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10 August 2015

Dear Mr Davies

### Care Home Review: Analysis of your final response

I am writing to thank you for providing a final response to my Requirements for Action, which I have now had an opportunity to analyse.

In analysing the response received, I was looking for assurance through the information provided and action in hand or planned that my Requirements for Action will be implemented and the intended outcomes will be delivered for older people.

Your response clearly demonstrates a commitment to delivering the change required that I outlined in my Care Home Review and clearly details action you have in place or will take to deliver the intended outcomes.

I am particularly pleased that your organisation has used the constructive feedback that I provided earlier in the year to improve your response. It is good to see that the Local Authority is working with the Health Board within some Requirements for Action.

Your organisation has proposed the proactive development of new services or processes which have the potential to progress as best

practice. For example, you have committed to developing and commissioning a new and improved advocacy service for older people living in care homes (Requirement for Action 1.6).

I am therefore satisfied that your organisation is already complying with the majority of my Requirements of Action or is committed to taking the action necessary to deliver the required change. However, I must note that there is still one area which requires further work to assure me that the required change and improvement will be delivered for older people. I would also expect to see the development of clear review and evaluation procedures to provide assurance at a senior level in your organisation that the required outcomes will be delivered.

Please find attached a detailed analysis of the additional information you have provided in response to my request.

As you are aware, I am obliged by the Commissioner for Older People (Wales) Act 2006 to keep a register of responses to my Requirements for Action and therefore all of the responses from the bodies subject to my Review will be published on my website together with the analysis of each response.

As I have already advised, I will be publishing an overall commentary on whether I consider that the change I expect to see on behalf of older people will be delivered across Wales and I intend to make a formal public statement in respect of this and action intended by individual bodies subject to the review. These statements will be made on 11 August.

It is not my intention to seek detailed updates on all of the action you have in hand, because of the level of assurance and commitment you have shown in securing these outcomes. It is therefore my intention to undertake a follow up review in 18 months' time at which stage I will be looking for tangible evidence that these outcomes have been consistently delivered across the care homes in your area (your action has been completed). I will, at a later stage, provide you with information on the scope and approach that I will adopt.

However, there are a number areas for which I will require interim updates and assurance and I will write separately to you in respect of what these are and how I will require this to be provided.

I look forward to continuing to work with you to ensure that older people living in care homes in Wales have the best possible quality of life and receive the highest standards of care.

Yours sincerely

A handwritten signature in black ink that reads "Sarah Rochira". The signature is written in a cursive style with a long, sweeping tail on the final letter.

**Sarah Rochira**  
**Older People's Commissioner for Wales**

## Conwy County Borough Council

### Requirement for Action 1.6

#### Final Conclusion - Acceptable

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.

The Local Authority's response to this Requirement for Action includes information not only on the current provision of advocacy, but of actions it intends to take in the near future to improve the provision of advocacy. For example, the Local Authority states that the Age Connects advocacy service currently includes non-instructed advocacy, and that the Local Authority can provide specific examples where advocacy has been used as part of both safeguarding and escalating concerns procedures.

Looking forward, I welcome that the Local Authority has committed to evaluating the current Age Connects advocacy provision and developing and commissioning a new and improved service for older people living in care homes. In addition to this, the Local Authority has committed to undertaking an audit of POVA processes in respect of the use of advocacy, and states that a new regional specification identifies the specific need to advocacy intervention for people where there is a concern in respect of capacity and communication .

I noted above that safeguarding and escalating concerns were situations in which advocacy was provided. Therefore, I would expect that in order to fully comply with the intended outcomes of this Requirement for Action,

that advocacy provision when an older person needs support to help them leave hospital will also be explicitly included within the new specification.

These current and future actions have the potential to ensure that older people are able to secure their rights and have their concerns addressed, particularly in situations where they are vulnerable. It is particularly good to see that the advocacy services that are offered to older people are specifically included within care plans. This should prove a useful way to track the reality of access to advocacy and how it is being used.

The response includes clear timelines for the completion of the actions noted, and also identifies an accountable individual. The clarity of this approach should enable the quality and impact of these services, and any changes made to them to be closely monitored by the Local Authority.

## **Requirement for Action 2.2**

### **Final Conclusion - Acceptable**

2.2 Older people in care homes have access to specialist services and, where appropriate, multidisciplinary care that is designed to support rehabilitation after a period of ill health.
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I welcome the integrated approach that the Local Authority has taken, both with neighbouring Local Authorities and also the Health Board, in order to ensure that older people have access to specialist services and multi-disciplinary care that is designed to support rehabilitation.

For example, the Local Authority has committed to roll out the 'integrated care and support plan' as a pilot in two colocated teams, with a plan to evaluate its success and roll out across the county. This integrated approach has the potential to ensure that older people receive the support that they need across both health and local authority provided services to enable them to maximise their independence and quality of life.

The Local Authority refers to the use of co-located teams that deliver co-ordinated support, which I welcome. However I note that while the response states that its integrated care pathway is not based on tenure, the response does state that it is negotiating the expansion of responses

into care homes. I must emphasise here, my expectation that all older people living in care homes should have equitable access to care from a multi-disciplinary, co-located team that is based on their need and not on their residence.

There are a number of other commitments that have the potential to improve access to specialist and multi-disciplinary care such as a discussion to roll out enablement training, and the expansion of the 'Well Being' programme into the care sector. Following these discussions I would also expect a clear plan of action to ensure access to these services for older people, particularly after a period of ill health.

The response includes clear timelines for the completion of the actions noted, and also identifies an accountable individual. The clarity of this approach should enable the quality and impact of these services, and any changes made to them to be closely monitored by the Local Authority.

### **Requirement for Action 3.2**

#### **Final Conclusion – Partial**

<p>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.</p>
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The response to this Requirement for Action from the Local Authority clearly demonstrates a commitment to improve staffs understanding of the physical and emotional needs of older people living with dementia.

For example, I welcome the development of a new Regional Service Specification for Care Homes which requires all new staff to undertake an induction demonstrating they have received basic dementia training, and the introduction of a Dementia Learning Plan which focusses on compulsory training at Level 2 and 3. The take up of new mandatory training will be monitored as part of the contract monitoring arrangements, and the Local Authority has committed to working with care home managers and owners to make the delivery of training more accessible.

Despite this commitment to improving access to dementia training for care staff, the response does not explicitly state that care home managers themselves will undertake further dementia training. The response does state that under the new Regional Service Specification for Care Homes, they will have to provide evidence of ongoing development for all employees. However, it is not clear whether this includes dementia training for care home managers that is further to the basic training for care home staff.

However, I do welcome that dementia awareness training will be rolled out to all contract monitoring staff. This has the potential to enable contract monitoring staff to truly understand the needs of older people living with dementia and also the skills and competencies needed for care home staff to properly support them.

The response includes clear timelines for the completion of the actions noted, and also identifies an accountable individual. The clarity of this approach should enable the quality and impact of these services, and any changes made to them to be closely monitored by the Local Authority.

### **Requirement for Action 3.3**

#### **Final Conclusion – Acceptable**

<p>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.</p>
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I welcome that the response to this Requirement for Action from the Local Authority appears to recognise the importance of befriending, and provides brief information on the current provision of befriending schemes across the area. For example, the response describes the involvement of the British Red Cross and also smaller volunteering groups.

It is good to see that the Local Authority recognises that its work to monitor the uptake of befriending within residential care is incomplete, and therefore I welcome the commitment to obtain a benchmark of the

befriending and volunteering that occurs. This should give the Local Authority an insight into the access that older people have to befriending activities and also the impact that this has on their quality of life.

The Local Authority demonstrates a commitment to improve the provision of befriending schemes. For example, it states that it will learn from a previous intergenerational project to enhance current befriending, and I welcome the introduction of Community Wellbeing Officers who will develop a strategy to ensure that the befriending role is robust in care homes. It is also good to see that the Local Authority has committed to developing a joint training programme with the third sector to include 'what is befriending'. These actions have the potential to ensure that staff understand the importance of befriending to the quality of life of older people, and that as a result, older people are supported to have meaningful social contact are able to practice their faith and maintain important cultural links.

Although access to faith based support and specific cultural communities is not explicitly referenced in the Local Authority's response, I would fully expect that these particular elements of befriending are taken into account, both by the Community Wellbeing Officers and during the benchmarking activity. Without doing so, there is a risk that older people may be lonely or socially isolated and lack the opportunity to have meaningful social contact.

The response includes clear timelines for the completion of the actions noted, and also identifies an accountable individual. The clarity of this approach should enable the quality and impact of these services, and any changes made to them to be closely monitored by the Local Authority.

## **Requirement for Action 5.6**

### **Final Conclusion – Acceptable**

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.

The Local Authority's response to this Requirement for Action was previously determined to be acceptable. Therefore, no further analysis has been undertaken.

## **Requirement for Action 6.2**

### **Final Conclusion – Acceptable**

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).

The response to this Requirement for Action provides information on a number of methods the Local Authority is using to improve how it listens to and understands the voice of older people in care homes. For example, the Local Authority has committed to introducing a quality of life survey that will form part of the Age Connects Speak Up project that it commissions, and that the Conwy Involvement Network has identified a need to increase participation from residents in a variety of care settings. Furthermore, the Local Authority is refocusing the role of

contract monitoring reviews and providing additional training to their staff to ensure a focus on the voices and outcomes of the service user.

I welcome these actions because they have the potential to ensure that commissioners and providers have a better understanding of the quality of life of older people living in care homes. Issues that are captured through these processes could be addressed before they become impactful and costly to remedy. Furthermore, I raised a concern in relation to the Local Authority's initial response that there was no reference to quality of life and I am pleased that this has now been addressed.

However, I am concerned that while these actions are positive, they are largely formal exercises and would not necessarily provide older people with the opportunity to raise concerns on an ad hoc, informal and day to day basis. Therefore, there is the potential that some issues will not be captured and an opportunity to make small changes to significantly improve quality of life could be missed.

That being said, the Local Authority has committed to publishing the outcome of this work in its annual report. I welcome this because it has the potential to demonstrate how ongoing feedback from older people has been used to drive continuous improvement.

The response includes clear timelines for the completion of the actions noted, and also identifies an accountable individual. The clarity of this approach should enable the quality and impact of these services, and any changes made to them to be closely monitored by the Local Authority.

### **Requirement for Action 6.7**

### **Final Conclusion – Acceptable**

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.

The response to this Requirement for Action from the Local Authority recognises that to date, they have only produced reports for internal and scrutiny purposes and instead have directed members of the public to CSSIW reports. Therefore, I welcome that the Local Authority has committed to introducing a programme of work in order to draw the results into an annual quality report. This will ensure that older people have access to relevant and meaningful information about the quality of life and care provided by or within individual care homes, and there is greater openness and transparency in respect of the quality of care homes.