



Leeds
CITY COUNCIL

**Statement of the
Scrutiny Board
(Adult Social Care)
Dignity in Care**

Introduction



Introduction

1. As part of our work programme discussion at the Board meeting in June 2008, we identified 'Dignity in Care' as the subject of a potential scrutiny inquiry and an area that we wanted to examine in more detail.
2. In order to assess the appropriateness of this subject area and to help start to define the scope of any future inquiry, we asked for a report that outlined Leeds' approach to help ensure the preservation of individuals' dignity across various care settings.
3. We were also keen to learn about how the Council had used the Capital Grant money awarded by the government during 2007/08 to support the work in Leeds.

Previous inquiry

4. At our meeting in July 2008, we were advised that during 2006/07, the then Scrutiny Board (Health and Adult Social Care) carried out an inquiry which examined dignity in care for older people.
5. We heard that the inquiry was undertaken between November 2006 and March 2007, with a final report and recommendations published in May 2007.
6. An initial response was received in July 2007 and is included as Appendix 1 to this report.

7. We were advised that regular progress monitoring had been undertaken between September 2007 and March 2008, at which time the proposed actions were found to have been substantively completed and monitoring was discontinued.

Dignity in Care in Leeds

8. We also received a report which set out the overall approach to dignity and provided an update on the Dignity in Care campaign in Leeds.
9. A summary of our views on the information presented is provided in the next section of this report.

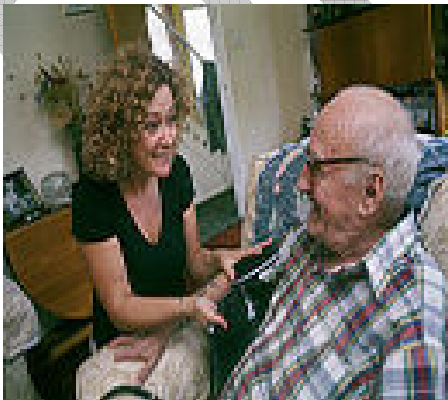
Capital Grant Funding

10. A further report detailing the process for selecting and allocating the Capital Grant money awarded to the Council by the Government for 2007/2008 was also presented at our July 2008 meeting.
11. This included a schedule setting out the care homes in which the grant has been used, alongside a number of illustrations showing some of the improvements which have been made as a result.
12. Details of our views on the information presented is provided in the next section of this report.

Comments and Recommendation

Dignity in Care Campaign in Leeds

1. We were reminded that over recent years, consultation with older people in Leeds had identified 'being treated with respect and dignity' as a priority.
2. We were advised that on 1 July 2008, Leeds had been awarded the national NHS Health and Social Care Award 2008 for its work on Dignity in Care. We heard that the award had been based on the work undertaken to raise the standards of dignity across Health and Social Care in the city through the following four approaches:
 - (a) Fostering a cultural change;
 - (b) Achieving 'top-to-bottom' organisational action;
 - (c) The development and rolling out of Dignity Audit Tools; and,
 - (d) Using dignity as an outcome measure.
3. We heard that the Scrutiny Board Inquiry into Dignity in Care across all relevant Leeds organisations, conducted in 2007, had itself been highlighted as an example of good practice. The Inquiry had ensured that organisations developed action plans to meet the scrutiny recommendations, with internal task groups established to help ensure.
4. The recommendations of the Scrutiny inquiry along with the initial response received in July 2007 is included as Appendix 1.
5. We were pleased to hear that local audit tools had been developed and were being used to drive up standards. We were also pleased to hear that a second phase of development was underway in partnership with Age Concern, that was involving groups of older people carrying out audits in care homes.
6. We heard that Dignity was increasingly being used as an outcome measure, for example in the allocation of capital grant. Performance Indicators, related to the Dignity Standards, have now been developed and are to be used within contracts with care providers.
7. We requested a further update on the Dignity in Care campaign for



Comments and Recommendation



our meeting in January 2009, at which we were informed of the comprehensive feedback sought from all sectors to measure the level of dignity and respect experienced.

Capital Grant Funding

8. We heard that the Secretary of State for Health first announced provision of a grant to enhance the physical environment in care homes for older people in December 2006.

9. Leeds City Council was awarded a grant of £1,040,000 for this purpose.

10. Overall, the process for deciding how the grant was to be allocated was not prescribed by the Government – although some allocation criteria was laid down. This included:

- Improvements should directly benefit residents – improvements of areas that are exclusively used by staff would therefore be inappropriate;
- Improvements should not be of such magnitude as to prompt a demand for increased fees;
- Care home providers should be given a degree of discretion and flexibility in making the intended improvements. However, they should maintain a clear audit trail of their decision-making

processes, which can be made available if requested.

- The grants are not intended to enable large-scale or expensive redevelopments which benefit only a small number of care homes.

- The grant should not unreasonably favour homes owned by the Authority itself

11. As part of the grant allocation process, we heard that dignity and quality of care were adopted as the basis for all the decisions about the distribution of the grant.

12. During January 2007, the Council undertook a consultation exercise with its major partners over the distribution of the Capital Grant money.

13. From the consultation, a set of local criteria were established to evaluate grant applications and in February 2007, the Council wrote to all residential and nursing care homes for older people, inviting them to submit an application for grant funding for a capital project of their choice with a **minimum** value of £5000.

14. All care homes were informed that grant funding should support improvements that would make the greatest difference to the quality of life of residents. Examples of the types of possible projects were

Comments and Recommendation



provided, alongside examples of inappropriate works.

"I have witnessed that Leeds has taken up the challenge of the Dignity in Care initiative with enthusiasm. We have Dignity Champions among front-line staff as well as managers across all services, each making a real difference.

At the same time an energetic advertising campaign, including innovative and powerful posters, encourages older people themselves to demand their right to be treated with the respect they so richly deserve.

It is with pride, as I travel about Leeds, that I see these posters displayed in libraries, GP practices and community centres"

**Susan Chesters
Chair of Leeds Older People's Forum**

15. The Council received 76 bids from independent sector care homes and 19 bids from local authority run establishments. Such was the demand for the grant, in total, the bids received were in excess of £2 million – more than double the level of funding available.
16. As such, to help ensure that the available grant would benefit as many residents in Leeds, as

possible, in some cases the total grant allocated was less than the bid – although assurances were sought about the works to be completed.

17. We heard that part of the bid evaluation criteria included an analysis of each homes latest CSCI report against the National Minimum Standards and evidence that residents had been consulted prior to the bid being finalised.
18. We were advised that, for a variety of reasons, the bids from 23 organisations were unsuccessful. The main reasons for bids being unsuccessful were that the intended improvements did not meet the locally agreed criteria and there was no evidence of consultation with residents.
19. We were provided with photographic evidence that highlighted some examples of the improvements made as a result of the grant funding. These are detailed in Appendix 2.
20. We consider that the approach and commitment employed to improving the dignity and respect experienced by citizens has resulted in proven successful outcomes. We consider the organisation and practices employed for the Dignity in Care Campaign to be an example of good practice for other major projects and initiatives.

Appendix 1



Leeds Health & Adult Care Scrutiny Board Report into Dignity in Care Formal Response to the Report from Leeds Partners – July 2007

Recommendation 1:

That health and social care agencies in Leeds continue to raise the profile of the Dignity Campaign using existing publicity materials and practice guidance.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	<ul style="list-style-type: none"> ▪ Distribution planned for Leeds Dignity in care posters and other relevant materials ▪ Distribution planned for DOH dignity in care information 	<ul style="list-style-type: none"> ▪ Distribution of Leeds Dignity in care posters and other relevant materials ▪ All Trust champions encouraged to register at DOH champions website 	<p>As soon as posters arrive</p> <p>June 2007</p>
LMHT	<ul style="list-style-type: none"> ▪ Distribution planned for Leeds Dignity in care posters and other relevant materials 	<ul style="list-style-type: none"> ▪ Information to be collated to define the role a lead Dignity staff member in each service area ▪ Establish Email network to distribute dignity information 	<p>Sept 2007</p> <p>Sept 2007</p>
Adult Social Care Services	<p>Distribution of Leeds Dignity in care posters and other relevant materials</p> <p>Front Page article on Dignity in recent edition of Council News Paper.</p>	<ul style="list-style-type: none"> ▪ The action plan to be an agenda item on all management meetings and arrangements for future distribution of materials and use of newsletters to be put in place. 	<p>Arrangements in place by October 2007</p>

Appendix 1



Organisation	Existing Activity	Planned Activity	Timescale
Leeds PCT	<ul style="list-style-type: none"> ▪ Distribution of DoH Dignity in Care cards to some Care Home and PCT staff through existing Essence of Care meetings ▪ Linking Dignity in Care Campaign and Essence of Care Privacy and Dignity work, commenced with Care Home staff 	<ul style="list-style-type: none"> ▪ Distribution of Leeds Dignity in care posters and other relevant materials and use of newsletters etc., ▪ To establish a working group for essence of Care Privacy and Dignity, Dignity in Care to be incorporated with multi disciplinary representation ▪ Identify Dignity Champions across disciplines ▪ Establish email network to distribute dignity information ▪ Link dignity work with ongoing work based on Gold Standards Framework, palliative care principles and Leeds Care of the Dying workstreams 	<p>Immediate</p> <p>Sept 2007</p> <p>Sept 2007</p> <p>Sept 2007</p> <p>Immediate</p>
Leeds Care Association		<ul style="list-style-type: none"> ▪ Distribution of Leeds Dignity in care posters and other relevant materials and use of newsletters etc., 	

Appendix 1

Recommendation 2

That statutory care providers set up internal Dignity task groups to co-ordinate dignity improvements across their organisation or incorporate the Dignity role in an existing senior group. This should be led by an appropriate Dignity Champion.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	<ul style="list-style-type: none"> • Established Dignity Workstream Group • Annual Conference for staff of all disciplines to support work as dignity champions • Clinical Educators leading work at local level • Newsletter for champions keeping them abreast of local and national initiatives • Older people and carers on Leeds city General Hospital care group, papers and work from this workstream are commented on by them there and through other older people's forums within Leeds 	<ul style="list-style-type: none"> ▪ Detailed workplan available from LTHT 	
LMHT	In March 2007 LMHT established the Older Peoples Mental Health Service Privacy & Dignity Steering Group	Quarterly meetings to continue to ensure ongoing implementation of Dignity agenda.	Dates for future meetings agreed

Appendix 1

Organisation	Existing Activity	Planned Activity	Timescale
Leeds PCT	<ul style="list-style-type: none"> Initial presentations given to staff in care homes for Dignity in Care and Essence of Care Privacy and Dignity Dignity in Care highlighted in the Essence of Care Newsletter Sharing progress at Essence of Care meetings Phil Corrigan named as Executive Director Dignity in Care lead 	<ul style="list-style-type: none"> Essence of Care Group Privacy and Dignity Group to be established, Dignity in Care to be incorporated with multidisciplinary representation. To identify Dignity Champions across disciplines <ul style="list-style-type: none"> Establish email network to distribute dignity information 	<p>Sept 2007</p> <p>Sept 2007 Sept 2007</p>
Adult Social Care Services	Chief Officer – Adults to undertake role of a Dignity Champion.	<ul style="list-style-type: none"> The Adult Management Group to incorporate this into their work and co-ordinate the Dignity in care agenda across Adult Social Care Services. 	Immediate

Appendix 1

Recommendation 3

That the Leeds Older People Champions continue to act as Dignity Champions for the city to ensure that good practice developments continue to be shared between providers.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	Mark Bradley & Sally Mansfield represent LTHT on the Older People's Champions Group	Continued commitment to the Older People's Champions Group and ensure information and practice developments are shared across agencies	immediate
LMHT	John Holmes represents LMHT on the Older People's Champions Group	Continued commitment to the Older People's Champions Group and ensure information and practice developments are shared across agencies	immediate
Leeds PCT	<ul style="list-style-type: none"> • PCT changes mean new Champions are being identified • Progress of dignity work report forwarded to the Older Peoples Champions Group • Work already completed and shared as good practice • Various methods i.e. presentations and staff newsletters, used to share good practice and raise awareness 	<ul style="list-style-type: none"> • Revised representation on the Older People's Champions Group from the PEC and the Exec Board • To identify Dignity Champions • Continue to report the dignity work, share at meetings and via email 	<p>August 2007</p> <p>Sept 2007</p> <p>Immediate</p>

Appendix 1

Organisation	Existing Activity	Planned Activity	Timescale
Adult Social Care Services	Adult Social Care Services continue to be represented on the Older People's Champions Group	Continued commitment to the Older People's Champions Group and ensure information and practice developments are shared across agencies. Others to be encouraged to become Dignity Champions. Executive Member to write to all Councillors inviting them to consider becoming a Dignity Champion.	September 2007
All NHS and LA organisations	Older People's Champions Group chaired and serviced by the Older People's Team.	Older People's Team continues supporting the Older People's Champions Group and ensures information and practice developments are shared across agencies	Immediate

Appendix 1

Recommendation 4:

That relevant local professional bodies support policy and practice development in their sectors in order to promote a culture of dignity.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	<ul style="list-style-type: none"> ▪ Have a patient information group working party- leaflet produced in several languages and given to patients informing them about the role of OT following referral ▪ Patient involvement in diet sheet production (dietetic governance committee) ▪ OT feeding assessments are undertaken on the wards at meal times where this is required. ▪ Dietetic involvement in audit of ward practice at mealtimes ▪ Protected mealtimes policy ▪ Dietetic involvement in menu planning to ensure that dietary needs (cultural, religious and medical) can be met ▪ Professional dress code ▪ Individualised treatment plans incorporate appropriate activities/interests wherever possible. ▪ A-Z Directory of Services for older people. 	<ul style="list-style-type: none"> ▪ Ascertain level of training required for staff. ▪ Programme of increasing staff awareness of relevant policies/procedures ▪ Need for appropriate private assessment/treatment facilities raised on risk register ▪ OT guidance document on Chaperoning is ongoing ▪ Increase staff awareness of relevant Privacy policies and procedures ▪ Trust Nutrition Steering group will address issues around ward practices at mealtimes – this is a multidisciplinary group and includes patients representation ▪ Raise awareness of the Liverpool Care Pathway within/as part of induction ▪ Patient satisfaction survey for Physiotherapy ▪ To complete further patient satisfaction survey within OT Older Peoples Services ▪ Implement recommendations stemming from the June Championing Change conference 	<p>Feb 2008 Started &Ongoing</p> <p>As risk assessments completed Ongoing via champions network</p> <p>Audit Aug.2007</p> <p>Ongoing March 2008</p> <p>July 07 - 08</p> <p>ongoing</p> <p>Autumn 2007</p>

Appendix 1

Organisation	Existing Activity	Planned Activity	Timescale
	<ul style="list-style-type: none"> ▪ Designated tray system used in some areas (pilot) ▪ Dignity Audit Tool for Ward areas developed ▪ Dignity Audits are now part of all CMT business plans ▪ Liverpool Care Pathway is used for End of Life Care at LTHT ▪ Equality and Diversity policy and equality schemes in place ▪ Various auxiliary aids and services available to facilitate access and improve patient experience including interpreting (BSL , Deafblind communicator guides and spoken language) 	<ul style="list-style-type: none"> ▪ Dignity applied within various General Hospital Care workstreams e.g. nutrition, privacy ▪ New procedures for Safeguarding Adults currently being consulted upon, due for implementation Autumn 2007 ▪ Audit Tool being expanded and developed to include outpatients and emergency departments ▪ Development of two single sex wards in Beckett Wing ▪ New Dress Policy to be approved by Trust Management Board ▪ Programme of ward and department level surveys which will all include dignity question ▪ National surveys carried out on a regular basis 	<p>Sept. 2007</p> <p>Paper to Trust Board Dec 2007 July 2007</p> <p>Throughout 2007/8</p> <p>annually</p>

Appendix 1

Organisation	Existing Activity	Planned Activity	Timescale
LMHT	<ul style="list-style-type: none"> ▪ Adult protection training ▪ 5 senior clinicians within Older People Directorate have undertaken 2 day APEC training ▪ 48 CTMs/CSMs and senior clinicians have attended Adult Protection Awareness Raising sessions facilitated by the Leeds Adult Protection Unit. from Feb 07 – April 07. ▪ Care home team working in care homes ▪ Person-centred care training programme commenced 	<ul style="list-style-type: none"> ▪ Awareness Raising Dignity Workshop ▪ Person-centred care training programme ▪ Develop an appropriate audit tool ▪ Apply learning from LTHT to LMHT settings ▪ To evaluate the learning from the awareness raising workshops and continue raising the profile of Safeguarding Adults within Directorate. ▪ Develop educational package to use for training care home staff ▪ Rolling out the Person Centred Approaches to Care training 	<p>Dec 2007 Dec 2007</p> <p>immediate Dec 2007</p> <p>Sep 2007 Dec 2007</p>
Adult Social Care Services	<ul style="list-style-type: none"> • Community Matrons working with Social Services care home staff on a project to promote Dignity in Care. • Quality audits of services incorporate dignity issues. 	<ul style="list-style-type: none"> ▪ Revision of Community Support service user questionnaires to incorporate Dignity Challenge factors ▪ Develop and implement a Dignity Audit Tool for care homes in conjunction with Leeds Care Association ▪ Apply learning from elsewhere to Adult Social Care Services settings ▪ Refer to local professional groups such as Occupational Therapy (OT Leeds). 	November 2007

Appendix 1

Organisation	Existing Activity	Planned Activity	Timescale
Leeds PCT	<ul style="list-style-type: none"> ▪ Equality and Diversity training available ▪ Modern Matron and Community Matrons working with care home staff on a project to promote Dignity in Care ▪ Newsletter capturing good practice for care homes with Modern Matron and Community Matron input ▪ Sharing practice development with LCA, action plan to be agreed with Care Home Staff ▪ Attended LCA conference focusing on dignity issues, sharing with colleagues ▪ Patient feedback forms measure dignity standards ▪ Essence of Care Food and Nutrition group progressing dignity work, good practice flyer being drafted 	<ul style="list-style-type: none"> ▪ Draft a newsletter capturing good practice for care Homes with Community Matron input ▪ Sharing practice development with LCA ▪ Apply learning from LTHT to PCT settings ▪ Assess potential for advancing Dignity agenda through the PCT's Quality Strategy ▪ Drafting a dignity audit tool ▪ Establish an Essence of Care Privacy and Dignity Group incorporating Dignity in Care multidisciplinary representation ▪ Continue to share good practice via meetings, newsletters, email and events ▪ Specific posts created which will incorporate dignity issues, ie Marie Curie Delivering Choice - Palliative Care Facilitator for Care Homes post, Education post, Equality and Diversity worker post and sustaining the Gold Standards Framework and Liverpool Care Pathway across the patient community journey ▪ Workshops planned for end of year for palliative care in care homes which will incorporate dignity issues for care home staff, Community Matrons, District Nursing ▪ Incorporate Dignity in Care factors into the PCT Quality Strategy 	<p>Immediate</p> <p>Immediate July 2007</p> <p>Aug 2007 Immediate</p> <p>Sept 2007</p> <p>Immediate</p> <p>Immediate</p> <p>Aug 2007</p> <p>Aug 2007</p>

Appendix 1

Organisation	Existing Activity	Planned Activity	Timescale
All NHS and LA organisations		<ul style="list-style-type: none"> ▪ Older People's and Disabled Peoples Partnership Boards to 'Dignity test' existing and future workstreams and projects ▪ Dignity in Care to be a standing item at the Older People's Board ▪ Older People's and Disabled Peoples Partnership Boards to share information with appropriate leads for adult groups in order to spread Dignity in Care across all adult groups 	<p>immediate</p> <p>immediate</p> <p>July 2007</p>
Leeds Care Association	Developed a LCA Standards Group to promote the Gold Standard Framework and Dignity in Care amongst member organisations	<ul style="list-style-type: none"> ▪ Develop and implement a Dignity Audit Tool for care homes in conjunction with Social Services ▪ Sharing practice development with LCA ▪ Apply learning from LTHT to LCA provider settings 	

Appendix 1

Recommendation 5:

That an appropriate training package is developed by the Leeds Older People's Strategic Partnership and Service Development Team, aimed at front line staff, to address and challenge attitudes to older people.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	-	To ensure that appropriate staff take up any city-wide training available	Dependent on implementation of city wide training-
LMHT	-	To ensure that appropriate staff take up any city-wide training available	-
Leeds PCT	-	To ensure that appropriate staff take up any city-wide training available	Immediate
Adult Social Care Services	-	Support the work on City wide training strategy and ensure that appropriate staff take up any city-wide training available	-
All NHS and LA organisations		Older People's Team co-ordinating/ facilitating the development of training packages in consultation with organisations' training sections	August 2007
Leeds Care Association		To promote take up of city-wide training within member organisations	

Appendix 1

Recommendation 6:

That all commissioners of health and social care services in Leeds incorporate dignity requirements into contracts and monitor the implementation of these requirements.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	<ul style="list-style-type: none"> To ensure that this is part of the trusts SLA with PCT 	-	PCT contract timeframe
LMHT	<ul style="list-style-type: none"> To ensure that this is part of the trusts SLA with PCT 	-	PCT contract timeframe
Leeds PCT	<ul style="list-style-type: none"> Performance Indicators in the SLA with LMHT Older Peoples Service will incorporate dignity objectives which will be monitored through the PCT/SLA meeting Dignity expectations (particularly in respect of using the toilet) included in contracts for Community Intermediate Care (CIC) beds 	<p>Develop a</p> <ul style="list-style-type: none"> Build requirement to conduct dignity audits and into future contracts with health care providers CIC beds – expand and develop dignity requirements in future contracts Build dignity requirements into contracts with voluntary sector Care services make commissioning services aware of dignity issues <ul style="list-style-type: none"> Older Peoples Team to continue to work with commissioners to ensure that commissioning strategies include dignity issues 	<p>Over next 2 years as contracts are renewed/ re tendered</p> <p>immediate</p>

Appendix 1



Organisation	Existing Activity	Planned Activity	Timescale
Adult Social Care Services	<ul style="list-style-type: none">Capital Grant to Care Homes and Day Services distributed on Dignity impact criteria	<ul style="list-style-type: none">Building requirement to conduct dignity audits and other dignity requirements into future contracts with care home and community support service providers and voluntary sector organisationsOlder Peoples Team to continue to work with commissioners to ensure that commissioning strategies include dignity issues	Over next three years as new contracts tendered or existing contracts due for renewal immediate

DRAFT

Appendix 1

Recommendation 7:

That the relevant local professional bodies consider the development of more consistent and patient focused complaints procedures and develop common standards across health and social care services in Leeds.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	<ul style="list-style-type: none"> • Recently reviewed complaints procedures and associated training are in place which include options for meeting with complainants as well as the formal written process. PALS allows for a more informal resolution. • Multisector procedures are in place • Patient satisfaction surveys are done regularly and will help to highlight any cross sector difficulties • Amended versions had full consultation. Now available on new complaints web page. • Meeting 25 wd target in 68% of cases. Process requires continuous communication with the complainant • Reassurance given in complaints leaflet and on web page • Internal audit with CMTs currently in progress. New system of capturing actions taken now in place. Rolling programme of patient satisfaction surveys started in February 2007. • Complaints procedure leaflet displayed/available 	<ul style="list-style-type: none"> • A new approach to responding to complaints is proposed by the DoH and a consultation is currently taking place on a single comprehensive system that will operate across social care. It aims to offer a more personal service • Once the approach is finalised we will work with our partners including patients/public tenable delivery • Patient Satisfaction Survey identifies this is a problem • Relies on CMTs undertaking this work independently. • Team leaders to attend Advanced complaints course. • New PALS documentation to be available to OT/PT/Dietetics service • Audit complaints • Regular agenda item for team leaders. • Feed Privacy & Dignity issues into the LMHT Complaints Policy Review 	<p>Consultation runs to Oct 2007</p> <p>Throughout 2008</p> <p>Dec 2007</p>

Appendix 1

Organisation	Existing Activity	Planned Activity	Timescale
Leeds PCT	<ul style="list-style-type: none"> • Agreed protocol with LTHT for mixed sector complaints where elements of PCT and LTHT care are involved • Liaison with Adult Social Care Services on mixed sector complaints • Complaints procedure leaflet displayed/available in care service locations 	<ul style="list-style-type: none"> • Commitment to the development of comprehensive single complaints system. • Rolling programme of patient satisfaction surveys and feedback forms 	<p>Immediate</p> <p>Immediate</p>
Adult Social Care Services	<p>There is statutory guidance for Complaints procedures for Adult Social Care. Adult Social Care, LTHT and LMHT Complaints Managers are in the process of developing protocols, the focus of which will be to make it easier for people to complain about their experiences of using health and social care services and for their complaints to be resolved locally, speedily and effectively</p>	<ul style="list-style-type: none"> ▪ Meeting between Adult Social Care Complaints Manager and LTHT Complaints Manager took place in February 2007 to discuss Protocol for Managing Mixed Sector Complaints. Protocol in the process of being finalised. ▪ Joint Protocol for managing mixed Sector complaints between Adult Social Care and LMHT also in the process of being finalised. Complaints Managers have already exchanged draft protocols. 	<p>August 2007</p> <p>August 2007</p>
All NHS and LA organisations		<ul style="list-style-type: none"> ▪ Ensure links made to Our Health Our Care Our Say policy on complaints procedures, i.e. the development by 2009 of a comprehensive single complaints system across health and social care. 	

Appendix 1



Organisation	Existing Activity	Planned Activity	Timescale
Leeds Care Association		<ul style="list-style-type: none">▪ Promote compliance amongst members with complaints guidance▪ Provide guidance and clarity to sector on complaints process▪ Promote access to complaints information by commissioners	

DRAFT

Appendix 1

Recommendation 8:

That the Leeds Older People's Strategic Partnership and Service Development Board ensures that any actions, concerns and best practices arising from the Healthcare Commission's national review of acute services around dignity in care is considered by the relevant local services.

Organisation	Existing Activity	Planned Activity	Timescale
LTHT	Awaiting review report (expected September 2007)	Once Healthcare Commission's recommendations are published, ensure recommendations are incorporated into LTHT	October 2007
LMHT	Awaiting review report (expected September 2007)	Once Healthcare Commission's recommendations are published, appropriate application to LMHT services will be assessed by LMHT Privacy & Dignity Steering Group	October 2007
Leeds PCT	Awaiting review report (expected September 2007)	Once Healthcare Commission's recommendations are published, identify relevant recommendations for inclusion within SLA's with acute services and include in future SLA's.	October 2007
All NHS and LA organisations	Awaiting review report (expected September 2007)	Once Healthcare Commission's recommendations are published, Older Peoples Board to co-ordinate response to the Healthcare Commission Inquiry.	October 2007

Appendix 2

Examples of works completed to enhance the physical environment in registered care homes in Leeds

Halcyon Court - Before



Halcyon Court - After



Halcyon Court – Before



Halcyon Court – After



Appendix 2

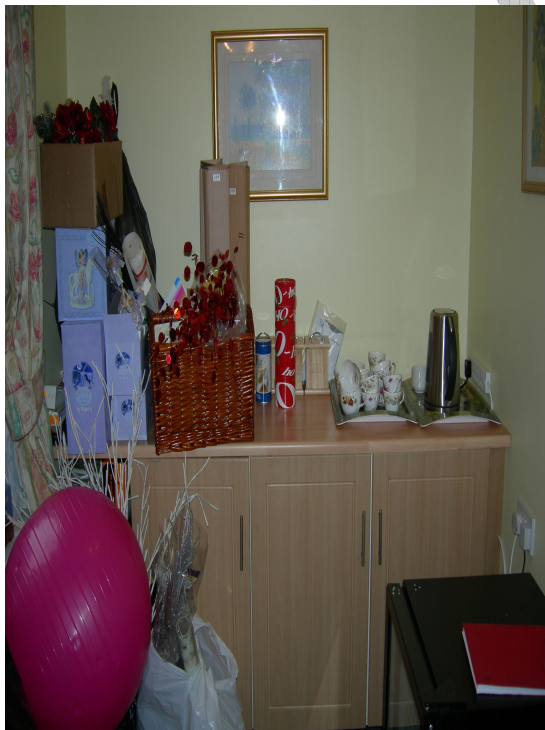
Radcliffe Gardens - Before



Radcliffe Gardens - After



Sunnyside - Before



Sunnyside - After



Appendix 2



Leeds
CITY COUNCIL

Vivian House - Before



Vivian House - After



DRAFT