South Devon and Torbay Clinical Commissioning Group

# Multi Provider Forum 17<sup>th</sup> May 2017





#### www.torbay.gov.uk

forward thinking, people orientated, adaptable - always with integrity.



#### Welcome

- Caroline Taylor, Director of Adult Services, Torbay Council
- Housekeeping
- Agenda





TIME	AGENDA ITEM						
9.00	ARRIVAL AND NETWORKING OPPORTUNITY						
9.15	WELCOME						
	Caroline Taylor Director of Adults Services						
9.25	CURRENT COMMISSIONER - KEY MESSAGES FOR PROVIDERS						
	Judy Grant Strategic Partnership Manager, Joint Commissioning Team, Torbay Council, Fran Mason Head of Partnerships, People & Housing, Torbay Council & Jenny Turner, Head of Market Management, South Devon & Torbay Clinical Commissioning Group						
9.35 to10.00	WORKFORCE DEVELOPMENT UPDATE Skills for Care Rosalita Mainwaring, Area Officer, South West, Skills for Care						
10.00 to 10.15	END OF LIFE CARE Jane Viner, Chief Nurse, Torbay & South Devon NHS Foundation Trust						
TIME	AGENDA A	TIME	AGENDA B				
	IN THE RIVIERA LOUNGE	40.45.	FOR CARE HOMES IN THE MADISON ROOM				
10.15 to 11.15	MARKET POSITION STATEMENT & TORBAY JSNA	10.15 to 11.15	WHAT MAKES A GOOD CARE HOME? Andrew Kaye Head of Policy and Campaigns, Independent Age				
			with Sarah Bickley, Torbay Healthwatch				
	Torbay Council KIT team and Joint Commissioning Team						
11.15 to 11.30		BREAK TEA AN	ND COFFEE AVAILABLE & NETWORKING				
11.30 to 12.30	SUPPORTED LIVING SERVICE	11.30 to	WHAT MATTERS TO RESIDENTS AND RELATIVES - STORIES				
	SPECIFICATION ENGAGEMENT	12.30	FROM OUR HELPLINE'				
	Emma Chappell (Provider), Si Langridge (SPOT) and Jamie Saint (Client / Service		Judy Downey, Chair of the Relatives & Residents Association.				
	User) will be presenting with Justin Wiggin						
	Torbay Council & Jill Yersin Specialist						
	Accommodation Lead (Torbay) Torbay and South Devon NHS Foundation Trust						
12.30 to 13.30	CARE AND SUPPORT AT HOME	12.30 to	HOSPITAL DISCHARGE				
	Mears, Joint Commissioning Team & Torbay and South Devon NHS Trust	12.45	Torbay and South Devon NHS Trust				
		40.45.44					
		12.45 to 13.15	QAIT TEAM Torbay and South Devon NHS Trust				
		13.15 to	PROPOSED CARE HOMES NHS CONTRACT				
		13.30	Torbay and South Devon NHS Trust				
13.30		13.30	CLOSE				

#### **Commissioner key messages for providers**

- Judy Grant Strategic Partnership Manager, Joint Commissioning Team, Torbay Council
- Fran Mason Head of Partnerships, People & Housing, Torbay Council
- Jenny Turner, Head of Market Management, South Devon & Torbay Clinical Commissioning Group

**NHS** South Devon and Torbay Clinical Commissioning Group





### Commissioner key messages for providers Partnership and engagement

- Independent sector providers are - and will be crucial to our success in transforming services in Torbay to meet future challenges
- We want to work in partnership with you and encourage partnerships/federations between providers
- We are working to step up our engagement and market shaping work

- Get involved join the provider reference group
- See the provider website pages – we are developing these - see
  - http://www.torbay.gov.uk/healt h-and-wellbeing/care-andsupport-providers/
- Please keep giving us feedback about the forum – we have changed the forum in response to feedback





### Key Messages – A Market Strategy

- Promoting & sustaining independence at home – advice, information & advocacy
- Resilient communities & connection to local solutions
- Community care & support to re-enable, aids adaptations & equipment

- Housing fit for all stages of life
- Reshaped care home market meeting complex/specialist & greater quality
- Collaborations, partnerships
   & new alliances
- Better modeling of demand





South Devon and Torbay Clinical Commissioning Group

# **Commissioner Key Messages**

- •New Model of Care
- •System wide approach
- •Consultation on future of community services delivered a clear vision
- Emphasis on care outside of hospital, prevention, maintaining independence and community services
  Importance of care home, community care and voluntary and community sectors
- •Need to be innovative, focus on outcomes, value for money and partnerships

Driving quality, delivering value, improving your services

# Torbay Care Provider Forum 17<sup>th</sup> May 2017 Rosalita Mainwaring



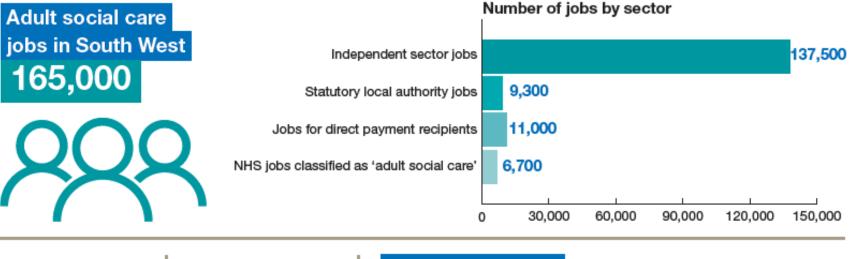








The information for this infographic is taken from Skills for Care's 'The adult social care sector and workforce in South West 2016' report and uses workforce estimates based on data from the National Minimum Data Set for Social Care (NMDS-SC).





There are around 2,200 organisations and 4,600 locations delivering or offering adult social care



The workforce has increased by 3% since 2011 and is projected to increase by another 18% by 2025 (30,000 extra jobs)

#### Selected job roles



87,000 care workers



direct payment recipients

> 13,000 managerial roles

11,000 jobs for



11,200 senior care workers











# **Rocket Science?**

Good social care is not 'rocket science' it may be much harder and more rewarding than that!

Three challenges:

- Finding a workforce
- Keeping a workforce
- Developing a workforce

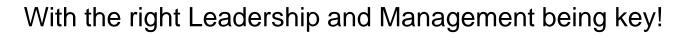




# **The solution?**

People tell us a combination is required to deliver good and rewarding social care!

- Right workforce
- Right values
- Right skills
- Working in the right way
- In the right place
- At the right time!













# **Manager Induction Standards**

#### New standards

- 1. Leadership and management
- 2. Governance and regulatory processes
- 3. Communication
- 4. Relationships and partnership working
- 5. Person-centred practice for positive outcomes
- 6. Professional development, supervision and performance management

- 7. Resources
- 8. Safeguarding, protection and risk
- 9. Manage self
- 10.Decision making
- 11.Entrepreneurial skills and innovation



# Good and outstanding care Guide



#### **Recommendations and practical examples** from CQC regulated services









# What's available?

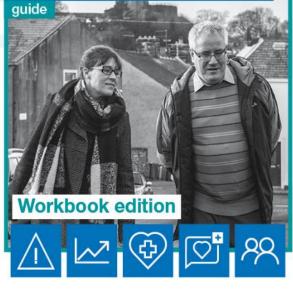
#### Guide

#### Workbook

# Good and outstanding care



# Good and outstanding care









• Films







### **Registered Managers Networks**

- Established by registered managers and supported by Skills for Care.
- Focus on networking and sharing best practice on quality, leadership and learning & development
- Agenda set by the network
- balances a mix of formal and informal discussions, and presentations
- Meets a minimum of three times a year
- Torbay Care Forum next meeting 28<sup>th</sup> June

# Apprenticeships update May 2017









# What is an apprentice?





skillsforcare

- ✓ At least
   20% off job
   training
- ✓ Minimum
   30 hours
   per week
- ✓ Minimum 1 yr contract

# Key changes









End point assessment

Apprenticeship Standards Social Care



Four new standards developed

Adult Care Worker (Level 2) Lead Adult Care Worker (Level 3) Lead Practitioner in Adult Care (Level 4) Leader/Manager in Adult Care (Level 5)

# New qualifications framework



### What's changing?

- Qualifications and Credit Framework (QCF) Regulations are being withdrawn by Ofqual
- 'Regulated Qualifications Framework' (RQF) replaces the QCF
- Qualifications will be consistent but no longer identical
- RQF focus on quality of qualifications during delivery

# New qualifications framework



### What's staying the same in social care?

- A range of high quality qualifications
- Familiar titles (Diploma etc) and levels (2, 3, 4, 5 etc)
- Units structures within most qualifications
- Collaboration with Sector Skills Councils (like SfC,) awarding organisations, learning providers and employers
- New L4 Certificate in Principles of Leadership and Management
- **New** L5 Principles in Commissioning for Wellbeing

# New qualifications framework



'Go live' dates for new/revised qualifications

January 2018

- Revised L2 Diploma in Care
- **Revised** L3 Diploma in Adult Care
- **Revised** L4 Diploma in Adult Care
- Revised L5 Diploma in Leadership and Management in Adult Care



# Workforce Development Fund 2017/18

# What is the Workforce Development F

A financial contribution towards the cost of workers completing social care units and qualifications, meaning you can claim back a proportion of the costs of learning and development.

A list of acceptable units for funding: www.skillsforcare.org.uk/wdfunits

Funding is calculated on the credit size of QCF units at £15 per credit. For example you could claim:

- Level 2 Diploma in Health and Social Care (minimum 46 credits) up to £690
- Level 3 Diploma in Health and Social Care (minimum 58 credits) up to £870
- Level 4 Diploma in Adult Care (minimum 70 credits) up to £1050

Maximum of 60 credits per learner, per funding year can be claimed, so qualifications over 60 credits will need to be claimed over more than one funding year.

# Who can apply for the WDF?



skillsforcare

- Be an adult social care employer
- Have staff undertaking units from the list of acceptable units (available on SfC website)
- Have an NMDS-SC account that meets the necessary criteria

Please note for 2017/18 your organisation is located in an area with no partnership, so you can apply for funding directly from Skills for Care:

Workforce Development Fund



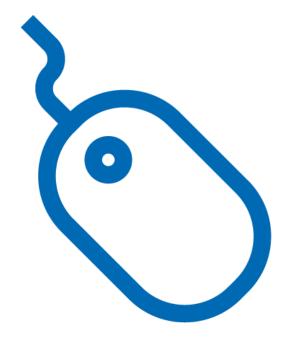


### Stay connected...

For further information and updates or further support access the Skills for Care website at:

www.skillsforcare.org.uk @skillsforcare

rosalita.mainwaring@skillsforcare.org.uk Tel. 07971002270











### Market Position Statement & Torbay JSNA

- Market Position Statement (website):
  - Information for Care and Support Providers
  - Market Position Statement (MPS)
- Joint Strategic Needs Assessment (JSNA):
  - South Devon & Torbay JSNA
  - South Devon & Torbay Knowledge and Intelligence website





### Developing Torbay Council Website Areas for providers:

# Information for Care and Support Providers Market Position Statement (MPS)

www.torbay.gov.uk/health-and-wellbeing/care-and-support-providers/





### Information for Care and Support Providers

- We are reviewing and updating Torbay Council's website pages that provide information for care and support providers
- Information is being tailored for the providers of care homes, domiciliary (care and support) services, and voluntary and community sector groups
- Pages either offer information or sign-post visitors to other websites that have useful advice or content e.g. Torbay and South Devon NHS Foundation Trust, Local Government Association, NICE, etc.
- Cover a range of topics e.g. Care Act, Multi Provider Forum, Newsletters, Market Position Statement (MPS), etc.
- Work in progress and we welcome feedback





Enter your search term ...

✤ > Health and wellbeing > For Care and Support Providers

#### For Care and Support Providers

Information for providers of care homes, domiciliary (care and support) services, and voluntary and community sector groups.



Commissioning is at the centre of providing good quality social care, to deliver personalised health and care outcomes for the adult residents of Torbay.

Commissioning is the process by which solutions are developed to inform and make decisions on how to spend public money, to get the best possible outcomes for individuals and communities, based on local needs. By analysing existing provision, planning for the future, developing services and reviewing performance, commissioning enables people's needs to be met in the most efficient, effective, equitable and sustainable way.

Advertising

In order to do this the Joint Commissioning Team work with fellow commissioners (including colleagues in Clinical Commissioning Groups) and other local authorities, providers, service users, carers and communities to make sure that the right services are available, in the right place, at the right time.

This includes:

- Understanding the needs of our community, based on evidence gathered locally and nationally.
- Recognising how people and communities want to live their lives, now and in the future.
- Understanding the local health and care markets sharing good practice, identifying gaps, encouraging new approaches and working with colleagues in the setting of service standards (outcomes) and performance indicators to measure and monitor quality.
- Supporting individuals and colleagues in addressing safeguarding issues, so people remain safe and have access to quality care.
- Enabling individuals and groups to develop support networks and community resilience.

We have responsibilities for looking at a range of provision and markets including care homes, domiciliary (care and support) services, and voluntary and community sector groups.

Care Act ∞	A Market Position Statement for Adult Social Care and Support and Children's Services	Adult Social Care Newsletters and Useful Information for Providers	Multi Provider Forum
Provider Engagement Events	Supply us with goods or services	South Devon Knowledge and Intelligence a*	The Local Government Association has useful information for providers of care ⊵*





🚸 > Health and welibeling > For Care and Support Providers > Adult Social Care Newsletters and Userul information for Providers				
Adult Social Care Newsletters and Useful Information for Providers Read the latest newsletter for adult social care in Torbay or find a back issue.				
The Tortsy Adult Scotal Cale (TASC) Nestitet has been delegated to bring hepdul and intersting information to all our cale provides.         The a tail to cale of head and cool care vides on the Tortsy and South Devon NHS Poundation Total to weakle and some of these will be useful for many social care provides and start.         I. Using Weil in Cale vidence of         I. Taile Provertion of         I. Medicines support for adults who are receiving social care in care homes of         I. Medicines support for adults who are receiving social care in the community /2         I. Additions to cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.         I. Print Provertion of the sout cool care researcher.	Joint Commissioning@torbay.gov.uk         Iteo3 205729         More In Health and welbeing         • The Care Act cr         • Public health         • Health watch Torbay cr         • Protect someone from harm         • For Care and Support Providers         • RADAR Key Soheme         • Western Rise Serious Case Review cr         • Health and social care services			





NICE National Institute for Health and Care Excell	ence	NICE Pathways	NICE Guidance	Standards and indicators	Evidence services	Sign in		
Search NICE						Q		
Home > NICE Guidance > Service delivery, Managing medic		-	dicines manage	ment: general and o	other			
Social care guideline [SC1] Published d	ate: March 2014							
Guidance Tools and resources	Information for the public Eviden	ce His	story					
Overview What is this guideline about and who is it for?	Guidance				Share D	ownload		
Person-centred care	🚓 NICE interactive flowchart - Managing medicines in care homes							
1 Recommendations	Quality standard - Medicines management in care homes							
2 Who should take action?	Next >							
3 Related NICE guidance and quality standards	This guideline covers good practice for managing medicines in care homes. It aims to promote the safe and effective use of medicines in care homes by							
4 The Guideline Development Group and NICE project team	advising on processes for prescribing, handling and administering medicines. It also recommends how care and services relating to medicines should be provided to people living in care homes.							
Useful resources								
Changes after publication	Recommendations							
About this guideline	<ul> <li>This guideline includes recommendations on:</li> <li>developing and reviewing policies for safe and effective use of medicines</li> <li>supporting residents to make informed decisions and recording them</li> <li>sharing information, record-keeping and medicines reconciliation</li> <li>safeguarding and medicine-related problems</li> <li>reviewing, prescribing, ordering and dispensing medicines, and receiving, storing and disposing of them</li> <li>helping residents to take their own medicines</li> <li>care home staff administering medicines (including covert administration) and non-prescription products</li> <li>training and competency of care home staff</li> </ul>							





### **Commissioning Newsletters**

#### Joint Commissioning Partnership Newsletter

April 2017





Multi Provider Forum – Save the date!

The next Multi Provider Forum is due to take place on Wednesday 17<sup>th</sup> May, 9:00am – 13:30pm at the Carlton Hotel, Falkland Road, Torquay, free parking is available at the hotel or the surrounding area. The agenda will be circulated in due course.

The forum is for providers of services within Torbay as well as commissioners from other authorities, these events focus on sharing good practice, policy and strategy to improve care, the workforce, business and commissioning in Torbay.



If any providers would like to present at this or the next forum, have any items they would like to add to the agenda or would like further information on the forums, please contact Savana Lawler on savana lawler/titorbay.ooy.uk.

> South Devon and Torbay Clinical Commissioning Group

Public Health England OF Health Oral Health for adults in Care

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#### Homes

The NICE guidance covers oral health, including dental health and daily mouth care, for adults in care homes. The aim is to maintain and improve their oral health and ensure timely access to dental treatment. People with dementia tend to have worse oral health, greater treatment need and yet, access care less frequently than the general population. The CQC will also be beginning to look at residents' oral health during their inspections.

Problems around the inconsistent delivery of oral health care by care home providers include:

- Not all care homes include oral health care as part of their care plans
- Lack of staff training in the provision of personal oral care
- Reluctance of staff to meet oral health needs

#### Please click here to access the guidance provided by NICE.

The above link will provide information on the guidance given by NICE as well as tools and resources to help you put the guidance in to practice.

Please click here to access The Oral Health Assessment Tool

Please click here to access the 'Public Health England Delivering Better oral health: an evidence based toolkit for prevention'



- Currently produced as PDFs
- In future will be via eNewsletter
- Contains information from partners and providers





# > Health and welibeing > For Care and Support Providers > A Market Position Statement for Adult Social Care and Support and Children's Services

A Market Position Statement for Adult Social Care and Support and Children's Services Read the market position statement for adult social care and support and children's services in Torbay for 2016+

Torbay's Market Position statement (MPS) is designed to provide information and analysis of benefit to providers of care and support services in Torbay.

It is intended to help identify future demand for care and support on the basis of what we know now about our local population, services and funding. Torbay Council's purpose is to share information on demand and supply, as well as local and national strategies with new and existing service providers to help with:

- Business planning;
- Investment decisions;
- Response to opportunities such as personal budgets and integration; and
- Reduce the risk of wasted resource on poor investments or poorly targeted initiatives.

It will assist in shaping and providing opportunities for an innovative and diverse market that can help people achieve independence and make personal choices for their care and support within a value for money context. The MPS is an important part of that process and although the main focus is on adult social care, there is some information on children's social care including, the Sufficiency Statement, a summary of which is included in section 3. In future years our intention is to extend the Statement to cover a broader health market and children's social care. Appendix 1 contains data which informs the Market Position Statement.

A Market Position Statement for Adult Social Care and Support and Children's Services in Torbay 2016 Torbay's Market Position statement is designed to provide information and analysis of benefit to providers of care and support services in Torbay.

Appendix 1: Data Informing the Market Position Statement for Adult Social Care and Support and Children's Services in Torbay 2016 Appendix 1 contains data which informs the Market Position Statement.

Share this page: 👔 💟 🚱 😰 🛅 🥼 🔁 🔒 🗍 🎧

## Torbay's Market Position Statement



#### Joint Commissioning

Commissioning@torbay.gov.uk

#### More in Health and wellbeing

- The Care Act or
- Public health
- Healthwatch Torbay IZ
- Protect someone from harm
- For Care and Support Providers
- RADAR Key Scheme
- Western Rise Serious Case Review @
- Health Unlocked
- Find health and social care services



### Market Position Statement - background

- A key tool which is part of our market shaping/management role where are we now? What are the trends? What are our intentions?
- Moving from an annual document to a web-based approach
- Benefits of a web-based approach can develop over time, not set in stone
- Key audience is providers
- One way of communicating the significant change needed for new model of care implementation

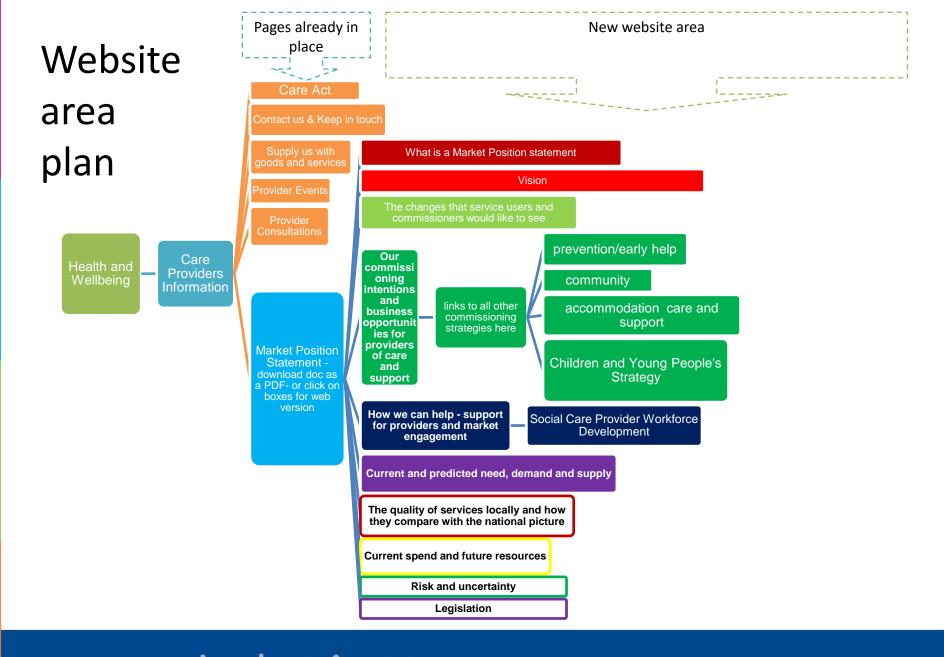




### Market Position Statement - background

- Responding to Torbay user, carer and provider reference group feedback make it shorter with web-based link to other areas
- Scope Adult Social Care focus referencing CCG plans/intentions, public health and other council responsibilities/inter-relationships like children and young people, community safety - placing adult social care within the system
- Includes our commissioning intentions on one page with click through to all strategies/referencing all areas









### Key demand and supply messages

- "Ahead of the curve" other councils only now reaching the high % of older people that Torbay had in the 1980s
- Care will be increasingly centred around communities and people
- Focus on wellbeing, self-care and prevention 'in the home'
- Market of flexible, innovative community alternatives to bed-based care needs to develop further, linked to personal budgets
- Still a future for bed-based care but the market needs to adapt





### Our intentions -

- Commissioning intentions all in one place
- These are developing as our market management direction develops
- Work with clients, carers and providers to identify what services are needed in the future and how they can be delivered





### South Devon & Torbay Knowledge and Intelligence

#### South Devon and Torbay Knowledge and Intelligence

#### Sharing knowledge and intelligence to understand the needs of the community

This website provides an opportunity to bring together knowledge and intelligence from different perspectives, to enable a wider understanding of the needs within the South Devon and Torbay community.

The information contained within this website forms a wider Joint Strategic Needs Assessments (JSNA) for South Devon and Torbay. JSNAs provide an analysis of the health needs of populations to inform and guide commissioning of health, well-being and social care services.



#### **Interactive Tools**

- Community Asset Tool
- Population Tool
- Profile Tool

#### **Intelligence Forum**

The local intelligence network brings strategy and intelligence officers together with the aim of being better able to understand the needs of the South Devon and Torbay community.

#### Needs Assessment and Strategy

- Annual Reports
- Area/Community Based Overviews
- JSNA Narratives

#### **Performance Frameworks**

- Adult Social Care Outcomes Framework (ASCOF)
- National Health Service Outcomes Framework (NHSOF)
- Public Health Outcomes Framework (PHOF)

#### Health and Wellbeing Knowledge and Intelligence

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- Overview of what we do
  - Ask a few questions
  - The website
  - JSNA
- What are your information needs?
  - Tenders
  - Funding bids
- Opportunities to work together





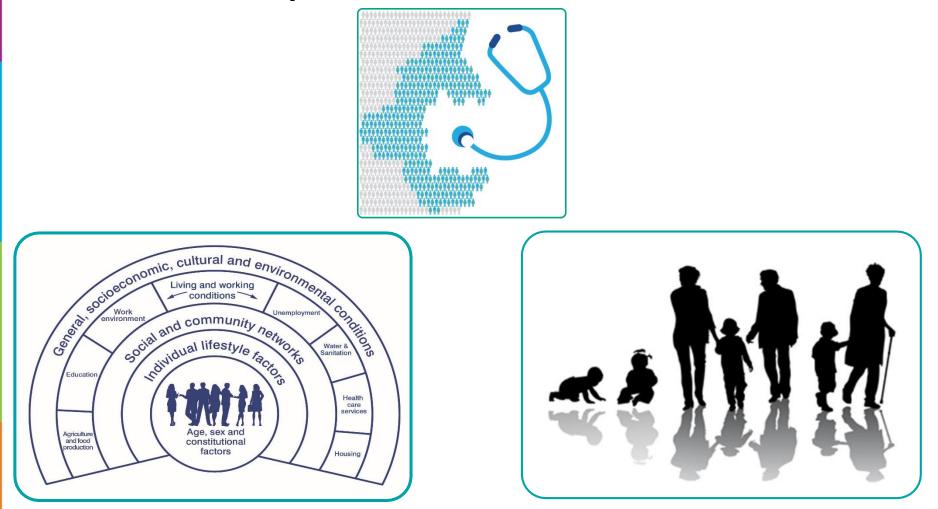
# What's our role?





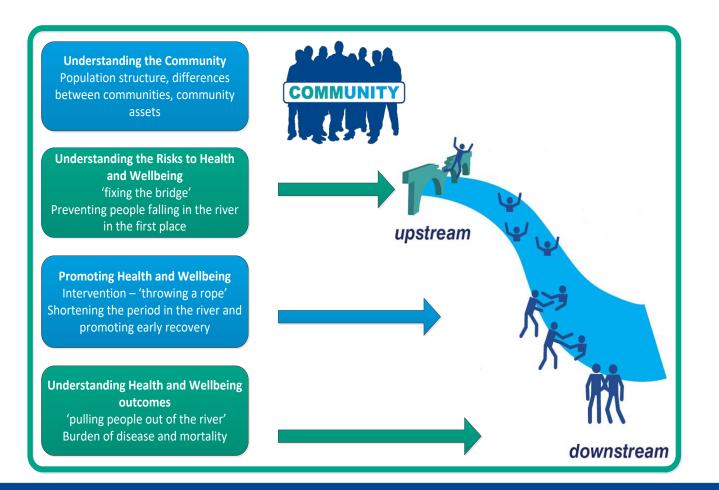


# Population overview















# Biggest impact

- What do you think has the biggest impact on health?
  - Smoking?
  - Alcohol?
  - Drugs?



– Gender?







- What is the population of Torbay?
  - a) 143,400
    b) 133,400
    c) 123,400
- What's the life expectancy in Torbay (years)?

	Female	Male			
		79.0			England (Torbay)
a)	79.3	78.9		F	83.1 (similar)
b)	81.3	80.9			. ,
c)	83.3	82.9		Μ	79.5 (sig worse)
	00.0	02.5			







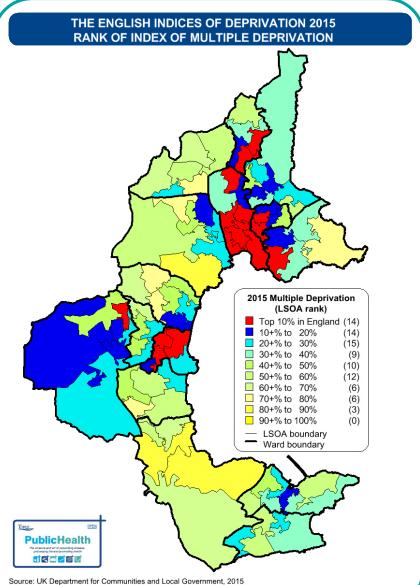
- What proportion of the population are aged 65+?
  - a) 15%
  - b) 20%
  - c) (25%) 17.7% Across England
- How many people in Torbay live in areas in the top 20% most deprived in England?
  - a) 22,000
  - b) 32,000





# Deprivation





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IMD Release	Resident population in top 20% most deprived
2004	18,150
2007	21,800
2010	24,700
2015	42,000

#### **A** Statement







• What do you think the biggest challenges in Torbay are?

• How would you go about finding these out?



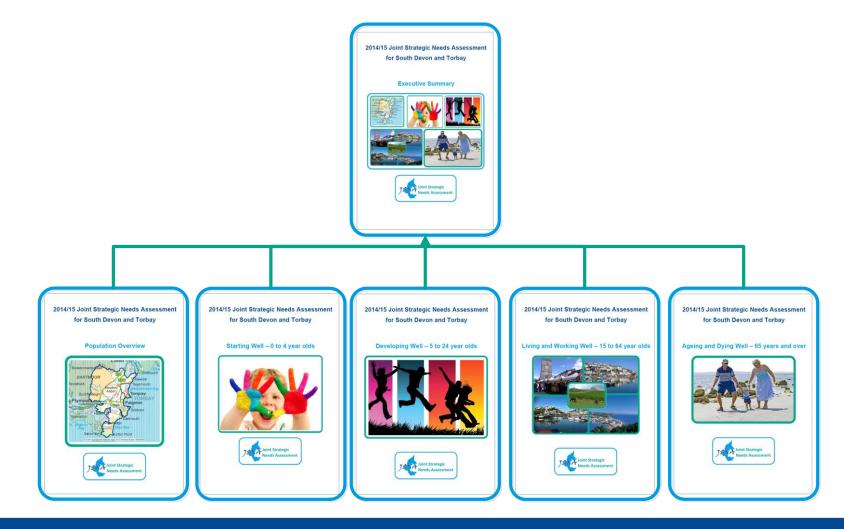
# Joint Strategic Needs Assess an en Paris (JSNA)

- **Statutory**; Local Government and Public Involvement in Health Act 2007
- Strategic overview of current and future health and social care needs
- Responsibility of the Health & Wellbeing Board
- CCG's + LA jointly responsible in preparing JSNA





### 2014/15 Joint Strategic Needs Assessment







# Key issues facing South Devon and Torbay



- Ageing population
- Crime
- Housing
- Local Economy
- Poverty

Understanding the Risks to Health & Wellbeing

- Maternal Behaviours
- Obesity
- School Readiness and outcomes

### Promoting Health & Wellbeing

- Care & Support
- Children looked
   after
- Long Term Conditions
- Youth Offending

Understanding Health & wellbeing Outcomes

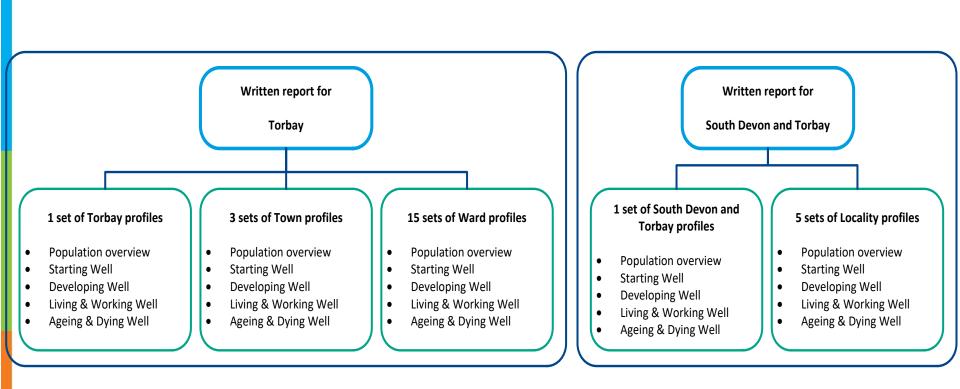
- Alcohol admissions
- Isolation
- Premature mortality
- Self-Harm

Source: 2014/15 South Devon and Torbay JSNA, Exec Summary





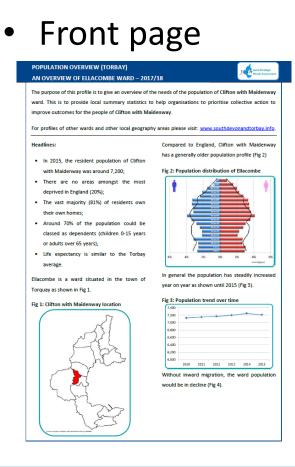
# 2017/18 JSNA







# Example profile



Back page

1	N OVERVIEW OF ELLACO	MBE WAR	ID - 2	017/	18			74 <b>0</b> 7	ieeds Assessm	
	he spine chart below shows how		_			rea com	ares with t	he rest of Torbay. C	lifton ar	
	laidenway's results for each ind					dealer Th		and the Trade of the star		
							-	ate for Torbay is sho	wn by tr	
0	entral black line. The range of re-	ults for all w	ards in	Torba	y is sh	own as a	grey bar.			
K	ey:									
	Indicator	Count	Value	Terbay	CPEA	England	Lowed	Torbey Assesse	Lowest	
	emographics Average are (2011)	60	40.6	44.7	42.6	nia.	36.7			
	Tutel december (2011)	1.907	+0.0	20.0	42.0	na	20.7			
	Net Vilgotion (2011)	219	28.2	4.8	6.5	-	-12.2			
	Norv/White Extin/s associations (2011)	000	11.4	2.2		rie	2.5			
	Cannol speak English/English well (2011)	28	37	3.3	4.6	nia	0.3			
6	Uving in areas amongst 20% most deprived (2015)	3,148	40.9	32.0	21.8	nia		• • •	82.5	
7	Living in private nonled housing (2011)	1,308	31.0	23.2	17.1	nia	6.6		43.5	
4	Overseeling (same) (2011)	411	10.0	7.6	6.6	nia	5.8		17.7	
	Pair powerty (2014)	445	10.3	11.0	12.8	ma	7.8	•••		
	No cashan awnenikip (2011)	637	23.0	25.5	24.1	nia	12.6	•	44.2	
	fe espectancy, quality of life and mortality									
	Viale life-expectancy (2014-2016)	209	79.1	79.0	78.6	nia	74.6	•	82.1	
	Permie We expectancy (2014-2014)	200	82.9	63.0	82.6	nia	01.3			
	Vale disability free life expectancy (2029-2013)	nta	61.0	61.5	61.5	nia	55.4	•		
	Partials disability has the expectancy (2008-2013)	a la	65.D	63.5	51.4	nia	23.5	•		
	Perceived bad/very bad health (2011)	045	8.3	7.6	6.5	nia	52			
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- How / where do you access data to support your business?
- Where do you go?
  - Websites?
    - ONS
    - NHS Digital
  - Published literature?
  - Use your own data?



# http://www.southdevonandtorbay.info/

#### South Devon and Torbay Knowledge and Intelligence

#### Sharing knowledge and intelligence to understand the needs of the community

This website provides an opportunity to bring together knowledge and intelligence from different perspectives, to enable a wider understanding of the needs within the South Devon and Torbay community.

The information contained within this website forms a wider Joint Strategic Needs Assessments (JSNA) for South Devon and Torbay. JSNAs provide an analysis of the health needs of populations to inform and guide commissioning of health, well-being and social care services.



#### **Interactive Tools**

- Community Asset Tool
- Population Tool
- Profile Tool

#### **Intelligence Forum**

The local intelligence network brings strategy and intelligence officers together with the aim of being better able to understand the needs of the South Devon and Torbay community.

#### Needs Assessment and Strategy

- Annual Reports
- Area/Community Based Overviews
- JSNA Narratives

#### **Performance Frameworks**

- Adult Social Care Outcomes Framework (ASCOF)
- National Health Service Outcomes Framework (NHSOF)
- Public Health Outcomes Framework (PHOF)

#### Health and Wellbeing Knowledge and Intelligence

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# Your information needs?

• What information are you interested in?

Do you have analytical expertise in your organisation?

 Can we work better to understand the needs of the population?





# Supported Living in Torbay Accommodation with Care and Support

Justin Wiggin – Strategic Commissioning Officer – Torbay Council

Jill Yersin – Specialist Accommodation Lead (Torbay) Torbay and South Devon NHS Foundation Trust





### Accommodation with Care and Support

### Our priorities 2017 - 2020

- Co-ordinate and integrate health, social care, and housing policy
- Enable improved collaboration and integration of healthcare and housing in the planning, commissioning and delivery of homes and services
- Develop the workforce across sectors in order they are confident and skilled in understanding the relationship between where people live and their health and wellbeing and are able to identify suitable solutions to improve outcomes.
- Introduction of a new performance and quality assurance framework for all providers of accommodation based support and / or care





#### Promoting and supporting independence

Advice Information & Advocacy	,	
Informal support & care		
Aids & Adaptations (community equipment, home improvements Disabled facilities, assistive technology)	prevention	
Commissioned packages of care & support	ven	
Specialist Housing (sheltered housing, supported living)		
Extra Care Housing	ъ В	
Community Nursing	l≓	
Intermediate Care	Vel	
Residential Care Home	Early intervention	
Nursing Care Home	1 2	
Acute Care	B	





# Current supported Living definition:

The delivery of shared care and support to people within shared accommodation, a single building or buildings within close proximity.

The shared staffing within their own accommodation enables people to live with a level of independence and autonomy in the community which may be difficult to achieve within more traditional residential care.





# Where do we want to be?

Supported Living becomes Accommodation with Care and Support – definition:

Any housing scheme where housing, support and sometimes care services are provided to help people to live as independently as possible in the community.





# 3 tier model - categories

- A 24 hour waking day and night
- B 24 hour waking day, sleeping night
- C Variable waking hours, sleeping nightIn addition open tender for IndependentLiving Enabling support





### Some of the requests from people living in Supported Living Accommodation

- ✓ I have a Tenancy Agreement in easy read format
- I may need support to understand my Tenancy Agreement
- ✓ I choose my staff
- ✓ I have my own front door key
- ✓ I am supported to learn new skills and be more independent
- ✓ I am supported to be part of my community
- ✓ I am helped and supported to stay safe



# Good Support (some examples)

- Understanding everyone is different and has different needs
- Listening skills
- Properly trained staff who give good advice and support:

Cook healthy meals safely Emotional Support Hygiene and personal care Finances, budgets and bills Laundry Meal planning and shopping Keeping tidy Prompting & reminding Appointments Gardening & DIY





# Bad Support (some examples)

- Not respecting confidentiality and data protection
- Telling me off, shouting, swearing, being bossy
- Supporting others when it is my time or not turn up
- Having favourites, talking behind my back, turning a blind eye
- Going out for fags all the time
- Falling asleep
- Abuse: taking advantage of my money, stealing / mate crime, having favourites





# "Staff come into my home and should do a great job"

# Remember you are working in my home

## Living in your workplace





# How do we get there?

What does the market look like – demand /supply?

What does good quality housing and provision look like?

Focus on independence – enabling

Development of service specification tiered provision - clarity





# Our request to you:

Become involved in the conversation Engage in workshops to support development of our service specification Develop networks – engage with commissioners and other providers Identify opportunities to create greater independence





# Jamie

## My Journey

# From Supported Living to Independence



# SUMMERLAND SUPPORT

# "FLEXIBLE SUPPORT PROVISION"

### HISTORY

- FIXED SHIFTS WE WILL PROVIDE YOU SUPPORT FROM X TO Y
- CLIENTS FITTING AROUND WHEN SUPPORT IS PROVIDED

# RATIONALE FOR CHANGE

#### MISSING OUT ON SUPPORT TIME

- ► NOT GETTING UP
- CLASH WITH SOCIAL ENGAGEMENTS
- CUTTING OFF SUPPORT EARLY
- ► HAD A BETTER OFFER
- ► APPOINTMENTS
  - BEING MADE IN UNSUPPORTED TIME
  - REARRANGING STAFFING (NOT ALWAYS POSSIBLE)

## PROCESS

- CALCULATED NUMBER OF HOURS FOR ALL CLIENTS
- CONSULTED WITH THEM ON WHEN THEY WOULD LIKE THEIR HOURS PROVIDED
- ► IDENTIFIED ANY TRIGGER TIMES
- CREATED A BOOKING SYSTEM

## **BOOKING FORM**

												SU
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STAFF	А	В	С	В	А	С	D	А	В		С	В
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## **BOOKING IN**

- ► WEEKLY GET TOGETHER TO BOOK IN HOURS
- IF UNABLE TO ATTEND GIVE PREFERENCES TO STAFF IN ADVANCE
- CHECK DIARY FOR ANY APPOINTMENTS
- NEGOTIATE WITH EACH OTHER ON WHAT HOURS THEY WOULD LIKE

# POSITIVES

#### ► FLEXIBILITY

- SUPPORT FITS AROUND THEIR LIFE RATHER THAN MOULDING LIFE AROUND SUPPORT
- ► WONT MISS OUT ON OPPORTUNITIES
- ALLOWS FOR CHANGES IN LIFE GETTING A JOB, EDUCATION ETC
- STAFF HAVE DIFFERENT SKILLS SO CAN BOOK WITH THE MOST APPROPRIATE PERSON

# POSITIVES

- ALLOWS FOR SHORTER / LONGER PERIODS OF SUPPORT AS REQUIRED – LIMITED PERIOD OF ENGAGEMENT
  - -DAY TRIP
- MORE CONTROL OVER THEIR LIVES
- LESS SUPPORT HOURS WASTED / REFUSED/ CUT SHORT ETC
- LESS ANXIETY
- IF AN EMERGENCY ARISES ALLOWS FOR NEGOTIATION TO SWAP AROUND HOURS BETWEEN CLIENTS

# POSITIVES

- ► LESS USE OF THE ON CALL SYSTEM
- ► CONFLICT BETWEEN HOUSEMATES REDUCED
- ► STAFF GREATER VARIETY, IMPROVED MORALE

## NEGATIVES

- POTENTIAL FOR CONFLICT OVER HOURS
- ► MAY NOT BOOK ALL THEIR HOURS
- WEEKEND SUPPORT ISNT ALWAYS ACCESSED

### FEEDBACK

- CLIENTS LIKE THAT THEY DON'T HAVE FIXED HOURS
- ► GENERAL ATMOSPHERE IN THE HOUSE IMPROVED
- ► IMPROVED MOTIVATION
- ► ACHIEVING MORE OUTCOMES
- STAFF PERSPECTIVE GREATER VARIETY, IMPROVED MORALE



# Our commitment to you:

Multi-Provider forums

- Supported Living (Accommodation with Care & Support) Workshops
- New outcomes based service specification
- Dynamic procurement
- Better communication
- Holistic reviews





# Thoughts and questions

Our contact details:

Justin Wiggin justin.wiggin@torbay.gov.uk 01803 208719 Jill Yersin jill.yersin@nhs.net 01803 210456





#### Mears Care Nikki Barnes





#### In attendance today

- Steven Pepperell Operations Director
- Michael Trainor Operations Manager
- Marie Lawson Recruitment & Training Manager





#### **Reflection - September 2016**

- Inadequate CQC rating
- Mears failed to engage
- Poor leadership & management
- Providers & staff not getting paid on time





#### Aims and Objectives of the Service

Individual care packages will maximise the best use of resources through:

- Effective management of support plans ensuring the package of support is appropriate to the level of need and deliver agreed outcomes
- Integration of care and support service delivery and the development of housing and health interventions
- Services making a contribution to keeping people safe and reducing the need for more intensive interventions
- Use of appropriate alternative services and activities in the community to provide longer term support
- Information, advice and signposting for support
- Identifying the skills, talents and experience that the Service User has and the opportunities available to them to contribute to their locality





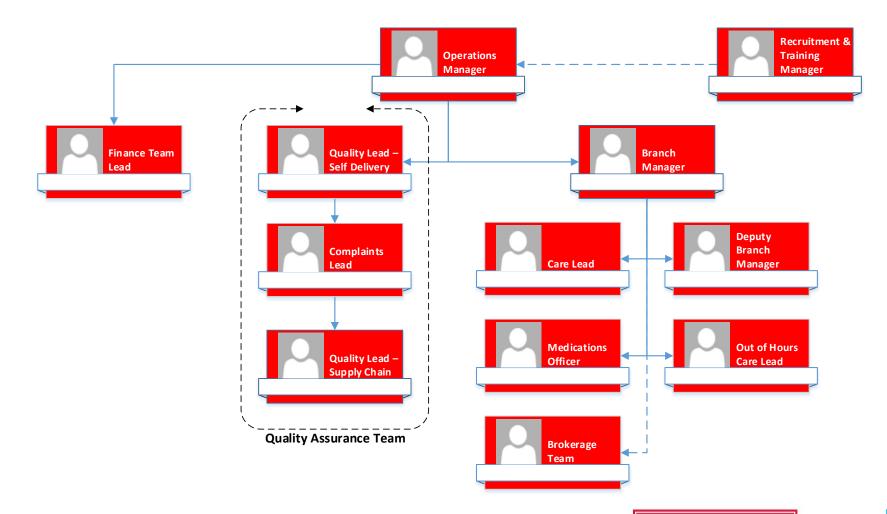
#### Actions taken

- Develop close Partnership with Trust, CCG & Council
- Making the Service <u>Safe</u>
  - Retraining on all IT systems
  - Develop an Organisation structure ensuring defined roles & responsibilities
  - Ensuring awareness & adherence to Group policies & procedures
  - Clear communications & engagement
  - Focussed recruitment quality over quantity
  - Compliance training
  - Care Plans





#### **Torbay Structure**



**MEARS** Care



#### Where we are today



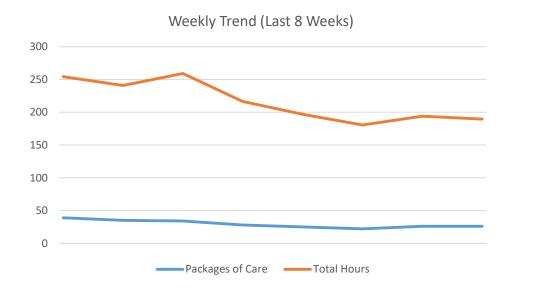
#### KPI Dashboard Reporting Time Line : 24/04/17 - 30/04/17



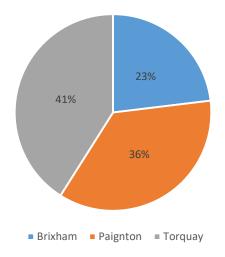




	Number of Packages	Number of Hours
Total	39	254.25
Brixham	9	54
Paignton	14	86.25
Torquay	16	114



Unsourced List % by Location







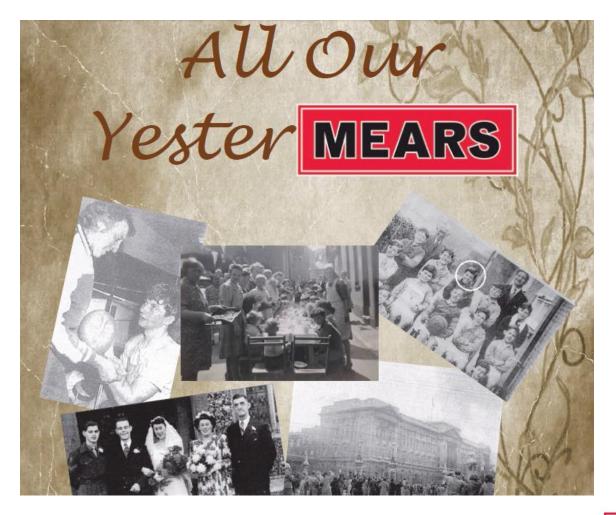
#### Where we are today

- Focus/development groups with
  - HealthWatch
  - Councillors
  - MPs
  - Clients & Staff
  - iCare Ambassadors
  - Purple Angel





#### **Community Engagement**







#### **Our Strategic Objectives**

- Maintaining consistently high standards of care
- Developing the market to meet the future needs of the people of Torbay in a sustainable way
- Delivering value add to our client organisations, Provider partners and the people of Torbay
- Ensuring the continuous improvement of our service position





#### Mears - We believe

- A care worker needs to be seen as a professional part of the health and social care system
- Real outcome based working has many benefits
- Technology will have a growing part to play but only if integrated with other services
- Transparency is key to building trust
- We need to understand how to effectively work with the voluntary sector
- There should be some link between quality and pay.
- Capacity will remain an issue and cannot only be sorted by better recruitment and retention of staff







- Thank You
- Q&A













# **Independent Age**

### What makes a good care home?

Andrew Kaye, Head of Policy and Campaigns

Wednesday 17<sup>th</sup> May 2017



### National analysis of care homes

 More than 1 in 4 care homes are 'Inadequate' or 'Requires Improvement' (CQC)

CQC rating	Number of homes with this rating	Percentage of homes with this rating
Outstanding	148	1.0%
Good	10616	73.3%
Requires improvement	3399	23.5%
Inadequate	312	2.2%



### **Public perception**

- Public perceptions of care homes can be very negative – a last resort and something to be avoided if possible
- Abuse and neglect
- Our research shows 52% of respondents feel abuse and neglect in care homes for the elderly is common
- Documentaries- BBC's Panorama and Channel 4's Dispatches

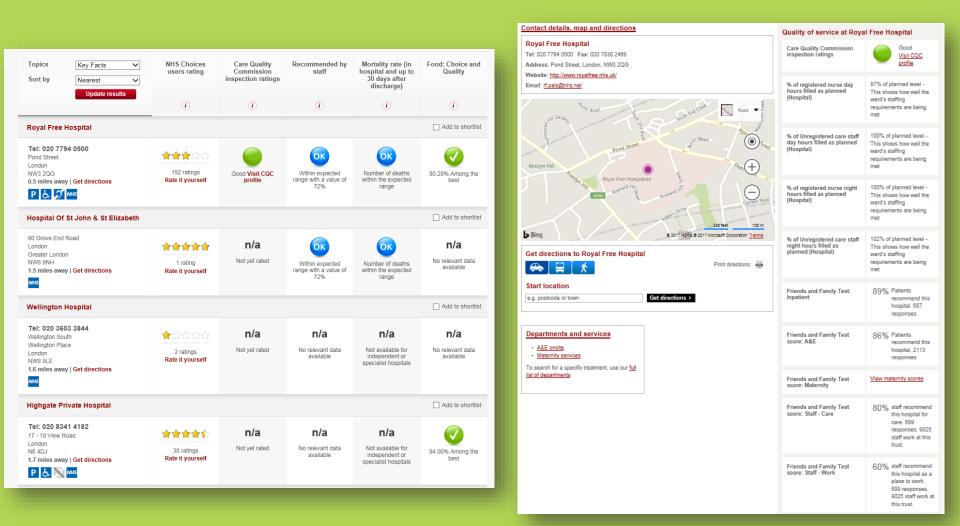


### How can we judge a care home?

- Care Quality Commission Data
- Limited not enough to trigger inspections
- Gaps in knowledge?
- > Abuse and neglect Safeguarding risks referred to local authority
- No sector wide staff survey
- Good care homes can't market themselves in same way good hospitals can
- More initiatives needed like Care Home Open Day

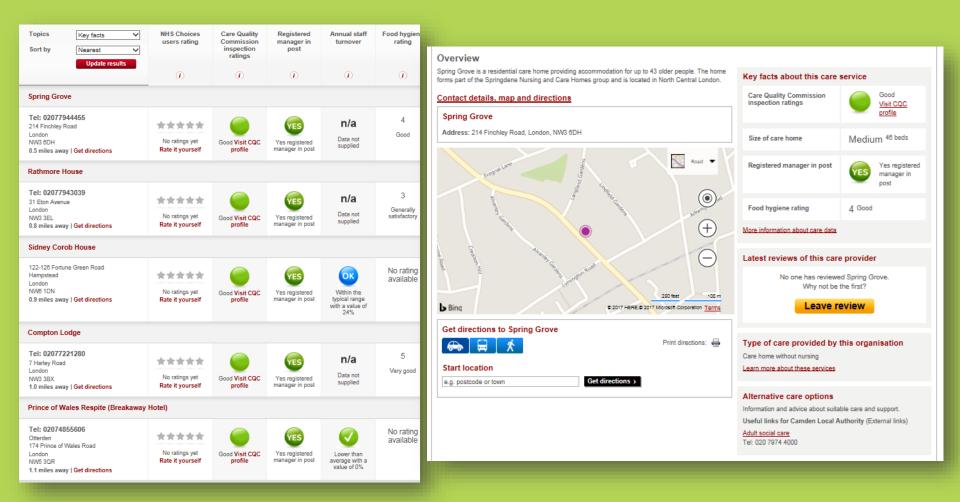


### **Hospital Data – NHS Choices**





### **Care Home Data – NHS Choices**



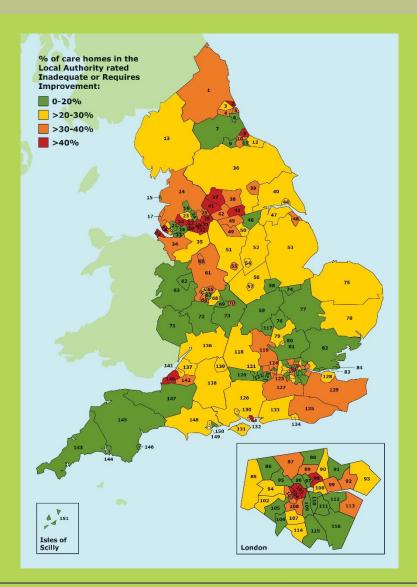


### **3 Key issues that people face**

- Too many interpretations or versions of quality
- Lack of consistent and standardised data collection in social care
- Lack of transparency and easily available information to support care home choice



### **Recent analysis of care homes**



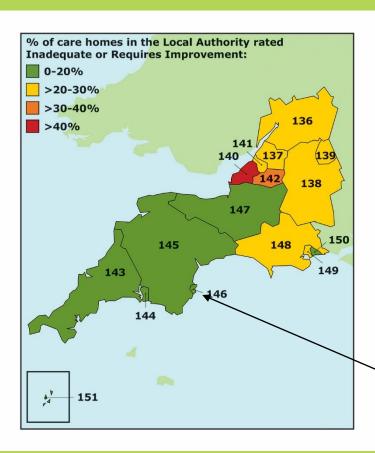


### **Performance by region**

- South West is 3<sup>rd</sup> best performing region (21.1%)
- **Best** performing areas are:
- Isles of Scilly (0%)
- Bournemouth (10%)
- Worst performing areas are:
- North Somerset (44.7%)
- Bath and North East Somerset (31.6%)



### **Good news for Torbay!**



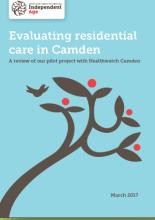
- Torbay did very well with 19% of care homes rated as inadequate or requiring improvement
- Devon 16.2% (39<sup>th</sup> best performing Local Authority – out of 151)

146



### **Pilot research with Camden Healthwatch**

- Consulted older people, families and care experts to design 10 key indicators of care
- Tested these with Healthwatch Camden. Enter and View visits with 7 care homes in Camden
- Feedback through questionnaire and focus groups with volunteers
- Amended key indicators to 8 based on feedback





1. Have strong, visible management

2. Have staff with time and skills to do their job

3. Have good knowledge of each individual resident and how their needs may be changing

4. Offer a varied programme of activities

5. Offer quality, choice and flexibility around mealtimes



### 8 Key Indicators (continued)

6. Ensure residents can regularly see health professionals such as GPs, dentists opticians or chiropodists

7. Accommodate residents' personal, cultural and lifestyle needs

8. Be an open environment where feedback is actively sought and used



### **Thoughts on the 8?**

- Agree/Disagree with the 8?
- Conclusive?
- Anything missing?





## healthwatch Torbay

### **Healthwatch Torbay**

Multi-Provider Forum Presentation -By Sarah Bickley - Healthwatch Torbay Coordinator

### **About us - Statutory Role**

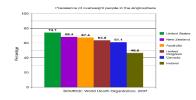
- Healthwatch Torbay was set up under the Health and Social Care Act 2012 and established in April 2013
- Healthwatch Torbay is set up as an independent organisation and registered charity, able to employ its own staff and involve volunteers, so it can be the influential and effective voice of the public. It has to keep accounts and make its annual reports available to the public, Secretary of State and key stakeholders
- The aim of Healthwatch Torbay is to give local communities a stronger voice to influence and challenge how health and social care services are provided within their locality *"No decision about me without me."*
- Healthwatch Torbay has a seat on the Health & Wellbeing Board and is a consultee of the health and wellbeing strategy
- Healthwatch Torbay provides feedback to the Overview & Scrutiny Board, Safeguarding, Care Quality Commission, NHS England, Healthwatch England, etc.
   All our correspondence <u>must be acknowledged within 20 working</u> days and take into account any information provided

## What we do

• We Monitor



• We Analyse



- We Investigate
- We challenge





### The legislation applied to Enter and View

- Two pieces of legislation sit behind Enter and View which place a duty on service providers to allow a representative of local Healthwatch organisations to enter certain premises and observe certain activities; the local Government and Public Involvement in Health Act 2007 (as amended by the Health and Social Care act 2012) and National Health Service Act 2006/ Local Government and Public Involvement in Health Act 2007 (as amended by the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013).
- In addition, the Department of Health Review of Health and Care Powers of Entry 2014 further explains that the regulations place a duty on service providers to allow a representative of local Healthwatch organisations to enter certain premises and observe certain activities. There are criteria that local Healthwatch organisations must meet in order to exercise the power of entry, which include the consent of the provider.



### Where does Enter and View apply?

Legislation allows Enter and View activity to be undertaken on premises where health and social care is publically funded, including:

- NHS Trusts and Foundation Trusts
- Local Authorities
- Primary medical services, such as GPs
- Primary dental services, such as dentists
- Primary Ophthalmic services, such as opticians
- Pharmaceutical services such as community pharmacists
- Premises which have been contracted by Local Authorities or the NHS to provide health or care services, such as adult social care homes and day-care centres.



### What is Enter and View?

Local Healthwatch have powers of entry, and providers have a duty to allow entry, if local Healthwatch operate under the principles of the legislation set out below:

- To go into health and social care premises to hear and see how the consumer experiences the service
- To collect the views of service users (patients and residents) at the point of service delivery
- To collect the views of carers and relatives of service users
- To observe the nature and quality of services
- To collate evidence-based feedback
- To report to providers, regulators, Local Authority and NHS commissioners and quality assurers, the public, Healthwatch England and any other relevant partners
- To develop insights and recommendations across multiple visits to inform strategic decision-making at local and national levels
- Healthwatch Enter & View is NOT an inspection.



## What have we done?

•We have been working in partnership with the local authority to distribute all our marketing material to all Torbay care homes and encourage service user feedback.





### Rate & Review Feedback Centre

- Most of the feedback we gather is input into our online rate & review feedback centre, which allows the public to leave feedback on any Torbay health and/or social care service from anywhere, including mobile phones
- Healthwatch Torbay moderate all feedback and escalate any complaints with providers and/or advocacy services



- The system also allows service providers the free opportunity to submit a response directly to specific reviews online
- We currently have on the system over 1700 reviews of over 160 different local services, since the system's launch in June 2014
- The feedback and information is analysed and used in all our reports and to support all our recommendations.

### Reports

The Enter & View Team have created a variety of reports, including:



### Working in partnership is essential

- Healthwatch Torbay's Enter & View Committee are reviewing the work undertaken by Independent Age, Healthwatch Camden, and your feedback from today's meeting
- We are developing a framework/benchmark tool for our Enter & View visiting team to put into practice during visits, particularly in residential care homes
- We will be identifying a minimum of ten local care homes to gather feedback using the framework
- You can help us by signing up to be one of these care homes.





### **Stories from our Helpline:**

For Quality of Life of Older People in Care

**Relatives' concerns and queries to the R&RA** 

The Relatives & Residents Association

Judy Downey, Chair



# R&RA Who we are

- National charity founded in 1993
- We support, inform and campaign on behalf of older people in care
- We employ the unique perspective of residents and their relatives to help improve services for all those thinking about or living in care homes



What we do

Helpline
Campaigning
Resources
Publications & Projects



# **R&RA's Helpline**

Provides a free, confidential and independent service to all callers

Offers accurate, up-to-date information about the transition to residential care.

For example about

- Who pays? What to pay? Whether to pay?
- Advocacy and support
- Concerns about care

As well as a sympathetic and compassionate response We spend as much time as the caller needs

Our Helpline empowers callers with the information they need or takes up concerns on their behalf if they wish





## Your rights in a care home

 R&RA leaflet setting out care homes' responsibilities to residents under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014





#### Your rights in a care home

As a resident – or as a relative or friend – you need to know what care providers must do to ensure that residents' rights are protected when receiving personal care and living in a care home. This summary contains some of the most important rights under the current regulations as approved by Parliament. The numbers in brackets refer to the Regulation number. These Regulations are all mandatory. This means that providers must comply with them. They are not optional 'extras'.

NB. The term "provider" also means the manager throughout.

#### Registration is Essential for All Providers and Managers

I. All providers and their managers must be registered by the regulator: the Care Quality Commission (CQC). To run a care home without being registered is unlawful. The CQC is also responsible for inspecting all care homes.

2. The home must be run by a provider or a nominated person who must be of good character. This must be "*a* fit and proper person" and have the necessary qualifications, skills and experience. The manager in charge of the home must meet the same standards of fitness. *Part 3* Regulation *4*, *5*, *7* 

#### Abuse

3. You must be kept safe from any risk of abuse, ill-treatment or neglect or degrading or improper treatment. Providers must have systems to prevent and investigate any allegation or evidence of abuse. *Regulation 13* 

4. Abuse includes sexual, physical and psychological abuse as well as theft and neglect.

Going into a care home feels like entering another world which has its own conventions and of course, its own governing legislation and guidance. So, however friendly and warm, it can still be difficult for residents and their relatives and friends to know what it's going to be like and what they have a right to expect.

Despite all the rhetoric, it is not like living in your own home. Most people now going into care homes are in their 80s and 90s, with more than 70% having some form of dementia, often with other disabilities and illnesses. As a result, they need skilled help and support with their personal care and activities of daily life from care workers.

5. You must be protected from the threat or use of force, deprivation or restriction of liberty, restraint or control. *Regulation 13 (6,7)* 

#### Assessment and Care Plan

6. You must get a proper assessment of your needs and a care plan that meets them. *Regulation 9 (3)* 

7. Your safety and welfare must be ensured by the provider. Your care must also reflect best practice and avoid discrimination. *Regulation 9 (1)* 

#### Choices, Communication, Dignity and Privacy

8. You must be treated with consideration, dignity and respect which protects your independence and privacy and enables you to make choices without discrimination due to your age, culture, disability, language, race, religion, sex or sexual orientation *Regulation 10 (1,2)* 

#### Cleanliness of Premises and Infection Control

9. The home must be a safe and clean environment where you are protected



## **Keys to Care Resource**



### Independently evaluated by





# WHY DID WE PRODUCE KEYS TO CARE?



Their development was prompted by the worries and distress of residents, relatives and others to the Relatives & Residents Helpline about poor or rushed care.

And the obvious need for more support for staff and those in the front line of caring for frail, elderly people.

Our team has produced this practical training resource with the benefit of specialist advice and the help of people who live and work in a range of care settings, with charitable funding and the endorsement of Skills for Care and the Department of Health

NB most relatives – most people – don't know that there are regulations governing care homes and home care



# **Keys to Care**

The *Keys to Care* - 12 little cards on a keyring covering topics, ranging from the practicalities of the Care Plan, Continence Care and Mouth & Teeth Care to the deeply sensitive issues of Dementia and End of Life Care.

> The key things to Think about Ask Do

It is more an aide-memoire, a checklist, a reminder of what matters and yes, a reassurance that you're doing the right thing.



# **Keys to Care**



The *Keys to Care* resource was designed primarily for care workers and healthcare assistants and also found useful for relatives and others.

Jargon free, practical, easy to read and use.

"A brilliant idea and so well executed." Sharon Allen, CEO of Skills for Care





# The Keys to Care resource is unique because it is:

- Designed for the busy health and care worker
- Easy to read and use
- Attractive and durable
- Flexible in use
- Also found useful for residents, relatives, carers' groups and the NHS



### Keys to Care Evaluation\* – Impact on Quality

How has Keys to Care resource impacted the quality of care you provide? More than 50% of care workers agreed or strongly agreed with these statements:

I seek more advice and guidance about doing my job

I look for ways to improve what I do

I am more involved in deciding how to care for people

I know better what I and others should be doing I care more about the person and/or my job

I am better at my job

\*University of Worcester, Association for Dementia Studies, Evaluation of the Keys to Care Resource, February 2016



## Keys to Care Evaluation – Association for Dementia Studies

- ✓ 89% of care workers used the 'Keys' all the time, frequently or sometimes
- The flexibility of the 'Keys' was reflected in the multiple ways they were used by care workers

# A Feedback from Care Workers

For Quality of Life of Older People in Care

"I like the fact you can look up more information. I feel that the more information you can get, the better."\*

"It's all a really good guide for care planning."\* "Great prompts and reminders. Nice to have the information at hand saves time."\*

"These should be given to everyone who is going to work to support people. You can tell they are written by people who are receiving or giving care."\*

"Reminds me that it is so important to do my job well."\* "They are good for reminding people what they should be doing, particularly for new and agency staff."\*

\* Quotes from the Royal Hospital Chelsea, The Orders of St John Care Trust and The Extra Mile Care Company



## Designed for Care Workers by the care sector



'They help us focus and remember what is important to caring, as people can become complacent and forget'

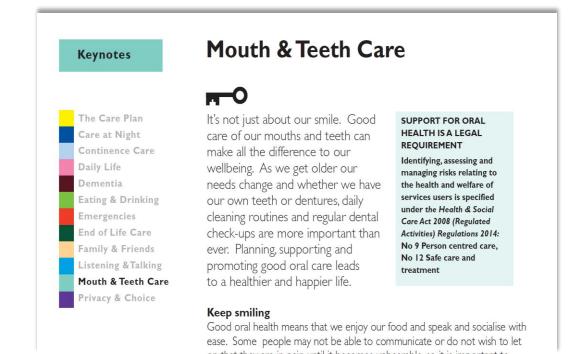
'It is so easy to slip in to a routine, and they (the Keys to Care) remind you to think about the person and look after people as individuals'





## **Keynotes**

#### Each Key has a complementary Keynote.



The **Keynotes** expand and develop each topic with hints, tips, practical examples and the underpinning Regulations.

Each one helps to bring the topic to life. See examples here today.



## Links across the sector

The National Care	Keys to Care	The Social Care
Certificate		Commitment
Understand Your Role	ALL	Working co-operatively
Personal Development	ALL	Continuing to learn
Duty of Care	Listening & Talking	
Safeguarding Adults	The Care Plan	Working responsibly
Handling Information	Emergencies	
Equality & Diversity Working in a Person Centred way	Daily life Family & Friends ALL	Treating people fairly
Communication	Listening & Talking	Communicate Effectively
Fluids & Nutrition	Eating & Drinking Mouth & Teeth Care	
Dementia & Cognitive Issues	Dementia	
Privacy & Dignity	Privacy & Choice Continence Care	Upholding dignity Protecting privacy





# Download your free Keys to Care app from







Older People in Care



## Keys to Care

#### Keys to Care



These Keys to Care are for you to keep with you. They will open up key thoughts, key questions to ask and key actions to take as you work with the people who depend on you. This is now their home and the part you play in their lives is vital to them in truly making it home. That's why you also matter so much to their families and friends.

The way you act and speak with the person you care for can help make each day worthwhile. Treating them



as special, being sensitive to their tastes and needs helps to give them dignity and security. You have your own place in their life as protector and support. This sometimes means speaking up for them even if they do have family and friends in touch.

People who live and work in homes have helped put together this set of Keys, short and practical, on matters you will recognize well. You deal with these issues, or must be ready to deal with them, every day, every night.

Whether it's Care at Night or Continence, Dementia or Emergencies, just turn to the Key for the reminder you want.

If you would like to find out more on any topic, each Key gives the link to online Keynotes at http://www.relres.org/keystocare





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are

Plan

## **The Care Plan**

#### Keys to Care

#### Think ...

- How you can use the care plan to understand and help the person.
- It tells people working in the home what they need to know about the person's life history and their day-today care.
- It includes details of their
  - ability to make decisions and choices
  - care assessment
  - end of life plan
  - medical information
  - medication and allergies
- 🗝 It also gives you information about
  - their needs and preferences
  - their family and friends
  - regular visitors
  - who to contact
  - identified risks eg falling, choking
  - changing needs
  - their goals for health and wellbeing

#### -O Keys to Care

#### Ask ...

Pla

The Care

- If the person needs your support to
- encourage their mobility
- eat and drink
- use the toilet
- enjoy any activities
- ⊷ What information should not be shared.

#### Do ...

- Read the care plan and check updates.
- Record information in the records and on all charts.
- Report any changes to add to the care plan.
- Make sure the next shift is always informed about these changes and anything that has upset the person.



Unlock more about The Care Plan with the Keynotes at http://www.relres.org/keystocare ©R&RA, 2013



## **Daily Life**



#### Keys to Care

Daily Life

#### Think ...

- How empty it can feel if you have
  - nothing to do all day
  - no-one to talk to
- ➡ How hard it is to depend on others to do what you like doing.
- How much difference you can make to someone's life by finding out
  - what interests them
  - what they can do for themselves

#### Ask ...

- About the person's
  - life history
  - interests and hobbies
- r → How they like to wear their hair, make-up, clothes.
- ⊷ What jobs in the home they might like to do.
- ⊷ What help or equipment they might need to be more independent.

#### Keys to Care

#### Do ...

**Daily Life** 

- Talk to the person.
- ⊷ Make time to do everyday tasks with them.
- Suggest indoor and outdoor activities they might enjoy.
- -• Encourage them to move around and do as much as they can.
- Make sure they can reach their walking aids.
- Check their feet and toenails.
- Make sure they are wearing the right clothes/shoes for the activity.
- Help them to do group or individual exercises.
- Help the person who seems lost or worried.



Unlock more about Daily Life with the Keynotes at http://www.relres.org/keystocare ©R&RA, 2013



## **Dem**entia



#### Keys to Care

Dementia

#### Think ...

- The person with dementia needs to feel valued and in control of their lives.
- Recognising and showing concern for someone helps them feel safe and better understood.
- Recent events may get muddled but remember that the person will have many memories and may like to talk about them.
- Fact and fantasy may become confused.

#### Ask ...

- ➡ For details in the care plan about how best to help the person.
- ⊷ What words or topics work best for them.
- Which special interests, activities they enjoy.

#### Keys to Care

#### Do ...

Dementia

- Introduce yourself each time you meet.
- •• Go with what the person says and let it unfold.
- 🗝 Avoid
  - rushing them and let them do things in their own time
  - contradicting them
- Respond patiently to repeated questions and move the conversation on.
- Remember
  - that just being with someone can help them
  - to do things with them and enjoy activities together
  - your facial expressions and gestures matter and mean even more when words fail.



Unlock more about Dementia with the Keynotes at http://www.relres.org/keystocare



RRA People in Care
Eating & Drinking

## Keys to Care

Eating

20

Drinking

#### Think ...

- Eating and drinking should be a pleasure for everyone, not just at mealtimes.
- ➡ Meals should be good and relaxing occasions.
- ➡ The person should have a choice about
  - when and where they have a snack
  - what they eat or drink
  - where they sit
  - who they eat with
  - helping to prepare food
- ➡ For some people, eating or drinking in front of other people is difficult.

#### Ask ...

- Whether the care plan includes
  - any special food or drink needs
  - risk of choking

# Eating & Drinking

## Keys to Care Ask ... If the person needs help or encouragement to leave their room for meals feed themselves

• eat in their room

#### Do ...

- 🗝 Make sure
  - the person has the opportunity to wash their hands
  - their food or drink is within easy reach
- they can get to the toilet easily
- Sit next to them if they need help.
- Help them as tactfully as possible.
- •• Talk to the person and others at the table.



Unlock more about Eating & Drinking with the Keynotes at http://www.relres.org/keystocare ©R&RA, 2013



Rand of Life Care Rand Of Life Care

## Keys to Care

End

of

Life

Care

#### Think ...

- Most of us want to die peacefully at home, our loved ones close at hand.
- Many of the people you care for in this home will end their lives here.
- Plans made in advance will make sure that the dying person's wishes are met and that you know how best to help.

### Ask ...

- Is there an advance care plan, giving the person's wishes over
  - pain relief
  - contact with family and friends
  - their spiritual needs
  - resuscitation
- How you get in touch with the outof-hours GP and medical services.

### -O Keys to Care

#### Do ...

**-**

Care

Life

End of

- Give the dying person as much time, comfort and support as you would want for someone dear to you.
- Notice what positions or actions cause pain and alert senior staff.
- Give opportunities for close friends in the home to visit.
- ➡ Welcome the support of family and keep in touch with them.
- ⊷ After death, find ways to celebrate the person's life as part of the home.



Unlock more about End of Life Care with the Keynotes at http://www.relres.org/keystocare



RRA **Family & Friends** 

## Keys to Care

Family

20

Friends

#### Think ...

- Family and friends usually know the person best of all.
- They may have concerns about how the person is feeling and how their many needs are met.
- -Some will be feeling guilty about not looking after them any more.
- Remember
  - some will visit often and want to help with the person's care
  - · some family members may also have special responsibilities for the person

### Ask ....

- Family and friends about the person's
  - life history
  - tastes in food and clothes
  - interests, talents and hobbies
  - · favourite routines or possessions

## Keys to Care Do ...

Friends

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Family

- Welcome a person's family and friends when they visit.
- Encourage them to be part of the person's life in the home.
- Keep them informed about how the person is getting on and any news about them and the home.
- Try to answer their questions or find out who can.
- Remember
  - their priority is to make sure that the person is well looked after
  - but make sure the person's own choices come first.



Unlock more about Family & Friends with the Keynotes at http://www.relres.org/keystocare



# Listening & Talking

## Keys to Care

Listening

& Talking

#### Think ...

- ⊷ How cut off you would feel if you could not easily hear or see.
- About the things you would miss.
- How upset you would be if you were touched or moved without notice.
- Good care depends on taking time and finding ways to understand one another.

#### Ask ...

- How to talk with a person who might be deaf, blind or both, so you can understand each other.
- Has the person been assessed for hearing, sight or language difficulties?
- Are any aids they are using working correctly or needing upgrade?

## Do ...

& Talking

Listening

Keys to Care

- Notice if a person's sight or hearing gets worse.
- If a person has sight or hearing problems
  - touch the person gently to let them know you are there
  - make sure they have their glasses and/or hearing aids
  - sit facing them and speak clearly, simply and more slowly
  - offer to help clean glasses and hearing aids and renew batteries
  - check they have plenty of light
- Never speak over their head with other staff or relatives.
- -• Be patient, encourage the person to respond to you.



Unlock more about Listening & Talking with the Keynotes at http://www.relres.org/keystocare ©R&RA, 2013



# Quality Assurance & Review Framework



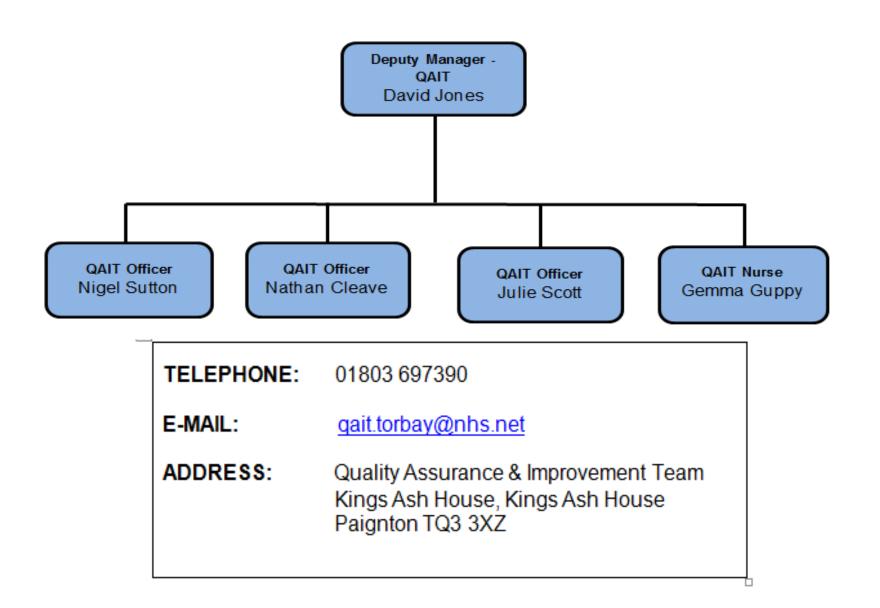


## **Outline of Framework**

- The Trust has changed the way Reassessment and Quality Assurance is undertaken.
- The aim is to have a structured/ proactive, partnership approach to monitoring the quality of care delivery and reassessment of residents.
- A member of the Reassessment Team will be allocated to your home to review all those residents that we fund, and the QAIT Team will support this process.
- This will help us gain a better oversight of the care being provided, and to help support you

## Torbay and South Devon NHS

### ORGANISATIONAL CHART AND CONTACT DETAILS





## Intro to the Care Home Resource & Information Site - CHRIS

Is a web based site which each Torbay Care Home Provider can access on-line via their unique username and password. The following resources are available to you but it is hoped other useful resources and information will be added over time.

- Bed Vacancies Enables you to update bed capacity and vacancy information as and when it changes. This information feeds directly to the front line and hospital discharge staff who use it to help inform the placement process.
- QuESTT Audit Tool A useful tool to enable you to monitor whether your service is under pressure. Can be used to compliment your internal Quality Assurance processes and therefore help provide evidence for Local Authorities and the CQC.
  - **Completed Quality Assessment –** A copy of the Trusts Quality Assessment audit which was conducted a few years ago. In the future it is hoped this section will contain the Self-Assessment audit tool for you to complete on line.
- **Registration Details –** Contains relevant information about your service from who's who and contact details, to service information and current CQC ratings.

Torbay and South Devon **NHS** 

NHS Foundation Trust

# **CHRIS – How it looks WEBSITE** - https://partners.torbaycaretrust.nhs.uk/sites/carehome\_questt

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		Welcome 🥪
<i>iCare</i>		Torbay and South Devon
Care Home Resource & Information Site QUEST		
	Care Home Resource & Information Site	
[1] Bed Vacancies [2] QUESTT - OP	Welcome to CHRIS, the Care Home Resource & Information Site.	
[3] Completed Quality Assessements	This site has been set up to allow you as the Provider to access and maintain essential information about your service. It also provides you with useful res	sources such as the QuESTT audit tool.
[4] Registration Details	Use the menu on the left to navigate the site.	
	Update your Bed Vacancies Here	
	Care Home name:	
	BED CAPACITY INFO	
	CQC Registered Beds: Registered Beds Unusable(*):	
	eg. Registered beds which are part of a double room but cannot be used as the room is singularly occupied or registered beds unusable due to refurbishment, or any other reason.	
	BED VACANCY INFO	
	Total Number of Vacancies: (Please Enter the number of empty Beds)	
	Vacancies at Trust Fee's(*): (Please Enter the Number of Beds which are priced at the rates published within Trust's fee structure)	
	Notes/ Accessibility/ Restrictions:	
	(*)subject to individual needs assessment	
	Submit	

Full instructions and log in details are available today on request. Please speak to one of the team or e-mail qait.torbay@nhs.net



# Overview of key audits for the QA Framework –

- Provider Self Assessment Audit Tool
- Care Plan Audit Tool
- Staff Training and Recruitment Audit
- 'Caring for Care Homes' Medicines Management Checklist



## CARE HOME (overarching) Contract

## Nicola Barker

## Head of Complex Care and Operational Support

## Sue Fankhauser

**Deputy Head of Procurement** 

## 17.05.17



## **NHS Standard Contract**

Generic template:

https://www.england.nhs.uk/nh s-standard-contract/17-18/

- Short form version applicable
- Full Draft on ICO's website

http://www.torbayandsouthdevo n.nhs.uk/about-us/freedom-ofinformation/part-2-classes-ofinformation/what-we-spendand-how-we-spend-it/#class2i

- Documents include:
  - Particulars / Specifications
  - <u>Service Conditions</u>
  - General Conditions
  - <u>Appendix A various policies</u>
- Issued in April/May 2017
- Return form to be returned
- Final version by end of May
- Start date 1<sup>st</sup> June 2017
- Signature page to be returned to the Trust



## Variations, Updates, Quality & Reporting

- Recent Minor changes/amendments inclusion of Oral Health and Infection control policies
- Annual updates/changes to be sent out with the national variations
- Urgent changes may trigger an immediate variation
- Latest version will be on the ICO website
- Quality

## Questions

Contact details: procurement.tsdft@nhs.net, Mikecollins@nhs.net, Richard.lang@nhs.net, Sue.fankhauser@nhs.net 01803 653365

# How to keep in touch



See the Care and Support Provider area of the Torbay Council website -

http://www.torbay.gov.uk/health-and-wellbeing/care-and-support-providers/

**Get involved** tell us if you want to join the new Provider Reference Group Torbay Council Joint Commissioning Contact information –

- Email: <u>commissioning@torbay.gov.uk</u>
- Tel: <u>01803 208729</u>
- Ask to join our newsletter contact list

## SAVE THE DATE OF NEXT FORUMS - 20th JULY & 15th OCTOBER

And **South Devon and Torbay CCG contact information** link here <u>http://www.southdevonandtorbayccg.nhs.uk/contact-us/Pages/default.aspx</u>



