

May 2015

COMMISSIONER FOR OLDER PEOPLE IN WALES

A PLACE TO CALL HOME

RESPONSE OF GWYNEDD COUNCIL

Key Conclusion 1: Too many people living in care homes quickly become institutionalised. Their personal identity and individuality rapidly diminishes and they have a lack of choice and control over their lives

Welsh Government Policy and areas of legislation: Social Services and Well-being (Wales) Act 2014 National Outcomes Framework. Declaration of Rights for Older People, Framework for delivery of Integrated Health and Social Care for Older People with Complex Needs, Integrated Assessment, Planning and Review Arrangements for Older People.

Action Required	Current Situation	Actions	Who / By when
<p>1.2 All the older people or their advocates receive a standard “Welcome Pack” as they arrive at a care home noting how the Care Home Manager will ensure that their needs are met, their rights respected and that they receive the best possible quality of life. The pack will refer specifically to</p> <ul style="list-style-type: none"> • How the Manager will support the residents as he/she moves to their new home. • Standard information about their human rights in accordance with the Wales Declaration of the Rights of Older People. • Declaration of Rights to receive care and health support. • Support to maintain independence, continence, mobility and physical and emotional well-being. • Ensuring that their communication needs are met, including people with sensory loss. • Maintaining friendships and social contact. • Support to help them maintain their independence and to continue to be able to do the things that are important to them. • To develop and maintain the care given, as well as the support plan and what it includes. • Ensuring a culture of dignity and respect and choice and control over everyday life. • Staff Skills and Training. • Their right to receive independent advocacy and how to voice concerns. 	<ul style="list-style-type: none"> • Information packs about individual homes have been developed. • “Residential” newsletter being published regularly. • A booklet entitled “Y Daith – Ymlaen Gyda’n Gilydd” (The Journey – Forward Together) has been published and distributed explaining the values of our services, the meaning of person-centred, the ethos of our service etc. 	<ul style="list-style-type: none"> • All internal residential homes to review the welcome pack / information pack that is already available to residents, families and advocates, ensuring that each individual element within the required action is given attention. • A task group should be established post haste to draw up a welcome pack “outline” which could be a basis for the rest. • To include how the home will ensure rights and how it will ensure that it meets requirements. • All internal homes to implement the “Person-centred” model including recording care plans in a manner that is legible to the resident, the family and advocates. • Area Managers to introduce the change in respect of Care Planning and to identify home managers and staff who will need further assistance to operate effectively. • Review officers to ask how care providers meet the needs of the older person. • Area Managers to conduct an audit of compliance (internal provision) in early April 2015. • The Commissioning Unit and the 	<p>Care Home and Nursing Home Providers April 2015 Senior Manager, Provider Service Area Managers, Provider Service Senior Manager, Business Service Commissioning and Contracts Manager</p>

<p>1.6 Independent advocacy is offered to older people in the following circumstances:</p> <ul style="list-style-type: none"> • when older people are in danger or suffering physical, emotional, financial or sexual abuse. • when a care home closes or an older person is moved due to their care needs having changed. • when the older person needs support to help them leave hospital. <p>In the case of those who have fluctuating capacity or communication difficulties, this should be undirected advocacy.</p> <p>When there are increasing concerns about a care home, residents must have access to undirected advocacy.</p>	<ul style="list-style-type: none"> • The advocacy service is commissioned from the North Wales Advocacy and Advice Association 	<p>Contracts Unit (Business Services) to ensure that private / independent homes (including Extra Care Housing) comply with all elements of the actions.</p> <ul style="list-style-type: none"> • Commissioning / Contracts Managers to conduct an audit of compliance (external provision) in early April 2015 • All residential homes to develop / review information to residents about advocacy including the development of posters and pamphlets in order to raise awareness • Commissioning and Contracts Unit to monitor and review the use made of advocacy and to monitor the standard of the advocacy, including ensuring feedback on this from service users. 	<p>Senior Managers to lead on this. It has been agreed that posters and information will be produced centrally and shared with the internal and private homes by July 2015. These resources will explain what advocacy is, who can advocate, the nature of independent advocacy and how and when use should be made of it.</p> <p>The Unit Manager to lead on this and to report on the findings to the Senior Manager and the Adults, Health and Welfare Management Team quarterly from September 2015 onwards. The information collected should be used as a basis for reviewing/ evaluating contracts.</p>
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Key Conclusion 2: Too often, care homes are seen as places of irreversible decline and too many older people are unable to access specialist services and support that would help them to have the best quality of life.

Welsh Government Policy and areas of legislation: Social Services and Well-being (Wales) Act and the National Outcomes Framework, Sustainable Social Services: Implementation Framework, Together for Health – Stroke Delivery Plan 2012-16

Action Required	Current Situation	Actions	Who / By when
<p>2.2 Older people have access to specialist services and, when appropriate, to multidisciplinary care designed to support rehabilitation following a period of illness.</p>	<ul style="list-style-type: none"> • Intermediate Enablement and Care Units have already been established in residential care homes (internal) in all 3 areas in Gwynedd. Short-term care units which provide older people with an opportunity to either avoid going into hospital or to consolidate and re-develop skills following a period in hospital. • Staff have been trained in the principles of “enablement”. • Experts such as occupational therapists and physiotherapists working with care home staff. • Care Plans with the focus on outcomes for the individual have been developed. • 7 day work plan has been introduced in Ysbyty Gwynedd with a Social Worker and Care Assessor, facilitating the process for older people leaving hospital at weekends. 	<ul style="list-style-type: none"> • A need to ensure that all members of staff in the units work in accordance with enablement principles with the focus on specific outcomes for the individual. • The County Forum receives regular progress reports in respect of this aspect of older people’s care. • A need to review the 7 day working plan in terms of the Local Authority and to inquire whether it would be possible / desirable to broaden the practice. • To develop a generic support workers model that can ensure attention to basic care and health needs. 	<p>Health Boards and Local Authorities in partnership.</p> <p>July 2015 Members of the County Forum to monitor and respond to remove obstacles. Senior Manager Older People Service. Area Managers, Provider Service. Area Managers / Senior Practitioners, Older People Service. Managers of relevant internal care homes.</p>

Key Conclusion 3: The emotional frailty and emotional needs of older people living in care homes are not fully understood or recognised or met by the system, and emotional neglect is not recognised as a form of abuse.

Welsh Government Policy and areas of legislation: Together for Mental Health – A Strategy for Mental Health and Well-being in Wales, Mental Health (Wales) Measure 2010, National Dementia Vision for Wales 2011 and Intelligent Targets for Dementia. Dementia Quality Standard NICE 2010. Dementia Quality Standard NICE 2010 and NICE Clinical Guidance 42. November 2006 (amended March 2011).

Action Required	Current Situation	Actions	Who / By when
<p>3.2 All care home workers receive basic dementia training as part of the induction procedure, and all the care staff and care home managers receive additional dementia training on an ongoing basis as part of developing their skills and competence, and this is a specific element of supervision and performance assessment.</p>	<ul style="list-style-type: none"> • It has already been emphasised to care home managers (internal) that the emphasis of all homes should be on emotional support / service rather than on tasks. • A “house keeper” has been employed within homes to undertake housekeeping tasks, thus releasing care staff to work with the residents and to ensure that the home meets their needs. • Care home staff already receive Training on 3 levels – Dementia Awareness (basic), Dementia Level 2 and Dementia Level 3. • Already – Registered Managers, Assistant Managers and Senior Assistants have been designated as Dementia Leaders within the homes. They have been trained to Level 3. • Close co-operation with Professor Bob Wood (Bangor University) and David Shearder in order to learn from research and identify good practice. 	<ul style="list-style-type: none"> • To continue with the Training that is already taking place, ensuring that all members of care home staff have attended. • Contracts Unit to monitor the staff of private / independent residential homes attending the dementia Training and to include the information in reports on care standards. • To consider sponsoring a number of registered managers to attend “Dementia Care Matters” Training. • To arrange effective Motivation and Communication Training. • To develop “Low Arousal Techniques” Training, supporting the ethos of putting the person at the heart of all that is done. 	<p>Local Authorities and Residential Care Providers.</p> <p>Senior Provider Manager Area Managers Care Home Managers Workforce Development / Training Unit</p> <p>January 2016</p>

3.3 Serious action should be taken to encourage the use of befriending schemes in care homes, including projects to bridge the generations, and to support residents to keep hold of existing friendships. This must include ensuring ongoing access to support based on faith and to specific cultural communities.

- Care Plans within homes (internal) are person-centred and thus concentrate in a holistic way not only on needs but on the history, interests and contacts of residents.
- A number of the homes have a close relationship with organisations (schools, chapels, churches etc) within communities.
- Homes welcome families who visit and invite them to stay for food e.g. Christmas Lunch.
- “Faith” services take place in the homes regularly.
- The Homes (internal) are bilingual (Welsh / English) and can respond to the linguistic needs of residents.

- To hold an audit of the standard of Plans within homes ensuring that they all follow Person-centred Plans.
- Homes to certify that they facilitate arrangements for any resident to be able to maintain links with interests outside the home (Chapel, Church, Social Meetings such as the WI or Merched y Wawr, Angling Club etc).
- Homes to certify that they facilitate arrangements for residents to maintain links with friends and family members by means of face to face visits, by skype, e-mail, utube.
- Homes to develop a close relationship with organisations and movements within the community.
- To look into the possibility of facilitating visits from friends and family members who live far away by offering overnight accommodation (A number of the homes include separate flats that are no longer used) or by helping with accommodation arrangements.
- To ensure that religious services reflect the needs of individual residents.
- Contracts unit to monitor action taken by private / independent homes to maintain the above.

Senior Provider Managers
Area Provider Managers
Managers of individual Homes
Commissioning and Contracts
Unit Managers.

Key Conclusion 4: Some of the most basic health care needs of older people living in care homes are not properly recognised or responded to.
Welsh Government Policy and areas of legislation: Care Essentials, National Service Framework for Older People, Together for Health: Five Year Vision for NHS Wales, Setting the Agenda, Together for Health: Eye Health Care Delivery Plan for Wales 2013-2018, NHS Wales Delivery Plan 2013-14 and Plans for the Future, Rural Health Plan - Providing Services Better across Wales, Together for Health: Welsh National Plan for Oral Health 2013-18, Social Services and Well-being (Wales) Act 2014 National Outcomes Framework.

Action Required	Current Situation	Actions	Who / By when
<p>4.1 National Declaration and Rights to basic and specialist health care for older people in care homes being developed and available to older people, including:</p> <ul style="list-style-type: none"> •Regular access to eye health, vision and hearing checks. •Advice and support regarding diet. •Access to podiatry and dental services. •Access to specialist nursing services. •Access to a GP and support regarding medicines. •Specialist mental health support. •Promotion of health and re-enablement. <p>This must include residential and nursing care. Care home providers ensure that older people receive information about their rights in terms of health care as part of their “Welcome Pack” (see action 1.2).</p> <p>4.2 A formal agreement is being developed and implemented between the care home and primary care and specialist services based on the Declaration of Rights. This should cover:</p> <ul style="list-style-type: none"> •Referral routes, including open access. 	<ul style="list-style-type: none"> • A positive relationship with GPs, area nurses, - but this is assessed on the basis of the number of complaints or negative feedback from staff rather than on evidence. 	<ul style="list-style-type: none"> • To ensure information about Health rights within “Welcome Packs”. • To monitor eye health checks, diet, podiatry and dental services, reporting on the situation in all homes and drawing any problems to the attention of the County Forum. • To monitor access to specialist services e.g. specialist nurse, mental health support, reporting on the situation in all homes and drawing any problems to the attention of the County Forum. • To monitor the relationship with GPs, reporting on the situation in all homes. • Care homes to ensure that these formal agreements are fit for purpose and that their content is reflected in the Welcome Packs provided to new residents and their families.Problems or difficulties 	<p>Welsh Government (highest level) Health Board / Local Authority at local level Care Home Managers Commissioning and Contracts Managers</p> <p>Welsh Government (highest level) Heath Board / Local Authority at local level Care Home Manager Commissioning and Contracts Managers</p>

<p>•Waiting times Information about referral and release</p> <ul style="list-style-type: none"> •Advice and information to support the continuous care of the older person in the home. •Access to specialist services for older people in nursing homes in accordance with the Fundamentals of Care Guidelines. <p>4.3 Information, advice and training is provided when appropriate for care staff in order to ensure they understand and recognise the health needs of older people as well as when and how to refer.</p> <p>4.4 When they reach a care home, older people receive reviews of medicines from a qualified clinical professional, and regular reviews of medicines are held in accordance with the published best practice.</p>	<ul style="list-style-type: none"> • Nursing staff / physiotherapists / doctors in an area are, in general, very willing to discuss best practice and to instruct care staff in dealing with residents suffering from particular ailments.A need to “formalise” this. 	<p>to be brought before the County Forum to ensure solutions.</p> <ul style="list-style-type: none"> • To integrate basic Health Training into the induction Training of all members of staff. • To ensure specialist Training for staff when appropriate to respond to the needs of individual residents. • To discuss the matter of reviewing medicines at County Forum level – a great deal of work is already taking place and there is a need to build on this. 	<p>Welsh Government (highest level) Heath Board / Local Authority at local level Care Home Manager Commissioning and Contracts Managers</p> <p>Welsh Government (highest level) Heath Board / Local Authority at local level Care Home Manager Commissioning and Contracts Managers</p>
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Key Conclusion 5: The vital importance of the role and contribution of the care home workforce is not sufficiently recognised. There is insufficient investment in the sector and a lack of support for the care home workforce.

Welsh Government Policy and areas of legislation: Sustainable Social Services for Wales Social Care Workforce Development Programme: Operational Framework, Social Services and Well-being Act, National Outcomes Framework, Integrated Assessment, Planning and Review Arrangements for Older People

Action Required	Current Situation	Actions	Who / By when
<p>5.5 Every care home must have at least one member of staff who is a dementia champion.</p> <p>5.6 To establish a National Improvement Scheme to improve care homes where Local Authorities, Health Boards and CSSIW have noted substantial and/or ongoing risk factors regarding the quality of life or care provided to residents and/or possible breaches of human rights. The national improvement team should use experienced care home managers, as well as other practitioners, in order to provide intensive and transformational support in order to raise quality of life and care standards for residents as well as to prevent and mitigate risks to safety in the future. The service should also develop a range of training resources and materials in order to assist care homes wishing to improve in terms of self-</p>	<p>Registered Managers, Assistant Managers and Senior Assistants have been designated as Dementia Leaders within the homes. They have been trained to Level 3.</p>	<ul style="list-style-type: none"> • To be clear regarding what is expected of the role of Dementia Leaders / Champions. • To monitor the effectiveness of Dementia Leaders in the internal homes. • Contracts units monitoring the existence of Dementia Leaders within private / independent homes. • To review operational systems following escalating concerns in local homes and to consider establishing a team that would include experienced managers to act as task busters. • To review where these officers should “sit” within the Department – Within Commissioning and Contracts or in the Safeguarding Team. • To ensure appropriate / relevant Training for members of this team • To identify staff that could contribute at National level, 	<p>Welsh Government Lead Officer in partnership with Local Authorities, Health Boards and Residential Care Providers. Senior Provider Service Managers, Older People’s Service Area Provider and Older People’s Service Managers. Residential Care Home Managers (internal) Commissioning and Contracts Unit Manager September 2016</p> <p>Welsh Government Lead Officer in partnership with Local Authorities, Health Boards and Residential Care Providers. Senior Provider Service Managers, Older People’s Service Area Provider and Older People’s Service Managers. Residential Care Home Managers (internal) Commissioning and Contracts Unit Manager September 2016</p>

development and ongoing improvements.

ensuring a timely response if needed.

- To conduct an adult practice review following local cases ensuring that lessons are learnt from the experiences – the review should include residents and families.

Key Conclusion 6: Commissioning, inspection and regulation systems are inconsistent, lack integration, openness and transparency, and do not formally recognise the importance of quality of life.

Welsh Government Policy and areas of legislation: Sustainable Social Services for Wales: Operational Framework, Social Services and Well-being Act, National Outcomes Framework.

Action Required	Current Situation	Actions	Who / By when
<p>6.2 Care home providers, commissioners and CSSIW should develop informal and systematic ways of ensuring that they better understand the quality of life of older people by listening to them directly (not via formal complaints) and ensure that action is taken on the concerns they raise.</p>	<ul style="list-style-type: none"> • The establishment of a Residents and Friends Committee has been encouraged in all the Council’s internal care homes with the aim of "giving residents, families and friends from the local community an opportunity to express an opinion about the care provided in individual homes and to suggest ideas regarding the developments they would like to see for the future" (Terms of Reference have been drawn up). • Regular visits to internal homes are made by managers and political members. Part of every inspection is to interview users in a private setting and to inquire about their experience(Section 27). 	<ul style="list-style-type: none"> • To review the success of these “Committees” and to learn from the review. To share the recommendations with managers, staff, residents and families as well as social workers in all areas. • To share the learning from the above with the external sector via the Commissioning and Contracts Unit and via the Residential and Nursing External Providers' Forum. A discussion regarding how to listen directly and effectively should be a standing item on the agendas of these meetings, acknowledging that we can learn from each other. • To review the Section 27 Inspections ensuring that the emphasis is on the opinions of users and families. To ensure that residents can see inspectors in a private area and on their own – to record this. • To ensure that visits to external homes have the same emphasis and that residents always have a choice of meeting the visitor in a private 	<p>Residential Care Providers, Local Authorities, Health Boards and CSSIW Area Managers, (Provider Service) Care Home Managers Commissioning and Contracts Unit Managers April 2015 onwards</p>

		<p>area.</p> <ul style="list-style-type: none">• To ensure visits in the evenings and during the night (with and without warning) - the tendency at the moment is for the visits to be during working hours. This is true both internally and externally• To ensure that residents in residential homes can attend meetings of the Gwynedd Older People's Forum and also the Older People's Council.• To ensure that residents have every opportunity to express their opinion, make observations and contribute in their preferred language (Welsh / English) and to ensure that suitable arrangements are in place to ensure this when another language is the first language.• In situations where residents cannot communicate verbally, to ensure that various methods (writing, pictures, etc.) are used to obtain their views and comments.• It should be acknowledged, in some circumstances, for example intensive units for people with dementia, that some time should be spent getting to know people by observing their situation, finding out about their interests and what makes	
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		<p>them happy. This way, what makes them unhappy / discontent can also be determined. A start can be made on identifying their voice and listening to them.</p> <ul style="list-style-type: none">• During visits (internal and external), it should be ensured that "quiet" individuals have the opportunity to voice their opinion and share experiences, not just the people who volunteer or who are selected by the staff.• It should be ensured that everyone who wishes to have assistance from an advocate in this type of situation, in order to express their views, are able to make observations through the advocate. The advocate may be a member of the family, a friend or similar, or an advocate arranged by the service.• Various methods should be used to gather opinion - individual and private interviews, group interviews at the home, group interviews outside the home (over lunch?) and so on. As much creativity as possible should be used, and ideas should be shared across the sectors.• To establish a Residential Homes Quality of Life Monitoring Team to include	
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		<p>people who are residents or who have spent time in a residential setting.</p> <ul style="list-style-type: none">• To promote a suggestions box in all homes.• The Contracts Unit to review their monitoring methods ensuring that the emphasis is on the standard of care. To ensure that staff have been trained to undertake this work.• To assess and evaluate proposals/recommendations arising from the above (Committees, Section 27 Investigations, Forums, Care Reviews, contract monitoring visits, formal and informal comments) concentrating on improving the outcomes for older people residing in the homes.• To develop a work programme from the above (at individual home level or area level), monitoring progress and reporting on this to residents and families individually (where relevant) or via a newsletter.• To disseminate the practice of including residents in the process of interviewing and appointing staff to posts in the Council's internal homes (via an assessment centre process). This already happening / has already happened in a number	
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		<p>of homes and has proved effective. Disseminate the learning from this to external homes.</p>	
<p>6.7Annual Statements of Quality being published by the Director of Social Services in respect of the quality of life and care of older people living in commissioned care homes and Local Authority care homes. This should cover:</p> <ul style="list-style-type: none"> •Availability of independent advocacy in care homes. •The quality of life and care of older people, including specific reference to older people living with dementia and / or who are experiencing sensory loss. •How the human rights of older people are being maintained in care homes across the Local Authority. <ul style="list-style-type: none"> •The views of older people, advocates and lay assessors regarding the quality of life and care provide in care homes. •The geographical location of care homes. <p>Additional details regarding requirements for reporting back should be included as part of the Regulation and Inspection Bill.</p>	<ul style="list-style-type: none"> • The Director of Social Services already publishes an Annual Report which reports on the performance of the relevant services over the past year and also identifies priorities for the coming period. There is a definite timetable to this report which is submitted to the full Council and is available to the public in hard copy form or on the internet. It is proposed to use the same timetable for the Annual Statement of Quality, but it will be a separate report. 	<ul style="list-style-type: none"> • Gwynedd Council will comply fully with the requirement to publish an Annual Quality Statement. The statement will include information about the quality of life and care of older people living in commissioned care homes and internal care homes and will give particular attention to the matters noted in the “Actions Required” section. • In terms of timetable, it will follow the same timetable as the Director’s report. 	<p>Local Authorities – Outline AQS.</p> <p>September 2015. Director of Social Services</p>