with homes for older people achieving the lowest score of 58.8% in this domain. Most of homes were using a validated risk assessment tool on initial assessment and making appropriate referrals to other healthcare professionals where required. Of those that failed to achieve the standard, many were failing to demonstrate they had appropriate care plans in place or undertook regular evaluations of the care plan.

**INNOVATION**

![FIG 2. PERCENTAGE OF HOMES PASSING AND FAILING EACH DOMAIN](image)

**ADMISSION**

Overall, 58% of care homes achieved the required pass rate for admission assessments. Learning disability homes achieved the highest results, with 75% achieving the standard. However, only 52% of homes registered to provide dementia care achieved the pass mark.

Again, a similar pattern of wide ranging results across the county was observed, from 83% of homes achieving the pass rate in one area to just 10% in another. A total of 80% of homes did not identify infection control issues on the initial assessment and 42% also failed to record baseline clinical observations on admission.

**CONCLUSION**

This baseline audit has shown the wide differences in clinical standards achieved by care homes across NHS Derbyshire County. Examples of good practice were observed in the use of assessment tools, prompt referrals to specialist healthcare professionals and the use of care pathways. It has also highlighted the areas where homes need to improve and need support, such as initial assessments on admission, falls prevention and standards relating to dementia care.

Overall, homes that failed to achieve the 80% pass mark did so largely because they did not reassess residents and evaluate their care regularly. The results show that, where targeted work has been widely undertaken by care homes in areas such as end of life care, infection control and tissue viability, higher standards have been achieved. Many examples of best practice have been captured by the auditors, which can be shared across the health community. These include good examples of record keeping and paperwork, and partnership working with the wider primary care team.

The results will be shared with care homes individually, enabling them to benchmark themselves within their localities and countywide. Staff will be able to see how well they performed against other homes, which were anonymised. The information in the form of the audit report has been made public, but individual homes have not been identified at this stage as we are still working out how to do this jointly with our local authority colleagues. In addition, targeted action plans will, we hope, lead to improvements in care provision.

This work highlights the importance of understanding the quality of care being delivered within care homes. It also shows the difficulties and challenges faced by nurses working within this sector who often report feelings of isolation and frustration as they are working outside the NHS. Access to training and information can be difficult at times and the care needs of their residents are becoming increasingly complex.

Good links and effective transfer of information between care homes and PCTs, general practice and community and acute services are vital to improve quality of care.

A quality schedule based on evidence based practice will ensure all parties understand the level of care that is being commissioned. National and regional work is under way to develop clinical quality standards and service specifications for people in different client groups living in care homes who receive continuing care funding. These standards will sit within a national contract for care homes being developed by the DH.

It is anticipated this will be finalised in 2010. This will allow for a more consistent approach in care homes across the county and will benefit both commissioning authorities and providers of residential care in developing closer working relationships where these may have not previously existed. 

**REFERENCES**

- Department of Health (2005) Essential steps to Safe, Clean Care. tinyurl.com/spreadofinfection