

# **Leeds Adults and Health Directorate Social Care Quality**

## **Account for Commissioned Regulated Services 2017**

### **Our Goal is:**

To ensure that all citizens of Leeds who require (Regulated) care services have access to a diverse range of high quality services.

### **Introduction:**

The Care Act 2014 places a duty on local authorities to shape a diverse and sustainable regulated care market, ('regulated care' refers to care services monitored and inspected by the Care Quality Commission (CQC) which for Adult Social Care means: care homes - both residential care and nursing care, home care, Shared Lives and extra care housing and support). This duty requires councils to ensure there are enough high quality providers and services for people to make an informed choice of care provider from within their local area.

This Quality Account references the CQC data<sup>1</sup> in their 'State of Care' report for all regulated services in the country and the CQC Leeds Local Area Profile. The account sets out what regulated care is available in the city, which of those regulated services are commissioned by Adults and Health, a comparison of all Leeds regulated services to national figures from CQC data, a breakdown of the quality of commissioned regulated services in the city and finally, what Adults and Health are doing to improve the quality of services in Leeds.

It is worth noting at this point, that whilst the CQC data lists all regulated provision, it does not break this down into the different age-related services in the way Adults and Health currently categorise services. Therefore, all CQC data or comparison data will include all service types i.e. data or comparison data for residential homes will include data for residential homes for older people, people with a learning disability, mental health and physical/sensory impairment residential homes.

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<sup>1</sup> Further information can be found of the CQC website <http://www.cqc.org.uk/>

## **Regulated Services in the City**

Leeds currently has 268 active social care locations registered with the CQC<sup>2</sup>. Of these 268 locations, 111 provide a domiciliary care service, 110 provide a care home without nursing, (this includes those services provided by Adults and Health) (residential homes) and 49 provide a care home with nursing (nursing homes) Adults and Health do not provide nursing homes.

Currently 205 of these social care locations have been inspected by the CQC. The table below shows overall outcome of these inspections and how services have been rated:

	<b>Latest Rating</b>	<b>Number of Active Locations</b>
2	Good	138
3	Requires improvement	64
4	Inadequate	3
<b>Total</b>		<b>205</b>

Currently there is no social care location rated as outstanding in the city.

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<sup>2</sup> All data within this section is from the July 2017 CQC Area Profile for Leeds. A location may provide more than one type of service e.g. a residential home may also provide a domiciliary service but would be registered as one location.

## **Leeds Regulated Services compared to national figures from CQC data**

This Leeds City Council Adults and Health Quality Account covers all social care services which are nationally regulated by the Care Quality Commission (CQC). This includes services operating in Leeds who are not under contract to Leeds City Council.

The CQC's rating for an individual service is based on five key questions:

- Is the provision safe?
- Is it caring?
- Is it responsive to changing needs and desires?
- Is it effective?
- Is the service well-led?

A judgment is made for each of these domains during the inspection, before making an overall judgment of the service as a whole on the basis of a combination of each domain. An overall judgment is not the same as the specific judgments; for example an overall judgment of good may contain 4 questions rated as good and one judged to require improvement. This can lead to confusion as in the Quality of Care report the CQC quote the % of domains rated as good at 70% which is very different to the number of services overall rated as good. Therefore, if we look at, for example, *is the service caring?* 89% of services are rated as Good in terms of caring, but this is only one of 5 domains that are aggregated to form the overall judgment. This approach by CQC must be understood to be able to properly compare service quality.

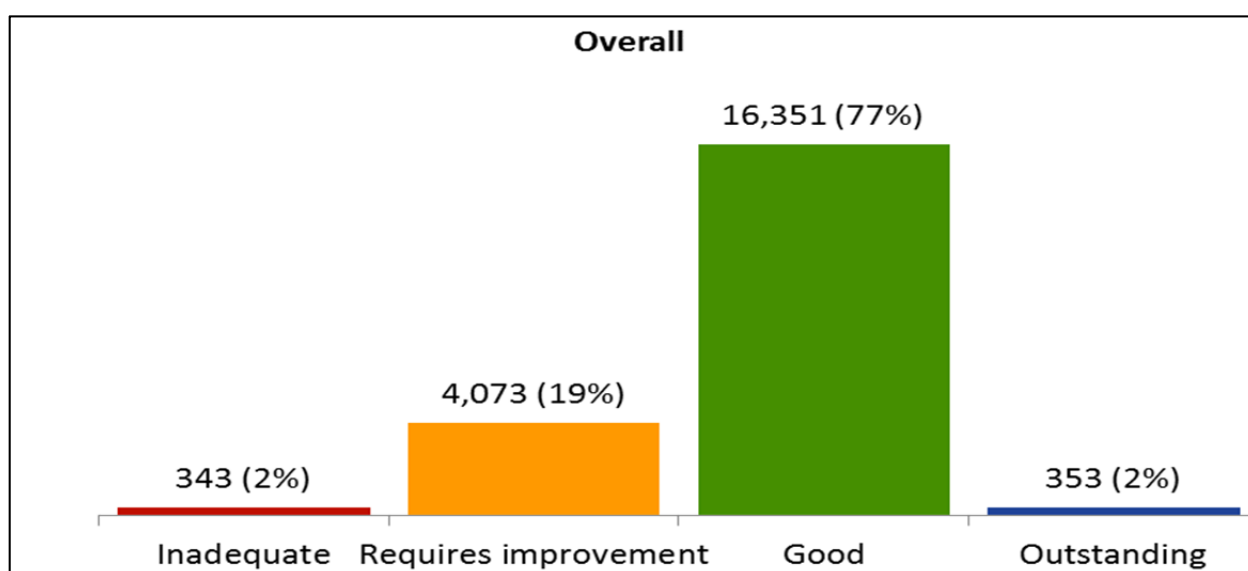
It is also worth noting that 'Requires Improvement' covers a very broad range of findings, as noted previously. There may be, within an overall judgement of Requires Improvement, 2 or 3 areas that are good, whilst the areas judged Requires Improvement can vary from example; a small number of inaccurate recordings which

can be easily remedied, or minor building work required, to much more concerning areas such as safeguarding or policy issues.

The data used in this report originates from CQC published reports for Adult Social Care regulated activities (Residential Care, Home Care, and Nursing Care including sub markets of Learning Disability and Mental Health) regulated health services, hospitals, GP's , dentists etc. have been removed. The data set used to develop the information presented here was made available by CQC on 10<sup>th</sup> May 2017.

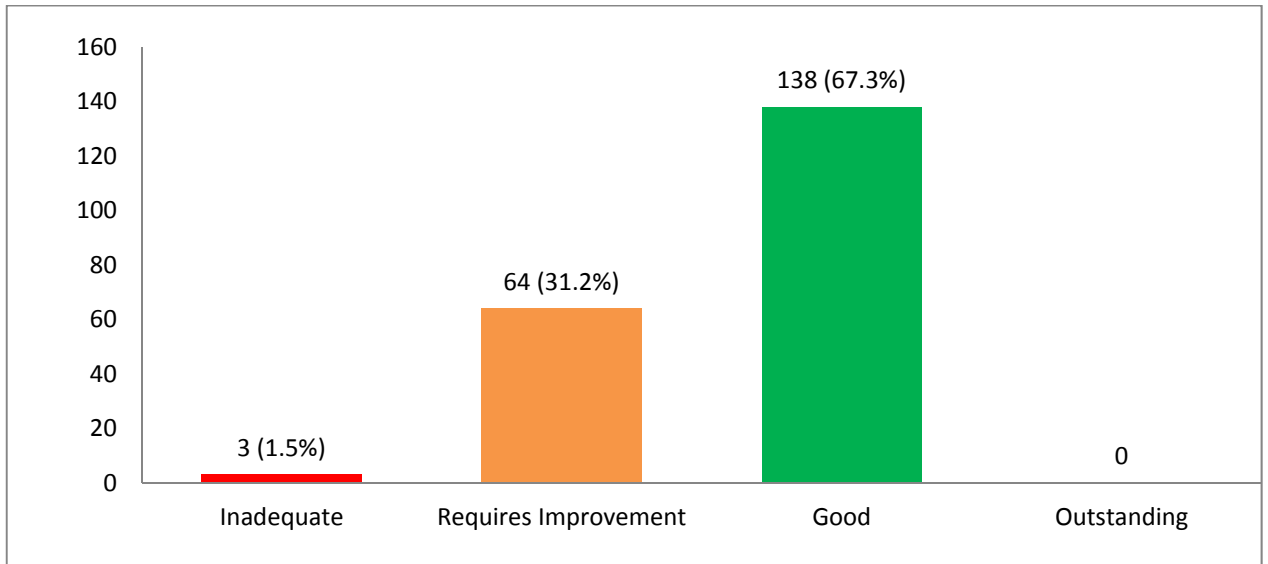
The data does not take into account services that have been inspected but where the report has not yet been published, nor does it include services not formally rated or those that have not yet been inspected.

Overall CQC ratings nationally for all regulated care services<sup>3</sup>:



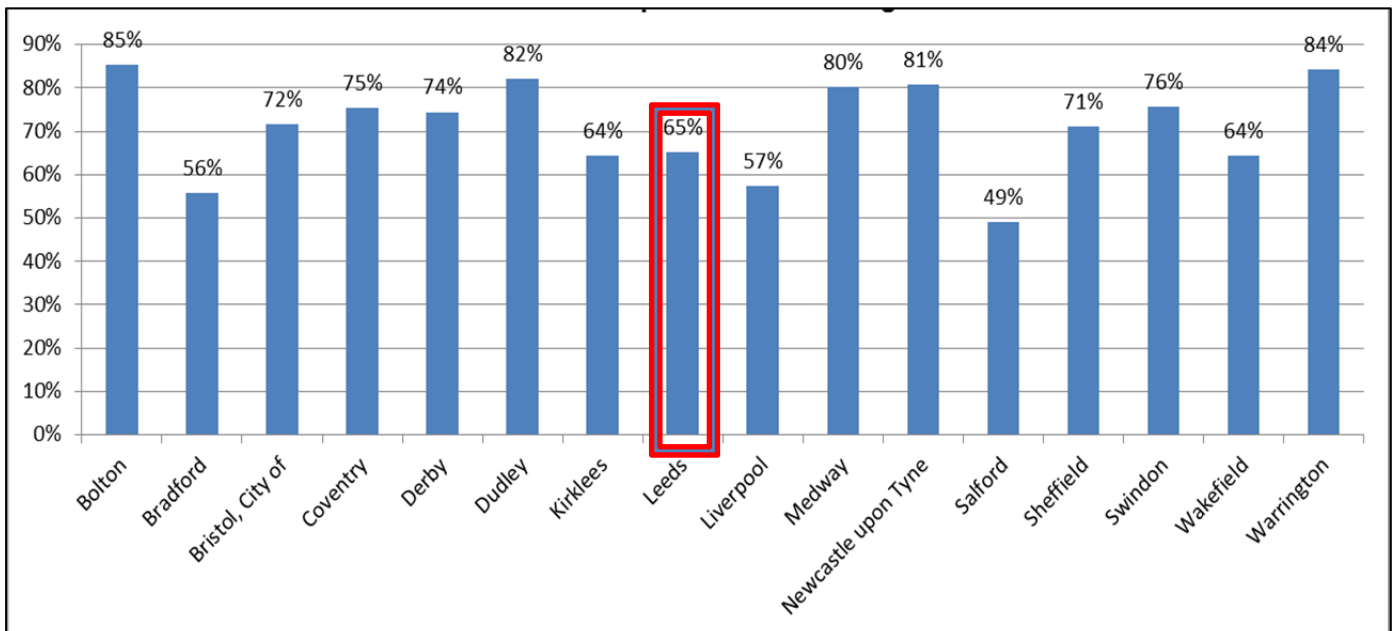
Overall CQC ratings in Leeds for all regulated services:

<sup>3</sup> The state of adult social care services 2014 to 2017: Data Appendices <http://www.cqc.org.uk/publications/major-report/state-adult-social-care-services-2014-2017>



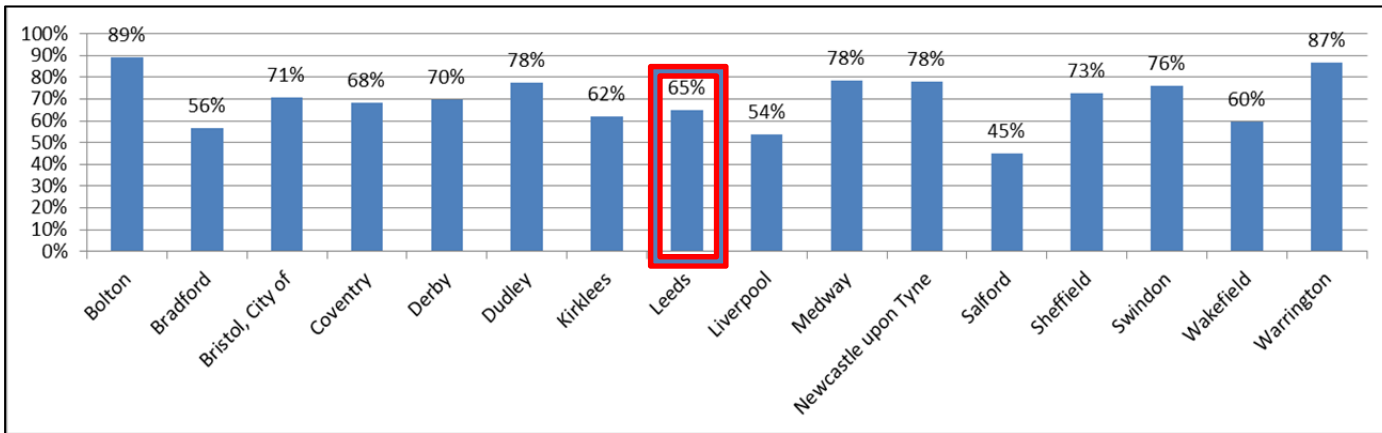
Comparison with other local authorities<sup>4</sup>:

The following chart shows the % **all social care services** rated as Good overall in each local authority:

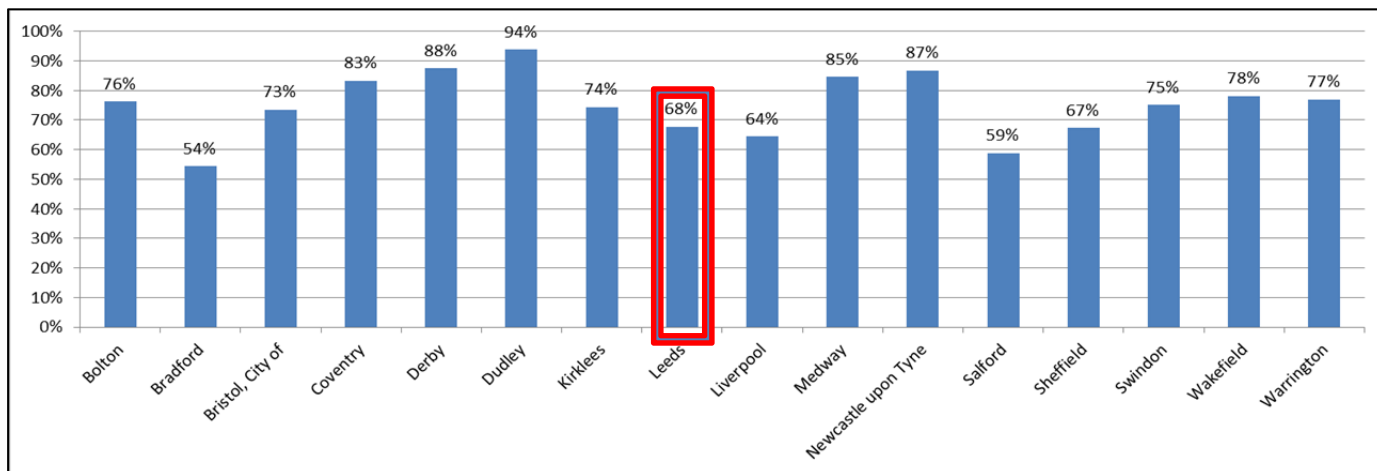


The following chart shows the % of **all Care Homes** in each authority rated as good:

<sup>4</sup> Based on Data released by CQC on May 10th 2017



The following chart shows the % of **all Domiciliary Care Services** in each Authority rated as Good:

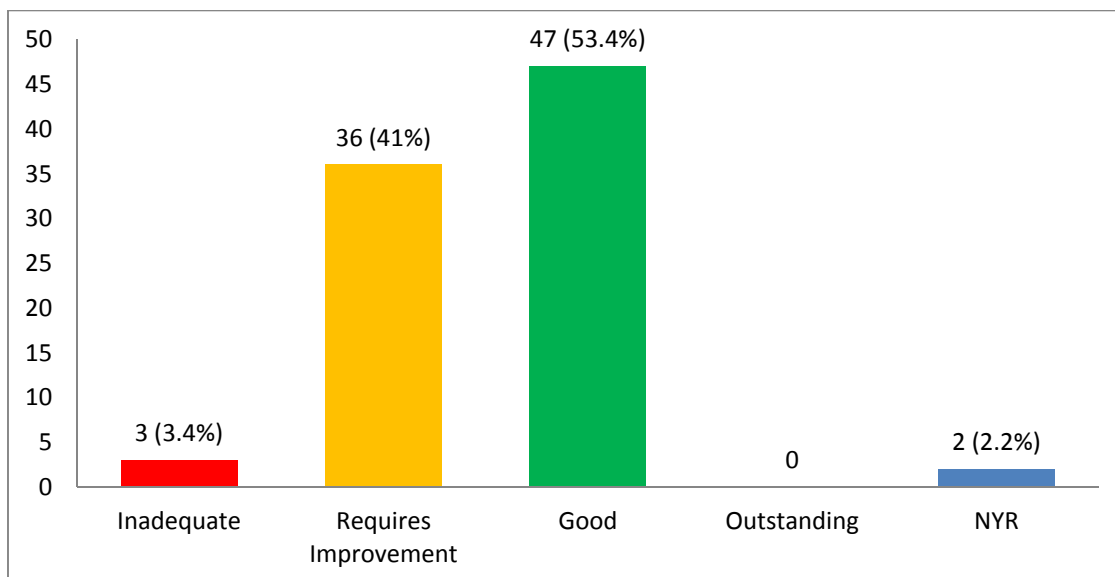


## The ratings for Leeds Adults and Health contracted service areas:

### Care Homes for Older People:

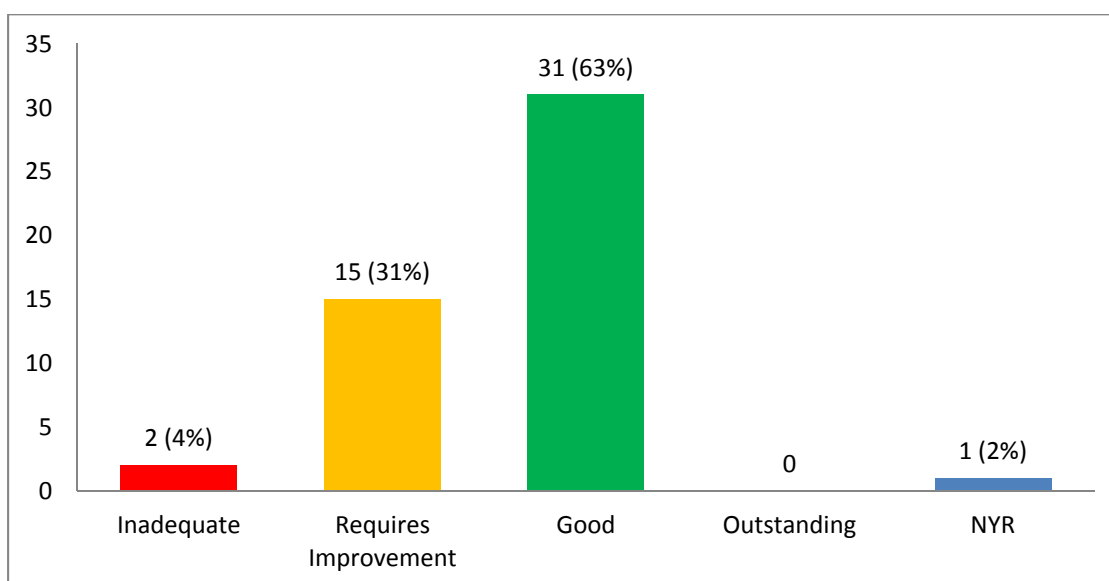
Leeds currently has 88 care homes for older people in the independent sector. There are 49 residential homes and 39 nursing homes. CQC ratings for<sup>5</sup>:

All older people's care homes in the independent sector



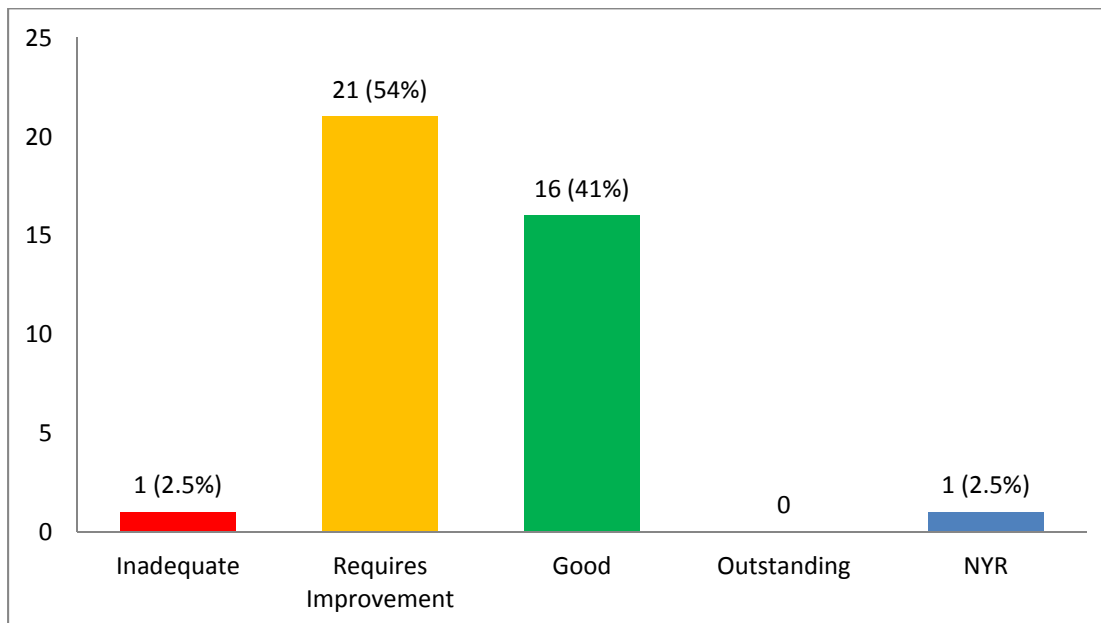
\*NYR = Not Yet Rated

### Older people's residential homes



<sup>5</sup> Data as at 30<sup>th</sup> July 2017

## Older people's nursing homes



Of all the CQC inspections undertaken in care homes for older people, 51 care homes have had more than 1 inspection. Of these 51 homes, 24 homes (47%) **improved** their rating or **maintained** a good rating at their latest inspection. 24 homes (47%) **failed to improve** their rating at their latest inspection. And 2 homes (6%) had a **deteriorating** rating at their latest inspection.

In terms of the split between residential and nursing:

- Residential - 29 homes have had more than 1 inspection. 16 (55%) of these homes improved, 11 (38%) did not improve and 2 (7%) had a rating that deteriorated following their latest inspection.
- Nursing – 22 homes have had more than 1 inspection. 8 (36%) of these homes improved, 13 (59%) did not improve and 1 (5%) had a rating that deteriorated following their latest inspection.

### Domiciliary Care Services

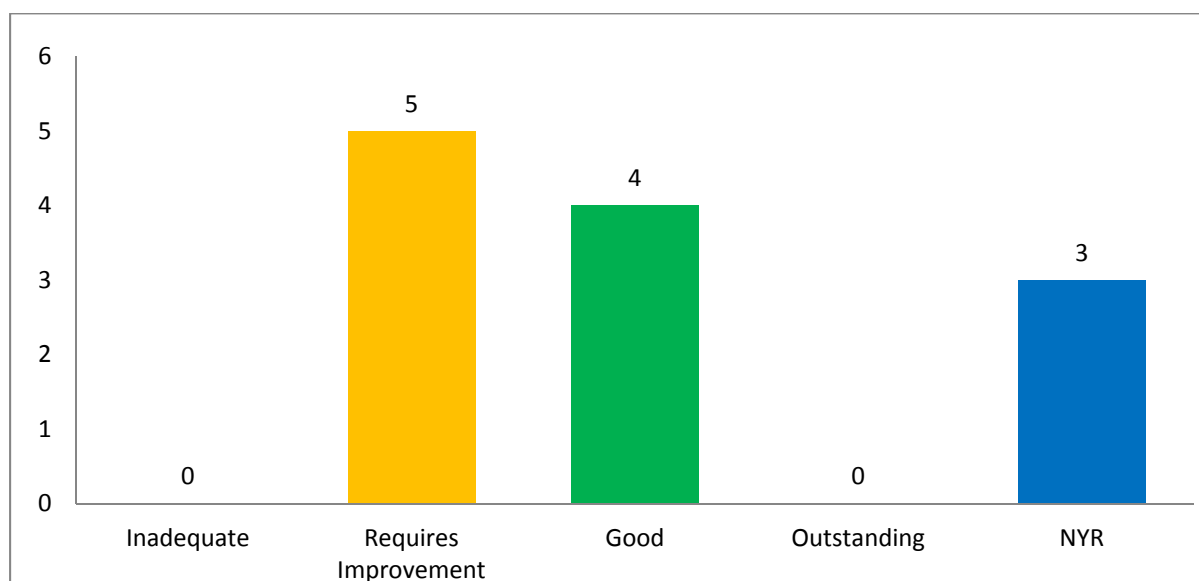
Adults and Health let a new Community Homecare contract in 2016 which was let on the basis of a primary contract for six areas of the city supported by a citywide framework contract. Following a procurement exercise during 2016, the contract was let to 4 primary providers with a further 8 providers being part of the framework contract<sup>6</sup>. As can be seen from this and the figures mentioned above for the overall number of domiciliary care

<sup>6</sup> Award report for Community Home Care Contract <http://democracy.leeds.gov.uk/ieDecisionDetails.aspx?ID=43031>



services in the city, Adults and Health formally contract with only a small proportion of these providers.

The CQC ratings for contracted domiciliary care services:



In addition to the CQC rating, Adults and Health have commissioned Healthwatch Leeds to provide an independent verification of commissioned homecare services in the city. In undertaking this work, Healthwatch Leeds interviewed a sample number of people who use services commissioned by the council. Some of the key findings from the report<sup>7</sup> are below:

- The vast majority, 98%, said that they felt care workers treated them with dignity and respect and 75% stating they were satisfied or very satisfied with the care they received.
- Many respondents had praise for their individual care workers however there are concerns over communication with and responsiveness of the care providers.
- There are concerns from some people over the number of care workers who attended their home and the lack of consistency in the quality of care this can create.
- There were issues reported around the levels of personalisation of care being provided and with the care providers having adequate systems to quality assure the services being provided.

<sup>7</sup> <http://www.healthwatchleeds.co.uk/reports-and-recommendations>

This is the second year Healthwatch have undertaken a survey of people using contracted homecare services and the following table shows a comparison between the results of this year's survey and the survey carried out in 2016.

		2016	2017
			<b>(60 Respondents)</b>
			<b>(135 Respondents)</b>
Who receives homecare services?	<b>Friend / Neighbour</b>		<b>2%</b>
	<b>Myself</b>		<b>58%</b>
	<b>Other Family Member</b>		<b>20%</b>
	<b>Partner / Spouse</b>		<b>20%</b>
Do you always have the same carers or do they change	<b>Mostly</b>		<b>45%</b>
	<b>Yes</b>		<b>12%</b>
	<b>No</b>		<b>42%</b>
Do care workers come at days and times that you / your relative need them to?	<b>Yes</b>		<b>88%</b>
	<b>No</b>		<b>12%</b>
Do care workers arrive on time?	<b>Always</b>		<b>37%</b>
	<b>Mostly</b>		<b>43%</b>
	<b>Never</b>		<b>3%</b>
	<b>Sometimes</b>		<b>17%</b>
Do you know what the care workers should be doing?	<b>Yes</b>		<b>95%</b>
	<b>No</b>		<b>5%</b>
Do the care agency let you know if anything is going to be different with	<b>Not Applicable</b>		<b>18%</b>
	<b>Yes</b>		<b>55%</b>

your care, such as the worker is running late or there is a different worker coming instead?	<b>No</b>		<b>25%</b>	<b>44%</b>
Do the care workers treat you / your relative with dignity and respect?	<b>Yes</b>		<b>97%</b>	<b>98%</b>
	<b>No</b>		<b>3%</b>	<b>1%</b>
	<b>Not Applicable</b>		<b>0%</b>	<b>1%</b>
Do care workers do what they are meant to do?	<b>Mostly</b>		<b>22%</b>	<b>20%</b>
	<b>Yes</b>		<b>73%</b>	<b>70%</b>
	<b>No</b>		<b>3%</b>	<b>5%</b>
Do you feel you have been involved in planning the care needed by you or your relative / friend?	<b>Yes</b>		<b>78%</b>	<b>86%</b>
	<b>No</b>		<b>22%</b>	<b>13%</b>
How often does the care agency check that the care received continues to meet your / your relatives needs?	<b>Every 6 Months</b>		<b>10%</b>	<b>24%</b>
	<b>Every Year</b>		<b>20%</b>	<b>12%</b>
	<b>Never</b>		<b>27%</b>	<b>24%</b>
	<b>Don't Know</b>		<b>13%</b>	<b>19%</b>
	<b>Other</b>		<b>30%</b>	<b>21%</b>
When you have a change to your normal routine (e.g. a hospital appointment) does the care agency work around you?	<b>Yes</b>		<b>55%</b>	<b>73%</b>
	<b>No</b>		<b>18%</b>	<b>6%</b>
	<b>Not Applicable</b>		<b>27%</b>	<b>21%</b>
Does the service you receive meet your / your relatives needs?	<b>Yes</b>		<b>87%</b>	<b>90%</b>
	<b>No</b>		<b>13%</b>	<b>10%</b>
Overall, how satisfied are you / your relative with the care provided by the homecare agency?	<b>Very Satisfied</b>		<b>43%</b>	<b>44%</b>
	<b>Satisfied</b>		<b>43%</b>	<b>31%</b>
	<b>Mixed Response</b>		<b>0%</b>	<b>19%</b>
	<b>Dissatisfied</b>		<b>2%</b>	<b>2%</b>

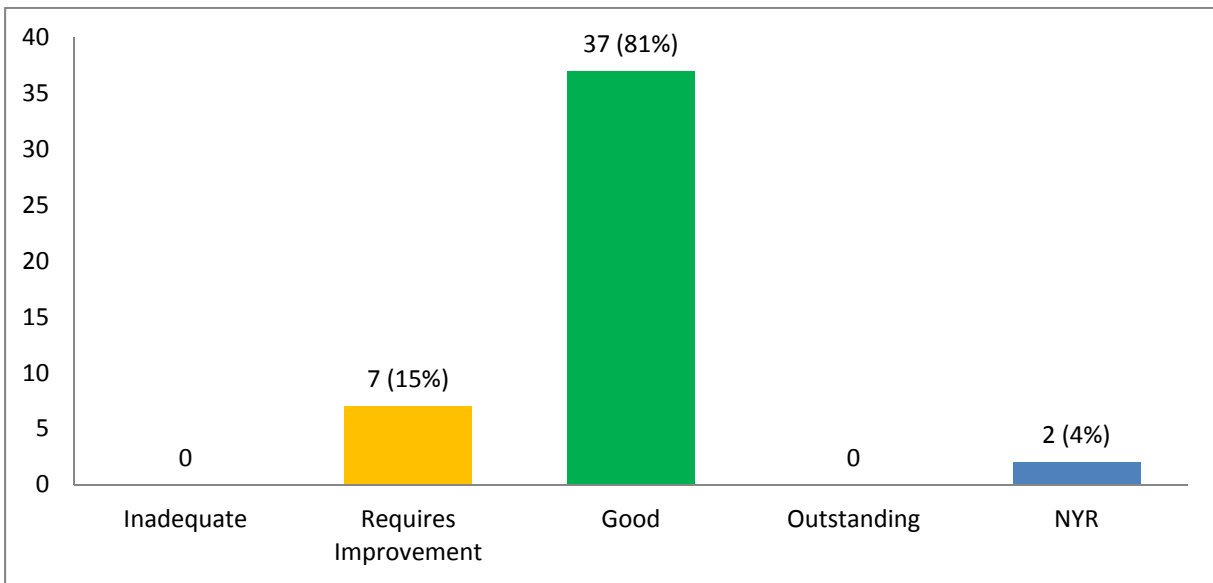
	<b>Very Dissatisfied</b>		<b>8%</b>	<b>3%</b>
	<b>Blanks</b>		<b>3%</b>	<b>1%</b>
If you were not happy with the service that you received or you had any concerns would you know who to contact?	<b>Yes</b>		<b>87%</b>	<b>92%</b>
	<b>No</b>		<b>13%</b>	<b>8%</b>
Do you have a copy of the Leeds City Council complaints leaflet?	<b>Yes</b>	<b>Question not asked in 2016.</b>		<b>24%</b>
	<b>No</b>			<b>41%</b>
	<b>Don't Know</b>			<b>28%</b>
	<b>Cannot Remember</b>			<b>7%</b>
	<b>Blanks</b>			<b>1%</b>

A full set of recommendations has been made by Healthwatch Leeds which is being shared with providers to develop key actions for improvement.

## Care Homes for Working Age Adults

Leeds currently has 46 care homes for working age adults in the independent sector. There are 38 residential homes and 8 nursing homes. Of the 46 care homes, 2 provide nursing care and 4 provide residential care for people with a physical or sensory impairment, 2 provide nursing care and 34 provide residential care for people with a learning disability and 4 provide nursing care for people with mental health needs. CQC ratings for<sup>8</sup>:

All working age adults care homes:



Nursing homes:

- Both the 2 physical or sensory impairment homes are rated Requires Improvement
- Of the 4 homes for people with Mental Health needs, 3 are rated Good and 1 is rated Requires Improvement
- Both the 2 Learning disability homes are rated Good

Residential Homes:

- All the 4 physical or sensory impairment homes are rated Good
- Of the 34 Learning disability homes, 28 are rated Good, 4 are rated Requires Improvement and 2 are Not Yet Rated

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<sup>8</sup> Data as at 30th July 2017

## **Market resilience and sustainability:**

A market sustainability strategy has been produced by Adults and Health as a requirement of the Care Act and provides greater insight into the issues and actions that are outlined in this account.

The market sustainability strategy has assessed providers in terms of how easy or hard they would be to replace should they exit the market for whatever reason. This is based on whether the provider has a building, i.e. could someone move in and take over, whether they provide specialist support i.e. nursing or nursing dementia services, their location e.g. are they in an area of under provision, and do they hold more than 5% of the relevant bed base or market share. In addition they are risk assessed based on whether they are a large national provider, their financial status, any other intelligence and issues raised by the CQC. This work does allow Adults and Health to identify hard to replace and high risk providers, it is however resource intensive as the factors it is based on are dynamic and constantly changing.

## **Improving the Quality of services in Leeds.**

The Council has a clear ambition to drive up the quality of services across the city so Leeds' citizens can be confident in their care choices. We will do this in six strategic ways:

1. By working in partnership with the sector itself, so there is joint ownership and ambition to achieve and sustain high quality services
2. By working effectively in partnership with key stakeholders such as the Care Quality Commission and the Leeds Clinical Commissioning Groups
3. By investing additional resources in a Care Quality Team to create additional capacity and to provide high support with high challenge to those services needing to improve
4. To be intelligence-led in our prioritisation: using both hard and soft intelligence to prioritise who we work with including feedback from customers, carers and staff
5. Using the assets within Organisational Development and Skills for Care to put a strong focus on high calibre leadership in care services
6. Celebrating and sharing good practice as we find it.

More detail is provided on these points below.

Adults and Health have initiated a project titled 'One City Approach to Improving Care Home Quality and Sustainability'. This is a joint initiative across health and social care partners in the city and aims to:

- Raise the quality of regulated Social Care Services to a least 80% being rated as Good in the first instance.
- Enhance information collection and analysis to better inform risk based targeting of support to providers.
- Establish regular meetings between the service providers, Adults and Health and Clinical Commissioning Groups' contract monitoring and quality assurance leads.
- Co-produce a city wide action plan to improve quality.
- Produce a joint Market Position Statement between social care and health commissioners.

A further aim of the project is to improve co-operation and information sharing between Adults and Health Contracts monitoring and the Clinical Commissioning Groups contract monitoring quality team that will improve multi-agency, multi-disciplinary assurance of and support to care providers. It will also focus on key issues like the leadership of care homes by supporting a registered manager's action learning network/ Leadership Academy

As part of the "One City Approach to Improving and Sustaining Quality in the Care Home Sector" a summit has taken place with stakeholders chaired by the Executive Member for Adults and Health and included representatives from the CQC, the Chair of Adults and Health Scrutiny Board, the Chair of the Leeds Care Association along with commissioners from both Social Care and Health. Actions identified from this event have informed the re-commissioning of Care Homes taking place later in 2017 and on-going joint work between commissioners and providers.

The Adults and Health directorate has allocated additional funding, raised by the Council choosing to levy the adult social care precept, to establish a Care Quality Team within commissioning services to compliment the Contract Monitoring Team and enable focused support initially to those older people's care homes who are experiencing difficulties in improving their quality rating. This team will have a particular focus on working with providers to improve quality and to raise standards in specific establishments where we have concerns, as well as across the sector as a whole.

Relationship management is a key contract management tool and enables Adults and Health to gather more informal information about the market and potentially give us early warning of issues, which will be critical in helping to monitor not just the quality of a service, but also the sustainability of the market. In addition, contract managers also undertake

reactive monitoring where unexpected events/issues occur and escalate issues where appropriate. This ability to support providers in difficulty demonstrates the importance of having a strong effective contracts monitoring team within Adults and Health but is an area we plan to develop further.

As part of these processes, Adults and Health hold regular formal meetings with CQC inspectors to discuss and decide upon actions regarding providers who are at risk.

Adults and Health has also tailored the support on offer to independent providers via the Council's own Organisational Development Service to align with Skills for Care requirements and to address any issues identified by council contracts officers or Care Quality Commission inspectors as requiring action. As part of this offer, the Organisational Development Service within the directorate is in the process of establishing a Leadership Academy in the city to develop care managers within the independent sector to understand and implement quality service provision. We know that a key part of ensuring a good quality service is that it is well-led which is why we are keen to work with the sector to establish the academy, In addition, Organisational Development colleagues make a considerable contribution to supporting the registered provision in Leeds working closely with commissioning colleagues to offer a range of support and development services.

Some examples of the support offered are:

- A range of free training courses to independent sector employees.
- The National Vocational Qualification Level 5, the required qualification for registered managers, is offered which includes funding and monthly support and development workshops.
- Organisational Development support with value based recruitment and generally provides assistance in recruitment and retention e.g. paperwork, references, work history etc. at no cost to external providers.
- Place young people 18 – 24 as apprentices and provide support for the full year. Additional training, meetings and support offered as required.

Adults and Health are further developing our ability to monitor more accurately safeguarding alerts and actions, especially with providers with which we have no contractual involvement, as this is the only route Adults and Health has to influence the providers when we have no contract with them.

In terms of continuous improvement and enhancing quality, we have aligned quality development across both commissioned and in house services, providing a level playing



field based on robust standards and inspection frameworks, and contract monitoring staff accompanying each other on visits to enhance consistency of judgment:

Adults and Health officers meet quarterly with a broad range of providers through a set of Provider Forums for each service area, as well as meeting regularly with individual key providers, and those where there are specific concerns. The provider forums are used to raise and address a wide range of issues, including capacity, sustainability, key issues and quality. These forums are also used to disseminate any national advice and guidance produced by bodies such as National Institute for Clinical Excellence/Social Care Institute for Excellence to the providers as it becomes available.

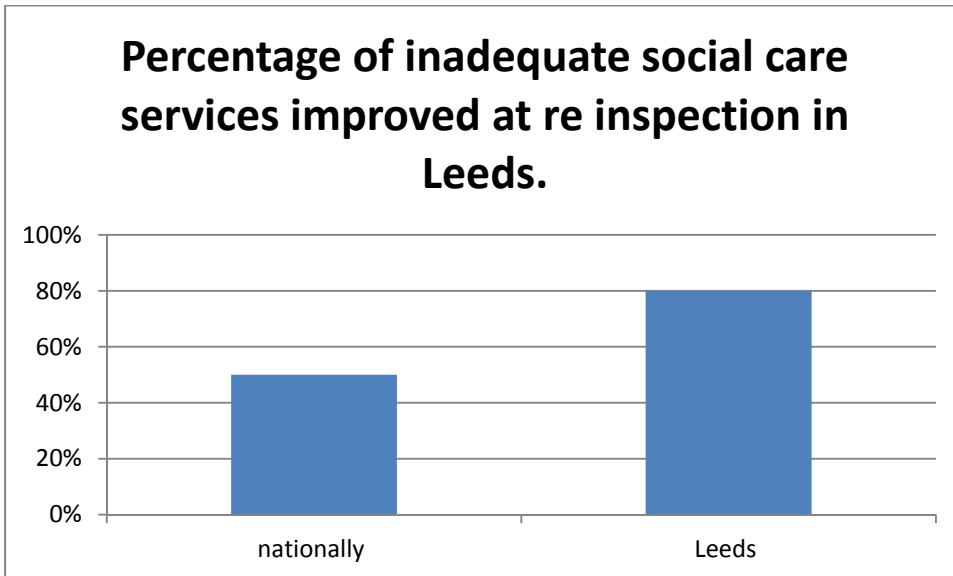
As can be seen in the paragraphs above, a main area of concern relating to the quality of services being provided in the city is in older peoples residential and nursing care provision. Currently, there is only 53% of this market that has been able to achieve a Good rating from the CQC.

The foremost focus regarding quality in this area is in supporting providers to improve services. Contracts and Commissioning within Adults and Health have a policy of suspending admissions to any provision found to be inadequate until there has been evidenced and sustained improvement to address the issues which have occurred. This approach, backed by close working with providers as noted below, has had positive outcomes, evidenced by improvements made by providers initially found to be inadequate. Since January 2015 the contracts team within Adults and Health has offered advice and support to 20 providers (12 nursing and 8 residential services) who were either rated as 'inadequate' or were suspended ( Adults and Health suspends new admissions where there are quality concerns or the service is inadequate).

Most have improved and are now rated as requires improvement, 3 are now rated as 'good' by the CQC and 2 have closed whilst 1 nursing home and 2 residential homes remain inadequate still waiting re inspection.

In those cases where services have closed we have worked closely with the providers to ensure a smooth transition for service users.

Since the start of the new inspection regime 80% of inadequate providers in the city have improved their rating at a subsequent inspection against a national figure of 50% (Ref: State of Care infographic CQC Report October 2015).



### **Learning Disability specific actions**

Another area of good practice is the monitoring of Learning Disability (LD) provision by trained volunteer service users and carers, overseen by contracts colleagues, called the Good Life Leaders Scheme. This is a co-produced scheme where service users and carers, after training with Adults and Health followed by a graduation ceremony, the trained Good Lives Leaders monitor and report on the quality of LD services and support developments in quality. The scheme positively contributes to both the quality and resilience of the market by enabling providers' developments to be informed by experts by experience. The scheme has been widely recognised as an exemplar of good practice. In 2016 the Good Lives Leaders scheme was bolstered by further recruitment in April and the team have now visited 11 providers who provide some 37 services. This means that the team are now in the position to begin their second round of visits and will be asking providers to evidence the progress made against the actions the providers outlined they were going to implement after the initial visits.

### **Mental Health specific actions**

Together We Can (TWC) is a network of 150 people with lived experience of seeking mental health support in Leeds. In 2015, Together We can, supported by Leeds Involving People, were in discussion with the Clinical Commissioning Group colleagues to co-develop 'I' statements which focus on what an individual's mental health needs are, and how services can best meet those needs. The "I" statements then informed the Leeds

Mental Health Framework 2014-2017 and specific work including Community Based Mental Health, Crisis and Urgent Care, Information, and Children and Families. The overall goal is for all services to have a shared approach to the best way to meet needs, regardless of which type of service they offer, or which person they work with.

### **Wider Business environment**

In terms of the wider business environment: Adults and Health meets twice a year with the major banks/financial institutions to discuss the broader 'state of the market', sharing anonymised information on financial and capacity trends, as well as longer term strategic plans.

Adults and Health also organise a regular Market Development Forum where representatives from across the social care provider services are invited to discuss issues and share their vision for the future of care services in the city with commissioners and partners.