

Annual Quality Review 2022/23

The Commissioning and Contracts Team have completed a systematic review of quality across care homes in the Bradford District. The team analysed all available data sources from those in the public domain, internal Council systems, as well as seeking data and feedback from all relevant stakeholders and care homes directly. The report below presents all the data collected with analysis completed by the Commissioning and Contracts Team, as well as those who submitted the data.

Key Findings

Data from 1st November 2022 to 31st October 2023

1. System Data

During the reporting period one new care home opened adding 66 residential beds for older people and offering specialist support for people living with dementia and physical disability. Three care homes closed during the period, which resulted in a reduction of 157 beds [37 nursing and 120 residential]. However only 37 beds were completely removed, as 120 beds will re-open in 2024, though these were removed from the vacancy data during the period of this review.

A total of 69 residents were affected by home closures and had to move care homes. Two other services also de-registered nursing care and a further 20 residents had to move care homes during this change in service. Both care homes were dual registered and became residential only, so bed numbers were not reduced by re-registration.

There were four care homes changed legal entity in the Bradford District and had to re-register on the Provider List. The Commissioning Team supported 58 new registrations on the Provider List and 12 additional care homes being added to existing registrations. The majority of these were for new out of area placements, though six were for a change of legal entity for an existing out of area registered care home.

There were 778 new placements made during the reporting period, an increase of 108 from the previous year. There were no discernible trends about placements across particular months or seasons.

Data was extracted from the Capacity Tracker to determine the number of vacancies at residential and nursing homes in the district in the last 12 months. The data shows the number of vacancies each month for long-term and short-term stays. The number of short-stay and long-stay vacancies has decreased over the course of the reporting period, which is a continuation of the trend from last year. The number of short-stay vacancies decreased by 2.8% while the number of long-stay vacancies decreased by 14.6%.

The average occupancy rate across the year in General/Dementia Residential & Nursing was 78.4% compared to 62.2% in Learning Disability Residential & Nursing. This is mainly influenced by the number of 'unavailable' vacancies, which Capacity Tracker does not define. At the end of the reporting period [31.10.23] occupancy levels were reported at 83% and that was reflective of

vacancies reported in Capacity Tracker as: 524 General/Dementia Residential & Nursing and 49 in Learning Disability Residential & Nursing.

Bradford Council's Adult Social Care Market Position Statement 2023-2025 has been published in the last year and detailing the key social care priority outcome of "Better Health, Better Lives".

Bradford Council is the 5th largest local authority area in England by size of population. In 2021 it was estimated that there were 547,000 people living in Bradford District, an increase of 0.9% since 2020. The number of people aged 65 to 74 years rose by just over 11,000 (an increase of 31.0%). The Council currently provide support to over 3,000 older people across the district across all services.

In March 2023, across the Bradford District, there were 80 organisations, operating 106 care homes, registered on the Care Home Provider List. Of those care homes within the district, 65 locations offer residential care services, 32 offer nursing care and 9 locations are dual registered for residential and nursing care. As of end of October 2023 this had reduced to 103 care homes, with 63 homes offering residential care, 33 nursing care and seven care homes offering both.

The Market Position statement states that occupancy levels remained stable at around 81% over the 12 months to February 2023. This figure is still broadly reflective of the current position, although had increased to 83% by the end of October 2023 and there still remains an oversupply of care home beds in the Bradford District, including for complex care provision.

The Council have implemented a vacancy map which draws vacancy data from the Capacity Tracker which informs social work team of care homes with vacancies and able to facilitate new placements. This has greatly improved system working, especially when urgent placement moves are required, such as with a managed closure. The system is reliant on care homes updating the Capacity Tracker, which is generally high during mandatory compliance periods but drops to a much lower rate for the rest of the month.

The Council's preventative approach means that there is ambition to further reduce the need for general residential care home beds in the district. The need for available beds at the Council's base rate remains and services delivering at this rate are in general fewer than in previous years, though there is no data to support this. Care homes often adjust rates based on occupancy levels and fees may be flexible and difficult to substantiate with data.

Similar to previous year's report, the State of Care 2022/23 review shows that inequality continues to be present across health and social care services. As the Bradford District has diverse population, it is particularly important to consider the accessibility of services and how equality is championed.

The State of Care Report also highlighted that recruitment and retention continues to be a significant challenge for providers, particularly care homes. Increasing costs, including staff costs, wage increases and recruitment practices, as well as non-staff costs, inflation and increased utilities costs for services, are creating financial pressures on care homes nationally and locally. Profitability in care homes is at a historic low.

Staff turnover rates within the Bradford Adult Social Care sector were 22.3% in 2022/23, which is lower than the Yorkshire and Humber average of 29.9%. However, Bradford Council's Adult Social Care Market Position Statement 2023-2025 states that although staff turnover within the adult social care sector as a whole is also lower than the England average, care homes still experience some of the highest rates.

At the time of the Market Position statement being published in March 2023, the average staff turnover in residential care homes was as high as 45% and turnover in nursing care homes 25%. Both figures are higher than the turnover rate for the whole adult social care sector in Bradford which is 22.3%. This can pose significant challenges for care homes as more time and resources are directed towards recruitment, onboarding, and staff training.

In March 2023, 65% of new starters in Bradford were recruited other adult social care services, suggesting there are a high number of staff moving around the system, potentially between care homes, although the data cannot verify this. Managers moving between services is a trend the Contract and Quality Team have observed but no specific data source can detail this trend.

The Skills for Care workforce report shows that the average age of workers in both residential and nursing care homes is 43, with 27% of staff being aged 55 and above, compared to 11.5% being aged under 25.

The CQC State of Care Report for 2022/2023, published in October 2023, states there has been a steady decrease in staff vacancy rates for care homes nationally, from 11% in January to March 2022 to 7% in April to June 2023. This decrease in vacancy rates is reflected in the Skills for Care data for Bradford for 2022/23 which shows that vacancies have dropped from 6.0% to 5.7% in nursing homes from the previous year and from 10.9% to 8.7% in residential care homes. The report outlines 54% of adult social care providers nationally are having difficulties with recruitment and 31% are having difficulties with retention.

One potential solution to recruitment difficulties is international recruitment, with over triple the number of people arriving to work in the UK from overseas starting direct care roles within adult social care roles in 2022/23 compared to 2021/22. However, although this has helped some providers to resolve staffing issues and increase the diversity of their teams, there has been a large increase in unethical international recruitment practices, where some workers have been coerced and controlled through debt bondage or exploitative immigration measures.

In 2022/23, the CQC made 37 referrals for concerns regarding modern slavery, international visa and labour exploitation, four times increase on the previous year.

Overall, recruitment and retention challenges are presenting issues for market stability as homes have sometimes needed to pause admitting residents or become unable to provide nursing care. Recruitment and retention activities' associated costs are also increasing financial pressure on care homes.

It is anticipated that demand for adult social care services will grow in Bradford over the next 5 to 10 years, with the population aged 65 and over in Bradford expected to grow by an average of 8% over the next 5 years, to a total of 93,000 by 2027. The number of residents aged 80-84 is expected to grow by up to 80%. However due to the Council's 'Home First' strategy and the current oversupply of care home beds, the need for additional care home beds is still not a requirement at this time.

The CQC Market Oversight scheme reports that nationally care home profitability remains at historical low levels, hindered by increased running costs and wage inflation, which is impacting on provider's abilities to reinvest in care homes. This is impacting on the quality of care being delivered and has reduced the stability of care homes and their ability to develop.

Nationally, the number of registered beds has decreased by 0.6% from July 2022 to July 2023. Occupancy rates have increased, with 84% of CQC registered care home beds being occupied in July 2023, compared to 82% in July 2022. However, average occupancy rates have not yet returned to the pre-pandemic rate of 85%. National trends is also reflected in the Bradford data.

During the reporting period CQC inspected 26 care homes in Bradford, nine improved their ratings, eight retained existing ratings, six ratings reduced, one inspection was for a newly registered care home and two inspections had no rating. There was a slight improvement since last year's annual quality report, as fewer home's ratings reduced and a slight improvement in retaining existing ratings. There were three more care homes rated as good, this is an improvement from last year, one less rated as inadequate and one less rated as requires improvement. The trends in Bradford were also reflected by CQC across England. The most common issues for inadequate ratings was in relation to the safe or well led domains. There were seven care homes that had inadequate ratings in these areas and it impacted the overall rating. Regulation 17 – Good Governance was identified as a key area where CQC have noted as an area with breaches in regulation for some Bradford services.

The Enhanced Health in Care Home partnership has overseen a range of support to the care home sector over the last year and some of the key highlights of that partnership included support around the revision of the Bradford Care Home Handbook, the Recognition of Life Extinct (RoLE) tool, creation of the Care Home Winter Pack and supporting the VCS and Care Home Project (26 care homes have signed up and the project has begun a mapping exercise).

In February 2023, Skills for Care published a new framework to support social care workers in providing care to older lesbian, gay, bisexual, trans, queer (LGBTQ+) people. In May 2023, they released a new handbook for Nominated Individual's, which provides practical advice and information about this role and how to do this well. Bradford Care Association (BCA) are a Skills for Care partner for the Workforce Development Fund and have been leading on delivery of 'Lead to Succeed' sessions. These sessions were developed by Skills for Care and providers can claim back the cost of these sessions from the Workforce Development Fund if they submit data to the Adult Social Care Workforce Data Set (ASC-WDS). Lead to succeed is a practical learning programme aimed at aspiring managers and deputies in adult social care services, helping individuals to develop their leadership and management potential, gain knowledge and be supported and challenged to put this into practice. It was noted that a number of organisations miss out on this funding and training by not submitting data to ASC-WDS.

BDC Nutrition Team developed a series of Support Train Eat Well (STEW) training sessions for care home staff across the district. A 3-week STEW catering course was offered in local venues which gave practical advice and information on STEW catering standards. STEW carers workshops are available for all care home staff and managers, where STEW resources are shared and guidance given on developing personalised nutrition care plans for residents, as well as specialist advice for specific residents in the care home.

The Bradford Care Association [BCA] were commissioned by Bradford Council to provide a range of quality workshops to support care homes. These included a sessions about Medication, Staffing, CQC

Fundamental Standards and Dementia and Managing Distressed Behaviour. A specific support session for care homes which included how to address the issue of over-prescribing of anti-psychotic medication for residents living with dementia. A care home responded to the session by seeking reviews for all their residents who were prescribed this medication. The outcome was 81% of residents prescribed an anti-psychotic medication had their medication reduced or stopped, 9% had anti-psychotic continued (PRN basis) and 10% had further reviews due. During the month of March the BCA hosted a digital month where they hosted around 30 webinars to support the sector's digital learning and enable care homes to enhance their digital offer. Care homes were also supported with leadership training, through being able to engage in recruitment events and received regular updates through briefings, newsletter and workshops through the year.

2. Bradford Council Data

The Contract and Quality Team completed 166 care home visits undertaken by nine different contract officers during this period. This was an increase from 99 visit in the last year's report. 90 visits were to residential homes and 76 to nursing homes. 96 were enhanced monitoring visits, 51 were contract monitoring visits and 13 were risk-based validation visits. Six were unannounced visits and one was around specific support in relation to de-registration.

The Contract and Quality Team reported that areas where care homes were noted as displaying good practice related to staffing levels, staff engagement, home environment, external professionals' engagement, resident involvement, and care plans. The areas where it was noted that the team found the most issues related to home environment, community involvement, staff training, care plans, risk assessments, DoLS/MCA and safeguarding documentation.

The Contract Team operate a Contract Concerns Log (CCL) and received 15 corporate complaints (9 residential / 6 nursing), 226 concerns (116 residential / 110 nursing), 527 referrals from safeguarding (260 residential / 267 nursing). There was an increase for last year (2021/22 - 140 concerns / 322 safeguarding). There was an increase of information being shared with the team as for information only. The CCL themes / trends – had 442 entries with fields not completed but for those filed in the highest issues were in relation to staff conduct, training and poor care. This was the same as last year. One compliment was received for a residential care home and one compliment for a nursing home, both from District Nurse Teams. In addition to the above an increasing number of queries regarding top up payments were received.

The Contract and Quality Team's Notification Form for non-safeguarding referrals received only one referral during the reporting period. The system was republicised as part of the recommendations for last year's report because of under usage but the system still had widespread under reporting. Safeguarding also received a large increase in over-reporting for non-safeguarding referrals, indicating that some information is being mis-reported across the system. There were other issues, such as disruption to service that were not reported at all or incorrectly, these incidents were discovered during on site contract visits.

NHS West Yorkshire ICB confirmed they received one complaint in the reporting period, this related to poor care within a residential care home. The ICB Serious Incidents team received referrals for incidents relating to people in receipt of NHS funded care which was required to be reported on the STEIS system for serious incidents. The common themes of those referrals were in relation to falls with a fracture or head injury, resident to resident incidents, unexpected death, and significant harm due to the delivery of poor care. During the reporting period the NHS introduced a new system to

improve analysis and learning called the Patient Safety Incident Response Framework which enhanced existing procedures. It was acknowledged that there is still an under-reporting issue by care homes to commissioners and not all serious incidents were highlighted as required. Raising awareness of statutory requirements to report serious incidents is still a key priority, as well as offering training and support to care homes, especially in relation to lessons learnt from safety incidents.

The Safeguarding Team (SAT) received 2,149 referrals for care homes, 1,757 met s.42, of which 794 were in relation to physical abuse and the largest theme. 14 providers engaged in safeguarding training from the team. Between one and three sessions delivered in each home. Four providers were subject to Organisational Safeguarding Enquiry (OSE), one provider subject to the Serious Concerns procedure and nine other care homes. Eight OSEs were underway during the reporting period, five at stage 2 and three at stage 3. Joint visits were conducted to six different care home as part of SAT enquires alongside the ICB and Contract Team. Management of complex behaviours for people with cognitive impairments and behaviour issues often led to significant numbers of concerns being raised. Many of the “s.42 not met” referrals relate to over reporting of falls. Support has been offered to three nursing care homes in this time period around over reporting of safeguarding referrals.

The Serious Concerns Procedure is a risk management policy that is part of the contract with care home providers. There were 12 Serious Concerns meetings during the reporting period. On average 22 providers were discussed per meeting and June / July were the meetings with the highest numbers of providers. Last year the average was 17 providers per meeting. Care homes with enhanced monitoring in place was the part of the agenda that contained the greatest amount of resource. Data indicates that some care homes exited the embargo status but have remained on enhanced monitoring for extended periods of time, due to on-going risk issues. The reason for entry to the Serious Concerns procedure is a range of reasons but concerns raised from CQC, Safeguarding or the Contract Team are the most common themes. A review for the Serious Concerns procedure was started towards the end of 2023.

Health and Social Care Ombudsman received seven complaints during the period (three residential and four nursing). One was not upheld but had recommendations for the provider, one was upheld and related to funding [the provider had to pay a financial remedy], two were closed at initial concerns and three remain open. Funding arrangements form part of an open case as well as poor care featuring as part of other investigations. A further concern was raised about a change of care home registration, but this was closed as it was not a decision the care home were able to take, rather it was a commissioning decision.

The MCA/DoLS Team provided data in relation to care homes documenting 1,190 DoLS applications were made during the reporting period [21/22 data – 1,818] and 293 authorisations made in care homes [21/22 data – 453]. The overall feedback was that paperwork and DoLS applications made by care homes was to a good standard. The MCA/DoLS Team supported care homes throughout the period and offered a new training programme for registered managers to attend. This training offer was delivered to several Business Relationship Officer portfolios across the year and has improved knowledge and understanding around MCA and DoLS.

The Financial Support Services (FSS) reported some internal issues with workflows, whereby many service lines are not set up correctly and this causes payments to be delayed. Discharge to Assess (DTA) placements are also an issue because of how they are set up internally. Training is being offered to internal teams to address these issues and DTA is being followed up by commissioners. Workflows were four weeks behind by the end of the year and the payments backlog has mostly

been addressed. Some providers have been raising concerns about payments and this is being addressed on a case-by-case basis. The net to gross project is changing payment arrangements for several providers. Some placements have occurred outside of the new contract [Provider List] but this is being addressed through training from the Commissioning Team. Overall FSS have increased staffing levels, and this has assisted to improve payments this year.

The Contract and Quality Team also reviewed monitoring systems throughout the year, including Serious Concerns, CCL, the Service Improvement Board, the BCA provider forum and worked to improve partnership arrangements with the Safeguarding Team, the MCA Team and ICB Quality Team. The Commissioning Team monitored occupancy levels and the Provider Bulletin was refreshed during the reporting period. The BCA were supported with their range of quality workshops and other initiatives, such as the targeted support around medication, dementia workshop, recruitment and retention of staff. The teams also began preparing for the upcoming changes to CQC.

3. Health Data

The Infection Prevention and Control Team conducted 41 care home visits, 16 to residential care homes and 25 to nursing homes. Of these visits 38 scored in the highest category (95% and above) and three care homes were in the second highest category (80 – 95%). No care homes were rated in the lowest category (0 – 80%). Care homes scoring below the 95% were raised at the Serious Concerns monthly professionals meeting, where failures were considered to be of a serious nature. In general, it was reported that overall infection prevention and control (IPC) procedures are conducted to a high standard and IPC procedures were considered to be improving in care homes.

The End of Life (EoL) Team sent resources to all care homes, including updating information where some previous toolkits were discontinued. The team delivered 78 training sessions to care homes (22 in depth sessions for nurses. 23 training sessions to nursing homes / 16 residential homes). Care homes have been supported to develop comfort and dignity champions. It was noted that care homes are often completing documents on behalf of residents that should be undertaken by the GP but resource and time pressure is creating issues where the care homes are required to undertake these tasks. The EoL Team completed a training survey and 39 of 42 respondents said the training was “very effective”. There was a specific need for additional support around communication and end of life conversations that is being considered for the upcoming year. training was identified. In the reporting period there were 1,105 deaths in care homes [21/22 data – 1,057].

The Tissue Viability Team (TVT) support residential care homes with residents experiencing pressure damage and sores. In total there 83 care homes that received support and a total of 563 pressures sores or skin damage that were referred to TVT. This was an increase from 445 in 2022/23. TVT also offered 86 training sessions to care homes. A further 48 were booked but were cancelled before being delivered, either by TVT or the care home. TVT also implemented a dressing training course and 48 residential homes engaged in this training.

The Continence Team support care homes receiving referrals and offering specialist interventions. The team received 5,503 referrals during the reporting period. The majority of these were from GP services for care home residents. The team raised some concerns about the support people are receiving in care homes in relation to continence, specifically in relation to people transitioning from the community to care homes, care homes sending bulk referrals which can cause delays in assessing people, sometimes documents arrive incomplete and care homes can send referrals at a stage that is too late or using old referral forms. The Continence Team also noted that the promotion of positive continence procedures is not evidenced during visits.

The hospital admission data still contains some inaccuracies due to data being by postcode rather than care home location specifically. However, the data set showed 1,927 admissions for the year, whereas last year's report was 2,017 for the previous year. Care homes with the largest hospital admissions have been contacted by their Business Relationship Officer to explore further but it is noted some share their postcode with other care home services or sheltered accommodation. Services that have higher numbers of admissions reported this often being connected to residents having falls.

The Telemeds service, delivered by Immedicare, offer specialist clinical support to care homes through a virtual platform. In total there were 5,937 consultations of which 68% were to residential homes and 32% were to nursing homes. The most common clinical reason for consultations was falls at 27%, followed by suspected chest infection (suspected) 11% and suspected UTI at 8%. Consultations by clinical purpose by month shows falls were steady over the year but peaking in spring 2023, chest infection peaking in winter 2022 then steady after this period and rising again autumn 2023, whereas suspected UTI was steady over the year. The highest number of consultations were on weekends (Sat: 17.5%; Sun: 16.2%). 80% of contact resulted in advice given and only around 5% resulted in a hospital admission. The feedback from care homes is that the Telemeds service is a vitally important part of their support to residents and greatly valued.

The District Nurse Team support residential care homes in the district and visit residents to offer nursing support. There was no data available but the District Nurse Team visit care homes on a daily basis to support with a range of activities from wound care, administering medications, catheter care, pressure area management, palliative care, reviewing equipment and supporting staff in the care home.

4. People Data

The Contract and Quality Team sought to increase the available data from people using services and contacted a portfolio of care homes to seek additional data. Around 25 care homes were contacted but only two responded. They had issued 106 surveys and received 51 responses. The care homes had used different survey questions so analysing the data collectively was not possible. In general, the feedback was positive and the main issues residents raised was in relation to food.

The website carehome.co.uk was analysed. There were 108 Bradford care home advertised and which was reduced by three from last year. There were 70 care home with reviews for the reporting period and a total of 281 reviews. 268 had been left by relatives and only 4% by residents. There was one submitted by a professional. The ratings were generally positive, 235 were five stars, 42 were four stars and only five reviews were three stars or less.

5. Provider Feedback

Care Home providers received a survey from the Commissioning and Contract Team. 16 individual homes responded, which was an increase from last year, improvements were noted in almost all areas and no negative responses were received. There was a greater awareness of the Quality Charter and how the system operates. Care home providers were positive about the support they receive from the Bradford Care Association and more providers were aware of the support that was available. There was also positive feedback about the support care homes receive from the Commissioning and Contract Team.