

Item No. 10

Meeting Date Wednesday 13th April 2022

Glasgow City Integration Joint Board Finance, Audit and Scrutiny Committee

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Operational Care Services

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Care Inspectorate Activity Within Directly Provided Older People's Residential Services - 2021

Purpose of Report:	To advise IJB Finance, Audit and Scrutiny Committee of the	
	outcome of the inspection of Meadowburn Care Home and	
	Victoria Gardens Care Home, provided by Glasgow City	
	HSCP, which were undertaken by the Care Inspectorate in	
	2021	

Background/ Engagement:

The introduction of the Regulation of Care (Scotland) Act 2001 has established a system of care regulation covering the registration and inspection of care services by the Care Inspectorate against a set of national care standards.

Every care service in the country is clearly rated under a grading system which was introduced by Scotland's national care regulator. This is designed to make it easier for members of the public to check the quality and performance of a care service and make informed choice about whether to use it – or not.

Following each inspection, each service is awarded a grade for measured outcomes based on the principles of the Health and Social Care Standards.

In order to robustly assess care home arrangements to respond to the COVID-19 pandemic, Care Inspectorate engagement and inspections placed particular focus on infection prevention and control (IPC), personal protective equipment (PPE) and staffing in care settings.

OFFICIAL - SENSITIVE: Senior Management The Care Inspectorate revised their inspection methodology, developing 'Key Question 7', which augmented their quality framework for care homes for older people: this was implemented to meet the statutory duties outlined in the Coronavirus (Scotland) (No.2) Act and subsequent guidance that implored evaluation of infection prevention and control, and staffing. These revisions lead to targeted inspections across Scotland, which were designed to be short, focused and conducted in collaboration with representatives from Health Improvement Scotland and Health Protection Scotland, to assess care and support of people experiencing care and support during the COVID-19 pandemic. The matters contained within this paper have been previously **Governance Route:** considered by the following group(s) as part of its development. HSCP Senior Management Team □ Council Corporate Management Team Health Board Corporate Management Team □ Council Committee Update requested by IJB □ Other ⊠ (please note below) Social Work Professional Governance Board Not Applicable □ Recommendations: The IJB Finance, Audit and Scrutiny Committee is asked to: a) Note the findings of this report in respect of the two directly provided HSCP residential care homes inspected; and b) Note the introduction of a new quality framework and revised methodology in response to the COVID-19 pandemic following the introduction of new Health and

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.

Social Care Standards 2019.

Meadowburn is a directly provided HSCP care home, providing care and support to 120 eligible residents across 8 units; this includes a specialist dementia support unit.

Victoria Gardens is a directly provided HSCP care home, providing care and support to 70 eligible residents across 5 units.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Fully compliant across respective registered services.
Personnel:	N/A
Carers:	N/A
Provider Organisations:	N/A
Equalities:	N/A
Fairer Scotland	N/A
Compliance:	
Financial:	N/A
Legal:	N/A
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Economic Impact:	N/A
Sustainability:	N/A
Sustainable Procurement	N/A
and Article 19:	
Risk Implications:	N/A
Implications for Glasgow	N/A
City Council:	
Implications for NHS	N/A
Greater Glasgow & Clyde:	

1. Purpose of Report

1.1 To advise IJB Finance, Audit and Scrutiny Committee of the outcome of the inspection of Meadowburn Care Home and Victoria Gardens Care Home, provided by Glasgow City HSCP, which were undertaken by the Care Inspectorate in 2021.

2. Background

- 2.1 The themes covered in both inspections under the revised inspection methodology were:
 - How good is our care and support during the COVID-19 pandemic?

- 2.2 Meadowburn Care Home was subject to inspection in March 2021, and a grade of 2 (Weak) was awarded. However, this was reevaluated in April 2021 and the grade revised to 3 (Adequate), following significantly robust objections from the HSCP on the validity of the audit, and implementation of methodology.
- 2.3 The Care Inspectorate revised their inspection methodology, which augmented their quality framework for care homes for older people; this was implemented to meet the statutory duties outlined in the Coronavirus (Scotland) (No.2) Act and subsequent guidance that implored evaluation of infection prevention and control, and staffing.
- 2.4 The Care Inspectorate also carried out independent consultation with service users via an inspection volunteer confidential survey response.
- 2.5 Glasgow City HSCP Older People's Residential Services provide 24-hour care and support to 550 residents across 5 directly provided care homes. Every week over 750 skilled social care staff provide high quality care and support to residents.
- 2.6 Meadowburn Care Home opened in November 2019 and Victoria Gardens in September 2019, and these inspections were inaugural inspections due to the challenges placed upon care services and the Care inspectorate due to the COVID-19 pandemic.
- 2.7 These inspections occurred within the context of the global COVID-19 pandemic, which had a momentous impact on the HSCP residential services; the services experienced unprecedented levels of absence, in addition to major challenges in recruitment and retention of the workforce, during a time of global instability.
- 2.8 The challenges the workforce faced cannot be overestimated; rapid changes to national guidance issued in the first year of the pandemic (over 200 amended documents), restrictions, and amended working conditions placed even greater pressure on a hard-working, committed workforce.

3. Meadowburn Care Home

- 3.1 The Care Inspectorate measured outcomes against selected principles in the new Health and Social Care Standards. These grades were awarded on a scale of 1 to 6, with 1 being Unsatisfactory and 6 being Excellent.
- 3.2 Two inspectors from the Care Inspectorate undertook the inspection, alongside inspectors from Health Improvement Scotland, evaluating the service based on key areas that are vital to the support and wellbeing of people experiencing care.

3.3 Through consideration of detailed evaluations in March 2021, the Care Inspectorate awarded the following grades for this service:

Mea	Meadowburn Care Home	
	How good is our care and support during the COVID-19 pandemic?	
	7.1 People's health and well-being are supported and safeguarded during the COVID-19 pandemic	
7.2 Infection control practices support a safe environment for people experiencing care and staff		2 - Weak
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care		3 - Adequate
2	Requirements	
0	Recommendations	
2	Areas for Improvement	

3.4 <u>Meadowburn Care Home – Requirements – March 2021</u>

- By 28 April 2021, the provider must ensure all staff consistently adhere to national guidance not limited to but including the Scottish COVID-19 Care Home Infection Prevention and Control Addendum and Health Protection Scotland COVID-19 Information and guidance for care home settings, in particular relation to:
 - The provider must put in place a risk assessment for the use of cleaning materials that are not chlorine based and agree the use of the cleaning products through local governance arrangements in line with national guidance.
 - Information and Guidance for Care Home Settings (Adults and Older People), Version 2.1, 31 December 2020, the HPS Care Home Outbreak Checklist (V1.12) and the World Health Organization (WHO) My 5 Moments for Hand Hygiene including observation of compliance and the non-wearing of jewellery including wrist jewellery by staff.
 - Ensuring availability of alcohol-based hand rub to support staff to effectively decontaminate their hands at the point of care.
 - The safe storage and use of PPE is in line with guidance.
 - Ensuring that the washing process for used and infectious linen include a thermal disinfection cycle in line with guidance
 - Ensuring all staff are familiar with and understand the importance of adherence with national guidance. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "My environment is secure and safe." (HSCS 5.17) And to comply with Regulation 4(1)(a) - Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

2. By 28 April 2021, the provider must ensure compliance with the correct labelling of all cleaning solutions to minimise the risks to staff and residents. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "My environment is secure and safe." (HSCS 5.17) And to comply with Regulation 4(1)(a) - Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210). Inspection report Inspection report for Meadowburn Care Home page 6 of 9 Also, taking account of Control of Substances Hazardous to Health Regulations 2002 (COSHH).

3.5 Meadowburn Care Home – Areas for Improvement – March 2021

- 1. The 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 is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "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)
- 2. In order that the provider can be confident that staff understand and apply training undertaken and follow best practice guidance in their day-to-day practices, staff should complete reflective accounts and participate in direct observations which should be recorded.
 - This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "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)
- 3.6 Following the initial inspection, and throughout the formal feedback session, senior leadership representatives of HSCP tabled strong objections to the feedback and proposed grading; this resulted in a sequence of senior-level meetings with Care Inspectorate representatives and further correspondence between the Assistant Chief Officer of Operational Care Services, Clinical Director of the HSCP, Chief Officer of the HSCP, and Chief Executive of Glasgow City Council. Fundamentally, the basis of the objections was centred on the implementation of national guidance, which was issued hastily, and lacking clarity on the applicability to a residential setting, as opposed to a clinical setting.
- 3.7 The detailed evaluation of Meadowburn Care Home was internally reviewed by an independent quality team at the Care Inspectorate and subsequently uniquely regraded to reflect the validity of the objections and strength of evidence submitted by the HSCP.

3.8 Through consideration of detailed evaluations in April 2021, the Care Inspectorate awarded the following grades for this service:

Meadowburn Care Home		Grade
 How good is our care and support during the COVID-19 pandemic? 		3- Adequate
	People's health and well-being are supported and afeguarded during the COVID-19 pandemic	4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff		3 - Adequate
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care		4 - Good
0	Requirements	
0	Recommendations	
0	0 Areas for Improvement	

3.9 Meadowburn Care Home – Requirements – April 2021

- 1. Met within timescales
- 2. Met within timescales

The inspectors were satisfied that all necessary requirements had been fully met following tabled objections, input and correspondence from HSCP leadership, and no further requirements were deemed necessary to satisfy the reevaluated grade.

3.10 Meadowburn Care Home – Areas for Improvement – April 2021

- 1. Met within timescales
- 2. Met within timescales

The inspectors were satisfied that all necessary improvements had been made following tabled objections, input and correspondence from HSCP leadership and were sustainable to satisfy the reevaluated grade.

4. Victoria Gardens Care Home

- 4.1 The Care Inspectorate carried out an inspection of Victoria Gardens Care Home in October 2021; as outlined previously, this was the inaugural inspection, and was unannounced.
- 4.2 Two inspectors from the Care Inspectorate undertook the inspection, with no input from Health Improvement Scotland or Health Protection Scotland, evaluating the service based on key areas that are vital to the support and wellbeing of people experiencing care.

- 4.3 Care Inspectorate measured outcomes against selected principles in the new Health and Social Care Standards these grades were awarded on a scale of 1 to 6, with 1 being Unsatisfactory and 6 being Excellent.
- 4.4 Through consideration of detailed evaluations in October 2021, the Care Inspectorate awarded the following grades for this service:

Vict	oria Gardens Care Home	Grade
How well do we support people's wellbeing?		4 – Good
1.1 People experience compassion, dignity and respect		5 – Very Good
1.2 People get the most out of life		5 – Very Good
1.3 People's health benefits from their care and support		4 – Good
 How good is our care and support during the COVID-19 pandemic? 		4 - Good
7.2 Infection control practices support a safe environment for people experiencing care and staff		4 - Good
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care		5 – Very Good
0	Requirements	
0	Recommendations	
4	Areas for Improvement	

4.5 <u>Victoria Gardens Care Home – Requirements – October 2021</u>

No requirements were made at the time of inspection.

4.6 Victoria Gardens Care Home – Areas for Improvement – October 2021

How well do we support people's wellbeing?

1. The service should ensure that all staff record their involvement with people in a person-centred manner to capture people's experiences and the outcomes achieved. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11)

2. The service should ensure that staff practice is directed by the information included in care plans, and that: a. Food and fluid intake charts are fully completed, and that the information contained therein is used to inform the planning of care and support. b. Care plans for people confirmed or suspected of having Covid-19 are in place and accessible for staff. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11)

How good is our care and support during the COVID-19 pandemic?

- 1. The service should ensure that all bedding, mattresses and mattress covers are in a good state, clean and fit for people to use. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment." (HSCS 5.22).
- 2. The service should further develop quality assurance processes for infection prevention and control, including regular environmental cleanliness audits, cleanliness audits for equipment used by people experiencing care and regular observations of staff practice. The quality assurance process must follow the latest available Scottish Government guidance and best practice guidelines. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) ed premises, furnishings and equipment." (HSCS 5.22).

5. Key areas identified for Continuous Improvement

- 5.1 Attached is the continuous improvement plan as agreed with the Care Inspectorate as a result of the inspection at Victoria Gardens Care Home (Appendix 1).
- 5.2 Meadowburn Care Home's continuous improvement is measured through the Service Improvement Plan, which is reviewed by Older People's Residential and Day Care Services senior management team on a monthly basis, alongside the other HSCP directly provided care homes in collaboration with the cycle of improvement and development visits by the OPR Improvement, Development and Innovation Team.
- 5.3 Qualitative improvement is an important function for the service supported by the internal Improvement, Development, and Innovation Team. This team work closely with service providing improvement support for tests of change and have carried out development visits to each service in preparation for recovery from COVID-19.

- 5.4 Development visits from the Improvement, Development, and Innovation team provide an additional layer of evaluation which can then lead into feedback and service improvement plans. Development visits have been prioritised based on an appreciative inquiry approach which seeks to identify key strengths within the service as well as areas for improvement. This is then reported through Care Home Governance meetings held 4-weekly providing a tier of scrutiny to improvement frameworks.
- 5.5 The senior management team of Older People's Residential and Day Care Services regularly provide updates to the Care Inspectorate at the six weekly liaison meetings on the progress of this plan.
- 5.6 Key areas identified are reflected in our improvement planning to address the recommendations raised by the Care Inspectorate and for overall quality improvement.

6. Recommendations

- 6.1 The IJB Finance, Audit and Scrutiny Committee is asked to:
 - a) Note the findings of this report in respect of the two directly provided HSCP residential care homes inspected; and
 - b) Note the introduction of a new quality framework and revised methodology in response to the COVID-19 pandemic following the introduction of new Health and Social care Standards 2019.



CONTINUOUS IMPROVEMENT PROGRAMME PLAN SUMMARY – Appendix 1

Care Inspectorate Inspection Areas for Improvement Victoria Gardens October 2021

The service should ensure that all staff record their involvement with people in a person-centered manner to capture people's experiences and the outcomes achieved. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11)

Residents' daily recordings must be written in a person centred, outcome focused way.

To achieve this Victoria Garden currently has an audit process that every day looks at the content of the care plan. This generates meaningful conversations with Senior staff and care staff to ensure care plans are current.

This is following flash meetings where changing needs are discussed, and solutions put in place to ensure the care plan is responsive to changing needs.

To take this further the daily recordings will be discussed fuller at staff change over meetings as well as flash meetings. The quality of recordings will be looked at and analysed with staff input to change staff's practices in relation to more person centred and outcome focused recordings.

Operational performance reviews will analyse the quality of recording on a 4-6 week basis to identify good and poor recordings to allow peer development in mentoring staff who require further support.

Registered Managers / Senior Managers

The service should ensure that staff practice is directed by the information included in care plans, and that: a. Food and fluid intake charts are fully completed and that the information contained therein is used to inform the planning of care and support. b. Care plans for people confirmed or

Fluid recordings and diet recordings require to be completed by staff at the point of consumption.

Currently Service Manager and or Operational Manager check the fluid sheet totals first thing in the morning to assess that the fluid targets have been achieved.

Day Seniors check at 6pm and night seniors at midnight to calculate totals.

suspected of having Covid-19 are in place and accessible for staff. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11) Senior and care staff will peer check and oversee that fluid charts are recorded in after every meal and fluid consumption to ensure early intervention can be put in place if fluid intake is poor.

Diet recording sheets require recordings that are measurable in regard to quantity of dietary intake.

Portion descriptions of what is eaten will be recorded at point of consumption after every meal and snack. Senior staff will audit and monitor that after each meal.

Registered Managers / Senior Manager

The service should ensure that all bedding, mattresses and mattress covers are in a good state, clean and fit for people to use. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I experience an environment that is well looked after with clean, tidy and well-

Registered Managers / Senior Manager

equipment." (HSCS 5.22).

maintained premises,

furnishings and

Mattress audits required to be more robust and regular.

Service Manager or Operational manager as well as Senior staff will check the integrity of the mattress protectors as well as the condition/soiling/smell and general state of repair of 15 mattresses, one wing per week. At this time any remedial action will be put in place immediately.

Bed frames will be checked for the 15 beds audited per week again for cleanliness and any remedial action taken immediately.

The findings from these audits will be discussed at the flash meeting for that day and appropriate person commissioned to rectify defects. i.e. domestics to clean beds or frames/admin to order new covers or mattresses as required.

Bedding will be changed if required at the point of audit.

Domestic cleaning schedules are in place and recordings of bed checks they complete on a daily basis will be recorded and actioned as defects are found.

The service should further develop quality assurance processes for infection prevention and control, including regular environmental cleanliness audits, cleanliness audits for equipment used by people experiencing care and regular observations of staff practice. The quality assurance process must follow the latest available Scottish Government guidance and best practice guidelines. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) ed premises, furnishings and equipment." (HSCS 5.22).

Registered Managers / Senior Manager

Domestic staff have new cleaning schedules now in place detailing daily/weekly and monthly tasks.

Each living unit has a recording manual that domestic staff record in as tasks are completed and action any remedial action required.

Cleaning staff management have monthly audits in place to monitor and review standards of infection prevention and control. All staff have completed the online infection prevention and control training and competency training to observe practice is scheduled 3 monthly for care staff.

Spot observations of practice will be carried out by cleaning managers as well as care home managers and findings recorded in staff training records.