

Bridgend County Borough Council

Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr

21 MAY 2015



Civic Offices, Angel Street, Bridgend, CF31 4WB / Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont, CF31 4WB

The Older People's Commissioner for Wales
Cambrian Buildings
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CF10 5FL

Chief Executive / Prif Weithredwr
Direct line / Deialu uniongyrchol: (01656) 642616
Ask for / Gofynnwch am: Darren Mephram

Our ref / Ein cyf: DM/jc
Your ref / Eich cyf:

Date / Dyddiad: 15th May 2015

Dear Sarah

RE: A Place To Call Home? Additional Information Required from Bridgend County Borough Council

Following receipt of your letter requesting 'Additional Information Required' relating to the Western Bay region's 'A Place to Call Home - Required Actions' document, we are pleased to enclose a draft collaborative response encompassing City & County of Swansea, Neath Port Talbot County Borough Council, Bridgend County Borough Council and Abertawe Bro Morgannwg Health Board (ABMU HB). The enclosed information meets statutory requirements for Bridgend County Borough Council and is a collaborative approach with the other organisations in Western Bay.

Following agreement from yourself, a collaborative response from Western Bay has been resubmitted in relation to point 2.2 which was previously evaluated as unacceptable and has been redrafted with information from the four organisations and which you have already received.

We have again collaborated across Western Bay on the remaining points that were previously submitted and evaluated as partially acceptable and have addressed the comments as requested including the following:

- Ensuring comprehensive timeframe for implementing the All Wales assessment to deliver specialist care home continence support is in place
- Further detail on workforce development across the sector including development of co-production training programmes with partner providers to ensure improved quality of life for residents
- Further detail on the Regional Quality Framework with a tangible time line of planned implementation across Western Bay
- Commitment to widening data collection to include quality of life and care of older people in care homes in order to evaluate performance

In the interest of keeping the action plan realistic, we have aimed to keep our response clear and direct in terms of next steps. However, if you would like further information on any of the enclosed points, please do not hesitate to contact us for a more detailed narrative.

Western Bay has continued to work closely in order to deliver a consistent high quality person centred approach across the region regardless of individual postcode. This work is being monitored and accelerated forward within our Care Homes Commissioning Task & Finish Group that is attended by members of staff from the four organisations across the region and across relevant departments. The

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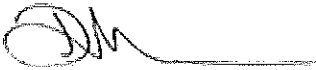
Text relay: Put 18001 before any of our phone numbers for the text relay service

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attached document in conjunction with our previously identified actions will act as the Western Bay detailed action plan with tasks assigned to specific individuals to ensure the deadlines for completion are upheld. This group is also overseeing the aforementioned work of developing a Regional Care Home Commissioning Strategy and a subgroup to ensure consistency of content relating to each organisation has been established.

As previously outlined, our intent as Western Bay partners is to continue to work collaboratively and in coproduction with providers, citizens and their families and national partners to develop and improve quality of life for care home residents. We would, of course, welcome further discussions with you at any stage as we take this work forward.

Yours sincerely

A handwritten signature in black ink, appearing to be 'DM', followed by a horizontal line extending to the right.

Darren Mepham
Chief Executive

**WESTERN BAY COMPLIANCE WITH THE OLDER PERSONS COMMISSIONER FOR WALES REPORT –
A PLACE CALLED HOME MAY 2015**

Recommendation	Aspiration / Aim	Action required to achieve	By Who	By When	RAG Status
<p>Key Conclusion 1: Too many older people living in care homes quickly become institutionalised. Their personal identity and individuality rapidly diminishes and they have a lack of choice and control over their lives.</p> <p>1.3 Specialist care home continence support should be available to all care homes to support best practice in continence care, underpinned by clear national guidelines for the use of continence aids and dignity.</p> <p>April 2015</p> <p>The appraisal from the OPC outlined that there is no clear timeframe for the completion of the actions of the review outlined in the WB response</p>	<p>The All Wales assessment is utilised across the HB footprint</p> <ul style="list-style-type: none"> ➤ In residential care settings the assessment is carried out annually by The Health Board teams. ➤ In nursing the assessment will be carried out by the nurses within the care home. <p>Referrals from care homes for specialist continence assessment are received and responded to by a specialist continence practitioner who will support staff and develop management plans for each individual.</p>	<p>Continence Steering Group Terms of Reference to be revised to ensure the National guidelines are considered in the context of the Care Home environment.</p> <p>Review current Service Provision and resource within the HB and undertake a gap analysis to support the future service development of more specialist services</p> <p>A training needs analysis to be undertaken to support the development of a more robust training plan for the care home sector.</p> <p>Work with independent provider partners to ensure the All Wales Assessment is used.</p>	<p>Chair of Continence Steering group</p> <p>Head of Nursing & HB Lead for continence</p> <p>Long Term Care Managers & HB Lead for continence</p> <p>Long Term Care Managers</p>	<p>Sept 2015</p> <p>Dec 2015</p> <p>Mar 2016</p> <p>April 2016</p>	<p>Work under way</p>

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		<p>Review and agree in partnership with providers a clear standard for Continence Care to sit within the Regional Quality Framework for Care Homes and review the Health Boards Continuing Care Contract to ensure Continence management is embedded within a Holistic assessment.</p>	<p>Head of Nursing & CHC Contracting leads within the 3 localities</p>	<p>April 2016</p>	
<p>Key Conclusion 3: The emotional frailty and emotional needs of older people living in care homes are not fully understood or recognised by the system and emotional neglect is not recognised as a form of abuse.</p>					
<p>3.4 In-reach, multidisciplinary specialist mental health and wellbeing support for older people in care homes is developed and made available, including:</p> <ul style="list-style-type: none"> ➤ An assessment of the mental health and wellbeing of older people as part of their initial care and support plan development and their on-going care planning. ➤ Explicit referral pathways and criteria for referral. ➤ Advice and support to care staff about how to care effectively for older people with mental wellbeing and mental health needs, including 	<p>To reduce variation across Western Bay in provision of assessment and advice to care home staff in relation to residents with mental health issues.</p>	<p>To review current assessment process models across WB and provide support and training to ensure physical emotional and social needs fully assessed with clear referral pathways for mental health and emotional well being.</p>	<p>Head of adult Social Care Clinical Lead for Older Persons Mental Health Services & Head of Nursing</p>	<p>April 2016</p>	

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<p>dementia and when to make referrals.</p> <ul style="list-style-type: none"> ➤ All residents on anti-psychotics are monitored and assessed for potential withdrawal and reviews are conducted in line with NICE guidelines. <p>April 2015</p> <p>The appraisal from the OPC outlined that the intention could have been strengthened by the inclusion of accountable individuals and specific timelines, e.g. the implementation of the QAF and consideration being given to building access to specialist services into contracts</p>	<p>To be able to identify patients currently on antipsychotic medication</p> <p>Develop new ways of working to support reviews in line with NICE guidelines</p>	<p>A training needs analysis to be undertaken to support the development of a more robust training plan for the care home sector.</p> <p>Work in collaboration with GP practices to review numbers of patients prescribed antipsychotics.</p> <p>Develop a process for notification by the care home to the LTC managers when patients are newly prescribed antipsychotic medication</p> <p>Deliver training to GP's in line with best practice as per Andrews recommendations</p>	<p>Long Term Care Managers & Lead for Older Persons MH</p> <p>Heads of Primary Care & Planning & Clinical Directors</p> <p>Heads of Primary Care & Planning & Head of Integrated Medicine Management</p>	<p>June 2016</p> <p>Dec 2015</p> <p>April 2016</p>	<p></p>

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<p>3.5 Information is published annually about the use of anti-psychotics in care homes, benchmarked against NICE guidelines and Welsh Government Intelligent Targets For Dementia.</p> <p>April 2015</p> <p>The appraisal from the OPC outlined that there is no clear strategic direction outlined nor timescales or leads identified</p>	<p>ABMU HB will publish an annual report on the use of antipsychotics in its care homes, in order that this may be benchmarked against NICE guidelines and WG intelligent targets.</p>	<p>Establish systems and processes to collate monthly data.</p> <p>Review the model in Bridgend whereby audit clerks collate prescribing data and consider the use of an enhanced service to address this</p>	<p>Heads of Primary Care & Planning & Head of Integrated Medicine Management</p>	<p>April 2016</p>	<p>Build on Bridge and model</p>
<p>Key conclusion 4: Some of the most basic healthcare needs of older people living in care homes are not properly recognised or responded to</p>					
<p>4.3 Care staff are provided with information, advice and, where appropriate, training to ensure they understand and identify the health needs of older people as well as when and how to make a referral.</p> <p>April 2015</p> <p>The appraisal from the OPC outlined that there were not clear timescales for the role out of the frailty training for care home staff, and no lead professional was identified</p>	<p>All registered nursing staff and residential care managers within the care home setting will be provided with information advice and training to be confident and competent to identify health needs of older people.</p>	<p>Agree with partner providers a delivery program for frailty training</p> <p>Ensure care home staff are aware of and have access to other older persons related training i.e. Andrews Values, and Older Persons Standards training</p>	<p>Long Term Care Managers & Nurse practitioners for elderly care</p> <p>Long Term Care Managers</p>	<p>April 2016</p> <p>Dec 2015</p>	
	<p>Referral pathways to be clear and consistent across the HB and all care homes to be made aware of same.</p>	<p>All three areas now have single point of access for community services the</p>	<p>Long Term Care Managers</p>	<p>Aug 2015</p>	

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<p>4.4 Upon arrival at a care home, older people receive medication reviews by a clinically qualified professional, with regular medicine reviews undertaken in line with published best practice April 2015 The appraisal from the OPC recognised the commitment to review the current GP enhanced service specification fro care homes but requests clear actions, timescales and mechanisms for performance monitoring</p>	<p>Develop a process to ensure all older people receive a medication review by a clinically qualified professional on arrival at a care home with ongoing regular reviews.</p>	<p>Review and map out current processes and identify gaps Consider new ways of working (hybrid model: GP LES and community pharmacist model) increasing pharmacy input into the Care Home Sector</p>	<p>Heads of Primary Care & Planning & Head of Integrated Medicine Management</p>	<p>Sept 2015 June 2016</p>	<p></p>
<p>Key conclusion 6: Commissioning, inspection and regulation systems are inconsistent lack integration openness and transparency and do not formally recognise the importance of quality of life</p>					
<p>6.2 Care home providers, commissioners and CSSIW should develop informal and systematic ways in which to ensure they better understand the quality of life of older people, through listening to them directly (outside of formal complaints) and ensuring issues they raise are acted upon.</p>	<p>Building on work already undertaken in BCBC over the last 5 years monitoring against agreed quality standards in their care homes, as part of the emerging Regional Quality Framework, individual's reported experience outcomes are captured, measured and acted on, with appropriate feedback. The RQF will set clear high level outcomes for</p>	<p>To implement the Western Bay Quality Assurance Framework</p>	<p>Head of Nursing & Head of Adult Social care</p>	<p>April 2016</p>	<p>Work under way</p>

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<p>Annual reporting should be undertaken of how on-going feedback from older people has been used to drive continuous improvement (see action 6.10). April 2015</p> <p>The appraisal from the OPC acknowledged that the response included a commitment to explore the options to improve feedback and monitor quality standards but actions and timescales were not clear</p>	<p>residents and describe the measures and indicators to help the sector improve in a planned way.</p> <p>Link with care homes across the region to explore opportunities to make aspects of RQF assessment available to the public.</p> <p>Work on the quality assurance questionnaire responses will be analysed and decisions made to amend the current format will be considered once the results are known. The questionnaire may be modified to compliment the implementation of the Western Bay RQF framework.</p>	<p>Develop a standardised process for capturing patient report experience outcomes</p> <p>Agree mechanisms for sharing learning and acting on issues raised</p> <p>Develop standardised feedback mechanisms for clients and families</p> <p>Develop a process for feedback from monitoring visits to staff and service users</p> <p>Develop standardised mechanism across the region.</p> <p>Analyse responses from previous 12 months to inform improvement usage of questionnaire</p>	<p>Head of Nursing & Head of Adult Social care</p> <p>Head of Nursing & Head of Adult Social care</p> <p>Head of Nursing & Head of Adult Social care</p> <p>Local Authorities Contracting Officers</p> <p>Local Authorities Contracting Officers</p>	<p>Dec 2015</p> <p>June 2016</p> <p>June 2016</p> <p>Sept 2015</p> <p>June 2016</p> <p>Sept 2015</p>	<p></p> <p></p> <p></p> <p></p> <p></p> <p></p>

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<p>6.8 Health Boards include the following information relating to the quality of life and care of older people in residential and nursing care homes in their existing Annual Quality Statements:</p> <ul style="list-style-type: none"> • the inappropriate use of antipsychotics • access to mental health and wellbeing support • number of falls • access to falls prevention • access to reablement services • support to maintain sight and hearing <p>Further areas for inclusion to be developed as part of the AQS guidance published annually. April 2015</p> <p>The appraisal from the OPC states that we have no mechanism in place to collect KPI's in relation to care homes</p>	<p>To ensure the HB reports on the quality of life and care of older people in residential and nursing care homes in its Annual Quality Statement:</p>	<p>Develop a standardised set of performance indicators in relation to commissioned placements Pilot a draft dashboard in each locality with a view to roll out</p>	<p>Head of Nursing & Head of Adult Social care Head of Nursing & Head of Adult Social care</p>	<p>April 2016 Sept 2015</p>	<p>Work already commenced on community dashboards</p>
<p>Key conclusion 7: A current lack of forward planning means that the needs of older people in care homes will not be met in the future</p>					
<p>7.3 The NHS works with the care home sector to develop it as a key part of the nursing career pathway, including providing full peer and professional development support to nurses working in care homes. April 2015</p>	<p>The Health Board considers the wider needs of the independent sector in the annual future workforce planning cycle with Welsh Government</p>	<p>Local workforce plans will be undertaken with care homes to inform the annual commissioning cycle for pre registration nursing numbers.</p>	<p>Long Term Care Managers</p>	<p>Dec 2015</p>	<p style="background-color: #cccccc;"></p>

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The appraisal from the OPC is that whilst there is intent in relation to a National approach, there is no information provided regarding how this will be achieved.					