final Wishes" were not complete. The provider should adopt the health Improvement Scotland approach – "My Anticipatory Care Plan" and was shown this document as part of the improvement work during the inspection.
- 2 Provider needs to develop an outcome focussed approach. Current care plans including the review documents presently in use by the service are not outcome focussed and not measurable

Orchard Grove care home received 1 recommendation:

- 1 You can be confident that the provider is aware of your nutritional state and will, with your agreement, arrange for this to be regularly assessed and reviewed. This assessment will take account of any changes in your health. In order to achieve this the service should ensure that accurate records of people's weights and fluid intake is recorded appropriately.

Corkerhill Day Care received 3 recommendations:

- 1 The quality of recordings of six monthly reviews should be improved and include identified actions for the next six months, the views and comments of the individual and their carers who have been consulted.
- 2 The quality of recordings within the support plans should be improved. This should include the completion of the documentation contained within and

should have a person centred outcome focus that details how residents prefer their support to be carried out.

- 3 The manager should have an overview of the whole service to ensure the robust implementation and evaluation of the provider's policies and procedures and continuous service development through quality assurance and audit processes.

Oran Street Day Care received 2 recommendations:

- 1 The manager should ensure that information in support plans is in sufficient detail for staff to support the person consistently.
- 2 The manager should develop the operational plan further so that it shows continuous improvement. It should also take into consideration the views of people using the service, carers, staff and other stakeholders and be regularly reviewed and show when actions have been completed.