

Report title:	Housing with Care improvement plan update - Oct 2019
Meeting:	Health in Hackney Scrutiny Commission
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Contents		Page no
Section 1:	Executive summary	1-2
Section 2:	Background	2-3
Section 3:	Summary of inspection & outcome (Nov / Dec 2018)	3
Section 4:	Action taken since inspection (January - present)	3-7
Section 5:	Summary of re-inspection & outcome (July 2019)	7 - 10
Section 6:	Communications	11
Section 7:	Next steps and conclusion	11

1. Executive Summary

- 1.1. Housing with Care (HwC) is an in-house provided service in Adult Services at the London Borough of Hackney which currently supports 222 people in 14 schemes located across the borough. These schemes provide care and support to people in ‘supported living,’ so they can live in their own homes as independently as possible. While people in HwC hold tenancies for their accommodation, the care element of HwC is a regulated service and subject to inspections by the Care Quality Commission (CQC).
- 1.2. HwC was inspected by the CQC in Nov-Dec 2018, and was rated as ‘inadequate’. A thorough action plan was developed in response, and the CQC requested that LB Hackney demonstrate that the improvements identified the plan were in place by 8th March 2019.

- 1.3. Delivery of the action plan was closely monitored, and additional resources were brought into support its delivery. LB Hackney sent a detailed progress report to the CQC on the 8th March.
- 1.4. Following the submission of the progress report to the CQC, a longer-term improvement plan was implemented and continues to be closely monitored. The priorities are; completion of any outstanding personalised care plans (completed) and risk assessments with service users, quality assurance, embedding the improvements made and making sure they are sustained, reducing the use of agency staff, ensuring all staff are well supported and trained to deliver the updated practices, and improving communication and engagement with service users and relatives.
- 1.5. The CQC reinspected HwC between the 3rd-8th July. The inspector and the team observed that significant improvements had been made, and the overall rating for the service improved to '**requires improvement**', and is therefore **no longer in 'special measures'**. A breakdown of the ratings for each domain can be seen in the table below. The inspection report and outcome was published online on 18th September 2019.

No	Domain	September 2019 rating
1.	Is the service safe ?	Requires improvement
2.	Is the service effective ?	Requires improvement
3.	Is the service caring ?	Requires improvement
4.	Is the service responsive to people's needs?	Good
5.	Is the service well-led ?	Requires improvement

- 1.6. A communications plan was implemented immediately following publication of the report. The priorities were informing service users, relatives, staff and also all key stakeholders, including holding forums attended by Healthwatch Hackney.
- 1.7. The ongoing improvement plan is being reviewed in light of the findings in the inspection report, and all required actions are being incorporated

2. **Background**

- 2.1. In Hackney there are 14 HwC schemes, with the capacity to provide care and support to up to 280 people in 'supported living,' so they can live in their own homes as independently as possible. There are currently 222 service users

within Housing with Care. There are two Registered Managers, who manage seven schemes each.

- 2.2. The 14 schemes range in size from 8 to 41 self-contained flats in each scheme. It is mainly for people over the age of 55 and they hold individual tenancies with a social landlord. Some schemes specialise in helping people with similar needs, for example people with learning disabilities, memory problems or brain injury.
- 2.3. There are separate contracts for care and housing. Housing support is provided to service users by the social landlord and includes a housing support worker to help with tenancies, such as arranging repairs. Personal care and support is provided by the LB of Hackney.
- 2.4. HwC is a regulated service and is subject to inspection by the CQC. The CQC does not regulate accommodation used for supported living. The CQC inspect the personal care and support provided by LB Hackney's in-house service only.

3. Summary of inspection & outcome (Dec 2018 / Jan 2019)

- 3.1. The CQC carried out an inspection of HwC between 23rd November - 5th December 2018.
- 3.2. The service was rated as '**inadequate**' overall and in "special measures".
- 3.3. During this inspection the CQC identified a number of concerns, which they judged to be serious enough to issue a warning notice that more serious regulatory action will be taken if improvements aren't made, which could lead to the service losing its registration. This means that the service is in 'special measures.' The CQC asked LB Hackney to ensure that the improvements they identified were in place by 8th March 2019.

4. Action taken since inspection (January - present)

- 4.1. In response to the warning notices and inspection report, an action plan was immediately developed by Adult Services, and additional resources were obtained to support the delivery of the plan. The progress against this action plan was carefully monitored by a core group led by the Director of Adult Services. The group met weekly to ensure sufficient progress was made by the 8th March 2019.
- 1.1. The Council's Provider Concerns process was also initiated, led by the Head of Commissioning for Adult Services. As part of this process, it was agreed that the in-house care provision on new placements to HwC were to be suspended until the Head of Commissioning is assured that sufficient progress has been made to improve the quality and safety of the service.

Following the latest inspection outcome and improved rating, The Head of Commissioning has decided to lift the suspension of placements into HwC, and therefore new referrals are now being accepted.

- 4.2. Following the inspection outcome, a detailed communications plan was implemented to ensure all service users, staff and stakeholders had all required information. This included Housing with Care forums with service users and relatives and attended by Healthwatch Hackney, and regular progress updates sent to the CQC.
- 4.3. In addition to attendance at the forums, Healthwatch Hackney visited four schemes in June and July 2019 to collect the views of service users, relatives and staff and published a report of their findings. LB Hackney welcomed the recommendations from Healthwatch Hackney as useful input into the ongoing service improvements being made. The report and LB Hackney's response to the recommendations can be found at: <http://www.healthwatchhackney.co.uk/wp-content/uploads/2019/09/Housing-with-Care-September-2019.pdf>
- 4.4. A full report of the progress made against the action plan was submitted to the CQC on the 8th March.
- 4.5. Following the submission to the CQC on the 8th March 2019, the outstanding tasks were reviewed along with; the statutory requirements from the CQC; the areas outlined in the warning notices and CQC inspection report; feedback from service users, their families and staff; the recommendations from Healthwatch Hackney; and the feedback from the Health in Hackney Scrutiny Commission. This informed the development of an ongoing improvement plan.

The table below outlines the priorities of the improvement plan, the progress made to date, and what this means for service users.

Priority	Summary of progress made	What this means for service users
To complete all outstanding personalised care plans and risk assessments	<ul style="list-style-type: none"> ● All service users in Housing with Care now have updated, personalised care plans. ● The majority of new risk assessments have been completed with service users, with the final outstanding documents 	<ul style="list-style-type: none"> ● Personalised care planning empowers individuals, promotes independence and ensures people are involved in decisions about their care. It centres on listening to individuals, their family and friends, finding out what matters to them and what support they

	<p>expected to be completed by the end of Oct 2019.</p>	<p>need.</p> <ul style="list-style-type: none"> • Service user's care plans now reflect them as individuals, and capture all required information about how they would like staff to support them to remain independent as possible. • Service users have been involved in conversations about their individual needs, areas of risk, and now clear plans in place to keep them safe. This reduces their risk of harm, whilst supporting their independence.
<p>To embed the improved internal quality assurance processes</p>	<ul style="list-style-type: none"> • A new quality assurance framework describing the updated internal quality assurance processes has been developed. • Recruitment for a Quality Assurance Manager is in progress. This post will lead on embedding the new quality assurance processes. • Quality checks of all updated care plans is ongoing, and is a key priority. 	<ul style="list-style-type: none"> • Service users and relatives should see faster action in response to concerns raised. • As there is now a process to share and embed lessons learnt between staff from all schemes, service users will benefit from learnings that have informed changes in other schemes, as well as from their specific scheme. This will help provide a more consistent quality of care across the schemes. • The Quality Assurance Manager will ensure service user and relatives feedback informs service monitoring and improvement on an ongoing basis. • Checking and improving the quality of the updated care plans will mean all service users will have a high-quality care plan that accurately reflects them, ensuring the support they receive is person centred.

<p>To support staff to embed new practices</p>	<ul style="list-style-type: none"> • Staff continue to attend regular training, as part of the updated training programme. • A new 'embedding best practice' programme has been rolled out. This includes workshops for all HwC staff focussing on specific areas of practice. The last topic focussed on person centred care and medication. 	<ul style="list-style-type: none"> • Service users will see a more consistent and improved quality of care as a result of staff attending significantly more training. • Staff will be more confident in all areas of care delivery, and better able to support service users and relatives in a range of ways, improving their experience of living in Housing with Care.
<p>To reduce the use of agency staff</p>	<ul style="list-style-type: none"> • A recruitment campaign took place throughout July and August. 17 permanent staff were recruited. • 16 existing part-time staff are being made full-time, based on expressions of interest. • A second round of recruitment started in October 2019, to recruit further permanent staff. 	<ul style="list-style-type: none"> • By recruiting more permanent staff and increasing the hours of existing staff, the consistency and continuity of care will improve for service users. • Reducing the use of agency staff means service users will see more of the same staff more regularly, helping to build relationships and familiarity.
<p>To continue the Provider Concerns process to oversee improvements and quality of the service</p>	<ul style="list-style-type: none"> • Regular meetings have continued. • Quality Assurance Officers conducted visits in all schemes, and their findings have fed into service improvements. • The suspension of placements to HwC has been lifted. 	<ul style="list-style-type: none"> • The purpose of this process is to monitor and improve the quality of the service, prioritising service user safety. • This process has resulted in changes to practice that have improved the care service users receive. • Not accepting any new placements into Housing with Care for a period of time meant staff were able to prioritise making the required improvements for existing service users.
<p>To improve communication and engagement with service users and relatives</p>	<ul style="list-style-type: none"> • Housing with Care forums have been established. These have taken place in July and October 2019, and the next will be in January 2020. 	<ul style="list-style-type: none"> • Service users and relatives are better informed about improvements being made in HwC. • Service users and relatives have a choice about how to

	<p>Healthwatch Hackney are invited to attend all forums.</p> <ul style="list-style-type: none"> ● A co-production group is being planned. An introductory meeting about this is happening in early November. ● Written updates about the progress being made in HwC have been sent to service users and relatives at key times, and in accessible formats. ● Updated care plans have been developed in partnership between the service users, their relatives, and staff. 	<p>engage with the service.</p> <ul style="list-style-type: none"> ● Service user and relatives can give feedback and shape services to ensure their views are incorporated and reflected in the actions taken. ● The service received is improved as a result of the input and partnership working with service users and relatives as 'experts by experience'. ● Care plans are more holistic and personalised.
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The improvement plan is being updated in light of the latest CQC inspection report findings, and will continue to be overseen by a core group led by the Director of Adult Services.

5. Summary of re-inspection and outcome (July 2019)

- 5.1. The CQC announced on the 1st July 2019 that they would be returning to re-inspect the service starting from the 3rd July 2019.
- 5.2. A comprehensive inspection took place between 3rd - 8th July 2019.
- 5.3. Four schemes were visited across over the course of the inspection, and the inspector reviewed files from the registered location (Hackney Service Centre) over two days. The inspectors spoke to a number of service users, relatives and staff.
- 5.4. A feedback meeting took place on 8th July with the inspector, the Director of Adult Services (who is also the Nominated Individual for the service), the Registered Managers, the Principal Head of Adult Social Care, and the Service Manager.
- 5.5. The Nominated Individual and the Registered Managers were informed of the outcome of the inspection and sent a draft report on the 4th September 2019.
- 5.6. The full report was published online on 18th September 2019, following LB Hackney completing a factual accuracy check of the contents. The overall rating of HwC is now '**requires improvement**'. The report commented on the

significant amount of improvement that has been made, whilst recognising more time was needed to fully embed all of the improvements.

5.7. The table below shows the current rating for each domain, compared the rating the service received after the previous inspection in January 2019.

No	Domain	January 2019 rating	September 2019 rating
1.	Is the service safe ?	<i>Inadequate</i>	Requires improvement
2.	Is the service effective ?	<i>Inadequate</i>	Requires improvement
3.	Is the service caring ?	<i>Requires improvement</i>	Requires improvement
4.	Is the service responsive to people's needs?	<i>Requires improvement</i>	Good
5.	Is the service well-led ?	<i>Inadequate</i>	Requires improvement

5.8. The table below summarises the findings identified in the report for each domain, and the action the service is taking to address any areas of improvement identified.

Summary of findings and areas of improvement identified in the report	Actions
Domain: Safe Rating: Requires improvement	
<p><i>The service was found to no longer be in breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</i></p> <p>Medicines management systems had improved, and risk assessments and management plans were thorough. A few gaps in MAR charts were identified, and some PRN protocols were found to be unclear. These were addressed during the inspection.</p> <p>The report stated that staff understood where people required support to reduce the risk of</p>	<p>Quality assurance checks of all care plans and medication management plans are in progress, and are an ongoing priority.</p> <p>Missing staff files are being collected and recorded - expected completion end of Oct 2019.</p> <p>Work is underway with HR to ensure recruitment policies and practices are compliant with CQC requirements.</p> <p>A recruitment campaign took place this summer and 14 permanent staff were</p>

<p>avoidable harm, and service users provided positive feedback about how staff support them to manage medication. Staff understood the importance of reporting and acting on any concerns of abuse, and adopted good infection control practices.</p> <p>Some gaps in staff files, such as in employment history and reasons for leaving previous employment, were identified.</p> <p>There is a high level of agency staff use.</p>	<p>recruited. 16 permanent part-time staff are also increasing their hours.</p> <p>A second recruitment campaign started in October 2019, aiming to recruit more permanent staff, further reducing the use of agency staff.</p>
<p>Domain: Effective Rating: Requires improvement</p>	
<p><i>The service was found to no longer be in breach of regulation 9 (3) (Person centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations.</i></p> <p>Whilst most care plans were found to be written in a person-centred way and were much improved from the previous inspection, further work is required to ensure this is applied to all care plans.</p> <p>Staff were found to support service users to ensure they maintain a balanced diet in a personalised way, and staff knowledge of service users needs and how they work in partnership with other agencies to ensure they are met was recognised. Staff showed they understood the importance of asking consent and giving choice.</p> <p><i>The service was found to no longer be in breach of regulation 18 (2) (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</i></p> <p>Some gaps in supervision records were identified.</p> <p>The training on offer for staff has improved.</p>	<p>Quality assurance checks of all care plans and medication management plans are in progress and are an ongoing priority.</p> <p>Gaps in staff supervision were addressed immediately, and Registered Managers are overseeing frequency and recording of supervisions completed by Managers closely.</p>
<p>Domain: Caring Rating: Requires improvement</p>	
<p>Staff understood the importance of treating people equally, and care plans now included information on sexual and gender preferences and people's cultural and religious needs. Relatives and service users provided positive</p>	<p>All new personalised care plans were developed with service users and their relatives. This will continue, including during reviews of the care plans and any decisions about the person's care.</p>

<p>feedback about staff's caring nature. People and relatives told CQC that staff treated them with dignity and respect, and CQC found that staff encouraged service users' independence.</p> <p>There was mixed feedback from service users and relatives about how involved they felt in the care planning process. Whilst some people felt involved in developing their plan of care, others did not.</p>	<p>A co-production group is being developed that will enable service users, relatives and staff to work together to prioritise and deliver further service improvements. Through feedback at the Housing with Care forums, we know having simplified summaries of care plans may be beneficial. Co-producing these will be one of the areas of work the co-production group will be involved in.</p>
<p>Domain: Responsive Rating: Good</p>	
<p>Care plans were personalised and detailed enough instructions for staff to provide personalised care, and relatives provided positive feedback about staff understanding of service users' individual needs. Service users also said that staff understood their communication needs. Staff support service users to ensure they are not socially isolated. The system for managing complaints and discussing them at team meetings was recognised, as was how end of life wishes are discussed as part of care planning.</p> <p>Some schemes' care plans included the details of people's communication needs, but others had not recorded this information. Therefore further work is required to ensure <i>all</i> care plans record people's communication needs.</p>	<p>Ensuring people's communication needs are recorded in care plans will be addressed during the ongoing quality checks of care plans.</p>
<p>Domain: Well-led Rating: Requires improvement</p>	
<p>The service was found to be no longer in breach of regulation 17 (1)(2) (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p> <p>Staff were involved and committed to improving the quality of care and embedding good practice in their work, and were being supported by managers to do so. Service users and relatives said the service was well managed, and said they would recommend Housing with Care.</p>	<p>In addition to the ongoing quality checks of care plans and improving the recruitment processes and policies, the service will explore digital options related to management of service user and staff records, following the recommendation made by the CQC.</p>

<p>Staff work in partnership with others to make improvements to the service.</p> <p>Gaps in records related to staff recruitment and care records related to people who used the service were identified (also mentioned under 'safe' and 'effective').</p>	
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5.9. Overall, the report provided a lot of positive feedback. It is an encouraging outcome showing that the CQC observed that the improvements underway are progressing well and on the right track. Continuation of these improvements, as well as ensuring all areas of improvement identified in this inspection report, and by Healthwatch Hackney remain a priority for the service.

5.10. The full report can be found: www.cqc.org.uk/directory/1-136277108

6. **Communications**

6.1. A communications plan was prepared in advance, and implemented immediately following the publication of the inspection report. Service users, family, staff and stakeholders will be informed of the outcome, what is happening in response, and what it means for them, in a timely way.

6.2. The latest Housing with Care forum was in October 2019, where all service users and relatives were invited to hear more detail about the inspection outcome and speak to Healthwatch Hackney, following the letters sent immediately after the publication.

7. **Next steps and conclusion**

7.1. The improvement plan is being reviewed and updated to incorporate the areas of improvement identified in the latest inspection report, whilst continuing to embed the changes already underway. Progress will continue to be monitored by a core group, who will now meet monthly.

7.2. The recruitment of a new Quality Assurance Manager will support the work to continue improving and embedding the new quality assurance processes, and making sure the service is responsive to the latest regulations and best practice on an ongoing and sustainable basis.

7.3. A second recruitment campaign started in October 2019, aiming to further reduce the use of agency staff within HwC.

- 7.4. Greater engagement with service users and relatives to make improvements to the service is a key priority moving forward. Quarterly Housing with Care forums will continue, and a co-production group is being established.
- 7.5. Whilst this outcome demonstrates that the significant work to improve the service is progressing in the right direction, the service remains committed to continuing to embed the improvements already underway and to make the further improvements identified by the CQC.
- 7.6. Progress will continue to be monitored closely to ensure all changes made are done so in a sustainable way, and that all actions following the latest CQC inspection are delivered.