

REPORT TITLE	<i>Elected Members and the Quality Assurance of Care</i>
REPORT OF	<i>GRAHAM HODKINSON, DIRECTOR OF ADULT SOCIAL SERVICES</i>

REPORT SUMMARY

Report to explore models regarding how elected members can become more fully engaged with promoting the quality of care. Three models are introduced with the intention of stimulating further scrutiny work to define a preferred approach to elected member visits to care homes.

RECOMMENDATION/S

It is recommended that the option identified in 3.3 **Member as a lay assessor** would best suit the development of this work. Committee is however invited to consider all three models or any hybrid of the three models to support the development of Elected Members in Promoting the Quality of Care in Wirral's care homes.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

It is felt that the **Member as a key assessor** would build upon the role of Healthwatch and the Council's Quality Assurance resources to significantly improve capacity for quality monitoring and feedback and to support elected members to be properly engaged, supported and trained to take part in the assessment of care quality.

OTHER OPTIONS CONSIDERED

Three potential options considered are detailed in the body of this report.

2.0 BACKGROUND INFORMATION

The quality of care delivered to people in Wirral is essential to their wellbeing. Elected Members, Commissioners, Council Officers and the wider public all have an interest in ensuring that people receive the best services that meet their needs, are safe and promote wellbeing.

In the past, Wirral ran its own care homes, and as such regular member visits were required to ensure the Councillors had a role in improving the quality of care, at the time the role was not extended to independent care homes. With the exception of a respite centre, Wirral now commissions all of its care from independent sector care homes. Councillors have been concerned about the quality of care and Council has asked for member visits to be re-instated. The challenge therefore is to find a system that will offer the appropriate tools and frameworks to enable elected members to add value to the quality assurance of care. There is no standard approach taken nationally, however three models have been explored that are in place elsewhere.

We have 100 care homes which is a significant number for Wirral's population. The size and relative quality of the establishments does vary. Some wards have 10 care homes whereas others have none. In addition, the size of the care home may need to be considered as some Wards have several homes with under 100 beds, whereas others have fewer care homes but they contain over 200 beds.

Families and Wellbeing scrutiny committee are invited to comment upon 3 models proposed for Elected Member involvement in promoting quality in the commissioned care provision in Wirral.

2.1 Adopt a Care Home

This is a model that allows a great deal of freedom to customise the role according to elected member choice and preferences. It avoids the one size fits all approach as the emphasis is on Elected Members acting in autonomy. In their role as representatives and community leaders the Elected Members can develop relationships in which they can help to champion the needs of older people living in care homes in the area as a whole.

There is a risk of fragmentation and lack of coherence in the model and visits would not form a formal part of our existing contract monitoring arrangements, would not fulfil a legislative requirement and are not compulsory for either the Member or the care home. They could, however create an important, though less formal way for Councillors to build relationships with people living in care homes, their families and with the care home itself. This offers the opportunity to promote good quality care by championing the needs, views and experiences of older people in Wirral.

- Strengths
 - Local to Wards
 - Building on existing relationships
 - Flexible

- Challenges
 - Uniformed
 - Difficult when issues arise/ conflict
 - Open to challenge around favouring of business provision
 - No consistent approach.
 - Possible gaps

2.2 Formal visits with Quality Assurance Team

This Model proposes that Members expressing an interest could be supported to have involvement in the annual audit of process for the care homes across Wirral act on a rota basis rather than allocating via Ward. This annual audit process includes the development of confidential work programme and not only would it allow Elected Members to understand quality monitoring process but enable them to identify and support improvement in the care home.

The areas currently audited within each provision are continually being developed but broadly reviews five outcome areas: -

- People's experience of person centred support
- People's lived experience
- People being protected from harm
- People who use services are supported by competent staff
- Services are managed effectively

The role of the Elected Member would be to support QA officers in visits to ensure that the people who use services are at the heart of the audit. Their views, opinions, wishes, lived experiences and involvement in running the services provide key evidence about the quality of the care support. The methodology would be for Elected Members to have a role in the planned scheduled annual audit, to collect the information from the people who use the service and then subsequently, in those services identified as failing, to have continued involvement in developing improvements.

- Strengths
 - Building on Members already interested
 - Less subjective as part of a consistent approach
 - Adds support to existing RAG rating systems
 - Transparency across Ward
 - Shares workload across all wards.

- Supports Local Authority in public arena when dealing with failing providers
- Challenges
 - Dairy commitments
 - Not as flexible for members.
 - Does not necessarily add value as this element of the audit is covered by Healthwatch?

2.3 Member as a lay assessor

Increasing number of authorities has successfully introduced a programme where Elected Members have undertaken training to becoming lay assessors who carry out visits to care homes. The main role of the assessor is to communicate with residents and understand their personal view of what it is like to live at the home.

This model proposes that the work of the Elected Member as a lay assessor supports the work of existing Local Authority and NHS monitoring and the work of Healthwatch as the champion of people that need care. By the very nature of quality improvement work, the need for QA officers to respond to safeguarding's and those care homes that are failing and require support to improve, means there is a risk those care homes that are currently seen a good/ excellent service not having their annual visit prioritised. This model would ensure that those services that Quality Assurance staff are not able to prioritise due to competing priorities, do not go without an audit for protracted periods of time. This would enable Elected Members to work closely with Healthwatch and to work alongside them in relation to arranging visits to care homes building on the Healthwatch statutory role. In addition, this could increase capacity to visit those homes that do not require intensive monitoring due to having a status of good or excellent.

A template for collection of views and detailed comments would be used and fed into the formal monitoring systems.

- Strengths
 - Formal timetable for allocation of visits
 - Flexible on dates for visits
 - Training for Elected Members
 - Regular reviews
 - Complimentary to QA process
 - Links closely to the role of Health-watch and adds capacity and value
- Challenges
 - Relative formality of role requires increased commitment.
 - Need to ensure strong linkages to formal QA system

3.0 FINANCIAL IMPLICATIONS

N/A

4.0 LEGAL IMPLICATIONS

N/A

5.0 RESOURCE IMPLICATIONS: ICT, STAFFING AND ASSETS

N/A

6.0 RELEVANT RISKS

No risks have been identified as those issues identified as a challenge would need to be managed and as such mitigate risk.

7.0 ENGAGEMENT/CONSULTATION

This report was requested by the Policy and Performance Committee following discussion between members at an earlier meeting.

8.0 EQUALITY IMPLICATIONS

N/A - no relevance to equality.

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APPENDICES

N/A

REFERENCE MATERIAL

N/A

SUBJECT HISTORY (last 3 years)

Council Meeting	Date