

# **Time to Care: A future vision of care in Southwark**

## **A report from the Healthy Communities Scrutiny Committee**

### **Overview**

The Healthy Communities Scrutiny Sub-Committee took an undertaking to look at the provision of care in Southwark. This issue was escalated as a result of announcements locally about care home provision in Southwark, and in the wider context of national debate about care homes.

This report provides an overview of the work carried out by the Committee and recommendations to the way in which we approach care in Southwark.

The Committee would like to thank all of those who submitted written evidence and presented oral evidence to the Committee as part of this inquiry.

This report has focused on care homes, home care, care in the community and the Ethical Care Charter. We have made a number of recommendations which look to ensure that we can continue to provide high levels of care to our residents, as well as supporting their families.

Our recommendations are as follows:

1. We recommend that HC One and the Council update the Committee on the re-homing of the residents of Camberwell Green Care Home, especially in relation to the re-homing to Tower Bridge and share with the committee any subsequent CQC inspection outcomes
2. The Committee believes that there needs to be a clear component of any future contract with the Council which clearly sets out training and development plans for staff. The focus on e-learning should be reduced, and there should be clear KPIs for organisations to achieve to ensure staff are supported.
3. The Committee recommends that the Council makes serious consideration of establishing our own Council-owned Care Homes. We believe that with the resource that the Council is currently having to put into our care homes, and the broader crisis in care homes and concerns over the viability of providers in the long-term, that having Council-owned services would allow the Council to retain control and implement a service in such a way as to provide excellence of care for our residents.
4. We would like to see more rigorous monitoring of the situation related to non-payment of London Living Wage for Home Care workers and a commitment to paying the London Living Wage within the new home care contracts when they are retendered in 2016.
5. The Committee recommends that the provision of zero-hour contracts, and bulk hour contracts should be carefully evaluated as part of the re-tendering process for home care in Southwark.
6. We would recommend that home care provider staff are provided with information about Southwark in regards to road maps, busy areas within the Borough, and approximate journey times to better help plan where workers should be sent for jobs.
7. The Committee recommends that as part of the re-tendering process, there should be stipulation that allows for trade union representatives to meet with staff and for them to be recognised within any contracted services.

8. The Committee believes that there are further areas for improvement and recommends that the Council look to develop an Ethical Care Charter II.
9. The Committee further recommends that issues around TU rights, joined-up services and training & development form a key part of the re-tendering process for the procurement of home care services in Southwark.
10. We would recommend that when a complaint is made in home care services, that the complainant is given a named Council officer, where possible, to lead the handling of the complaint, to help ensure continuity throughout the process.
11. The Committee would like to congratulate the team at Age UK for their lay inspection of home care services in Southwark and would recommend that funding is continued for this programme in financial year 2016/17.
12. We understand that recruitment of new volunteers for the Lay Inspectors Scheme is in decline, and would recommend that the Council assist with the promotion of the Scheme.
13. The Committee recommends that the care homes should create a partnership with Southwark Carers to ensure that they receive all necessary support and their services are flagged appropriately to family members.
14. We recommend that care homes provide comprehensive information to residents and their families about the community services that are available to local residents. This may involve care homes working more closely with community organisations to understand what services are on offer, and identifying opportunities for them to showcase their services to care home residents.
15. We recommend that any individual or organisation who raises a safeguarding alert with the Council should receive a case number so they can follow up if they do not feel the issue has been addressed, and should receive a full response about any action taken, taking into account data protection issues.
16. We further recommend that care homes clearly display information about the Safeguarding Board and highlight this information to families and carers for those in their care homes, as an independent avenue for raising issues and concerns.

<b>Committee and witnesses</b>
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The Committee would like to thank all of those who made this report possible.

**Councillor Rebecca Lury**, Chair, Healthy Communities Committee

**Councillor David Noakes**, Vice-Chair, Health Communities Committee

**Councillor Jasmine Ali**, Member of the Healthy Communities Committee

**Councillor Paul Fleming**, Member of the Healthy Communities Committee

**Councillor Lucas Green**, Member of the Healthy Communities Committee

**Councillor Maria Linforth-Hall**, Member of the Healthy Communities Committee

**Councillor Bill Williams**, Member of the Healthy Communities Committee

**Witnesses:**

**Councillor Stephanie Cryan**, Cabinet Member for Adult Care and Financial Inclusion

**Andrew Loxton**, Commissioning Manager

**Rochelle Jamieson**, Quality and Performance Manager

**Gwen Kennedy**, Director of Quality and Safety, Southwark NHS Clinical Commissioning Group

**Kate Moriarty-Baker**, Head of Continuing Care and Safeguarding, Southwark Clinical Commissioning group

**Jacky Bourke-White**, Chief Officer, **Joan Thomas**, lead Home Care Lay Inspection project, **Miranda Okon** care worker representative, all of Age UK Lewisham & Southwark

**Tom White**, Volunteer Lay Inspector

**Helen Wells**, Inspection Manager for Southwark, Care Quality Commission (CQC),

**Liz Whyte**, Managing Director, **Mr John Ransford**, non-executive Director, both of HC-One

**Mike O'Reilly**, Risk Management Director, Four Seasons

**Alex Evans**, Director & **Cindy Glover**, facilitator for older people's groups, both of Time & Talents

**David Stock**, Chief Executive, Southwark Disablement Association

**Clive Smith**, Area Representative, GMB.

**Verinder Mander**, Chief Executive, Southwark Carers

**Sue Plain**, UNISON, with three care workers

**Catherine Negus**, Healthwatch

**Peter Doye**

## Providing care homes for the future

To help our understanding of the situation in Southwark, the CQC presented to the Committee an overview of the four care homes in Southwark, two were rated as Inadequate, one as Requiring Improvement and contrasted this with an example of an Outstanding care home in Southwark. The Lay Inspectors also commented on the care homes We thought this would be useful to summarise below as it clearly demonstrates the problem that is being faced in some of Southwark's care homes

<b>Southwark Care Homes rated as Inadequate or Requiring Improvement (provided by HC One &amp; Four Seasons)</b>	<b>Southwark Care Home rated as Outstanding (provided by Anchor)</b>
<ul style="list-style-type: none"> <li>• People did not receive medicines safely</li> <li>• Standards of cleanliness were not maintained</li> <li>• People were at risk of infection</li> <li>• Staff were not always supported effectively</li> <li>• People who lacked capacity were not supported to have their needs and choices met</li> <li>• People were not supported to have food and drink in a timely manner</li> <li>• The management team needed strengthening and there was a high turnover</li> <li>• Systems to monitor quality were in place, but not used effectively</li> </ul>	<ul style="list-style-type: none"> <li>• People were treated with kindness, respect and compassion</li> <li>• Staff knew people well</li> <li>• People were involved in discussions about their care, including end of life care</li> <li>• Staff were motivated and supported</li> <li>• Open culture – people and staff could raise concerns</li> <li>• Sustained good leadership by the care home manager</li> <li>• Staff retention</li> </ul>

This all falls against a backdrop of the ongoing 'care homes crisis' in the United Kingdom more broadly and stories continue to abound in the media about abuses in the system. As Paul Burstow says in his foreword to the Demos Commission on Residential Care, *'the brand of residential care is fatally damaged...linked in the public mind to a loss of independence, residential care is seen as a place of last resort.'*

In October 2015 it was announced that Camberwell Green Care Home, currently operated by HC One would be closing. At the time of the announcement of closure, there were 35 residents within the home (Camberwell Green had 3 residents with a NHS fully-funded place and 32 receiving NHS Funded Nursing Care (FNC), which is a NHS-funded nursing care contribution of £112 per week paid to residents in nursing beds The care home has committed to staying open until all the current residents have been re-located.

This announcement came at a time when Southwark's Care Homes are already under a great deal of pressure. Both Tower Bridge Road and Burgess Park are in special measures as they have been rated as Inadequate and Southwark Council has an embargo on both homes.

Both Burgess Park and Tower Bridge Care Homes are not at capacity, but whilst both continue to have significant challenges, from our evidence session, the Committee understood that they were not in a position to provide the extra support to re-home Camberwell Green residents.

Camberwell Green had its own issues, with a building that is not fit-for-purpose, and significant challenges with staff retention. Whilst a new manager and support staff were recruited, the home did not see the improvements needed, and this has resulted in its closure.

The Committee is concerned by the closure of Camberwell Green Care Home and is particularly concerned that residents were re-homed to Tower Bridge despite its Inadequate rating.

**We recommend that HC One and the Council update the Committee on the re-homing of the residents of Camberwell Green Care Home, especially in relation to the re-homing to Tower Bridge and share with the committee any subsequent CQC inspection outcomes**

At present, there are a large number of external organisations and services who are having to support the work of our care homes. This includes the CCG, Council and CQC. Between them, they are providing nursing and GP services in our care homes, as well as supporting staff training programmes, as well as supporting the placement of new residential managers. There is also the crucial role played by the lay inspectors, who are currently funded by Southwark Council. The Committee is very supportive of the role that they play in providing an independent scrutiny on our care homes, and would hope that the Council continue to fund the programme going forward.

The Committee however is concerned about this extra resource that is having to be put into our care homes to try and support private companies who are being paid to provide the care homes service in Southwark.

At the same time, we are concerned that these care homes keep coming up time and time again, and it appears that there is a more institutional problem with the service. Staff turnover remains high and the Council is having to support the introduction of new Managers to the homes.

The Committee is not convinced by the idea that Southwark's Care Homes are just an anomaly, and that for reasons that cannot be explained, the majority of homes that are in special measures are concentrated in Southwark.

We understand that staff all have their own training plans, which are reviewed on a regular basis. Training appears to be largely provided through e-learning and some observational studies. We understand that the work is highly skilled and high pressured, and this means that there is a large turnover in the sector. This has been helped by the introduction of the Ethical Care Charter which has guaranteed working conditions and wages for Care Workers, but more needs to be done.

**The Committee believes that there needs to be a clear component of any future contract with the Council which clearly sets out training and development plans for staff. The focus on e-learning should be reduced, and there should be clear KPIs for organisations to achieve to ensure staff are supported.**

We understand that the Council is in the process of developing a 10-year strategy for our care homes which will be published in Spring 2016. The Committee welcomes this focus on a long-term strategy for the provision of care in the Borough. We hope that this report goes some way to helping frame some of the challenges that local people and organisations are seeing in the care sector.

Currently the council has a long term block contract with Anchor Care homes, who provide residential care only for older people, whereas residents requiring both nursing and residential care are usually using the services of providers HC One and Four Seasons , and here care is paid for via spot purchasing. Residents requiring nursing care are the most vulnerable, with often multiple needs such as dementia & diabetes. We remain extremely concerned by the current provision for Southwark residents receiving nursing care as a component of residential care, and the lack of a guarantee from both HC One and Four Seasons that they will be able to keep open the remaining Care Homes in Southwark. This presents a significant risk to residents, who may ultimately end up having to go out of

the borough, and this in turn will lead to additional pressure on families who have to travel further distances to visit relatives.

The extra support being given to care homes in Southwark is welcome, but we are again concerned about the huge number of external resource that is having to be brought in to support services which continue to remain inadequate.

The Committee believes that there may need to be a much more radical reassessment of the way in which Care Home services are provided in Southwark. We believe that there is merit in assessing whether the Council should be looking to provide its own buildings and Care Home service which is then privately contracted out. This has worked well with the Anchor Homes in Southwark which provide retirement living assisted and independent living opportunities

**The Committee recommends that the Council makes serious consideration of establishing our own Council-owned Care Homes. We believe that with the resource that the Council is currently having to put into our care homes, and the broader crisis in care homes and concerns over the viability of providers in the long-term, that having Council-owned services would allow the Council to retain control and implement a service in such a way as to provide excellence of care for our residents.**

## **Giving our care workers the time to care**

The current home care service is due to be retendered at the end of 2015, and the Council hopes to have the tendering process up and running by July 2016.

It has come to the attention of the Committee that whilst the Council pays its home care providers enough within contracts to pay staff the London Living Wage, the London Living Wage is not always paid to individual staff. Unison brought to our attention a number of individuals who saw a delay in payments of the London Living Wage and that this has not been backdated to the last financial year. We are particularly concerned by this assertion and understand that the Council is currently looking into this in more detail.

**We would like to see more rigorous monitoring of the situation related to non-payment of London Living Wage for Home Care workers and a commitment to paying the London Living Wage within the new home care contracts when they are retendered in 2016.**

The Committee is further concerned by issues raised around contractual working hours. Both Unison and GMB raised with the Committee that staff had to sign up to batches of contractual hours, where they were required on occasions to be available for double the amount of hours they were actually paid for. In one example a staff member had to be able to work 40 hours, and arrange associated child care, but was only called in to work 20 hours. There was limited flexibility in when these hours could be worked. We are also concerned about the assertion that staff are being asked to work multiple consecutive weekends, or up to 14 days without a day off, and that cultural and religious needs were not sufficiently taken into account – for example the importance of Sunday church

Our home care workers are doing a fantastic job, and the Committee would like to wholeheartedly thank them for all of the work that they do in the Borough. We want to ensure that they are receiving fair pay, and fair working conditions for the services that they provide.

**The Committee recommends that the provision of zero-hour contracts, and bulk hour contracts should be carefully evaluated as part of the re-tendering process for home care in Southwark.**

The Committee also heard from Unison about the distribution of jobs that were allocated to staff. We understand that in some cases, staff are being asked to travel up to an hour between jobs. We believe that with a better understanding of the geography of the Borough that office staff may be better able to allocate jobs.

**We would recommend that home care provider staff are provided with information about Southwark in regards to road maps, busy areas within the Borough, and approximate journey times to better help plan where workers should be sent for jobs.**

We are further concerned about the availability of trade union representation within home care providers. Both Unison and GMB raised with the Committee that they had difficulty in accessing staff, in some cases, with unions being de-recognised. Added to this, we understand that staff are not always paid for staff meetings, so there is little opportunity for them to come together to discuss any issues that they might have.

With the continued cuts to local government, and the government's plans to introduce the National Living Wage, there will be a dichotomy between the local authority being able to find the money to be able to pay providers enough money for this to be passed onto staff. We therefore believe there is a

critical role for Trade Unions, to ensure that the rights of the workers are protected in these difficult times.

**The Committee recommends that as part of the re-tendering process, there should be stipulation that allows for trade union representatives to meet with staff and for them to be recognised within any contracted services.**



## Progress of the Ethical Care Charter

Southwark Council was one of the first Councils (along with Islington) to sign up the Ethical Care Charter in December 2013.

The Committee wants to commend the Council on progress to date in adopting the Ethical Care Charter. We welcome the progress made to ensure that this is adhered to in our contracts with care homes providers, but would like to see that the Ethical Care Charter is appropriately followed in the home care sector.

The Committee welcomes the successful implementation of the Ethical Care Charter in the Care Home sector. We believe that enough time has now passed for us to be reviewing what has been achieved so far, and the areas where there needs to be further work. **The Committee believes that there are further areas for improvement and recommends that the Council look to develop an Ethical Care Charter II.**

The Committee therefore recommends that the following areas might form the main tenets of a new Ethical Care Charter.

1. **Trade Union rights:** The Council should ensure that contractors place the 'voice of the staff' at the centre of their ways of working, ensuring that there is Trade Union recognition and involvement with each organisation.
2. **Joined-up services:** KPIs should be introduced to contracts such that they encourage a joined-up approach to project delivery. We would like to see all relevant services providers brought together in discussions about service user care needs. This should include the CCG, local authority and social workers.
3. **Training and development:** KPIs should be introduced in contacts to ensure the delivery of quality training for staff involved in the delivery of care services.

**The Committee further recommends that issues around TU rights, joined-up services and training & development form a key part of the re-tendering process for the procurement of home care services in Southwark.**

## Ensuring support for home care

Southwark Council currently commissions 520,000 hours of home care every year through contracts with MiHomeCare and London Care. They support 1250 users, with a further 420 users supporting through personal budgets, and 50 using them as spot providers.

Age UK currently runs a 2 day a week programme of lay inspection of Southwark's home care services. This service is currently funded by Southwark Council and the current contract is due to expire in April 2016.

The programme mirrors the lay inspection programme in Southwark Care Homes and uses the same criteria as the CQC uses to assess care homes.

The CQC approach has been one of phone calls and questionnaires without any face-to-face contact, and we believe that this sets the Age UK programme apart. During its work so far, the programme is identifying the issues and trends in the home care sector. The five key findings so far as:

- The need for regular carers and adequate handovers when carers do change to ensure continuity
- The welcome empathy that home care workers have for those that they are caring for, and the huge respect that they receive from those they are caring for
- The need for a bespoke service, focused around the individual
- The importance of social interaction, to make the person receiving care feel like a member of society
- A need for sensitivity around the cultural needs of the individual being cared for. This covers all ethnic groups.

The lay inspection programme provides a vital opportunity for service users, their families and home care workers to raise any concerns that they might have.

The lay inspection team have found that they regularly receive feedback, but that when they pass on complaints to the Council that these issues often take a long time to get fixed. The process itself is seen as very slow, although this is not necessarily due to any one specific part of the complaints process. One of the specific criticisms of the Council's complaints process is the constant changing of staff who deal with a specific complaint. This often leads to information having to be repeated on numerous occasions, and can lead to confusion.

**We would recommend that when a complaint is made in home care services, that the complainant is given a named Council officer, where possible, to lead the handling of the complaint, to help ensure continuity throughout the process.**

**The Committee would like to congratulate the team at Age UK for their lay inspection of home care services in Southwark and would recommend that funding is continued for this programme in financial year 2016/17.**

**We understand that recruitment of new volunteers for the Lay Inspectors Scheme is in decline, and would recommend that the Council assist with the promotion of the Scheme.**

The Committee commends the work of the large number of unpaid carers in Southwark, who dedicate large amounts of their time to caring for relatives. In most cases, external services are also commissioned for individuals by their families, who provide more structured care and support services.

We believe that the voices of the family however should not be forgotten and organisations such as Southwark Carers and Carers UK provide a vital service in ensuring family members are not forgotten.

However, we are concerned that support services for carers may be lacking in regards to end of life care. In many situations, the referral of the carer for support happens too late in the process, when large and often life-changing decisions have already been made.

**The Committee recommends that the care homes should create a partnership with Southwark Carers to ensure that they receive all necessary support and their services are flagged appropriately to family members.**

## Supporting care in our community

The Council believes that residential care is not the only solution to providing services to residents who need extra support.

We believe that community links are incredibly important and can help people to live longer, and more fulfilling lives. As we heard through our discussions at the Committee, there are countless examples of individuals going into care homes, where their care quickly deteriorates. In many cases, those individuals had been part of community activities before entering the home and this link to the community was not maintained once they entered the home.

The Committee places a huge amount of importance on the role that voluntary organisations can play in supporting people to feel part of their community. We believe that this lack of continuity of maintaining community links has a detrimental effect on residents who have entered care homes, and there needs to be more done to ensure that they can access these services.

**We recommend that care homes provide comprehensive information to residents and their families about the community services that are available to local residents. This may involve care homes working more closely with community organisations to understand what services are on offer, and identifying opportunities for them to showcase their services to care home residents.**

We also recognise the importance role that voluntary and external organisations play in identifying issues and raising concerns that they may have about the care of individuals. We heard from participants at our roundtable, that when the voluntary sector raises issues to social workers and/or the Council, there is often no feedback as to any action that has been taken as a result.

**We recommend that any individual or organisation who raises a safeguarding alert with the Council should receive a case number so they can follow up if they do not feel the issue has been addressed, and should receive a full response about any action taken, taking into account data protection issues.**

**We further recommend that care homes clearly display information about the Safeguarding Board and highlight this information to families and carers for those in their care homes, as an independent avenue for raising issues and concerns.**