

**TO: ADULT SOCIAL CARE AND HOUSING OVERVIEW AND SCRUTINY PANEL
20 JANUARY 2015**

**CARE QUALITY COMMISSION (CQC) STATE OF CARE 2013/14 ANNUAL REPORT
Director of Adult Social Care, Health and Housing**

1 PURPOSE OF REPORT

- 1.1 To consider the CQC state of care 2013/2014 report and the implications for Bracknell Forest Council.

2 RECOMMENDATION(S)

- 2.1 That the Panel note the report and the work being undertaken within Bracknell Forest Council (Annex A).

3 REASONS FOR RECOMMENDATION(S)

- 3.1 The report identifies a number of themes and 'challenges' for providers and commissioners of social care and support. Given that the Council will have a duty, under the Care Act for market oversight it is important that it is aware of any national as well as local trends with regards to the regulated care market.

4 ALTERNATIVE OPTIONS CONSIDERED

- 4.1 None

5 SUPPORTING INFORMATION

- 5.1 The Council is committed to working collaboratively with the CQC and local providers of regulated services to ensure that high quality, safe and sustainable adult social care services are available to residents.
- 5.2 Where providers fail to meet the CQC essential standards and/or provide a high quality or safe service, the Council takes robust action with the provider until such time as the standard of care and support reaches the required level. The Council's approach to care governance is set out in its policy and procedures which are available via <http://www.bracknell-forest.gov.uk/care-governance-policy-and-procedures.pdf>
- 5.3 A working group of the Adult Social Care and Health Overview and Scrutiny Panel undertook a review of the Council's role in regulated adult social care services. The working group concluded that "*Bracknell Forest Council fulfils its duty of care to people in need of care and robustly undertakes its care governance and safeguarding roles in regulated Adult Social Care services seeking to identify and eradicate poor care whilst supporting providers to improve the quality and safety of their services*".

6 ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS

Borough Solicitor

6.1 The relevant legal issues are addressed within the body of the report.

Borough Treasurer

6.2 There are no direct financial implications for the Council within this report.

Equalities Impact Assessment

6.3 N/A

Strategic Risk Management Issues

6.4 N/A

Other Officers

6.5 N/A

7 CONSULTATION

Principal Groups Consulted

7.1 None

Method of Consultation

7.2 N/A

Representations Received

7.3 N/A

Background Papers

The full report is available via: <http://www.cqc.org.uk/sites/default/files/state-of-care-201314-full-report-1.1.pdf>

Contact for further information

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The State of Health and Social Care in England 2013/2014 - The Care Quality Commission Report

1. Introduction and Background

- 1.1 The Care Quality Commission (CQC) is the independent regulator of Health and Social Care services in England. The CQC regulates the following services:
- Primary Medical Services (GPs and Dentists)
 - Hospitals
 - Community Health Services
 - Social Care Services (Residential and Nursing Homes and Domiciliary Care services).
- 1.2 The CQC is required to publish a 'state of care' report, which sets out its work over the period, any learning from its work and recommendations for the health and social care sector for the coming year. The report covering 2013/2014 was published on the 16th October 2014.
- 1.3 The report sets out the changes CQC have undertaken in regards to its inspection methodology. The previous methodology focused on compliance with the essential standards and inspections were undertaken by generic inspectors who would not automatically have had a detailed understanding of the type of service they were inspecting. Inspections are now undertaken by 'specialist' inspectors with a greater emphasis on using experts by experience as part of the inspection programme. Services are now inspected against the following 5 key lines of enquiry:
- Is the service safe?
 - Is it effective?
 - Is it caring?
 - Is it responsive?
 - Is it well led?
- 1.4 Each of the keys lines of enquiry will be judged as either:
- Outstanding
 - Good
 - Requires Improvement
 - Inadequate.
- 1.5 The services will then be awarded an overall rating which will be one of the ratings set out in 1.4

2. What are the key messages for Adult Social Care Services?

Nationally

2.1 CQC found that overall; there was a slight improvement in the quality of adult social care in 2013/14 compared to 2012/2013.

- There was a significant improvement in performance on the 'care and welfare' standards.
- However, performance on safety and safeguarding was slightly weaker than last year.
- Services were better at treating people with dignity and respect than ensuring they were safe or that staff were suitably skilled.

Within Bracknell Forest

2.1.1 All Residential and Nursing Homes (as at the 11th October 2014) in the Borough were fully compliant with the CQC standards and all had a Registered Manager.

2.1.2 As at the 11th October 2014 of the 28 domiciliary care agencies used by Bracknell Forest Council, 25 have Registered Managers and 17 are fully compliant with CQC standards. Of the remaining 11, 9 are yet to be inspected and two are non-compliant. The reasons for non-compliance with the two providers are:

- Treating people with respect and involving them in their care (Both services)
- Quality and sustainability of management (Both Services)
- Providing care and support that meets people's needs (One service)
- Staffing (Both Services)

2.1.3 There is one domiciliary care provider in the Borough who is subject to enforcement action by the CQC. The reason for the enforcement action relates to the Quality and sustainability of management. Bracknell Forest Council does not commission services from this provider. However the Council is aware of a number of people who use this service and the council continues to support them and ensure that they are able to make informed choices about the care and support arrangements.

2.1.4 It should be noted that where the Council does not have a contractual relationship with the provider the provider is not required to share information about the people it supports. This can make it difficult for the council to identify and offer support to people who fund their own care arrangements.

Nationally

2.2 CQC found that people living in nursing homes receive poorer care than those living in residential care homes with no nursing provision. Smaller residential care homes tended to perform better than larger ones.

Within Bracknell Forest

2.2.1 This is not an issue in Bracknell Forest as all Residential and Nursing Homes were compliant with the CQC essential standards.

Unrestricted

- 2.3 CQC identified nationally that the following factors impacted on services ability to provide good quality care and support.
- Workforce recruitment is a major issue. Were particularly concerned about the shortage of nurses in care homes. Encouraging more nurses to work in the care home sector should be a higher priority.
 - Good leadership is vital to delivering good quality care.

Within Bracknell Forest

- 2.3.1 Within Bracknell Forest non-compliance is not a significant issue, like many areas of the county, recruitment and retention of front line care and support staff is an issue for providers. The Council is currently working with a number of local domiciliary care providers on recruitment of front line staff. This is aimed at increasing the capacity within the local market.

Nationally

- 2.4 CQC inspections identified that nationally care homes with a Registered Manager provide better care. In addition to this, identified care homes that had no Registered Manager in place for at least six months, were less likely to be compliant with the essential standards.

Within Bracknell Forest

- 2.4.1 Within Bracknell Forest all Residential and Nursing Homes in the Borough have a Registered Manager in post. The Council works collaboratively with local providers and is in regular contact with Registered Managers. When the Council is informed that a Registered Manager is leaving their service, contact is made to discuss handover arrangements and to arrange to meet with the new Registered Manager at the earliest opportunity.

3. What are CQC's 'challenges' to providers and the adult social care system?

- 3.1 The CQC talks about the challenges it poses to providers and the adult social care system rather than making recommendations. Below are the challenges for providers and adult social care. Alongside this is commentary on how these challenges are being implemented in Bracknell Forest.

CQC challenges all providers

- 3.2 The CQC challenges all providers of Adult Social Care services to maintain a focus on recruiting for values and building the professionalism of staff.

Within Bracknell Forest

- 3.2.1 The quality and sustainability of the workforce is a high priority for the council and providers alike. Where the council has a contractual relationship with a provider the quality and sustainability of staff is monitored via the council's quality assurance framework. In addition to this the council is working collaboratively with a number of domiciliary care providers to recruit additional front line care and support staff.

CQC challenges leaders

- 3.3 The CQC challenges leaders at all levels to develop a culture of support, openness and learning.

Within Bracknell Forest

- 3.3.1 Bracknell Forest Council has positive working relationships with local providers of health and social care and promotes an open and honest working relationship. Where the council has concerns over the quality or safety of services it is open with the provider and, where possible, provides support to the provider to improve.

CQC Challenges the whole adult social care system

- 3.4 CQC challenges the whole adult social care system to recognise and value excellence in all staff, especially those in professional or leadership positions.

Within Bracknell Forest

- 3.4.1 The Council and the CCG have developed a work stream from the Better Care Fund on supporting quality in the local care home market. This is a collaborative approach between the Council, CCG and local providers. The work is focused on improving the quality of care and support within care homes to enable better health and social care outcomes for residents.
- 3.5 **CQC challenges the adult social care system** to have the courage to tackle failure in the interests of people who use services.

Position within Bracknell Forest Council

- 3.5.1 Whilst **the Council** seeks to support local providers to improve the quality of care and support, where the necessary improvements are not made the council will not hesitate to take action. This may include:
- Placing a temporary stop on commissioning additional support from the provider, until such time as sustained improvement is evidenced.
 - Supporting people who currently use the service to consider finding an alternative provider.
 - Working jointly with the CQC to ensure areas of non-compliance are identified and addressed.
 - Ending the contractual relationship with the provider.
- 3.5.2 Whilst **the Council** can and does take robust action in respect of poor standards of care, it is not the regulator of social care services, and therefore has no enforcement powers. The Council is therefore reliant on the CQC using its enforcement powers to tackle poor care and support, where improvements have not been made.

4. CQC national findings regarding Healthcare

Nationally

- 4.1 The CQC has rolled out its new inspection methodology across community healthcare providers (including mental health providers) and providers of hospitals. CQC have now inspected 62 NHS trusts (of which CQC had issued formal ratings to 38 trusts covering 82 hospitals). CQC had inspected 12 Mental Health Trusts under its new approach and eight community health providers. CQC found wide variation in care between trusts, between hospital sites, between hospital services and within each service – from outstanding to inadequate.

NHS Services Bracknell Forest residents have access to.

- 4.1.1 Whilst Bracknell Forest Council does not provide or commission healthcare services, it is linked in with local healthcare systems and therefore has an interest in understanding the local healthcare market. The following information is in respect of the local NHS Foundation Trusts that Bracknell Forest residents access.
- 4.1.2 Frimley Park NHS Foundation Trust was the first NHS trust in the county to be awarded an outstanding rating
- 4.1.3 In May 2014 Heatherwood and Wexham Park NHS Foundation Trust was inspected by CQC and judged to be inadequate. Heatherwood and Wexham Park has now merged with Frimley Park Hospital to become Frimley Health NHS Foundation Trust.
- 4.1.4 In June 2014 The Royal Berkshire NHS Foundation Trust was inspected and judge to require improvement.
- 4.1.5 Berkshire Healthcare NHS Foundation Trust service at Prospect Park Hospital (one specific ward) were inspected in September 2014 and judged to meet the essential standards. Services at Prospect Park Hospital have not been assessed under the new inspection methodology and therefore have not been awarded a rating.
- 4.1.6 In February 2014 the Care Quality Commission published the findings of its review of the assessment and admission arrangements for people detained under the Mental Health Act. The monitoring visit reviewed the arrangements for the Approved Mental Health Professional (AMPH) services across Berkshire (provided by the 6 LAs in Berkshire) as well as the hospital based provision (provided by Berkshire Healthcare NHS Foundation Trust). Mental Health Act monitoring is undertaken by Mental Health Act Commissioners from within the CQC. The inspection methodology for Adult Social Care, Primary Medical Services and Hospitals does not apply. Therefore no overall grade is awarded to the trust and local authorities in respect of this area of service provision.

5. What joint work is the Council undertaking with the Care Quality Commission?

5.1 The Council works with the CQC on a range of operational and strategic matters, below is a summary of the three main areas of work.

5.2 Local Area Profile

5.2.1 Bracknell Forest Council is one of 18 pilot local authorities who are working with CQC to develop Local Area Profiles. The profiles will collate information at a local authority level about providers regarding i.e. compliance/noncompliance with the essential standards, statutory notifications made, any enforcement action taken by the CQC. This will enable Local Authorities to have a greater understanding of their local market and identify any trends or themes.

5.3 Sharing of local intelligence

5.3.1 The Council meets with the local Inspection Manager on a bi-monthly basis to share information regarding the quality of local services. This enables any action or interventions the Council or CQC intend to take to be dovetailed and to reduce any unnecessary burden on the provider.

5.4 Management of individual safeguarding concerns

5.4.1 Where as part of a safeguarding enquiry the Council becomes aware of concerns regarding the quality and or safety of a regulated provider the council will share this with the appropriate inspector.

6 Conclusions

6.1 95% of adult social care providers commissioned by Bracknell Forest Council are fully compliant with the essential standards. Whilst it is encouraging to note that compliance levels are high within Bracknell Forest, it is important to recognise that an inspection report is based on the information available at the time of the inspection. Therefore providers and commissioners cannot be complacent that a positive inspection judgment means that the service will continue to be compliant with the essential standards.

6.2 The Council works collaboratively with local providers where quality issues are identified. The Adult Social Care and Health Care Governance Board oversee this work. The Care Governance Board uses the information gleaned at inspection to inform its commissioning arrangements with providers.

6.3 The Council has a positive working relationship with the CQC; this is evidenced by its participation in the Local Area Profile Project.