

<b>DECISION-MAKER:</b>	HEALTH OVERVIEW AND SCRUTINY PANEL
<b>SUBJECT:</b>	ADULT SOCIAL CARE UPDATE
<b>DATE OF DECISION:</b>	17 DECEMBER 2020
<b>REPORT OF:</b>	EXECUTIVE DIRECTOR – HEALTH & ADULTS

<b><u>CONTACT DETAILS</u></b>			
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<b>STATEMENT OF CONFIDENTIALITY</b>
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Not applicable.

<b>BRIEF SUMMARY</b>
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Southampton Five Year Health and Care strategy 2020-2025 outlines the high-level strategic direction and priorities for Health & Care within the City. The strategy has been revised to include adaptations in response to COVID-19. Priorities during the year have been revised to recognise the significant focus on the pandemic response across the board.

The operational services have continued to be responsive as the government guidance has changed and officers have embraced technology in order to undertake their roles in addition to face to face interactions.

Opportunities have been maximised to ensure a focus on staff wellbeing and learning throughout the pandemic and additional resources have been secured to manage the increase in demand, in particular relating to the hospital discharge process which was changed by government in March 2020.

The developments for Adult Social Care in respect to Care Director (new Adults & Children's Social Care IT system) have continued and increased in pace including a focus on performance management.

<b>RECOMMENDATIONS:</b>
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	(i)	That the Panel notes the activities undertaken by the service during the Covid-19 response period and impact this continues to have on the delivery of Adult Social Care in the City.
	(ii)	That the Panel notes the activities which have taken place relating to improvements and transformation during the Covid-19 response period.

<b>REASONS FOR REPORT RECOMMENDATIONS</b>
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1.	To update the Chair and the Health Overview and Scrutiny Panel members on Adult Social Care response to Covid-19 and service improvements.
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2.	To discuss the increase in demand for services and the plans in place to assist the service response to the increase.
<b>ALTERNATIVE OPTIONS CONSIDERED AND REJECTED</b>	
3.	Not applicable.
<b>DETAIL (Including consultation carried out)</b>	
<b>Adult Social Care Operational Response during Covid-19 Pandemic</b>	
4.	The scrutiny panel has been updated on activity relating to adult social care operations within previous joint reports on the Covid-19 response. A verbal update on the response in each area will be provided at the meeting to ensure the Panel are up to date with the latest position in terms of government guidance and responses.
<b>Integrated working with Health colleagues – Adult Social Care priorities</b>	
5.	<p><b>Adult Social Care Winter Plan</b></p> <p>Adult social care: our COVID-19 winter plan 2020 to 2021, published 18 September 2020 sets out the key elements of national support available for the social care sector for winter 2020 to 2021, as well as the main actions to take for local authorities, NHS organisations, and social care providers, including in the voluntary and community sector. The intention is that “Working together will ensure that high-quality, safe and timely care is provided to everyone who needs it, whilst protecting people who need care, their carers and the social care workforce from COVID-19.” This brought together previous guidance published in 2020 and complementary to the letter to the NHS on the third phase of the COVID-19 response. The Southampton City Council Adult Social Care Winter Plan has been developed with the input of partners, providers and carers and based within the context of the other local plans. The plan is outlining the adult social care priorities and actions of all the plans.</p>
6.	<p><b>Intermediate Care</b></p> <p>The COVID-19 Hospital Discharge Service Requirements were put in place in March 2020 to help the NHS prepare for COVID-19, and this has required rapid, large scale transformation of the local health and social care system. The system changed again from 1st September 2020, to the national Hospital Discharge Service Policy and Operating Model, to allow for assessments to be undertaken to determine responsibility for ongoing financial support from CCGs or local authorities, or if individuals would need to fund their own ongoing care.</p> <p>In line with the policy, patients are now being discharged from hospital when they are Medically Optimised for Discharge (MOFD). This means they are ready to leave when they have received the required clinical support from the hospital but excluding any recovery period and then assessments for ongoing care take place in the community. This results in many more patients leaving hospital at an earlier stage in their recovery and this has led to demand for a greater volume of support, and more complex packages of support when patients return home or are referred to care homes.</p> <p>This has led to a complete review of discharge processes and work with the Clinical Commissioning Group on Discharge to Assess capacity in both care homes and with home care providers and more recently the identification of</p>

	<p>designated beds required for people who are Covid positive to receive care. Ensuring safe discharge from NHS settings has entailed:</p> <ul style="list-style-type: none"> <li>• Implementation of national guidance with oversight of detailed work programme;</li> <li>• Recruitment of additional social care staff to ensure rapid completion deferred assessments;</li> <li>• Modelling of the long-term impact of Covid-19 and financial implications of discharge processes for future planning;</li> <li>• Work as part of Single Point of Access - full roll out of the Community Discharge Model (step up and step down), combining community, social care and Continuing Healthcare and providing additional Discharge to Assess capacity;</li> <li>• Development of voluntary sector schemes to support discharge - Welcome Home Scheme run by Communicare, SCIA and British Red Cross RC providing transport and settling in support.</li> </ul>
7.	<p><b>Integrated approaches</b></p> <p>Work is progressing for the development of Integrated Care Teams for the residents of Southampton City and registered GP practice population over the age of 18 years. The intention is to develop integrated community teams by bringing together physical and mental health services and social care across the council, NHS and voluntary/community sector operating in each Primary Care Network during 2020/2021. The model is about to be piloted. Adult social care is actively contributing to the planning for redesigning of community mental health services in and around primary care networks.</p>
8.	<p><b>Care home and home care</b></p> <p>A significant amount of support has been undertaken with care homes and home care providers. For care homes the Care Home Action plan is overseen by an Oversight Group including care home providers, Hampshire Care Home Association, Healthwatch and health, social care and public health representatives. The plan has detailed actions, metrics and identified risks for a range of issues including:</p> <ul style="list-style-type: none"> <li>• Infection Prevention and Control including Personal Protective Equipment (PPE) access and use, PPE and infection control training, testing and outbreak management</li> <li>• Clinical Support including Enhanced Health in Care Homes (EHCH), Out of Hours support, Secondary care geriatrician support and Mental health provision</li> <li>• Workforce Resilience including Staffing contingency plans, Staff welfare and retention, Sickness monitoring</li> <li>• Training including Local training programmes, RESTORE2 and Diabetes</li> <li>• Digital including Telecare and Telemedicine support, roll and use of NHS Mail, Microsoft Teams and RESTORE2</li> <li>• Provider Sustainability including finance and sustainability and contingency plans</li> <li>• Hospital Discharge including trusted assessment, processes to minimise risk of COVID-19 infection from hospital, implementation</li> </ul>

	<p>of national discharge guidance and recently the identification of designated provision for those who are Covid positive.</p> <ul style="list-style-type: none"> <li>• Communications and engagement including dedicated care homes webpage, regular communications to and feedback from homes, clients and families.</li> </ul>
9.	<p><b>Market and provider sustainability</b></p> <p>A Market Impact statement is being finalised to describe the impact thus far of COVID-19 on the supply, demand, and operation of the city’s adult care services. It has involved reviewing the pre-pandemic commissioning intentions for adult care services, considering the impact that COVID-19 has had on the delivery and relevance of these intentions, and where possible to provide early indication of where intentions may need to be re-shaped to remain fit for purpose within the context of COVID-19. It will be used to inform dialogue between commissioners and providers to agree how we will work together to ensure we maintain a sufficient supply of diverse, high quality adult care services in the city and re-shaping of local adult care services to ensure they remain fit for purpose in the long term.</p> <p>There has been intense support to the market through advice from commissioners and sharing and implementation of relevant guidance via weekly sessions open to all health and social care providers, use of Teams pages and updates on SCC website. This has included specialist advice from Infection prevention and Control experts on preventing and controlling the spread of infection in care settings along with leadership from Public Health and the role of the Health Protection Board. Processes are in place to carry out learning reviews after each outbreak to identify and share lessons learned at local, regional and national levels. Business Continuity plans in place for all providers and agreement made with Solent NHS Trust for the supply of registered nurses to support the sector if needed and options for care staff. In addition, there is work with the Hampshire and Isle of Wight (HIOW) People Plan group on shared workforce modelling, mutual aid agreements, recruitment campaigns, shared resources and education and best practice swiftly being adopted across the system. High take up of seasonal flu vaccines has been encouraged with all SCC staff and all social care providers as part of HIOW system plan.</p> <p>Practical support has been provided through the Implementation of Infection Control fund and also targeted investment in preventing provider and/or system market failure.</p>
10	<p><b>Support for unpaid carers</b></p> <p>Support for unpaid carers is a priority area of focus and a new Carers Strategy is being co-produced. This will also incorporate recommendations of the scrutiny inquiry being undertaken on Support to Carers, which will report by April 2021. The impact of COVID-19 has required different approaches to enable people to have their assessed needs met in alternative ways, such as community support or increased Direct Payment allowance. Also, to make sure carers, and those who organise their own care, know what support is available to them and who to contact if they need help.</p> <p>Maintaining access to respite provision has been important and the two externally commissioned respite services, Rose Road and Weston Court have both remained open throughout the pandemic. Most individuals who use services and carers have decided not to access their regular respite</p>

	<p>stays but some families where there are particular challenges or risks have continued to access. In addition, the services have taken on a small number of emergency referrals where there is an urgent need for respite. Services are operating within government guidelines to maintain safety of service users and carers.</p>
11.	<p><b>Mental health</b></p> <p>Work has recommenced on access to accommodation and housing for people with severe mental illness (SMI) to support recovery. Mental health needs assessment is assessing future demand for a range of accommodation for individuals to support different stages of recovery. This includes high level 24 hour wrap around support, supported housing and longer-term accommodation, with lower level floating support being available throughout the city. Access to general housing to support independent living has been secured as part of the Council's 1000 new homes scheme. Southampton commissioners have been contributing towards the HIOW wide Mental Health rehabilitation and reablement pathway review to improve physical, mental health and social outcomes for people who have or who are at risk of becoming seriously mentally unwell.</p>
12.	<p><b>Services for individuals with a learning disability</b></p> <p>Work has been underway to identify and progress new opportunities for development of supported housing options for individuals with a learning disability, including potential development of accommodation for those with profound needs. Deregistration of a further three residential homes is proceeding which will allow individuals more independence.</p>
13.	<p><b>External Day services</b></p> <p>External day services, providing support to all adult care groups are an important part of the health and social care delivery system, offering care and support to around 500 people with a wide range of needs. The strategic direction across all day services is to support individuals (and where appropriate their carers) to develop their independence using a strengths based approach, ensuring community inclusion. Day services support the loneliness and isolation agenda, playing a pivotal role in the prevention of emotional and mental health needs. Individual care group day service markets operate within differing structures.</p> <p>Commissioners have been in close liaison with all day service providers. Since lockdown began on 23rd March 2020 almost all day services have adapted their service offer and engaged with clients and carers through a range of alternative non-building based activities. There has been a rapid growth from providers in service solutions that focus on safety and well-being of individuals and their carers. For example, using digital solutions to run Zoom activity sessions, delivering activity packs to clients and keeping in touch telephone calls to individuals and their carers. Some day service providers have also supported other care and support providers in the market when capacity has been impacted by Covid-19 (to backfill non care related tasks such as food shopping/pharmacy runs).</p> <p>Work is underway as detailed risk assessments have allowed the reopening of some provision.</p> <p>The future models and sustainability are now being reviewed, especially for Living Well, for older residents, as the commissioned model had moved</p>

	away from the traditional older person day service model towards one that is more integrated within the community.
14.	<p><b>Growth in the community and voluntary sector</b></p> <p>Work with the new SO:Linked service, which provides community navigation and support for developing community and voluntary sector has continued. At the start of Covid the focus was altered slightly for the service to actively contribute to the Covid community hub, which was started by the council. SO:Linked have restarted the work they had commenced prior to Covid on community conversations from September to scope the local offer and proposals for a Place Based Giving Scheme are under development. In addition, work with community and voluntary sector partners is underway to understand how they may be impacted by the current circumstances. Initially a plan to expand Advice and Information services is being developed to focus upon the predicted increase in demand for employment, financial and welfare advice.</p>
15.	<p><b>Access to equipment</b></p> <p>The demand for equipment to support daily living has increased significantly. The new Joint Equipment Service was mobilised in July following a re-procurement.</p> <p>Work has commenced on a review of the use of the Disabled Facilities Grant to ensure that all latest guidelines and best practice is part of the delivery model going forward including supporting people to be discharged from hospital.</p>
	<b>Adult Social Care Workforce Development &amp; Support</b>
16.	<p>A key area of development required by the service following the Local Government Association Peer Review in May 2019, relating to improvements in social work practice and additional capacity to meet demand including leadership.</p> <p>Whilst the covid-19 pandemic has placed significant pressure on front line adult social care workers, it has been essential to focus on learning &amp; development, support and guidance. The service has put in place a range of activity to support social care officers including social workers to be supported during this time.</p> <p>Support has also been provided by a range of leaders in ASC which has included regular team visits, floor walking on a weekly basis, bi-weekly meeting between senior practitioners and Executive Director, regular communication and email updates.</p> <p>Other activities have included:</p> <ul style="list-style-type: none"> <li>• Co-produced ASC online staff conference – 120 people attended;</li> <li>• ASC Professional Development forums - 182 people attended over 3 forums;</li> <li>• Two cohorts of ASC newly qualified social workers (ASYE) supported;</li> <li>• Subscription to Research in practice – best practice and guides – over 90 accounts set up in ASC;</li> <li>• Reflective practice sessions with social workers, team managers, senior practitioners;</li> </ul>

	<ul style="list-style-type: none"> <li>• Best Interest Assessor forum with MCA lead- Attended by 37 BIAs. BIA legal update; review of current guidance; reflections; creative assessment ideas;</li> <li>• Mental Health forums with Social Work professional lead &amp; principle social worker;</li> <li>• Social Work England – Registration and CPD workshops with SWE regional lead. 3 events in October and November, 145 attendees;</li> <li>• Forums - Avid learners who can champion Strengths-based practice throughout their teams and networks, topics covered include: <ul style="list-style-type: none"> <li>○ Restorative practice, theory, method and skills</li> <li>○ Systemic Practice, theory, methods and skills</li> <li>○ Reflective practice skills, methods and theory</li> <li>○ Strengths-based supervision theory, how to and skills</li> <li>○ Academic articles</li> <li>○ Promotion of the SBC role</li> </ul> </li> <li>• Mentoring sessions led by principle social worker for social work apprentices covering a range of topics;</li> <li>• Practice educator training and student placement support;</li> <li>• Range of training / lectures including: <ul style="list-style-type: none"> <li>○ Social work theory, law methods, skills and research and act as an opportunity to refresh and update.</li> <li>○ Safeguarding training;</li> <li>○ Mental Capacity Act Training;</li> <li>○ Best Interests assessor training;</li> <li>○ Restorative practice;</li> <li>○ Motivational interviewing;</li> <li>○ Continuing Health Care and many more in line with training plan.</li> </ul> </li> <li>• <b>Apprenticeships</b> - 34 apprentices across ASC taking qualifications in: <ul style="list-style-type: none"> <li>• Adult Care worker</li> <li>• Lead Adult Care worker</li> <li>• Adult Health &amp; Social Care</li> <li>• Customer Service</li> <li>• Leadership for Health and Social Care</li> <li>• Operations and Departmental Manager</li> </ul> </li> </ul> <p>Officers are reporting that they are feeling listened to and supported. They have been contributed to the recruitment advert as they felt it did not appropriately reflect the positive offer that Southampton City Council Adult Social Care has to offer.</p>
	<p><b>Transformation &amp; Technology Developments</b></p>
17.	<p>The Covid-19 pandemic has had a significant impact on the demand for social care services. The change in the discharge processes within the hospital have reduced the demand on social care budgets for a period of the year, as the majority of discharge activity was funded by health.</p> <p>In order to effectively map and monitor the collective demand on the health and care system, a significant amount of work has been taking place to ensure that there has been tight oversight of the demand for services, financial commitments and outcomes for people.</p>

Additional activity relating to the revised discharge process has included:

- Developed the community discharge hub standard operating procedure in consultation with SCC, NHS and CCG colleagues;
- Developed tracker tools to monitor scheme 1 cases to be assessed / reviewed and outcomes for individuals and impact on SCC budgets;
- Provided trajectories to successfully negotiate continued scheme 1 funding by health colleagues for a specified period;
- Identified resource requirements to meet increase in demand and activity required for scheme 1 and 2 teams;
- Developed scheme 2 tracker to monitor discharges from hospital in line with revised hospital guidance (from September 2020).

Service Re-design Development

- Contributed to Southampton & South West Bronze – Medically Optimised / Medically Fit for discharge system wide review;
- Development of the integrated Health and Social Care Home First Model;
- ASC Programme Development – currently in the process of being established: draft programme prepared for review including programme governance.

ASC COVID-19 Hub:

- Creation of ASC COVID-19 Activity and Resources Dashboards;
- Daily Collection process in place for teams to submit data;
- Daily/Weekly profiling of activity and resources to help support and identify pressures;
- Daily/Weekly calls for monitoring dashboards and operational challenges with teams;
- Modelling of resource requirements due to COVID-19 pressures and increase in demand.

Demand management and growth:

- Detailed preparation for Budget Challenge Sessions including slide prep and analysis;
- Preparation of activity forecasts / demand on service into 21/22;
- Increase in complexity analysis Pre COVID-19 and during COVID-19 for Urgent Response Service (URS) change in service categories and cost implications;
- Historical Savings Analysis - Review and analysis of historical savings including assumption analysis and likelihood of realisation due to covid;
- Identification of resource requirements based of increase in demand across the service to deal with backlogs and COVID-19 Scheme 1 & 2 activity and associated activity to support the effective transfer of NHS funded patients;
- Establishment of project team and tools to monitor the short-term/in-year resources and activity to be completed by the end of March 2021.



### Future Efficiency Profiles & Analysis

- Development of profiles for efficiency / service proposals for 21/22, 22/23 and 23/24;
- Identification and detailed analysis to support the delivery;
- Detailed development of trackers to support the monitoring of each profile;
- Creation of projects to monitor activity and progress.

### CareDirector Implementation:

- Supporting the implementation including the design and development across:
  - Process Redesign including workflow and technical delivery
  - Development of a Resource Allocation System for SCC
  - Form Design including the inclusion of an embedded Resource Allocation Tool
  - Data Migration Planning and Mapping
  - System Configuration including workflow
  - Establishing ICU requirements including Contracts
  - Data Migration Planning/Mapping
  - Security and Access Requirements
  - Reporting – Advising on approach and suitable solution to be implemented given the limited supplier reporting offer.

### Other Technology Activities:

- Laptop Asset baseline and new laptop rollout across the Directorate
- Bid to CCG for funding ColdHarbour upgrade (now agreed and project implementation team being established)
- URS – Mobile Printing rollout to support efficient working practices
- URS – Mobile phone upgrades to help support the ColdHarbour upgrade and provide the ability for care staff to access schedules remotely (once upgrade complete).

### Statutory Reporting

- Development of a statutory returns group to govern, advise and make decisions in relation to data quality, recording and processes to enable the Adult Social Care statutory returns to be submitted;
- Validation of Adult Social Care statutory returns and undertake associated data cleansing;
- Development of statutory returns group action plan and priorities;
- Development of a data quality group to co-ordinate, prioritise and monitor data cleansing activity.

### Performance

- Development of a new performance dashboard to monitor key service priorities and statutory indicators;
- Implementation of performance meetings with senior managers;
- Providing support to Data Team to enhance performance dashboard;
- Review of definitions and application across ASC indicators;
- Development of data exception reporting to support ASC indicators.

<b>RESOURCE IMPLICATIONS</b>	
<b><u>Capital/Revenue</u></b>	
18.	Not applicable
<b><u>Property/Other</u></b>	
19.	Not applicable.
<b>LEGAL IMPLICATIONS</b>	
<b><u>Statutory power to undertake proposals in the report:</u></b>	
20.	Legal duties as outlined within the statute affecting the commissioning and delivery of adult social care.
<b><u>Other Legal Implications:</u></b>	
21.	None identified.
<b>RISK MANAGEMENT IMPLICATIONS</b>	
22.	Risks are proactively managed through the departmental and corporate risk management processes. These are reviewed on a monthly basis.
<b>POLICY FRAMEWORK IMPLICATIONS</b>	
23.	None identified.

<b>KEY DECISION?</b>	<b>No</b>
<b>WARDS/COMMUNITIES AFFECTED:</b>	
<b><u>SUPPORTING DOCUMENTATION</u></b>	
<b>Appendices</b>	
1.	None.

**Documents In Members' Rooms**

1.	None.
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**Equality Impact Assessment**

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?	<b>No</b>
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**Data Protection Impact Assessment**

Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?	<b>No</b>
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**Other Background Documents**

**Other Background documents available for inspection at:**

<b>Title of Background Paper(s)</b>	<b>Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)</b>
1.	None