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17 April 2015

Dear Mr Burns

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

I would like to take this opportunity to thank you again for providing a timely response to my Requirements for Action, which were published alongside the findings of my Care Home Review.

I have now had an opportunity to review all of the responses from the bodies subject to my Review and I enclose my evaluation of your response.

If you raised specific questions with me about my Requirements for Action, please find attached my response to these.

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

As you will see from my analysis, I have clearly set out whether each element of your response is 'acceptable', 'partial' (further information needed) or 'unacceptable'. Acceptable means that my assurance levels based in the information provided are sufficient, partial and unacceptable means that I require further information to be assured that the

Requirement for Action will be implemented and its intended outcome delivered.

Where I have concluded that an element of your response is either partial or unacceptable, I require further information or a revised approach in order to be satisfied that your organisation is already complying with the Requirement for Action or is committed to taking the action necessary to deliver the required change. This information should be provided to me by **Friday 15 May 2015**, in line with the timescales specified in the Commissioner for Older People (Wales) Act 2006. If you are unclear about any aspect of your response, in particular what would provide the level of assurance that I am looking for, or have any detailed questions regarding the Requirements for Action, you are welcome to contact me.

I am obliged by the Commissioner for Older People (Wales) Act 2006 to keep a register of responses to my Requirements for Action and therefore all of the responses from the bodies subject to my Review will be published on my website together with the analysis of each response. I will also be publishing an overall commentary on whether I consider, based on the further information I receive, that the change I expect to see on behalf of older people will be delivered. In addition to this information being published on my website, I will also be making a formal public statement, both in respect of an overview of action underway and action intended by individual bodies subject to the Review.

If you require any further information, please contact my Director of Wellbeing and Empowerment, Daisy Cole, on 08442 640670.

Yours sincerely



Sarah Rochira
Older People's Commissioner for Wales

Caerphilly County Borough Council

Requirement for Action 1.6

Initial Conclusion - Acceptable

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

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

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

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

The Local Authority's response to this requirement appears to demonstrate an awareness of the role of advocates and briefly refers to the range of services and providers in the area. This includes reference to spot purchasing arrangements to secure specialist Independent Advocacy provision and access to IMCA's and IMHA's.

Although there is a statement regarding current provision, there is little information regarding its uptake. The Local Authority does state, however, that it strives to increase public and officer awareness of the need for effective Independent Advocacy. It goes on to state that it will discuss further with providers at the provider forum meeting and audit the current Independent Advocacy provision in the homes that are not commissioned by Caerphilly County Borough Council.

The Local Authority states that consideration will need to be given as to where additional advocates will come from and also the impact on other areas of the social care workforce who may also advocate on behalf of

residents. There are also concerns raised regarding cost implications and the potential impact on future provision.

Overall, however, the Local Authority demonstrates a good understanding of the need for and range of available Independent Advocacy, indicating this in its current provision.

Requirement for Action 2.2

Initial Conclusion - Partial

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.

The Local Authority could have made more explicit their link to the Local Health board when responding to this requirement; however, the response does state that action is required by Health Boards and that the Local Authority will contribute where appropriate. The Local Authority also refers to the Gwent Frailty programme which has the Local Authority (along with other regional authorities) work in partnership with the Health Board in order to achieve a range of outcomes around health and social care.

It is welcome that there are 16 assessment beds in the Caerphilly Borough that are used to support this approach. However, ideally, re-ablement should take place in the care home (in the older person's home) and the service should come to resident. Clarification as to whether these beds are in care homes would be welcomed here.

Requirement for Action 3.2

Initial Conclusion - Acceptable

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 Local Authority's response to this requirement appears to demonstrate an in-depth awareness and understanding of the importance of dementia training and states that it currently works with Dementia Care Matters to address the issue of changing culture in the care home workforce both in Caerphilly County Borough Council residential care homes and for commissioning officers and leads.

The response goes further and indicates that the Local Authority has organised training with Dementia Care Matters for commissioned providers to access. Crucially, the focus of this training is on understanding dementia, recognising good quality care and support, being able to change practice that is inappropriate and creating an enjoyable environment for residents.

It is also encouraging that staff learning is shared with Assessment Care Management staff, providers and health colleagues.

The Local Authority demonstrates a good understanding of the need for and range of dementia training, clearly indicated in its summary of current provision and is utilising this in its commissioning practices.

Requirement for Action 3.3

Initial Conclusion – Partial

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

The Local Authority's response to this requirement appears to demonstrate an understanding of the importance of befriending, stating that it is working with partners to undertake a range of initiatives; however,

brief analysis of these initiatives is not included which makes assessment of the delivery of outcomes for older people inconclusive..

The response refers to involvement with South Wales literature working with care home providers and a number of intergenerational projects working with residential homes across the borough, as well as collaboration with the Royal Voluntary Service on the Care to Listen Listen to Care – Voice of the Valleys project.

There is clear activity to promote friendships across a number of initiatives, but without evidence of current and/or future outcomes for older people it is difficult to reach a conclusion with regard to the impact and reach of this work.

Requirement for Action 5.6

Initial Conclusion – Unacceptable

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

The national improvement team should utilise the skills of experienced Care Home Managers, as well as other practitioners, to provide intensive and transformational support to drive up the standards of quality of life and care for residents as well as to prevent and mitigate future safeguarding risks.

This service should also develop a range of resources and training materials to assist care homes that wish to improve in self-development and on-going improvement.

The Local Authority response does not demonstrate a willingness to comply with the requirement; rather, it indicates that introducing a National Improvement Service would mean introducing an additional and un-needed level of bureaucracy.

The Local Authority's response to this requirement requires further clarification on how a National Improvement Service would operate with the Borough, and how it would be managed and supported. Information is also required with regard to how a National Improvement Service would link to the role of the Local Authority commissioners, the Health Boards and CSSIW.

Whilst the Local Authority response raises a number of valid issues, including an expectation that the provider takes responsibility for making sure that their service promotes on-going development for the benefit of the residents, and they become less reliant on external prompting to recognise and address the poor practice that reduces the quality of life for older people, the response does not articulate the Local Authority's support for such a service. A meeting will be held to explore the reality of what a NIS in Wales could be and it is expected that many of the Local Authority questions will be answered in this forum.

Requirement for Action 6.2

Initial Conclusion – Partial

6.2 Care home providers, commissioners and CSSIW should develop informal and systematic ways in which to ensure they better understand the quality of life of older people, through listening to them directly (outside of formal complaints) and ensuring issues they raise are acted upon.

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

The Local Authority's response to this requirement appears to demonstrate an understanding of the importance of listening to the voices of older people and ensuring that the issues raised are acted upon.

The Local Authority's response highlights the fact that the council is in the process of reviewing and developing a new monitoring tool with a focus on quality of care, emotional wellbeing and engagement with and for residents. The new monitoring tool will have far more focus on

engaging with residents and asking for feedback differently in order to test the quality and outcomes for residents.

The response also states that the Local Authority is exploring the prospect of holding resident meetings as part of the monitoring process as well as feedback meetings for relatives and families away from the home. It also suggests that discussion will take place with Health Board as to the feasibility of further work in partnership. Whilst these developments are most welcome, the summary nature of the response means that these initiatives appear to be separate and unconnected rather than a plan that will deliver real and tangible outcomes for older people.

The response could be improved with a clear action plan, a timeline and nominated accountable individual to provide assurance that the local Authority will achieve the Requirement for Action in reality.

Requirement for Action 6.7

Initial Conclusion – Unacceptable

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

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

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

The Local Authority's response to this requirement does not commit to, or refer directly to producing Annual Quality Statements. Rather the response discusses current practice which consists of publishing monitoring reports for individual establishments on the internet so that they can be viewed by anyone trying to make a decision about a residential/nursing care home.

The Local Authority states that the format and content of the report will be reviewed in line with the monitoring tool and amendments made as necessary in order to have an improved focus on the quality of life at the home. However, while this approach appears to promote openness and transparency, it does not appear to meet the requirements as set out above and the commissioner will need further details to consider if this is a viable alternative.

Appendix 1:

Caerphilly County Borough Council, questions raised

Requirement for Action 1.5

Question:

“CCBC has some reservations in respect of this action point – whilst CCBC is of the view that the culture in all homes promotes a person centred approach to care and ensures that all residents are treated with dignity and respect, it is felt that this is a very negative way to do it. It may have been helpful if examples had been given, and who would develop such a list?”

This question has been interpreted as relating to the development of ‘never events’ and querying who would develop such a list.

It is the Commissioner’s expectation that Care and Social Services Inspectorate Wales will lead on the development of an explicit list of never events, in conjunction with relevant partners where appropriate. It is the Commissioner’s view that this is not a negative approach to improving the quality of life and care of older people in care homes in Wales, when set alongside a focus on good care and continued improvement. As clearly laid out within the Review Report, the Requirement for Action is designed to ensure that older people are treated with dignity and respect, and language that dehumanises them is not used and is recognised as a form of abuse. Without developing and implementing such a list, there is a significant risk that unacceptable practice continues and goes unchallenged.

Requirement for Action 4.5

Question:

“CCBC seeks clarification in relation to this action and queries the appropriateness and how the role of community health councils will fit with the role of CSSIW and the local authorities and health boards. This is another layer of scrutiny that is proposed for introduction in addition to what already exists – is this necessary?”

This question has been interpreted as relating to the role of Community Health Councils, and the potential for an additional layer of scrutiny.

The use of Community Health Councils to implement a rolling programme of spot checks is intended to bring a much needed lay perspective to the quality of life and care of older people in care homes in Wales – particularly in relation to healthcare entitlements. This is not intended to be an additional layer, but rather, complement and fit within the existing programme of regulation and inspection.

Furthermore, as clearly laid out within the Review Report, the impact of not doing so is that older people living in care homes are denied access to an independent health watchdog, and there is no independent challenge to failures to meet healthcare entitlements.

Requirement for Action 5.2

Question:

“CCBC would request clarification on who would use such a tool – would it be for the provider, for CSSIW and/or the commissioner?”

This question has been interpreted as relating to the development and implementation of a national standard acuity tool for staffing levels and skills.

It is the Commissioner's expectation that Welsh Government will take the lead on the development and implementation of such a tool. This is to be a standard tool that will be available to ALL bodies to drive the necessary improvements needed in the quality of life and care of older people in care homes in Wales in a consistent manner.

Requirement for Action 5.6

Question:

“CCBC requires further clarification on the role of such an improvement service, how it would operate, be managed and supported. Also, how it would link to the role of the LA commissioners, the Health Boards and CSSIW, as the contractual arrangements lie very clearly with the LA and HB commissioners, and responsibility for compliance with CSSIW. How would such a service be funded?”

“Is it possible that such a service could be a virtual network drawing together intelligence from established bodies in essence ensuring that information is shared in a timely manner?”

This question has been interpreted as relating to the development of a National Improvement Service.

In order to take this Requirement for Action forward, an initial meeting was held on Monday 30th March to gain information and feedback from sector representatives about how a National Improvement Service could be most effectively deployed and utilised by all stakeholders. Directors of Social Services were represented in the meeting by Dave Street.

It is the Commissioner's expectation that Welsh Government leads on the development of the National Improvement Service, in partnership with Local Authorities, Health Boards and care home providers. The funding arrangements of such a service, and use of a virtual network is something that needs to be considered as these discussions continue to develop. The Commissioner has not stipulated the required structure for the National Improvement Service.

Requirement for Action 5.8

Question:

"CCBC is of the view that such an exercise would simply reinforce the common view that care staff are amongst the lowest paid workers, that care work is the only option available to some workers and that the role is undervalued in general terms. However, it should be noted that there is no correlation between the amount of money care staff are paid and the quality of the care and support they deliver. In reality, what would be the benefit of the exercise?"

This question has been interpreted as relating to the benefit of a cost-benefit analysis of the terms and conditions of care home staff.

It is the Commissioner's expectations that Welsh Government takes the lead in the completion of this Requirement for Action. The Review Report clearly identifies that undertaking such an exercise, including understanding the impact of introducing the Living Wage, will ensure that the true value of delivering care is recognised and understood. It is the Commissioner's view that the impact of not doing so, will result in a restricted recruitment pool due to continued difficulties in recruiting people with the right skills, values and competencies.

Whilst the Commissioner recognises that the link between pay and quality of care is not direct, it is her view that Wales must strategically consider

the issue of pay and terms and conditions on the recruitment and retention of staff, and its impact on the overall quality of life, and care of older people.