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Regulator Quality Ratings and Care Home Residents’ quality of life

ILPN Conference, 11th September 2018, WU Vienna

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THE STUDY

• Measuring Outcomes of Care Homes study (MOOCH).
• Funded by NIHR School for Social Care Research.
• May 2015- Dec 2018.
• Aims:
  • Understand the quality of life of care home residents.
  • Explore the relationship with staff factors, such as job satisfaction (not presented here today).
  • Explore the relationship with the new regulator quality ratings (controlling for confounding factors).

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BACKGROUND

• Care Quality Commission (CQC) undergone period transformation, moving from basic min standards to a system based on quality.
• Aim to inform user choice and drive up quality.
• October 2014 - February 2017 all services given a rating
  • Outstanding, good, requires improvement or inadequate.
• But how well do quality ratings reflect the quality of life of residents?
• Previous research showed relationship in residential but not nursing homes (Netten, Trukseschitz et al, 2012).
Study was powered to detect differences in SCRTQoL for a sample of 210-340 residents in 30-35 homes.

Random sample of homes in 2 local authority areas in England, stratified by registration category.

119 homes were invited to take part to achieve sample of 34 homes (29% response rate).

Within homes, convenience sampling to recruit 5-10 residents per home (18-36% of an average sized home).

In very large homes, more were recruited to achieve similar proportions.

All permanent residents eligible to participate, including those with dementia.
Cross-sectional study (April 2016-November 2017):

• Questionnaires completed by care staff about residents’ needs and characteristics.

• Researchers collected data about residents’ social care-related quality of life using the ASCOT care home tool.

• Quality ratings still being awarded during fieldwork.

• We recorded the quality rating made closest to our data collection in each home and controlled for time differences in analysis.
HOME CHARACTERISTICS

• 34 care homes
• 20 nursing, 14 residential
• Mean size = 50 beds (min 20- max 120)
• 80% were for-profit, which is representative
• Recruited a range of CQC ratings
% of homes in each CQC rating category

- Inadequate: 2% (CQC England), 3% (MOOC)
- Requires Improvement: 20% (CQC England), 26% (MOOC)
- Good: 76% (CQC England), 62% (MOOC)
- Outstanding: 2% (CQC England), 9% (MOOC)

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# Resident Characteristics

<table>
<thead>
<tr>
<th></th>
<th>Sample</th>
<th>Requires Improvement</th>
<th>Good/Outstanding</th>
<th>(X^2)</th>
<th>(p)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female, n (%)</td>
<td>197 (67)</td>
<td>65 (70)</td>
<td>132 (66)</td>
<td>(X^2=.44)</td>
<td>(p=.51)</td>
</tr>
<tr>
<td>Mean age (SD)</td>
<td>85 (8.66)</td>
<td>84 (8.30)</td>
<td>85 (8.85)</td>
<td>(X^2=-.35)</td>
<td>(p=.73)</td>
</tr>
<tr>
<td>Mean independent ADLs (SD)</td>
<td>3.57 (3)</td>
<td>3.59 (3.13)</td>
<td>3.57 (2.88)</td>
<td>(t=.05)</td>
<td>(p=.96)</td>
</tr>
<tr>
<td>Dementia, n (%)</td>
<td>152 (52)</td>
<td>59 (63)</td>
<td>93 (47)</td>
<td>(X^2=5.03)</td>
<td>(p=.03)</td>
</tr>
<tr>
<td>Mean DCDS (SD)*</td>
<td>8.54 (9.11)</td>
<td>9.68 (9.00)</td>
<td>8.00 (9.13)</td>
<td>(t=1.43)</td>
<td>(p=.15)</td>
</tr>
<tr>
<td>Mean SCRQoL (SD)</td>
<td>0.77 (.16)</td>
<td>0.71 (.17)</td>
<td>.79 (.16)</td>
<td>(t=-3.73)</td>
<td>(&lt;.001)</td>
</tr>
</tbody>
</table>

*higher scores = worse cognition or communication

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Residents’ Care-related Quality of life

- OUTSTANDING/GOOD
  - Residential: 0.8
  - Nursing: 0.78

- REQUIRES IMPROVEMENT
  - Residential: 0.72
  - Nursing: 0.71

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Do people living in “outstanding and good” care homes have better care-related quality of life than people living in homes “requiring improvement”?
 FINAL MULTILEVEL MODEL

Individual (resident) level

- Age (NS)
- Gender ($p<.01$)
- ADL count ($p<.01$)
- Dementia ($P<.01$)
- Communication ($p<.01$)

Contextual (home) level

- Registration (NS)
- No. of Beds (NS)
- CQC Rating ($p<.01$)
CONCLUSIONS

• First look at the relationship between new CQC quality ratings and residents’ quality of life.

• Results indicate positive relationship with better quality of life in outstanding and good homes.

• Quality ratings are used by the public as an indicator of residents’ quality of life so this is promising.

• But not a national study and no homes rated inadequate (very difficult to recruit and capture these homes)

• Important to try and replicate these findings for greater generalisability.
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