

Item No. 20.	Classification: Open	Date: 19 January 2021	Meeting Name: Cabinet
Report title:		Response to Care Home Quality Assurance Recommendations	
Ward(s) or groups affected:		All wards	
Cabinet Member:		Councillor Helen Dennis, Social Support and Homelessness	

FOREWORD - COUNCILLOR HELEN DENNIS, CABINET MEMBER FOR SOCIAL SUPPORT AND HOMELESSNESS

The COVID-19 pandemic has shone a spotlight on the quality of residential care like never before, and has highlighted systemic issues which have required attention for some time: the chronic under-funding of public social care, the need for greater investment in the workforce, and the need to better listen and respond to the experiences of residents, their families and carers. In Southwark, we have known for some time that these issues will not be resolved in the market-place alone and building on the ethical care charter, our commitments to build new nursing homes, and to bring forward a residential care charter, underline our vision for care which is driven by public service and compassion and which rejects a race to the bottom in terms and conditions for staff.

As a commissioner of services, it is vital that we use all of the tools at our disposal, to settle for nothing less than excellence for our residents, and in that vein, I want to warmly welcome this report from the Health & Social Care Scrutiny Commission and its 13 recommendations. In particular, the introduction of an Annual Care Home Report will be a valuable way to gather all relevant information together in one place, and the Care Well strand of Partnership Southwark, which has mobilised so effectively during this year, will also be well placed to support service improvement across the sector.

We are now living through a further period of national lockdown, with the newly identified COVID variant resulting in a staggeringly high infection rate, with significant pressures on NHS services. The risks to care homes, their residents and staff, have not diminished but we are thankfully in a positive place now in relation to infection control measures, the provision and use of PPE, safe discharge from hospitals, and the regular testing of care home residents, staff and now visitors. And with the approval of the Oxford/AstraZeneca vaccine, roll-out to care home residents is also now underway in Southwark, including in settings for those with learning disabilities and mental health needs.

2020 has been heart-breaking in many ways, but we have all been shocked by the devastating impact of COVID in our care homes, especially those providing care for vulnerable older people, and moved by stories of loved ones unable to see one another, to hold hands or to share a hug. There is still a lot of uncertainty about the coming months but I want to thank all of those involved in the provision of residential care across our borough in these immensely challenging times. The Council will remain focused on improving support for all of our care home residents, both now and once this crisis is finally over.

RECOMMENDATIONS

1. That cabinet notes the responses to the recommendations set out by the Health and Social Care Scrutiny Commission in their report on Care Home Quality Assurance.

BACKGROUND INFORMATION

2. The Health and Social Care Scrutiny Commission undertook a review of 'the quality of care of Southwark providers and out of borough placements used by Southwark adults, to ensure people in both local and out of borough placements are safe, well and in suitable accommodation. The review has a particular focus on examining the assurance and inspection processes in place, to see if they are performing well.' A link to the report is provided in the list of background documents.

KEY ISSUES FOR CONSIDERATION

Background

3. This response has been prepared with partners from Partnership Southwark. Partnership Southwark includes Southwark Council, Southwark borough – South East London CCG, and a range of local health and care providers and Community Southwark.
4. Partnership Southwark drafted a recovery plan, endorsed by the Health and Wellbeing Board, which recognises that the care home sector was, and continues to be, significantly impacted by COVID-19 due to the early and rapid spread of the virus amongst high risk and vulnerable residents and a fragile sector – both of which have put pressure on a dedicated workforce.
5. As part of the recovery plan, Partnership Southwark established four cells, one of which is focused on care homes and other care settings and is referred to in the recovery plan as Care Well.
6. To respond to this challenge Southwark's health, care and wider council services worked together in a whole system approach through the emergency period of the pandemic.

7. The Health and Social Care Scrutiny Commission have made 13 recommendations relating to care homes supporting Older People in Southwark. Some of these recommendations are around:
 - a. building on existing practice
 - b. bringing information and systems across multiple organisations into one place
 - c. harnessing our joint learning across these organisations to
 - i. improve what is currently business-as-usual
 - ii. respond promptly and appropriately in the event of localised outbreaks of Covid-19 or in response to a national lockdown if that were to happen
 - d. assurance that our nursing and residential care homes are able to provide not only good safe care to our most vulnerable residents but in a place that is their home.

8. The 13 recommendations within the Care Home Quality Assurance Report have been grouped into five themes:

Theme 1 - Quality Assurance via complaints, quality alerts and safeguarding and the development of a Cabinet Care Home Annual Report

Theme 2 - Relationships and Befriending

Theme 3 - Residential Care Charter

Theme 4 - New Nursing Care Provision

Theme 5 - Covid-19 preparation

Theme 1 - Quality Assurance via complaints, quality alerts and safeguarding, and the development of a Cabinet Care Home Annual Report

Recommendation 1

All homes, the Council and CCG ought to have a clear and well publicised Complaints, Quality Alert and Safeguarding processes that detail how to raise concerns with the homes, Council, CCG, CQC, who to go to, and at which point.

This ought to include a mechanism to appeal to the council and NHS CCG if a resident or advocate is unhappy with the outcome of an internal resolution process.

This ought to be managed through the contract monitoring and commissioning process.

Response to recommendation 1:

To demonstrate that Complaints, Quality Alert and Safeguarding processes are well publicised there are some sample links at the end of this report. These cover the web links to the council complaints, CCG, Local Government and Social Care Ombudsman, a sample from one of the local care homes on how to make a complaint and another has their full complaints procedure available.

When visiting the care home, the council monitoring officers are looking for clear signs that the homes are ensuring visitors and residents are aware of the complaints and safeguarding processes that they feel able to raise concerns and know what to do if they need to do so. This involves posters in public areas and information on the notice boards in each individual room or just outside and leaflets at work stations and in communal areas.

Monitoring of complaints, quality alerts and safeguarding already forms part of the contract monitoring processes and is integral to the care homes registration and reviewed by the Care Quality Commissions (CQC) when undertaking an inspection. This includes confirmation of the policy, with escalation routes to the council and onwards to the relevant ombudsman. They actively review and analysis all or a sample of complaints since the last visit.

It should be noted that the contract monitoring arrangements will only apply to the care homes that have residents placed there by Southwark Council therefore there isn't a guarantee that 'all' homes will be monitored by the council but they will be picked up by the CQC as part of their standards for registrations.

Recommendation 2

A record and summary of the number of Complaints and Quality Alerts made to the council, CCG and CQC ought to be provided in an annual report to Cabinet, with benchmarking against comparator boroughs.

Response to recommendation 2:

Complaints and quality alerts will be report to Cabinet as part of the annual report in recommendation 7.

Recommendation 7

An annual Cabinet report on Care Homes would be useful addition. This ought to summarise contract monitoring, CQC, Lay Inspector, Healthwatch, and CCG reports, and include a summary of complaints and Quality Alerts, with benchmarking with comparative Local Authorities.

Response to recommendation 7:

An annual report about care homes can be provided to Cabinet. Officers can certainly address all of the requested areas apart from the benchmarking of complaints and quality alerts.

Benchmarking of complaints and quality alerts relies on other local authorities sharing this information; officers will endeavour to make this benchmarking information available in the first or subsequent reports.

The first annual report will follow the report related to the residential care charter.

Commentary:

9. All care homes are required to publish their complaints/safeguarding process making it accessible to all. The CQC through their inspection regime review policies, procedures and publications within all the care homes they inspect. Evidence of this is also a standard part of the contract monitoring process – alongside analysis of trends, responses and organisational learning.
10. The council and CCG also have published complaints and safeguarding processes including a process for appeal.
11. Quality Alerts are included in complaint/safeguarding processes. The professionals have systems in place to ensure these are identified and investigated.
12. The area for development is an integrated approach to processing and sharing information around complaints. The local government and social care ombudsman acknowledged this as a national priority as shown in the extract from their recent publication '*Effective Complaint Handling for Local Authorities October 2020*'. Under the theme of Adult Social Care Complaints, the Ombudsman made the following statement:

'Working with others...'

Many adult care services will be delivered in partnership with health authorities. It is vital that different organisations work together to deliver seamless services, this includes complaint handling. The complexity in which joint services are often delivered means complaining about these services can be confusing and time consuming. We have set up a joint working team, with the Parliamentary and Health Service Ombudsman, to investigate complaints spanning both sectors'

13. The Care Well cell of Partnership Southwark will consider how complaints related to care home services but not necessarily exclusive to care homes, e.g. ancillary services such as GP services reaching into the care home, and quality alerts from across the system can be shared in the context of continuous improvement for the sector.

Theme 2 - Relationships and Befriending

Recommendation 3

Ensure systems are put in place to ensure that people in care homes (in and out of Southwark) who are unbefriended have support by the Independent Lay Inspector services, or similar.

Response to recommendation 3:

The current arrangement with our Lay Inspector Service is to provide services for our residents in care homes based in Southwark. With the redesign of the service, and the accelerated advance in using digital technology for communication, the opportunity will be taken to look at options for supporting

our residents who require befriending of those living in or out of borough.'

Recommendation 4

Ensure that care homes hold regular meeting for families and carers. This ought to happen at least quarterly, and there ought to be a schedule of attendance by monitoring officers, commensurate with the number of Southwark residents and contract management resources.

Response to recommendation 4:

This currently forms part of contract monitoring of care homes. Monitoring was paused but has resumed during the pandemic.

Recommendation 6

The commission endorse the organisational commitment shown by the council and Age UK Lewisham and Southwark to restart the Lay inspectors programme and establish complimentary and strong working relationships. A summary of the Lay Inspectors work ought to be included in an Annual Report on Care Homes.

Response to recommendation 6:

Age UK have recently appointed a new Lead for the Lay Inspector Service. Their reports and findings will be embedded into any future annual reports on care homes. Lay inspection resumed its service in December 2020 with the remit to establish relationships with residents, families and friends and to reflect on the quality of care they receive and whether or not they have a 'good life' and recognised the care home as their home. The first task that the Lay Inspectors are supporting the council with is the development of the residential care charter.

Commentary:

Residents who do not have family/friends:

14. The experience of moving into a care home for Southwark residents who lived on their own, in isolation without social contact is that they are no longer alone. Adjusting to company takes time and support at this stage from an allocated companion would be useful.
15. Living in a care home means that there is the opportunity to enjoy the company of others, eat meals with other people, receive daily personal care and be involved in different activities that are organised by the home or volunteers.
16. Residents acquire within the home new friends and widen/increase their social network.
17. There is a fine balance between giving both existing, and new, residents space to be alone or time with others. The skill is to know the person, listen to them and encourage social contact where, for the individual, being alone is a negative experience.

18. There is an active negotiation underway with Age UK to redesign the work of the Lay Inspectors and to consider their role around supporting individual residents who do not have family/friends or who have infrequent contact with people outside the home.

Residents with Family and Friends:

19. Contract Monitoring Officers (CMOs), as part of their monitoring visits, collect information and evidence on how the homes support residents to connect with families and friends.
20. For those homes with a significant number of Southwark residents, CMOs attend and observe at least one family meeting a year.
21. The Care Quality Commission also seek evidence through their inspection regime around the relationship with families and friends with the care homes and their access/involvement with the care of their loved ones.
22. Nursing Care Home Procurement engaged over a hundred older people living in Southwark. A combination of existing residents in care homes, families and friends as well as older people who may well be the future residents of these care homes. From these discussions a small group of volunteers formed the Nursing Care Co-Design Group over a two year period both the Age UK Lay Inspectors and Health Watch supported and worked with commissioners to identify and develop these customer 'I Statements' for our care homes.
23. The Customer 'I Statements' within the new contracts is very detailed and extensive they have therefore been grouped into the following headings/themes:
 - a. Dignity and respect
 - b. Person centred care
 - c. Keeping healthy
 - d. Skilled workforce.
24. Through each engagement event and within the discussions with the Nursing Care Co-Design Group what emerged:
 - As the most important priority to all those involved was the quality of the care workforce. One gentleman stated to him the care workers needed to 'like people, like caring and like their job' those are the people that you feel safe with. Another common statement was that they need to see 'you as a person'. When that happens the residents and their families have confidence, trust and know they are in safe hands.
 - Social contact was also important for many reasons including wellbeing. It was reflected in many different ways within these 'I Statements' conversations. The need for assurance that their family can visit at any time that they feel welcome and comfortable in the home and will still be active in supporting them. One gentleman

talked about his friend living in a local care home who despite being in a wheelchair went out to the local shops every day supported by the staff in the home that gave him confidence that when his time came, he could still have a life in the local community.

25. Lay Inspectors are also referenced within the nursing care contracts to ensure that the care homes will enable the Lay Inspectors access and support them in working with residents.
26. Current conversations with Age UK Lay Inspectors is underway. To consider their role in supporting the development of the residential care charter. Identifying how they will establish what residents' views are, represent those views and influence the shape and content of the residential care charter.

Theme 3 - Residential Care Charter

Recommendation 10

Lobby government to bring forward the expected White Paper on social care funding to ensure the service is sufficiently well funded and councils can agree fees with care homes that allows for payment of the London Living Wage, full sick pay and other terms of conditions that reflect the value that we place on this important service.

Response to recommendation 10:

The former Cabinet Member wrote to the Secretary State on this matter and the senior management of Children and Adults continues to work with ADASS (Association for Directors of Adult Social Services) colleagues to lobby government about properly and fairly funding adult social care.

The Cabinet Member for Social Support & Homelessness is committed to continuing this work and has recently signed the Future Social Care Coalition pledge.

Recommendation 8

Complete the Residential Care Charter by September

Recommendation 11

Ensure the Residential Care Charter includes a requirement for sick pay.

Response to recommendations 8 and 11

Subject to the financial modelling and engagement concluding early in the new year, a report should be presented to Cabinet in the Spring of 2021.

The financial modelling includes payment of the London Living Wage remuneration for training, shift handovers and sick pay.

Commentary:

27. The Residential Care Charter is a key council plan commitment and is being developed along similar lines for both Nursing and Residential Care Homes.
28. There are 17 Care Homes for all client groups - younger adults and older people. There are eight homes/four care home organisations who are working with the authority to explore the development of the residential care charter.
29. Due to the pandemic the intended engagement and consultations with care homes, staff, residents and carers planned earlier in the year needed to be paused. However, the programme of work did resume late Autumn with a series of:
 - a. On line surveys asking interested parties to come forward and inform us of their views. Support to do this has been offered and adjustments made to enable a greater take up
 - b. At the time of writing this report with the surveys still open more than 50 care home staff have completed the survey
 - c. A small number of family carers are scheduled to have support via a telephone survey
 - d. A couple of care home staff events have taken place with a schedule involving more staff events and family sessions.
 - e. Lay Inspectors will be looking to support residents' views and where possible to complete a few surveys.
30. The financial analysis and considerations for the residential care charter is being assessed with the same methodology and rigour that was used for the development of Southwark's Ethical Care Charter. There will be financial implications relating to funding for this workforce that comes through the residential care charter that will need to be clearly articulated and presented to Cabinet before Southwark Council and the local Care Home providers are in a position to sign up to this charter.
31. The majority of the care homes when surveyed in May for the IPC funding informed council officers that they pay staff statutory sick pay. However, through the process of reviewing and evidencing employment conditions for the residential care charter this will be reviewed to ensure it does in fact apply to all staff employed within the care home.

Theme 4 - New Nursing Care Provision

Recommendation 9

Expedite the current plans for expansion of provision of Nursing Homes and review future plans to ensure that there will be enough local capacity, particularly for local people with more challenging dementia.

Response to recommendation 9:

Commissioning continues to explore other areas to increase and develop local

nursing care home provision at pace and this is under regular review at the Nursing Care Programme Board chaired by the Director of Commissioning.

Recommendation 5

Commission the Older People's hub to provide information and advice to prospective older people, friends and family on how to choose a care home.

Response to recommendation 5:

The Older People's Hub, now known as the Ageing Well Hub, provides this information and advice in accordance with the Care Act 2014. The advice relates to a range of social care services. This includes sign posting the hubs clients to relevant information on how to find out more about

- the rating and quality of a specific home that they may have an interest in or
- how to look for homes in a certain area guiding them to the Care Quality Commissions website.
- Links to leaflets and factsheets:
 - IG06: Care Homes
 - IL5: Care homes checklist
 - FS29: Finding, choosing and funding a care home
 - <https://www.ageuk.org.uk/services/information-advice/guides-and-factsheets/>

Commentary:

32. The procurement strategy of nursing care home provision was presented to Cabinet in April 2019. There is a current and active set of negotiations underway some aspects of this work will result in two contracts for block provision being in place by January 2021.
33. There are two planning applications relating to new buildings one of which is expected to be ready for occupation by December 2021/January 2022. The other home will take longer to develop.
34. Oversight of the Nursing Care Home procurement is governed by the Nursing Care Programme Board. Progress within this financial year (20/21) will result in the council entering into two contracts, one of which will expand provision in the borough. Across two nursing care homes the block provision will be for 98 rooms by 31 March 2021. The redevelopment of Burgess Park site will see a further increase of at least 34 rooms by 31 March 2022.
35. Commissioning are actively looking at additional options for expansion as well as analysing demand. Demand analysis for dementia currently takes the form of data collection and activity. Regeneration/Property officers have worked closely with Children and Adults to identify land or existing buildings that can be utilised or repurposed for this use.

36. Reviewing demand, capacity and our local provision/market opportunities is an ongoing activity throughout this procurement process.

Theme 5 - Covid-19 preparation

Recommendation 12

Plans must be put place to manage a second wave of COVID 19 and the risk of further fatalities by ensuring adequate PPE, testing, and that care homes are not treated as a step-down facility.

Response to recommendation 12:

The council created a Covid-19 Resilience Team that supports testing for the health, care and education workforce as well as PPE for all care, support and education settings/services.

Partnership Southwark (which includes the council, CCG, GSTT, Kings, SLaM, GP federations and now Community Southwark) has a Recovery Plan that speaks to plans for the second wave pf Covid 19 and winter planning. Care Homes are covered within the plan, under the strand of 'Care Well'. As part of the Care Well section, the plan has identified a number of actions and established support networks for the care home sector in responding to any future national lockdowns, changes within the tier system or individual outbreaks within local communities and/or specific care homes

The council has continued to support care homes in receiving residents as part of safe hospital discharges. Partnership Southwark is working to deliver actions against its recovery plan.

Recommendation 13

Roll out keyworker status to family and friends of older people in care homes, starting with people with dementia and moving to other isolated older people, to allow visitation during the pandemic. Everybody has a human right to family life, which includes regular contact.

Response to recommendation 13:

At the time of drafting this report, the government rolled out lateral flow tests to support family and friends visiting residents inside their care homes. The council provides infection control funding that can support homes to manage family and friends visiting.

Commentary:

37. The proposals and activities here are a combination of local initiatives but within the context of continually evolving and changing guidance from DHSC /NHS(E) and Public Health England. Therefore, any plans or local agreements may be superseded by national policy directives.

Communication and advisory

38. There were daily (now weekly) touch-points for professionals and check-ins via the commissioning teams, as well as newsletters and provider forum meetings.
39. The multi-disciplinary provider forum continues to meet fortnightly. This provides care home managers with an opportunity to talk collectively and to receive news on current initiatives within a local context.
40. All of these will continue as they have proven to be an effective network of communication channels. Providers can, and have, contacted relevant professionals when they needed to across the system and services are actively contacting them.

PPE

41. The council acquired PPE for care providers with a single point of access for providing this equipment. A national portal is in place for free 'top-up' PPE and care homes have reported using it. Some Southwark care homes have acquired sufficient PPE to take them through the winter and all have established stable supplies of PPE. Local systems between the council/CCG are in place as a backup and mutual aid systems established.

Infection control

42. The CCG offered Infection Prevention Control (IPC) training to care home staff. Refresher and ongoing training have recently been offered to the care homes. Work is also underway in establishing an 'Infection Control Link Group'. Each care home has been asked to identify and put forward a representative to share good practice, identifying emerging problems and offer bespoke training to tackle these.
43. An integrated approach to supporting older people's homes was put in place through joint working between primary care, GSTT and the care homes Intervention Team. Initiatives include:
 - a. Setting up a WhatsApp group, enabling professionals to talk to each other and providing direct contact with the care homes enabling quick response/actions to take place. This has remained in place and continues to support prompt discussions and support.
 - b. Taking swabs of both residents and care home staff, with the support of Kings College Hospital laboratory. Since then the national programme for frequent testing has been established in all the older people care homes after some initial problems the regime is now working. However, it does stretch resources when a positive result comes through and the whole home needs to be 'retested'.
 - c. Public Health has a local backup system in place if the national system falters. Local care homes are aware of the testing process

- and have a number of routes to raise concerns locally in the event of a crisis or simply seek support to navigate the system.
- d. Work is underway to develop and/or implement some national health tools designed to support the care homes to record health checks/observations to enable them to identify early signs of deterioration. Two nursing care homes are piloting this new approach.
 - e. Flu is an annual campaign but this year the focus is on encouragement across the health and care system to get the staff based in the Care Homes vaccinated. The campaign needs to be focused on keeping the care home workforce healthy this winter.
 - f. The GP support to the older people care homes comes from Quay Health Solutions. They have been encouraging care homes to consider the use of Pulse Oximeter and have a supply available to provide to the care homes once they are in a position to use this. This is supported by government guidance that all homes are expected to have at least one Pulse Oximeter.

Safe discharge from hospital to care homes

- 44. The recommendation also refers to the care homes not being treated as a step-down facility.
- 45. At the outset of the pandemic most of Southwark's older people care homes took new residents from hospital not knowing if the persons did or didn't have Covid-19 in line with many other care homes across the country.
- 46. All of the care homes for all client groups in Southwark are clear that they will not take an existing resident or a new resident from hospital without them being tested first and receiving the results. They all understand the need for a period of isolation. All of the older people care homes have at some point this year received new/returning residents and have experience of isolation, retesting and managing staff and residents tested positive. They do however understand their capabilities and will/have declined an admission into the home if they feel unable to safely meet a person's needs.
- 47. At the time of drafting this report, government had provided the CCG with funding for 'designated settings'. These are step-down facilities that take in people who are ready for discharge from hospital to a care home and are Covid-19 positive. These facilities need to be nominated by the council and inspected by CQC to be recognised as a 'designated setting'. The council has not nominated a care home for this purpose and is working with health colleagues to monitor the need for such a setting, which with effective flows of discharging people from hospital should lead to a small number of people who otherwise would have moved into these settings staying in hospital for a few days longer where there are health professionals with the appropriate PPE and expertise to manage C19 positive patients.

Family and Friends recognised as key workers

48. This has been a complex area for Care Homes who have been guided by multiple changes in Government guidance.
49. All of the Care Homes have now (December 2020) received guidance, training and Lateral Flow Tests (LFT) to assist them in facilitating safe visiting arrangements within the home from visitors. Essentially all visitors will undertake a LFT which provides a result within half an hour if the visitor:
 - Has a positive test they will not be able to visit their relative at this time. The home then needs to undertake a second (PCR) test that the home will post for urgent analysis and the visitor advised to go home and isolate.
 - If negative, then the visit can proceed. If the person being visited is unable to go to the visiting area/pod. The Care Homes have been provided with additional PPE for visitors who will be guided on how to use this 'safely'.
50. At each stage of the Covid-19 journey from the first national lockdown, easing measures during the summer, to the tiered system and the second lockdown have all triggered different instructions to the care homes. This has ranged from only end of life visits applying infection control measures to supervised outdoors visits.
51. Care Homes have faced the difficult role of protecting their residents and their workforce whilst wanting but not able to support access for families and friends. Where it has been known that a resident is nearing the end of their life compassionate visits had been enabled. It is rare and exceptional but at least one visit was facilitated for a resident with dementia with the family member being required to wear appropriate PPE.
52. Through the regular weekly/two weekly calls with the care home managers the council has supported them in planning and preparing different approaches to enable visits, the Care Homes have been innovative in using technology. At least one care home has had families donating iPads to help with this. Alongside the offer of new iPads to homes from the Health Innovations Network.
53. The guidance released during the second lockdown (5th November 2020) has essentially moved to a position of broadly acknowledging that there is a need for family members to be allowed to visit their loved ones. It states: Care Home Visiting Guidance 5 November 2020: Providers should work collaboratively with residents, families and local social care and health professionals to strike a good balance between the benefits of visiting for residents' health and wellbeing and quality of life; and the infection risks that arise from increased interactions of visitors, residents and staff in the facilitation of visiting.

54. Aspects of the national guidance at the time of drafting this report, that is relevant to this recommendation and need to be noted are:
 - a. The role of Public Health has the power to tell a home to close to visitors or set conditions around ‘visiting’ that the care home must implement.
 - b. Care Homes must take into account the significant vulnerability of their residents when making decisions around allowing visitors into the home.
 - c. Care Homes should make their visiting policy available outlining any specific conditions that will apply to the visit.
 - d. In the event of an outbreak the Care Home needs to respond rapidly and stop any visits for the duration of the outbreak.
 - e. There may be circumstances where the care home and family agree an individualised visiting plan if there are higher risks or complications with that need to be factored in for individual residents.
55. The conversation with Older People Care Homes around enabling families as key workers started at the end of the summer. Responses varied from looking at ‘how’ to do this to being ‘worried’ about the risks that could lead to an outbreak of Covid-19 in the home and capacity around staff numbers to enable supervised controlled visits. Most talked about how a testing regime for visitors would be a mitigation to the risks. The introduction of rapid testing (lateral flow testing) has supported delivery of this recommendation.
56. Care Homes will still need to use other infection control measures and it will be based on an individualised approach per home. They need to develop safe practice that reflects the unique nature of their homes and the risks they have identified around – building design, size, locality, and the needs of their residents. Precautions may well be a visitor lounge rather than going to a resident’s room, use of PPE and completing a check list alongside the testing.
57. All care homes indicated that if an outbreak occurs or government guidance prohibited it then they would have to say no.

Vaccinations in care homes

57. Government has identified the vaccination of care home residents as an initial priority. In Southwark all CQC registered care homes will be vaccinated as a priority, including not only Older People homes, but also Learning Disabilities and Mental Health settings. Vaccinations have commenced in Older People homes and following completion of these the other homes will be offered the vaccine too. The North and South PCN's will work together to ensure all homes are covered and residents and staff, where consent has been given, are vaccinated in a timely and planned manner. Residents and staff will have future opportunities to obtain the vaccine, should they not consent to receiving it the first time round.

Resource implications

58. There are no immediate resource implications in this report. Three of the recommendations (listed below) will have budgetary implications that will be addressed as part of detailed and specific reports being presented to the relevant decision-maker. As per council standing orders, the necessary reports will be presented to allow the relevant decision makers to give approval to the proposed strategy for enacting the recommendations. The three recommendations are:
1. The residential care charter will need to come back to cabinet for approval
 2. Cabinet has already given delegated authority to enable the council to enter into block contracts for nursing care home provision and
 3. There may be small adjustments to the budget already allocated to the Lay Inspector scheme provided through a contract with Age UK.

BACKGROUND DOCUMENTS

Background documents	Held At	Contact
Care Home Quality Assurance Report	Scrutiny Team 160 Tooley Street, London SE1 2QH	Julie Timbrell 020 7525 0514
Link: (please copy and paste into browser) http://moderngov.southwark.gov.uk/documents/g6662/Public%20reports%20pack%20Tuesday%202008-Sep-2020%202016.00%20Cabinet.pdf?T=10		
Partnership Southwark Recovery Plan	SEL CCG and Partnership Southwark 160 Tooley Street, London SE1 2QH	Hayley Ormandy https://selondonccg.nhs.uk/contact-us/
Link: (please copy and paste into browser) http://moderngov.southwark.gov.uk/documents/b50012132/Supplementary%20Agenda%20No.1%20Thursday%2024-Sep-2020%202015.00%20Health%20and%20Wellbeing%20Board.pdf?T=9		
Increasing Nursing Home Provision 2017 – Cabinet Report	Partnership Southwark Commissioning Team 160 Tooley Street, London SE1 2QH	Carol O'Brien 020 7525 4754
Link: Increasing nursing home provision 2017		
Nursing Care Strategic Options Assessment 2018 – GW0	Partnership Southwark Commissioning Team 160 Tooley Street, London SE1 2QH	Carol O'Brien 020 7525 4754
Link: GW 0 Nursing Care Strategic Options Assessment 2018		
Nursing Care 2019 GW1	Partnership Southwark Commissioning Team 160 Tooley Street, London SE1 2QH	Carol O'Brien 020 7525 4754
Link: GW1 Nursing Care 2019		
Links relating to Recommendation 1: Some links relating to Recommendation 1 and samples on the complaints information available on line: Complaints about adult social care - Southwark Council Comments and complaints - South East London CCG (selondonccg.nhs.uk) Home - Local Government and Social Care Ombudsman		

Sample link from one local care home on complaints:

[Excelcare | Compliments and Complaints \(excelcareholdings.com\)](http://Excelcare | Compliments and Complaints (excelcareholdings.com))

Sample link for another care homes on link complaints procedure in full

[Compliments,-Concerns-and-Complaints-Policy.pdf.aspx \(hc-one.co.uk\)](http://Compliments,-Concerns-and-Complaints-Policy.pdf.aspx (hc-one.co.uk))

AUDIT TRAIL

Cabinet Member	Councillor Helen Dennis, Social Support and Homelessness		
Lead Officer	David Quirke Thornton, Strategic Director of Children's and Adults Services		
Report Author	Carol O'Brien, Senior Commissioning Officer		
Version	Final		
Dated	9 January 2021		
Key Decision?	No		
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER			
Officer Title	Comments Sought	Comments Included	
Director of Law and Governance	N/a	N/a	
Strategic Director of Finance and Governance	N/a	N/a	
Cabinet Member	Yes	Yes	
Date final report sent to Constitutional Team	9 January 2021		