



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 22 SEPTEMBER 2020
REPORT ON: CARE INSPECTORATE GRADINGS - REGISTERED CARE HOMES FOR ADULTS 2019/2020
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC17-2020

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to summarise for the Performance and Audit Committee the gradings awarded by the Care Inspectorate to Dundee registered care homes for adults in Dundee for the period 1 April 2019 to 31 March 2020.

2.0 RECOMMENDATIONS

It is recommended that the Performance & Audit Committee (PAC):

- 2.1 Note the contents of this report and the gradings awarded as detailed in the attached Performance Report (Appendix 1) and highlighted in section 4.2 below.
- 2.2 Note the range of continuous improvement activities progressed during 2019/2020 as described in section 4.3.

3.0 FINANCIAL IMPLICATIONS

3.1 None

4.0 MAIN TEXT

4.1 Background

- 4.1.1 The Care Inspectorate is responsible for the inspection and regulation of all registered care services in Scotland. The regulatory authority ensures that care service providers meet the Health and Social Care Standards which came into effect in April 2018. The Care Inspectorate use a six-point grading system against which certain key themes are graded. The grades awarded are published in inspection reports and on the Care Inspectorate’s website at www.careinspectorate.com.
- 4.1.2 As of 1 April 2019 there were approximately 1011 residents accommodated in 24 private and voluntary care homes and 88 residents accommodated in four local authority care homes in Dundee. However, on 14 December 2019 the contract for Linlathen Neurodisability Centre between Dundee City Council and Living Ambitions Ltd was terminated reducing the number of private and voluntary care homes to 23.

4.2 Gradings Awarded

- 4.2.1 Within the 28 registered care homes listed in the Performance Report, 30 inspections were undertaken during 2019/20.

4.2.2 Of the 30 inspections undertaken:

- 23 (77%) received grades 4 'good', 5 'very good' or 6 'excellent' in some or all themes
- 13 (43%) received grade 3 'adequate' in some or all themes
- 3 (10%) received grade 2 'weak' in all some of all themes
- 1 (3%) received a grade 1 'unsatisfactory' in any theme.

4.2.3 Linlathen Neurodisability Unit, owned by Living Ambitions Ltd (a subsidiary of the Lifeways Group), had over a period of time experienced difficulties sustaining acceptable grades particularly in relation to management and leadership and environmental issues. Despite staff from the Care Inspectorate and Dundee Health and Social Care Partnership working very closely with the Home's management team during 2019/20 to support improvements, address complaints and investigate incidents and a marked improvement evidenced during this period, the decision was taken by Living Ambitions Ltd to close the care home in December 2019.

4.2.4 Pitkerro Care Centre, owned by Hudson Healthcare Ltd, received a grade 2 'weak' for 'How well do we support people's wellbeing?' following an inspection in August 2019. A cessation on admissions was voluntarily put in place and a series of contract monitoring meetings took place. At the follow up Care Inspection visit in January 2020 the grade improved to a 3 'adequate' and DHSCP officers agreed that there was sufficient evidence of sustained improvement to allow the care home to accept admissions and continue with a planned programme of monitoring meetings.

4.2.5 Rose House, owned by Kennedy Care Group, received a grade 1 'unsatisfactory' for 'How Good is our Setting?' following an inspection in June 2019. Subsequent to this a Large Scale Investigation was progressed; the provider implemented an immediate voluntary cessation on admissions throughout this process and produced a comprehensive action plan outlining the improvements required. A follow up Care Inspection in January 2020 saw grades improve with 'How Good is our Setting?' being awarded grade 3 'adequate'.

4.2.6 Table 1 below shows the overall percentage awarded at grades 1 to 6 and also each key theme in Dundee in 2019/20. A full comparison exercise cannot be completed between this year and last as inspections during 2018/19 were carried out using the old and new inspection methodologies.

Table 1 – 30 inspections (91 grades awarded)

Grade 2019/20	Overall	People's Wellbeing	Leadership	Staff Team	Setting	Care and Support Planning
6 excellent	-	-	-	-	-	-
5 very good	24%	37%	9%	22%	9%	23%
4 good	37.5%	20%	45.5%	44.5%	45.5%	47%
3 adequate	33%	33%	36.5%	33.5%	36.5%	30%
2 weak	4.5%	10%	9%	-	-	-
1 unsatisfactory	1%	-	-	-	9%	-

To provide some comparison detail, those care homes who were inspected under the new framework method both this year and last have been identified from within Table 1 and included in Tables 2 and 3 to allow for comparison as follows:

Table 2 - 19 Inspections (52 grades awarded)

Grade 2019/20	Overall	People's Wellbeing	Leadership	Staff Team	Setting	Care and Support Planning
6 excellent	-	-	-	-	-	-
5 very good	13.5%	26.5%	20%	-	-	5%
4 good	54%	47%	20%	50%	60%	69%

3	adequate	15.5%	10.5%	20%	25%	20%	16%
2	weak	17%	16%	40%	25%	20%	10%
1	unsatisfactory	-	-	-	-	-	-

Table 3 – 19 inspections (57 grades awarded)

Grade 2018/19	Overall	People's Wellbeing	Leadership	Staff Team	Setting	Care and Support Planning	
6	excellent	-	-	-	-	-	
5	very good	26.5%	42%	14%	20%	14%	21%
4	good	40.5%	26.5%	43%	60%	29%	53%
3	adequate	26%	21%	29%	20%	43%	26%
2	weak	5%	10.5%	14%	0	-	-
1	unsatisfactory	2%	-	-	-	14%	-

4.3 Continuous Improvement

- 4.3.1 There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality which involves the care home providers, the Care Inspectorate and representatives of Dundee Health and Social Care Partnership. This is particularly evident when significant concerns arise. There have been many benefits of such an approach e.g. effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point concerns have been adequately addressed. This pre-existing commitment and relationships between providers, the Care Inspectorate and the Partnership has proved to be invaluable in the early months of 2020/21 in responding the COVID-19 pandemic.
- 4.3.2 Residents' care needs are supported, monitored and reviewed by the Care Home Team. The team's focus is to provide a single point of contact to deliver a dedicated service specific to care homes utilising a holistic care approach to ensure the right discipline at the right time can tailor intervention to individual need. The team continues to work closely with colleagues in primary care in developing advanced clinical skills to support GPs by providing comprehensive nursing assessments to assist with increasing clinical demand. A Contracts Officer with a portfolio lead for care homes continues to attend Care Inspectorate feedback sessions following care home inspection visits.
- 4.3.3 During 2019/2020 the Care Home Team has moved to a link worker role whereby the Review Officer, Registered General Nurse and Registered Mental Health Nurses are aligned to specific care homes within Dundee. This is to ensure better collaboration and joined up working between the link workers; with the Advance Nurse Practitioner's (ANP) within the team (and Primary Care); the resident, family and care home staff. Each link worker has a set day (with some joint visits between link workers if deemed appropriate) where they would have a planned visit with a particular care home. This approach would enable the link workers to support care home staff in dealing with any particular issues they had in supporting and managing a resident in a proactive manner. This has helped care homes better manage residents needs and prevent any inappropriate admission to the Kingsway Care Centre or potential for the resident's placement to break down due to care homes no longer able to meet their needs.
- 4.3.4 During the COVID-19 pandemic regular planned visits in care homes by the Care Home Team have ceased to prevent the spread of infection. However, essential visits have continued on a case by case basis with appropriate infection prevention and control measures being in place. For some of the larger capacity care homes, the ANP's continued regular visits to reduce likely footfall (from the Care Home Team) in the home and to support the homes during this extremely challenging time. Link workers have also remained in regular telephone contact with each care home (initially at the start of the pandemic daily); with the use of technologies such as 'Near Me' to help facilitate better contact with the resident, family and care home staff if a visit was not deemed essential.

4.3.5 Our Urgent Care model continues to provide certain care homes daily support and visits if required from the ANP's and trainee ANP's within the team. This is an alternative to the care home calling a GP practice to request advice or a same day house call in regards to a resident's physical health needs. The plan post COVID-19 is for Urgent Care to expand and be rolled out to all GP practices and care homes within Dundee during 2020/21.

4.3.6 ***Care Home Providers Forum***

The care home providers forum is a meeting which normally takes place quarterly. The forum is attended by representatives from care homes across the city as well as members of the integrated Care Home Team and a variety of professionals from Dundee Health and Social Care Partnership. The Care Inspectorate are also in attendance. The forum creates the opportunity for all present to discuss topical issues as well as hearing from a variety of speakers. However, during the COVID-19 crisis the forum has taken place every two weeks via conference call. The care home managers have commented that they want this to continue until further notice. This forum has been used to facilitate information sharing and discussion with Health Protection Tayside, the Community Testing Team, Infection, Prevention and Control, and consultants from NHS Tayside, amongst others.

5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it relates to the publication of Care Inspectorate information and is for information only.

7.0 CONSULTATIONS

7.1 The Chief Officer, the Clerk, Head of Service - Health and Community Care and Chief Social Work Officer were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

8.1 None.

Dave Berry
Chief Finance Officer

DATE: 14 August 2020

Rosalind Guild
Contracts Officer



PERFORMANCE REPORT – CARE INSPECTORATE GRADINGS

DUNDEE REGISTERED CARE HOMES FOR ADULTS

1 APRIL 2019 – 31 MARCH 2020

INTRODUCTION

The purposes of this report is to summarise for members the findings and gradings awarded by the Care Inspectorate to registered care home services for adults within Dundee for the period 1 April 2019 to 31 March 2020.

The Care Inspectorate regulates and inspects care services to make sure they meet the right standards. It also works with providers to help them improve their service and make sure everyone gets safe, high quality care that meets their needs. The Care Inspectorate has a critical part to play to make sure that care services in Scotland provide good experiences and outcomes for the people who use them and their carers.

The Health and Social Care Standards came into effect in April 2018. The Standards replaced the National Care Standards and are now relevant across all health and social care provision. They are no longer just focused on regulated care settings, but for use in social care, early learning and childcare, children's services, social work, health provision and community justice. They seek to provide better outcomes for everyone, to ensure that individuals are treated with respect and dignity, and that the basic human rights we are all entitled to are upheld.

The Standards are underpinned by five principles; dignity and respect, compassion, be included, responsive care and support and wellbeing.

The headline outcomes are:

- I experience high quality care and support that is right for me
- I am fully involved in all decisions about my care and support
- I have confidence in the people who support and care for me
- I have confidence in the organisation providing my care and support
- I experience a high quality environment if the organisation provides the premises.

From July 2018 the Care Inspectorate introduced a new framework for inspection of care homes for older people and as you can see from Appendix 1 all care homes in Dundee have now been inspected using this framework.

It is recognised that self-evaluation is a core part of quality assurance and supporting improvement and this framework is primarily designed to support care services in self-evaluation. The same framework is then used by the Care Inspectorate to provide independent assurance about the quality of care and support. By setting out what Inspection Officers expect to see in high-quality care and support provision, it can help support improvement too. Using a framework in this way also supports openness and transparency of the inspection process.

The process of self-evaluation, as part of a wider quality assurance approach, requires a cycle of activity based round answering three questions:

- **How are we doing?**
- **How do we know?**
- **What are we going to do now?**

The framework uses a series of key questions and quality indicators to help prompt reflection on the quality of care provided. It provides illustrations of what the Care Inspectorate believe constitute 'very good' and 'weak' care and support in relation to each quality indicator, relevant to care homes for older people. The framework still evaluates quality using the existing six point scale from unsatisfactory to excellent and reports continue to be published. More details on the framework can be found in '[A quality framework for care homes for older people](#)' published by the Care Inspectorate.

The Care Inspectorate continue to inspect using a six-point grading scale (see below) against which the following key themes are graded:



Each theme is assessed from 1 to 6 with 1 being 'unsatisfactory' and 6 'excellent'.

- **How well do we support people's wellbeing?**
- **How good is our leadership?**
- **How good is our staff team?**
- **How good is our setting?**
- **How well is our care and support planned?**

The grading scale used is:

6	excellent
5	very good
4	good
3	adequate
2	weak
1	unsatisfactory

OVERVIEW OF THE CARE HOMES INSPECTED

As of 1 April 2019 there were 28 care homes in Dundee which provided care and support to:

- older people
- people with learning disabilities
- people with physical disabilities
- people with mental health difficulties.

This number reduced to 27 care homes in December 2019 when the contract between Dundee City Council and Living Ambitions Ltd terminated resulting in the 32 residents who lived in Linlathen Neurodisability Unit moving to alternative placements.

A total of 30 inspections were carried out in the 28 care homes by the Care Inspectorate during the reporting period 2019/20.

Where there are performance concerns at an inspection resulting in a number of requirements being imposed, a follow up visit is arranged. This can result in further action being taken or grades being amended. This is relevant to both Pitkerro Care Centre and Rose House Care Home.

Inspection visits can also be carried out if complaints are made against a service.

Who provides care home services for adults in Dundee?

Table 1 shows which sectors provide care home services for adults in Dundee:

Table 1

Care Home Service	Data	Local Authority	Private	Voluntary	Total
DUNDEE	No of Services	4	22	2	28
	%	14%	79%	7%	100%

Summary of the gradings awarded in Dundee

Of the 30 inspections undertaken in 2019/20:

- 25 (83%) received grades **4** 'good', **5** 'very good' or **6** 'excellent' in some or all themes
- 13 (43%) received grade **3** 'adequate' in some or all themes
- 3 (10%) received grade **2** 'weak' in all some of all themes
- 1 (3%) received a grade **1** 'unsatisfactory' in any theme.

A full report of outcomes of all inspections carried out in 2019/20 is contained in Appendix A.

For purposes of comparison, the 2018/19 summary is as follows -

Of the 32 inspections undertaken in 2018/19:

- 29 (90%) received grades **4** 'good', **5** 'very good' or **6** 'excellent' in some or all themes
- 8 (25%) received grade **3** 'adequate' in some or all themes
- 4 (13%) received grade **2** 'weak' in some or all themes
- No care home received a grade **1** 'unsatisfactory' in any theme

Linlathen Neurodisability Unit, owned by Living Ambitions Ltd (a subsidiary of the Lifeways Group), had over a period of time experienced difficulties sustaining acceptable grades particularly in relation to management and leadership and environmental issues. Despite staff from the Care Inspectorate and Dundee Health and Social Care Partnership working very closely with the Home's management team during 2019/20 to support improvements, address complaints and investigate incidents and a marked improvement evidenced during this period, the decision was taken by Living Ambitions Ltd to close the care home in December 2019.

Pitkerro Care Centre, owned by Hudson Healthcare Ltd, received a grade 2 'weak' for 'How well do we support people's wellbeing?' following an inspection in August 2019. A cessation on admissions was voluntarily put in place and a series of contract monitoring meetings took place. At the follow up Care Inspection visit in January 2020 the grade improved to a 3 'adequate' and DHSCP officers agreed that there was sufficient evidence of sustained improvement to allow the care home to accept admissions and continue with a planned programme of monitoring meetings.

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Table 2 below shows the overall percentage awarded at grades 1 to 6 and also each key theme in Dundee in 2019/20. A full comparison exercise cannot be completed between this year and last as inspections during 2018/19 were carried out using the old and new methods.

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2 weak	4.5%	10%	9%	-	-	-
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To provide some comparison detail, those care homes who were inspected under the new framework method both this year and last have been identified from Table 2 and compared as follows:

Table 3 - 19 Inspections (52 grades awarded)

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3 adequate	15.5%	10.5%	20%	25%	20%	16%
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1 unsatisfactory	-	-	-	-	-	-

Table 4 – 19 inspections (57 grades awarded)

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4 good	40.5%	26.5%	43%	60%	29%	53%
3 adequate	26%	21%	29%	20%	43%	26%
2 weak	5%	10.5%	14%	0	-	-
1 unsatisfactory	2%	-	-	-	14%	-

The following are extracts from questionnaires distributed by the Care Inspectorate and thereafter published in the Inspection Report:

Harestane (Priority Care Group Ltd)

(Grade **5** 'very good' for How well do we support people's wellbeing; and How well is our care and support planned?)

What residents told us

- I like it here
- The lasses are lovely
- I like it here and I am very happy
- My lunch was very nice
- I'm fine
- I like living here, everyone is very friendly
- I am happy here and don't want to go anywhere else

What relatives told us

- We are very happy with Harestane care home. The staff are very attentive towards my relative and very friendly and helpful with us
- The home is always kept clean and my relatives room is always clean and fresh
- The food is excellent and there is always tea/coffee and cakes available to the residents
- All the staff are welcoming and caring, friendly and polite and with a great sense of humour too
- First class care given at Harestane, the manager is like a mother to them and I couldn't fault the care home
- Very approachable and very kind, not only to my relative, but to ourselves as a family – keeping us up to date and informing us of any worries or concerns they have
- The staff are extremely patient and understanding of my relative's needs, and the manager has a great rapport with all the residents
- I am satisfied with the care my relative receive, I do not have any concerns about his care and wellbeing
- I feel that activities have dropped off recently, I worry that my relative does not have enough stimulation

What staff told us

- Training needs met and management always helpful
- Great place to work. I can always go to the management about anything and all issues will be dealt with
- We work together well as a team
- There are plenty of activities going on all the time, a resident only has to ask if they want to do something and the manager will organise it
- Training courses and e-learning are encouraged to broaden skills. Management are supportive, easily approachable
- Throughout my entire time with the company I have always been offered training/support and guidance especially from the manager who has my best interests at heart. The manager is very approachable and a very good listener who strives for both clients and staff to be as happy as possible. She is one in a million.

Lochleven (Thistle Healthcare Ltd)

(All themes grade **5** 'very good')

Residents commented

- I wouldn't say I am not happy with the service
- We are made to feel welcome and are offered tea and coffee
- I would like all levels of staff to wear name badges
- This is the best of the homes we looked at, not a big turnover of staff
- I have just started to get used to living here it's a big change, food not the same, stovies is the highlight
- Staff are all kind and respectful
- I chose this place not my laddies
- The staff are becoming more like friends
- Activities they have different things manicures, bowling, bingo, concerts, movies through most of these are old-fashioned

Relatives commented

- Staff are all very nice, very caring
- Room always kept clean
- The manager is very approachable if there are any issues
- Communication is good – I am kept up-to-date with anything about mum
- My biggest bug-bear is the lift keeps breaking down and this means I can't get mum out or to the café
- Always welcomed in the home with tea/coffee
- Very personal care given and personal events celebrated
- Service installing a washing machine that residents can use (mother will use this to do her own washing)
- Staff help mother to make bed rather than make it for her
- I have no complaints whatsoever
- The staff always appear to do the best they can and ensure mum's comfort and wellbeing
- We have found the staff extremely patient, caring and excellent in communicating with us – this all provides us with peace of mind which is very reassuring
- Where concerns were raised, we discussed these with the manager

Staff commented

- I enjoy working in this home, as it is a relaxed atmosphere with good relationships with families, which creates a homely atmosphere
- I feel well supported by my managers and there is always on-ongoing training and development opportunities
- Very high standards of care by all staff – if any new equipment is required it is always provided
- All the units pull together on a daily basis
- It's a happy team – I feel listening to
- I really enjoyed doing by SVQ3 – my assessor was really good

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010, its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

Requirements were placed on 10 of the 28 services following inspection during 2019-20 (see Appendix B).

Complaints

A complaint is an expression of dissatisfaction by about a registered care service's action or lack of action, or about the standard of service provided by or on behalf of a registered care service'. Following investigation, a decision will be made by the Care Inspectorate whether the complaint is upheld or not upheld.

During 2019/20 the Care Inspectorate received complaints relating to 3 of the 28 care home services in Dundee. Of these, at least one of the elements of the complaint was upheld in all instances. Upheld elements of complaints were categorised as:

- Choice – activities
- Communication – language difficulties
- Wellbeing – resident care and support - general
- Protection of People – adults
- Staffing – staffing levels
- Record keeping – personal plans/agreements
- Environment – inadequate facilities

Enforcements

Enforcement is one of the Care Inspectorate's core responsibilities and is central to protecting residents and bringing about an improvement in the quality of care services.

No enforcement action has been required to be taken in respect of the services reported upon either directly by the Care Inspectorate or by Dundee Health and Social Care Partnership.

CONTINUOUS IMPROVEMENT

There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality which involves the care home providers, the Care Inspectorate and representatives of Dundee Health and Social Care Partnership. This is particularly evident when significant concerns arise. There have been many benefits of such an approach e.g. effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point concerns have been adequately addressed. This pre-existing commitment and relationships between providers, the Care Inspectorate and the Partnership has proved to be invaluable in the early months of 2020/21 in responding the COVID-19 pandemic.

Residents' care needs are supported, monitored and reviewed by the Care Home Team. The team's focus is to provide a single point of contact to deliver a dedicated service specific to care homes utilising a holistic care approach to ensure the right discipline at the right time can tailor intervention to individual need. The team continues to work closely with colleagues in primary care in developing advanced clinical skills to support GPs by providing comprehensive nursing assessments to assist with increasing clinical demand. A Contracts Officer with a portfolio lead for care homes continues to attend Care Inspectorate feedback sessions following care home inspection visits.

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basis with appropriate infection prevention and control measures being in place. For some of the larger capacity care homes, the ANP's continued regular visits to reduce likely footfall (from the Care Home Team) in the home and to support the homes during this extremely challenging time. Link workers have also remained in regular telephone contact with each care home (initially at the start of the pandemic daily); with the use of technologies such as 'Near Me' to help facilitate better contact with the resident, family and care home staff if a visit was not deemed essential.

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Care Home Providers Forum

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CONCLUSION

Of the 30 inspections of the 28 care homes listed in the Performance Report, the sustainment of grades highlights the importance of the partnership approach between providers, local authority representatives and the Care Inspectorate and a focus on continuous improvement to focus on improving outcomes for service users.

Theme well we did....)	(How	Improvement in Grade	Number of Homes	Reduction in Grade	Number of Homes
People's wellbeing		27%	8	33%	10
Leadership		13%	4	10%	3
Staff Team		10%	3	10%	3
Setting		7%	2	7%	2
Care and Support Planning		17%	5	13%	4

August 2020

Summary of Care Inspectorate Gradings for Care Homes in Dundee - 1 April 2019 to 31 March 2020

	Category LA/ Private/ Vol	Inspection Date	People's Wellbeing	Leadership	Staff Team	Setting	Care & Support Planning	Requirements	Complaints
Balcarres HC-One Oval Limited	P	11.11.19	5↓	n/a	n/a	n/a	5	No	No
Balhousesie Clement Park Balhousesie Care Limited	P	27.08.19	3↓	n/a	n/a	n/a	3↓	Yes	No
Balhousesie St Ronan's Balhousesie Care Limited	P	19.07.19	5↑	n/a	n/a	n/a	4	No	No
Ballumbie Court HC-One Limited	P	31.05.19	3↑	4↑	4↑	4	4↑	Yes	Yes
Benvie Duncare Ltd	P	13.01.20	5	n/a	n/a	n/a	4	No	No
Bridge View House Sanctuary Care	P	30.04.19	3↓	3↓	3↓	3↓	4	Yes	No
Carmichael House Kennedy Care Group	P	11.12.19	4	n/a	n/a	n/a	4	No	No
Craigie House Dundee City Council	LA	12.12.19	5	n/a	n/a	n/a	5	No	No
Elder Lea Manor Enhance Healthcare Ltd	P	17.04.19	4	4	4↓	4	4	No	No
Ellen Mhor Cygnet Healthcare	P	21.06.19	3↓	4	4	4	4	Yes	No
Ferry House Residential Home Ferry House Cttee of Management	V	18.06.19	5	n/a	n/a	n/a	4	No	No

	Category LA/ Private/ Vol	Inspection Date	People's Wellbeing	Leadership	Staff Team	Setting	Care & Support Planning	Requirements	Complaints
Forebank Forebank Ltd	P	28.1.19	2↓	n/a	n/a	n/a	4	Yes	No
Harestane Priority Care Group Ltd	P	16.04.19	5	n/a	n/a	n/a	5	No	No
Janet Brougham House Dundee City Council	LA	08.11.19	5	n/a	n/a	n/a	4	No	No
Linlathen Neurodisability Centre Living Ambitions Ltd	P	17.05.19	3↑	3↑	3↑	3↑	3	Yes	No
	P	Closed 14.12.19							
Lochleven Care Home Thistle Healthcare Limited	P	13.06.19	5	5	5	5	5	No	No
Menziesshill House Dundee City Council	LA	18.09.19	5↑	n/a	n/a	n/a	5↑	No	No
McGonagall House Rosebank (Dundee) Limited	P	18.06.19	4↑	4↑	5↑	4	4↑	No	No
Moyness Nursing Home Balhousie Care Limited	P	23.10.19	4	n/a	n/a	n/a	4	No	No
Orchar Nursing Home Orchar Care Ltd	P	03.04.19	5	n/a	n/a	n/a	5	No	No
Pitkerro Care Centre Hudson Healthcare Ltd	P	28.01.20	3↑	n/a	n/a	n/a	(3)	No	No
	P	08.08.19	2↓	n/a	n/a	n/a	3	Yes	No

	Category LA/ Private/ Vol	Inspection Date	People's Wellbeing	Leadership	Staff Team	Setting	Care & Support Planning	Requirements	Complaints
Redwood House Kennedy Care Group	P	09.05.19	3↓	n/a	n/a	n/a	3↓	No	No
Riverside View HC-One Limited	P	21.06.19	3↓	n/a	n/a	n/a	4	No	Yes
Rose House Kennedy Care Group	P	17.01.20	3↑	3↑	n/a	3↑	3↑	No	No
	P	07.06.19	2↓	2↓	n/a	1↓	3↓	Yes	Yes
St Columba's Care Home Priority Care Group Limited	P	22.10.19	5↑	n/a	n/a	n/a	5↑	No	No
St Margaret's Home – Dundee Trustees of St Margaret's Home	V	02.10.19	4	4	4	3	3	Yes	No
Thistle Care Home Cygnnet Healthcare	P	06.06.19	3↓	3↓	3↓	4	3↓	Yes	No
Turriff House Dundee City Council	LA	25.11.19	4	n/a	n/a	n/a	4	No	No

DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP – CARE HOME SERVICES

Appendix B

CARE INSPECTORATE REQUIREMENTS 2019-2020

Date of Inspection	Name of Org/Service	Service Type	People's Wellbeing	Leadership	Staff Team	Setting	Care and Support Planning
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27.08.19	Balhousie Clement Park	Care Home – Private	3↓	n/a	n/a	n/a	3↓
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Requirements (2)

In order to ensure the health and wellbeing of people using the service, by 30 October 2019 the provider must ensure that people are protected by improving the assessment, treatment and monitoring of care. This includes, but is not restricted to hydration and wound management.

In order to ensure the health and wellbeing of people the provider must by 31 December 2019 ensure that individuals' personal plans clearly set out how their health, welfare and safety needs are to be managed and met. In order to do this the provider must ensure that:

- Staff are supported to become competent in the use of the electronic planning system.
- Personal plans and care records reflect a responsive and person-centred approach.
- The quality and accuracy of records detailing the management of healthcare needs are improved. This includes but is not restricted to hydration and wound care.
- The management team use their quality audit systems to monitor and improve practices.

31.05.19	Ballumbie Court	Care Home – Private	3↑	4↑	4↑	4	4↑
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Requirements (1)

In order to ensure that all activities support plans are meaningful and person-centred and are used to inform and guidance staff practice, the provider must complete a quality review of all support plans. Planned support delivered by staff should meet the assessed need identified in the activity plans.

30.04.19	Bridge View House	Care Home – Private	3↓	3↓	3↓	3↓	4
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Requirements (4)

The provider must demonstrate by 30 June 2019 that there are suitable and sufficient meaningful activities for service users to engage in based on their personal choices and abilities.

The provider must ensure that safe systems are in place and followed for the administration of medications by 16 June 2019.

In order to ensure the service is operating legally, the provider must submit a formal application requesting to vary their conditions of registration by 30 May 2019. This must include reasons for the service variation; age group(s) and category of people who use the service and thereafter consult the Care Inspectorate each time any person is considered for admission that falls outwith the scope of registration conditions.

In order to ensure high quality care and support the provider must by 16 June 2019 ensure that appropriate staffing levels, skill mix and deployment of staff are maintained to ensure service users are well supported at all times. This must take into account the complexity of people's needs, the layout of the setting and be linked to quality assurance processes including people's views, outcomes and experiences.

Date of Inspection	Name of Org/Service	Service Type	People's Wellbeing	Leadership	Staff Team	Setting	Care and Support Planning
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21.06.19	Ellen Mhor	Care Home - Private	3↓	4	4	4	4
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Requirements (1)
The service should ensure that the recording and administration of medication is monitored and audited to minimise errors and ensure that records are accurate and complete. Staff should have practice observed, at regular intervals, to assist in this process. This requirement has been repeated from the previous inspection and a robust process to address the above issues should be in place by 31 July 2019.

28.11.19	Forebank	Care Home – Private	2↓	n/a	n/a	n/a	4
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Requirements (1)
In order to ensure that people get the medication they need, the provider must put in place an effective medication management system by 30 January 2019.

17.05.19	Linlathen Neurodisability Centre	Care Home – Private	3↑	3↑	3↑	3↑	3
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Requirements (1)
In order to ensure the environment is made fit for purpose and refurbishment continues the provider must by 31 January 2020, ensure the environment is user-friendly, homely in appearance and decorated and maintained to a standard appropriate for the care service. The provider must continue to implement the detailed plan of works to improve the standard of the environment, with appropriate timescales.

08.08.19	Pitkerro Care Centre	Care Home – Private	2↓	n/a	n/a	n/a	3↓
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Requirements (2)
In order to ensure that all care is delivered according to the principles of the Health and Social Care Standards, the provider must ensure that staff are suitably qualified and receive appropriate training to ensure that they can provide care and support to people in a safe, respectful and supportive manner. This is also to ensure that all staff are upholding the Scottish Social Service Council's (SSSC) Codes of Practice. In order to comply the provider should:

- Demonstrate that all staff receive appropriate values-based training to carry out their work.
- Implement an action plan to meet the training needs identified.
- Ensure that there is an effective system to monitor staff practice and provide supervision and guidance when necessary.

In order to ensure that the provision of foods and fluids is adequate to meet people's needs the provider must:

- Ensure that staff practice and knowledge reflects current best practice guidelines for adapted and specialised diets.

Date of Inspection	Name of Org/Service	Service Type	People's Wellbeing	Leadership	Staff Team	Setting	Care and Support Planning
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- Ensure that adapted foods are presented in a dignified way and in accordance with best practice guidelines.
- Ensure that fresh water and fluids are available at all times and in a way which is accessible to all people living with the home (including those who require assistance or prompting to ensure their fluid needs are met).

07.06.19	Rose House	Care Home - Private	2↓	2↓	n/a	↓1	3↓
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Requirements (4)
 People should expect to live in an environment that is safe and secure, is well looked after, and is well maintained. The provider must produce and thereafter implement a plan designed to improve the standard of the environment.

The service must ensure that the environment is homely in appearance and decorated and maintained to a standard appropriate for the care service. The provider should revisit the environmental assessment and make the necessary adjustments for people living with dementia or who experience sensory loss.

Maintenance checks must be thorough.

Staff must ensure issues are reported and safety systems are fully implemented.

The provider must implement a detailed plan of works to improve the standard of the environment.

The provider must ensure that all radiators are fitted with suitable covers in order to prevent burns and scalds and injury to residents. In addition the provider must ensure that the dishwasher is replaced and fully functioning as agreed with the provider following submission of the maintenance action plan.

The provider must ensure that all wardrobes are securely fixed to walls in order to prevent them from toppling over and causing injury to residents. In addition suitable curtains and/or other window coverings must be installed in all bedrooms in order to maintain privacy and ensure the promotion of sleep for residents.

In order to protect residents and staff from harm when carrying out care and support and to reduce the risk of pressure related injuries the provider must demonstrate the following:

- That all beds used by residents are fully functioning and that essential repairs are carried out on beds that are not fully functioning. Where it is not possible to repair a bed so that it is fully functioning, the bed must be replaced.
- That residents and staff can summon help and assistance via the nurse call system from all areas of the home where care and support are carried out.
- That residents can open and close their bedroom windows with ease so that residents can control the ventilation and heating within their own bedroom.

Date of Inspection	Name of Org/Service	Service Type	People's Wellbeing	Leadership	Staff Team	Setting	Care and Support Planning
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02.10.19	St Margaret's Care Home	Care Home - Private	4	4	4	3	3
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Requirements (1)
 In order to ensure that the environment meets with the Health and Social Care Standards set by the Scottish Government, the provider must put in place an improvement plan by 31 December 2019. This plan must detail both short and medium term environmental changes and improvements which are realistic, measurable and achievable.

06.06.19	Thistle Care Home	Care Home - Private	3	3	3	4	3
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Requirements (1)
 In order to ensure that peoples' health benefits from their support, the Provider must ensure that all medications are administered as prescribed by the prescriber and that any discrepancies identified through medication audits are acted upon by 30 June 2019.

Legend:

- 6 excellent
- 5 very good
- 4 good
- 3 adequate
- 2 weak
- 1 unsatisfactory

() signifies that the theme was not assessed at this inspection therefore the grade is brought forward from previous inspection