

**Health and Adult Social Care Select Committee
28 November 2017**

Quality in Care Homes

Author: Jane Bowie



National context

- A report released by charity Independent Age “Independent Age Care Home Performance Across England” March 2017 raised concerns about the quality of care homes in England using data from regulator the Care Quality Commission (CQC)
- Whilst not the worst performing area, the south east region was reported to have 28.2% of care homes rated as “Inadequate” or “Requires Improvement” - best performing area was London at 20.3%, worst performing area (north-west) at 33.6%
- In south east region, Buckinghamshire was reported having 31% of care homes rated ‘Inadequate’ or ‘Requires Improvement’, ranked 14 out of 19 Councils - Wokingham was ranked first (6.3%) and Portsmouth as last (44.8%)
- In April 2017 the Local Government Association responded to this report by noting CQC’s most recent State of Care report found more than 70% of social care services are rated good or outstanding and only 2% as inadequate.



National context

- The CQC published their report “The state of adult social care services 2014 – 2017” in July 2017. Underpinning the CQC’s approach to inspecting care services is the “Mum Test” - this asks the question “is this service good enough for a member of my family?”
- Co-production and public engagement led to the development of this inspection regime in October 2014. It adopts five lines of enquiry and rates CQC registered services on each of these areas:
 - Is it safe?
 - Is it effective?
 - Is it caring?
 - Is it well led?
 - Is it responsive to people’s needs?
- Each registered service is given an overall rating:
 - ‘Inadequate’ – the service is performing badly and CQC has taken action against the person or organisation that runs it
 - ‘Requires improvement’ – the service isn’t performing as well as it should and the CQC has told the service how it must improve
 - ‘Good’ – the service is performing well and meets the CQC expectations
 - ‘Outstanding’ – the service is performing exceptionally well



National context

- This most recent CQC report based on 33,000 inspections of 24,000 locations up to May 2017.
- Accommodation and care is provided in over 16,000 locations to more than 460,000 individuals, and more than 500,000 receive personal care in the community.
- Nationally the breakdown across the four CQC ratings was:

Outstanding	353	2%
Good	16,351	77%
Requires Improvement	4,073	19%
Inadequate	343	2%

- In the south east region 3869 services have been inspected. 76% have been rated as 'Good' and 3% rated as 'Outstanding'. (May 2017 CQC source data). Across the south east area 83% of domiciliary care agencies were rated as 'Good' or 'Outstanding', along with 80% of residential care homes and 69% of nursing care homes.



National context

- CQC's has indicated a trend nationally that smaller care homes are more likely to be rated better than larger homes. Nationally 89% of smaller homes were rated as 'Good' or 'Outstanding' compared with 65% of nursing care homes and 72% of residential care homes.
- LGA responded to Independent Age publication by saying:
"This report looks at all care homes, and although councils commission a significant proportion of places in care homes, nationally more than 40 per cent of places in care homes are purchased by individuals not councils, and not all care homes have contracts with councils.

Whilst councils play an important role in supporting providers to operate effectively, (through robust contract management, fee structures and support and training), it is the way in which services are run by providers that is the most critical factor in ensuring a high quality of care."



Local context

There are 134 care homes for all care groups (source: Business Intelligence & Insight report - September 2017) and the table below shows the overall ratings for all care homes in Buckinghamshire. There are 2% rated 'Outstanding', 95 care homes rated as 'Good' (71%) and 34 care homes rated as 'Requires Improvement' (25%).

Overall Rating	Outstanding	Good	Requires improvement	Inadequate	Not yet inspected
No of care homes	3	95	34	1	1
%	2%	71%	25%	1%	1%



Local context: Quality in relation to size of care homes

Whilst nationally the trend is that smaller care homes are more likely to be rated better, in Buckinghamshire homes with between 21–30 and 31-40 beds have the largest number of ‘good’ ratings for their category (2 “outstanding” have between 51-80 beds; 1 “outstanding” has over 80; 1 “inadequate” is 21-30 and are included in those numbers)

No of beds category	No of homes rated as Good	No of homes rated as Requires Improvement	Total no of homes
20 and under	42	16	58
21 -30	12	3	15
31 - 40	14	1	15
41 - 50	6	4	10
51 - 80	17	8	25
Over 80	7	3	10



Local context: The Buckinghamshire Position

- The local performance (using CQC data of September 2017) suggests a different picture from that portrayed by the Independent Age report.
- Current data, as in previous table, shows Buckinghamshire as having 25% of its care homes rated 'Requires Improvement'. To aggregate that with those homes rated as 'Inadequate' would bring it to 26% altogether. The way the data is reported means it includes care homes which have closed during the period and in one instance this includes a care home which was rated as inadequate although this is no longer in operation
- With reference to the LGA comment, 65% of older people care homes beds in Buckinghamshire are purchased by self-funders and just over 5% by health.



What happens when concerns are raised?

- If concerns are raised about a provider, in the first instance our contracts team would recommend the provider investigates, whilst the contract manager oversees the outcome
 - If the complainant wishes us to investigate or is not satisfied with the outcome of the provider's investigation, then our contracts team would investigate through the Council's statutory process
 - We work closely with safeguarding colleagues, other commissioners and the regulator the Care Quality Commission (CQC) to share information and concerns about providers – we have a routine meeting in place to exchange intelligence
 - If a provider received an “inadequate” rating from CQC we would suspend making any new referrals to them and advise other LAs and partners
 - We would check and review existing service users to ensure they are safe and continue oversight of them whilst concerns remain
 - Any provider receiving either “requires improvement” or “inadequate” from CQC would have an agreed recovery plan with our contracts team and with CQC and we monitor their progress against actions during our schedule of visits including unannounced visits.
 - We would refer to QICT (next slide) for specialist support training and organisational development
- 

Supporting quality in care homes in Bucks

- The Quality in Care Team (QiCT) is a **multidisciplinary team** involving professional nurses, pharmacists, therapy specialists and social workers, **which** addresses generic care issues and specific areas of concern within domiciliary care services, care homes, supported living and day services.
 - The QiCT is funded through our Better Care Fund programme of work
 - QiCT has developed a **framework for policy development** for medicines management as a result of concerns about the quality of policy documentation. They provide access to guidance documents and on-site support.
 - QiCT has been actively addressing **record keeping and effective communications** as an area highlighted by contract monitoring visits. Failure to appropriately report incidents is one of the areas for CQC inspection failure, and QiCT has been working with providers to support transitioning of safeguarding guidance into practice.
 - QiCT provides expert **clinical training** covering a number of areas including stoma and catheter care and risks around urinary tract infections through study days and workshops. The team jointly works with CCG colleagues to improve safety and proactively distributes safety information to all Buckinghamshire providers, including all patient safety alerts.
- 

Challenges

- Ongoing debate nationally regarding substantive funding for social care and sustainability of independent sector provider market
- Maximise opportunities to work effectively with health commissioners and providers
- Develop the local authority role to support self-funders to use the market effectively
- Ongoing proactive management of care home rates is required whilst sustaining a focus on improving quality, access to capacity especially given pressures on hospital beds and winter approaching
- Need to work effectively with CQC and other national bodies to ensure accurate representation of local position

The effective operation of care homes is key to the effective operation of the health and social care system in Buckinghamshire including:

- Contributing to minimising delayed transfers of care
 - Reducing unnecessary hospital admissions through reducing avoidable hospital admissions from care homes
 - Supporting self funder to obtain value for money and the right care in the right place and making their money go as far as possible
- 

Current Focus of Work

- Within the Better care Fund programme of work, an evaluation of the impact and effectiveness of the activity of the Quality in Care Team is underway and further develop Quality in Care Team with CCGs – to report in April 2018
- We want to develop a greater understanding of the factors such as geography including rural or urban location, care home type/ client group being served, that may have a significant impact on quality and further analysis is required to understand this and develop an appropriate response
- Improve partnership working with care home providers - OP care home forum now established; adult care home forum set up by December 2017 and convened quarterly
- Working jointly with health particularly community health services as part of the Accountable Care System (ACS)

