

A Place to Call Home? A Review into the Quality of Life and Care of Older People living in Care Homes in Wales

Older People's Commissioner for Wales November 2014

Flintshire Current Status and Action Plan

Required Action	Outcome	Where we are now	What we need to do	Who / by when
<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>Link to Welsh Government policy and legislative areas: National Outcomes Framework for the Social Services and Wellbeing Act 2014, Declaration of the Rights of Older People in Wales, A Framework for Delivering Integrated Health and Social Care for Older People with Complex Needs, Integrated Assessment, Planning and Review Arrangements for Older People.</p>				
<p>1.2 All older people, or their advocates, receive a standard 'Welcome Pack' upon arrival in a care home that states how the care home manager and owner will ensure that their needs are met, their rights are upheld and they have the best possible quality of life. The Welcome Pack will make explicit reference to:</p> <ul style="list-style-type: none"> • How the care home manager will support the resident as they move into their new home. • Standard information about their human rights in line with the Welsh Declaration of the Rights of Older People * • A Statement of Entitlement to health care support.* • Support to sustain and 	<p>Older people are aware of their rights and entitlements, and what to expect from the home.</p> <p>Older people are clear about how they can raise concerns and receive support to do so.</p>	<p><i>We have a Statement of Purpose and Service User Guide as required by CSSIW and these cover some of the requirements stated.</i></p> <p><i>We have a regional simply word Pre Placement Agreement document that summarizes service specifications to advise people on what they should expect and what they can do if they are not happy with the service they receive.</i></p> <p><i>A regional task group has been formed to develop a new Welcome Pack to ensure it meets the specified standard requirements of Welsh Government.</i></p>	<p><i>Review and update existing documents to provide a standard Welcome Pack in line with WG requirements; ensure all residents have a copy</i></p> <p><i>Produce a condensed version for people accessing short periods of respite care in residential homes</i></p> <p><i>Ensure the new Welcome Pack includes explicit reference to the stated themes so that people have clear information on their rights and</i></p>	<p><i>Care Home Managers</i></p> <p><i>Social Services / BCUHB/ Care Home Providers</i></p>

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<p>promote independence, continence, mobility and physical and emotional wellbeing.</p> <ul style="list-style-type: none"> • Ensuring their communication needs are met, including people with sensory loss. • Maintaining friendship and social contact. • Support to help them maintain their independence and to continue to be able to do the things that matter to them. • The development and maintenance of their care and support plan and what will be included in it.* • Ensuring a culture of dignity and respect and choice and control over day-to-day life. • The skills and training of staff. • Their right to independent advocacy and how to raise concerns. * <p>(The areas marked with * should be standard in format to ensure consistency across Wales)</p>		<p><i>Our Contract Monitoring Quality Monitoring Report process has been acknowledged as good practice by Older Peoples Commissioner.</i></p> <p><i>Our Reablement Team responds to referrals from residential care settings to support people to maintain their independence.</i></p> <p><i>Promoting dignity in care is a cornerstone of our approach in the delivery of services. We have appointed Dignity in Care champions and take an active role in sub regional Dignity in Care meetings.</i></p> <p><i>Our Contract Monitoring team monitor training in all residential Home settings in Flintshire and the Flintshire training Voucher Scheme supplements training for residential care staff. There is limited training for clinical staff and we need to ensure competencies for trained nursing staff.</i></p>	<p><i>entitlements from the appropriate agency.</i></p> <p><i>Review our Quality Monitoring Report process when WG agreed formats are in place</i></p> <p><i>Further training is required for residential care staff with regard to Reablement and independence and we have commissioned training from a specialist provider which will commence imminently.</i></p> <p><i>Deliver enhanced training for people with dementia and other complex needs; increase competencies for clinical staff</i></p>	<p><i>Commissioning Manager</i></p> <p><i>Commissioning Manager</i></p> <p><i>BCUHB</i></p> <p>(Welsh Government & Care Home Providers March 2016)</p>
<p>1.6 Older people are offered independent advocacy in the following circumstances:</p>	<p>Older people living in care homes that are closing, as well as older people that are at risk</p>	<p><i>Flintshire has a core funding agreement with Age Connects to provide independent</i></p>	<p><i>Ensure information on advocacy providers is made available to care home</i></p>	<p><i>Care Home Managers, Commissioning</i></p>

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<ul style="list-style-type: none"> • 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. <p>For those with fluctuating capacity or communication difficulties, this should be non-instructed advocacy.</p> <p>When a care home is in escalating concerns, residents must have access to non-instructed advocacy.</p>	<p>of or are experiencing physical, emotional, sexual or financial abuse, have access to independent or non-instructed advocacy.</p>	<p><i>advocacy to older people as part of wider contractual requirements. We also contract with other independent advocacy providers and in total fund advocacy services in the region of £130k. We are reviewing our contractual arrangements and have issued a speculative notice to gather interest for future commissioning purposes.</i></p> <p><i>We are aware, given the growing population of older people in general, that the sustainability of current advocacy arrangements for people in residential care with health needs is limited.</i></p> <p><i>When a home is closing or in escalating concerns we allocate a Social worker to assist with reassessment and identification of suitable alternative placements. Independent advocacy is also made available in the case of home closures or escalating concerns procedures. This also applies to self funders. Referrals are made to the Safeguarding Team.</i></p> <p><i>Contract Monitoring Quality</i></p>	<p><i>managers and staff;</i></p> <p><i>Mechanism to ensure advocacy is embedded in practice with a particular focus on improving advocacy in relation to safeguarding.</i></p> <p><i>Confirm future commissioning arrangements to include advocacy for older people</i></p> <p><i>Increase the availability and accessibility of advocacy for people with health care needs within the care home population</i></p> <p><i>Awareness raising for staff to better understand the roll of independent advocates and to ensure compliance with requirements</i></p>	<p><i>Manager</i></p> <p><i>Contract Monitoring Team</i></p> <p><i>Commissioning Manager</i></p> <p><i>BCUHB</i></p> <p><i>Care Home Managers / Contract Monitoring Team</i></p>

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		<p><i>Monitoring Report includes reference to support for decision making and provision of advocacy.</i></p> <p><i>Social Work, Health and Care Home Manager all have responsibility in this area. However we know that we need to improve the tie in of advocacy provision to safeguarding in particular.</i></p> <p><i>Delivery of All Wales basic awareness training on Safeguarding and Level 3 Adults Safeguarding Course for care home managers</i></p>		<p>(Local Authorities & Care Home Providers & Health Boards April 2015)</p>
<p>Key Conclusion 2: Too often, care homes are seen as places of irreversible decline and too many older people are unable to access specialist services and support that would help them to have the best quality of life.</p>				
<p>Link to Welsh Government policy and legislative areas: Social Services and Wellbeing (Wales) Act and National Outcomes Framework, Sustainable Social Services: A Framework for Action, Together for Health – Stroke Delivery Plan 2012-16</p>				
<p>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.</p>	<p>Older people receive full support, following a period of significant ill health, for example following a fall, or stroke, to enable them to maximise their independence and quality of life.</p>	<p><i>We have a flexible approach to the use of Reablement in care and nursing homes in Flintshire at present. We recognise this may be more reactive and we know we need to develop a more proactive approach across the board.</i></p> <p><i>We have begun to deliver Reablement training to the Independent sector.</i></p>	<p><i>Roll out Reablement training from domiciliary care into residential care homes</i></p> <p><i>Have an independence champion in each care home to embed an independence culture</i></p>	<p><i>Workforce Development</i></p> <p><i>Care Home Managers / Contract Monitoring</i></p>

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		<p><i>Falls Network meetings take place in residential care homes, helping to raise the profile of this important initiative.</i></p> <p><i>Working with Health to explore how ICF funded initiatives and existing joint working can be sustained to provide multidisciplinary intermediate care focussed on Reablement and independence (step up / down beds, assessment beds, specialist in reach e.g. Occupational therapist)</i></p>	<p><i>Agree sustainable initiatives with Health (see also 4.2)</i></p> <p><i>Work with health to improve the delivery of specialist therapy services to residents including SALT, physiotherapy, specialist stroke recovery services and regular input regarding dentistry, hearing and sight loss.</i></p>	<p><i>Commissioners</i></p> <p>(Health Boards & Local Authorities in partnership July 2015)</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.

Link to Welsh Government policy and legislative areas: Together for Mental Health - A Strategy for Mental Health and Wellbeing in Wales, National Outcomes Framework 2014, Mental Health (Wales) Measure 2010, National Dementia Vision for Wales 2011 and the Intelligent Targets for Dementia. NICE Dementia Quality Standard 2010. NICE Dementia Quality Standard (2010) and NICE Clinical

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Guideline 42. November 2006 (amended March 2011)				
<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 ongoing basis as part of their skills and competency development, with this a specific element of supervision and performance assessment.</p>	<p>All staff working in care homes understand the physical and emotional needs of older people living with dementia and assumptions about capacity are no longer made</p>	<p>Staff in FCC care homes have received a range of training regarding dementia and independent sector staff are able to access the training via our voucher scheme.</p> <p>Commissioned specialist trainers (Patsy Pope and Helen Sanderson) to deliver targeted dementia training including person centred approaches, coping strategies and communication strategies</p> <p>Contract monitoring Quality Monitoring Report evidence includes reference to management support and performance management Development of North Wales specification for Enriched Care Homes for People with Dementia – expected launch spring 2015</p>	<p>Undertake an audit of dementia training in FCC care homes and update training as required to reflect current best practice</p> <p>Audit annual appraisal and supervision records</p> <p>Expand and introduce variety of training opportunities including e learning, dvd / videos, distance learning, mentoring schemes that encompass</p> <ul style="list-style-type: none"> • Basic dementia training during induction • Ongoing dementia training as part of continuous professional development for all staff • Further training for care home managers to ensure people with dementia are well supported <p>Review Quality Monitoring Report process to ensure it continues to reflect best practice guidance</p>	<p><i>Commissioning Manager, Workforce Development Team</i></p> <p><i>Care Home Managers</i></p> <p><i>Commissioning Manager, Workforce Development Team</i></p> <p>Commissioning Manager (Local Authorities & Care Home Providers Begin January 2016)</p>

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<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>	<p>Older people are supported to retain their existing friendships and have meaningful social contact, both within and outside the care home. Care homes are more open to interactions with the wider community. Older people are able to continue to practice their faith and maintain important cultural links and practices.</p>	<p><i>We have a policy for the use of volunteers in FCC homes and some volunteers are available and varied levels of in-reach from local communities.</i></p> <p><i>Contract Monitoring Quality Monitoring Report evidence list includes reference to social network including use of volunteers and befrienders.</i></p>	<p><i>Audit what we have in FCC homes currently</i></p> <p><i>Contact Flintshire Local Voluntary Council to engage more support</i></p> <p><i>We note that whilst use of volunteers, befrienders and intergenerational approaches are to be welcomed and recognised as important in adding variety and depth to peoples social networks, CSSIW requirements for these to go through same recruitment process as staff can be onerous. Therefore we need to raise with CSSIW so that a proportional approach can be taken to recruitment of volunteers</i></p>	<p><i>Care Home Manager/Contract monitoring</i></p> <p><i>Commissioning Manager</i></p> <p><i>Senior Manager integrated Services / Commissioning Manager</i></p> <p>(Care Home Providers & Local Authorities November 2015)</p>

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<p>Key Conclusion 4: Some of the most basic health care needs of older people living in care homes are not properly recognised or responded to.</p>				
<p>Link to Welsh Government policy and legislative areas: Fundamentals of care, National Service Framework for Older People, Together for Health: a Five Year Vision for NHS Wales, Setting The Direction, Together for Health: Eye Health Care Delivery Plan for Wales 2013-2018, NHS Wales Delivery Framework 2013-14 and Future Plans, Rural Health Plan – Improving Integrated Service Delivery across Wales, Together for Health: A National Oral Health Plan for Wales 2013 - 18, National Outcomes Framework for the Social Services and Wellbeing (Wales) Act 2014.</p>				
<p>4.2 A formal agreement is developed and implemented between the care home and local primary care and specialist services based on the Statement of Entitlement. This should include:</p> <ul style="list-style-type: none"> • Referral pathways, including open access • Waiting times • Referral and discharge information • Advice and information to support the on-going care of the older person in the home • Access to specialist services for older people in nursing homes, in line with the Fundamentals of Care Guidance. 	<p>There is a consistent approach across Wales to the provision of accessible primary and specialist health care services to older people living in care homes and older people's healthcare needs are met.</p> <p>Older people in nursing care homes have access to specialist nursing services, such as diabetic care, tissue viability, pain management and palliative care.</p> <p>Older people are supported to maintain their sight and hearing, through regular eye health, sight and hearing checks.</p> <p>Older people are able to, or supported to, maintain their oral health and retain their teeth.</p> <p>Older people have full access</p>	<p><i>Our Contract Monitoring Quality Monitoring Report includes evidence focused on service users being supported to maintain / improve their health</i></p> <p><i>There are pockets of good practice e.g. our Contracts Monitoring Team has quarterly meetings with representatives from the Everlasting Smiles Health initiative. People who consent have dental screening and a dental care plan and access prescribed dental equipment. Dental champion nominated in each participating care home</i></p> <p><i>Working with Health to explore how our ICF Palliative care initiative can be sustained to support people on an ongoing basis</i></p>	<p><i>We will implement WG Statement of Entitlement when developed</i></p> <p><i>Deliver Welsh Government CHC Foundation Model for staff across the sector to establish improved basic awareness of CHC</i></p> <p><i>Agree sustainable initiatives with Health</i></p> <p><i>Some of the issues raised are not specific to care home residents. Contracts for primary care are negotiated at</i></p>	<p><i>Care Home Managers / Contract Monitoring Team</i></p> <p><i>Workforce development Team / Care Home Managers</i></p> <p><i>Commissioning Managers</i></p> <p><i>BCUHB</i></p>

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	to dietetic support to prevent or eliminate malnourishment and to support the management of health conditions.		<i>both regional and national level with particular historical contracting and finance arrangements. Discussion needs to happen at regional as well as local level with BCUHB, both as a provider of services and contracting organisation for primary care workers, to ensure local authority requirements are met.</i>	(Health boards & Care Home Providers April 2015)
<p>Key Conclusion 5: The vital importance of the role and contribution of the care home workforce is not sufficiently recognised. There is insufficient investment in the sector and a lack of support for the care home workforce.</p> <p>Link to Welsh Government policy and legislative areas: Social Care Workforce Development Programme, Sustainable Social Services for Wales: A Framework for Action, Social Services and Wellbeing Act, National Outcomes Framework, Integrated Assessment, Planning and Review Arrangements for Older People</p>				
5.2 The development and implementation of a national standard acuity tool to include guidelines on staffing levels and skills required to meet both the physical and emotional needs of older people.	Older people are cared for by care staff and managers who are trained to understand and meet their physical and emotional needs, including the needs of people with dementia and sensory loss, and who have the competencies needed to provide dignified and compassionate care.	<p><i>Our Contract Monitoring team currently expects providers to complete a “dependency tool” and provide / deploy staff to meet that level of need.</i></p> <p><i>Assessment is based on knowledge of individual need</i></p> <p><i>We record staff levels within each category of care home setting annually to inform strategic planning and fee setting.</i></p> <p><i>Health has developed a quality</i></p>	<p><i>Social Services and Health to work together locally and regionally to collate available information to develop a methodology to guide Contract Monitoring Officers regarding dependency and staffing levels.</i></p> <p><i>To explore the impact this might have on fee setting.</i></p>	<p><i>BCUHB / Commissioning Manager / Regional Care Fees Group</i></p> <p>(Welsh Government & Care Home Providers April 2016)</p>

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		<i>monitoring tool that captures information on the complexity of need within a home.</i>		
5.3 A standard set of mandatory skills and value based competencies are developed and implemented, on a national basis, for the recruitment of care staff in care homes.	Older people receive compassionate and dignified care that responds to them as an individual.	<i>Flintshire operates a voucher scheme that enables Independent sector providers to access mandatory training. Mandatory training offered year on year is varied according to local priorities and it is recognised this may need to be increased</i>	<i>Audit training that staff currently have to identify gaps. Agree mechanisms on a regional basis to demonstrate competencies. Review job descriptions to reflect future guidance re skill set requirements Increase use of A Question Of Care – A Career for You tool as part of the recruitment process.</i>	<i>Care Home Managers / Contract Monitoring Team (Care Council for Wales & Care Home Providers Sep 2015 on)</i>
5.5 All care homes must have at least one member of staff who is a dementia champion.		<i>Whilst there is a level of knowledge we do not currently have a dementia champion in each home Development of North Wales specification for Enriched Care Homes for People with Dementia – expected launch spring 2015 As a local authority, in conjunction with Helen Sanderson Associates (person centred change) we have been proactive in delivering learning sets for dementia care to</i>	<i>Allocate a dementia champion in each home Review Contract Monitoring Quality Monitoring Report Roll out the delivery of person centred dementia care learning sets to front line staff. Work with specialist trainers including Helen Sanderson</i>	<i>Care Home Managers Contract Monitoring Workforce Development / Care Home Managers / Commissioners</i>

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		<i>independent sector managers</i>	<i>Associates to role out person centred planning and support across the residential sector and award successful Homes accreditation in 2015 /16</i>	<p><i>Workforce Development / Commissioning Manager / Care Home providers</i></p> <p>(Care Home Providers September 2015)</p>
<p>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.</p> <p>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.</p> <p>This service should also develop a range of resources and training materials to assist</p>	<p>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.</p>	<p><i>Our Contract Monitoring Quality Monitoring Report process and Quality Circles approach have been recognised as good practice by the OP Commissioner</i></p> <p><i>The following all provide opportunities for feedback from residents and quality checks</i></p> <ul style="list-style-type: none"> <i>• Contract monitoring visits</i> <i>• Elected member rota visits</i> <i>• CSSIW inspections</i> <i>• Registered manager and senior manager visits</i> <i>• Quality circles</i> <i>• Independently facilitated events</i> <p><i>A percentage of in house and independent sector care staff have voluntarily registered with CCW</i></p> <p><i>We are supportive of the BCUHB Practise Development</i></p>	<p><i>Share regionally the learning we have gathered to date in developing our existing outcome focused quality standards approach. We are keen to be involved in a NIS and contribute to the development of resources and training material. We suggest a regional approach is essential to maximise learning and ensure value for money</i></p> <p><i>Deliver Management and Leadership training for independent sector care home managers</i></p> <p><i>Consider recommendation that registration for direct care staff is made mandatory</i></p>	<p><i>Commissioning Manager and Regional Hub</i></p> <p><i>Workforce Development / Commissioners regionally</i></p> <p>(Welsh Government Lead in partnership with Local</p>

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care homes that wish to improve in self-development and on-going improvement.		<i>Teams work to improve the quality of delivery of nurses and clinical staff in Nursing Homes and a management leadership course will be delivered in the spring 2015.</i>		Authorities, Health Boards, Care Home Providers September 2016)
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				
Link to Welsh Government policy and legislative areas: Sustainable Social Services for Wales: A Framework for Action, Social Services and Wellbeing Act, National Outcomes Framework				
<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>Annual reporting should be undertaken of how on-going feedback from older people has been used to drive continuous improvement (see action 6.10).</p>	<p>Commissioners, providers and inspectors have a thorough understanding of the day-to-day quality of life of older people living in care homes.</p> <p>Older people's views about their care and quality of life are captured and shared on a regular basis and used to drive continuous improvement.</p>	<p><i>Our Contracts Monitoring team has established regular open meetings with care providers enabling us to develop good working relationships with the market in Flintshire. These meetings share good practise, updates on legislation and provide arenas for open discussion etc.</i></p> <p><i>Our first Monitoring visit is unannounced; the monitoring officer spending the time with residents making observations. Knowledge gained informs the rest of the inspection which then takes place on a planned basis with the manager and case tracks a percentage of the residents. The Quality Monitoring Report includes feedback from families and service users</i></p>	<p><i>We are developing a page on the FCC App for people to give feedback on care homes</i></p> <p><i>NW Commissioning Hub has established a task group to look at better ways of engaging with the care home population and their families</i></p> <p><i>Produce an annual report to evidence how feedback from older people has been used to secure continuous improvement and feed this into the Directors Annual Quality Statement (6.7)</i></p> <p><i>Recruit lay visitors to visit independent sector care homes in Flintshire to gather feedback and observations and role out rota visits by</i></p>	<p><i>Commissioning Manager</i></p> <p><i>Commissioning Manager via Regional Hub</i></p> <p><i>Care Home providers</i></p> <p><i>Commissioners</i></p>

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		<p><i>We have developed a Contract monitoring e mail box where anyone, anonymously or otherwise, may log a comment or give feedback on local care homes.</i></p> <p><i>The review process includes a questionnaire for families and information and trends from responses is fed into the Quality Circle.</i></p> <p><i>Care homes use a number of informal mechanisms to elicit feedback from residents and their families including Residents meetings, independently facilitated events, rota visits</i></p>	<p><i>elected members to the independent sector homes</i></p>	<p>(Care Home Providers & Local Authorities & Health Boards & CSSIW April 2015)</p>
<p>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:</p> <ul style="list-style-type: none"> • 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 	<p>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 across Wales and the care they provide.</p>	<p><i>Registered Managers are expected to comply with CSSIW regulation and produce their own Quality Report annually</i></p> <p><i>Contract Monitoring Quality Monitoring Reports are outcome focussed</i></p> <p><i>We have a Joint Interagency Monitoring Panel which meets quarterly and aims to provide an annual report on the state of the market in Flintshire.</i></p>	<p><i>Agree a mechanism to collate information from all care homes in the county</i></p> <p><i>Review Quality Monitoring Report process to ensure all information is gathered as individual homes are monitored</i></p> <p><i>Agree a template to meet new requirements for an AQS by the Chief Officer and ensure it is produced in a format that is</i></p>	<p><i>Commissioning Managers</i></p> <p><i>Contract Monitoring</i></p> <p><i>Commissioning / Performance / Operational Managers</i></p>

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<p>homes across the Local Authority</p> <ul style="list-style-type: none"> • 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 <p>Further details of reporting requirements should be included as part of the Regulation and Inspection Bill</p>			<p><i>both relevant and meaningful to older people and their families</i></p>	<p>(Local Authorities – Outline AQS September 2015)</p>
<p>6.10 Care home providers report annually on the delivery of quality of life and care for older people. This will include:</p> <ul style="list-style-type: none"> • Quality of life of older people against the Standard Quality Framework and Supporting Specification. • Levels and skills of staff including staff turnover, use of agency staff and investment in training • Number of POVA referrals, complaints and improvement notices, including full details on improvement action when a home is in escalating concerns. 		<p><i>Registered Managers are expected to comply with CSSIW regulation and produce their own Quality Report annually</i></p>	<p><i>Regional development of self assessment tool / report template for Providers</i></p> <p><i>Review the format of existing reports to meet new requirements and ensure they are produced in a format that is both relevant and meaningful to older people and their families</i></p>	<p><i>Care Home Providers / Social Services and Health</i></p> <p><i>Contract Monitoring</i></p> <p>(Care Home Providers December 2015)</p>