



**QUALITY IMPROVEMENT TEAM  
REPORT TO HEALTH OVERVIEW & SCRUTINY PANEL  
12 MARCH 2020**

**Introduction and Background**

---

The Quality Improvement Team is an integrated health and social care team funded jointly by Portsmouth Clinical Commissioning Group (PCCG) and Portsmouth City Council (PCC). The team was established in April 2018 to work proactively with all Portsmouth care homes and domiciliary care providers to enhance the quality of care provision and to prevent low level concerns escalating. The team was established due to concerns about the quality and stability of care provision within the care home and domiciliary care sectors in Portsmouth, with a need for significant improvement in Care Quality Commission (CQC) ratings and coordination of approaches to support providers.

The team is made up of experienced health and social care workers, with a 0.5 whole time equivalent (WTE) Quality Improvement Manager and two WTE Quality Improvement Officers. All team members were in post by 30 July 2018.

Since the team was established the team has made contact with all care homes and maintains on going contact with all homes with the exception of one that has refused ongoing contact since receiving an improved CQC rating of Good in February 2019.

Contact with domiciliary care agencies began in mid-2019 and work is ongoing to develop the quality offer to this sector. It is planned to pilot this later in the year.

**Quality in Care Homes – an improving position**

---

The CQC ratings in care homes have been improving, but it will take time for improvements to be embedded and for these to be reflected in the ratings.

When the team was established in April 2018, there were 43 care homes in the city, 10 nursing homes and 33 residential homes. At that time, 12% were rated as Inadequate (N = 5), 30% were rated as Requires Improvement (N = 13), 51% were rated as Good (N = 22) and 7% were not yet rated (N = 3).

The current total number of homes is 39, 10 nursing homes and 29 residential homes. The current position is 3% of homes rated as Inadequate (N=1), 28% of homes rated as Requires Improvement (N=11) and 69% of homes rated as Good (N = 27).

## Care Home Quality Audit Process

---

The main approach to quality improvement within individual care homes is through use of a quality audit process. This process which was developed by the team involves a review of the service by two members of the team taking up to three days, followed by action-planning and support with making improvements based on the outcome of the review. For some homes that support has been provided over a prolonged period of time. The standards against which each service is measured do not replicate CQC standards were formulated to assess what it is like to be a resident, a relative and a member of staff. The standards also cover the environment and governance processes. The standards are however mapped to CQC's Key Lines of Enquiry.

A pilot of the audit process was commenced in October 2018 and since then twenty homes have participated in the process. The process is being offered to all homes rated as Inadequate or Requires Improvement as a priority. All homes currently rated as Requires Improvement have or are participating in the process, except two. One is booked to commence the process next month and the other has thus far declined to get involved. The following table provides details of the homes that have or are participating in the process.

Care Home	Date of process commencement	Date of completion of audit process	Change to CQC rating since involvement	Date of latest CQC inspection
Alton Manor	26 June 2019	Ongoing	Not yet inspected	26 November 2018
Aquarius	8 January 2019	Ongoing	Rating remained the same	30 July 2019
Auckland House	18 October 2018	3 June 2019	Rating lowered to Requires Improvement	8 May 2019
Beaconsfield	9 December 2019	Ongoing	Not yet inspected	4 June 2019
Bluewater	2 April 2019	Ongoing	Overall rating remained the same with increase in one domain	19 September 2019
19 Chilgrove Road	25 July 2019	Ongoing	Not yet inspected	10 December 2018
74 Central Road	25 July 2019	Ongoing	Not yet inspected	6 November 2018
Elizabeth House	9 July 2019	5 February 2020	Not yet inspected	4 June 2018

<b>Care Home</b>	<b>Date of process commencement</b>	<b>Date of completion of audit process</b>	<b>Change to CQC rating since involvement</b>	<b>Date of latest CQC inspection</b>
Hamilton House	24 January 2019	Withdrew – lost to follow up.	Not yet inspected	22 October 2018
Hilsea Lodge	13 November 2018	01 July 2019	Home Closed	19 June 2018
Kinross	8 May 2019	Ongoing	Latest inspection rating awaited	6 June 2019
Meadow House	23 May 2019	6 February 2020	Rating increased to Good	5 November 2019
Oakland Grange	16 January 2019	4 September 2019	Not yet inspected	19 October 2017
Ormsby Lodge	6 March 2019	Process cancelled as home reluctant to engage	Overall rating remained the same with increase in two domains	31 October 2019
Queen Anne Lodge	23 January 2020	Ongoing	Not yet inspected	15 May 2019
Regency	17 October 2018	28 August 2019	Rating increased to Good	2 April 2019
Russets	11 December 2018	Withdrew – lost to follow-up.	Overall rating remained the same with decrease in one domain	25 April 2019
Seaview	23 October 2018	14 June 2019	Rating increased to Good	4 March 2019
St Ronans	13 February 2019	Withdrew without completing support process	Rating increased to Good	3 July 2019
The Haven	27 March 2019	4 February 2020	Rating increased to Requires Improvement	29 April 2019

## **Other Workstreams to Support Quality Improvement**

---

### **Quality Data**

The team has established a process for collecting data about quality concerns, not referred to the Adult Multi-Agency Safeguarding Hub (MASH). This includes both concerns relating to internal issues and those where quality was impacted by an external source, such as difficulties accessing necessary healthcare support. This is amalgamated with data from the Adult MASH and is used to identify themes. An action plan is produced six monthly based on the data to support the homes. Actions have included identifying training needs to PCC's learning and development team, prioritising the implementation of NHS mail and addressing concerns with other health services.

### **Registered Manager forums**

A registered manager forum, initially held quarterly, for all care home managers is now held bi-monthly. These meetings offer managers regular opportunities to network, share successes, develop practice and hear about initiatives. Of the six meetings per year two are for managers of homes for older people, two are for managers of learning disability and mental health homes, and two are for all managers. This allows focused as well as general meetings. Meetings are well attended with an average of eleven homes represented.

### **Champion forums**

Champion forums are being established to provide opportunities for care staff to network and gain additional skills and knowledge in a specific aspect of care. Many homes have used the role of champion in name only, without providing champions with any specific role or any education in the area of care. The first champion forum was established in October 2019 for Infection Prevention and Control, and work is ongoing to establish four further forums this year. The Solent Enhanced Care Home Team (ECHT) has established a Hydration Champions forum. Work to develop plans for Falls Champions, End of Life Care Champions and Safeguarding Champions is ongoing. Other areas are also being investigated.

### **RESTORE 2 Implementation**

RESTORE 2 is a tool to support identification of acutely ill residents and aid communication about the level of acuity. The team is supporting nursing homes to implement and embed this in practice. The ECHT will be implementing the tool in residential care homes. Homes are assessed using an audit tool at intervals over ten months post training. Four homes have received training, with two of these on course to have successfully embedded the tool's use by March 2020.

## **Governance Study Days**

A governance study day has been developed and will be delivered four times from April 2020 to January 2021. The course focuses on the issues commonly identified in CQC reports for homes being rated as Requires Improvement in the Well-Led domain.

## **Social Care Quality Dashboard**

A quality dashboard has developed to bring together intelligence from a range of sources in one place. This includes Adult MASH, Contracts and CQC ratings. The day to day management of the dashboard is overseen by the team and it is reviewed by the Quality Board Operational Sub-Group bi-monthly to ensure an appropriate level of support is directed to each provider, with any concerns being escalated to the Quality Board.

Nicola Andrews  
Quality Improvement Manager  
25 February 2020