



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 31 JULY 2018
REPORT ON: PERFORMANCE REPORT – CARE INSPECTORATE GRADINGS
DUNDEE REGISTERED CARE HOMES FOR ADULTS – 2017/2018
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC26-2018

1.0 PURPOSE OF REPORT

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 2017 to 31 March 2018.

2.0 RECOMMENDATIONS

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

- 2.1 Notes the contents of this report and the gradings awarded as detailed in the attached Performance Report (Appendix A) and highlighted in section 4.2 below.
- 2.2 Notes the range of continuous improvement activities progressed during 2017-18 as described in section 4.3.

3.0 FINANCIAL IMPLICATIONS

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 ensure that care service providers meet their respective National Care Standards and that in doing so they provide quality care services. 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 During the latter part of 2017-2018 there were approximately 1032 residents accommodated in 24 private and voluntary care homes and 112 residents accommodated in four local authority care homes in Dundee.

4.2 Gradings Awarded

- 4.2.1 Within the 28 registered care homes listed in the Performance Report, 32 inspections were undertaken.

This number has reduced from 30 care homes in 2016-17. This is because:

- Wellburn closed in June 2017 (registered for 36 places);
- Brae Cottage closed in June 2017 (registered for 17 places);

- Magdalen House adapted its model of care to that provided in a care at home and housing support setting for people with learning disabilities therefore is no longer registered with the Care Inspectorate as a care home; and
- Thistle Care Home owned by The Danshell Group opened in January 2017 (registered for 10 places for adults with a learning disability).

4.2.2 Summary of the gradings awarded to registered care home services in Dundee:

- 19 care homes (68%) received **4**, **5** or **6** in some or all themes
- 8 care homes (29%) received grade **3** 'adequate' in some or all themes
- 1 care homes (3%) received grade **2** 'weak' in all themes
- No care home received a grade **1** 'unsatisfactory' in any theme.

4.2.3 Two inspections, Helenslea Care Home and Bughties Care Home, resulted in grade **2** 'weak' in some or all themes.

4.2.4 Helenslea Care Home, owned by Bertinaley Care, has over a period of time experienced difficulties sustaining acceptable grades owing particularly to management and leadership and environmental issues. Staff from the Care Inspectorate and Dundee Health and Social Care Partnership have worked very closely with the Home's management team in an effort to improve standards by carrying out regular follow up inspections and visits to the Home in addition to a series of formal contracts meetings. At the time of writing, a further full inspection has been undertaken and it is anticipated that the improvements reported by the organisation at contract meetings will be reflected in the Care Inspectorate report.

4.2.5 The Bughties Care Home, owned by Enhance Healthcare Scotland, was experiencing difficulties meeting requirements placed upon them by the Care Inspectorate therefore grades were deteriorating. Following a series of contract meetings, Enhance Healthcare submitting an action plan for improvement and a change in leadership at the home there has been a marked improvement in the management and leadership aspect of The Bughties. A follow up inspection of the care home resulted in both Quality of Care and Support and Management and Leadership themes being upgraded. At the time of writing an inspection has since taken place (9 May 2018) which has reflected improvements achieved, with grade 4 being awarded in all themes.

4.2.6 Table 1 below shows the overall percentage awarded at grades 1 to 6 and also each key theme in Dundee in 2017-18 and how this compares with Table 2 which is the same data collected from the previous year 2016-17.

Table 1

Grade 2017-18	Overall	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
6 excellent	2% ↓	3%	3%	-	-
5 very good	40% ↑	35%	41%	51%	35%
4 good	31% ↑	31%	38%	22%	32%
3 adequate	20% ↓	22%	12%	22%	23%
2 weak	7% ↓	9%	6%	3%	10%
1 unsatisfactory	- ↓	-	-	-	-

Table 2

Grade 2016-17	Overall	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
6 excellent	3%	3%	3%	3%	3%
5 very good	39%	36%	39%	45%	36%
4 good	30%	33%	36%	25%	25%
3 adequate	19%	14%	14%	22%	25%
2 weak	9%	14%	8%	6%	8%
1 unsatisfactory	1%	-	-	-	3%

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 eg effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point as concerns have been adequately addressed.

4.3.2 The Contracts Officer attends Care Inspectorate feedback sessions following care home inspection visits. Service users' care needs are monitored and reviewed by the Health & Social Care Partnership's Review Officers. They also undertake extra-ordinary reviews where there are concerns either about individuals or establishments. In addition, where there is evidence of poor quality and performance, senior officers meet with providers to discuss proposed actions to make improvements and how the Health & Social Care Partnership can support these actions.

4.3.3 *Care Home Providers Forum*

The care home providers forum is a meeting which 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 & 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. Earlier this year one of the forum dates was used to have a focussed development event which was run in partnership between Dundee Health & Social Care Partnership and the Care Inspectorate.

4.3.4 *Care Home Team*

Following a period of significant service redesign, three teams (Older People's Review Team; Peripatetic Team and Care Home Liaison Team), which previously provided care and support to residents living in a care home setting, have now integrated together to form the 'Care

Home Team'. The team comprises of Mental Health Nurses, General Nurses, Social Work Review Officers and two Advanced Nurse Practitioners. The team is also supported by a Psychiatrist and Pharmacist. Together the team works in unison to improve outcomes for older people residing in a care home.

Over the last year, the team's focus has been 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. In addition the team is working with care teams within care homes on exciting educational developments around 'Essentials in Psychological Care' for people with dementia and in 'Palliative End of Life Care' to ensure we can meet the needs of residents nearing the end of their life within a care home.

The team continues to work closely with colleagues in primary care and one of the goals over the next year is to develop advanced clinical skills to support GPs by providing comprehensive nursing assessments to assist with increasing clinical demand.

4.3.5 *Care Home Learning Network*

The Care Home Learning Network has been running in Dundee since January 2016. The groups meets every 2/3 months comprising staff from across the Health & Social Care Partnership and providers of care. The group recently produced information in a variety of formats and distributed this appropriately to make it widely available to people thinking about moving to a Care Home or supporting a relative/friend to move into a care home.

4.3.6 *Care Home Capacity*

The number of individuals residing in care homes for older people in Dundee has reduced in the last year. This is due to the closure of Wellburn and Brae Cottage care homes. Craigie House also closed the upper floor which reduced the capacity in the home by 20 rooms. The combination of these closures has meant approximately 100 rooms have been reduced across the sector in Dundee. This equates to a 10% reduction in the overall capacity across the city which has increased demand for the small number of vacancies which arise. In addition this limits choice for those moving into a care home. This reduction is however mitigated by an increase in housing with care in line with Government policy and shifting the balance of care through the development of a range of community based services and support models.

4.3.7 *Challenges in the care home sector*

Nursing homes across the city have reported a challenge in the recruitment and retention of nursing staff. This issue has affected a number of nursing homes and this does not appear to be linked to how well a home is performing in line with care inspections. Some care home managers have stated that they use agency nursing staff as a matter of course to staff their home which can be an expensive staffing solution. To help alleviate this problem, following the provision of appropriate training and supervision to staff care home providers have adapted their staffing structures and re-designated senior care staff to undertake a number of nursing tasks ie administering medication. This has followed discussions with both Dundee Health & Social Care Partnership and Care Inspectorate staff and, where granted, variations have been made to care home registrations to formalise these arrangements.

5.0 POLICY IMPLICATIONS

This report has been screened for any policy implications in respect of Equality Impact Assessment. An EQIA is attached.

6.0 RISK ASSESSMENT

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

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

None.

Dave Berry
Chief Finance Officer

DATE: 4 July 2018

Rosalind Guild
Contracts Officer

PERFORMANCE REPORT – CARE INSPECTORATE GRADINGS

DUNDEE REGISTERED CARE HOMES FOR ADULTS

1 APRIL 2017 – 31 MARCH 2018

INTRODUCTION

The purpose 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 2017 to 31 March 2018.

The Partnership and Care Inspectorate both collect statistical data for purposes of analysis however further work is currently being undertaken to ensure the accuracy of this data therefore detailed national benchmarking is not available.

BACKGROUND

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.

In June 2017, the Scottish Government published Scotland's new Health and Social Care Standards. These standards are currently being implemented during 2018. They set out what individuals should expect when using health, social care or social work services in Scotland. They seek to provide better outcomes for everyone and to ensure that individuals are treated with respect and dignity and that the basic human rights we are all entitled to are upheld. They are no longer just focused on regulated care settings but for use in health and social care, as well as in early learning and childcare, children's services, social work and community justice.

The method of inspecting services is also changing. Rather than just checking that a service is complying with basic inputs for all individuals, inspections are to look at what it is like to actually use the service. Inspectors from different scrutiny bodies now also work jointly to look at how individuals experience a range of services within the care system. More integrated standards, which look at how the rights and wellbeing of people who use care are protected and improved, from strategic commissioning to the actual experience of using services, should provide a more effective and relevant model of scrutiny fit for the future.

For 2017-18 the Care Inspectorate continued to inspect using a six-point grading scale (see below) against which the following key themes are graded:

Care and
Support

Environment

Staffing

Management
and
Leadership

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

- **Quality of Care and Support**
How the service meets the needs of each individual in its care
- **Quality of Environment**
Is the service clean, is it set out appropriately, is there easy access for individuals who use wheelchairs, is it safe, and is there a welcoming, friendly atmosphere?
- **Quality of Staffing**
The quality of the care staff including qualifications and training
- **Quality of Management and Leadership**
How the service is managed and how it develops to meet the needs of people it cares for

The grading scale used is:

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

OVERVIEW OF THE CARE HOMES INSPECTED

There are 28 care homes in Dundee which provide care and support to:

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

This number has reduced from 30 care homes in 2016-17. This is because:

- Wellburn closed in June 2017 (registered for 36 places)
- Brae Cottage closed in June 2017 (registered for 17 places)
- Magdalen House adapted its model of care to that provided in a care at home and housing support setting for people with learning disabilities therefore is no longer registered with the Care Inspectorate as a care home
- Thistle Care Home owned by The Danshell Group opened in January 2017 (registered for 10 places for adults with a learning disability).

A total of 32 inspections were carried out by the Care Inspectorate during the reporting period 2017-2018.

Balcarres was sold by BUPA in October 2017 and bought over by HC-One. Although inspected since this, a full inspection was not carried out as historically this has been a high performing care home in relation to gradings. Linlathen Neurodisability Unit has not yet been inspected as it also has more recently been sold by the Huntercombe Group to Living Ambitions.

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. 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

- 19 care homes (68%) received grades **4**, **5** or **6** in some or all themes
- 8 care homes (29%) received grade **3** 'adequate' in some or all themes
- 1 care homes (3%) received grade **2** 'weak' in all themes
- No care home received a grade **1** 'unsatisfactory' in any theme

Helenslea Care Home, owned by Bertinaley Care, has over a period of time experienced difficulties sustaining acceptable grades owing particularly to management and leadership and environmental issues. Staff from the care Inspectorate and Dundee Health and Social Care Partnership have worked very closely with the Home's management team in an effort to improve standards by carrying out regular follow up inspections and visits to the Home in addition to a series of formal contracts meetings. A voluntary moratorium on admissions was agreed between the Partnership and Bertinaley Care to allow outstanding issues to be resolved in relation to both the environment and the changes in management of the home. There has also been communication with other local authorities in Scotland where two Bertinaley care homes are located to ensure communication with the provider is consistent in an attempt to provide as much support as possible throughout this difficult period for the organisation. At the time of writing, a further full inspection has been undertaken and it is anticipated that the improvements reported by the organisation at contract meetings will be reflected in the Care Inspectorate report.

The Bughties Care Home, owned by Enhance Healthcare Scotland, was experiencing difficulties meeting requirements placed upon them by the Care Inspectorate therefore grades were deteriorating. Following a series of contract meetings and Enhance Healthcare submitting an action plan, the decision was taken to place a voluntary moratorium on new admissions. This would allow management and staff sufficient time to address the requirements and recommendations listed in the action plan. This was later amended to facilitate one admission per fortnight then in January of this year all restrictions on admissions were lifted. Following a change in leadership there has been a marked improvement in the management and leadership aspect of The Bughties and a follow up inspection of the care home resulted in both Quality of Care and Support and Management and Leadership themes being upgraded. At the time of writing an inspection has since taken place (9 May 2018) which has reflected improvement achieved, with grade 4 being awarded in all themes.

Table 2 shows the overall percentage awarded at grades 1 to 6 and also each key theme in Dundee in 2017-2018 and how this compares with Table 3 which is the same data collected from the previous year 2016-2017.

Table 2

Grade 2017-18	Overall	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
6 excellent	2% ↓	3%	3%	-	-
5 very good	40% ↑	35%	41%	51%	35%
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3 adequate	20% ↓	22%	12%	22%	23%
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Table 3

Grade 2016-17	Overall	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
6 excellent	3%	3%	3%	3%	3%
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4 good	30%	33%	36%	25%	25%
3 adequate	19%	14%	14%	22%	25%
2 weak	9%	14%	8%	6%	8%
1 unsatisfactory	1%	-	-	-	3%

The following table shows the overall percentage award at a mix of grades and for each key themes in approximately 842 care homes in Scotland in comparison to Dundee [source: Care Inspectorate Statistical Summary Report for Quarter 4 of 2017/18 – compiled by the Care Inspectorate]

Table 4 – National averages 2017-18

Grades 2017-18	Quality of Care and Support		Quality of Environment		Quality of Staffing		Quality of Management and Leadership	
	Dundee	Scotland	Dundee	Scotland	Dundee	Scotland	Dundee	Scotland
5 and 6	37%	44%	43%	40%	50%	43%	37%	42%
1 and 2	10%	3%	7%	3%	3%	2%	10%	5%

Table 5 – National averages 2016-17

Grades 2016-17	Quality of Care and Support		Quality of Environment		Quality of Staffing		Quality of Management and Leadership	
	Dundee	Scotland	Dundee	Scotland	Dundee	Scotland	Dundee	Scotland
5 and 6	39%	41%	42%	39%	47%	42%	39%	39%
1 and 2	3%	2%	8%	2%	3%	2%	11%	4%

The above tables illustrate an improvement nationally for the award of grades 5 and 6 in all themes when compared with 2016-17. Dundee shows a similar improvement in two themes over the same period. For 2017-18 Dundee is significantly above the national average in relation to the Quality of Staffing theme and similarly the Quality of Environment theme.

Grades 1 and 2 for 2017-18 would appear to have Dundee showing a substantial increase in poor performance for Quality of Care and Support however this is attributed to 2 of the 28 care homes having 5 of the total 32 inspections carried out between them. The Care Inspectorate imposed a number of requirements on these 2 care homes necessitating a number of follow up visit throughout the year. The remaining 26 care homes all received grades 3 and above.

The following extracts from a selection of latest Inspection Reports summarise what the services do well:

Balcarres (HC-One)

(Graded **6** 'excellent' for key themes inspected - Quality of Care & Support and graded **5** 'very good' for Quality of Environment)

What the service does well

"It was good to see that staff had embraced the introduction of a new Provider or owner and were fully informed and feeling positive about some of the changes this had led to."

"We spoke to people who lived in the home, some of their relatives and the staff. We heard examples of excellent outcomes for people that had impacted positively on their health and wellbeing. For example, one relative told us that they thought all the staff had a very good knowledge about their relative's condition which had helped to avoid the introduction of more medication. Other examples included supporting people to engage with activities and other people in a way that they were comfortable doing which would help to reduce feelings of isolation and loneliness. Having meaningful things to do was important to people and we saw a range of activities planned that people could enjoy in groups and individually."

The environment was subject to regular review and development to help meet peoples' needs. For example the 'village' created in the gardens included a sweet shop, post office and a chapel. Plans were in progress for the development of a library. People we spoke to told us about the garden and the children's play area. One person was very happy that they could be involved in maintaining the garden in the better weather."

Comments from Care Standards Questionnaires

"Staff are all wonderful"

"I visit at all times of the day, always welcome"

"Staff are always visible, I've never had to go looking"

"I am fully informed about my relatives care and support"

Rose House (Kennedy Care Group)

(All themes awarded grade **4** 'good' however all grades increased from their previous inspection illustrating overall sustained improvement)

What the service does well

"We found the performance of the service for quality theme care and support to be good. We reached this conclusion after we spoke with the people living at Rose House, relatives, manager and staff. We also observed interactions of staff.... Staff demonstrated a good understanding of people's specific needs".

"The staff team came across as enthusiastic and motivated and were keen to make and sustain

improvements.

“People were assisted to maintain their identity and were treated with dignity and respect”.

Comments from Care Standards Questionnaires

“Very very good care from all Rose House staff including the manager – I know I can always go to the nurse for advice”

“They really do look after us”

“I enjoy living here”

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 4 of the 28 services following inspection during 2017-18 (see Appendix 2).

Complaints

A complaint is an expression of dissatisfaction 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 2017-18 the Care Inspectorate received complaints relating to 10 of the 28 care home services in Dundee. Of these, all were upheld or at least one of the elements upheld.

General health and welfare

- continence care
- medication issues
- tissue viability
- infection control issues
- Protection of People - other

Communication

- between staff and service users/relatives/carers
- information about the service
- privacy and dignity

Policies and Procedures

- complaints procedure

Record keeping

- personal plans/agreements

Staff

- staffing levels

Choice

- care and treatment

Food

- choice

Access

- to other services eg Advocacy/Health

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 & 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 eg effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point as concerns have been adequately addressed.

The Contracts Officer attends Care Inspectorate feedback sessions following care home inspection visits. Service users' care needs are monitored and reviewed by the Department's Review Officers. They also undertake extra-ordinary reviews where there are concerns either about individuals or establishments. In addition, where there is evidence of poor quality and performance, senior officers meet with providers to discuss proposed actions to make improvements and how the Health & Social Care Partnership can support these actions.

Care Home Providers Forum

The care home providers forum is a meeting which 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 & 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. Earlier this year one of the forum dates was used to have a focussed development event which was run in partnership between Dundee Health & Social Care Partnership and the Care Inspectorate.

Care Home Team

Following a period of significant service redesign, three teams (Older People's Review Team; Peripatetic Team and Care Home Liaison Team), which previously provided care and support to residents living in a care home setting, have now integrated together to form the 'Care Home Team'. The team comprises of Mental Health Nurses, General Nurses, Social Work Review Officers and two Advanced Nurse Practitioners. The team is also supported by a Psychiatrist and Pharmacist. Together the team works in unison to improve outcomes for older people residing in a care home.

Over the last year, the team's focus has been 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. In addition the team is working with care teams within care homes on exciting educational developments around 'Essentials in Psychological Care' for people with dementia and in 'Palliative End of Life Care' to ensure we can meet the needs of residents nearing the end of their life within a care home.

The team continues to work closely with colleagues in primary care and one of the goals over the next year is to develop advanced clinical skills to support GPs by providing comprehensive nursing assessments to assist with increasing clinical demand.

Care Home Learning Network

The Care Home Learning Network has been running in Dundee since January 2016. The groups meets every 2/3 months comprising staff from across the Health & Social Care Partnership and providers of care. The group recently produced information in a variety of formats and distributed this appropriately to make it widely available to people thinking about moving to a Care Home or supporting a relative/friend to move into a care home.

Care Home Capacity

The number of individuals residing in care homes for older people in Dundee has reduced in the last year. This is due to the closure of Wellburn and Brae Cottage care homes. Craigie House also closed the upper floor which reduced the capacity in the home by 20 rooms. The combination of these closures has meant approximately 100 rooms have been reduced across the sector in Dundee. This equates to a 10% reduction in the overall capacity across the city which has increased demand for the small number of vacancies which arise. In addition this limits choice for those moving into a care. This reduction is however mitigated by an increase in housing with care in line with Government policy and shifting the balance of care through the development of a range of community based services and support models.

Challenges in the care home sector

Nursing homes across the city have reported a challenge in the recruitment and retention of nursing staff. This issue has affected a number of nursing homes and this does not appear to be linked to how well a home is performing in line with care inspections. Some care home managers have stated that they use agency nursing staff as a matter of course to staff their home which can be an expensive staffing solution. To help alleviate this problem, following the provision of appropriate training and supervision to staff care home providers have adapted their staffing structures and re-designated senior care staff to undertake a number of nursing tasks ie administering medication. This has followed discussions with both Dundee Health & Social Care Partnership and Care Inspectorate staff and, where granted, variations have been made to care home registrations to formalise these arrangements.

CONCLUSION

Of the 32 inspections of the 28 care homes listed in the Performance Report, the improvement in grades highlights the importance of the partnership approach between providers, local authority representatives and the Care Inspectorate and consequently leads to better outcomes for service users.

Theme (Quality of ...)	Improvement in Grade	Number of Homes	Reduction in Grade	Number of Homes
Care and Support	15% ↓	4	15% ↑	4
Environment	4% ↓	1	7% ↑	2
Staffing	11% ↓	3	11% ↓	3
Management & Leadership	7% ↓	2	11% ↓	3

In comparison to 2016-17, although the number of care homes showing an improvement in their grades is marginally lower, those care homes where inspections have resulted in a downgrading has shown an improvement.

Summary of Care Inspectorate Gradings for Care Homes in Dundee - 1 April 2017 to 31 March 2018

	Category DHSCP/ Private/ Vol	Inspection Date	Quality of Care & Support	Quality of Environment	Quality of Staffing	Quality of Management & Leadership	Requirements	Complaints	
Balcarres Care Home	P	06.03.18	6	5	not assessed	not assessed	No	No	
Balhousie Clement Park Care Home	P	21.11.17	(4)	(4)	(5)	(5)	No	No	
Balhousie St Ronans	P	19.03.18	4	(5)	(5)	(5)	No	No	
Ballumbie Court Care Home	P	25.10.17	3	4	4↑	3	Yes	Yes	
Ballumbie Court Care Home	P	09.02.18	(3)	(4)	(4)	(3)	Yes	-	
Benvie Care Home	P	22.02.18	5	(5)	(5)	(5)	No	No	
Brae Cottage	P	-	Closed June 2017						
Bridge View House Nursing Home	P	09.08.17	3	4	3	3	Yes	Yes	
Bridge View House Nursing Home	P	16.02.18	(3)	(4)	(3)	(3)	Yes	Yes	
Carmichael House Care Home	P	13.11.17	4	4	(4)	3	No	No	
Craigie House	DHSCP	22.11.17	(5) ↑	(4)	(5)	(4)	No	Yes	
Ellen Mhor Care Home Services	P	26.10.17	5 ↑	5	(5)	4	No	No	
Ferry House Residential Home	V	25.05.17	5	(5)	(5)	(5)	No	No	
Forebank Care Home Service	P	07.03.18	5	(5)	5	(5)	No	No	
Harestane Nursing Home	P	15.06.17	5	(5)	5	(5)	No	No	
Helenslea Care Home	P	23.05.17	4	3	3	3	Yes	Yes	
Helenslea Care Home	P	07.11.17	2↓	2↓	(3)	2↓	Yes	-	

	Category DHSCP/ Private/ Vol	Inspection Date	Quality of Care & Support	Quality of Environment	Quality of Staffing	Quality of Management & Leadership	Requirements	Complaints
Helenslea Care Home	P	12.03.18	(2)	(2)	2↓	(2)	Yes	-
Janet Brougham House	DHSCP	05.10.17	5	(6)	5	4↓	No	No
Linlathen Neurodisability Centre	P	-	Acquired by Living Ambitions July 2017 – not yet inspected					
Lochleven Care Home	P	17.07.17	4↓	(5)	5	(5)	No	Yes
Magdalen House Care Home	P	-	Model of provision and registration amended to Care at Home/Housing Support					
Menzieshill House	DHSCP	13.10.17	5	(5)	(5)	5	No	No
Moyness Nursing Home	P	29.11.17	(4)	(4)	(4)	(4)	No	No
Orchar Nursing Home	P	30.06.17	5	(5)	(5)	5	No	Yes
Pitkerro Care Centre	P	13.02.18	3↓	(4)	3↓	(4)	Yes	Yes
Redwood House Care Home	P	10.04.17	4	(4)	5↑	4	No	No
Riverside View Care Home	P	25.05.17	3↓	(5)	(5)	4↓	No	Yes
Rose House Care Home	P	15.08.17	4↑	4↑	4↑	4↑	No	No
St Columba's Care Centre	P	10.10.17	5	5	(5)	(5)	No	Yes
St Margaret's Care Home	V	28.11.17	4	3	4	4	No	No
The Bughties Care Home	P	18.04.17	2	3↓	3↓	2	Yes	Yes
The Bughties Care Home	P	29.11.17	3↑	(3)	(3)	3↑	Regrading	No
Thistle Care Home	P	16.08.17	4	4	4	4	No	No
Turriff House	DHSCP	07.03.18	5	(5)	(5)	5	No	No
Wellburn Care Home	Vol	-	Closed June 2017					

Date of Inspection	Name of Org/Service	Service Type	Quality of Care & Support	Quality of Environment	Quality of Staffing	Quality of Management & Leadership
25.10.17	Ballumbie	Care Home - Private	3	4	4↑	3
<p>Requirements</p> <p>The service provider must ensure medication is managed in a manner that protects the health, welfare and safety of service users. In order to achieve this the provider must ensure:</p> <ul style="list-style-type: none"> - administration of medication or reason for omission must be recorded on the MAR sheet at the time of administration - they maintain accurate, detailed records on how much and where to apply particular topical creams/ ointments <p>The provider must make proper provision for the health, welfare and safety of service users. In order to achieve this the provider must ensure:</p> <ul style="list-style-type: none"> - fluid charts are completed for those service users who require them - review and record findings and update each care plan as so required to ensure that each service user who needs assistance to drink has a care plan that describes specific interventions for that individual This must include the individual's daily intake target <p>The provider must make proper provision for the health, welfare and safety of service users. In order to achieve this the provider must ensure:</p> <ul style="list-style-type: none"> - weight monitoring is carried out as prescribed in the care plan - review and record findings and update each care plan as so required to ensure that each service user who needs assistance to monitor their weight and nutritional status has a care plan that describes specific interventions for that individual <p>The provider must ensure all activities support plans are meaningful and person centred and are used to inform and guide staff practice. This means the service should undertake a quality review of all support plans to ensure the planned support delivered by staff meets the assessed need.</p> <p>The provider must ensure all staff who complete records used to evaluate service users health can do so accurately. This means the service should ensure all staff revisit essential training in how to complete:</p> <ul style="list-style-type: none"> - Malnutrition Universal Screening Tool (MUST) - food and fluid charts - activity records - appropriate and meaningful evaluations <p>All staff competency in completing records should be assessed on a regular basis.</p>						
09.02.18 Follow up	Ballumbie	Care Home - Private	(3)	(4)	(4)	(3)
<p>Priority areas for improvement (<i>new style report</i>)</p> <p>The provider must ensure all activities support plans are meaningful and person centred and are used to inform and guide staff practice. This means the service should undertake a quality review of all support plans to ensure the planned support delivered by staff meets the assessed need.</p>						

09.07.17	Bridge View	Care Home - Private	3	4	3	3
Requirements						
<p>The provider must ensure the health and wellbeing of service users. To achieve this, the provider must:</p> <ul style="list-style-type: none"> - Review medication storage and administration procedures to ensure that the administration of medication follows best practice guidance and medication is administered within the prescribed timescale - Refresher training should be provided which includes evidence of competency <p>The provider must make proper provision for the health, welfare and safety of service users. In order to achieve this the provider must ensure:</p> <ul style="list-style-type: none"> - Staff carry out all dressing changes within timescales set in treatment plans and ensure all wound assessments are kept up to date. <p>The provider must make proper provision for the health, welfare and safety of service users. In order to achieve this the provider must ensure:</p> <ul style="list-style-type: none"> - Staff complete all relevant weight monitoring/ recording tools in the service users' care files as directed by the provider's policy and procedure documentation. This will enable effective monitoring and evaluation of care. 						
16.02.18	Bridge View	Care Home - Private	(3)	(4)	(3)	(3)
Requirements						
<p>At a follow up inspection held on 16 February 2018 none of the above requirements were met and will be carried forward to a future inspection.</p>						
23.05.17	Helenslea	Care Home - Private	4	3	3	3
Requirements						
<p>The provider must ensure the premises are kept in a good state of repair. This means all staff must be aware of the reporting procedure for requesting repairs and maintenance of building and equipment used by service users. To achieve this the service must:</p> <ul style="list-style-type: none"> - ensure that maintenance staff complete all safety checks as required by the provider. This includes but is not limited to water temperature safety - ensure that the radiators are of a safe temperature to protect service users. <p>The provider must demonstrate that it has followed good practice guidance in relation to safe recruitment practices and must not employ any person in the provision of a care service unless that person is fit to be so employed.</p>						
07.11.17	Helenslea	Care Home - Private	2↓	2↓	(3)	2↓
Requirements						
<p>The provider must ensure that risks of under nutrition are recognised and acted upon by providing an appropriate fortified diet according to service users' needs and preferences. The provider must also offer nutritionally balanced choices. In order to do this you must:</p> <ul style="list-style-type: none"> - develop and implement clear care plans to avoid unplanned weight loss, under nourishment or dehydration - develop and implement clear care plans when people are identified as underweight, malnourished or at risk of dehydration - ensure that staff are aware of dietary needs (fortified or texture modified) and preferences of individual service users - ensure that there is evidence of these needs and preferences being met by the use of food charts and observation of meals and snack times - ensure that staff have the necessary skills to identify people at risk of malnutrition, dehydration and weight loss - ensure that there is robust monitoring and audit of prevention and care plans. <p>The provider must demonstrate up-to-date and accurate risk assessment, care planning and follow-up in relation to falls prevention and management to ensure the timely provision of specialist advice and other preventative measures.</p>						

The provider must ensure that medication is managed and administered safely and to the standard of best practice guidance, including 'Handling Medicines in Social Care' 2007 and the Care Inspectorate's Health Guidance 'Maintenance of Medication Records'

The provider must demonstrate that there are suitable and sufficient meaningful activities for service users to engage in based on their personal choices and abilities. Activities should promote and maintain health and wellbeing of service users. There must be access to outdoor space and events.

The provider must ensure that there is an appropriate system in place for carrying out and monitoring safety of the environment, maintenance and repair procedures. This must include (but is not limited to):

- developing environmental risk assessments and taking steps to minimise risks identified
- carrying out regular and planned environmental audits
- ensuring that any deficits identified are addressed promptly
- ensure that any minor repairs are carried out timeously and records kept of this.

The provider must ensure that food products are managed safely. This includes (but is not limited to):

- dried food being dated on opening
- stored in sealed containers
- raw products being stored safely.

The provider must ensure that the home is kept clean, hygienic and that appropriate infection control systems are in place and being routinely monitored to control the spread of infection. Infection control procedures must be improved within the home with specific reference to laundry procedures including storage systems, cleaning procedures and schedules and use of personal protective equipment.

The provider to devise, implement and fully embed robust quality assurance arrangements that evidence improving outcomes for service users.

12.03.18	Helenslea	Care Home - Private	2	2	2↓	2↓
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Requirements

The provider must, having regard to the size and nature of the care service, the numbers and needs of service users, ensure that at all times suitably qualified and competent persons are working in the service in numbers as are appropriate for the health, safety and welfare of service users.

The provider must demonstrate that there are suitable and sufficient meaningful activities for service users to engage in based on their personal choice and abilities. Activities should promote and maintain health and wellbeing of service users. There must be access to outdoor space and events.

The provider must ensure that medication is managed and administered safely and to the standard of best practice guidance, including 'Handling Medicines in Social Care' 2007 and the Care Inspectorate's Health Guidance 'Maintenance of Medication Records'.

The provider must ensure that risks of under nutrition are recognised and acted upon by providing an appropriate fortified diet according to service users' needs and preferences. The provider must also offer nutritionally balanced choices. In order to do this you must:

- ensure that staff are aware of dietary needs (fortified or texture modified) and preferences of individual service users and meet these
- ensure that there is evidence of these needs and preferences being met by the use of food charts and observation of meals and snack times
- ensure that staff have the necessary skills to identify people at risk of malnutrition, dehydration and weight loss

The provider must ensure that there is an appropriate system in place for carrying out and monitoring safety of the environment, maintenance and repairs procedures. This must include (but is not limited to):

- developing environmental risk assessments and taking steps to minimise risks identified
- carrying out regular and planned environmental audits
- ensuring that any deficits identified are addressed promptly
- ensure that any minor repairs are carried out timeously and records kept of this.

The provider must ensure that the home is kept clean, hygienic and that appropriate infection control systems are in place and being routinely monitored to control the spread of infection. Infection control procedures must

be improved within the home with specific reference to laundry procedures including storage systems, cleaning procedures and schedules and use of personal protective equipment.

The provider must demonstrate that it has followed good practice in relation to safe recruitment practices and must not employ any person in the provision of a care service unless that person is fit to be so employed. The provider must ensure that the Care Inspectorate are notified within 24 hours of any unforeseen event including outbreaks of infection.

The provider must devise, implement and fully embed robust quality assurance arrangements that evidence improving outcomes for service users.

21.02.18	Pitkerro Care Centre	Care Home - Private	3↓	(4)	3↓	(4)
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Requirements

The provider must ensure that all residents' personal plans document how needs are identified, met and reviewed and reflect current management of care needs. In order to achieve this the provider must:

- demonstrate that written information about care arrangements for residents is accurate and up-to-date
- demonstrate that staff follow best practice in record keeping and documentation
- ensure that all care related documentation is regularly reviewed and audited.

The provider must ensure that all residents nutrition and hydration needs are adequately met. In order to achieve this the provider must:

- provide meals which are presented suitably
- ensure that, when help is needed, it is carried out in a dignified way
- demonstrate that mealtimes are conducted in as relaxed an atmosphere as possible
- provide access to fresh water at all times
- ensure that, when the monitoring of fluid intake is required, this is recorded accurately and reviewed regularly.

18.04.17	The Bughties	Care Home - Private	2	3↓	3↓	2
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Requirements

The provider must ensure that personal plans are reviewed at least once in every six month period. The provider must ensure all trained staff who administer medication are aware of their responsibility and accountability to administer prescribed medication and can demonstrate their understanding through practice. The service should introduce strategies which monitor and evaluate trained staff competency of the task on a regular basis. There should be evidence of a managerial oversight of all medication records

The service must make proper provision for the health, welfare and safety of service users. The service should meet the condition of registration to carry out improvements as agreed with the Care Inspectorate. The service must ensure that regular health and safety checks are carried out and recorded. Any remedial action identified should be taken to rectify repairs to the building and to equipment used by residents as soon as possible.

The service must review recruitment recording systems to evidence that all necessary checks have been completed as part of the recruitment process. Evidence of these checks must be kept with other recruitment records for that employee.

The provider must ensure all staff are aware of infection prevention and the control measures in place to prevent cross infection and contamination and when these should be introduced to practice. In order to achieve this the service should

- plan and confirm infection control training dates
- provide evidence of how they will evaluate staff understanding of the learning and be able to demonstrate through their practice

The service provider must ensure all information is shared and recorded in a consistent manner. In order to achieve this the service should ensure all staff are aware of the lines of communication within the service and can demonstrate their understanding through practice. This must include the use of appropriate documentation when recording, for example, accident and incident reports.

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

EQUALITY IMPACT ASSESSMENT TOOL

Part 1: Description/Consultation

Is this a Rapid Equality Impact Assessment (RIAT)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is this a Full Equality Impact Assessment (EQIA)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Date of Assessment:	03/07/2018	Committee Report Number: PAC26-2018
Title of document being assessed:	Dundee Registered Care Home Services for Adults	
1. This is a new policy, procedure, strategy or practice being assessed (If yes please check box) <input type="checkbox"/>	This is an existing policy, procedure, strategy or practice being assessed? (If yes please check box) <input checked="" type="checkbox"/>	
2. Please give a brief description of the policy, procedure, strategy or practice being assessed.	The purpose of this report is to summarise for the Committee the gradings awarded by the Care Inspectorate to registered care homes in Dundee for adults during the period 1 March 2017 to 31 March 2018.	
3. What is the intended outcome of this policy, procedure, strategy or practice?	To continue to support the partnership approach to the quality improvement agenda for care services in Dundee.	
4. Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment.	Care Inspectorate Inspection Reports for 2017-2018; Performance Report – Care Inspectorate Gradings - Dundee Registered Care Home Services for Adults.	
5. Has any consultation, involvement or research with protected characteristic communities informed this assessment? If yes please give details.	Service users, staff and relatives are consulted during the inspection process	
6. Please give details of council officer involvement in this assessment. (e.g. names of officers consulted, dates of meetings etc)	Jenny Hill Rosalind Guild Kathryn Sharp Laura Menzies	
7. Is there a need to collect further evidence or to involve or consult protected characteristics communities on the impact of the proposed policy? (Example: if the impact on a community is not known what will you do to gather the information needed and when will you do this?)	No	

Part 2: Protected Characteristics

Which protected characteristics communities will be positively or negatively affected by this policy, procedure or strategy?

NB Please place an X in the box which best describes the "overall" impact. It is possible for an assessment to identify that a positive policy can have some negative impacts and visa versa. When this is the case please identify both positive and negative impacts in Part 3 of this form.

If the impact on a protected characteristic communities are not known please state how you will gather evidence of any potential negative impacts in box Part 1 section 7 above.

	Positively	Negatively	No Impact	Not Known
Ethnic Minority Communities including Gypsies and Travellers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender Reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Religion or Belief	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People with a disability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lesbian, Gay and Bisexual	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Socio-economic	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy & Maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part 3: Impacts/Monitoring

<p>1. Have any positive impacts been identified?</p> <p>(We must ensure at this stage that we are not achieving equality for one strand of equality at the expense of another)</p>	<p>There has been an improvement in the quality of care provided in care home services which has resulted in an improvement in the quality of life for service users</p>
<p>2. Have any negative impacts been identified?</p> <p>(Based on direct knowledge, published research, community involvement, customer feedback etc. If unsure seek advice from your departmental Equality Champion.)</p>	<p>No</p>
<p>3. What action is proposed to overcome any negative impacts?</p> <p>(e.g. involving community groups in the development or delivery of the policy or practice, providing information in community languages etc. See Good Practice on DCC equalities web page)</p>	<p>N/A</p>
<p>4. Is there a justification for continuing with this policy even if it cannot be amended or changed to end or reduce inequality without compromising its intended outcome?</p> <p>(If the policy that shows actual or potential unlawful discrimination you must stop and seek legal advice)</p>	<p>N/A</p>
<p>5. Has a 'Full' Equality Impact Assessment been recommended?</p> <p>(If the policy is a major one or is likely to have a major impact on protected characteristics communities a Full Equality Impact Assessment may be required. Seek advice from your departmental Equality lead.)</p>	<p>No</p>
<p>6. How will the policy be monitored?</p> <p>(How will you know it is doing what it is intended to do? e.g. data collection, customer survey etc.)</p>	<p>Care home services will continue to be inspected by the Care Inspectorate and monitored and reviewed by Dundee Health and Social Care Partnership officers</p>

Part 4: Contact Information

Name of Department or Partnership	Dundee Health and Social Care Partnership
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Type of Document	
Human Resource Policy	<input type="checkbox"/>
General Policy	<input type="checkbox"/>
Strategy/Service	<input type="checkbox"/>
Change Papers/Local Procedure	<input checked="" type="checkbox"/>
Guidelines and Protocols	<input type="checkbox"/>
Other	<input type="checkbox"/>

Manager Responsible	Author Responsible
Name: Jenny Hill	Name: Rosalind Guild
Designation: Locality Manager	Designation: Contracts Officer
Base: Claverhouse Offices Dundee	Base: Claverhouse Offices Dundee
Telephone: 01382 438307	Telephone: 01382 433665
Email: jenny.hill@dundeecity.gov.uk	Email: rosalind.guild@dundeecity.gov.uk

Signature of author of the policy:	Rosalind Guild	Date: 03/07/2018
Signature of Director/Head of Service:	Diane McCulloch	Date: 03/07/2018
Name of Director/Head of Service:	Diane McCulloch	
Date of Next Policy Review:	September 2018	