

OFFICIAL



Item No. 10

Meeting Date Wednesday 4th September 2019

**Glasgow City
Integration Joint Board
Finance, Audit and Scrutiny 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 2018 – JULY 2019**

Purpose of Report:

To provide the IJB Finance, Audit and Scrutiny Committee with a summary of Care Inspectorate activity within directly provided older people's residential and day care services in the period August 2018 - July 2019.

Background/Engagement:

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 years 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.

The Care Inspectorate also has responsibility for registration of care homes for older people and day care services.

Inspection reports are published on the Care Inspectorate public website. Managers carry out engagement sessions with residents, staff and family members around inspection activity.

OFFICIAL

OFFICIAL

Recommendations:	The IJB Finance, Audit and Scrutiny 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.
-------------------------	--

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 and 9.
--	---

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

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

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

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

Fairer Scotland Compliance:	None
------------------------------------	------

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

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

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

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

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

OFFICIAL

Risk Implications:	Poor inspections may mean that vulnerable people are not receiving good quality care and are likely to have poor outcomes. There are also risks to the public image of the Health and Social Care Partnership as inspection reports are publicised on the Care Inspectorate website.
---------------------------	--

Implications for Glasgow City Council:	Care Inspectorate gradings for care at home and housing support services provided by Glasgow City Council/Health and Social Care Partnership have a direct impact on the public perception of the Council, and by extension the Health and Social Care Partnership. 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:	Care Inspectorate gradings for care at home and housing support services provided by Glasgow City Council/Health and Social Care Partnership have a direct impact on the public perception of the Council, and by extension the Health and Social Care Partnership.
--	---

1. Purpose of Report

- 1.1 This report provides IJB Finance, Audit and Scrutiny Committee with a summary of Care Inspectorate activity across directly provided residential and day care services for older people in the period August 2018 to July 2019.
- 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 five inspection reports during the reporting period in respect of the following directly provided services:
 - Five Older People's Residential Care Homes
 - No inspections were carried out in respect of Day Care Services in the reporting period.

2. Quality Framework for Care Homes for Older People

- 2.1 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 was utilised for all inspections from August 2018.

OFFICIAL

OFFICIAL

2.2 The framework is based on the new Health and Social Care Standards which came into effect in April 2018. The standards are made up of headline outcomes which set out the standard of care a person should expect when using health and social care services in Scotland.

These headline outcomes are:

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

The standards are underpinned by five principles:

- Dignity and Respect
- Compassion
- Be included
- Wellbeing
- Responsive Care and Support

More details on the new standards can be found at www.newcarestandards.scot

2.3 The new Quality Framework for Care Homes for Older People is focussed on outcomes and how well older 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 a further four key questions:

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

Under each question there are three to four "quality indicators".

The final key question is:

- What is our overall capacity for improvement?

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

OFFICIAL

2.4 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 five older people’s residential services delivered by Glasgow City HSCP.

Table 1

Care Home Date of Inspection	How well do we support people’s wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is Care and Support Planned?
Hawthorn 5 Nov. 2018	4	Not Assessed	Not Assessed	Not Assessed	4
Orchard Grove 8 Aug. 2018	5	Not Assessed	Not Assessed	Not Assessed	4
Riverside 15 Nov. 2018	4	4	3	5	4
Rannoch 31 Oct. 2018	4	Not Assessed	Not Assessed	Not Assessed	4
Drumry 3 Aug. 2018	5	Not Assessed	Not Assessed	Not Assessed	4

OFFICIAL

4.2 Table 2 provides grading outcomes from the previous inspection of units in Table 1 above. The headings reflect the change in new methodology since August 2018 in that the grades are categorised under old inspection focus areas.

Table 2

Care Home	Date of inspection	Management & Leadership	Staffing	Environment	Care and Support
Drumry	July. 2018	5	5	5	4
	Aug. 2017	5	4	5	4
Rannoch	Nov. 2017	4	4	4	5
	Sept.2016			4	5
Hawthorn	Dec. 2017	5	5	6	5
	Jan. 2017	5			4
Orchard Grove	Feb. 2018	5	5	5	4
	Feb. 2017	5			5
Riverside	March 2018	3	3	5	3

- 4.3 Riverside Care Home opened in June 2017 with residents and staff relocating from three older care homes; namely Loancroft, Peter McEachran and Fulton Lodge. The initial inspection raised concern around key areas of performance which are reflected in grading outlined in table 2 above. Inspectors recognised that the service required time to settle following transition from older care homes. A robust action plan was put in place to support staff in their efforts to improve the quality of care provided. The management team and staff in Riverside have worked very hard to achieve improvements in the day to day experiences of residents and staff and this was reflected in improved inspection grading in November 2018.
- 4.4 It is important to recognise the operational challenges and overall commitment of staff and managers in supporting the de-commissioning of ten residential care homes and the safe transition of residents and staff to three new build 120 bedded care homes while maintaining good care inspectorate grades. This work has also been undertaken in the context of changing needs of service users as a result of the HSCP's strategic priority to enable independent living for longer thus supporting more and frailer older people to remain living in the community for as long as possible. This has meant that the residential units now routinely support older people at end of life and with complex needs. In common with the wider HSCP service there is an expectation that these new services will continue to evolve to meet the needs of older people in the future and not simply continue to provide the same services they have in the past.
- 4.5 A continuing and determined focus on delivering the best possible outcomes and quality of life to older people in the city that require support from the HSCP has enabled the service to maintain a high standard of care while delivering significant service reform. Moving forward the resident population will be frailer and the average length of stay will be shorter. This will continue to present challenges which requires adapted models of care over time and investment in managers and staff to

OFFICIAL

ensure they have the skills and competence to meet the increasing needs of service users. Operational planning is ongoing in this respect.

5. Care Inspectorate Grades – Day Care Services

5.1 No Day Care Service received an inspection in the reporting period. Current grading across all day care units sits at grade 4 or above for care and support.

6. Requirements and Areas for Improvement

6.1 No requirements were received and a total of 10 “areas for improvement” were made across all 5 residential care services that received an unannounced inspection during the reporting period. Detail is provided in Appendix 3.

6.2 All “areas for improvement” 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 Tomorrow’s Residential and Day Care Programme is a programme of service reform replacing the HSCP’s directly provided, older residential and day care units with sector-leading new build facilities.

7.2 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.

7.3 Operational planning is well underway to deliver the last two new build care homes on Blawarthill and Leithland Road sites in Autumn 2019. The care home on the Blawarthill site will be 70 bedded and is a direct replacement for Rannoch House and Drumry Care Homes. Residents have chosen “Victoria Gardens Care Home” as the name for their new home. The care home on the Leithland Road site 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.

7.4 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 five new units have successfully opened and service users and staff from ten existing services safely relocated. Planning is already underway to manage the successful opening of the last new build day care unit on the Leithland Road site. The unit will be integrated alongside the new build residential care home and will be named Meadowburn Day Care.

OFFICIAL

7.5 At the conclusion of Tomorrow's Residential and Day Care Programme services will be delivered from 5 new purpose built residential care homes and 10 day care units. (6 of the day care units are purpose built and 4 have been refurbished to the standard in line with the new build programme). Feedback from service users, family and friends, and health and social care staff is overwhelmingly positive in terms of the quality of the environment within older peoples residential and day care services which significantly contributes to improved outcomes for service users.

8. Recommendations

8.1 The IJB Finance, Audit and Scrutiny 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.

OFFICIAL

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.

Requirements and Areas for Improvement as a result of 5 inspections carried out in residential care homes between August 2018 and July 2019

Hawthorn House Care Home (unannounced inspection on 5th November 2018)

No requirements received.

Two areas for improvement identified:

- The provider should ensure that care plans for supporting people who may exhibit stress and distress reactions are fully developed by incorporating recommendation made by external professionals and include a process of regular re-evaluation to check the effectiveness of the strategies and measures put in place.

This ensures that the approach is consistent with Health and Social Care Standards:

- My care plan is right for me because it sets out how my needs will be met, as well as my wishes and choices (HSCS 1.15).

- The service provider should ensure that care reviews are used to check and record if the care and support provided is achieving good outcomes for people using the service and they are actively involved in reviewing the content.

This ensures that the approach is consistent with Health and Social Care Standards:

- I am fully involved in developing and reviewing my personal plan, which is always available to me (HSCS 2.17).

Orchard Grove Care Home (unannounced inspection on 8th August 2018)

No requirements or areas for improvement were received.

Riverside Care Home (unannounced inspection on 15th November 2018)

No requirements received.

Four areas for improvement identified:

- The service should roll out the new medication management and administration approach throughout the home in a timeous manner, regularly evaluate the effectiveness of the model and keep the Care Inspectorate updated with progress.

OFFICIAL

This ensures that support is consistent with the Health and Social Care Standards:

- My care and support meets my needs and is right for me (HSCS 1.19)
- Any treatment or intervention that I receive is safe and effective (HSCS 1.24)
- The service provider should review the current staffing levels and deployment of staff within the home in order that staff are able to offer quality interactions and supports with residents.

This ensures that support is consistent with the Health and Social Care Standards:

- People have time to support and care for me and speak to me (HSCS 3.16).
- The service provider should continue to work on identifying and prioritising staff for training relevant to their role, this should include but not be limited to induction training. There should be regular planned staff supervision sessions which are used to evaluate staff competencies and reflect on practice and adherence to the Health and Social Care Standards.

This ensures that support is consistent with the Health and Social Care Standards:

- I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organizational codes (HSCS 3.14).
- The service provider should ensure care plans are in place which reflect the current needs of each resident and provide clear guidance on strategies and approaches to be used by staff to meet residents' identified needs.

This ensures that support is consistent with the Health and Social Care Standards:

- My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices (HSCS 1.15).

Rannoch House (unannounced inspection on 31st October 2018)

No requirements received.

4 areas for improvement identified:

- The service provider should ensure that further development sessions are carried out with staff to ensure that they understand how to use assessment tools including the Malnutrition Universal Screening Tool (MUST) and understand how these should shape the associated care plan.

This ensures that support is consistent with the Health and Social Care Standards:

- I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (HSCS 3.14).

OFFICIAL

OFFICIAL

- The service provider must monitor residents, who are at risk of experiencing falls, more closely. This includes monitoring what interventions and measures have been put in place to reduce the likelihood of recurrence.

This ensures that support is consistent with the Health and Social Care Standards:

- I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I am unhappy or may be at risk of harm (HSCS 3.21).

- The service should ensure that residents are adequately protected from environmental risks. They should ensure that checks of water temperatures, profiling beds and window restrictors are regularly carried out and any remedial actions are taken promptly.

This ensures that support is consistent with the Health and Social Care Standards:

- My environment is secure and safe (HSCS 5.17).
- The service provider should ensure care plans are in place which reflect the current needs of each resident and provide clear guidance on strategies and approaches to be used by staff to meet residents' identified needs.

This ensures that support is consistent with the Health and Social Care Standards:

- My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices (HSCS 1.15).

Drumry Care Home (unannounced inspection on 3rd August 2018)

No requirements or areas for improvement were received.