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**REPORT TO: MORAY INTEGRATION JOINT BOARD CLINICAL AND CARE GOVERNANCE COMMITTEE ON 26 AUGUST 2021**

**SUBJECT: GOVERNANCE AND MONITORING OF CARE HOMES**

**BY: HEAD OF SERVICE STRATEGY AND COMMISSIONING/CHIEF SOCIAL WORK OFFICER**

**1. REASON FOR REPORT**

- 1.1. To inform the Committee of the ongoing and evolving governance and monitoring measures in place for care homes in Moray.

**2. RECOMMENDATION**

- 2.1. **It is recommended that the Clinical and Care Governance Committee note the continuous work to develop the previous and ongoing governance and monitoring of care homes in Moray.**

**3. BACKGROUND**

- 3.1. There are 13 Older People's Care Homes in Moray, of which 12 are private sector businesses and 1 is a charitable organisation. Individuals are placed in these homes via one of 3 routes, for which there are the following routine assessments:

Route 1 – individuals pay the full amount of their care home fees. They are not necessarily subject to a Social Work Assessment prior to moving into the home, but will be assessed within the first few months for eligibility to Free Personal Care.

Route 2 – individuals pay part of their care home fees and Health & Social Care Moray pay the rest. They are subject to a Social Work Assessment immediately and followed by annual reviews.

Route 3 – individuals do not pay towards their care home fees and Health & Social Care Moray pay the full amount. They are subject to a Social Work Assessment immediately and followed by annual reviews.

- 3.2. The care home fee rates and contracts are negotiated nationally and administered locally, including operational and contract monitoring.
- 3.3. Routine governance and contract monitoring includes a number of measures:

- Monthly Complaints, Comments & Incident returns.
  - Quarterly Contract Monitoring returns.
  - Six monthly Contract Management meetings, which take place on site.
  - Quarterly Care Home Owners and Care Home Managers meetings.
  - Attendance at any Care Inspectorate feedback sessions.
- 3.4. Where there are concerns in relation to service delivery are raised by health and social care colleagues that are not adult support & protection (ASP) issues, an enhanced level of contract monitoring is put in place. This includes all of the points contained above in 4.3 in addition to the following:
- An Action Plan, that has to be agreed by the Commissioning Officer, detailing how the home is going to address the concerns, including timescales for progress/completion.
  - Additional monitoring specifically in relation to the Action Plan.
  - Additional site visits.
- 3.5. Where the concerns raised relate to an ASP issue the ASP team take the lead, with the Consultant Practitioner being the main point of contact and the Commissioning Team are involved in a supporting capacity. This level of contract monitoring includes all of the points above in addition to the following:
- ASP Consultant Practitioner on site visits
  - ASP approval and monitoring of Action Plans.
  - Communication with the Care Inspectorate.
- 3.6. Where there are multiple concerns, recurring concerns of a similar nature, or concerns raised as the result of an inspection by the Care Inspectorate, this leads to consideration of whether a Large Scale Investigation (LSI) is needed and may result in a request that the care home accept a voluntary moratorium until such time that the care home can demonstrate the concerns have been addressed.

#### **4. KEY MATTERS RELEVANT TO RECOMMENDATION**

- 4.1. During the Covid-19 pandemic it has not been possible or appropriate for all of the routine governance and monitoring measures to be carried out. However, there has been a suite of governance and monitoring measures established that provided Health & Social Care Moray with a clear, and constantly updating, understanding of the current situation within the care homes. These ensured that any evolving issues and challenges were identified at the earliest possible time and at the same time providing much needed support and guidance to the care homes. The measures are set out below.
- 4.2. All care homes were required to update their Business Continuity Plans in line with the emerging needs relating to the pandemic and these were submitted to H&SCM in March/April of 2020.
- 4.3. In July 2020, as required by the First Minister, a framework to support our care homes was established and this included a number of ongoing governance measures. The majority of these are still in place currently as they have proved to be efficient and effective in building very strong working

relationships between the partnership and the providers, while ensuring appropriate governance has remained in place.

- 4.4. A Care Home Professional Clinical and Care Oversight Group was established. Meeting virtually via Microsoft Teams, originally on a daily basis, and currently meeting three times a week. This group reviews information submitted by the providers and any other relevant information and guidance that impacts positively or negatively on the safe and appropriate delivery of care and support in care homes, and collectively consider any specific governance, monitoring or support measures needed. The membership of this group includes senior managers from social work, commissioning, nursing, health protection and the Care Inspectorate.
- 4.5. Throughout the height of the pandemic weekly testing for all care home staff was in place, and this has now been escalated to be 2 Lateral Flow tests and one PCR test each week. Residents of one or two care homes per week were tested en masse via Public Health, but this is no longer required.
- 4.6. A Personal Protection Equipment Hub was established in order to ensure that services, including care homes, had access to the appropriate PPE for safety of staff and residents. This enabled H&SCM to monitor the levels of usage in the sector and ensured the early identification of challenges or difficulties so that appropriate support measures could be put in place.
- 4.7. Now, longer-term measures need to be considered as a result of the pandemic continuing to impact on the sector, so care homes have again been asked to update, where required, their Business Continuity Plans and submit them to H&SCM. This request was made in July 2021.
- 4.8. H&SCM put in place a staff deployment plans to be able to make any non-utilised staff available to support any care home who cannot operate safely due to staffing issues relating to the pandemic. Currently the Oversight Group scrutinise staffing issues across all services, including care homes. Issues with staffing have increased as the pandemic has continued, relating to it both directly and indirectly, whereby staff are physically and mentally exhausted after months and months of working under extreme pressure and restrictions, including the need to regularly work additional hours due to staff sickness as well as the amount of additional work required in order to safely deliver care and support.
- 4.9. Care homes are required to complete daily submissions using a web based governance and monitoring tool designed by Scottish Government and hosted on the TURAS platform. This includes; staffing levels, current and historic infection incidence, levels of compliance with testing guidance, bed availability, and it is monitored by a HSCM Performance Officer and is reported to the Oversight Group.
- 4.10. A rolling programme of Assurance Visits has been established. Originally carried out by the Chief Nurse and a Social Work Consultant Practitioner and latterly carried out by the Care Homes Nurse and a Social Work Consultant Practitioner. The programme is currently in its fourth cycle through the care homes and is now carried out by the Care Homes Nurse and the Assurance Nurse. These visits look at on the ground, actual hands on delivery of care

and support and identifies any areas of concern that need to be addressed. The outcome of these visits are reported directly to the Oversight Group for governance, monitoring and planning purposes.

- 4.11. At the start of the pandemic the Care Inspectorate were in direct contact with each care home on a weekly basis. Currently this has been reduced to a monthly basis, however, on site inspections have been re-introduced and are being carried out and a timetable for ongoing visits will be produced for planning purposes going forward. The Care Inspectorate representative on the Oversight Group shares relevant and appropriate information with the group for the management of joined-up governance and monitoring of any emerging of immediate challenges.
- 4.12. NHSG Public Health were also in direct contact with each care home at least weekly, but more frequently if the RAG status for that home was not green. This has evolved over time and to ensure that over-supporting did not become a significant issue, it has gradually been reduced and now there is a Public Health led meeting on a monthly basis for the care home managers to attend. Throughout all of this time, the Public Health representative on the Oversight Group has reported any relevant information to the group for ongoing, joined-up governance and monitoring.
- 4.13. Weekly meetings with the Care Home Managers were established by the Senior Commissioning Officer with responsibility for the care homes and were attended by representatives from Social Work, Public Health, H&SCM and the Care Inspectorate. These are still ongoing as they have proved to be an effective and efficient way to build trust and partnership with the providers, as well as identify emerging and immediate challenges/issues and to collectively consider any appropriate actions. Information from this group is reported directly to the Oversight Group for ongoing governance and monitoring.
- 4.14. Care Home Owners meetings have been re-established and are currently taking place on a quarterly basis. These are led by the Senior Commissioning Officer and the Commissioning Team Manager and any relevant information from these meetings is reported to the Oversight Group.
- 4.15. Onsite visits by the Commissioning Co-ordinator (Monitoring) have recently been re-introduced. Where required these may be joint visits with the Adult Support and Protection Advanced Practitioner. The outcomes of these visits are reported directly to the allocated Senior Commissioning Officer and the Commissioning Team Manager, who in turn reports any relevant information to the Oversight Group.
- 4.16. For information purposes, the current RAG status close of business 08/09/2021 for the care homes is below:

Care Home	Previous Day RAG	Current RAG Status	Actions
Abbeyside	Green	Green	No actions
Abbeyvale	Green	Green	No actions
Anderson's	Amber	Amber	1 resident tested , awaiting results
Cathay	Green	Green	No actions
Glenisla	Green	Green	No actions
Meadowlark	Green	Green	No actions
Netherha	Amber	Amber	1 staff tested, awaiting result
Parklands/ Burnbank	Green	Green	1 staff and 1 resident tested, awaiting results.
Speyside	Amber	Amber	1 staff tested, awaiting results
Spynie	Amber	Amber	1 staff tested, awaiting result
The Grove	Green	Green	No actions
Wakefield	Green	Green	No actions
Weston View	Green	Green	No actions
Parkholme	Green	Green	No actions

## 5. **SUMMARY OF IMPLICATIONS**

### **(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Moray Partners in Care 2019 – 2029”**

This report, and the previous/ongoing work detailed within it, support the delivery of the Corporate and 10 Year Plans and specifically support meeting the following outcomes in the Moray Integration Joint Board Strategic Plan:

- People are safe
- The workforce continually improves
- Resources are used effectively and efficiently

### **(b) Policy and Legal**

The processes and actions within this report are in line with Scottish Government and Health Protection Scotland guidance and requirements.

### **(c) Financial implications**

There are no financial implications as a result of this report

### **(d) Risk Implications and Mitigation**

Currently any risk implications are mitigated via the support and guidance of NHSG Health Protection Team, The Care Inspectorate, and locally via Care Homes Oversight Group.

### **(e) Staffing Implications**

There are no staffing implications as a result of this report

### **(f) Property**

There are no property implications as a result of this report

**(g) Equalities/Socio Economic Impact**

There are no equalities/socio economic implications as a direct result of this report

**(h) Consultations**

Consultations have taken place with; H&SCM Chief Officer, Head of Service Strategy & Commissioning/Chief Social Work Officer, Commissioning Manager, Care Homes Nurse, Health and Social Care Moray and Tracey Sutherland, Committee Officer, Moray Council.

**6. CONCLUSION**

- 6.1. The governance and monitoring of care homes has evolved as detailed in this report, and continues to be a live and dynamic process. The relationship between care homes and H&SCM is open, transparent and very strong as a result of the work noted in this report, which supports the ongoing governance and is something that H&SCM are working to ensure that this continues.**

Author of Report: Pauline Knox, Senior Commissioning Officer

Background Papers: With the author

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