LANCASHIRE COUNTYWIDE RESIDENTIAL, DOMICILIARY AND NURSING CARE PROVIDER FORUM WEBINAR

22nd June 2023 2pm-4pm

Chair: Katie Barnes

Note taker: Adam Livermore, Commissioning Support Officer, Lancashire County Council

Item	Notes and Actions
1) Welcome and Introductions	Katie Barnes welcomed everyone to the meeting.
2) LCC Updates	Contract Management Sumaiya Sufi introduced herself.
	LCC have now moved from ADAM to PAMMS, which has been purchased jointly with Blackburn, Blackpool, and the ICB. Sumaiya thanked people for providing feedback and suggesting improvements, some of which are already in the works. In July, providers will receive two data requests; the monthly one for June, followed by a quarterly return. As this is a new system there will be some teething issues, so if anyone is struggling with it please contact Sumaiya via <u>Sumaiya.sufi@lancashire.gov.uk</u> .
	LCC are also discussing the QA module within PAMMS with partners and other local authorities in the area, with a view to making the QA assessment standard across Lancashire, Blackpool, and Blackburn.
	Sumaiya advised all providers to continue to use the Capacity tracker regularly. While the mandatory compliance window is once a month, it is better to update twice-weekly to enable LCC to keep up to date and accurately source care.
	There are plans to move the medication app scheme developed during the COVID pandemic into social care. There was a survey issued via the tracker. If you have not responded to the survey, please do so.
	LCC are working with a new expanded monitoring framework, following a review. The training compliance target has increased to 80%.
	The social care workforce forum will be taking place on the 6 th of July at 1 pm. It will cover topics such as succession

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planning, international recruitment, and recruitment and
retention. There are over 150 people already signed up.
https://www.eventbrite.co.uk/e/social-care-workforce-forum- 2023-live-tickets-631490092867
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Nicola Murray stated via chat that her service reports on block contracts on two systems and asked if there was a way to only report on PAMMS. Sumaiya answered that the ambition is for all reporting for KPIs to be on the PAMMS system. However, partners are still determining the timescales and it may be that the ICB needs to excuse the block contract manual return for Nicola's service to report on PAMMS while waiting for implementation.
Louise Mattinson from Hillcroft Nursing Homes asked in the chat if there is any news on whether the revised payment terms clause in the new LCC residential contract will be implemented. Sumaiya Sufi answered that there is no further news, and no date has been set to roll that contract out. The clause has been reworded following feedback, and there would need to be 12 months' notice and an engagement session before those terms were introduced.
Michael Scollay from Jah-Jireh Charity Homes Leyland stated his service had not yet received login details for asked as they had not received login details for PAMMS. Sumaiya agreed to make enquiries.
Katie Barnes asked if the content of the new revised framework could be shared with providers. Sumaiya agreed to and added that it would be shared with individual providers ahead of any visit.
Katie Barnes asked if the transfer between systems had been positive. Sumaiya stated that LCC had received positive feedback from providers, though there is still work to do in the background.
Care Navigation Residential
Denis Greenwood introduced himself and shared a presentation on the screen.
The Care Navigation Residential service is expanding, and is now working in East Lancashire with out of area hospitals. They have recruited two dedicated weekend care navigators to provide a robust 7-day service. There are further adverts for 3 Care navigators, a Team Leader, and a Business

Support Officer to enable rollout across the county to our Community Social Care teams. Rollout will start with Central Lancashire in July, continue to North Lancashire in August, and move to East Lancashire in September.
There is going to be progression with the acute teams, with nursing placements in West Lancashire. Care Navigation Residential are also working closely with Lancaster and Morecambe for hospital discharge and are aiming for a universal offer across Lancashire. Further, they are hoping for the Mental Health and Learning Disability services to be intertwined into this rollout, though this currently being finalised.
Denis encouraged providers to use the care portal to send through data, as this will then go through to the dedicated care team. Providers not using this portal has led to some information issues. If there are any problems accessing or using the portal, please contact Denis via <u>denis.greenwood@lancashire.gov.uk</u> .
There is a trend towards Bariatric care being more in demand, and Care Navigation have been working with ICB colleagues to source the necessary equipment. There have also been difficulties sourcing care for NG Tube and Peg Feed. Care Navigation have been working on providing the training for this to providers to allow for more available placements. The data further shows the demand for nursing is increasing as the demand for residential care decreases, and this has been the case over the last few years.
Denis encouraged providers to continue to inform LCC about any adverse discharges. Care Home provider visits have started, and if anyone is interested in a visit, please contact Denis to arrange. He added that a lot of potential clients and families are asking for 360 views of homes on websites, so it is useful to include this if possible.
The NECS capacity tracker is the go-to tool for seeing if homes have a vacancy, please update as often as possible.
Gillian from JT Care Homes asked if anyone has looked at the accuracy of the hospital discharge process as numbers can be skewed if people are wrongly marked as needing nursing care. Denis answered that there was a locational skew which has been identified and is still ongoing, and that this has been factored into the LCC data.

	Katie Barnes asked if nursing has increased since the introduction of Discharge to Assess. Denis Greenwood updated that the trend towards more nursing has settled, and his staff always feedback that they need more nursing placements and more specialist placements.
	Katie Barnes added that there is some work going on in the background around upskilling residential care home staff to support nursing placements, led by Skills for Care.
3) NHS Talking Therapies (Marie	Marie Longworth and Josephine France introduced themselves and shared a presentation on the screen.
(Marie Longworth and Josephine France)	They are from the NHS Talking Therapy service, which is a wellbeing service that offers free psychological services to those 16+ across Lancashire. It is part of the nationwide Talking Therapies for anxiety and depression.
	The team is made up of different practitioners, including counsellors, Cognitive Behavioural Therapy specialists, and psychological wellbeing therapists. They have both online and in-person offers.
	When someone refers or is referred, the team do an assessment to ensure that Talking Therapy is the best service for that individual. If they are not appropriate, the team would refer to other services that may offer support such as crisis services. Details on how to refer are included in the slides. If an agency has consent, they can support someone to do a self-referral, or complete a professional referral.
	A positive practice guide has been produced by BABCP, Age UK, the Mental Health Foundation and IAPT services. This guide recommends reaching out to care homes to help provide access for older adults. There is a group within the Talking Therapy service championing older people's mental health access which meets every 6 weeks. They are looking to implement a pilot scheme offering a weekly service run out of nursing homes.
	The number of older people accessing Talking Therapies is lower than is should be. It used to be thought that older adults didn't want to access the services, but they do, and a great number of older people do struggle with their mental health. Those accessing the service tend to achieve better outcomes compared to those of working age.

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	Katie Barnes asked if someone in the care setting has to want to engage, and if there would be issues with capacity. Marie answered that the person does need to engage with the process, or it won't work, and that capacity would be checked as part of the assessment.
	Marie added that they are looking at changing the literature around the service, moving towards using language that is more relatable and less clinical.
	Carolyn Watkins added that the feedback from patients is incredible, and older people who have accessed the service have described it as life changing. Around 64% of older people can recover from anxiety and depression compared to 50% of the general population. The service can also help staff as well as residents. If someone wants to know more, please let Marie, Josephine, or Carolyn know via <u>marie.longworth@lscft.nhs.uk</u> , josephine.france@lscft.nhs.uk, or carolyn.watkins@nhs.net.
	Josephine France added that the service can hold taster sessions at care homes if anyone is interested.
	Lynn Flynn from Park Lane Health Care asked in the chat if there are posters or leaflets for Talking Therapies that can be displayed in care homes. Carolyn Watkins updated that the service is currently undergoing a rebrand. When promotional materials have been finalised, she will share them with Sumaiya Sufi for distribution.
4) Care Quality Commission Update (Ginny Ryder)	Ginny Ryder, Operations Manager, introduced herself, and updated that CQC are going through a period of transition. The changes will reflect what is happening within Health and Social care. In Lancashire and South Cumbria there are now four teams: Blackburn and East Lancashire, Blackpool and West Lancashire, Central Lancashire, and North Lancashire and South Cumbria. This covers hospitals, mental health trusts, clinics, and Adult Social Care. CQC have specialists able to guide on every sector, and they are experts on regulation. The inspectors will be continuing with their specialism, but the roles will be splitting into inspector or assessor. The assessor will gather information about your service and pass on information of concern to an inspector, who would then carry out an inspection. This means teams will be better equipped to look at specific incidents. In theory, it will also mean providers and services see inspectors more. Within the team there will be a regulatory co-ordinator, who is the person to contact to talk with the inspector. If you send

Care homes will now have a relationship with a small team rather than with individuals. Gill Reynolds from Hillcroft Nursing Homes asked via Teams chat if providers will be made aware of team members for their area. Ginny Ryder agreed to make enquiries.
While the new teams are in place, the new ways of working are not just yet. Preliminary training is scheduled within the next few weeks, with full training planned between July and September. The new way of working will be used in areas from October, though this may be staggered across the country, and there isn't a set date for Lancashire and South Cumbria yet.
The current way of working involves inspecting against risk, but that will change, allowing for faster changes in ratings, and faster assessments if information showing improvements or concerns is received by CQC. There is a movement away from the five domains, so a visit may only look at two areas.
CQC now have the power to inspect the local authority and the ICB system and will have a wider view of how everyone in the system contributes to Health and Social Care within the area.
While the ratings will not be changing, there will be scores within the ratings to provide a scale and allow for services to plan and see where they can improve.
CQC are tightening their criteria around staff wellbeing. Ginny advised providers to look at their staff wellbeing and staff environments.
Currently, inspectors are responding to risk, which means the good services are doing is missed. The hope is that some of the inspectors can come out to good services and celebrate that more. It is always moving when a service has got an outstanding report, and it is evident that the service had made a difference in people's lives. To achieve outstanding, services need evidence. Ginny advised services to bear corroboration in mind when providing evidence for an inspection.
There are some common issues, around Regulation 12 (Self-Care and Treatment) and Regulation 17 (Governance). This will often relate to Homes having systems in place that

	don't fit their purpose. There are still common issues with medicines systems only being audited once a month. Ginny recommended reviewing high-risk medicines more often than this and encouraging professional curiosity around medicines. Ginny also encouraged Homes regularly updating and monitoring food and fluid charts.
	Fire safety is a key risk. Each care home should have a risk assessment. Ginny advised homes to check who completed the risk assessment to ensure that person was qualified to assess the fire risk. She also recommended checking that the locks in the home were appropriate, allowing staff to get in and residents to get out in an emergency. She further recommended ensuring the home has the appropriate equipment to move people if necessary.
	Katie Barnes asked if there would be Learning Disability Specialists. Ginny confirmed they would.
	Amjad Mennen from Gateway Leisure asked in the chat if there would be an allocated inspector carrying out inspections. Ginny Ryder confirmed there would be several inspectors.
	Paula asked in the chat how CQC would deal with a complaint regarding Regulation 18 when residents or families complain about there not being enough staff at night, and if this would be contradicting staff well-being. Ginny answered that as a regulator they would be looking to see if the home can meet the needs of the people living there at night. While this is harder for smaller homes, all care homes need to consider the needs of the people they are caring for. She added there weren't easy answers, and the fire service are investigating staffing.
	Ginny added that she would be retiring from CQC in two weeks' time. Katie Barnes conveyed the forum's best wishes for the future, and that Ginny would be missed. Ginny added that she has always enjoyed coming to the provider forums, and that she wished all providers the best for the future. Her successor has not been appointed yet, but there are three other managers across Lancashire who could be contacted.
5) Chair Facilitates Provider Update / Discussion	Sumaiya Sufi updated that LCC have asked Lancashire Fire and Rescue to hold some training sessions for providers. She encouraged providers to sign up for the Social Care Training Hub newsletter for updates. Katie Barnes

	suggested having Fire and Rescue give a presentation at the forum in the future.
	There are several Skills for Care Registered Manager Meetings upcoming. The information is on the Skills for Care website and the presentation will be included on the portal. Sumaiya added that the data set for the adult social care workforce is only 51% complete in the Lancashire County Council area. She encouraged people to put their information through as it will be used nationwide, and submissions allow for access to subsidised or free training,
	Sumaiya asked attendees to let her know if there is anyone they would like to see present at a future forum. Katie Barnes suggested reinviting Skills for Care and CQC. Karen Whittle suggested MCA in the Teams Chat.
6) Any other Business	The next meeting will be the 28 th of September 2023.