HIQA in Residential Care: Learnings for Homecare

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The potential risks to human rights when care is provided 'behind closed doors', in people's own homes are, in many ways, greater than in institutional settings.

Equality and Human Rights Commission, 2011

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The Risks

- *"Home care is an **intricate combination** of the provision of **basic to complex health-care interventions** in a residential setting that is **not designed for the delivery of health care.**"*

- *"These circumstances expose home care clients to a **different set of risk factors** than they might experience in institutionalized settings."*

Equality and Human Rights Commission, 2011

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The Risks

1. *Inconsistencies* in the way care is *planned and delivered* in Homecare.

2. *Lack of integration* of Home Care teams, *lack of care coordination* across healthcare sectors and *failures in communication.*

3. *Poor standardization of processes*, documentation, equipment and packaging of medication.

4. Clients and caregivers sometimes make *decisions that put their health at risk.*

Canadian Patient Safety Institute. 2013

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Feedback: Risk of Abuse

Physical Abuse

- *"Rather than say 'sit in the chair', they'd push me back into the chair, that sort of thing."*

Neglect of Personal Care

- *"They are supposed to do an hour in the morning and an hour in the evening, but … she's gone within 10 to 15 minutes."*

Equality and Human Rights Commission, 2011

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Feedback: Risk of Abuse

Lack of Autonomy and Choice

- *"The earliest we were told of someone being put to bed was 2.45pm."*

Lack of Respect for Privacy and Dignity

- *"I feel my dignity is not being respected when being showered and dressed when I have several trainees observing quite an intimate routine."*

- *"Some staff 'talk down/shout' at my mother thinking they will 'get through' to her by doing so. She is an intelligent woman and isn't hard of hearing."*

Equality and Human Rights Commission, 2011

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Challenges to Home Care Staff

- *"The least satisfying element is not having enough time, you try not to hurry them [older people] (or to let them know you haven't enough time) but you are aware that your next client is watching the clock and waiting for you to arrive."*

<div align="right">Equality and Human Rights Commission, 2011</div>

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Homecare Top Risks

1. Falls

2. Medication errors

3. Psychosocial

4. Behavioural or mental health problems

5. Wound infections

British Medical Journal, 2013

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- Research - 17% of hospital patients experience an adverse event.

- Research - Homecare Reported rate at 13%, of which 1/3 were deemed preventable.

- Additional Records Review– up to 66.5%

International Journal for Quality in Health Care, 2013

(Canada)

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Hiqa chief executive calls for urgent regulation of home care

Home inspections would not be needed as regulation would apply to service provider

🕐 Tue, Oct 3, 2017, 10:37

Paul Cullen

Hiqa's chief executive Phelim Quinn pointed out most older people and people with a disability wish to remain at home. Photograph: Brenda Fitzsimons

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Declaration of Intent

- *"HIQA is firmly of the view that <u>any standards and regulations</u> for homecare services should be <u>applied to all types of providers equally</u>. The primary reason for this is that service users should expect the <u>same quality of service</u> regardless of who is providing that service."*

HIQA Submission to the Department of Health's public consultation on homecare services, Oct 2017

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Declaration of Intent

- *"Any regulations and quality standards should focus on the operations of the service provider. This would potentially cover themes such as governance, accountability, policies, management of complaints, workforce management, safeguarding, notifications."*

HIQA Submission to the Department of Health's public consultation on homecare services, Oct 2017

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LAMPS ARE DIFFERENT, BUT LIGHT IS THE SAME

RUMI

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Safer Better Healthcare Standards:

"A vision for high quality, safe healthcare"

"Provides a roadmap for improving the quality, safety and reliability of healthcare"

(HIQA, 2012)

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Standards Based on Themes

Safer Better Healthcare, 2012

Disability Services, 2013

Residential Care Settings, 2016

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Safer Better Healthcare Standards

- Themes:

Theme 1 Person-Centered Care and Support	Theme 5 Leadership, governance and management
Theme 2 Effective care and support	Theme 6 Workforce
Theme 3 Safe care and support	Theme 7 Use of resources
Theme 4 Better health and wellbeing	Theme 8 Use of information

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Theme 1: Person Centred Care & Support

Standard: *The service advocates the needs of service users, protecting their rights, respecting their values, preferences and diversity and actively involving them in the provision of care.*

Challenges: How will we effectively engage with our service users?
How do we assess individual needs and tailor our service accordingly?
How will we ensure fair access to the service?
How will we implement informed decision making?

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T1: Person Centred Care & Support: Reflective HIQA Findings

- "Treatment had been given to residents <u>without their consent</u> in a manner that was not in accordance with the nature and extent of residents' dependencies and needs."

- "Residents' <u>communication needs were not fully assessed</u> nor were appropriate interventions utilised <u>to communicate</u> effectively with the resident."

- "Interventions <u>did not identify the individual preferences</u> of residents or <u>their views</u> on the service provided."

- "There was <u>insufficient evidence</u> recorded to determine that the <u>complaint</u> had been fully and <u>appropriately investigated</u> and any required actions fully implemented."

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Theme 2: Effective Care and Support

Standard: The service shall consistently deliver the best achievable outcomes for people using the service, by using evidence based, best practice and ongoing evaluation of service-user outcomes.

Challenges: How will we ensure that our service is provided in line with evidence based policies, procedures and care pathways?
How will we know what is the best path of care for a service user?
What will our responsibilities be in relation to integrated care?

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Theme 2:Effective Care & Support: Reflective HIQA findings

- "The services <u>policies and procedures</u> were not updated in accordance with <u>recognised best practice</u>."

- "There was <u>no comprehensive assessment</u> of a resident, or a person who intends to be a resident, before or on admission."

- "The residents <u>care plans did not provide sufficient detail</u> to help guide best practice."

- There was limited evidence that <u>residents</u> and/or their families <u>were involved</u> in the review and development of care plans".

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Theme 3: Safe Care and Support

Standard: The service must continually look for ways to be more reliable and to improve the quality and safety of the service it delivers.

Challenges: How will we manage risks effectively?
How will we manage and respond to service user incidents?
How will we protect residents from the risk of abuse?
How will we collate service information and driving learning from the findings?
How will we implement proactive monitoring, analysis?

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Theme 3:Safe Care & Support: HIQA Findings

- "There was <u>no formal process</u> in place for <u>identifying current, new or changing risks</u> in relation to the service being provided.

- "The service <u>failed to notify</u> the Chief Inspector of all <u>Notifiable Incidents</u> within the required timeframe."

- "There was <u>no overall audit of accidents and incidents taking place</u>. An internal audit confirmed that <u>10% of reported falls did not contain any analysis</u>."

- "<u>Inadequate safeguarding</u> arrangements were put in place following <u>allegations of abuse</u>."

- "Medicinal products were <u>not administered</u> in accordance with the <u>directions of the prescriber</u> and with any advice provided by that resident's pharmacist regarding the appropriate use."

Theme 4: Better Health and Wellbeing

Standard: Enable a culture that promotes better health and wellbeing, enhances the care and support environment and improves the experience for service users.

Challenges: How will we promote better health and wellbeing while delivering care?
How will we collaborate with other service providers to promote the health and wellbeing of service providers?

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Theme 4: Better Health and Wellbeing: Reflective HIQA Findings

- "The designated centre <u>did not provide</u> adequate <u>information</u> or support <u>to improve the health and wellbeing of residents</u>, including smoking-cessation services."

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Theme 5: Leadership, Governance and Management

"The recurring issues of poor governance, inadequate safeguarding measures and institutional staff practices are difficult to overcome and require courage, strong leadership and a commitment to changing the culture of an organisation."

Phelim Quinn, Opening statement to the Joint Committee on Health (2017)

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Áras Attracta Review

"Governance and leadership arrangements, which were introduced in 2015, had failed to deliver the planned improvements in the overall quality of the service."

3.3 Outcome 14: Governance and management

Outcome 14: Governance and management

HIQA, 2017

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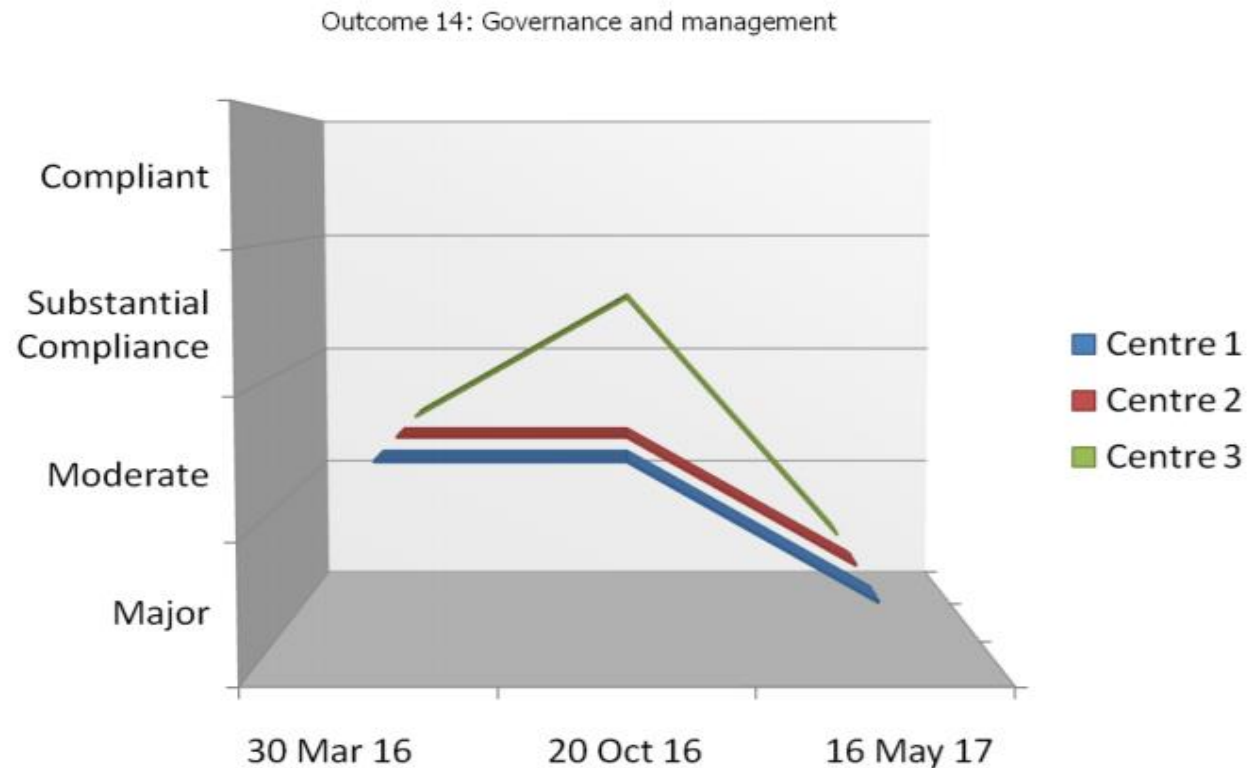
HIQA Regulation overview shows good governance is key to better care

Date of publication: Tuesday, 02 May, 2017

A review of the regulation of health and social care published today by HIQA has found that while the regulation of specific aspects of care is beginning to sustainably improve services in social care services and hospitals, some nursing homes, residential centres for people with disabilities and foster care services must take stronger measures to protect vulnerable people in their care against abuse, harm and exploitation.

The *Overview of 2016 HIQA regulation of social care and healthcare services* is the first combined analysis of its kind by HIQA, covering regulation of nursing homes, residential services for people with disabilities and children, and themed inspections of key areas of hospital practice. The report found much good work in Ireland's health and social care services.

Good Governance

- *"Governance Inspections found that complying with the governance outcome is the best indicator of quality across the whole service."*

- *"Our reports indicate a direct correlation between the quality of governance and leadership and the compliance levels within each centre.* High quality compliant providers demonstrated that they had good governance arrangements in place. They were clear about what they offered, how they provided their services and who had overall accountability for the quality and safety of care."

<div align="right">(HIQA, 2016)</div>

Theme 5 Leadership, Governance and Management

Standard: *The service is clear about what it does, how it does it, and is accountable.*

Challenges: How do we develop a robust governance framework that clearly specifies, delegates and integrates corporate and clinical governance?
Does our Statement of Purpose clearly communicate our service?
How will we illustrate implement objectives and plans for the service?
How will we ensure that our monitoring arrangements are sufficient to ensure continuous improvement of the service?
Are we managing our contractors appropriately?

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Theme 5: Governance: Reflective HIQA Findings

- "There was <u>no clearly defined management system in place</u> to ensure the service provided is safe, appropriate, consistent and effectively managed and the current <u>governance and management of the residential home was ineffective</u>."

- "<u>Managerial roles were not clearly outlined</u>, and the structure did not specify roles, and detail responsibilities for all areas of service provision."

- "The inspectors were concerned that the <u>monthly gathering of information</u> that had been in place <u>was discontinued</u>. There was no monthly data available for review on falls for the current year (KPI)."

- "No annual review was carried out on the quality and safety of the service provided."

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Theme 5: Governance: Reflective HIQA Findings

- "The service illustrated inadequate resources <u>and lack of an effective system </u>in place for the <u>supervision and oversight of staff</u>."

- "National Bureau vetting disclosure confirmations were absent from staff files"

- "<u>Contracts of care </u>did <u>not clearly detail the fees </u>being charged/may be charged."

- "<u>Audits carried out were not informative </u>and there was no outcomes or action plans documented."

- "There was <u>no evidence of learning or improvement </u>to practice as a result of the reviews."

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Theme 6: Workforce

Standard: *The Service must be able to assure the public, service users and their workforce that everyone working in the service is contributing to a high quality safe service.*

Challenges: Are our workforce competent for the service provided? Evidence?

Are our workforce appropriately trained? Evidence?

How can we ensure supervision, monitoring and review of staff to ensure they work within their competencies?

Are our work force adequately supported?

Have we a culture of openness and transparency within the service?

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Theme 6: Workforce: Reflective HIQA Findings

- "The <u>staff number</u> and <u>skill mix</u> was <u>not sufficient</u> at times to meet the needs of residents."

- "The staff roster was not recorded in a consistent manner"

- "Staff had <u>not received</u> up to date <u>mandatory education</u> and training that was appropriate to their role."

- "<u>Staff were not appropriately supervised</u> and this led to poor outcomes for residents."

- "<u>Agency staff</u> were used not just for unforeseen contingencies but on a <u>regular and consistent basis</u>."

- " The designated centre did not consider the risks associated with lone workers".

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Theme 7: Use of Resources

Standard: *The service uses the resources available to it impacts on the quality and safety of the care and support it provides. These resources include human, physical, financial and natural resources.*

Challenges: Do we have clear plans that take account of the funding and resources required to ensure viability of the service?

Do we complete regular evaluation of the efficiency and cost-effectiveness *technologies to maximise quality and safety* of the service and to inform investment decisions?

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Theme 7: Use of Resources: Reflective HIQA Findings

- <u>Management systems in place did not ensure</u> that the service provided was safe, appropriate and <u>adequately resourced</u> in terms of the staff and equipment utilised meet residents' needs.

- There is an <u>absence of management and supervision resources</u> in place between the frontline staff and the person in charge.

- The management team did <u>not complete any resource planning activities</u> to ensure <u>appropriate allocation of resources</u> to support the quality and safety of the service provided.

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Theme 8: Use of Information

Standard: *The Service uses information as a resource in planning, delivering, managing and improving the quality, safety and reliability of the service.*

Challenges: Do we have effective arrangements, including information and communication technologies systems, to collect and manage information to support effective decision-making?
Do we have effective arrangements in place for information governance and Personal Data Protections to meet GDPR?
Do we have effective arrangements for the management of service user records?

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Theme 8: Use of Information: Reflective HIQA Findings

- "Records were not consistently maintained to support the care provided to the residents on an ongoing basis."

- "The designated centre did not have effective information governance to ensure the protection of the resident's personal information."

- "There was no effective utilisation of the resident data to drive service development."

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Theme Description	Outcome	Outcome Description	No. of reports inspected against 15 reports	Fully Compliant	% of Services Non-Compliant	Substantially Compliant	NC (Moderate)	NC (Major)
Governance, Leadership & Management	1	Statement of Purpose	12	67 %	33 %	33 %	0 %	0 %
	2	Governance and Management	15	27 %	73 %	26 %	27 %	20 %
	3	Information for Residents	10	33 %	67 %	17 %	50 %	0 %
	4	Suitable Person in Charge	14	100 %	0 %	0 %	0 %	0 %
	5	Documentation to be kept at a designated centre	13	18 %	82 %	27 %	37 %	18 %
	6	Absence of the Person in Charge	9	100 %	0 %	0 %	0 %	0 %
Safe Care & Support	7	Safeguarding and Safety	15	23 %	77 %	23 %	38 %	15 %
	8	Health and Safety and Risk Management	15	15 %	85 %	18 %	62 %	8 %
	9	Medication Management	14	38 %	62 %	23 %	31 %	8 %
	10	Notification of Incidents	12	67 %	33 %	0 %	17 %	16 %
Effective Care & Support	11	Health and Social Care Needs	15	33 %	67 %	33 %	34 %	0 %
	12	Safe and Suitable Premises	14	8 %	92 %	17 %	25 %	50%
Person Centred Care & Support	13	Complaints Procedure	13	60 %	40 %	10 %	20 %	10 %
	14	End of Life Care	9	50 %	50 %	17 %	33 %	0 %
	15	Food and Nutrition	10	75 %	25 %	0 %	25 %	0 %
	16	Residents Rights, Dignity and Consultation	13	18 %	82 %	18 %	46 %	18 %
	17	Residents Clothing and Personal Property and Possessions	10	17 %	83 %	33 %	50 %	0 %
Workforce	18	Suitable Staffing	15	36 %	64 %	21 %	43 %	0 %

Residential Care HIQA Inspection Data Summary July to Sept 2017

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NICE Homecare Guidelines: Key Features

- Ensuring care is person centred

- Providing information about care and support options

- Planning and reviewing home care and support

- Delivering home care

- Joint working between health and social care

- Ensuring safety and safeguarding people using home care services

- Recruiting, training and supporting home care workers

NICE, 2015

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NICE Homecare Guidelines: Delivering Home Care

- Ensure that workers have <u>time to do their job</u> without being rushed or <u>compromising the dignity</u> or wellbeing of the person who uses services.

- Ensure <u>continuity of care</u> so that the person knows the home care workers and the workers are familiar with how that person likes support to be given.

- Consider the need for <u>independent advocacy</u>.

- Closely <u>monitor risks</u> associated <u>with missed or late visits</u> and take prompt remedial action.

NICE, 2015

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NICE Homecare Guidelines: Joint working between Health and Social Care

- Healthcare practitioners and home care workers <u>should liaise</u> regularly about the <u>person's medication</u>.

- Ensure health and social care practitioners working in primary and secondary care liaise with home care workers to provide integrated, person-centred support.

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Take your Positions….

- Take our cues from the residential sector

- Legislation is KING!

- Standards and guideance provide the destination – we must decide the mode of transport.

- *"Service providers may choose different approaches but will still need to demonstrate that they are meeting this Standard."* (Safer Better Healthcare, 2012).

  - Effective, proven tools and methodology

  - Confident in our justification in applications

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"We have a good laugh which is what I need, they do the job, but we joke and laugh at the same time. It is important because when you are like us, you don't go out, you don't … see anybody.

They are friends."

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Questions and Answers

www.hci.care

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