Adult Social Care and Health Select Committee

A meeting of Adult Social Care and Health Select Committee was held on Tuesday, 8th October, 2019.

Present: Cllr Clare Gamble(Sub Chair), Cllr Paul Weston (Sub Vice Chair), Cllr Kevin Faulks, Cllr Lynn Hall, Cllr Mohammed Javed, Cllr Luke Frost (Sub for Cllr Tina Large), Cllr Bill Woodhead MBE

Officers: Emma Champley, Angela Connor (AST), Martin Skipsey (SP&G), Rob Papworth (SD), Judy Trainer, Peter Mennear, Marianne Sleeman (MD)

Also in attendance: Peter Smith, Geoff Newton, Jill Edmenson (Healthwatch), Debbie Howe, Christine Warton (CQC)

Apologies: Cllr Evaline Cunningham, Cllr Tina Large, Cllr Jacky Bright

ASH 24/19 Evacuation Procedure

The Chair welcomed everyone to the meeting and the evacuation procedure was noted.

ASH 25/19 Declarations of Interest

Cllr Luke Frost declared a general personal non prejudicial interest as he was a member of the Health and Wellbeing Board

Cllr Hall declared a general personal non prejudicial interest as she was a member of the Health and Wellbeing Board

ASH 26/19 Scrutiny Review of Care Homes for Older People

Members received information as part of the Scrutiny Review of Care Homes for Older People from Christine Wharton and Debbie Howe (Care Quality Commission) and Geoff Newton, Peter Smith and Jill Edmenson (Healthwatch).

The presentation from the Care Quality Commission included:

- CQC purpose and role
- The “Mum” Test
- What the overall ratings meant
- Why a service is placed in special measures
- Improvements including shorter report and a new factual accuracy process
- Returning to Good and Outstanding services
- Themes from Well Led and Outstanding providers
- Stockton’s ratings by service type

The main issues discussed during the presentation and in response to the Committee’s questions were as follows:

- Members were informed there were eight inspectors working across Stockton, Middlesbrough and Redcar and Cleveland. However, the team worked collaboratively with other areas to ensure consistency and share best

practice

- Inspectors began their inspection by looking at the MUM test – “Is the care good enough for your Mum or Dad?”

- If a Care Home was rated ‘requires improvement’, meetings would take place and an Action Plan would be put in place. If a Care Home was rated ‘inadequate’ action would be taken against the provider

- Changes had been made recently which included:
  - Shorter reports
  - Feedback directly after site visits
  - One style of reporting
  - A new factual accuracy process
  - Managers to sign feedback sheet to confirm understanding

- Inspectors were taking a new approach to Care Homes rated ‘good’ or ‘outstanding’, which focused on observation

- End of life care was personalised to the individual patient and family

- Newly registered care homes would not be inspected by the CQC for 12 months, and were therefore classed as ‘not yet rated’. However, an initial inspection took place on registration

- Inspections are carried out as follows:
  - Newly registered – within 12 months
  - Rated inadequate – 6 monthly
  - Rated requires improvement – yearly
  - Rated good – 2 yearly

- Individual complaints were not investigated unless a regulation was breached and, in that case, a focussed inspection would be carried out

- The CQC worked closely with the Local Authority to decide a targeted approach to inspections

- Inspectors liaised with Healthwatch and anybody who might have information regarding the specific Care Home prior to any inspection and always speak to residents and families. Where a care home was good or outstanding 80% of the inspection was based on observation as there was already prior assurance in relation to records

- Inspection duration varies depending on the type of care home under inspection

- Members expressed concern in particular around nursing home ratings

- Discussions took place around residents with dementia who had no family to speak on their behalf and it was recognised that observation played an important role in these cases

- Training for leadership teams should be reviewed regularly for example in

relation to medicines and safety

The presentation from Healthwatch included an explanation of the role of Healthwatch and the purpose and methodology of the study “What is it like to live in a care home for older people in Stockton on Tees?”

In order to gather information, Healthwatch had used their Enter and View powers to seek the views of residents, relatives, friends of residents and staff. Healthwatch had invited the 34 Care Home providers to participate and Enter and View visits had taken place in 28 care homes. Unlike the CQC, Healthwatch did not have the power to inspect records.

Generally there were high levels of satisfaction with regard to the quality of care being provided. However, there were a number of areas requiring attention and the report contained 14 recommendations which were outlined for the Committee.

The Scrutiny Officer advised that a link to the full Healthwatch report had been sent to all Members of the Select Committee prior the meeting; no private briefings had taken place in relation to the report.

The main issues discussed during the presentation and in response to the Committee’s questions were as follows:

- Of the 30 services visited, over 50% had changed care home manager in the previous 12 months

- A lack of time was highlighted and in many of the services visited staffing levels were often only at the minimum level to meet the resident’s assessed needs

- It was often difficult for care home staff to be released for training

- Not all care homes had a good selection of organised activities and personalised activities were not always offered

- The number of patients with Dementia and challenging behaviours were increasing and this could have an adverse effect on other residents. The care home environment was not always beneficial for dementia patients and, in particular, lack of access to outside space in some homes

- A requirement could be included in contracts for care home to comply with the Guide for Care Homes in relation to dementia friendly advice and support

- Regulation could create a burden particularly for smaller homes. IT could be used to reduce this burden

- The Local Authority ran the ‘Well Led Programme’ and the Council works with people to become dementia friendly (which included dementia training). As a result of the Well Led Programme a peer group of managers had been established. The Well Led Programme had been focused on care homes in the first instance but would be extended to other providers in future such as Home

Care

- Healthwatch were only a small team of staff and relied heavily on volunteers.

- Any complaints received to Healthwatch would be referred to an advocate for support i.e. Stockton District Independent Advice Service, CAB

- Healthwatch provided a voice for those residents without relatives

- Discussions took place around the issue of pay for Care Home staff and the link with high turnover. Concerns were expressed around staff retention and what could be done to reverse the trend

AGREED: that the information be noted.

ASH 27/19 **Care at Home Update**

Members received information regarding the Care Home Update from Martin Skipsey, Strategic Procurement & Governance Manager which included:

- Prior to the current framework agreement Stockton Borough was split into two geographical areas, North and South. Problems included over reliance became on 2 providers.

- Five Lamp pilot scheme commenced in response to encourage new voluntary sector providers in the local market.

- A new framework approach was put in place with three types of provision sought. The majority of provision is in the Standard framework and this is split into a number of geographical zones:
  - Care at home – Learning Disability Enhanced awarded 2017
  - Care at home – Complex awarded 2017
  - Care at home – Standard awarded 2018

- Challenges faced included:
  - a complex mobilisation including multiple TUPE transfers, branch and management changes.
  - Recruitment of new staff proved problematic.
  - Providers struggled to accept new referrals.

- Daily monitoring was introduced and intensive management was required in relation to CRG. Following a contract management process, ultimately CRG agreed to hand back their contracts and were no longer providing care at home in the Borough. It was felt the process had been handled well.

- The situation had now settled down and providers were working well. Stockton Borough Council will continue to work with providers to improve quality including using the PAMMS system.

- All future tenders would include greater focus on mobilisation and management of TUPE staff transfer.

Main issues discussed in response to the Committee's questions were as follows:

- Discussion took place around consideration given to 'in-house' bid instead of contracting the work to providers. Members were informed the Local Authority did not have the skills at present to deliver what was required and there would be a cost implication.

- Clarification was sought around Care Home staff paying for their own uniforms. Members were assured all staff should be provided with uniforms as this was written in their contracts.

- Managers would roster staff within certain areas to reduce travel time and costs, but pay provision for travel time was built into the contracts. If the Local Authority had evidence that Care Home staff were travelling between calls and not being paid this would be taken up with providers.

- Discussion took place regarding Care Homes who have recently been brought into the new framework and have not been PAMMS assessed

AGREED:

1) The information be noted

2) Updates on the results of the PAMMS process be reported to future Committee meetings

ASH 28/19 Regional Health Scrutiny Update

Consideration was given to the Regional Health Scrutiny Update

AGREED:

The Regional Health Scrutiny Update be noted.

ASH 29/19 Minutes of the Health and Wellbeing Board

Consideration was given to the minutes of the Health and Wellbeing Board.

AGREED

That the minutes from the Health and Wellbeing Board be noted.

ASH 30/19 Select Committee Work Programme

Consideration was given to the Adult Social Care and Health Select Committee Work Programme 2019 - 2020.

AGREED:

The Adult Social Care and Health Select Committee Work Programme be noted.

ASH 31/19 Chairs Update

There was nothing further to update.