



TO: Health and Social Care Overview & Scrutiny Committee

FROM: Care Homes Task & Finish Group

DATE: 5th February 2024

PORTFOLIOS AFFECTED: All

WARDS AFFECTED: All

TITLE OF REPORT: Scrutiny of Care Homes in the Borough

1. PURPOSE

The purpose of this report is to provide feedback from the visits of the Task and Finish Group to three Care Homes in the Borough, and to request that the Committee consider any potential recommendations.

2. BACKGROUND

Members will recall that one of the chosen Work Programme items for 2023/34 was Scrutiny of Care Homes in the Borough, and a Task and Finish Group was set up, with the membership being Councillors Jacque Slater, Tony Humphrys and Anthony Shaw.

Council officers helped facilitate and arrange the visits and helped select three care homes that were all different in order that Members could see the different types of care offers available in the Borough.

This report summarises the findings of the Task and Finish Group.

3. THE VISITS

The Task and Finish Group visited the following homes in Autumn 2023:

- Thorncliffe
- Eachstep
- Moorland View

Thorncliffe Residential Home – a smaller 28 bed home set in an older converted building. The home is CQC rated good.

Eachstep Nursing and Dementia home – a 64 bed home with provision for nursing and dementia. The building itself is relatively new and set out over several floors to facilitate care for specific client groups. We have been working with the team there over the last few months following a number of different quality issues. They are currently CQC rated 'RI' but have made significant progress and shown improvement under our Quality Assurance scheme action plans.

Moorland View - a 32 bed home providing residential care. It is located in Darwen and is a late Victorian building sitting in one acre of woodland. This home has been supported by the Quality Assurance team in the earlier part of this year with some recommendations for improvement which has seen them move from RI to Good following a nomination made to CQC to inspect this service in March 2023.

4. FINDINGS

The care homes selected provided a good overview of the diverse range of care home provision and quality status within the Borough. The feedback from the Task and Finish Group is detailed below, with a response from Quality, Commissioning and Finance provided to each issue raised.

Thornccliffe

The main concern was the size of the kitchen being very small making it difficult for meals to be prepared properly. It was noted that the owner was proposing extending the home and this would put further pressure on the kitchen. The group would therefore like to know what, if anything, the Council is doing/can do to ensure the kitchen is of adequate size, particularly if the home is extended.

QA/Commissioning Response:

The owner of Thornccliffe advised at the visit that the kitchen is being extended to prepare for the additional residents once the home extension is complete. We understand there is an adjoining wall to the existing kitchen and this wall is to be knocked through, in order to make it one larger space.

The existing kitchen is sufficient in size to meet the needs of the current numbers of residents that live at Thornccliffe.

At a recent follow up visit BwDs Quality and Engagement lead has been shown the space where the planned extension will be and viewed the plans themselves. The kitchen will increase in size by over 50% to account for the planned increase in residents once the home extension is built. The plan is for the works to start on the kitchen in the next couple of months and is expected to take around 3 months to complete. The plan is that the new kitchen space will be fully operational for around 6 months before the work on the extension is complete, so it will be in place well ahead of any increase in resident population.

As a general guide, the kitchen facilities are assessed as part of our QAS Framework to ensure they are fit for purpose and can meet the needs of the residents, including checking that they have a good hygiene rating.

EachStep

The group were impressed by the manager and in particular the manager's open door policy. The group would like to know if there is anything the Council can do to encourage other homes to adopt such a policy.

QA Commissioning Response:

An open door policy is evident in almost all of our homes. This is an area we assess as part of our QAS Framework, quality visits and discussions with staff in the home. The talking points for staff conversations taken from the QAS are listed below including those that would link with having a good relationship with management..

- *How they feel about morale*
- *Do they feel management is approachable*
- *How they feel about their training and development, do they feel they have the knowledge and skills to do their job*
- *Do they feel listened to and valued and how - examples are requested*
- *How they feel about how their wellbeing and Mental Health are supported*
- *How they feel about their workload, do they have enough time with residents*
- *Are they proud to work for their provider, would they recommend their provider?*
- *Knowledge check about key issues? IPC, Safeguarding, understanding of what person-centred means.*
- *How they feel about the quality of care*

*Where feedback from these conversations reflects that an open door policy is **not** the case, managers of the home would be given recommendations to address this as part of their QAS action plan. Additionally, the monthly care sector bulletin, our QA team relationships and the provider forums are all platforms of support that are available to managers where they can access guidance to support them to develop a positive culture in their service.*

One of the residents at EachStep did raise a concern about falling and the group would like assurance that any issues with residents falling at EachStep have been looked into and addressed as needed.

QA/Commissioning Response:

The issue of high number of falls at Each Step had been discussed (prior to the OSC councillor visit) at the monthly combined quality meeting (CQM). The information on falls was highlighted and raised in the quality meeting by Alex Mellor (Care Home Nurse) whom the councillors met during their visit to Each Step. It was discussed at length on the CQM and it was established that Each Step had appropriate risk management plans in place for all residents in relation to their mobility and where required, had equipment in place to minimise the risk of falls, such as mobility aids, sensor mats and appropriate staffing levels to support individual resident needs.

Referrals had been raised where necessary in line with expectation and Each Step were reporting all falls as expected and had escalated and reached out for further input from professionals. Each Step are meeting all expectations in managing falls in the home. Whilst there was a general feeling of concern regarding the higher number of falls which the Care Home Nurse raised with OSC Councillors, there had been no observation of any practice or any information that was of specific concern and the home were escalating issues via appropriate channels.

Following on from discussions at CQM, the FALLS service attended the most recent Provider forum to demonstrate falls equipment and promote the service offer to care homes.

Moorland

The main concern arising from this was the owners concerns about finances following rises in energy costs. The group would like to know what advice and support the Council has provided in relation to this issue.

QA/Commissioning & Finance Response

Following the visit to Moorland the Director was contacted by myself as Head of Service and provided with the opportunity to work in collaboration with the Adults Finance team to resolve a number of issues with finances at the home. This included the provision of advice and support and the ASC Finance team have worked together with the home and resident families to support the recovery of a substantial amount of outstanding debt for the home.

BwD operate payment systems based on NET payment for provider fees. The client contribution for care is assessed by BwD Finance and the value of contribution is netted off the Gross Provider fee, and the provider is required to collect that contribution from individual/family. Finance support with this process is available to all homes at any time. Additionally there is provision within the Residential and Nursing Care Home contract for homes to identify any issues with non-payment of client contribution after a period of 4 weeks and terms which detail the payment of care fees by LA's when providers are unable to recover the contribution.

In terms of the escalating costs and general pressures on care home finances, all providers are able to raise issues and request support directly via the ASC Finance team, provider forums or directly with Service lead/Head of service for this area. Each year the department undertake a review of the provider fees as part of the Council's budget process and this is undertaken in consultation with providers.

The other concern from Moorland was that space was limited with some residents sat in chairs in corridors and some only having access to shared bathrooms. The group would like to know what, if any, standards we expect around space in homes and shared bathrooms.

QA/Commissioning response:

The environment within each home is assessed as part of the QAS Framework and feedback is also sought directly from residents and their families. It is not a requirement for all rooms to have an individual full en-suite bathroom, however all rooms at

Moorland View have their own sink and a number of rooms also have their own toilet. It is predominantly the older wing of the home where the bathrooms are shared.

Shower and bath facilities tend to be in shared bathrooms for many care homes and this is a standard facility particularly in an older building. However there needs to be sufficient number of bathrooms available for the resident population in each home, which again would be addressed in the QAS.

There was also a couple of general issues that came up from multiple owners. The first was around staffing recruitment issues and problems caused by using too much agency staffing. The group would like to know whether we track how much agency staff are being used at different homes.

QA/Commissioning response:

Whilst we do not track agency usage specifically, as it is not reportable data for providers, staffing structure and ratios are assessed as part of the QAS Framework.

Agency usage does not necessarily mean there is cause for concern. If managed robustly and effectively, it can be a good solution to staffing level issues. If identified during a QAS, high agency usage would be an area discussed in more detail to ensure that homes are taking active measures to reduce the agency usage and/or safely manage their current usage. These measures would include but is not limited to:

- *robust induction for agency staff*
- *consistency/using the same agency*
- *requesting the same staff from an agency to ensure familiarity with residents*
- *maintaining positive relationships with the agency to effectively manage any issues*
- *managing the cost implications associated with agency usage etc.*

In response to the feedback around recruitment challenges during the visit to Moorland View, the QA team arranged for Matthew Errington from Skills for Care to present at the provider forum to support providers with their recruitment. This was very well received by providers and provided some useful tools and tips in support of providers.

Providers are regularly signposted to guidance and resources relating to recruitment in the bulletin and providers are also invited to webinars and events regarding recruitment and retention issues, for example - international recruitment run by Skills for Care.

The second was difficulty in accessing dentists for residents and the group wanted to know if there is anything we can do to help address this.

QA/Commissioning Response:

This is a national issue and one that is on the agenda of Health colleagues supporting the Care Sector. The April Care Sector bulletin included an Oral Health feature which included a training offer and the Mouth Care Toolkit. The feature contained sample policies and assessment and care plan templates for a care providing organisation to

use. It also provided links to online training resources. The guide provides information on how to access dental care for clients and clarifies issues around access, payment and transport.

The QA team have also confirmed attendance at the next Provider Forum in January from Gillian Kelly (PH development manager) and Nicky Thompson (Smart Dental Academy - trainer) to present on the oral health training offer for our care homes that they can now deliver in the homes.

The Task and Finish Group would like to thank all the staff and residents it met for their feedback and assistance, and also would like to thank the Council officers involved in setting up the visits, providing information and in helping us prepare this report.

5. NEXT STEPS

The Committee are asked to consider the findings of the Task and Finish Group and consider any recommendations it may wish to make.

Report Version: 1.0

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