

**Formal written notice issued under the Commissioner for Older People (Wales) Act 2006: Additional Information Required**

**Carmarthenshire County Council**

**Requirement for Action 1.6**

**Initial Conclusion - Partial**

*1.6 Older people are offered independent advocacy in the following circumstances:*

- *when an older person is at risk of, or experiencing, physical, emotional, financial or sexual abuse.*
- *when a care home is closing or an older person is moving because their care needs have changed.*
- *when an older person needs support to help them leave hospital.*

*For those with fluctuating capacity or communication difficulties, this should be non-instructed advocacy.*

*When a care home is in escalating concerns, residents must have access to non-instructed advocacy.*

**Feedback**

- ❖ Provides no analysis or evaluation of current advocacy services in relation to outcomes to older people
- ❖ There is no action plan or any identification of gaps and shortfalls in provision specifically relating to the Requirement.

**Improvement required:**

- ❖ Implementation plan, timeline and accountable named officers to provide assurances that this Requirement will be achieved.

<b>Action</b>	<b>By When</b>	<b>Responsible Officer</b>
The Authority will conduct an evaluation of current advocacy services; it will collate activity data from a range of 3 <sup>rd</sup> Sector organisations either commissioned or otherwise	November 2015	Neil Edwards  (Commissioning and Safeguarding Manager)

The Authority will analyse this data in order to identify shortfalls in provision and inform improvement agenda.	November 2015	Neil Edwards (Commissioning and Safeguarding Manager)
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### Requirement for Action 3.2

#### Initial Conclusion - Partial

*3.2 All care home employees undertake basic dementia training as part of their induction and all care staff and care home managers undertake further dementia training on an on-going basis as part of their skills and competency development, with this a specific element of supervision and performance assessment.*

#### Feedback

- ❖ The response indicates that four local authority care homes are taking part in a national programme to promote quality of life and dignity for older residents and have been awarded funding by the Burdett Trust for Nursing and Age Cymru Grant Programme.
- ❖ It is indicated that the care homes will use the award to run and develop a dignity programme for its residents, particularly for those who have a dementia. It is unclear how this is included as a specific element of supervision and performance assessment.

#### Improvement Required

- ❖ In order to ensure compliance, the Local Authority needs to clarify this point.

Action	By When	Responsible Officer
The skills and competencies of care staff are evaluated through routine supervision. The impact of the dementia training will also be monitored through reflective practice sessions which will be held quarterly.	Commencing September 2015	Gail Jones (Senior Manager Provider Services)

### Requirement for Action 3.3

#### Initial Conclusion – Partial

*3.3 Active steps should be taken to encourage the use of befriending schemes within care homes, including intergenerational projects, and support residents to retain existing friendships. This must include ensuring continued access to faith based support and to specific cultural communities*

#### Feedback

- ❖ The response does not address gaps and short falls.

#### Improvement Required

- ❖ It would be improved with an implementation plan, timeline and accountable named officers to provide assurances that this Requirement will be achieved

Action	By When	Responsible Officer
An audit will be undertaken of all Local Authority Care Homes which will identify the spectrum of opportunities and activities available to meet this requirement. This will also allow identification of shortfalls in service provision and inform improvement agenda	November 2015	Gail Jones (Senior Manager Provider Services)
The Authority will also include the Requirement as part of its quality monitoring programme for independent sector homes.	Progress over the next year	Neil Edwards (Commissioning and Safeguarding Manager)

## Requirement for Action 5.6

### Initial Conclusion – Partial

*5.6 A National Improvement Service is established to improve care homes where Local Authorities, Health Boards and CSSIW have identified significant and/or on-going risk factors concerning the quality of life or care provided to residents and/or potential breaches of their human rights.*

*The national improvement team should utilise the skills of experienced Care Home Managers, as well as other practitioners, to provide intensive and transformational support to drive up the standards of quality of life and care for residents as well as to prevent and mitigate future safeguarding risks. This service should also develop a range of resources and training materials to assist care homes that wish to improve in self-development and on-going improvement.*

### Feedback

- ❖ The Local Authority response does not demonstrate a willingness to comply with the requirement; rather, the response states that care homes that want and need to improve the quality of life and care of older people have access to specialist advice, resources and support that leads to improved care and reduced risk.
- ❖ The response indicates that the Local Authority has developed joint working arrangements with a range of partner agencies including CSSIW, Community Nurses, Care Home Support and Nurse Assessors, CPN's, Police etc, along with internal teams, to ensure a coordinated and swift response to areas of concern, actually reducing the numbers entering into "Escalating Concern" or facing a suspension of placements.

### Improvement Required

- ❖ Further clarity is required about whether the Local Authority intends to comply with this requirement, or not.

Action / Comment
The Authority is committed to complying with this requirement on establishment of the National Improvement Service. Moreover, the Authority continuously strives to promote and improve the health and wellbeing of its residents and as such is developing a training programme which will ensure continuous improvement.

## Requirement for Action 6.2

### Initial Conclusion – Partial

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. Annual reporting should be undertaken of how on-going feedback from older people has been used to drive continuous improvement (see action 6.10).

### Feedback

- ❖ Specific evidence is not provided with regard to using older people's voices as a driver for change.

### Improvement Required

- ❖ The response would be improved with an analysis of current practice and options to address shortfalls and gaps and named accountable officers to provide assurances that these actions are and will continue to improve outcomes for older people.

Action	By When	Responsible Officer
The Authority is embarking on a comprehensive programme of interviewing service users and their families about the quality of service provided. This has been identified as a key performance management measure and its analysis will contribute to robust review of service provision to inform improvement agenda.	Commence June 2015 as part of an ongoing programme of improvement	Neil Edwards (Commissioning and Safeguarding Manager)

## Requirement for Action 6.7

### Initial Conclusion – Unacceptable

6.7 Annual Quality Statements are published by the Director of Social Services in respect of the quality of life and care of older people living in commissioned and Local Authority run care homes. This should include:

- the availability of Independent Advocacy in care homes

- *quality of life and care of older people, including specific reference to older people living with dementia and/or sensory loss*
- *how the human rights of older people are upheld in care homes across the Local Authority*
- *the views of older people, advocates and lay assessors about the quality of life and care provided in care homes*
- *geographic location of care homes*

*Further details of reporting requirements should be included as part of the Regulation and Inspection Bill.*

**Feedback**

- ❖ The Local Authority's response to this requirement does not commit to, or refer directly to producing Annual Quality Statements.
- ❖ does not clarify whether the local Authority is committed to producing an Annual Quality statement

**Improvement Required**

- ❖ Further clarity is required about whether the Local Authority intends to comply with the Requirement for Action or not.

<b>Action</b>	<b>By When</b>	<b>Responsible Officer</b>
The Authority will comply with this Requirement and will provide an Annual Quality Statement for 2015 / 2016 and which will be submitted through political scrutiny	June 2016	Neil Edwards  (Commissioning and Safeguarding Manager)

### **Compliance Plan Governance and Reporting Arrangements**

Named Responsible Officers for the Requirements will be required to report progress against the identified actions through current reporting arrangements within the Department

- ❖ Initially at Head of Service led Divisional Management meetings
- ❖ Escalated to Director led Departmental Management Team meetings.