

**REPORT TO:** Health Policy & Performance Board

**DATE:** 27 November 2018

**REPORTING OFFICER:** Strategic Director – People

**PORTFOLIO:** Health and Wellbeing

**SUBJECT:** Care Home and Domiciliary Care Update

**WARD(S)** Borough-wide

## 1.0 PURPOSE OF THE REPORT

1.1 To update the Board and highlight key issues with respect to quality in local Care Homes and Domiciliary Care Services.

## 2.0 RECOMMENDATION: That:

i) **The report be noted.**

## 3.0 SUPPORTING INFORMATION

3.1 It is a key priority for Halton Borough Council to ensure the provision of a range of good quality services to support Adults requiring commissioned care in the Borough. The Care Act 2014 has put this on a statutory footing through a choice of diverse high quality services that promote wellbeing.

3.2 The care home market in Halton consists of 25 registered care homes which provide 757 beds operated by 14 different providers. The capacity within the care homes ranges from homes with 66 beds to smaller independent homes with 6 beds.

3.3 The Council purchased care homes in both November 2017 and December 2017 from the private sector taking it to 3 Council owned care homes (including Oak Meadow intermediate care unit).

3.4 Domiciliary care is commissioned by one lead provider who is working closely with the council to transform provision utilising a Reablement first model. They have a sub contractual arrangement with two other local agencies.

3.5 Direct Payment offers choice of provision with a register of over 30 other organisations experienced in providing a range of services.

3.7 The Care Quality Commission (CQC) is responsible for the registration, inspection and assessment of all registered providers. However, the Care Act 2014 places the duty of securing the quality of care in Halton on the council itself.

3.8 The CQC assessment process enables all registered care providers to be classified into one of four categories following an appraisal which asks 5 key questions:

- Is the service safe?
- Is the service effective?
- Is the service caring?
- Is the service responsive?
- Is the service well led?

3.9 The four award categories are:

- Inadequate
- Requires improvement
- Good
- Outstanding

3.10 The results of all CQC inspections are published online, including the rating awarded. CQC undertake inspections at the following frequencies subject to ongoing assessment of risk;

- Services rated as good or outstanding within 30 months
- Services rated as requires improvement within 12 months
- Services rated as inadequate within 6 months
- Newly registered services 6 – 12 months from registration

NW ADASS now publish a series of dashboards which summarises the CQC quality ratings for Care Homes and Community providers of Adult Social Care in the North West and can be found at Appendix 1. It allows a comparison across the region and highlights key themes and trends in respect of Halton.

In Halton the residential homes perform better than the larger nursing homes.

Halton performs above the regional average for care homes in the categories of caring, effective and safe

In October there was one home in Halton which was identified as inadequate overall. This home has now been regraded by CQC as good across all areas.

3.11 The Quality Assurance Team gathers intelligence and information on Providers via quality and contract performance monitoring; this includes “soft intelligence” from key stakeholders and review of the latest CQC report. This information is then used during regular monitoring visits which are announced and unannounced.

3.12 The team also operate an early warning system, which includes; Provider self-assessment, Quality Dashboard, Provider Feedback analysis and Electronic Care Monitoring (Domiciliary Care).

- Services rated as good receive a minimum of two announced and one unannounced visit
- Services rates as adequate receive a minimum of three announced and one unannounced visit
- Services rated as inadequate receive a minimum of four visits and a programme of proportionate and planned support from a range of professionals who meet regularly.

### 3.13 CARE HOMES

For Quarter 2 the Quality Assurance Team and CQC care home ratings are;

HBC Rating 18/19 Q2		CQC Rating 18/19 Q2	
Green	21	Good	20
Amber	2	Requires Improvement	2
Red	2	Inadequate	1
Not Yet Rated	0	Not Yet Visited	2

3.10 Two Providers have not yet been rated as there has been a change of their registration. Some common themes across care homes have been identified as:

- Poor leadership and governance
- Recruitment and retention
- Low staffing levels and staff culture
- Medication management
- Reporting notifiable incidents

### 3.11 DOMICILIARY CARE

For Quarter 2 the Quality Assurance Team and CQC domiciliary care provider rating is;

HBC Rating 18/19 Q2		CQC Rating 18/19 Q2	
Green	0	Good	0
Amber	0	Requires Improvement	0
Red	0	Inadequate	0
Not Yet Rated	1	Not Yet Visited	1

The Council currently have 1 lead provider who covers Runcorn and Widnes and they sub-contract to 2 providers who also cover Runcorn. These agencies provide approximately 520 people with commissioned packages of care.

For Quarter 2, the Quality Assurance Team has been working with the provider on the development of a range of performance metrics which inform the monthly contract monitoring meeting. In addition quarterly 'in depth' monitoring of the lead provider will be undertaken from Q3. This will also be undertaken on sub-contractors bi-annually

The provider registered a new office within the borough in February 2018 and CQC have not yet rated the provider.

3.12 Some common pressures across the domiciliary care sector:

- Recruitment and retention/rota management – a workforce strategy is in development with Skills for Care

- Medication management – HCCG are leading on a project to improve systems and quality of medication management.

#### 4.0 **POLICY IMPLICATIONS**

4.1 None identified

#### 5.0 **OTHER/FINANCIAL IMPLICATIONS**

5.1 None identified

#### 6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

##### 6.1 **Children & Young People in Halton**

Halton's Safeguarding Adults Board (HSAB) membership includes a Manager from Children and Enterprise Directorate, as a link to the Local Safeguarding Children Board. Halton Safeguarding Children Board membership includes adult social care representation. Joint protocols exist between Council services for adults and children.

The HSAB chair and sub group chairs ensure a strong interface between, for example, Safeguarding Adults, Safeguarding Children, Domestic Abuse, Hate Crime, Community Safety, Personalisation, Mental Capacity & Deprivation of Liberty Safeguards.

##### 6.2 **Employment, Learning & Skills in Halton**

None identified

##### 6.3 **A Healthy Halton**

The safeguarding of adults whose circumstances make them vulnerable to abuse is fundamental to their health and wellbeing. People are likely to be more vulnerable when they experience ill health.

##### 6.4 **A Safer Halton**

None identified

##### 6.5 **Halton's Urban Renewal**

None identified

#### 7.0 **RISK ANALYSIS**

7.1 Failure to consider and address the statutory duty of the Local Authority could expose individuals to abuse and the Council as the Statutory Body vulnerable to complaint, criticism and potential litigation.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 It is essential that the Council addresses issues of equality, in particular those regarding age, disability, gender, sexuality, race, culture and religious belief, when considering its safeguarding policies and plans. Policies and procedures relating to safeguarding adults are impact assessed with regard to equality.

**9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

None under the meaning of the Act.