

EVOLUTION NOT REVOLUTION?

# EVOLUTION NOT REVOLUTION?



What are the new outcome descriptions and the 'rules' for calculating star ratings? Les Bright aims to explain them in an accessible style.

**All change, or no change?**

It's tempting to start an article like this by suggesting that

'there's nothing new under the sun', partly to moderate the responses that could emerge from managers concerned at yet more changes to key documents, but also as a

reasonably accurate analysis of the present situation.

When the Commission for Social Care Inspection (CSCI) launched a consultation on their plans to implement a new

approach to reporting National Minimum Standards (NMS) outcomes, alongside of the introduction of star ratings they posed a number of questions, most critically 'have

## EVOLUTION NOT REVOLUTION?

we described the standards in a way that focuses on what matters to people' and 'have we used them in a way that is understandable and fair?' As will become clear I think it has passed both those tests, in some cases with distinction.

However, it could be suggested that this work is a poor substitute for the review that ministers had promised and which began with a series of stakeholder meetings more than two years ago. At that time there was the likelihood of a more comprehensive revision, building on and reflecting the experiences of inspectors, the inspected and people living in care homes, while also aligning any changes with wider health and social care policy outlined within *'Our Health, Our Care, Our Say'*. This would have had the effect of underlining and strengthening the links to other areas of service and the wider wellbeing agenda. But politics and parliament has intervened and such changes now await the creation of the new regulator that is likely to begin operating from the spring of 2009. Work is already underway, looking at the Regulations and how they will fit in to the new legislative framework, so expect more changes to come.

### Aligning standards

Opinion has been divided on the desirability or achievability of one set of standards covering all adults, regardless of their age and the next review may finally deal with that issue. For now, however, there are two sets of NMS for care homes and therefore two new sets of descriptions. When I talked to one of the CSCI's senior managers she told me that it was not possible to create new standards or significantly change the existing set. 'We have tried to weave in person-centred planning, human rights, equality and diversity in the way that we have described outcomes so that it is possible

to see more clearly what a good service will look like.'

Providers will no doubt welcome attempts at making it easier and clearer to see what a good service will look like – Plain English is always

welcome! But as ever the challenge to the CSCI and its inspectors is to be able to demonstrate consistency in the way that they form their judgements between homes and between area offices.

Everyone I've spoken to, whether they run a small home, are part of a bigger chain, operating in the commercial or charitable sector, has made it clear that consistency is the prize that's so near yet so far away. The CSCI says that it wants the star rating process to be transparent and is carrying on with a programme of training for its staff to develop their skills further in order that they can feel as confident in their judgements about homes as potential users hope to be when making their decisions.

Outcomes remain grouped as before and this is linked to the way in which star ratings are to be calculated (see box adjacent).

### Choice of home

The first group of standards for older people's services, relating to choosing a home, clearly benefit from the work that the CSCI has recently undertaken and published, looking at how people are enabled to make good decisions with the fullest possible knowledge and clarity about the terms and conditions of their residency.

It seemed to me that because this group of outcomes also relates to people receiving intermediate care the word 'staying' has been used in preference to living in a home, but when I read across to other adults, where there is no similar concept it was still used. And then I realised that it was the form of words used throughout both documents to introduce each of the new descriptions.

Perhaps I was searching for a nit to pick, but I did feel that it makes more sense - and keeps faith with 'saying what you mean and meaning what you say' - to describe residents as living in a home, after all that is the situation we are all striving for, where residents feel that a home is their home.

Having got that off my chest it should be acknowledged that this opening section clearly calls for an assessment of ►

## THE RULES

### 3 STAR Excellent service

- Services cannot be 3 star if any 1 of the 7 outcome groups is scored as being poor; and
- Outcomes relating to safety and management must be at least good; and
- At least one outcome relating to safety and management must be excellent; and
- At least 50% of outcome groups must be judged as either good or excellent, and
- A service cannot be excellent at the first key inspection following registration.

### 2 STAR Good service

A 2 star service may have some excellent outcomes

- Services cannot be good if any outcome group is scored as poor; and
- Outcomes relating to safety and management must be at least good;
- At least 50% of outcome groups must be judged as at least good.

### 1 STAR Adequate service

A 1 star service may have some outcomes that are good, even excellent.

- Outcomes involving safety and management must be at least adequate, and
- At least 50% of the outcome groups must be at least adequate.

### 0 STAR Poor

A '0' star service may have some strengths. It may have some good or even excellent outcomes, or it may be a generally low performing service. The key issue is that it does not perform as a safe service.

- One or more outcome groups that focus on safety and management are judged poor or
- It does not meet the rules for a 1\* - 3\* service.

EVOLUTION NOT REVOLUTION?

► care needs and a contract or statement of terms and conditions – setting out how the individual will be looked after, how much they will pay and what is included in the

test of focusing on what matters to people - residents and their families - conveying critical information in a way that is easy to understand.

It is encouraging to see an

independence in a few crisp, concise sentences. It does this whilst also highlighting the importance of meals and mealtimes in a care environment.

to upholding legal rights, including participation in elections, the original standards and therefore the new description, for adults aged 18 – 65 has no such statement. That should not however cramp anyone's style and managers setting out to demonstrate that they are running an excellent service will no doubt already have ensured that residents are enabled to register to take part in local and national elections.

“ It could be suggested that this work is a poor substitute for the review that ministers had promised more than two years ago. ”

cost. It is admirably clear and leaves home managers with no room for misunderstanding what is required.

**Health and personal care**

These five standards address the principal reasons why people seek a place in a care home and in my view pass the

explicit commitment to involving residents and family or friends in the making of care plans as this represents the foundation on which so much else is built.

**Daily life**

Here, the outcome description manages to capture diversity, equality, individuality and

**Complaints and protection**

This 'group' is expressed in simple, straightforward terms, leaving managers in little doubt as to their responsibilities. There is one major difference between the standards from which these outcomes are derived, so while those relating to older people make reference

**Environment**

This group is a triumph for clear drafting in having captured eight standards in a 16-word description!

**Staffing**

This description is not as short but is nevertheless concise in

**David & Company**  
 Selling private care homes for 30 years  
 Discreet and confidential valuation visits  
 Reduced commission terms for NCA and RNHA members  
 for results contact  
 Cathy Edwards on 020 8336 0055  
 www.davidandco.co.uk

**CoolCare does more!**

**coolblue**  
 IT SOLUTIONS

- Invoicing
- Payroll
- Staff Management
- Financial Reporting
- Care Planning
- Forecasting
- Time and Attendance
- Rota Management
- Hardware/Support

To find out more:  
 t: 08000 742 339  
 www.coolblueit.com

**Being**  
 An approach to understanding dementia

**A ground-breaking approach to life and dementia**

The latest innovative publication from Alzheimer's Society focuses on Being rather than Doing in person-centred dementia care.

It explores the idea that feelings matter most in dementia care and demonstrates how this approach can be applied to our lives and our work.

New from the organisation that's leading the fight against dementia.  
 Call 01736 336 995  
 £20 inc p&p

Leading the fight against dementia  
**Alzheimer's Society**

## EVOLUTION NOT REVOLUTION?

covering issues as diverse as the quantity and competence of staff employed; the need to conduct criminal record and other necessary checks while also noting the need for staff to be trained and supported.

Again the language is carefully chosen so that residents and their families can make more sense of what is meant by '...enough competent staff on duty at all times',

matters out – but that's for another day.

### How these outcomes link to 'star' ratings

The CSCI has published the rules that will be used to calculate a quality 'star' rating and all providers should, by now, have received a letter from the Chief Inspector



rather than '...the numbers and skill mix'.

### Management and administration

Eight standards are compressed into four sentences, without losing any meaning and indeed perhaps even gaining some along the way. Once again it is possible to identify divergences between the two sets of standards (older people and other adults) and I found myself wishing it had been possible to sort these

explaining the process and also describing how to take up any concerns providers may have about the judgements formed.

CSCI's website contains further information and the link below will take you to 'frequently asked questions'.

[http://www.csci.org.uk/professional/care\\_providers/all\\_services/inspection/ratings\\_and\\_reports/quality\\_ratings\\_for\\_care\\_servi/your\\_questions\\_answered.aspx](http://www.csci.org.uk/professional/care_providers/all_services/inspection/ratings_and_reports/quality_ratings_for_care_servi/your_questions_answered.aspx)

CMM

**Les Bright is an independent social care consultant.**  
Email: [brightles@aol.com](mailto:brightles@aol.com)

Before we designed our latest **Radio Nurse-Call System** we consulted the real experts - **YOU**

After all, you provide care everyday and know what is required.



**STOP PRESS!**

Place an order with us before December 2007 and we will pay your VAT!

- ✓ Staff attack
- ✓ Protection for wandering residents
- ✓ Nationwide 24 hour Service
- ✓ Call-Logging facility
- ✓ Staff Paging

**medicare**  
SYSTEMS

**Freephone: 0800 849 5123**  
[www.medicareystems.co.uk](http://www.medicareystems.co.uk)