




Older People's Commissioner for Wales
Comisiynydd Pobl Hŷn Cymru

Follow-up to 'A Place to Call Home' Review
Local Authority Self-evaluation Pro Forma

Organisation	Carmarthenshire County Council
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Date	17th April, 2017
Signed	

Chief Executive Officer

Name: MARK JAMES

Date: 12TH APRIL 2017

Signed: 

Council Leader

Name: EMLYN DOLE

Date: 12 APRIL 2017

Signed: 

Deadline for responses: 31 March 2017

Please email responses to: review.adolygiad@olderpeoplewales.com

Outcome

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.

Action Required (Requirement for Action 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. (In partnership with Health Boards)

To what extent do you comply with this

Requirement for Action?
(300 words)

The Local Authority in partnership with Hywel Dda University Health Board (H DUHB) has achieved compliance with this outcome.

The Authority and HBUHB have a co-ordinated, integrated and multi-professional response to the needs of older people after a period of ill health.

Community Resource Teams (CRT) are run on an integrated basis with the full range of health and social care professionals working together to ensure that services to older people whether in hospital , care homes or their own home are provided in an effective, responsive and timely way.

On what evidence has this assessment been made?
(850 words)

Primary Care and Community Resource Teams (CRT) across H DUHB work collaboratively to ensure that service users have equal access to health and wellbeing services. This includes general medical services, dental and podiatry as well as multidisciplinary intermediate care response to acute illness and / or injury.

Access to the latter is via a single point of access in each County. The services provided very much depend on the person's presentation at time of referral but can include:

- The core community nursing service that operates 7 days a week from 8am to 6pm. This service

provides a broad range of expertise within the home environment, private or local authority residential accommodation and responds to both anticipatory or emergency health care needs

- Acute Response Team – community nurses who are able to administer subcutaneous hydration, intravenous antibiotics and blood transfusions
- Continuing Care Team – a skilled team of senior HCSW offering a highly responsive service to patients at end of their lives, patients who are entering a terminal phase and patients with long term chronic conditions
- Multidisciplinary teams (MDTs) within the Community Resource Teams are aligned to GP clusters in each Locality area of the County. These MDTs work closely with GP practices and meet routinely to discuss and plan care for frail adults in an anticipatory manner to reduce risk of hospital admission or deterioration in their wellbeing. These MDTs generally include Social Worker, Occupational Therapists, Physiotherapists and Community Nurses but can also include wider health care professionals such as dieticians and speech and language therapists as necessary
- The MDTs outlined above also support care pathways which have been developed in partnership with the Welsh Ambulance NHS Services Trust; one such pathway allows paramedics to avoid conveyance to hospital of people who have fallen where appropriate. These individuals are then reviewed in their home by the MDT (led by community frailty nurses) and a falls assessment and risk reduction programme implemented.

In addition, Welsh Government Intermediate Care Fund has contributed greatly to resourcing the multidisciplinary resource in the community but has also funded community multidisciplinary teams in the hospitals. The Transfer of Care Advice and Liaison Service (TOCALs) assesses frail adults both at the 'front door' of the hospitals and on the wards. Their role is to advocate for the frail patient to avoid hospital admission at the 'front door' where possible and appropriate and also to reduce

	<p>length of stay on the wards to allow them to return as quickly as possible to their home, hence acknowledging that long stays in hospital can be detrimental to frail adults particularly for those very frail individuals who reside in care homes.</p> <p>Welsh Government Cluster funding has supported the development of other services which support residents of care homes. For example, an Advanced Nurse Practitioner has been appointed by the Aman Gwendraeth Cluster GPs to support wellbeing of care home residents in that area. More widely, there is also a Care Home Support Team available in the Hywel Dda region which</p>
<p>What impact has this had on residents' quality of life and care? (850 words)</p>	<p>It is nationally acknowledged that an inpatient admission to hospital can compromise the wellbeing and independence of frail older adults.</p> <p>The multidisciplinary services available in the communities contribute to avoidance of conveyance to hospital of care home residents where appropriate and as such ensure that care is delivered 'closer to home' and that their quality of life is not compromised by unnecessary admission.</p>
<p>If further actions are needed to be compliant, please evidence what these will be and provide a timeline for compliance? (500 words)</p>	<p>The Authority is compliant with this outcome but recognises it as an area for regular review and evaluation.</p>

N.B. The Commissioner's expectation is that specialist services are made available to all residents, where appropriate, including self-funders evidence submitted in this section should therefore reflect this.

<p>Outcome 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>Action Required (Requirement for Action 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. The Commissioner's expectation is that this will include reference to actions that the Local Authority has taken as commissioners of care to ensure that all staff working in care homes understand the physical and emotional needs of people living with dementia.</p>	
<p>To what extent do you comply with this Requirement for Action? (300 words)</p>	<p>The Authority has achieved full compliance with this outcome. The Authority has an excellent understanding of the care home sector within the county of Carmarthenshire. It collates and analyses the care home sector intelligence identifying the primary issues such as quality of care, safeguarding, workforce, financial viability, ownership or transfer acquisitions and has established a strong partnership working ethos with the care home sector based on mutual respect and trust. There is a strong history of training provided to the care home sector with examples of innovative courses and workshops provided in response to the changing requirements of the sector in particular the increasing need for staff to be well trained in dementia. The Authority development of a Dementia Training Strategy that is directly mapped to the Good Work: Dementia Learning and Development Framework (attached) illustrates its commitment to achieving the outcome and action required.</p>
<p>On what evidence has this assessment been made? (850 words)</p>	<p>As noted, the Authority has a strong philosophical commitment to working in close and constructive partnership with care home providers. It has developed and consolidated this approach over many years and has good working relationships between its assessment and care management teams, its commissioning officers and the care home providers.</p>

In 2015/16 the Authority's Commissioning Team undertook a comprehensive audit of 33 independent sector care homes and the quality of care provided with particular reference to dementia care. This involved a random sample of service user interviews across the 33 independent sector care homes via a standardised questionnaire with support from family/ carers and advocates where appropriate. This also included interviews with care home staff.

A monitoring and evaluation report was produced for each care home with findings provided to the care home. Similarly, an overall report with key findings and themes including best practice was also produced and disseminated to the sector.

As part of this process, the Authority's Commissioning Team developed a range of measures to evaluate & improve quality standards and the performance of care home providers with a clear focus on the quality of life for older people as follows:

- Staff have been trained to utilize "Observational Skills" when undertaking provider visits to observe interactions of staff to residents; residents to residents; family interactions with both and the general well-being of all residents in the Care Home setting.
- Staff receive regular up-date refresh and innovative training across a range of areas pertinent to the range and complexity of people experiencing a Dementia illness.
- Staff actively provide guidance/support & encouragement in the creative design of service provision for people with Dementia considering Lifestyle Planning; Choice & Control; Meaningful Activities; Knowing the Person; Creating day to day purpose; retaining Identity and utilizing a strengths based and positive approach to risk.

Furthermore, much work has been undertaken in regard to this particular outcome explored through a number of very successful events over the past several years involving a wide range of care home providers, service users and professionals such as:

- Person Centred Lifestyle Planning September 2014
- Magic Moments May 2015

- Improving Outcomes for SU's and Carers through a Positive Risk Approach and sharing Good Practice May 2016.

This work has been supported by The Joseph Rowntree Foundation and drew from a range of documents including:

- The JRF Seven Challenges of "A Better Life"
- The Welsh Declaration of Rights for Older People
- The Senses Framework - Mike Nolan
- Personhood - Tom Kitwood
- Nothing Ventured Nothing Gained - DoH 2010
- Care Home Inquiry – John Kennedy
- DEEP Project – Developing Evidence Enriched Practice

(*Evidence within Initial findings report regarding phase two for Project Advisory Group on 2nd Feb 2015.)

In the area of workforce development and training, substantial dementia training has been delivered to the care sector. During 2016/17 the top ten training activities provided were:

Meaningful engagement and dementia
 Dementia for Social care
 Effective Communication
 Step Inside to Cascade
 Deprivation of Liberty Safeguards
 Dementia for drivers
 Learning disability and dementia
 Managing medication: service users with dementia
 Social Care Induction Framework
 Mental capacity Act Best Interests

446 attendances have taken place during the first three quarters of 2016/17 in dementia training courses with 49 staff having achieved a dementia qualification. The Authority has also developed a draft Dementia Training Strategy that is directly mapped to the *Good Work: Dementia Learning and Development Framework* (attached) and will refer to the terminology used, target groups identified and learning outcomes outlined within the document.

	<p>Based on the Authority's positive relationship based approach to the care home sector, all care home managers and staff teams are supported and encouraged to develop Relationship Centred Care, Co-Production and Appreciative Enquiry to continue to create more inclusive and collaborative care delivery arrangements using a strength based approach, maximising what they do well and identifying areas needing to be improved.</p> <p>Care Homes are encouraged to use a range of means to recognise who the person is by using:</p> <ul style="list-style-type: none"> • "Family Histories" providing comprehensive information about a person's whole life including events – marriage; children; work; interests; achievements; hobbies; where they were born etc etc • "This is Me"- produced by the Alzheimer's Society as a "passport" to travel everywhere with the person to assist them and others if having to attend "Hospital Appointments" or Admissions etc • "Magic Moments in Care Homes" – co-produced by Carmarthenshire CC, Pembrokeshire CC, Ceredigion CC, HDUHB, and supported by Welsh Government, Swansea University Health & Care Research Wales and JRF – to inspire and motivate staff to discover the things that matter most to older people with high support needs regarding their quality of life. <p>Through this and subsequent work, care homes have introduced "Dementia Champions" and this is being promoted and supported across the whole sector.</p> <p>The Authority continues to endorse the "Care Council for Wales" Induction Framework but would support this as a "Mandatory Requirement" as this would secure the consistent and robust approach to the Induction for all care staff.</p> <p>The consultation on Welsh Government "Together for a Dementia Friendly Wales" 2017 – 2022 will be considered and incorporated into the Authority's commissioning approach. All commissioned services will be expected to deliver against the Good Work, National Dementia Learning & Development Framework for Wales.</p>
<p>What impact has this had on</p>	<p>The Authority collates evaluation feedback from staff from its training events to ensure the training content is</p>

residents' quality of life and care?
(850 words)

relevant to meeting the needs of the staff the service users they provide care.

Feedback from its Magic Moments workshop which was the second of this kind of event to bring together providers of Carmarthenshire's Independent and Local Authority Residential Care and Nursing sector to raise the quality of care provision for people with dementia is as below.

- Very refreshing, friendly and informative day giving food for thought.
- Has given motivation to try different things in the home, especially enjoyed the talk on leadership.
- Fantastic and very informative, I really enjoyed the day! Well done all!!
- An excellent day sharing Magic Moments with others.
- Fab Day very inspiring yet another successful day – looking forward to next year. I have had many Magic moments to-day, plenty of ideas to take back – fresh motivation well done all.
- A fab day really enjoyed very informative, lovely to meet and chat with other people. Here's to many more "Magic Moments"
- Hopeful day – exceeded my expectations – refreshing to meet so many people who care & enjoy their jobs, going back to work with more ideas
- Interesting particularly "Magic Moments" of other establishments.
- Thoroughly enjoyable day with some awe-inspiring speakers. I very much enjoyed the Magic Moments stories as it reminded me that some fantastic work goes on every single day which improves the quality of life of residents.
- The Positive Risk Assessment was good.
- This has been a wonderful day giving encouragement and thought of how to make our home a happy home.
- Enlightening!! A marvellous, uplifting and positive day.
- It was very inspiring to hear about the excellent practice across the county – keep up the good practice Carmarthenshire.

- We found today a positive and constructive day. Hopefully breaking down barriers and networking through different agencies and homes all with the same goal in mind, the well being of older people. Lovely "Magic Moments" restores faith "in the game".
- Very inspirational and thought provoking. It made me realise that our home provides a lot of magic moments that we don't even realise and has given me lots of ideas to help deliver more "magic moments". I'm looking forward to seeing all of the moments collected together.
- This was a fantastic day!! Very good mix of speakers and exercises. Fantastic networking – a really good idea to "split up" teams/organisations.

Further evidence of the Authority's quality assurance processes can be noted through an exercise undertaken in 2015/16 involving service user interviews. This revealed a sample of outcomes expressed by service users:

Positive impact comments included:

- "I feel I have been brought back from death's door"
- "I have a new family now"
- "I am happy here"
- "It is home from home"
- "I am well looked after"
- "I've got good friends here and a nice room"
- "My mother is more sociable and family have peace of mind" – quote from a daughter of a service user.
- "I feel safer and don't feel lonely. My daughter and friends visit regularly. I still have my independence"

Negative impact comments included:

- "Although I feel safer, I am still lonely. My friends don't visit regularly"
- "Food could be a little warmer"

Other comments included:

- "I would like the staff to wear name tags"
- "More staff are needed"
- "Would like more pocket money"
- "Would like to see films on the television"

	<p>“Would like to see friends more often but they live in Ammanford” “I would like more Welsh speaking staff”</p> <p>These comments are considered by the Commissioning Team and form part of the Authority’s overall QA processes and influence its commissioning and training plans.</p>
<p>If further actions are needed to be compliant, please evidence what these will be and provide a timeline for compliance? (500 words)</p>	<p>The Authority is compliant with this outcome but will continue to seek continuous service improvement for services to older people in care homes.</p>

<p>Outcome 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>Action Required (Requirement for Action 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. The Commissioner's expectation is that this will include reference to actions that the Local Authority has taken as commissioners of care to ensure that older people are supported to retain their existing friendships and have meaningful social contact, both within and outside the care home.</p>	
<p>To what extent do you comply with this Requirement for Action? (300 words)</p>	<p>The Authority has achieved compliance with this outcome. The Authority reviews its care home sector maintaining accurate weekly data on the capacity of the care home sector to provide available beds for people in their locality. This is the fundamental starting point for the Authority's commissioning approach to the care home sector and the rights of the older person to choose where they wish to live The Authority considers that fundamentally its level of care home provision throughout the county means older people choose where they wish to live and that as a consequence are able to maintain existing relationships within their locality.</p>
<p>On what evidence has this assessment been made? (850 words)</p>	<p>The Authority has a comprehensive database for the collection of data in connection with older people, care home availability (i.e. occupancy data operating with each care home is collected weekly and routinely disseminated to all relevant officers) and as a consequence the choice of available care homes for service users and their families. The Authority is satisfied that within the county there is a mixed range of provision for residential, residential dementia, nursing and nursing dementia with only the</p>

	<p>latter being problematic in terms of regular available capacity.</p> <p>In view of this, the Authority considers that the vast majority of older people placed in care homes within Carmarthenshire are able to retain their existing friendships and continue to have meaningful social contact both within and outside the care home as for many service users they are choosing to live in a care home within their locality with staff primarily recruited from their locality. For example, the nature of the geography of the county there is a diverse spread of care homes found in or close to many medium-large villages or towns in Carmarthenshire homes: Llandovery has a residential/residential dementia care home and a nursing/nursing dementia care home; Llandeilo has a residential/dementia care home; Ferryside has a residential care home; Llangennech has a residential dementia care home. These care homes are comparatively small sized (less than 35 beds), meet the needs primarily of their local communities with local staff.</p> <p>Furthermore, based on officers close working relationships and understanding of the care home sector, the Authority considers that the majority of care homes are very pro active in engaging with their local community by inviting local schools, community groups, local choirs etc into their care home as part of maintaining links between the older person, the care home and the local community. These activities and events help significantly to meet the cultural and intergenerational needs of older people</p>
<p>What impact has this had on residents' quality of life and care? (850 words)</p>	<p>The position as stated above means that older people are able to live in the care home of their choice and therefore remain in their preferred area. As a consequence, the person is able to maintain their family and friendship networks. Example of this were provided as part of the dementia audit programme in 2015/16 as below:</p> <p><i>Example 1</i></p>

	<p><i>The local church is next door to the home, and regular church services take place at the home. One of the residents goes to church on a Sunday with a staff member. Service users are also able to attend church coffee mornings if they wished to. The Home also have a very active League of Friends, which continue to raise funds for the service users.</i></p> <p><i>The home competes yearly in the Town in Bloom competition. The town's annual Victorian Night is also popular, with staff and service users dressing up in Victorian style clothes.</i></p> <p><i>Example 2</i></p> <p><i>Most of the activities offered at the care home are group activities e.g. local Urdd concerts, local school concerts, bingo, bonfire night celebrations, quiz, concert by U3A group, 1940's themed entertainment and Easter Bonnet competitions. However, the care home now has an activity co-ordinator, who showed me some examples of arts and crafts made by service users. We discussed that activities for dementia service users need not necessarily be group activities, but things like colouring, tactile cushions, picture books/flash cards etc.</i></p> <p><i>The activity co-ordinator explained that some service users are able to take part in folding towels/linen, light dusting, colouring and making Christmas cards. Some of the staff have completed the Dementia mapping training.</i></p>
<p>If further actions are needed to be compliant, please evidence what these will be and provide a timeline for compliance? (500 words)</p>	<p>The Authority is compliant but considers that continuing to promote the positive aspects of community links between older people who reside in care homes and the community in which it is located will benefit all parts of the community.</p>

Outcome

Commissioners, providers and inspectors have a thorough understanding of the day to day quality of life of older people living in care homes. 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.

Action Required (Requirement for Action 6.2 & 6.7):

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 the issue 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.

To what extent do you comply with this Requirement for Action? (300 words)

The Authority has achieved full compliance with this outcome.

The Authority has established strong multi agency systems with its key statutory partners, HDUHB and the CSSIW, to ensure it obtains the full range of relevant data on which to base any opinion related to a care home.

This multi-agency quality assurance system is sophisticated and well established and its commissioning and contracting arrangements that underpin this have been praised by the CSSIW in its annual performance reviews of the Authority.

This system allows for both a proactive and reactive approach that is responsive, proportionate and based on evidence.

Furthermore, as noted previously, the Authority has an excellent understanding of the care home sector within the county of Carmarthenshire. Its commissioning team collates and analyses a range of information pertaining to the care home sector not only on the quality and standards of care linked to safeguarding and complaints but also the wider issues that can impact on the quality of life for older people such as workforce and training, recruitment and retention, financial viability and transfer of ownership of homes so as to understand the dynamics of the care home sector. It undertakes the above through effective and systematic contract monitoring and quality assurance processes.

	<p>Not only does this involve liaison with frontline practitioners (Social workers, District Nurses, Occupational Therapists, Care home Managers and the staff) but it also involves interviewing service users and family members on their experiences of the care provided. The Authority has undertaken interviews with service users and family members routinely each year.</p> <p>The Authority has also initiated a wide range of training and innovative workshops to raise awareness and promote best practice as noted under 3.2.</p> <p>The Authority is currently working with HDUHB and the neighbouring councils of Ceredigion and Pembrokeshire to develop a regional Quality Assurance Framework (see below for further details)</p>
<p>On what evidence has this assessment been made? (850 words)</p>	<p>The Authority has established with its statutory partners a sophisticated multi agency process for collating data on the quality of care provided within the care home sector.</p> <p>Its commissioning and contracting arrangements that underpin its approach to managing the care home sector so that older people are protected and receive a good quality of life has been verified and praised by the CSSIW in its annual performance inspection reports of the Authority.</p> <p>One of the key elements to this approach is the Authority's Provider Performance Monitoring Group (PPMG) that brings together professionals from a range of disciplines (assessment and care management, safeguarding, community nursing, learning and development, health commissioning, social care commissioning, CSSIW. Environmental health) to share information on each and every care home as required.</p> <p>The purpose of the PPMG is to share concerns or developments as early as possible in order that appropriate and reasonable steps can be taken. For example, if a concern was raised that did not meet the safeguarding threshold for intervention, a monitoring officer along with a Nurse Assessor would jointly visit the care home in an effort to discuss the concern with the care home in order to resolve the issue with the clear purpose of avoiding any potential for escalation.</p>

This joint approach has demonstrated co-ordinated, timely and appropriate professional intervention avoiding duplication and confusion thus reducing further risks to all and providing appropriate guidance on actions/improvements.

This approach is also supported by the regular and systematic approach the Authority, working with its partner organisations, has taken to addressing more serious concerns within the care home sector. As an Authority, Carmarthenshire has on a number of occasions instituted care home embargos under the terms of its Contract and has not been reluctant where necessary to terminate its Contract with failing care homes, a clear message from the Operation Jasmine conference and from M Flynn, the author of *In Search of Accountability*.

Through these processes, the Authority has demonstrated evidence of its effective and robust approach to contract management of the care home sector for the fundamental purpose of protecting the quality of life of older people.

The management of care home performance in Carmarthenshire is therefore robust, effective and efficient and the evidence for this has been a reduction in the amount of embargos instituted and care homes reaching Escalating Concerns

Presently, this quality assurance process is under review in line with various changes and/or developments: legislation, organisational, best practice coupled with the lessons learned from the Operation Jasmine Conference held on 4 December 2015.

A regional working group has been established to consider how as four organisations (HDUHB and the three counties) a common Quality Assurance Framework can be developed to create consistent standards for older people. This review has considered a variety of existing QA Frameworks including the North Wales one as referenced in "A Place to Call Home" and is aiming to complete this work by the summer of 2017. Alongside this the Authority has continued to undertake regular monitoring of the care home sector to establish how well the care homes are meeting the needs of older people. The Authority has consulted with older people as users of the service or has found the means

	<p>(family members, social workers, health professionals) to obtain views on the care received where the person lacks capacity. The large scale audit of care homes providing dementia services is an illustration of seeking the views of older people on the service, engaging with families and working closely with care providers. A report was produced and shared with each care home and a best practice document citing the best examples across the care home sector was shared with the care homes as a means of raising the quality of care for older people. Owing to the close working relationships between officers and the care home managers, the Authority is able to keep abreast of developments and to see how positive changes are being implemented within care homes (as noted under 3.2 Impact). The recent multi agency workshop, <i>Nurturing a valuable asset - developing a meaningful approach to quality, learning and improvement in care homes</i> held on 20 March 2017 in Carmarthen illustrates the Authority's active approach to improving the quality of life for older people.</p>
<p>What impact has this had on residents' quality of life and care? (850 words)</p>	<p>The Authority is aware fully of the importance of making a difference to the lives of older people in care homes. As previously highlighted, it has run a series of innovative workshops to develop awareness and share ideas of best practice coupled with its regular monitoring and evaluation of care homes gaining the views and experiences of service users. Examples from the Dementia Audit below help to illustrate this approach:</p> <p>Setting 1 Outings are also arranged so that service users are able to go to the local theatre to see shows or to the cinema. Some service users attend Ty Gwyn centre, in Llanelli, who run a dementia reminiscence group weekly. A hairdresser visits regularly, and the staff have introduced "pamper sessions" with manicures, hand massages and fruit juice refreshments. A priest visits to give one particular service user communion. We also observed a service user involved in craft making activities.</p>

The manager also informed us that "Pat a Dog" pet therapy also visits the home, and service users who like animals are encouraged to take part.

Life histories are completed on each service users care file, and any hobbies or interests are identified. The files sampled had been added to by staff, showing that staff take an interest in the service user, and document any other activities/hobbies that the service user has indicated an interest in.

Setting 2

Findings from staff questionnaires indicate that service users are free from discrimination, prejudice, oppression and harassment, and have equal and appropriate access to opportunities. During the visit, staff were seen to communicate with service users with dignity and respect.

"This is Me" booklet, which had been completed by the Family and key-workers. This booklet contained details of life history including where they were born, if they were married, how many children they had, who visits regularly, any previous and present hobbies or interests and any particular likes and dislikes. One booklet viewed had been placed in the service user's room and included photographs and names from childhood through to adulthood.

The care plans have also been signed by either the service user or a representative, demonstrating that they had an input into the plan of care, and were in agreement of it.

Care plans sampled provided details of existing friends and family and how the service users are supported to maintain these relationships. The responses made to both staff and relatives' questionnaire would indicate that relatives and friends are able participate as fully as possible in life at the home.

In addition based on its monitoring, the Authority has obtained feedback from service users to the following question:

What impact has the home made to your life?

62% of respondents felt it had a positive impact on their lives.

38% did not answer this question.

Positive impact comments included:

"I feel I have been brought back from death's door"

"I have a new family now"

"I am happy here"

"It is home from home"

"I am well looked after"

"I've got good friends here and a nice room"

"My mother is more sociable and family have peace of mind" – quote from a daughter of a service user.

"I feel safer and don't feel lonely. My daughter and friends visit regularly. I still have my independence"

Negative impact comments included:

"Although I feel safer, I am still lonely. My friends don't visit regularly"

"Food could be a little warmer"

In addition, Health and Safety Audits undertaken by the Authority in 2014/15 included interviews with staff on their role and how they were contributing to the quality of life and well-being of the older person. A selection of comments as below illustrates the Authority obtains direct evidence of staff views. This information shapes commissioning officers' approach to developing further the care home sector working closely with care homes and our learning and development team.

Care Home Staff quotes to the question:

What do you like best about your Service and the job that you do

- Just knowing that people are well looked after and seeing their smile when they know you are doing your best to take care of them"
- "I love my job. I like coming into work and talking to the residents and making them laugh. I like working with all the staff on duty as a team to make sure everything gets done properly"
- "Being able to help care for someone and watching their improvements"

	<ul style="list-style-type: none"> • “Helping people who are unable to help themselves” • “Providing care and support to all residents” • “Supporting individuals with their needs” • “Caring, communication” • The Manager is approachable and always available for advice. The home is very keen on training for staff. I enjoy my job and enjoy working with the residents.” • Standards of care are good and the residents are placed first. I enjoy caring for elderly people and this job gives me a lot of satisfaction • “The manager and CEO are approachable and very supportive. I have passion for my job and enjoy every part of my responsibilities.” • “Communicating with people and learning something every day” • “Great atmosphere, good colleagues, care of service users is very good”
<p>If further actions are needed to be compliant, please evidence what these will be and provide a timeline for compliance? (500 words)</p>	<p>The Authority considers it is compliant with this outcome but seeks continuous improvement in services for older people in care home</p> <p>Particular areas for consideration are as below:</p> <ul style="list-style-type: none"> • With the Social Services and Well-being (Wales) Act 2014 forming the basis for a new statutory framework for social care in Wales and the emphasis on improving outcomes and the wellbeing of people, the Authority will be taking forward work under Part 9 of the Act and establishing a pooled fund for care home accommodation. In addition to the requirements of the Act, with both health and care services facing financial pressures and the challenges of meeting the complex needs of a growing and ageing population. This pooled fund will initially be specifically for care homes for older people. • The Authority is developing a regional Quality Assurance Framework to establish a consistent and updated approach to improving quality across the care sector

Sharing good practice and organisational achievements that have made an impactful difference to the quality of life and care of older people in care homes in Wales.

Please use this space to describe any new, different and innovative approaches that the Local Authority has invested in to improve the quality of life and care of older people in care homes in Wales, and the impact that this has achieved for older people. References to good practice may reflect any area relevant to the Commissioner's original Care Home Review.
Free text statement: 1,000 word limit.

Please note these have been referenced in the main document, for example, the series of Magic Moments workshops, Dementia training Strategy.

