



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 28 NOVEMBER 2017

REPORT ON: PERFORMANCE REPORT – CARE INSPECTORATE GRADINGS FOR DUNDEE REGISTERED CARE SERVICES FOR ADULTS (EXCLUDING CARE HOMES) – 2016/17

REPORT BY: CHIEF FINANCE OFFICER

REPORT NO: PAC34-2017

1.0 PURPOSE OF REPORT

The purpose of this report is to summarise for the committee the grading's awarded by the Care Inspectorate to Dundee registered care services for adults (excluding care homes) for the period 1 April 2016 to 31 March 2017.

2.0 RECOMMENDATIONS

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

- 2.1 Notes the content of this report including the gradings awarded as detailed in the attached Performance Report (Appendix 1) and highlighted in paragraph 4.3 below.
- 2.2 Notes the Care Inspectorate requirements detailed in Appendix 2.

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 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.
- 4.1.3 Data has been gathered from the Local Government Benchmarking Framework (LGBF) which brings together a wide range of information about how all Scottish councils perform in delivering services to local communities. Family groups have been set up by councils to support the meaningful interpretation of the LGBF data and to identify and share good practice. Family groups based on factors such as population density and deprivation were agreed to provide a structure for similar councils to come together to drill-down into the benchmarking data.

4.2 Of the 68 registered services listed in the Performance Report, 57 inspections were undertaken.

4.3 Summary of the gradings awarded to registered care services in Dundee.

- 43 services (63%) were awarded grades **4**, **5** and **6** in some or all these (11 of these services received grade 6 in all themes)
- 9 services (13%) were awarded grades which included grade **3** 'adequate' or grade **2** 'weak' (only 1 service received grade 2)
- 16 of the 68 registered services (24%) were not inspected during this period (1 of these services was de-registered)
- 5 internally provided Dundee Health and Social Care Partnership services and 6 externally provided voluntary services were graded **6** 'excellent' in all applicable quality themes.
- Of the 68 services inspected, there was a 23% improvement in grades for Quality of Care and Support, 13% improvement for Quality of Environment, 16% improvement in Quality of Staffing and 14% improvement in Quality of Management and Leadership.
- Of the 68 services inspected 14% were downgraded for Quality of Care and Support, no services downgraded for Quality of Environment, 9% downgraded for Quality of Staffing and 14% downgraded for Quality of Management and Leadership.
- One inspection resulted in grade **2** 'weak' for Quality of Care and Support and Quality of Management and Leadership.

Table 1 shows the overall percentage awarded at grades 1 to 6 and also each key theme in Dundee in 2016-2017.

Table 1

Grade 2016-2017	Overall	Quality of Care and Support	Quality of Environment*	Quality of Staffing	Quality of Management and Leadership
6 excellent	28%	26%	63%	31%	21%
5 very good	32%	37%	25%	30%	31%
4 good	22%	19%	12%	23%	25%
3 adequate	16%	14%	0	16%	19%
2 weak	2%	4%	0	0	4%
1 unsatisfactory	0	0	0	0	0

4.4 Where providers have been awarded a grade of 3 or below this is being addressed in a multi-disciplinary way by means of formal contract meetings in conjunction with input from both the provider and relevant operational teams targeting areas for development and improvement. The one inspection where grade 2s were awarded was of Weavers Burn; a report has previously been submitted regarding support and improvement provided to this service resulting in improved gradings being awarded during the most recent inspection in July 2017 (Article IX of the minute of the meeting of the PAC held on 12 September 2017 refers).

4.5 During the period, requirements were placed on eight of the 68 services covering a range of issues relating to the health, welfare and safety of service users. Action plans

were drawn up setting out the actions the services would take in response to these requirements.

- 4.6 During the same period, there were complaints made against six services which were upheld or at least one of the elements upheld.
- 4.7 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.
- 4.8 There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality which involves the service 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 concerns have been adequately addressed. Council officers attend Care Inspectorate feedback sessions following inspection visits. In addition, where there is evidence of poor quality and performance, the appropriate Locality Manager will meet with providers to discuss proposed actions to make improvements and how the Partnership can support these actions.

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 a status update and does not require any policy or financial decisions at this time.

7.0 CONSULTATIONS

The Chief Finance Officer and the Clerk were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

None.

Dave Berry
Chief Finance Officer

DATE: 8 November 2017



PERFORMANCE REPORT – CARE INSPECTORATE GRADINGS

DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP ADULT SERVICES

1 APRIL 2016 – 31 MARCH 2017

INTRODUCTION

The purposes of this report is to summarise for members the findings and gradings awarded by the Care Inspectorate to registered services for adults within Dundee for the period 1 April 2016 to 31 March 2017.

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.

Data has been gathered from the Local Government Benchmarking Framework (LGBF) which brings together a wide range of information about how all Scottish councils perform in delivering services to local communities.

Family groups have been set up by councils to support the meaningful interpretation of the LGBF data and to identify and share good service practice. Family groups based on factors such as population density and deprivation were agreed to provide a structure for similar councils to come together to drill-down into the benchmarking data. These groupings allow councils facing similar challenges to share good practice and work together to improve their services.

Dundee is benchmarked against the following family group partnerships – Inverclyde, Glasgow, Western Isles, East Ayrshire, North Ayrshire, North Lanarkshire and West Dunbartonshire.

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.

As of 1 April 2016 the Care Inspectorate made changes to how they inspect services and to the format of inspection reports. They continue to develop an inspection model that focuses on outcomes for people which is proportionate, intelligence-led and risk based. This enables them to target their resources in services where there are concerns and where support is needed for improvement. Robust action will continue to be taken in services which do not provide high quality, safe compassionate care.

As the Care Inspectorate will look more closely at outcomes for people who use care services, they will only now report and grade on the quality themes and individual quality statements will no longer be assessed. The new style report is shorter, more user friendly and there are different inspection types and reports dependent on how well or otherwise the service is performing.

Report Type	Service level
Summary	service performing at good or better with no concerns or ongoing complaints
Themed	service with grades of adequate, weak and unsatisfactory
Follow up	service which is performing poorly and need a second inspection in a year
Validation*	service which is performing well but ensure high standards are being maintained

The Care Inspectorate use 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'.

- **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 SERVICES INSPECTED

This report covers a range of registered care services (see Appendix 1 attached) that are subject to regulation. These include:

- **Tenancy Support:** a housing support service which provides support, assistance, advice or counselling to enable a person to live in their own home in the community. Housing support may be provided to people living in, for example, sheltered housing, hostels for the homeless, accommodation for the learning disabled, women's refuges or in shared homes
- **Respite:** a service provided to permit a carer temporary relief from caring. It can be provided at home or elsewhere and may extend from a few hours to a few weeks
- **Support Services - not care at home:** a service which provides support in a setting outwith the home similar to a day opportunities service

- Support Services – with care at home: a service which provides support and/or personal care in your own home. This service is primarily provided to older people in Dundee within DHSCP Home Care Service and provided by both internal staff and externally commissioned organisations
- Care at Home/Housing Support (combined): a 24/7 housing support service combined with a care at home service registration. A housing support service (see tenancy support definition above) and combined care service provided to individuals in their own home. This service is primarily provided to people with a learning disability and/or a mental health difficulty

Of the 68 registrations included in this report, a total of 57 inspections were carried out by the Care Inspectorate during the reporting period 2016-2017. Five of these inspections are attributed to follow up inspections. When there is 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.

The following table shows the overall percentage awarded at each grade and also for each key theme.

Who provides care and support services for adults in Dundee?

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

Table 1

Care Home Service	Data	DHSCP	Private	Voluntary	Total
DUNDEE	No of Services	13	9	46	68
	%	19%	13%	68%	100%

Summary of the Gradings Awarded in Dundee and LGBF Family Group

- 43 services (63%) were awarded grades **4**, **5** and **6** in some or all these (11 of these services received grade 6 in all themes)
- 9 services (13%) were awarded grades which included grade **3** 'adequate' or grade **2** 'weak' (only 1 service received grade 2)
- 16 of the 68 registered services (24%) were not inspected during this period (1 of these services was de-registered)

Table 2(a) and 2(b) shows the percentage of grades awarded within each key theme in Dundee and the Family Group respectively in 2016-2017.

Table 2(a) – Overall Dundee Inspection Gradings 2016-2017

Grade 2016-17	Overall	Quality of Care and Support	Quality of Environment*	Quality of Staffing	Quality of Management and Leadership
6 excellent	28%	26%	63%	31%	21%
5 very good	32%	37%	25%	30%	31%
4 good	22%	19%	12%	23%	25%
3 adequate	16%	14%	0	16%	19%
2 weak	2%	4%	0	0	4%
1 unsatisfactory	0	0	0	0	0

*Environment totals reflect 8 inspections out of 57 as not all services require the environment to be assessed eg within a service user's own home in the community

82% of inspections (43 services) resulted in grades 4, 5 and 6 for each of the key themes inspected.

Only 2% of inspections (1 service) resulted in grade 2 "weak" and there were no services in receipt of a grade 1 'unsatisfactory'. Weavers Burn, at the time of writing this report, has since been inspected and significant improvements to service delivery evidenced by the Care Inspectorate resulting in two themes being upgraded from grade 3 'adequate' to grade 4 'good'.

Table 2(b) – Overall Family Group Inspection Gradings 2016-2017

Grade	Overall	Quality of Care and Support	Quality of Environment*	Quality of Staffing	Quality of Management and Leadership
6 excellent	*	11%	12%	10%	8%
5 very good	*	54%	57%	59%	47%
4 good	*	27%	26%	24%	36%
3 adequate	*	8%	5%	6%	7%
2 weak	*	1%	0%	1%	2%
1 unsatisfactory	*	<1%	0%	0%	0%

*information required for this calculation not available

The overall gradings for Dundee reflect considerably higher than those presented in the Family Group gradings.

Table 3(a) and 3(b) shows the percentage of grades awarded within each service model in Dundee and the Family Group respectively in 2016-2017.

Table 3(a) – Dundee Inspection gradings by service model

	Overall	6	5	4	3	2	1
Tenancy Support (6 services)	10%	5%	67%	28%	0	0	0
Respite Services (3 services)	7%	83%	17%	0	0	0	0
Support – not care at home (5 services)	11%	55%	30%	15%	0	0	0
Support – with care at home (19 services)	34%	0	48%	32%	20%	0	0
Care at Home/Housing Support (19 services)	38%	41%	13%	17%	23%	6%	0

Table 3(b) – Family Group Inspection gradings by service model

	Overall	6	5	4	3	2	1
Housing Support Service (Not Combined includes Tenancy Support) (461 services)	*	13%	59%	26%	2%	0%	0%
Respite Services	not recorded by LGBF						
Support Service not Care at Home (Not Combined) (421 services)	*	11%	56%	31%	1%	1%	0%
Support Service with Care at	*	6%	34%	28%	30%	2%	0%

Home (Not Combined) (335 services)							
Combined Care at Home / Housing Support Service (520 services)	*	9%	56%	24%	10%	1%	0%

**information required for this calculation not available*

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 9 of the 68 services following inspection during 2016-17 (see Appendix 2).

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 2016-17 the Care Inspectorate received complaints relating to 6 of the 68 services in Dundee. Of these, all were upheld or at least one of the elements upheld.

- general health and welfare
- healthcare – medication issues
- communication
- record keeping – personal plans/agreements
- choice – care and treatment
- choice – activities
- staff – recruitment procedures (including Disclosure checks)
- staff – training/qualifications
- staff – levels
- financial issues
- food – other

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

Support Services

Grades, particularly in organisations providing home care to older people, have been low owing to organisations having one Care Inspectorate registration covering a large area within the country. The decision by some service providers to separate the registration into smaller, defined areas has resulted in services in Dundee services achieving higher grades. This course of action is currently being explored further with all service providers, some now having separate registrations whilst others have still to make this shift.

There is a strategic aim to use Housing with Care sites to provide intermediate care. The intermediate care model will provide multi-disciplinary care and support to users of the service in a bid to support delayed discharges and prevent people going into hospital.

Using Integrated Care Fund monies, a further two Housing with Care sites have been identified at Bonneathill Gardens, Hilltown and Spence Gardens, Broughty Ferry. These new sites have increased the numbers of providers involved in this model of care which is designed to assist users to live in accommodation which has onsite care staff from early morning until late at night. The new site in Broughty Ferry will introduce Housing with Care into a locality in Dundee which has previously not had access to this model of care. The new site in Bonneathill Gardens has a dementia café built which is accessed by current tenants and community groups in the surrounding area.

The Service Provider Forum for Care at Home Services continues to operate and membership of the group has been extended to include all Homecare Providers who operate within the boundaries of Dundee City, not just block and framework contracted providers. This includes representation from DHSCP's own Home Care Service. The regular forum meetings provide opportunities for providers to share their collective skills, knowledge and experience, with guest speakers attending to discuss specific agenda items, e.g. the SSSC to discuss registration and fitness to practise. This approach aims to improve the quality of the service provided across the care at home sector through joint working and shared approaches/discussions. A similar forum has been established for all Housing with Care Service Providers who operate within Dundee, with the similar aim being to improve the quality of service provision across the city.

A change of practice was introduced for Homecare Providers during 2016-17 to improve the service provided and achieve better outcomes for people. Provider representatives now visit service users who have been admitted to hospital and this helps hospital staff gain a better understanding of the person's abilities and the support provided at home. Providers can also start to plan the care package that the individual will require when they are due to return home, including any increase in service. This results in smoother transitions for people, i.e. home -> hospital and hospital -> home.

A new development through 2016-17 is that Homecare Providers now retain the planned service visit times when the service user is admitted to the Acute Medical Unit as this is often for an assessment visit which does not lead to hospital admission. This approach improves the quality of service for individuals by maintaining continuity in the care arrangements.

Regular meetings continue to take place with providers and a partnership approach is being taken to address any areas of concern in order that the necessary improvements are made. Block contracted providers continue to use a call monitoring system which assists in the monitoring of lateness, missed visits and service continuity.

Towards the end of 2016-17, a new model of service was introduced as an initial "test of change". This Care at Home Service was designed to facilitate an early discharge from hospital with an intensive care service that is available 24/7, in order that people can be given an opportunity to return home as part of the assessment process to determine their long term support needs. This service has already demonstrated that a number of people who may have been considered for residential care placement can continue to remain at home with a personalised homecare service.

Respite

Respite and short break opportunities range from a few hours to a few weeks depending on the individual circumstances.

The variety of Respite and Short Break opportunities provide benefit to carers and service users in a number of different settings.

Dundee HSCP continues to provide respite at White Top Centre and Sense Scotland continue to support people at Fleuchar Street. Over the last year there has been a number of people who have chosen respite in their own homes, whilst others have chosen to access facilities outwith Dundee.

Care at Home/Housing Support (Combined)

Significant progress has been and continues to be made to develop a range of accommodation with support across the city for people with particular support needs. The excellent partnership working between members of Dundee HSCP and Neighbourhood Services will continue to contribute significantly to delivering positive health and social care outcomes for citizens in Dundee. A shift is currently underway to change the way that the market is prepared for future developments in terms of the delivery of accommodation with support.

Voluntary and independent providers, as part of the HSCP, are becoming more engaged in seeking to determine how best to support people. Early plans are in place, in some circumstances, to move away from procurement processes for specific care groups and to consider more efficient ways of delivering support, for example, on more a locality basis. A collaborative approach is being taken to the discussions, the aim being to effect a further shift in the balance of power and work within the principles and legislative context of HSCP.

CONCLUSION

Of the 57 inspections carried out in the 68 services 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. There is also evidence in Appendix 1 to support the effort of services who have previously achieved good grades for continuing to maintain their high standard of performance.

Theme (Quality of ...)	Improvement in Grade	Number of Services	Reduction in Grade	Number of Services
Care and Support	23%	13	14%	8
Environment	13%*	1	0	0
Staffing	16%	9	9%	5
Management & Leadership	14%	8	14%	8

**Environment is only applicable to 8 of the 57 inspections carried out*

October 2017

**DUNDEE HEALTH AND SOCIAL CARE PARTNERSHIP
CARE INSPECTORATE PERFORMANCE GRADINGS 2016-2017
DUNDEE REGISTERED CARE SERVICES FOR ADULTS (EXCLUDING CARE HOMES)**

Organisation	Name of Service	Service Type	Category DHSCP/ Private/ Vol	Inspection Date	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management & Leadership	Requirements	Complaints	Enforcements
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TENANCY SUPPORT

Abertay Housing Association		Housing Support	Vol	De-registered 31.03.17							
Bield Housing Association	Balgowan	Housing Support	Vol	14.12.16	5	-	5	(4)	No	No	No
Caledonia Housing Association Ltd		Housing Support	Vol	28.03.17	4	-	4	(4)	Yes	No	No
Dundee Survival Group		Housing Support	Vol	Last inspected 08.02.16							
Dundee Women's Aid		Housing Support	Vol	09.02.17	5	-	(5)	6↑	No	No	No
Hillcrest Housing Association		Tenancy Support & Warden	Vol	13.01.17	5	-	5	(5)	No	No	No
Home Scotland – Home Support		Housing Support	Vol	Last inspected 17.06.15							
Positive Steps (East)		Housing Support	Vol	Last inspected 22.12.15							
Salvation Army	Burnside Mill	Housing Support	Vol	15.06.16	5↑	-	(4)	5↑	No	No	No

Salvation Army	Strathmore Lodge	Housing Support	Vol	15.06.16	5↑	-	(5)	5↑	No	No	No
Sanctuary Scotland Housing Association		Housing Support	Vol	Last inspected 21.05.15							

RESPIRE

Sense Scotland	Fleuchar Street	Respite/ Short Breaks	Vol	28.10.16	5↓	(6)	(6)	5↓	No	No	No
Dundee City Council	Mackinnon Centre	Adult Respite	DHSCP	15.02.17	6	6	(6)	(6)	No	No	No
Dundee City Council	White Top Centre	Adult Respite	DHSCP	06.01.17	6	(6)	(6)	6	No	No	No

SUPPORT SERVICE – NOT CARE AT HOME

Alzheimer Scotland	Alzheimer Scotland – Action on Dementia	Support services – not care at home	Vol	17.03.16	6↑	6	6	5	No	No	No
Bield Housing Association	Housing Support North & East	Support services – not care at home	Vol	Last inspected 18.03.16							
Capability Scotland	Capability Scotland Dundee	Support services – not care at home	Vol	Last inspected 08.10.15							
Dundee City Council	Mackinnon Skills Centre	Support services – not care at home	DHSCP	Last inspected 07.03.16							
Dundee City Council	Oakland Centre	Support services – not care at home	DHSCP	28.09.16	6↑	(5)	6↑	(5)	No	No	No
Dundee City Council	White Top Centre	Support services – not	DHSCP	Last inspected 10.12.15							

		care at home									
Dundee City Council	Wellgate Day Support Service	Support services – not care at home	DHSCP	25.02.16	6↑	6↑	6↑	6↑	No	No	No
Gowrie Care Ltd	Dundee College Support	Support services – not care at home	Vol	Last inspected 12.11.15							
Jean Drummond Centre	Jean Drummond Day Centre	Support services – not care at home	Vol	Last inspected 04.02.15							
Mid-Lin Day Care Limited	Mid-Lin Day Care	Support services – not care at home	Vol	27.09.16	5	(5)	4	(4)	No	No	No
Penumbra	Dundee Nova Project	Support Service	Vol	19.05.16	6	(4)	6	(5)	No	No	No
Scottish Autism	Autism Outreach Service (Dundee)	Support services – not care at home	Vol	Last inspected 20.01.15							
Sense Scotland	Hillview Resource Centre	Support services – not care at home	Vol	Last inspected 15.04.14							

SUPPORT SERVICES – WITH CARE AT HOME

Acasa Care Ltd		Support services – care at home	Private	08.03.17	5↑	-	5	(4)	No	No	No
Allied Healthcare Group Ltd	Allied Healthcare (Dundee)	Housing Support	Private	14.04.16	4↓	-	(5)	4	No	Yes	No
Avenue Care Services Ltd		Support services – care at home	Private	10.10.16	4	-	4	3	Yes	Yes	No
				Follow up 16.03.17	(4)		(4)	(3)	No	No	No
Bield Housing & Care	Dundee Housing with Care	Support services – care at home	Vol	14.12.16	5	-	5	(5)	No	No	No
Blackwood Homes and Care	Blackwood Care – Tayside Services	Support services – care at home	Vol	19.01.17	3↓	-	3↓	3↓	Yes	Yes	No
British Red Cross	Scotland East Service	Housing support service – care at home	Vol	20.07.16	4	-	4	4	No	No	No
Caledonia Housing Association Ltd	Caledonia Care at Home Service	Support services – care at home	Vol	28.03.17	3↓	-	3↓	(4)	Yes	No	No
Capability Scotland	Community Living & Family Support Services (Dundee)	Support services – care at home	Vol	09.05.16	5	-	5	(5)	No	No	No
Cornerstone	Support Service: Care at	Support Services – care at home	Vol	24.03.17	4	-	4	4	No	No	No

	Home Dundee, Perth and Angus										
Crossroads Caring Scotland	Crossroads Caring Scotland - Dundee	Support services – care at home	Vol	16.03.17	3↓	-	3↓	3	Yes	Yes	No
Dundee City Council	Homecare Social Care Response Service	Care at Home and Housing Support	DHSCP	01.09.16	5	-	(5)	5	No	No	No
Dundee City Council	Home Care Locality Teams and Housing with Care – East	Care at Home and Housing Support	DHSCP	24.03.17	5	-	(5)	5	No	No	No
Dundee City Council	Home Care Locality Teams and Housing with Care	Care at Home and Housing Support	DHSCP	22.02.17	5	-	(5)	5	No	No	No

Dundee City Council	Home Care Enablement and Support & Community MH Older People Team	Care at Housing and Housing Support	DHSCP	08.12.16	5	-	5	(5)	No	No	No
Elite Care (Scotland) Ltd	Support Service	Care at Home and Housing Support	Private	24.11.16	5	-	(5)	4↓	No	No	No

Gowrie Care Ltd	Gowrie Homecare	Support service – care at home	Vol	-	New service – registered 13.06.16						
The Inclusion Group (Dundee)	The Inclusion Group	Support Services – care at home	Vol	25.11.16	4	-	3↓	3↓	No	No	No
My Care Tayside		Housing support service – care at home	Private	29.11.16	5↑	-	5↑	5↑	No	No	No
Oran Home Care Ltd	Oran Home Care	Support services – care at home	Private	20.05.16	4↑	-	4↑	4↑	No	Yes	No
Scottish Association for Mental Health	Dundee Specialist Mental Health Outreach	Care at home/ housing support	Vol	16.02.17	5	-	5	(5)	No	No	No

CARE AT HOME / HOUSING SUPPORT (COMBINED)

Balfield Properties t/a Westlands	Westlands	Care at Home/ Housing Support	Private	05.04.16	6↑	-	6↑	(5)	No	No	No
Caalcare Limited	Rose Lodge	Care at Home/ Housing Support	Private	15.06.16	6	-	6	6	No	No	No
Carr Gomm	Support Services 2	Care at Home/ Housing Support	Vol	02.02.17	5	-	4	(4)	Yes	No	No
Cornerstone	Dundee and Angus Services	Care at Home/ Housing Support	Vol	03.03.17	4	-	5↑	(4)	No	No	No
Dudhope Villa	Dudhope Villa and Sister Properties	Care at Home/ Housing Support	Private	09.05.16	3↑	-	3↑	3↑	Yes	No	No
				24.11.16 follow up	(3)		(3)	(3)	No	No	No

Dundee City Council	Dundee Community Living	Care at Home/ Housing Support	DHSCP	04.11.16	6	-	(6)	(6)	No	No	No
Dundee City Council	Supported Living Team	Care at Home/ Housing Support	DHSCP	22.12.16	6	-	6	(6)	No	No	No
Dundee City Council	Weavers Burn	Care at Home/ Housing Support	DHSCP	25.05.16	2↓	-	3	2↓	Yes	No	No
				03.11.16 follow up	(2)	-	(3)	(2)	No	Yes	No
				16.03.17 follow up	3↑	-	3↑	3↑	No	No	No
Gowrie Care	Dundee Central	Care at Home/ Housing Support	Vol	27.06.16	6	-	6	(6)	No	No	No
Gowrie Care	Dundee East	Care at Home/ Housing Support	Vol	05.08.16	6	-	6	(6)	No	No	No
Gowrie Care	Dundee West	Care at Home/ Housing Support	Vol	22.06.16	5↓	-	(6)	5↓	No	No	No
Gowrie Care	Dundee North	Care at Home/ Housing Support	Vol	19.10.16	6	-	6	(6)	No	No	No
Gowrie Care	Homeless Services	Care at Home/ Housing Support	Vol	13.05.16	5	-	(5)	4↓	No	No	No
Jericho Society	Jericho Society Dundee	Housing Support	Vol	12.10.16	4	-	(4)	4	No	No	No
The Richmond Fellowship Scotland	Angus and Dundee	Care at Home/ Housing Support	Vol	01.06.16	6↑	-	6	(6)	No	No	No
Sense Scotland	Supported Living: Dundee 1	Care at Home/ Housing Support	Vol	-	Registered 24.10.16						

	and surrounding areas										
Sense Scotland	Supported Living Dundee 2 and surrounding areas	Care at Home/ Housing Support	Vol	15.11.16	4↓	-	4↓	3↓	No	Yes	No
Sense Scotland	Supported Living Dundee 3 & surrounding areas	Care at Home/ Housing Support	Vol	-	Registered 24.10.16						
Scottish Autism	Balunie Avenue	Support Services – Care at Home	Vol	22.12.16	5	-	(6)	5	No	No	No
Turning Point Scotland	Dundee	Housing Support Service	Vol	16.01.17	6	-	(6)	6	No	No	No
Transform Community Development		Housing Support Service	Vol	16.06.16	3↑	-	4↑	3	Yes	No	No
				04.01.17 follow up	(3)	-	(4)	(3)	No	No	No

KEY:

- 6 excellent
- 5 very good
- 4 good
- 3 adequate

2 weak
1 unsatisfactory

↕ signifies that the grade has improved since the previous inspection
↕ signifies that the grade has fallen since the previous inspection
no arrow signifies the grade has stayed the same grade
where there is no grade this signifies that the theme was not inspected

APPENDIX 2

**DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP
DUNDEE REGISTERED CARE SERVICES FOR ADULTS (EXCLUDING CARE HOMES)
CARE INSPECTORATE REQUIREMENTS 2016-2017**

Date of Inspection	Name of Org/Service	Service Type	Quality of Care & Support	Quality of Environment	Quality of Staffing	Quality of Management & Leadership
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09.05.16 / 24.11.16*	Dudhope Villa & Sister Properties	Care at Home/ Housing Support	3	n/a	3	3
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Requirements

- 1) The provider must ensure that each person using the service has a plan in place with details the agreed support arrangements. Such plans must (a) be outcome focused; (b) detail the service user's strengths and abilities and where staff support is required to achieve their potential; (c) demonstrate how the service user is being supported to have increased autonomy in their life.
- 2) In order to promote choice and autonomy the provider must ensure that service users are provided with clear information relating to their financial affairs. Plans of support must fully detail the service user's income and expenditure.
- 3) To ensure the health and wellbeing of service users, the provider must record each person's individual support hours within plans of support and have a system in place to ensure these hours of support are delivered.
- 4) To ensure the health and wellbeing of service users the provider must have a robust procedure for recording and reporting of incidents. To achieve this the provider must:
 - a) Ensure all staff are aware of what would constitute a reportable incident
 - b) Improve incident report forms to be clear about who is responsible for completing the incident report including dates and signatures; follow a standard process which allows for reporting actual events, impact on staff and other service users and strategies to avoid a repeat occurrence; consider whether a report should be made to other organisations such as the Care Inspectorate and other relevant professionals involved in the service user's support and timescales in which these should be made; consider whether the person's plans of support or risk assessments need to be updated
 - c) Ensure that any changes to a person's plan of support or risk assessment is made immediately and communicated to all staff.
- 5) The provider must ensure that staff are suitably qualified and receive appropriate training to ensure they can deliver service users' care in a safe, respectful and supportive manner. In order to comply the provider must:
 - a) Demonstrate that all staff receive appropriate training to carry out the work they are to perform. This must include individual training plans for all staff and clear mandatory training requirements for each post and the frequency of appropriate refresher training.
 - b) Implement a written staff training plan to meet the training needs identified. This plan must include refresher training, be informed from staff appraisals and supervision and evidence ongoing staff development to improve knowledge and skills in areas such as outcomes, person centred planning, enablement and recovery.
 - c) Ensure that there is an effective system in place to monitor that staff are implementing the care service's policies and procedures and to identify where further training and support is necessary.
- 6) The provider must ensure that its quality assurance methods are robust and effective.
- 7) To ensure the service is delivered in a way which promotes choice, autonomy and enablement the provider should develop a systematic approach to service improvement including drawing up an action plan with timescales.

*The follow up inspection held on 24 November 2016 was to ascertain if requirements had been met.

Requirements 1-5 were met. Requirements 6 and 7 were not met. The grades remained the same as those awarded at inspection held on 9 May 2016.

25.05.16	Weavers Burn	Care at Home/Housing Support	2	No grade available	3	2
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Requirements

The provider must ensure that each service users health, welfare and support needs are met in accordance with their assessed needs. In order to achieve this the provider must ensure that:

- there are suitably qualified staff, both in number and skill, on duty at all times
- a process is in place to accurately assess the needs of each individual service user
- all risks to each individual service users' health and welfare are accurately assessed and managed
- the physical layout of the building (living environment) is taken into account in the management of risk to each individuals' health and welfare.

The provider must ensure that service users' personal plans reflect how staff will meet the health, welfare and safety needs of the person and that any specific guidance from other professionals and stakeholders must be reflected within each plan to ensure that staff have all the information required to support people safely and effectively.

The provider must ensure that each service users' health, welfare and support needs are met in accordance with their assessed needs. In order to achieve this the provider must ensure that:

- where a guardianship order is in place, that all information relating to the powers of the guardian are clearly recorded

The provider must ensure that staff supervision is carried out in line with the provider's policies and procedures and a system is in place to record when supervision sessions had taken place and when they were due.

The provider and manager should ensure that the service has robust quality assurance processes and that audits and checks are completed within stated timescales and clearly evidence how any issues identified are to be addressed by whom and by when. The manager should sign these to evidence that they have been completed and issues are addressed.

16.06.16/ 04.01.17*	Transform Community Development	Care at Home/ Housing Support	3	n/a	4	3
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Requirements (4)

1) To ensure the health and wellbeing of service users the provider must have a robust procedure for recording, reporting and analysis of incidents. To achieve this the provider must:

- a) improve incident report forms to
 - be clear about who is responsible for completing the incident report including dates and signatures
 - follow a standard process which allows for reporting actual events, impact on staff and other service users and strategies to avoid a repeat occurrence
 - consider whether a report should be made to other organisations such as the Care Inspectorate and other relevant professionals involved in the service user's support and timescales in which these should be made
 - consider whether the person's plans of support or risk assessments needs to be updated
- b) ensure that any changes to a person's plan of support or risk assessment is made immediately and communicated to all staff
- c) be quality assured by the registered manager

- d) ensure post incident analysis takes place for significant events. These should be recorded and detail any further action required to prevent a reoccurrence
- 2) The provider must develop a robust adult support and protection policy which includes details of potential harm, staff responsibilities and local contact numbers.
 - 3) The provider must ensure that quality assurance methods are robust and effective.
 - 4) The provider must ensure that all notifiable incidents and accidents are reported to the Care Inspectorate as per guidance "Records all services (excl CM's) must keep and notification reporting".

*The follow up inspection held on 4 January 2017 was to ascertain if requirements had been met. Requirement 1 was not met. Requirements 2 and 3 were met. The grades remained the same as those awarded at inspection held on 16 June 2016.

10.10.16	Avenue Care Services Ltd	Support Services- with care at home	4	n/a	4	3
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Requirement (1)

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

The follow up inspection held on 16 March 2017 was to ascertain if requirements had been met. As a result of a number of complaints the following requirements were made and reported on at follow up inspection on 16 March 2017:

- 1) The service must ensure that all observations made by staff that would indicate that a service user requires medical assessment or treatment are reported and acted upon promptly.
- 2) The service must ensure that all service users have a care plan which sets out how their needs will be met. In order to achieve this the service must:
 - Ensure the plan is developed in full consultation with the service user and/or their relative/representative
 - Review and update the care plan in line with changes in the service user's needs
- 3) Same as above requirement with addition of:
 - Ensure that the specific moving and handling needs of the service user have been assessed, recorded and that appropriate risk assessments are in place.
- 4) The provider must ensure that the service is provided at the agreed times, and in such a way that it meets the identified needs of the service user as agreed in the support plan.
- 5) The provider must make proper provision for the health, safety and welfare of service users. In order to do so, the provider must ensure the service has staff with experience and the time required to effectively manage and monitor the service. The service should have appropriate quality assurance systems in place. Staff are also required to be suitably qualified and competent.

Requirement 1 was met. Requirements 2-5 were not met.

19.01.17	Blackwood Care (Margaret Blackwood)	Care at Home/ Housing Support	3	n/a	3	3
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Requirements (4)

- 1) The provider should ensure that all service users have an up-to-date personal plan in their homes.
- 2) The service should ensure that where a person has a scheduled visit there are systems in place to ensure that this takes place and that if a visit is missed the service knows about it quickly and can take steps to ensure that person is safe and supported.
- 3) The service should re-activate those practices which it previously undertook to support staff to ensure that they are carrying out good practice. These include team meetings, 1:1 supervision and observation of staff working in the community. This will ensure that the service is provided in a manner that promotes quality for service users.
- 4) The service should review the procedure and practice for taking on new customers and consider the

impact on existing as well as new customers.

02.02.17	Carr Gomm	Care at Home/ Housing Support	5	n/a	4	(4)
Requirements (3) <ol style="list-style-type: none"> 1) The Provider must ensure that medication is administered safely and recorded properly. They must: <ul style="list-style-type: none"> - CS2004077164 - Ensure that the correct medication is given at the correct time - Ensure that the medication is taken - Ensure that this is recorded and signed 2) The service user must ensure that it adheres to its conditions of registration with SCSWIS by ensuring that staff do not use a service user's home as an office base or as a venue for other staff meetings. 3) The Care Inspectorate must be notified of any incident that has the potential to have serious implications on the health, well-being or safety of service users. The provider is required to ensure that notifications are made in-line with Records that all registered services (excluding childminders) must keep and guidance on notification reporting, available on the Care Inspectorate website. 						

16.03.17	Crossroads Caring Scotland - Dundee	Care at Home/ Housing Support	3	n/a	3	3
Requirements (2) <ol style="list-style-type: none"> 1) The Provider must ensure that personal support plans are reviewed with individuals and their relatives or representatives where appropriate at least six-monthly and more frequently if people's needs change significantly or they ask for a review. 2) Supported people will experience a good quality care at home service that will help them meet their goals and outcomes in their everyday life. The provider must develop a system by which the manager of the service has comprehensive oversight of all aspects of the care provided. In order to achieve this, the provider must: <ol style="list-style-type: none"> a) Develop an improvement plan which demonstrates how they will address, monitor and maintain progress toward improvements across the service as a whole. b) Provide clear evidence of outcomes of quality assurance audits and views of service user/representatives and stakeholders contributing to continuous service improvement. c) Must ensure overall management oversight of the improvement plan with clear timescales of when progress is to be achieved stating clearly responsibilities for actions. d) Ensure that the Care Inspectorate receives regular updates with regards progress toward identified goals. 						

28.03.17	Caledonia Care at Home Service	Support services – care at home	3	n/a	3	(4)
Requirements (3) <ol style="list-style-type: none"> 1) The Provider must ensure that people's assessed needs are met. The service needs to advocate for people's needs to be met in a timely multi agency way. People need to know exactly what care they can expect from the service before moving in and the service needs to consistently meet these needs for the duration of the time the person receives a service or ensure that other organisations do so. People need to have individual service contracts. Where a service user's needs are not met then the provider needs to hold a multi agency meeting and needs to complete a multi agency plan by 8 May 2017. This will involve the Local Authority and Advocacy Services. 2) The provider must ensure in meeting this requirement that tenants can be confident that their individual needs are met and acted upon. 3) The Provider must ensure in meeting this requirement that tenants can be sure that all staff have 						

appropriate skills and knowledge, that the service has the necessary policies in place and is aware of its reporting duties to the Care Inspectorate.

28.03.17	Caledonia Housing Association	Housing Support Service	4	n/a	4	(4)
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Requirements (1)

- 1) The Provider must ensure in meeting this requirement that tenants can be confident that their individual needs are met and acted upon

Legend:

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

() this signifies that the theme was not assessed at this inspection therefore grade 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:	24 October 2017	Committee Report Number:	PAC34-2017
Title of document being assessed:	Dundee Registered Care Services for Adults (excluding Care Homes)		
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 Dundee registered care services for adults during 2016-2017		
3. What is the intended outcome of this policy, procedure, strategy or practice?	Continue to support the partnership approach to quality improvement 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		
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)	Diane McCulloch Kathryn Sharp Rosalind Guild Lynsey Webster		
7. Is there a need to collect further evidence or to involve or consult	No		

<p>protected characteristics communities on the impact of the proposed policy?</p> <p>(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?)</p>	
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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
Race, 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 services which has resulted in an improvement in 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 services will continue to be inspected by Care Inspectorate and monitored and reviewed by Dundee Health and Social Care Partnership</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 type="checkbox"/>
Guidelines and Protocols	<input type="checkbox"/>
Other – Performance and monitoring report	<input checked="" type="checkbox"/>

Manager Responsible	Author Responsible
Name: Dave Berry	Name: Rosalind Guild
Designation: Chief Finance Officer	Designation: Contracts Officer
Base: Floor 2 Dundee House	Base: Floor 2 Dundee House
Telephone: 01382 433608	Telephone: 01382 433665
Email : dave.berry@dundeecity.gov.uk	Email : rosalind.guild@dundeecity.gov.uk

Signature of author of the policy: Rosalind Guild	Date: 08/11/17
Signature of Director/Head of Service: Dave Berry	Date: 08/11/17
Name of Director/Head of Service: Dave Berry	
Date of Next Policy Review:	