



<b>Meeting of East Renfrewshire Health and Social Care Partnership</b>	Integration Joint Board	
<b>Held on</b>	1 February 2023	
<b>Agenda Item</b>	8	
<b>Title</b>	Care at Home Service Update	
<b>Summary</b>		
<p>The report provides an update to the Integration Joint Board on the impact of the local and national social care crisis on East Renfrewshire Care at Home Service. This report also sets out crisis management and contingency plans for the service to mitigate and further address the risks and make improvements within the service.</p>		
<b>Presented by</b>	Lee McLaughlin Head of Adult Services: Communities and Wellbeing	
<b>Action required</b>		
It is recommended that the Integration Joint Board note the report.		
<b>Directions</b>	<b>Implications</b>	
<input checked="" type="checkbox"/> No Directions Required <input type="checkbox"/> Directions to East Renfrewshire Council (ERC) <input type="checkbox"/> Directions to NHS Greater Glasgow and Clyde (NHSGGC) <input type="checkbox"/> Directions to both ERC and NHSGGC	<input checked="" type="checkbox"/> Finance <input type="checkbox"/> Policy <input checked="" type="checkbox"/> Workforce <input type="checkbox"/> Equalities <input checked="" type="checkbox"/> Risk <input type="checkbox"/> Legal <input type="checkbox"/> Infrastructure <input type="checkbox"/> Fairer Scotland Duty	

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## EAST RENFREWSHIRE INTEGRATION JOINT BOARD

1 February 2023

Report by Chief Officer

### CARE AT HOME SERVICE UPDATE

#### **PURPOSE OF REPORT**

1. This report provides an update to the Integration Joint Board on the impact of the local and national social care crisis on East Renfrewshire Care at Home Service.
2. The report also sets out crisis management and contingency plans for the service to mitigate and further address the risks and make improvements within the service.

#### **RECOMMENDATION**

3. It is recommended that the Integration Joint Board note the report.

#### **BACKGROUND**

4. East Renfrewshire HSCP Care at Home Service provides Care at Home to circa 500 East Renfrewshire residents covering on average 10,500 visits and 3434 hours of care per month.
5. There have been significant capacity issues within Care at Home both locally and across Scotland with the situation locally reaching crisis point in early December 2022.
6. Briefings were shared with IJB members on 5<sup>th</sup> and 22<sup>nd</sup> December 2022.
7. Increasing complexity of people being supported against a backdrop of recruitment challenges has led to significant pressures. Locally there has been a 49% reduction in the amount of service that commissioned providers are able to deliver since 2020. This has led to significant pressure on the HSCP's in house care at home service
8. The service is has continued to experience significant absence rates with 35% currently where the frontline carer and organiser roles continue to be the most affected.

#### **REPORT**

##### Context

9. Using a range of measurements, all elements of care at home service provision has increased in both in relation to overall numbers of service users and complexity of need by around 30% by comparison.
10. In comparison from 2021 to 2022, there has been a 27% increase of 3474 double handed visits per month and 29.8% increase of 1423 planned hours of double handed supports.

11. When comparing the general 'per service user' package size requirement across the same period, this now sits at 8.14 hours per week per service user and this represents a 6.6% rise on the 2021 figure.
12. With respect to the service RAG risk assessment process, this means that a higher number of service users are categorised as RED due to the complexity of their needs.
13. The current breakdown of service users is rag rated as follows:

<b>RAG Rating</b>	<b>Definition</b>	<b>Number of Service Users</b>
Red	(Critical needs, Intensive Personal Care, double handed care, essential medication support, end of life care, limited/no family supports), hospital discharge	234
Amber	Substantial/Moderate needs, personal care, essential medication support, limited family supports)	182
Green	Weekly Bath Shower Supports, medication prompts, meal preparation/prompt, low level personal care /family supports available	89

## **WINTER PLANNING**

14. East Renfrewshire HSCP continues to draw upon our detailed winter response plan in order to proactively mitigate the impact of winter pressures across the health and social care system and respond to local issues/risks. The local plan includes:
  - Ongoing Recruitment Campaign alongside requests to HSCP and Council staff for volunteers to work additional hours within Care at Home.
  - Manager re-deployed from children's services to manage absence using HR policies to maximise returns to work where appropriate. Head of Service role for Absence Panels and targeted HR and Trade Union supports
  - Dedicated manager to improve retention, training, nurturing new staff and co-ordinate staff working in care at home from other services.
  - Staff Wellbeing – £10,000 SG funding, patch wellbeing hubs with wellbeing support for frontline staff.
  - Increased Health Care Support Worker capacity in District Nursing
  - Targeted Service Provision over Festive Period (District Nursing, Rehab, Home from Hospital)
  - Proactive discussions have already taken place with Social Work Scotland, Scottish Government and the Care Inspectorate about impact of the national social care crisis on quality of care locally. This is being experienced by many HSCPs across Scotland.

### Care at Home Crisis Management Plan

15. East Renfrewshire HSCP has a robust risk management and improvement plan in response to the current pressures. The plan acknowledges the complexity of the issues and is focused on 9 key priority areas:
  - Recruitment, Redeployment and Retention

- Absence Management
- Scheduling – Skills and Resources
- Communication and Complaints
- RAG – Prioritisation of Resources
- Discharge without Delay/Interim Care
- Staff Wellbeing Support
- Adult Support & Protection
- Care Inspectorate & National Care Standards

#### Recruitment, Redeployment and Retention

16. The care at home recruitment campaigns have been resource intensive with a limited success in terms of additional capacity to the service. Recruitment campaign was paused over festive break with adverts launched again week beginning 9th January 2023. ER Care at Home are also participating in the Work East Ren Jobs fair (social care) on 25th January 2023.
17. A small number of HSCP and bank staff (22) have agreed to work in care at home (across business support and care functions) on an additional hours basis to add some resilience to the service and cover gaps across the service. 7 staff from learning disabilities day services had been redeployed for four weeks to cover critical care at home work and they will return to day services week beginning 16th January 2023 due to needs within this service.
18. Two managers from children's services have been redeployed to care at home to manage absence and attendance at work and complaints. This has been agreed on a 4 week rolling basis and will be reviewed in line with the needs of both services.
19. A social work assistant has been redeployed from adult services to co-ordinate the use of all staff working in care at home on a redeployment/additional hour's basis and to ensure they have a single point of contact, induction, training and wellbeing supports.

#### Absence Management/Maximising Attendance

20. The current over level of absence within care at home is 35% with the frontline carer and organiser roles most affected. 51% is short term absence with 49% recorded as long term absence. The main reasons for absence are:
 

• Colds/Influenza	30%
• Stress (non-work related)	25%
• Stress (work related)	16%
21. Significant absence (100% in November, December) (80% currently) in our Organiser workforce has impacted on our performance in terms of timescales in line with our Managing Absence policy.
22. An absence task force has been established and a robust action plan is in place to maximise attendance and support a return to work for staff where this is possible. There will be a specific focus on supporting return to work for those absent on a short term basis and addressing both work related/non work related stress and using our stress risk assessment and support plan tools.
23. Initial calls and absence meetings have been arranged throughout January with a rolling programme of absence 'clinics' diarised in throughout 2023.

### Scheduling – Total Mobile Solution

24. Total Mobile scheduling system has been successfully implemented within the agreed timeframe despite the challenges within the service.
25. The 100% absence in the organiser workforce has impacted on our local capacity to schedule and to support frontline staff to develop their confidence in using the new system. Feedback from some staff/service users/families has suggested challenges with the new system although upon investigation the challenges are in relation to the impact of our capacity and staffing issues and not the system itself. South Lanarkshire and Renfrewshire have excellent feedback about the system and a number of other HSCPs are in the process of procuring this solution.
26. The service has benefited from mutual aid and support from both Renfrewshire and South Lanarkshire HSCPs both of whom use Total Mobile to schedule home care. Throughout December/January the following support has been provided:
  - 2 day online training in scheduling/monitoring
  - 2 days on-site (in East Renfrewshire) trouble shooting/bespoke mentoring
  - 1 week on-site (in South Lanarkshire) training and shadowing for 4 staff in scheduling and configuration of the back functions to increase productivity locally.
27. This mutual aid support has been invaluable in strengthening our skill base and confidence levels in relation to live scheduling and launching the 'capacity checker' element of the system.

### Communication and Complaints

28. The service has received has received 96 complaints from individuals and families.
29. 72 of them have been resolved at stage 1 with many families understanding the impact of the pressures across health and care system and absence levels locally. Family members have generally been understanding and have acknowledged the great work the carers are doing under the most challenging circumstances.
30. The key themes have been noted below and are reflected in the overall crisis management plan in terms of actions to mitigate and address:
  - Missed/ late visits- this can impact 4 hourly medication times.
  - Lack of continuity with the carers supporting visits
  - Service users experiencing difficulty contacting the office directly with phones regularly engaged/ringing out.
31. In terms of communication with service users, families and staff, the service has now written to families on three occasions and staff on two occasions to thank them for their understanding and to provide regular updates from the service.
32. The service has noted a key and immediate priority in terms of improvement is to strengthen the phone system at Kirkton as the service moved to this base during the pandemic and it is clear that the system is not fit for purpose in terms of fielding, handling and monitoring the volume of calls to and from the service. The HSCP has progressing this action as a matter of urgency.

### RAG – Prioritisation of Resources

33. Since Saturday 3<sup>rd</sup> December, the care at home service required to instigate RAG protocol on a daily basis, cancelling the lowest risk services (green and amber rated).

34. On 22<sup>nd</sup> December 2022, due to the increased capacity challenges over the festive period, the service made the difficult decision to step down care at home services for service users where family could help and where it was considered safe to do so.
35. A full MDT approach was used to screen all green/amber users with expertise from Older Adults Mental Health Team, Social Work and District Nursing to assess needs/risks prior to telephone calls to families to step down services.
36. Services were stepped down from 22<sup>nd</sup> December until 6<sup>th</sup> January for 149 service users. As of 11 January 2023, all services with the exception of 25 (green RAG rated) have been re-instated. This will be subject to daily review and change depending on service capacity and risk.
37. We have written regularly to staff, service users and families to keep them updated with respect to service pressures and to thank them for their continued patience and support. The most recent correspondence to service users has also included service and contact details for Voluntary Action East Renfrewshire should service users/families wish to access volunteer supports for socialisation and non-care related supports.

#### Discharge without Delay

38. Whilst the pressures in care at home are significant, the HSCP is working hard to support people home (or to a homely setting) from hospital as soon as they are medically fit to do so. The impact of our care at home capacity issues has been reflected in our recent performance in discharge without delay. There are currently 11 East Renfrewshire residents delayed in hospital. The HSCP is working hard to progress discharge home drawing upon a range of solutions including interim care (in a care home), Self-Directed Support alongside asking families to provide care and support for their loved ones.
39. East Renfrewshire HSCP has developed a strong practice model in Interim Care (funded by SG Winter Planning) mainly based in Bonnyton Care Home or some of our local care homes on a spot purchase basis. Our Interim Care Team which includes nursing, physio, OT and social work provide intensive re-ablement supports for individuals during the interim care period to maximise their independence and support a successful transition back home. Since January 2022, 44 East Renfrewshire residents have accessed interim care (38 people as part of a discharge from hospital and 6 people to avoid hospital admission). 36 individuals have been supported home within the 6 week interim care period with only 8 requiring long term residential care.

#### Staff Wellbeing Support

40. There continues to be significant focus on wellbeing support for staff and managers across the care at home service.
41. The HSCP Wellbeing Lead has been working with staff throughout 2022 to seek views from staff through questionnaires and wellbeing focussed meetings as to what they would find useful in terms of practical and emotional wellbeing support. This has informed the wellbeing offer for care at home staff as detailed below:
  - Re-introduced staff patch meetings (paused during Covid-19) with local organisations in the patch areas where staff operate to host the patch meetings. This includes VAER Barrhead, Jewish Care Giffnock and Neilston Development Trust.
  - All home care staff are also able to access massage therapy, reflexology, reiki and hair appointments at Jewish Care and NDT on a weekly basis.

- 6 week Menopause support and awareness workshop planned for beginning of February at VAER Barrhead for all homecare staff.
- The Care at Home base in Kirkton has had a massage therapist in attendance, supporting office based and management wellbeing needs on a bi weekly basis.
- New tea/coffee and break facilities/sundries provided for staff in various locations alongside meal provision for staff working Christmas Day, Boxing Day, New Years Day.
- 19 staff also received personal thank you cards/gift from HSCP for their additional efforts in supporting the service over what has been a challenging period.
- Whatsapp page for all homecare staff so that the dispersed care at home workforce can access information about local wellbeing supports on offer, book sessions and feedback wellbeing needs/ideas moving forward.

### Adult Support and Protection

42. There have been 35 ASP referrals with respect to care at home service users during December 2022 with the current status reflected below:
- 25 were closed at Inquiry stage as no risk of harm noted or reduced with any ongoing issues resolved through case management.
  - 5 have progressed to Investigation with investigation ongoing. Investigation reports for these individuals will establish whether significant harm has been experienced as result of missed visits and determine whether an ASP case conference is required.
  - 2 were closed as individuals were more appropriately supported under Mental Health (Care and Treatment) Scotland Act.
  - 1 case closed following Investigation as risk of harm reduced through ongoing case management.
  - 1 did not meet 3 point test for ASP Inquiry and initial referral was closed and support provided via ongoing case management
  - 1 Inquiry (referral received in January 2023) is ongoing.
43. The themes noted include emotional distress for individuals, missed medication, and poor care experience for service users. The Council Officers noted for many of the ASP referrals the risk/harm was not significant as many individuals experienced late and not entirely missed visits

## **CONSULTATION AND PARTNERSHIP WORKING**

### Care Inspectorate / National Care Standards

44. The Care Inspectorate have been notified of all notifiable incidents via electronic system as required for all registered services.
45. Regular meetings with Care Inspectorate, chaired by Head of Service, Communities and Wellbeing have ensured regular communication regarding service pressures, impact on quality/consistency of care and our crisis action plan to address issues and make improvements.
46. Weekly operational discussions have been set up with the Care Inspectorate in additional to ensure that our allocated Inspector is updated on a regular basis.
47. The Care Inspectorate have noted that other HSCP's are experiencing the same system pressures across the health and social care sector and that they are satisfied with our open and proactive approach to communication with them and our robust crisis management plan.



## IMPLICATIONS OF THE PROPOSALS

### Finance

48. As detailed in the revenue monitoring report, we recognise the service is under significant pressure with a projected overspend of £646k (care at home) and £233k (telecare responders). These pressures are part of the overall revenue monitoring projected overspend which is being met from reserves in the current year. Work is ongoing to reduce costs in line with the activity set out above.

### Workforce

49. Workforce implications are set out in the report

### Risk

50. Risk implications, including RAG prioritisation are set out in the report

## DIRECTIONS

51. There are no directions arising as a result of this report.

## CONCLUSIONS

52. East Renfrewshire Care at Home services continues to experience significant pressures in terms of capacity to meet demand and consistency of care. This position is reflected across Scotland.

53. The HSCP has a robust crisis management plan in place alongside our winter response plan to mitigate risk and prioritise resource.

## RECOMMENDATIONS

54. The Integration Joint Board is asked to note the report

## REPORT AUTHOR AND PERSON TO CONTACT

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19 January 2023

Chief Officer, IJB: Julie Murray

## BACKGROUND PAPERS

None

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