

Cyngor Sir CEREDIGION County Council

REPORT TO: Healthier Communities Scrutiny Committee

DATE: 6 October 2021

LOCATION: Zoom

TITLE: Domiciliary Care Provision

PURPOSE OF REPORT: To update the committee on the current position re Domiciliary care and service developments.

REASON SCRUTINY HAVE REQUESTED THE INFORMATION: For update.

BACKGROUND:

In Ceredigion the domiciliary care provision has over a number of years continued to be met through the Commissioning Framework for Procurement for the provision of care to individual service users. This process is known as E Tender. All providers in Ceredigion are registered to the Framework having passed through a series of Procurement requirements and are then able to contract for services with Ceredigion County Council.

Once a social worker has identified eligible care needs following a Social Services and Wellbeing Act Assessment, a service request is made. Once confirmed the notice is placed on the E Tender Procurement Portal on Sell2Wales. The providers who are registered to deliver care within Ceredigion are then able to look at the packages of care that are required in the community and submit offers to deliver that care. These offers are made to the family and once accepted care will be arranged to commence. If a family refuse the offer (for example if care times do not meet their personal preference and a compromise is not possible), then the care request will remain on procurement pending an alternative offer. The care needs for a care and support package for highly complex care needs may require 2 care staff up to 4 times a day, 7 days a week, 52 weeks a year, and others care needs will also range throughout the spectrum of needs through to lower level interventions once or twice a week to assist with bathing/showering as an example. Care and Support at home has a focus on delivering skills to provide personal care and wellbeing needs.

Throughout the Covid 19 pandemic the Domiciliary Care Providers have worked tirelessly to sustain the care and support needs of our communities. Their staff continued to deliver to those vulnerable individuals in the face of increased risks to themselves and their families, in maintaining close contact care and support and their efforts have been and continue to be recognised as exceptional in unprecedented times.

To support that intensive high risk working environment, Ceredigion County Council established the PPE Hub (Personal Protective Equipment) Hub and throughout has been delivering the PPE directly to our Care Providers for their staff. Clear Protocols, Risk Assessments and Business Continuity Plans were put in place by each agency, supported by guidance and information from Ceredigion County Council, Hywel Dda University Health Board and Public Health Wales. Ceredigion County Council officers established a weekly “virtual” meeting hub using Teams and providers were encouraged to meet to collectively and collaboratively receive and share information as the pandemic unfolded. These meetings continue to play an important part in maintaining a clear understanding of the impacts and pressures the last 18 months have brought to bear on these frontline care providers. Providers also have daily phone calls from officers and they collect detailed data on their service pressures weekly.

Our in house Enablement Service has also played a hugely significant part in the last 18 months in supporting our providers, and indeed have been a core service in bridging many of those with long term care and support needs, increasing additional capacity in house to support discharges from Hospitals. This has been in addition to whenever capacity allowed, taking on additional cases in need of support where the dom care providers were struggling to free up capacity in the short term. All this in addition to maintaining the Enablement focus of supporting individuals to return to independence by the provision of short term 1-1 support and encouragement to build capability to undertake as much of their own care as their condition allows, a hugely successful model of care we need to maintain.

Targeted and Short Term Services instigated a Weekly Summary Overview Report of Domiciliary Care in September 2020 and this included Enablement from January 2021. This data breakdown has enabled us to track and analyse the collated sector waiting list and service delivery data week on week and is internally shared with key officers, and is valuable insight to inform daily discussions with Hywel Dda Health Board. A snapshot briefing is prepared for Sian Howys and Donna Pritchard every Friday afternoon and from June 2021 also with Peter Skitt and Jina Hawkes, County Management HDUHB. From August 2021, a weekly template is also completed with regional colleagues where we can provide the overview of numbers waiting for the provision of commissioned care at home, and identify the location of support they may be in receipt of in the interim i.e. short term residential placement, Enablement support at home, third sector support, family support etc. Additionally we report on the RAG status of each provider as to their capacity level. This is discussed every Monday regionally at the Integrated Executive Group (IEG) as to the overview of the region’s Dom Care sectors. Twice weekly an officers speak with each provider to review their “SitRep” report which reflects their self-assessment of their current workforce, Covid concerns, and capacity position as well as their PPE needs.

During the latter part of 2020, the Dom Care Task and Finish Group was reconvened to look at the evolving position of the market and the growing understanding of the impact of Covid 19 on the care sector, as well as considering its future recruitment and retention. Ceredigion

had also seen a number of providers identify in recent months that the sustainability of their business model within county was becoming significantly more challenging financially. To this background the Dom Care Task and Finish Group presented a report to Leadership Group identifying two key findings:

1. The Enablement Service had increasingly taken “bridging” care as a result of the fast turnaround WG “Discharge to Recover and Assess model, requiring rapid discharges to the community pre-assessment of ongoing care needs, with these needs and onward care support being identified and sourced only once already in the community. This had created a significant pressure point on the Enablement Service. The Report identified that an extension to the Enablement Service was crucial to both meet this demand, and to assess the increased pressures and demands post Covid 19 that were leading to a growing waiting list for commissioned domiciliary care at home. It was agreed that a further report would be developed under the Through Age Wellbeing model services transformation. This work to be led by Donna Pritchard, Heather West, Dawn James and Kirsty Jenkins, to include analysis of management structure, frontline staffing and costing options to be considered as a permanent extension and expansion of a long term care needs “bridging service” within the current Enablement Service as in house Integrated Care Service, allowing for additional capacity building.
2. In parallel, the Targeted and Short Term Service under which the Enablement Service and the Dom Care Co-ordination sits, developed and piloted a “hybrid” model of delivery, agreed on a voluntary short term basis with the staff. The Registered Manager divided the county into 4 patch based geographic areas each with a Care Coordinator. To achieve this two Dom Care Coordinators were brought across to join the Enablement Care Coordinators. Each Coordinator being responsible for the Enablement staff in their patch, the Discharge to Recover and Assess provision following hospital discharge, the liaison with the Dom Care providers delivering in that patch and the long term care “bridging” care needs of individuals assessed as a priority need. The Coordinator working with the Porth Gofal Triage Team continued to focus on discharges and referrals from the community in preparation for allocation to the patch Coordinators. A shared Coordinator providing a contact point for queries, concerns and issues for commissioned providers and maintaining the daily providers service reports throughout the Covid period. The Lead Dom Care Coordinator was then able to focus on the daily service requests, the tendering process, seeking providers for care needs advertised and monitoring hours delivered as well as facilitating updates on the waiting list.
3. The Enablement Service is also the LA host employer for the Ceredigion pilot of the Health and Social Care workers, for service users at Porth Gofal Triage, identifying suitable cases where a shared worker can support both social care and health care assistant tasks in one visit to the household over a short period of intervention. These staff are now undergoing intensive training and will deploy in September until the end of March in the first instance.
4. The Domiciliary Care Framework is due for re-tender and it was agreed that a specific workstream with corporate Commissioning would be undertaken, to be led by Arwyn

Morris and George Ryley with additional input from Duncan Hall, Ywain ap Dylan and a small Task and Finish Group. Further analysis of the dom care provider market to be undertaken to inform the development of the next service specification prior to re-tendering, taking account of the 2020 WG reports Rebalancing Care and Support, Cost of Care, Outcomes Commissioning in Domiciliary Care and wider Local Authority evidence across Wales.

CURRENT SITUATION:

1. The Domiciliary Care market position in Ceredigion worsened rapidly and significantly over the summer period. This is a picture replicated across the region, Wales and the UK. Dom Care Providers are all reporting loss of staff, impacting on the availability of a trained, qualified workforce. Providers are universally reporting that they face extensive recruitment challenges, and very low uptake to repeated recruitment campaigns. Longstanding staff are leaving the industry and new staff are not being attracted to the industry. Staff are reporting they are physically and mentally exhausted by the pandemic demands, the pressure on their families, the work life balance, the unsocial and isolating nature of the work, the prevailing terms and conditions and facing another long winter ahead.
2. As a result of these increasing pressures on the dom care providers, many reported being unable to take on new packages of care from the waiting list as they struggled to sustain existing commitments. Even when a care package comes to a natural end, providers have become reluctant to fill the gap, identifying the risks to delivery and business sustainability. Of those that do agree to accept additional care packages, it is only often as a result of moving visit times around to individuals to try to free up a gap for a new case to be fitted into a route, this is destabilising for service users, staff and families. It may also involve permanently handing back a package that needs greater input, or travel distances. As a consequence of more staff leaving across agencies, dom care providers are reviewing their geographic routes, the mileage and time distances, the frequency of calls, the number of staff required and the complexity of presenting physical and mental health care needs. Over the summer period there have been a significant number giving notice to Ceredigion County Council of intention to return care packages, these may be with 28 days' notice, but increasingly with the pressures on staff capacity they can be almost immediate. This is a significant and repeated picture across our neighbouring authorities.
3. In these instances, as soon as notice is received, a review of the care package and the contingency plan in the event of no replacement provider being found is undertaken. It is then re-advertised on E Tender and all providers are approached with a request to consider. In complex cases a cross department meeting will be held to consider all the available options for care at home, or for short term placement if care at home is not safely viable. This is a difficult decision for all concerned, but the safety of the individual remains paramount.

4. The Enablement Service will in all instances try to accommodate as many of these long term care “handbacks” for single handed care calls wherever capacity allows, whilst balancing the need to ensure the service can respond to the Enablement aspect, i.e. to work with individuals to return them to independence as quickly as possible following a period of ill health, as well as the fast response to discharges from the hospital. Enablement saw the caseload double in a matter of weeks in the summer, and the percentage of long term care now exceeds the number of core re-ablement cases.
5. The summer months has seen an unprecedented demand and level of waiting list for care at home, a relentless upward trend, care needs are increasing post Covid 19, people are generally more unwell or have coped alone for longer, and are presenting in need of increased support from within the community, and referrals for new cases are demonstrating higher end needs at the outset. The situation is being closely monitored and is reported weekly in county, regionally and nationally.
6. The Enablement Service option appraisal on the long term extension and expansion to the service will be completed in early Sept for consideration within the Through Age Wellbeing model transformation as planned.
7. In the short to medium interim period, as a result of the rapidly deteriorating position for providers, at the end of August, Leadership Group agreed to bring forward recruitment planning to seek to appoint additional Enablement staff during Sept- Nov to offset the impact and pressures on the existing team. To seek to mitigate downwards and aim to stabilise the growing waiting list numbers and demand for long term care support. This can only be addressed by building in additional incremental capacity in house during the forthcoming winter pressures.
8. The work to undertake analysis of each of the Dom Care Providers recruitment and retention challenges has commenced, in conjunction with the West Wales Care Partnership. This work will feed into the Dom Care Framework Task and Finish Group being reconvened.
9. Whilst individual counties face differing community provision pressures, the wider recruitment and retention challenges facing all dom care providers in the Covid Recovery period is now universal. It will require both rapid efforts and new initiatives across all sectors. A Ministerial statement is anticipated in the autumn.

WELLBEING OF FUTURE GENERATIONS:

Has an Integrated Impact Assessment been completed? If not, please state why

NO

Summary:

Long term:

Integration:

Collaboration:

Involvement:

Prevention:

RECOMMENDATION (S): For committee to receive the report for information

REASON FOR RECOMMENDATION (S): Update on the current Domiciliary care provision was requested by the Chair and approval of the report.

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Pritchard**

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**Date of Report: 7th
September 2021**

Acronyms: