

APPENDIX 1

Progress Update – Review of Care Homes for Older People

SCRUTINY MONITORING – PROGRESS UPDATE	
Review:	Care Homes for Older People
Link Officer/s:	Emma Champley
Action Plan Agreed:	July 2020

Updates on the progress of actions in relation to agreed recommendations from previous scrutiny reviews are required approximately 12 months after the relevant Select Committee has agreed the Action Plan. Progress updates must be detailed, evidencing what has taken place regarding each recommendation – a grade assessing progress should then be given (see end of document for grading explanation). Any evidence on the impact of the actions undertaken should also be recorded for each recommendation.

Recommendation 1:	That recognising the importance of the strong leadership and management and the positive impact of the Well Led Programme, further activity should focus on continuing to improve leadership and management of all care homes in Stockton on Tees and specifically that all care homes be supported to participate in the Well Led Programme and actively participate in the Care Home Leadership and Peer Support Network.
Responsibility:	Rob Papworth / Emma Champley
Date:	March 2021
Agreed Action:	<ol style="list-style-type: none"> 1) Complete the evaluation of the 2 Well led Programmes in 2019 and review the evidence. 2) Review the programme with NELA to develop an improved offer of “Well Led” development. 3) Agree funding (between SBC and NHS North East leadership Academy) and deploy a 2020 programme to cover both managers and aspiring managers in older people Care homes and specialist MH/LD Care homes. 4) Plan and design a programme for home care to deploy in 2021.
Agreed Success Measure:	<ul style="list-style-type: none"> • Number of care home managers who complete the programme. • Post course evaluation. • Changes in PAMMS assessment and CQC assessment results that link back to Well Led.
Evidence of Progress (May 2021):	<ol style="list-style-type: none"> 1) The formal evaluation of cohorts 1 and 2 of the Well Led programme was completed in March 2020. Overall, the programme has been very well received and several outcomes have been realised, notably the improvement in CQC ratings for 6 Care Homes (one has been rated as Outstanding in all categories; another rated as Good in the Well Led

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	<p>category). Participants have reported an improvement in their confidence to lead their service and that they are using many of the leadership tools introduced. Programme facilitation was highly rated, and participants particularly valued the interactive nature of the programme and connecting with other participants</p> <p>2) Further discussions with NHS North East and Yorkshire Leadership Academy (NELA) in the summer of 2020 based on the experience of cohorts 1 and 2 allowed the Council to develop the format for the “Well Led” programme. This included using element of Myers Briggs to inform Managers on how they perceive the world and make decisions and amending the delivery of the action learning sets to support remote learning.</p> <p>3) Funding was agreed in the summer of 2020 and a third cohort delivered in 2020/21. 16 managers went through the cohort.</p> <p>4) Home care providers were consulted in 2020 and were brought into the third cohort. 6 home care managers went through the programme.</p>
<p>Assessment of Progress (May 2021): (include explanation if required)</p>	<p>1 (Fully Achieved)</p>
<p>Evidence of Impact (May 2021):</p>	<p>The third cohort was a more challenging group to the 2 cohorts in 2019 because it included home care providers and it had to be delivered remotely. Even acknowledging this, however, feedback from participants was outstanding: with the personal stories presented at the evaluation session on 02 March highlighting how the programme had changed the way managers think, engage and communicate.</p> <p>Furthermore, the reputation of the Stockton Council Well Led programme continues to be acknowledged nationally. Council officers will deliver presentation to the ADASS Spring conference of the Well Led Programme and Leadership Peer Support Group</p> <p>Due to the pandemic, there has been a moratorium on CQC and PAMMs assessments over the past 12 months so evidence of impact on ratings is unavailable at this time.</p>

<p>Recommendation 2:</p>	<p>That the importance of personalised care be promoted through all contacts the Council and partners have with Care Homes; in particular the development and deployment of a varied activities programme tailored to individual needs and co-ordinated by a designated member of staff.</p>
<p>Responsibility:</p>	<p>Yvonne Cheung / Julie Nisbet / Lisa Cummings</p>
<p>Date:</p>	<p>March 2021</p>

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Agreed Action:	<p>5) Implement “Henpower” project across identified care homes and evaluate impact with a view to next steps across the entire market.</p> <p>6) Work with Leisure Services Team to build on the Funky Feet programme across the care home network.</p> <p>7) Re launch the SID with an accurate and comprehensive database of community activities on offer to all homes.</p> <p>8) Grow the Activity Coordinator network and links with Tees Active and other partners to share good practice and expertise.</p> <p>9) Work with stakeholders to develop and share models of care, support and activities which ensure safe social distancing and meet guidelines for Covid-19.</p>
Agreed Success Measure:	<ul style="list-style-type: none"> • Evaluation of Henpower project. • Number of hits on SID post launch and feedback from providers / users as to its benefits. • Provider feedback on activity Network. • PAMMs and CQC Assessment evidence.
Evidence of Progress (May 2021):	<p>5) HenPower Project started at Mandale House Care Home in 2019 and achieved positive outcomes. It was featured in BBC News and the Alzheimer’s Society website.</p> <p>Roseworth Lodge Care Home and Aspen Gardens Extra Care Sheltered Housing Scheme have signed up, although progress has been postponed due to COVID (both subscriptions have been extended until 2022 to allow them to continue to participate (with continued support from the Council).</p> <p>6) The Funky Feet coordinator met managers at Leadership & Peer Support networks and the Provider Forum which gave care home staff the opportunity to speak to the programme coordinator and arrange a session at their individual care home.</p> <p>Several Care Homes have invited the Funky Feet programme into their care homes to interact with residents.</p> <p>At the start of lockdown, the programme continued virtually. Support for activity coordinators in the care homes allowed them to prepare residents for participation from their own rooms, or in communal areas, owing to social distancing guidelines.</p> <p>7) CMT had decided to include the review of SID in the wider website development project. This project has been delayed due to the COVID pandemic and it is anticipated that it will be completed by the end of the year. It is expected that the relaunch will happen in 2022.</p> <p>8) The first Activity Coordinator Network took place in December 2019 and was attended by 15 care home activity coordinators. Following further discussions with managers, the second Activity Coordinator Network was</p>

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	<p>held in March 2020, in which 28 care home activity coordinators were present.</p> <p>As a direct result of these initial meetings, Coordinators shared email addresses and created an informal network where they could share ideas outside of the formal meetings. Ongoing communications and offer of support from Tees Active and other partners offered in the March 2020 meeting, and any subsequent offers of activity / support emailed to coordinators.</p> <p>9) Updated guidance around all aspects of care home activity was coordinated through the Care Home Protection Operational Group (CHPOG) and communicated to the homes via newsletters and standalone emails containing any new or updated national guidelines or local messages. Any questions around conducting various activities in the home was raised through the CHPOG and the responses provided ASAP.</p> <p>Support was given in the early stages of the pandemic around providing iPads and smartphones into the care homes, to allow extra resources for communicating with family, the community or accessing any virtual activities. Any activities that were deemed suitable for residents while still adhering to guidelines, was shared via newsletters or within the Leadership & Peer Support Network.</p> <p>Care homes also shared ideas of activities they had introduced after risk assessments were completed, that were then shared with other care homes in the network.</p>
<p>Assessment of Progress (May 2021): (include explanation if required)</p>	<p>2 (On-Track)</p>
<p>Evidence of Impact (May 2021):</p>	<p>Mandale House has secured £10k from the Big Lottery Fund to further invest into the project as a direct result of the support from HenPower.</p>

<p>Recommendation 3:</p>	<p>That the benefits of technology for supporting personalised care are championed and promoted to all care homes in Stockton on Tees; in particular, the deployment of electronic solutions for records and medicine management should be supported by the Council.</p>
<p>Responsibility:</p>	<p>Catherine Buller / Rob Papworth / Gavin Swankie / Melanie Smiles</p>
<p>Date:</p>	<p>March 2022</p>
<p>Agreed Action:</p>	<p>10) Develop a vision for the digital care home with key partners and stakeholders.</p> <p>11) Work with Stockton Council delivered care services to ensure they embrace the opportunities that digital technology can offer.</p>

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	<p>12) Work with stakeholders to identify and deploy digital solutions in response to the restrictions imposed by Covid-19.</p> <p>13) Establish a specification for digital care planning and medication management which can be used to develop the offer across contracted care home providers.</p>
<p>Agreed Success Measure:</p>	<ul style="list-style-type: none"> • Agreed shared vision of the digital care home in Stockton on Tees. • Implementation of a new digital solution into Rosedale and Lanark which supports our ambition for personalised care. • Production of key documents and guidance to support the commissioned market in making informed decisions on electronic care planning and medication management.
<p>Evidence of Progress (May 2021):</p>	<p>10) The Council has worked collaboratively with Tees CCG to develop a short-term strategy to deliver positive outcomes for residents through the deployment of digital solutions across care homes in Stockton on Tees. A group was established in July 2021 (Stockton digital care homes group) has focussed on implementing:</p> <ul style="list-style-type: none"> • <u>Digital connectivity solutions</u>: NHS Mail and Data Security and Protection Toolkit; • <u>Information sharing</u>: Deployment of capacity Tracker across all homes; and • <u>Medication Management</u>: Introduction of proxy access for Medication. <p>11) Provider engagement sessions were completed in February 2020 to engage with providers on the potential for a digital care home and how this could best be achieved. To support this, several digital solutions have been promoted in the Leadership and Peer support network meetings with providers of electronic solutions (e.g. Person Centred software and Media Base Direct) demonstrating and engaged providers with their products including electronic care planning, e reception and medication management.</p> <p>12) There has been significant work since March with partners and provider stakeholder to maximise the opportunities of digital technology to support service users care throughout the pandemic. These include:</p> <p><u>Professional engagement and communication</u>: The Council introduced the “Hub”, a TEAMS based information sharing and peer support networking platform for care home managers. It includes areas for people to collaborate and includes NHS services, Tees Training Alliance, Oral Health Team, dementia, DOLS and safeguarding. Click to the introductory video is attached for information:</p> <p>GP’s are also beginning to use digital technology for consultations, but this is not yet standardised. There are further opportunities to use the technology for face to face consultations with Acute/Community services and Outpatients to reduce the requirement to transfer people unnecessarily.</p>

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	<p><u>Resident communication:</u> All Home allocated an NHSX iPad to allow residents to talk and see family members. Further, funding was secured for 70 Mobile phones that were given to Care Homes to support connectivity for residents with family and friends, 22 further tablets provided by the Teesside Family Foundation and Catalyst provided Train the trainer support to 5 Care Homes to support residents to access digital technology.</p> <p><u>Health and Care support:</u> All care homes in Stockton on Tees have access to and use the Whizan NEWS solution (National Early Warning score) that allows them to take some clinical reading and log them electronically for health to see and improve diagnosis and health support for residents in care homes. Not only has this continued throughout the pandemic, the number of care homes utilising National Early Warning Score (NEWS) observations has increased significantly, which has helped staff identify a deteriorating person and liaise with health colleagues as required to deliver the best possible care and prevent avoidable hospital admissions.</p> <p>100% of all care homes in Stockton now have a generic NHS email address, that allows them to share information with health of residents directly, and will underpin the deployment of further electronic health solutions including receiving hospital discharge information, proxy ordering of medication and proxy access to primary care clinical notes.</p> <p>13) Although there have been discussions with providers of electronic solutions at the leadership and Peer Support Groups, this has not yet resulted in a specification for what the Council and partners would see as essential criteria for digital solutions for care planning and medication. This will require further work and engagement.</p>
<p>Assessment of Progress (May 2021): (include explanation if required)</p>	<p>2 (On-Track)</p>
<p>Evidence of Impact (May 2021):</p>	<p>With respect to Whizan NEWS solution, we had originally asked care homes to record a NEWS observation once a day for each person to achieve 100% NEWS target for residents. In March 2020 the NEWS score per bed was 57(%) meaning each resident was having observations once every 2 days as opposed to 1. In February 2021 through ongoing support from the Training Alliance and officers in the Council the NEWS score per bed had increased to 255% meaning each resident is having their NEWS score taken 2-3 times per day in care homes.</p>

Recommendation 4:	That contract monitoring and quality assurance systems ensure that appropriate staffing levels are maintained in care homes.
Responsibility:	Kerry Anderson
Date:	January 2022

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Agreed Action:	<p>14) Review the PAMMS assessment from 2019/20 to ensure they provide consistent evidence as to staffing and dependency levels in care homes.</p> <p>15) Implement the 2020/21 programme to cover all care homes and provide input into Adult Social Care and Health Select Committee as scheduled.</p>
Agreed Success Measure:	<ul style="list-style-type: none"> Regular updates to Adult Social Care and Health Select Committee on the PAMMS assessment and CQC ratings which highlights specific feedback on staffing in care homes (see recommendation 9).
Evidence of Progress (May 2021):	<p>14) Unable to complete PAMMS review due to work to support COVID through 20/21. However staffing levels were monitored throughout 20/21 as part of the provider intelligence / risk monitoring RAG support calls and data capture. Satisfied with the staffing ratio.</p> <p>15) Unable to complete PAMMS assessments through 2020 due to COVID. We have a PAMMS assessment timetable to restart Quality Assurance inspections commencing April 21 with a view to PAMMS assess all OP Res homes before April 2022. A risk assessment approach has been adopted to determine priority for rollout of the programme plan.</p>
Assessment of Progress (May 2021): (include explanation if required)	3 (Slipped) / 4 (Not Achieved)
Evidence of Impact (May 2021):	Through the weekly COVID support calls, the Council was able to ensure safe staffing levels were maintained. This will be further assessed during the PAMMS inspections throughout 21/22.

Recommendation 5:	That the Council works with all stakeholders to promote and improve the local standing of careers in adult social care.
Responsibility:	Rob Papworth
Date:	March 2022
Agreed Action:	<p>16) Work with providers through the leadership and peer support group to understand some of the barriers in social care recruitment and retention.</p> <p>17) Identify solutions with colleagues in EGDS, Communications and external partners to address these issues locally.</p>
Agreed Success Measure:	<ul style="list-style-type: none"> Feedback from Social Care providers and other key stakeholders.
Evidence of Progress (May 2021):	<p>16) Through the Leadership and Peer Support Network, providers from our local care homes and care at home services, gave some feedback on their recruitment and retention barriers, and gave some thoughts on how this could be better supported:</p> <p>a. Negative perceptions of care work;</p>

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	<p>b. Low paid; c. Reality of care work different to expectations; d. No career progression or further opportunity; and e. Portal / pathway from colleges or ‘academy’ delivering education and training around health and social care.</p> <p>17) The Council has worked actively across several different groups to support the development of the sector as a positive career choice for people working in care, young people entering the job market and people looking to return to the job market. This includes:</p> <p>a. Working collaboratively with ADASS and other NE Councils as part of the Market Intelligence Task Group (with a focus on workforce development); b. The Council promoted and worked collaboratively with local care providers to maximise the impact of the Governments “<i>Every Day Is Different</i>” recruitment campaign; and c. Partnership working with colleagues in EGDS and ensuring we build on their networks including the work of the Tees Valley Local Enterprise Partnership.</p>
Assessment of Progress (May 2021): (include explanation if required)	2 (On-Track)
Evidence of Impact (May 2021):	

Recommendation 6:	That all care homes be required to work towards Dementia Friendly accreditation as part of the new contract arrangements.
Responsibility:	Yvonne Cheung
Date:	March 2022
Agreed Action:	<p>18) Target group of 5 homes are used to act as pathfinders for implementing the dementia guide and to service as ambassadors for other homes.</p> <p>19) Deliver further Positive Approach to Care (PAC) training to reinforce good practice in the dementias guide.</p>
Agreed Success Measure:	<ul style="list-style-type: none"> • PAC post training evaluation. • Review of impact of dementia guide.
Evidence of Progress (May 2021):	<p>18) Following a launch event in November 2019, 6 care homes showed their interest in working towards dementia friendly. Two care homes completed the guide as a baseline and were planning to make more improvement. Although the project has been suspended due to restrictions and change in priorities caused by the COVID-19 Pandemic, 2 additional care homes have started making their homes more dementia friendly.</p>

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	<p>Alison House have made their physical environment dementia friendly and introduced comprehensive falls management plan. Woodside Grange has also made extensive changes to its physical environment. The Manager stated that the residents really enjoy the activities in various newly decorated rooms and staff are happy that they have been involved in the transformation.</p> <p>19) Planning for a bespoke PAC training programme for care homes (shorter sessions for care staff) before the first lockdown. TEWV (provider) has suspended all face-to-face training in March 2020. The development of a virtual training programme is being trialled in Durham and waiting for approval from TEWV and Teepa Snow (training company). Due to limited staff capacity, TEWV needs to deliver the remaining 2 training sessions for SBC staff before starting the training programme for care homes.</p>
<p>Assessment of Progress (May 2021): (include explanation if required)</p>	<p>3 (Slipped)</p>
<p>Evidence of Impact (May 2021):</p>	<p>Alison House recorded significant reduction in number of falls following changes to the environment and introduction of a falls management plan.</p>

<p>Recommendation 7:</p>	<p>That the Council works with the Care Quality Commission to facilitate effective dialogue between the two organisations in order to share updates of projects and initiatives being developed by the Council and partners and shape the future of the care home market.</p>
<p>Responsibility:</p>	<p>Kerry Anderson / Rob Papworth / Julie Nisbet / Catherine Buller</p>
<p>Date:</p>	<p>March 2022</p>
<p>Agreed Action:</p>	<p>20) Continue to engage with CQC through the multi-agency information sharing meeting and leadership and peer support network.</p> <p>21) Consider the potential impact and opportunity of a strategic conversation with CQC as piloted in Redcar & Cleveland.</p>
<p>Agreed Success Measure:</p>	<ul style="list-style-type: none"> • Meeting minutes. • New meetings arranged.
<p>Evidence of Progress (May 2021):</p>	<p>20) Multi agency meetings have still taken place during the pandemic where possible. When held the exchange of intelligence is valuable and benefits all stakeholders to gain a more holistic view of market performance/ issues and risk. The meetings should become more regular from April 21, and the attendance will be further promoted to encourage stakeholder engagement.</p> <p>21) Contact was made with CQC prior to March 2020 to have a broader strategic discussion, but this was put on hold during the pandemic. As CQC commence their revised inspection programmes we will follow up to revisit this arrangement.</p>

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Assessment of Progress (May 2021): (include explanation if required)	3 (Slipped)
Evidence of Impact (May 2021):	

Recommendation 8:	That Healthwatch be asked to report back the Adult, Social Care and Health Select Committee on the implementation of their recommendations to care homes following further enter and view visits to homes.
Responsibility:	Healthwatch
Date:	March 2022
Agreed Action:	22) Healthwatch programme for 2020/21 to allow for follow up work to take place and a report prepared to feedback to Adults Social Care and Health Select Committee.
Agreed Success Measure:	<ul style="list-style-type: none"> Report presented to an agreed meeting in 2020/21.
Evidence of Progress (May 2021):	22) 2 follow up reports have been completed for Roseville and Hadrian Park Care Home in 2020. However, due to COVID, they have been unable to conduct further enter and views. Healthwatch are currently focusing on raising awareness of good practice to support residents, carers, and their families.
Assessment of Progress (May 2021): (include explanation if required)	3 (Slipped)
Evidence of Impact (May 2021):	

Recommendation 9:	That the summary of Care Quality Commission inspection results, reported each quarter to the Adult Social Care and Health Select Committee should include greater context including trend information of quality ratings and information about providers.
Responsibility:	Kerry Anderson
Date:	April 2021
Agreed Action:	23) Report content to be reviewed in light of additional requirements.

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	24) Updated report presented to Adult Social Care and Health Select Committee.
Agreed Success Measure:	<ul style="list-style-type: none"> Report format agreed at the first meeting of 2020/21.
Evidence of Progress (May 2021):	<p>23) Individual provider reports now reflect further details and context in respect of providers engagement with the LA and specific narrative of CQC findings that support the quality ratings.</p> <p>24) These have been presented throughout 20/21 to ASH committee and will continue to be presented in this format.</p>
Assessment of Progress (May 2021): (include explanation if required)	<p>3 (Slipped)</p> <p>Trend analysis has been problematic as the CQC has also suspended their scheduled routine inspections of providers throughout the 20/21 COVID pandemic. This aspect of the report can be reviewed towards the latter part of 21/22 when CQC assessments recommence, and the impacts of the pandemic can be considered as an potential impact on trends.</p>
Evidence of Impact (May 2021):	

Assessment of Progress Gradings:	1 Fully Achieved	2 On-Track	3 Slipped	4 Not Achieved
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