

**CLACKMANNANSHIRE AND STIRLING**

**HEALTH AND SOCIAL CARE PARTNERSHIP**

**Early Indicators of Concern**

**Guidance**

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| Version Number: | 1 |
| Version Date: | 28 July, 2020 |
| Replaces Version Dated: | Not Applicable |
| Contact Officer: | Graeme Hendry |



**Purpose**

To assist staff members to identify ‘low level’ indicators of concern which may, if unresolved, affect the safety and wellbeing of supported people in care home settings.

To ensure staff, working with a supported person in a care setting, are aware of the actions to be taken to develop consistent practice across the Clackmannanshire and Stirling areas.

**Background**

This guidance has been developed following research into cases where harm took place in residential services and nursing homes for older people. The research identified a series of early indicators of harm. Where there is a pattern or cluster of these indicators in a service people become more at risk of harm. The overall aim is to contribute towards the prevention of the harm of residents in care settings. *(University of Hull, 2012)*

The indicators are organised into six themes which may be used in conjunction with a matrix to collect information and reflect on the risks that might be present in a service.

Harm may be more likely to occur when there is a pattern or cluster of concerns identified across the different themes.

**Early Indicators of Concern Tool**

The indicators can be used in one of the following three ways:

* An individual can use the matrix to record and structure concerns
* A group of people including families and professionals can use the matrix to collect concerns about a service from different sources
* A team from a service can use the matrix to review and reflect on their own service.

Nb. A pattern of concern is not proof of harm, as harm can also happen where indicators are not apparent.

This guidance is designed to help practitioners organise their thoughts and to *RECORD – REFLECT – REPORT* into local Team Meetings and potentially thereafter to the Care Home Practitioners Group.

**All concerns about actual or suspected harm or neglect must be reported immediately through submission of an Adult Protection 1 form in accordance with Adult Protection processes.**

The six themes are:

1. **Concerns about management and leadership**. These are the people who manage the home and other managers within the organisation.
* What they are doing, or not doing, that might put people at risk of harm?

1. **Concerns about staff skills, knowledge and practice.** These are the people who work in the home.
* This includes, care workers, registered nurses, managers and other non-care staff who work within the service.
* What are their skills and practice like?
* What are they doing that might put people at risk of harm?
1. **Concerns about residents’ behaviours and wellbeing**. These are the people who live in the home or service.
* How are they?
* Are they behaving in ways which suggest they may be at risk of harm?
1. **Concerns about the service resisting the involvement of external people** **and isolating individuals.**
* Are the people in the home isolated?
* Is it a “closed” or an “open” space?
* Does the service resist support from external agencies or professionals?
1. **Concerns about the way services are planned and delivered.**  This is about the way in which the service is planned and whether what is actually delivered reflects those plans. For example:
* Are people receiving the levels of care which have been agreed?
* Are the residents a compatible group?
* Is the service clear about the kind of support they are able to deliver?
1. **Concerns about the quality of basic care and the environment.**
* Are basic needs being met? What is the quality of the accommodation like?

The matrix may be completed after one visit or several visits and should be shared with a manager for appropriate and proportionate action. Ordinarily this would mean a referral to the Care Home Practitioners Group.

*Flowchart for Early Indicators of Harm*

**CARE HOME PRACTITIONER FORUM**

Care Home Practitioner Forum (CHPF) is made up of a group of senior managers and partner agencies across the Health and Social Care Partnership who will meet and assess risk where specific Care Homes have been identified in the EIOC process.

The group will discuss appropriate lead and actions or in some cases may escalate for possible Large Scale Investigation

**Contract & Commissioning**

**Community**

**Liaison Nurses**

**Police**

**Scotland**

**MH & LD**

**Services**

**Care Inspectorate**

**Community & District Nursing**

**Chart Team**

Early Indicators of Harm/Concern in Care Homes should be a standing agenda item at each agencies team meeting. The manager should then share this information and consider referral of the completed EIOC report form to the CHPF for further action. See Appendix A

Each practitioner who visits the Care Home (CH) regularly may use the matrix to record early indicators of concern and to discuss their concerns at team meetings and/or with their manager. Manager will refer to CHPF via email using the EIOC reporting form.

Early Indicators of Harm/Concern bespoke training will be provided to all teams identified above and will include aims, objectives and process for implementing the framework.

*Matrix for Early Indicators of Harm*

**Name of Service:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of person completing matrix:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Concerns about management and leadership.** | **Concerns about staff skills, knowledge and practice.** | **Concerns about residents’ behaviour and wellbeing.** |
| **Concerns about the Service resisting the involvement of external people and isolating individuals.**  | **Concerns about the way services are planned and delivered.** | **Concerns about the quality of basic care and the environment.**  |

**EARLY INDICATORS OF CONCERN AND INQUIRY REPORT FORM**

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| --- |
| **1. ADDRESS DETAILS** |
| Date concern was received: |  | Number of Previous Concerns: |  |
| Address Details |  | Accommodation type: |
|  |  | Nursing Home |[ ]
|  |  | Residential Care Home |[ ]
|  |  | Inpatient Unit |[ ]
| Post Code: |  | Supported Living |[ ]
| Tel Number: |  | Other: Please specify: |  |
|  |
| Details of Worker completing this form: |
| Name: |  |
| Designation: |  |
| Agency: |  |
| Tel Number: |  |
| Email Address: |  |
|  |
| **2. DETAILS OF THE SOURCE/REPORTING OF THE CONCERN** |
| Details of the person reporting the concern: |
| Name: |  |
| Designation: |  |
| Agency: |  |
| Tel Number: |  |
| Email Address: |  |
|  |
| Concern reported to: |
| Name: |  |
| Designation: |  |
| Agency: |  |
| Tel Number: |  |
| Email Address: |  |
| The concerns were observed during a routine review meeting held on (date): |  |

EARLY INDICATORS CONCERN AND INQUIRY REPORT FORM

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| **3. EARLY INDICATOR OF CONCERN – Please select all that apply** |
| **3.1** |[ ]  **Concerns about Management, Leadership and Organisation** |
| a |[ ]  There is a lack of leadership by managers, for example, managers do not make decisions, set priorities or ensure staff are doing a job properly. |
| b |[ ]  The service/home is not being managed in a planned way, but reacts to problems or crises. |
| c |[ ]  Managers appear unaware of serious problems in the service. |
| d |[ ]  The manager is new and doesn’t appear to understand what the service is set up to do. |
| e |[ ]  A responsible manager is not apparent or available within the service. |
| f |[ ]  There is a high turnover of staff or shortage of staff. |
| g |[ ]  The manager does not inform Social Work that they are unable to meet the needs of specific individuals. |
| Comments: |
|  |
| **3.2** |[ ]  **Concerns about Staff Skills, Knowledge and Practice** |
| a |[ ]  Staff appear to lack the e information, skills and knowledge to support people with specific needs e.g. dementia, profound and multiple disabilities, mental health, etc. |
| b |[ ]  Staff appear challenged by some individual’s behaviour and do not know how to support them effectively. |
| c |[ ]  Members of staff use negative or judgmental language when talking about individuals. |
| d |[ ]  Record keeping by staff is poor. |
| e |[ ]  Communication across team is poor. |
| Comments: |
|  |
| **3.3** |[ ]  **Behaviour, interaction and well-being of Residents – One or more of the residents:** |
| a |[ ]  Show signs of injury through lack of care or attention. |
| b |[ ]  Appear frightened or show signs of fear. |
| c |[ ]  Behaviours have changed. |
| d |[ ]  Moods or psychological presentations have changed. |
| e |[ ]  Behaviours potentially put themselves or others at risk. |
| Comments: |
|  |
| **3.4** |[ ]  **Concerns about the service resisting the involvement of external people, isolating individuals and lack of open-ness** |
| a |[ ]  Managers/staff do not respond to advice or guidance from practitioners and families who visit the service. |
| b |[ ]  The service is not reporting concerns or serious incidents to families, external practitioners or agencies. |
| c |[ ]  Staff or managers appear defensive or hostile when questions or problems are raised by external professionals or families. |
| Comments: |

EARLY INDICATORS CONCERN AND INQUIRY REPORT FORM

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| **3.5** |[ ]  **Concerns about the way services are planned and the delivery of commissioned support** |
| a |[ ]  There is a lack of clarity about the purpose and nature of the service. |
| b |[ ]  The service is accepting individuals whose needs they appear unable to meet. |
| c |[ ]  Individuals’ needs as identified in assessments, care plans or risk assessments are not being met. |
| d |[ ]  The layout of the building does not easily allow individual to be supervised and adequately supported to socialise and engage safely with others. |
| e |[ ]  Agreed staffing levels re not being provided. |
| f |[ ]  Staff do not carry out actions recommended by external professionals. |
| g |[ ]  The service is “unsuitable” but no better option is available. |
| h |[ ]  The collective needs of individuals/service user group appear to be incompatible. |
| Comments: |
|  |
| **3.6** |[ ]  **Concerns about the quality of basic care and the environment** |
| a |[ ]  The service is not providing a safe environment |
| b |[ ]  There is a lack of activities or social opportunities for individuals. |
| c |[ ]  Individuals do not have as much money as would be expected. |
| d |[ ]  Equipment is not being used or is being used incorrectly. |
| e |[ ]  The home is dirty and shows signs of poor hygiene. |
| f |[ ]  There is a lack of care of personal possessions. |
| g |[ ]  Support for the individuals’ to maintain personal hygiene is poor. |
| h |[ ]  Essential records are not kept effectively. |
| i |[ ]  Individuals’ dignity is not being promoted and supported. |
| Comments: |
|  |
| **3.7** |  | **Other concerns – please specify:** |
|  |

PLEASE DISCUSS EARLY INDICATORS OF CONCERN AND ANY REMEDIAL INTERVENTION PURSUED WITH YOUR LINE MANAGER **PRIOR** TO SUBMITTING THIS FORM.

ALL FORMS SHOULD BE SENT TO - carehomehub@stirling.gov.uk

EARLY INDICATORS OF CONCERN AND INQUIRY REPORT FORM

Section 4 for completion by recipient of early indicator of concern

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| **4. INITIAL INQUIRY:** |
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| **Brief History and Outline of Current Concern:** (please indicate any previous concerns and actions taken including any previous or current social work contact, with whom this has been discussed i.e. Care Home Liaison Team, Police, GP, Occupational Therapy, Care Inspectorate etc.) **Information gathered:****Outcome of Inquiry:****Recommendations:** |
| **5. LIST OF POSSIBLE OUTCOMES/PROCEDURES – please select one:** |
|  |  | Y or N  |
| A | ASP procedures initiated for individual service users identified as being at risk of harm  |  |
| B | Large Scale Investigation initiated  |  |
| C | The concern has been discussed with the management of the service and appropriate action taken  |  |
| D | The regulatory body has been advised of concern for action as appropriate  |  |
| E | Police Scotland have been informed of concern as evidence that criminality may have taken place |  |
| F | Procurement Advisor within Falkirk Council has been informed and will monitor/review situation  |  |
| G | Concerns will be discussed in more detail by MDT membership at next EIOC meeting  |  |
| F | Other – please specify:  |  |

**PLEASE PROVIDE FEEDBACK TO REFERRER**