




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	FLINTSHIRE COUNTY COUNCIL
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Date	2ND MARCH 2017
Signed	JANE DAVIES

Chief Executive Officer

Name: Colin Everett

Date: 07/04/2017

Signed:

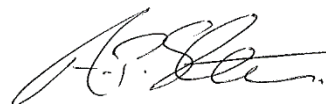


Council Leader

Name: Councillor Aaron Shotton

Date: 07/04/2017

Signed:



Deadline for responses: 31 March 2017

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

<p>Outcome</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>Action Required (Requirement for Action 2.2):</p> <p>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)</p>	
<p>To what extent do you comply with this Requirement for Action?</p> <p>(300 words)</p>	<p>Flintshire is compliant with the Requirement for Action (RfA) 2.2.</p> <p>In Flintshire we believe that there is a good range of flexible and proactive specialist services for older people living in care homes that aims to rehabilitate individuals following a period of ill-health. We have also invested in building the skills care home staff in specialist services so that they can support people to remain in the care home by preventing or managing a period of ill-health.</p> <p>In Flintshire, we work well with our health and 3rd sector partners to deliver multidisciplinary care regardless of whether an individual is in their own home in the community, in a care home or is Local Authority (LA) funded or self-funded.</p> <p>We are, like many others across the country, facing challenges in terms of the recruitment and retention of staff in the care sector which creates difficulties in maintaining specialist skills and experience within care homes to support the rehabilitation of older people, for example if a champion moves on so does that leadership and experience usually.</p> <p>Flintshire Social Services and its partners do recognise that there is further opportunity to strengthen our multidisciplinary care and the support that we offer to care homes; so in response we are investing in this vision as demonstrated in the developments of the Single Point of Access (SPoA), Community Resource Team (CRT) and the Care Home Support Team.</p> <p>The following services and training/ development have been made available to Flintshire care homes and evidences our compliance for the RfA 2.2:</p>
<p>On what evidence has this assessment been made?</p> <p>(850 words)</p>	<p>Rehabilitation Support</p> <p>Reablement</p> <p>Our Reablement Team provides flexible short term support for individuals, regardless of their funding source, which is person centred and outcome focused that aims to maximise independence, choice and quality of life. The team, consisting of Occupational therapists, Physiotherapists, Social Workers and Technical Instructors, will support individuals living in a care home to reable them to achieve their potential and in some situations this has enabled individuals to return home. Whilst the support provided by the</p>

team is short term intervention, the care home will continue to provide a reablement care, following their training in this approach, to maximise an individual's independence. The Reablement Team also supports residents who are in our 'rehabilitation beds' in care homes; the ultimate goal for these individuals is to return home if possible. We are pleased to report that 69% of individuals leave the service having achieved their personal outcomes and requiring no ongoing social services support.

Intermediate Care Team

Our Intermediate Care Team, which is part of our Reablement Team and shares the same approach and ethos, again provides a short term assessment and multidisciplinary rehabilitation support to individuals in a step up step down bed located in care homes; again this team aims to maximise independence, choice and quality of life.

'Rehabilitation/ Step Up Step Down' Beds

Social Services is committed to promoting and securing sufficient 'rehabilitation/ assessment/ step up step down' beds in care homes to avoid hospital admissions, facilitate timely discharges and provide intensive rehabilitation support in a care homes setting and closer to their community.

We have 4 rehabilitation beds and these are used to support recovery and reable residents with the aim of returning them home if possible; the 4 rehabilitation beds have level access en-suites and a kitchen area so independence is encouraged from the outset. The care staff within the home and staff from our Reablement Team support the individuals to achieve their personal outcomes.

The 'assessment/ step up step down' beds are funded by the Intermediate Care Fund and are predominantly used to avoid hospital admission, facilitate a timely discharge and offer a period of assessment for an individual. Residents who use these beds usually have a much broader range of needs and are cared for by community health and social care teams, including their GP, District Nurses, Community Therapists and the Intermediate Care Team as required.

Across our in-house and independent care homes we have secured on average 12 'step up step down beds' which have supported 153 individuals during the past year. Of the 153 individuals that have been supported this year, here is a summary of the outcomes:

75	returned home or went to live with a relative
7	discharged for further assessment
24	moved into long term care
10	passed away
4	admitted to hospital
33	remained in the 'step up step down bed' at the point of reporting

We are also pleased to report that Flintshire has continued to work well with our health colleagues and care homes to ensure that individuals are discharged from hospital after a period of illness as soon as they are medically fit and this is evidenced by a continuously low rate of delayed transfers of care from hospital, currently at 1.3 per 1,000 population (as of December 2016).

'Aids to Independence'

Social Services and BCUHB have made money available from the Intermediate Care Fund 2016/17 to offer all Flintshire care homes funding towards the purchasing of specialist equipment and a standard 'pack' of equipment which includes specialist mattresses, elks and hoists, to enable older people to be better supported within the home and to avoid admissions to hospital. All homes in Flintshire have received the standard pack and 13 homes have invested in additional specialist equipment so far.

Furthermore, we are upgrading the bathrooms in two of our in-house care homes with Clo-a-mat Palma Vita wash and dry toilets to aid the independence and dignity of residents.



Croes Atti - Toilet

Specialist Service Developments

Reablement Training

In 2015/16 Flintshire commissioned Reablement UK to deliver x3 2 day 'Art of Reablement' training sessions for care staff and a 2 day 'Decision Maker' session for owners/ managers/ senior staff to build skills within care homes about longer term recovery and reablement of residents. 6 homes completed the training in June 2015. Our priority is now to refresh this training and take it a step further and look how we will embed this approach in a sustainable way in all homes in Flintshire, with the support of our in-house reablement team.

Falls Prevention & Management

All homes have received training and support in falls risk management since 2006 and homes have been encouraged to have one or more Falls Champions who will provide a leadership role in raising the quality of falls risk management within the home by cascading falls knowledge and promoting prevention of falls.

In October 2014 'The North Wales Prevention and Management of Falls for People Living in a Care Homes Resource' was launched which consists of a pack of 18 tools for care homes. Flintshire has a dedicated Falls Coordinator, who has trained and supported staff with the introduction of the new falls tools. A total of 15 workshops were delivered in 2015, and 6 in 2016 in Flintshire. In addition, Falls Study Days were held in January 2014 and March 2016.

A&E staff at Wrexham Maelor Acute Hospital send a weekly list of Flintshire residents who have attended with a fall and the Falls Coordinator follows this up with a visit to the home to discuss the falls risk management for that individual. Arrangements are being negotiated for 2 other acute hospitals out of county to provide similar information.

Six Steps to Success Programme

In 2014 the "Six Steps to Success" programme was launched in Flintshire to improve the end of life care for older people living in care homes. This programme to date has been successful in increasing staff confidence and understanding of end of life care all of which has enabled older people to

	<p>have a choice and more control over their end of life care plans which means they can remain at home should they choose. Since October 2014, 25 homes have engaged with the programme, of which 23 home have completed the programme with a further 2 awaiting accreditation in September 2017. We have a total of 44 champions at present across all 23 homes in Flintshire, with a further 12 due to complete in September 2017 (we have lost a further 7 champions due to staff moving on).</p> <p>Once we have completed this 4th cohort of the programme in September 2017, we will only have 5 homes without champions (3 homes new to the programme and 2 which have previously lost champions). Our priority moving forward is to ensure all homes have received this training and to work with the homes to retain these valuable skills.</p>
<p>What impact has this had on residents' quality of life and care? (850 words)</p>	<p>The impact of specialist services delivered in Flintshire to rehabilitate individuals in care homes makes a significant difference to their lives; it enables them to regain a level of independence, increases their confidence, empowers them to have more choice and control of the care they receive and on occasions enables them to return home.</p> <p>Rehabilitation Support</p> <p>Our Reablement Team is a flagship service for Flintshire and is successful because of our approach; it empowers the individual to establish their own outcomes and we work alongside the individual to support them to achieve those outcomes. We have supported many people to achieve outcomes such as regaining independence with daily living, returning home from a period of living in a care home and joining social or economic activities. This vital support is enabling residents to be rehabilitated so that they can achieve their personal outcomes and enhance their quality of life. It has also been proven to help individuals to restore confidence in their own abilities and is rewarding when they see their personal achievements.</p> <p>The provision of rehabilitation and step up step down beds enables older people to have access to specialist assessment and support; it supports them to regain independence in a more relaxing and homely environment that is closer to their friends and family. Here are a couple of examples of work that our intensive joint multi-disciplinary rehabilitation in care homes can achieve for an older person following a period of ill-health:</p> <p>A gentleman who had suffered a stroke moved into a rehabilitation bed as he was unable to walk. He received intensive physiotherapy, occupational therapy and social work intervention to achieve his personal outcomes. His mobility improved significantly following the functional therapeutic support and he was able to return home with <u>no</u> care and support.</p> <p>A gentleman with dementia from our Extra Care facility was moved into an assessment bed for a short period following issues with his behaviour and incontinence. He was provided with specialist assessments and it was determined that an alternative care setting would best meet his needs and improve his quality of life.</p> <p>By providing these services we are offering older people an opportunity for a period of assessment and intensive rehabilitation in a community</p>

setting; it enables everyone a little more time to maximise their potential before decisions are made as to what is best for the individual; this is proving to reduce the 'revolving door' of individuals being admitted to hospital, going back home and then being re-admitted again.

The 'Aids to Independence' funding has enabled homes to purchase essential equipment to better deliver person-centered care to individuals living in their home, which has avoided hospital admissions and improved the quality of care for residents. Here are examples of a couple of the successes of the 'Aids to Independence' fund:

A lady was able to remain in the care home following the purchase of a bariatric rise recliner chair, as her mobility became difficult to manage with existing equipment and the alternative outcome would have been admission to hospital.

A specialist bed was purchased to aid an individual's sitting and transfers; this has enabled the lady (who is self-funding) to stay in the care home and prevented her from having to be transferred to nursing home or re-admitted to hospital

These examples demonstrate that having the right specialist equipment in the homes enhances the quality of care delivered.

The Clo-a-mat Palma Vita wash and dry toilets installed in two of our in-house homes recently have enabled several residents, who use to be hoisted off the toilet for cleaning, to remain sat on the toilet whilst they're cleaned and dried. It is a much more dignified and independent way of supporting the individual to toilet.

Specialist Service Developments

We have been investing in the care home workforce to build their skills in specialist services for older people as a means of delivering more person centred support to individuals to enable them to receive greater quality of care within the home. The training delivered to staff has proven to increase staff confidence and the use of champions has proven to lead on specialist services and share knowledge across the home.

The reablement training that we piloted in June 2015 has proved beneficial with one of the home managers giving positive feedback stating that the "training and information supplied was the most 'pragmatic' way they had ever been supported with how to align their business to longer term recovery" and also felt that it left the home staff with more confidence to make real changes to people's lives.

Care home staff in Flintshire have consistently played a key role in falls prevention; they have extended their knowledge and understanding of falls prevention and work alongside the wider health and social care teams to reduce the risks of falls for those within their care; this coupled with the introduction of the new resource tools has enabled a person centred approach to falls prevention and management in our care homes, enabling and supporting people to remain in the care home. One example of the falls tools being applied correctly in a Flintshire care home:

One evening an individual slid out of their wheelchair and scraped their back on the footrest. The Manager, a registered nurse,

	<p>examined the resident and found no other injuries apart from a superficial graze. Using the 9 questions of Tool 11 (Red Flag Assessment) he determined that there was no indication to call an ambulance, but planned to routinely inform the GP of the fall the next day using the letter template included in the Falls Resource Pack. The Red Flag Assessment uses the same 9 questions that paramedics use when assessing whether or not to transfer a fallen resident to the Emergency Department. By using this the home's manager was able to record why the ambulance was not needed.</p> <p>Staff who use these tools report feeling more confident that they are able to call an ambulance when it is indicated, so reducing unnecessary admissions.</p> <p>The Six Steps to Success programme is proving to prevent the need for older people living in a care home to be moved into a hospital setting which can be scary, unsettling and a long way from family and friends. It enables residents to remain in their preferred place of care with staff who know them and have been trained to meet their individual needs and wishes.</p> <p>A gentleman recently received palliative care in one of our care homes had his end of life care and wishes respected. His daughter said, “at all stages of my father’s last few weeks following the six steps pathway we were fully informed of the care plan and level of medication that would be given. The care received by my father was better than we could have hoped for, staff attended to his needs, his dignity was maintained always and the levels of cleanliness and personal care were excellent. The staff were also fantastic after he passed away and we would like to say thank you to all involved”.</p> <p>Flintshire care homes are also taking proactive steps with end of life care, for example one home is having end of life conversations early on with the individual, their family and GP so that everyone is aware of their wishes and the conversation takes place at a time that is not too distressing. Another home is identifying individuals in their care, who are possibly in the last 12 months of life, to ensure that they are following good practice and protocols in readiness.</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>In Flintshire, we hosted an Afternoon Tea Dance on the 28th October 2016 to celebrate the launch of the Flintshire Welcome Packs; the Welcome Pack is a co-produced standardised Pack for homes to then tailor and individualise. The Welcome Pack provides older people, families and advocates who are moving into a care home with information to help them have as much choice and control of their lives and the care and support that they receive. It also contains information on the health and wellbeing services available in the local area which will support them to maximise their independence and quality of life. 11 care homes in Flintshire have launched their Welcome Packs to date, with a further 3 homes launching soon; we will continue to support the rest of the care homes to develop their own as well as looking to roll this out to domiciliary care providers in the future.</p>

Flintshire Social Services and BCUHB have been working together over the last 12 months to develop and enhance their community services. A joint multidisciplinary Community Resource Team is currently being developed in Flintshire to respond quickly to individuals in the community whose health deteriorates in order to provide support in the person's own home, this will include individuals living in care homes. The team will provide short term care for an initial assessment period of two weeks.

The work of the SPoA in Flintshire will be central to coordinating specialist community health, social care and 3rd sector services, deploying appropriate resources and offering real alternatives to statutory and acute care; and this year we have seen the introduction of a dedicated 3rd Sector Coordinator role funded through the Intermediate Care Fund to meet the holistic needs of people in contact with the SPoA.

Furthermore, BCUHB have been working proactively with care homes to better understand the support that they require and how collectively they can expedite discharges. Learning from Lancaster has given BCUHB the vision to develop a 'Care Home Support Team', which would consist of nurses, therapists and medicines management, which goes into homes to offer support. Resources will be a challenge but there may be an opportunity to utilise resources from the Community Resource Team.

Flintshire has the following Action Plan in relation to strengthening our specialist services for older people living in care homes:

Action	Timeframe
Consider how to roll out and embed the reablement approach in all homes	September 2017
Continue to roll out Welcome Packs across all Flintshire care homes	Ongoing (our aim by end of 2017 all homes will have a Pack available to share with new residents moving into the home)
Agree the operating model for the new Community Resource Team and launch the new service	September 2017 March 2018
Test the concept of a 'Care Home Support Team' if available resources are secured	End of 2017
Explore opportunities to use capital funds to extend/ increase bed capacity within two of our in-house homes	March 2018

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</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>Action Required (Requirement for Action 3.2):</p> <p>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> <p>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 LA has achieved compliance with the RfA 3.2 with in-house and independent care homes.</p> <p>Currently in-house care homes receive a range of training regarding dementia and commissioned homes are able to access the training via our voucher scheme.</p> <p>The Workforce Development Team (WFD) additionally has facilitated a tiered approach with 5 levels of learning in dementia from induction through continuous professional development for all staff and further training for care home managers.</p> <p>Our comprehensive and specialist additional dementia training provided on an ongoing basis involves a training programme for care home staff. This includes DVDs, e learning, distance learning and mentoring schemes for ongoing competency development. Examples of training include dementia friendly gardening, Never Ending Story support and Dance Circles all specific to dementia.</p> <p>However, within a recent survey we found only 12% of care home training is accessed via the Workforce Development Team (from the tiered 5 levels of learning in dementia). Many homes access training from other sources within the education sector.</p>

	<p>Notwithstanding this, we have made significant inroads through our <i>'Creative Conversation Research study- with Bangor University'</i> (Paragraph 3-11 page number 6-7) for further information.</p> <div data-bbox="539 286 603 353" data-label="Image"> </div> <p data-bbox="496 353 639 405">Creative Conversations</p> <p>This is demonstrated by the number of care homes registered to take part in the research project. 46% of care homes have registered to take part in the training and research project.</p> <p>This number is driven by the fact that all care home managers are supported directly by the LA with the training study.</p> <p>The research study specifically focuses on the skills and competency development of care, domestic and auxiliary staff using the arts, to ensure that staff working in care homes understand the physical and emotional needs of people living with dementia. The research will have specific elements of supervision and performance assessment completed by Bangor University (BU).</p> <p>Following the completion of the study, the created and developed resource and programme will be sustained by the LA and delivered regularly to all care home staff including domestic and auxiliary staff.</p> <p>Additionally there compliance with the research study training will benefit there progress for providers assessment toolkit where the outcomes they are achieving within action 3.2 are covered under A place to call home...delivering what matters and progress for providers section 21-22 (Further detail see action 6.6 – 6.7) within this self-assessment toolkit care homes are accredited as bronze, silver and gold. Action from 3.2 are currently within gold accreditation.</p>
<p>On what evidence has this assessment been made? (850 words)</p>	<p>Flintshire completed an audit, via Survey Monkey, of dementia training provided for care home staff within Flintshire across our homes. The result have shown:</p> <ul style="list-style-type: none"> • 98% of care staff and managers had completed dementia training • 5% of staff in domestic, auxiliary and admin roles had completed dementia training • All care homes refresh their dementia training every 2-3 years • 12% of dementia training was accessed via WFD • The preferred methods of training were: classroom, diplomas, dementia friends and QCF • Dementia Action Learning Sets – during 2016 we have run 7 sessions and 37 people have attended <p>When reviewing the survey we are proud to see 98% of care staff and managers had completed dementia training. With this outcome from care homes our aim was to concentrate on the other gaps found in the survey.</p>

Following review of the audit, we had the opportunity to develop the research study with BU that addressed the gaps in training. For instance,

- Increasing the training for those in domestic and auxiliary post. This is one of the main aims of the study developing skills and competency of all staff.
- Addressing to low percentage of access to LA training via additional support. This study is engaging with 48% of the care homes in the LA.
- The periods in which training is refreshed. This is covered by our sustainability plan, where the LA will have 3 trainers to deliver the training on a regular quarterly basis.

In Oct 2016, Social Services and BU commissioned a specialist dementia services facilitator as part of the study, to engage and support researchers, care home managers and staff. With the purpose of aiding the development, delivery and sustainability of the targeted Creative Conversations training. With our overall aim to promote and drive high quality dementia care and quality of life outcomes for residents as part of our '*A place to call home...delivering what matters and progress for providers*' (2014)

In the development of the research study with BU, we utilised the commissioner's 'A Place to Call Home?' report, recognised good practice and, more recently, the Social Service and Well-being (Wales) Act 2014 as a baseline to drive cultural change needed to provide high quality of life and care outcomes for people living with dementia. The facilitator continues to lead the engagement, support and development of the study. Delivery of the training commences from May – November 2017. With observations on quality of life, as well as progress reports on key mile stones completed by BU during this time.

Milestone achievements to date include:

The LA completed an audit of dementia training with the care homes. And was proud to report that 98% of care home staff have completed dementia training. We identified the gaps and have taken action to ensure that all staff working in care homes understand the physical and emotional need of people living with dementia.

The LA and BU created a partnership to create a study that looks at all staff working in care homes having an understanding of the needs of people with dementia. Additionally we have discussed our sustainability aspects of the study/ training.

The LA and BU developed the '*Creative Conversation research study*' with writer and poet John Killick. Consulting with care homes staff, managers, people living with dementia and carers in all aspects of the research study. (3 consultation event to date)

48% of care homes will receive training within creative conversation. This training will include care, domestic and auxiliary staff, which includes communication strategies in the following:

- Seeing people with dementia as individuals
- Understanding mood changes in people with dementia
- Coping with one's own states of mind

	<ul style="list-style-type: none"> • Language used talking to people with dementia • Language used talking to other members of staff • Interpreting the language of people with dementia • Communicating with people with dementia who have lost language • Sexual expression of feelings by people with dementia • Use of humour in relationships in the care home • Coping with the physical tasks of caring • Communicating with family carers and friends of people with dementia • Communicating through the arts <p>This training focuses on the development of all care staff as positive enablers and leaders of good practice in dementia care through shifting from a time and task orientated culture where time is given to all staff and relationships are built, and creative conversations are regarded as essential for residents' wellbeing and the human right of residents are upheld.</p> <p>Within our A place to call home...delivering what matters and progress for providers. (Please refer to RFA 6.2 page 20 with regards to progress for providers) The actions taken by care homes with regards to staff skills and competency development including supervision and performance assessment will be discussed within their individual action plan for achieving accreditation as bronze, silver and gold. This study and sustained training model will complement our aim for better understanding the quality of life of older people 6.2 and all staff working in care homes understand the physical and emotional need of people living with dementia 3.2.</p>
<p>What impact has this had on residents' quality of life and care? (850 words)</p>	<p>Flintshire is driving a transformation in all dementia care across care homes. This scale of transformation requires a long term commitment and cannot be simply added on to current care home culture.</p> <p>A fundamental aspect of this transformation is the need to change the culture from grass roots upwards. We have seen care home manager struggle to implement the change needed in the culture. By empowering all staff through training, supervisions and performance assessment we can enable a peer support change that includes care, domestic and auxiliary staff. (Creative Conversation research study) Instead of concentrating on one staff group at a time.</p> <p>The impact on quality of life of residents has been capture in different formats. As care staff have completed dementia training we have included a number of impacts following training and induction. With our Creative Conversation impacts on quality of life, we have express the vision and confirmed research supporting our training models impacts on quality of life, as a full evaluation and outcomes on quality of life will be report throughout to study and on completion.</p> <p>Care home training impacts on quality of life</p>

Care home managers have been proactive in training of the care staff across Flintshire in dementia. The impact of this training on the quality of life and care of residents can be seen in the below case studies provided by managers.

Living Well With Dementia - Smartcare

Flintshire has one member of staff who has had no experience of dementia, other than that of a personal nature. She attended the Living Well With Dementia course through Smartcare. She immediately felt more confident within her job role, and you could see her being able to take a step back and look at actions and behaviours objectively to try and understand them rather than dismiss them. **An example of this was she helped one individual be able to communicate more effectively by using flash cards, by recognising that this individual's dementia had affected their use of understanding words she was able to create flash cards so that both the individual and staff are able to communicate their wants and needs, thus seeing a decrease in frustration for the individual.**

Emergency First Aid at Work - Atrium

This training course time and time again gives staff the confidence to be able to feel that they can act in the appropriate way as and when an emergency occurs. There are many examples of staff where they have felt able to deal with an event having had the training.

Never Ending Story Support Sessions – RMD Memory Matters

Care staff were provided with dementia training in creative storytelling and the impact gave care staff the 'in action' ability to feel confident to continue to engage residents, especially the power of imagination with people with dementia. We have seen staff recognising the benefits first hand of going with the person in their world instead of just learning about it, a skill that can be translated to other aspects of their roles.

Care homes have been supported to deliver a positive care culture through ongoing supervision and participation in the 'A place to call home...delivering what matters and progress for providers'

Creative Conversations impacts on quality of life

The research study and training is due to launch from April 2017. The first element will be interviews/ supervisions and observations with staff within the care homes taking part in the study/training. All researchers, facilitators, residents and staff involved will have one page profiles to use as a tool to create connections and understand each other. This will enable all involved to find out more about each other as well as facilitate further opportunities in creative conversations training for staff. Following the training we aim to see more positive and timely interacts across the care homes, during shared moments, everyday activity and tasks involving residents.

We also aim to see the following impacts as supported by other research in the following areas of quality of life and care for residents:

Mental Health Foundation (MHF, 2011) found the impact on older people of participatory arts such as visual arts, dance, theatre and drama, music and story-telling, found that involvement in participatory

	<p>art programmes could result in benefits to mental well-being such as increased confidence and self-esteem, feelings of accomplishment, and new and positive aspects to identity and life roles. They also found evidence for the improvement of cognitive functioning, communication, self-esteem, musical skills, pleasure, enjoyment of life, memory and creative thinking for people with dementia engaged in participatory art.</p> <p>As well as benefiting older people, researchers have found that such projects also impacted on care staff and family carers. A poetry programme called 'Try to Remember' helped staff recognise that residents with dementia "have still got a voice" and that "They're people; They're in there" leading the researcher to conclude that the poetry programme had increased the quality of life and care of care home resident with dementia by enabling the personhood of the residents to be recognised (Gregory, 2011).</p> <p>Another project, led by the Courtyard Theatre, provided poetry residencies in care homes and found that staff developed new skills and an insight to working with people living with dementia (Lillyman, Pearce, Saunders, & Allen, 2014). This is supported by findings from a group storytelling programme set in residential homes, TimeSlips, which found benefits to staff that included the learning of new skills and the gaining of a deeper understanding of residents (George & Houser, 2014).</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>Flintshire has the following Action Plan in relation to continuing with dementia training:</p> <table border="1" data-bbox="459 1077 1385 1879"> <thead> <tr> <th data-bbox="459 1077 922 1128">Action</th> <th data-bbox="927 1077 1385 1128">Timeframe</th> </tr> </thead> <tbody> <tr> <td data-bbox="459 1135 922 1330">Begin the Creative Conversation research study interventions and training with the care homes and all staff registered to take part</td> <td data-bbox="927 1135 1385 1330">April – Dec 2017</td> </tr> <tr> <td data-bbox="459 1337 922 1518">Finalise the sustainability plan of training with qualified trainers for 5 year period</td> <td data-bbox="927 1337 1385 1518">September 2017</td> </tr> <tr> <td data-bbox="459 1525 922 1720">Embed practises around supervision and performance assessment from study into sustainability plan</td> <td data-bbox="927 1525 1385 1720">September 2017</td> </tr> <tr> <td data-bbox="459 1727 922 1879">Dissemination event: Sharing sustainability plan, findings, impacts and evaluation.</td> <td data-bbox="927 1727 1385 1879">May 2018</td> </tr> </tbody> </table>	Action	Timeframe	Begin the Creative Conversation research study interventions and training with the care homes and all staff registered to take part	April – Dec 2017	Finalise the sustainability plan of training with qualified trainers for 5 year period	September 2017	Embed practises around supervision and performance assessment from study into sustainability plan	September 2017	Dissemination event: Sharing sustainability plan, findings, impacts and evaluation.	May 2018
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Begin the Creative Conversation research study interventions and training with the care homes and all staff registered to take part	April – Dec 2017										
Finalise the sustainability plan of training with qualified trainers for 5 year period	September 2017										
Embed practises around supervision and performance assessment from study into sustainability plan	September 2017										
Dissemination event: Sharing sustainability plan, findings, impacts and evaluation.	May 2018										

	Evaluate closer links and opportunities with care homes regarding dementia training and A place to call home...delivering what matter and progress for providers reporting	April 2018
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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.

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.

To what extent do you comply with this Requirement for Action?

(300 words)

The LA has achieved **substantial compliance** with the RfA 3.3.

Our initial strategy involved the Listening Friends pilot (attached) that included an objective to enhance community links for older people in residential care by providing them with peer support and friendship. After piloting the project limited success was shown. A key lesson learned was recruitment of volunteers due to care home stigma.



Project Brief -
Listening Friends



A new strategy was developed that concentrates on a staged approach to the RFA.

Stage One – Building the profile of homes within the Community and removing stigma of homes and people living with dementia.

Stage Two – Bringing the community into the care homes to support meaningful social contact

We have made significant inroads through our Dementia Service Development Programme (DSDP) that encompasses communities and homes as being a part/partner of communities.

This is demonstrated by the following active steps:

	<p>Befriending in Care Homes –Our Befriending Scheme brings care homes residents to our 10 community run Memory Cafes (MC) across the county. Within this environment residents are supported to create friendships through activity in a safe and familiar location.</p> <p>Intergenerational Projects – the LA has delivered 5 of 7 intergenerational projects to homes residents. These projects train all the learners in the school as Dementia friends and then 15 selected pupils have a creative arts workshops that looks at communication. Following this workshop the pupils and residents and community work together on a creative story session called ‘Never Ending Story’</p> <p>Retaining existing Friendships – the LA has promoted retaining Friendships, via the 10 MC where residents are asked about friendships. The community then create a low impact appeal for those friends inviting them to meet up with residents.</p> <p>Access to:</p> <p>Faith Based Support – The LA is actively working with Faith Groups where we are creating MC within faith based environments, using volunteers from faith based organisations and delivering Dementia Friendly services</p> <p>Cultural Communities – The LA is aiming to develop a befriending scheme that support people with dementia in care whom are from a Welsh cultural background, this will include language and cultural aspects.</p>
<p>On what evidence has this assessment been made? (850 words)</p>	<p>In October 2014, Flintshire commissioned a specialist Dementia Services Development Officer to develop and create Dementia Services across Flintshire. With the aim of creating Dementia Friendly Communities (attached) that are sustained and supported via partnerships.</p> <p> DFC Key Areas.pdf</p> <p>The Dementia Services Development Programme (DSDP) utilises the commissioners ‘A Place to Call Home?’ Report, recognised good practice and, more recently, the feedback from care homes themselves within a survey monkey questionnaire. The officer continues to lead the development programme and to provide progress reports to Health and Social Care Scrutiny Committee (attached) on the active steps taken for specific outcomes in the commissioners ‘A Place to Call Home?’ Report.</p> <p> Dementia Services - Scrutiny Report (Fin.</p> <p>Evidence and reflection for new strategy</p> <p>Following our initial pilot project learning and scoping of the local care home provision. It was found that care homes were the barrier for friends</p>

of residents and volunteers to visit, and they did not want to enter the environment.

We decided to tackle the issue of stigma within the community. By using current initiatives within the DSDP to ensure meaningful social contact happens outside the care home in stage 1. We feel by having the care homes actively represented in various ways within the community. We will be able to deliver stage 2 within the care home setting which will concentrate on retaining and developing new friendships with aspects of intergenerational, faith based support and specific cultural communities.

Achievements to date in Stage One include:

14 care homes are actively supporting the lead officer to tackle stigma in the following ways:

Action taken	Number of Care Homes
Becoming an Accredited Dementia Friendly Care Home via Dementia Friendly Communities	3
Manager/ Champions Delivering Dementia Friends session to the community	7
Attending Memory Cafes regularly with residents	8
Attending Event with residents (Intergenerational Projects, Dementia Friendly Business Award, Dementia Friendly Christmas Shopping Events)	11
Attending Dementia Friendly religious services with residents	7

These 14 homes are creating a presence within their community tackling stigma via awareness session, publicity and press coverage, actively being seen with residents within Memory Cafes, places of worship and proactively being at events that are held with the community and businesses.

Achievements of the new strategy

By concentrating on community interaction outside of the care home in stage 1. We have been able to create provisions and projects for all care homes to access to enable friendships and meaningful social contact. The achievements below show the investment from the LA and care homes to ensure an outcome for residents.

Befriending in Care Homes –

- 10 Memory Cafes are accessible for all Care Homes within the County (3 in the North West, 4 in the East, 3 in the South locality)
- 32% of Care homes are regularly attending Memory Cafés creating new friendships
- 25-30% of the Memory Café attendees are from Care homes.

Intergenerational Projects –

- 5 of 7 intergenerational projects delivered
- 5 Schools (1 High School, 4 Primary) have nearly 800 Dementia Friends (removing stigma)
- 7 Care homes have attended the ‘Never Ending Story’ session

	<ul style="list-style-type: none"> • 30-50% of the attendees to the 'Never Ending Story' session are from care homes <p>Retaining existing Friendships –</p> <ul style="list-style-type: none"> • 4 residents have reconnected with lost/old friends via the Memory Cafes <p>Faith Based Support –</p> <ul style="list-style-type: none"> • 4 Café location are within faith based location • 6 Cafes are supported by faith based individuals • 5 Dementia Friendly services have taken place in 2016-17 • 7 Care homes have attended the services with residents <p>Care homes are provided with encouragement and direct support to actively engage, in the programme and projects taking part within their communities. Additionally there compliance with the staged actions will benefit their Progress for Providers assessment where the outcomes they are achieving within action 3.3 are covered under A Place to Call Home...Delivering What Matters and Progress for Providers section 21-22 (Further detail see action 6.6 – 6.7) within this self-assessment care homes are accredited as bronze, silver and gold. Action from 3.3 are currently within gold accreditation.</p>
<p>What impact has this had on residents' quality of life and care? (850 words)</p>	<p>Flintshire is driving a transformation in opinion and understanding of homes across both LA homes and commissioned placements in homes.</p> <p>This transformation is bringing the homes into the community where their identity should be placed as another community location that is accessible just like visiting your neighbour or friend. We are currently expressing a home as a new neighbour in the community, where those around are unsure of who the home is? Within our approach we have explained how we are tackling the home identity from the perspective of the community, but we are also building and creating those friendships, meaningful social contacts outside of the home for residents.</p> <p>Our impact to date is that while there has been some resistance to change from both homes and the community the number of positive supportive interactions between the befriending scheme (Memory Café), intergenerational projects (Never Ending Story), retaining existing friendships and faith Based support have increased.</p> <p>This has also been evidenced via the Dementia Service Development Lead who has been reporting new examples of good practice in press coverage and other sources, including:</p> <p>Befriending in care homes (Memory Cafés) – A regular attendee of one of the memory café within the county. Came in to the café on one occasion with a book he had wrote about his life as a driver. Within his lifetime he travelled the world driving different vehicles including an American school bus across the Sahara dessert. Whilst at the memory café the volunteers introduced him to a gentleman from a local home who started attending that day with other residents. The carers explained how he was very reclusive, withdrawn and depressed within the home environment as he lived mainly with females in the home. Within in seconds of meeting a conversation started up about each other careers as drivers the countries they had been too and the adventure they had. These men did not know each other and had never seen each other on the road. A friendship developed over the following months and they</p>

became good friends meeting regularly at the memory café and within the home. This showed that, all someone needs is an introduction.

Intergenerational Project (Never Ending Story) – The project has created a number of examples of good practice. As part of the evaluation of project at the end of the Never Ending Story session the facilitator interviews a number of people involved including the pupils, people living with dementia from the community and homes. Please see the (attached) interview videos:

1. Resident from Phoenix House
2. Pupils from Flint High School
3. Teacher from Flint High School
4. Pupils from Bryn Gwalia Primary School
5. Tenants from Llys Jasmine Extra Care
6. Residents and Manager from The Cottage Nursing Home

Please follow the [link](#) provided – Login or sign up to google drive to access the videos.

As identified within the videos pupils have shown an increased understanding of the individuality of dementia. This has been reflected upon in the residents video which showcases the significant impact that personal identity, be it imaginary or real, along with self-worth has on a person with dementia's quality of life. We will continue this as a programme of work in the Dementia Services Development Plan, linked with our Dementia Friendly Communities initiative.

Retaining Existing Friendships – Our most prominent story has been two friend reuniting after nearly 70 years. Following a short conversation about an old school friend to someone that knew him within the Memory Café created an opportunity for two long lost friends to reconnect. Please see the (attached) press releases for more of the story. This impact on quality of life and care is seen in the story, the memories of one individual are now reciprocated by another whom shares the same memories. A true friendship that parted but reunited years later. This approach is simple sharing names of past friends can enable reconnection and is promoted practice within the Memory Café setting with residents.

Faith Based Support – Placing a number of the memory cafes within the faith based setting has seen a number of impacts for the local faith based leaders. The impact for residents of homes entering the environment or seeing familiar Faith based elements has been noted by Rev. Brian Harvey of the Flint Parish where he has shared the following impacts:

‘During the Business Awards event I was asked by a lady who was there with her mother (who is a regular at the Memory Café) whether the next time she was there I could say some prayers with her mother who is the widow of a Methodist minister. The daughter feels that her mother is not getting this kind of faith-support anywhere else, she told me.’

‘At the Dementia Friendly Christmas shopping events, the choir have always sung a selection of traditional and religious Christmas

	<p>carols where quite a few people with dementia have joined in, embracing a tradition of good will to all men.’ ‘I seem to remember a gentleman at one of the Memory Cafés walking around the church and spending a lot of time looking at our beautiful stained glass windows and reflecting or embracing his spirituality.’</p> <p>The impacts of faith based support is wider than individuals we have seen it be spiritual (saying prayers), embracing tradition (comfort in carols and hymns) and being in a stimulating environment. The LA are working with a number of faith based organisation to help them understand the impacts of faith based support beyond regular services and creating creative stimulus within the faith based environment via memory cafes. To provide faith based organisation with the tools to undertake action within home locations.</p> <p>The changes in care homes has been profound, with residents clearly having meaningful social contacts outside of the home. Retaining existing friendship is a complicated matter but having the resource that enables an opportunity to remove barriers for visiting will benefit our forward moving agenda of removing care home stigma for the quality of life and care of resident.</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>Flintshire has the following Action Plan in relation to continuing with Stage 1 and 2:</p> <table border="1" data-bbox="459 1084 1385 1977"> <thead> <tr> <th data-bbox="459 1084 922 1137">Action</th> <th data-bbox="927 1084 1385 1137">Timeframe</th> </tr> </thead> <tbody> <tr> <td data-bbox="459 1144 922 1435">Encouraging the outstanding 16 care homes to become involved in befriending via the memory café, participate in the intergenerational projects and to tackle stigma within the community.</td> <td data-bbox="927 1144 1385 1435">Ongoing</td> </tr> <tr> <td data-bbox="459 1442 922 1711">Work with additional faith based support to organise involvement and access to available support within different dominations including the welsh Methodist Chapel</td> <td data-bbox="927 1442 1385 1711">Ongoing</td> </tr> <tr> <td data-bbox="459 1718 922 1845">Sustain funding for intergenerational work</td> <td data-bbox="927 1718 1385 1845">September 2017</td> </tr> <tr> <td data-bbox="459 1852 922 1977">Planning and Development of Stage 2</td> <td data-bbox="927 1852 1385 1977">End of 2017</td> </tr> </tbody> </table>	Action	Timeframe	Encouraging the outstanding 16 care homes to become involved in befriending via the memory café, participate in the intergenerational projects and to tackle stigma within the community.	Ongoing	Work with additional faith based support to organise involvement and access to available support within different dominations including the welsh Methodist Chapel	Ongoing	Sustain funding for intergenerational work	September 2017	Planning and Development of Stage 2	End of 2017
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Sustain funding for intergenerational work	September 2017										
Planning and Development of Stage 2	End of 2017										

	Create links and partnerships for care homes to bring resource for befriending in care homes, retaining friendships and access to faith based support and cultural communities	Summer 2018
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<p>Outcome</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>Action Required (Requirement for Action 6.2 & 6.7):</p> <p>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.</p> <p>Annual reporting should be undertaken of how on-going feedback from older people has been used to drive continuous improvement.</p>	
<p>To what extent do you comply with this Requirement for Action? (300 words)</p>	<p>Flintshire is partially compliant with the RfA 6.2 and 6.7.</p> <p>The importance of a resident’s lived experience has been a priority for Flintshire for some time and we recognised the importance of enabling people to make choices about the things that matter most to them giving them more control over the services that support them to live their lives.</p> <p>In 2015 we started to think about how we could support our care homes to move away from a ‘task and time’ approach to one that focuses on the quality of the lived experience of older people from listening to older people, and this is when our programme of cultural change called “Creating a Place Called Home, Delivering What Matters” was born. Since then, this programme has been our focus, we have worked in partnership to develop the programme and this last year 2016/17 we have seen care homes embracing the person-centred practices and making real changes to the way they support older people. This has included having ‘what matters’ conversations with older people as an informal and systematic approach to understanding the day to day quality of life for older people.</p> <p>In Flintshire, we are very proud of the positive relationships we have with our providers and their willingness to engage in creating and developing new approaches and solutions. Partnership working has also been much valued by our care providers and our programme is drawing on this strength and is a real partnership venture.</p> <p>As this programme of change is in its infancy, so too is the data and feedback that we are receiving from older people, their families and advocates. Our intention is to complete our first year of the programme and undertake an evaluation of its success in driving cultural change to improve the quality of life for older people. We are collating rich data as</p>

	<p>we progress on this journey which will be captured at year end to inform our commissioning, development of services and how we support older people living in care homes.</p>
<p>On what evidence has this assessment been made? (850 words)</p>	<p>Here is a flavour of what we have been doing in Flintshire to ensure we understand the quality of life and care of older people in Flintshire:</p> <p>Working Together for Change</p> <p>Working Together for Change (WTfC) is an approach that we have piloted within one of our homes to try to use the qualitative voice of the people who are living in care homes to inform strategic commissioning. A WTfC event was held and the process of engagement used the raw data gathered from person-centred reviews at the home to determine what is working for the older people living there, what is not working so well and what might need to change for the future, see attached report.</p> <div data-bbox="528 741 592 801" data-label="Image"> </div> <p>WTfC - Llys Gwenffrwd</p> <p>This approach will now be rolled out in all care homes, clustered in geographical areas so that we can draw on the assets of the local community and businesses, and the Contract Monitoring Team will produce thematic reports about the experience of older people living in care homes in Flintshire. This will feed into our annual reporting which will help to drive our continuous improvement.</p> <p>‘Creating a Place Called Home, Delivering What Matters’ Programme</p> <p>Our Contracts and Commissioning Team in Flintshire has been undertaking innovative work in partnership with our care homes and Helen Sanderson Associates by embarking on a programme of cultural change called “Creating a Place Called Home, Delivering What Matters” which is striving to improve the day to day lives of individuals living in care homes by embedding person centred practices and delivering what matters to people.</p> <p>The programme is being driven by a leadership group comprising independent and in-house care home managers, social work and review team leaders, officers from the Care & Social Services Inspectorate Wales and members of our Contracts and Commissioning Team.</p> <p>The leadership group developed a vision for the changes that it wanted to create and support. This vision was captured in a one-page strategy which identified what success would look like from four perspectives: individuals living in care homes, staff, provider organisations and commissioners. Capturing all four perspectives was important in enabling providers to view the programme as one that would assist them to deliver real change, as opposed to being seen as another council run training programme.</p>



One Page Strategy

We sent an open invitation to all 26 care homes to become part of our programme, 16 were committed to be part of the programme, which later grew to 20.

These homes have all embraced the improvement journey, alongside the Council's own in-house provider services, social work team, OTs, management teams and many more, to implement person centred practices including the 'One Page Profile', 'Good Days and Bad Days', 'Working/not working' and more.

As a way of recognising the good work and progress that care homes are making on this journey we have introduced 'Progress for Providers' which contains three levels of accreditation, Bronze, Silver and Gold. It allows them to check how they are doing in delivering personalised support by giving them a process to measure and evidence the changes they are making. Once completed managers, with ongoing support from one of our Contract Monitoring Officers, will prioritise the areas they want to improve and increase their scores on and set out an action plan of what needs to be done to make these improvements. The outcome in Flintshire is that, from April this year (2017), care homes will work towards a bronze rating for person-centred practices. To be bronze, everyone in the care home (including all staff) needs to have an up to date one-page profile that is being used, and more importantly is making a difference.



PFP CARE HOME

We are proud to report that over half of the care homes engaged in the programme are already making fantastic progress against the requirements for Bronze accreditation before the official commencement in April 2017.

One Page Profiles

We know that people are the experts in their own lives so we have informally listening to older people and what matters to them so that we can deliver support in the context of how people want to live, and our one page profiles are the tool for capturing and acting upon that that.

One Page Profiles are a record of a conversation that takes place between the person, their family, and those who know the person very well, for example the staff who support them. It has three sections - an appreciation section about your qualities, what's important to you and what good support looks like to you. The One Page Profiles, which are completed by both the individuals living in the home and the staff, are the foundations for the delivery of personalised care and what truly matters to the person.

Here are some examples of One Page Profiles, and how some homes capture and work with the families and friends to learn more about the

individual, who they are, what they have done in their life and what's important to them now to better understand how best to support them:



Clare Roberts -
Manager Haulfryn.p



Karen Adamson -
Staff Haulfryn.pdf



One Page Profile -
Jeff



One Page Profile -
Mair



This is Me 001



This is Me 002



This is Me 003



This is Me 004

Further Feedback Opportunities

We have an array of methods that we use in Flintshire to share information and give people living in a care homes, their friends or family, the opportunity to provide informal feedback on their experiences, all outside of the formal complaints process. We have developed a [webpage](#) on the Flintshire County Council website to share information on care homes and what we in Social Services are doing to improve the quality of care in care homes; this is where we invite people to give us any feedback or comments on Flintshire care homes. This webpage has also been linked to the Flintshire County Council App to enable feedback to be obtained from that communication channel. We have also introduced a twitter handle and [account](#) to increase public awareness and we currently have 405 followers.

Last year we introduced a new method of obtaining feedback on the lived experiences of older people in care homes with bi-annual visits from our elected members. This is proving to increase awareness and develop relationships with the community. Elected members also share their 'one page' profiles with the individuals that they meet. Please take a look at our Cabinet Member Councillor Christine Jones' one page profile.



Cllr. Christine Jones
- One Page Profile

Finally, we have drafted our first Annual Quality Statement which is still subject to corporate endorsement following the local elections.

What impact has this had on residents' quality of life and care?

(850 words)

With the recent legislation, such as the Social Services and Wellbeing (Wales) Act 2014, Regulation and Inspection of Social Care (Wales) Act 2014 and the Future Generations Act 2015, it clearly demonstrates the Welsh Government's focus on improving the outcomes, well-being and quality of life of people receiving care services in Wales, and as a LA we needed to ensure that we were fulfilling our statutory responsibilities. Our programme is responding to several of the Act's key principles: that Local Authorities should work collaboratively in nurturing and developing commissioned services, that people receiving services should be given more choice and control by capturing and acting on 'what matters' to them, and that well-being outcomes for individuals should be achieved and measured by commissioned services.

One of the key issues currently affecting Flintshire's workforce capacity in the care market is our low unemployment levels due to factors such as the presence of a large retail park, the biggest industrial estate in Europe and a large aerospace employer. All of these factors impact negatively on the job market and consequently care providers in all sectors are finding it difficult to recruit and retain staff. Our programme hopes to help with this issue by recognizing and valuing the contribution of care staff, thereby aiding staff retention. Care workers have the rich knowledge and understanding of the things that are important to the people that they support and that make a difference to their lives. Their contribution is therefore vital to the success of the work that we are doing.

Whilst keeping people safe and well is fundamental to good care, we are trying to shift the focus towards capturing and acting on the things that matter to people receiving care and support. In Flintshire our belief is that by embedding a personalised approach within care homes we can improve the quality of life of older people who live there whilst simultaneously contributing to improving staff recruitment and retention within the care sector.

To achieve bronze accreditation, everyone in the care home (including all staff) needs to have an up to date one-page profile that is being used, and more importantly is must be making a difference to people's lives. We already have some fantastic stories of how the introduction of the one pages profiles are improving the quality of life for people in care homes, here are some examples:

"a gentlemen is now going fishing with a staff member's relative as a result of finding out what his interests were"

"one gentleman is able to do what he enjoys best and that's putting a little bet on the horse racing"

"one lady skypes her family in Australia using the care home's iPad"

"another gentleman goes in a taxi to visit his wife in another care home once a week as a result of listening to what matters to him"
(after his wife had moved to another home, EMI home)

"one lady likes to knit, so has been knitting scarfs for the other residents"

"one home purchased a football goal for the garden, as one of their residents is an ex-Chester football player, and enjoys a kick about when his friend comes to visit"

Here are a couple of stories of two individuals living in care homes that demonstrate by listening and supporting them to do the things the matter to them enhances their wellbeing and quality of life; this is Mair and Connie's journey:



Supporting Mair Supporting Connie

We have noticed that it's sometimes the small things that make the biggest difference to people's lives.

We have also started to be creative with the way we use and share our staff One Page Profiles, here are example of home using the One Page Profiles as part of a wall display.



Staff One Page Profile - Wall Display

Another excellent example of how we are listening to residents and what matters to them to improve their wellbeing and quality of life is the work that has taken place in one care home, where the residents collectively wanted to upgrade the gardens surrounding the home and will the support of the local community and staff to maintain and undertake the work, the manager secured grant funding to make this happen. The garden now has a domestic area that promotes activities, exercise and reminiscence, a recreational area designed for fun, relaxation and reminiscence and a sensory and vegetable garden. From undertaking the work, individuals were able to share their experiences of gardening and their favourite shrubs and flowers so that these were included in the new garden and were encouraged to help with making the improvements and ongoing maintenance.



Diana Garden

Furthermore, as a result of the WTfC event held the priority themes following the event were identified by the residents as:

- I don't have enough information
- I want to go out when I want to
- I want more choice and control in activities

As a result the care home staff have supported residents to access more community activities such as Flintshire Sounds, enabled individuals to go out and do what matters, for example one residents goes to his local pub every Friday night for a pint, and giving residents more information via a Welcome Pack and monthly residents meetings. This links to the meaningful social contact with the wider community work that is outlined in RfA 3.3.

If further actions are needed to be compliant,

Flintshire has the following Action Plan in relation to gaining a thorough understanding of the day to day quality of life of older people living in care homes:

Action	Timeframe
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<p>please evidence what these will be and provide a timeline for compliance? (500 words)</p>	<p>Roll out the Working Together for Change Approach with all homes in Flintshire</p>	<p>Commencing summer 2017</p>
	<p>Analyse social media feedback from people regarding quality of life in care homes</p>	<p>Commencing summer 2017, ongoing</p>
	<p>Complete initial Progress for Providers Self Assessments with all care homes in Flintshire, and review progress against actions plans</p>	<p>April 2017 September 2017, ongoing</p>
	<p>Capture success stories to demonstrate how delivering what matters using the person centred tools is making a difference to people's lives</p>	<p>Ongoing – to feed into the Annual Report</p>
	<p>Produce an Annual Report summarising our understanding of the quality of life and care in care homes based on listening to older people and feedback we received; this will support our continuous improvement</p>	<p>April 2018</p>

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 see in addition further information on other initiatives that aim to ultimately improve the quality of life and care for people living in care homes in Flintshire:

North Wales Regional Care Home Market Review Group

The North Wales Regional Commissioning Board established a North Wales Care Home Market Review Group in late 2015, partly in response to the OPC review. It was recognised that some of the actions would benefit from regional collaboration; these included developing a single monthly report highlighting changes in capacity across the region and indicators of increasing or escalating quality concerns.

Joint Quality Monitoring Tool – Pilot

As a result of regional working, it became clear that partners across North Wales were using different approaches to quality monitoring, therefore it was agreed that we should work towards establishing a single quality monitoring tool which took account of evidence based practice and seeks to evidence the degree to which services are contributing to meeting national wellbeing outcomes and national health and care outcomes. A tool has been developed and is being piloted in Flintshire and Conwy, along with our partners in BCU, through joint working across nursing and social care quality monitoring teams. The tool / process includes standardised feedback forms for residents and their carers, staff working in the homes, other professionals' and the home manager / proprietor. The tool aims to build on existing 'intelligence' within the system from professional feedback, safeguarding, complaint & compliments, care plan reviews etc.

We aspire to make the tool available to care home providers to support self-assessment. The pilot project will include a review of the tool and procedure with providers, care home residents and their Carers to establish what works / adds value and what does not. Our aim is to establish a measure of quality to underpin the existing RAG (red amber green) quality status.

Alongside this work, we are reviewing the Escalating Concerns procedures; which will be replaced with a quality assurance procedure, which incorporates how we respond at the earliest level of indication of quality concerns with the ultimate sanction of termination of contract. We hope to roll out the new tools and quality management process across N Wales through 2017/8

RAG Reports

BCUHB have developed a RAG Report looking at the levels of issues and concerns regarding care homes and independent hospitals. The tool enables the BCUHB and LA partners to

monitor early indicators of concerns and concerns in each home. These reports are shared with the Flintshire JIMP members.

Joint Inter-agency Monitoring Panel (JIMP) and the Quality Circle

As part of the collaborative work regarding escalating concerns, we have adopted the North Wales Escalating Concerns Process and Risk Assessment Tool. Flintshire working together with regulators and partners to undertake joint visits, professionals meetings and attend the JIMP.

The main objective of a Professional's JIMP is to work jointly to consider the evidence around the care home's performance, strengths and weakness. In addition to providing a forum for effective information sharing and communication between agencies through agreeing responsibilities, actions and timescales to support a care home to achieve a satisfactory level of service delivery.

In Flintshire, in addition to the JIMP, we hold a Quality Circle meeting with partners to gather soft intelligence and develop our partnership working between health, social care, advocacy and regulators. Information gathered in the Quality Circle is then fed into the JIMP. Attendance at the Quality Circle over the last 12 months has been increasing and usual attendance includes: Safeguarding, Social Workers, District Nurses, CSSIW and advocacy.

Market Oversight

Flintshire contributed to the regional market analysis census that was completed in May 2016, it included analysis on categories of care, vacancies, funder, age of residents and out of area placement, see attached report for information:



Market Analysis

Flintshire is also part of the regional Market Position Care Home Shaping Statement, which is still in development. The report looks at legislative changes, future challenges, and predicted demand against current provision, key risks and areas for development. This Market Position Care Home Shaping Statement will be finalised and published in early 2017.

As part of our requirements following the Older People's Commissioners 'A Place Called Home' Action Plan, Flintshire produced a report to assess the current and predicted challenges of the residential care sector in the county and made recommendations to mitigate any forecasted risks. This report informed strategic decision making of our in-house care home portfolio and the options for moving forward; please see attached report for information:



Flintshire
Residential Care Sec

Working with Providers

In Flintshire the Chief Executive Officer and Director of Social Services meet regularly with representatives from the independent sector (this last year they met Feb, June & Oct 2016) to discuss issues affecting sustainability. At a recent Social and Health Care Overview and Scrutiny Committee, in April 2016, the Committee approved the following report on the

challenges facing the care sector and acknowledged the reform that is required to make this sector sustainable and our role in supporting that to happen. This report also gave approval for a new 'Invest to Save' post. See attached report:



Care Sector Report Invest to Save JD

Flintshire has had a unique opportunity and been able to appoint a Project Manager dedicated to developing and implementing a strategy to support the care sector in Flintshire. Working with independent care homes and home care providers as well as our own in-house services to create solutions around recruitment and retention, business sustainability and leadership, see attached job description for more information:

Here is a flavour of the activities that we have been progressing through our Project Manager post:

1. Representation on the North Wales Social Value Forum Steering Group to explore how North Wales partners can:
 - o Promote the development of not for profit private organisations (including social enterprises, co-operative organisations, co-operative arrangements, user led services and the third sector)
 - o Promote collaboration with an aim of maximizing social value and co-production across all sector providers delivering health, social care and/or wellbeing services in N Wales
2. Exploring pre-employment support from Communities First – tapping into the unemployed sector, they offer one to one support/ training/ matching business needs to individual needs so as people have the bits of paper they need to enter the sector – the low level training certificates such as food and hygiene, moving and handling etc. We need to identify the standard learning that people will need so as to be job ready.
3. We are going to offer a one to one business review / health check with each of the 33 small businesses (homes and domiciliary providers) in Flintshire – at the end of which there will be a clear understanding of business operation issues / action plan for improvement.
4. We are working with Gareth Rogers from the Wales Co-operative Centre to explore and test opportunities available for collaboration and forming partnerships within the care sector.

Over the next 12 months the role aims to have developed a business plan that the local authority, care home providers and other stakeholders own and take forward; this will include increased lobbying to the Welsh Government and Ministers, improving recruitment and retention of the care sector workforce and testing different business models.

Consultation on the Regulation & Inspection of Social Care Act (Wales) 2016

The Regulation and Inspection of Social Care (Wales) Act 2016 is being rolled out in phased following consultation with partners. The first phase of consultation was held in the summer 2016 and Flintshire facilitated an event with its care home and domiciliary care providers. We asked our providers to discuss the proposed changes for registration and focussed specifically on the following topics: provider annual returns, proposed definition of 'Social Care Worker' and registrations; please see our response to the WG following the feedback from providers:



Flintshire Response
- R&I Consultation 2

“Does it take 2?” Project

We are currently leading a project which investigates the need for double handed care – “Does it take 2?”. Research, by HfH Consulting Experts in Care, shows that misconceptions regarding moving and handling, insufficient knowledge of specialist equipment and an often outdated and inflexible approach has led to too much generalisation regarding the perceived need for two carers as opposed to one. This has led to a culture of ‘proving’ the case for one carer rather than the other way around. Coupled with the drive to promote independence and person centred care, we want to flip this outdated approach on its head. This project is finding that the reduction in the number of carers to support people with their daily living activities introduces opportunities for more flexibility with the provision of their care, enables informal carers to assist more and promotes independences and choice and control for individuals. This project is currently being rolled out in domiciliary care but there is the potential to explore this in care homes.

‘5 Day Lock In’ – Strategic Event with BCUHB

In December 2016 BCUHB, the 6 local authorities and representative of the Independent Residential and Domiciliary providers within its area came together for a 5 day summit to discuss reducing pressures on acute hospitals, and working together in the best interest of patients. The outcome of the sessions was a need to establish the Care Home Response Team, to implement a more cohesive Discharge to Assess plan, to support the Health Board to facilitate Early Discharge Planning, the need for a review of the MDT process, implement changes to rehab at the Maelor hospital in Wrexham and work to improve the Health Board’s Commissioning Strategy.

Follow up task and finish groups have been established as well as a steering group to monitor progress.

Care Worker Apprentices

This year 2016/17 has been the first year that Social Services has recruited an apprentice direct care worker for our Marleyfield House Residential Care Home, Buckley – please see Sarah Beech’s one page profile. This is proving very successful with Sarah working hard to meet the demands of the job and training; she will undertake a QCF Level 3 in Health and Social Care during their time with us and we are hopeful that there will be an opportunity for her to join our team permanently once the apprenticeship is completed.



Apprentice OPP -
Sarah Beech

We are now in the process of recruiting 2 further care worker apprentices in this year’s 2017/18 apprenticeship scheme with the aims of growing our own workforce.

Removing Uniforms in our In-house Care Homes

As of the 1st April 2017 all in-house care staff across our care homes and extra care facilities will move to a non-uniform policy. This decision has come about following lots of recent negative stories across the national media and our shift to person centred care. We feel by having a non-uniform policy we are breaking the mould of institutional care and the institutional barriers that can inadvertently be set up between staff and the people they visit. We are seeking to create a visual sign that our services are different and are built on the right values and qualities, such as person-centred, compassionate and positive relationships.