

Impact of COVID-19 on Carmarthenshire's Adult Social Care Services

Social Care & Health
Scrutiny Committee
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Health and Social Care Scrutiny Report: Covid-19 Position Statement

Introduction

The Committee will recall that an update was provided at the meeting on 19th November 2020 surrounding how the Council had continued to deliver adult social care services, in the face of the pandemic. This report provides an updated position on how we have continued to support those who receive services and their families, continued to do this safely, and continued to protect our staff and the people of Carmarthenshire.

1. Impact of Covid on Services

From an Integrated Services and Adult Social Care perspective, we have continued to as far as possible maintain business as usual. We have continued to support people who need our help in the community and need support to be discharged from hospital. We have continued to offer Information Advice and Assistance (IAA) in line with the requirements of the Social Services and Wellbeing (Wales) Act and carried out social care assessments where required.

It is fair to say that the second wave has been very different to the first, and brought with it very different challenges. Our staff and managers have continued to be remarkable and no degree of thanks or appreciation will have been able to demonstrate how truly grateful we are for their ongoing support and commitment to the service. This was most recently recognised in our recent CIW Assurance Check which took place during the first week of February. We will be receiving formal feedback in due course, but the headline feedback we had at the end of the inspection week was testament to how committed our staff have been through this most challenging of times.

The most significant area of risk and greatest impact of Covid-19 has continued to be in relation to the care home sector in Carmarthenshire, in particular care homes for older people. In the second wave, we have experienced significantly more care home outbreaks and a very high level of homes under 'exclusion' to new admissions due to positive cases. In total, 33 older people care homes were subject to exclusion and of these, 16 were deemed as outbreak status. In addition, 23 care homes for people with a learning disability and or mental health were also subject to exclusions with 8 of these experiencing an outbreak. Outbreaks have looked very different in the second wave due to very high community transmission rates, and significant advances in both TTP (Test, Trace and Protect) and testing regimes.

Approximately twice as many residents in care homes in Carmarthenshire have very sadly passed away with Covid in the second wave compared to the first wave. We thankfully haven't experienced the same high numbers of residents passing away in individual care homes in the second wave, but the challenges on staff have been much greater.

Acknowledgement should be given, however, to the in-house Care Home team who have supported a number of independent homes who have been experiencing difficulty in terms of staffing. Without this assistance, some homes would have closed.

The advances in testing and TTP processes have of course led to much greater protection for both staff and residents and have undoubtedly helped reduce the number of potential deaths. However, these developments have also brought significant challenges which has meant that we have on several occasions been in positions whereby it has not been usual for 80% of a workforce establishment to be off work at the same time. Covid test results tend to come back in batches, so it has not been unusual to become aware that significant numbers of staff need to self-isolate at once. We have therefore had to develop a suite of options to be able to support homes with a workforce response when needed.

This has included block contracts with agencies, deployment of our own staff, mutual aid from both Pembrokeshire County Council and the Health Board to support with staffing, management on call arrangements over weekends and bank holidays and in the two most serious cases the Local Authority temporarily taking over the management of the home. Thankfully, following the reduction in community transmission of Covid and the roll out of the vaccination programme, we are starting to see a decrease in the number of outbreaks/homes under 'exclusion'. At the time of writing the report, only 12 residential homes were under 'exclusion' with 3 service users and 4 staff confirmed as positive in total.

Most of the care and support in Carmarthenshire is delivered by the independent commissioned sector. The Commissioning team in Carmarthenshire has played a significant part in supporting these services during the pandemic. The range of support has included:

- Coordination of the numerous communications and guidance.
- Coordination and supply of PPE.
- Proactive communications including a 24/7 helpline at the peak of the pandemic.
- Support for risk assessments surrounding admissions/returns from hospital.
- Initiating provider performance arrangements to address any Covid-19 or other concerns in relation to service provision.
- Support with testing and infection control.
- Financial support.
- Coordination of support and liaison with care homes experiencing outbreaks.

Visiting care homes by families and friends has, and remains, a challenge. Within our own homes, we continue to follow Welsh Government guidance which has allowed us to implement a plan to allow managed visits, balancing infection control issues with the need for residents to see their loved ones. With external homes, we have encouraged them to follow the Welsh Government guidance.

In-house and external care homes continue to face the following challenges:

- Increased number of vacant beds, due to the numbers of residents who have sadly passed away during the pandemic, and difficulties surrounding new admissions linked to 'exclusion' status.
- Financial impact in terms of increased staffing needed due to shielding staff and residents being isolated; and

- Managing the mental and physical impact on staff e.g. Additional workload, dealing with end of life situations with little or no family involvement and pressures for the teams.

Unfortunately, the majority of our day services have had to remain closed and we have also had to suspend in most cases planned respite in care homes, due to the challenges linked to the pandemic. We have however tried to look at innovative ways of how we can continue to support those we support to meet their preferred outcomes and provide some degree of respite for families.

In relation to older people's day services, we carried out a consultation with those that previously attended day services and their families in November last year on a proposal to provide alternative support whilst day services remained closed. We are hoping to pilot a new interim model shortly to see whether it can meet the needs in a different way until day services can reopen. This model will include 1 to 1 support at home, as well as greater digital connection where appropriate. Emergency respite can also still be arranged at a range of care homes across the County on a risk assessed basis, subject to a negative Covid-19 test and isolation for 14-days on admission to the care home.

In relation to Learning Disability and Mental Health day service, whilst some buildings have been closed, we have continued to provide care to our most vulnerable and we have in some instances provided support in buildings following robust risk assessments. Our current position is that we have reopened most of our buildings and we are gradually accommodating more numbers, prioritising those individuals and families who are struggling, However, this will be on a significantly reduced basis, so that we can maintain everyone's safety. Many services will not operate as they previously did. They will not be able to offer the range of activities or be able to support as many people as they did previously, as our priority is to keep everyone safe.

We are continuing to offer support at home and a range of online virtual activities which remain popular with those who use our services and their carers. Activities provided include exercise, quizzes, and cookery sessions. Woodwork and craft activity packs have also been delivered to individual homes to enable them to join in with the virtual demonstrations.

2. Changes to service provision due to Covid

We have inevitably, had to change the way we do things, and wherever possible we have tried to support people virtually when providing IAA or undertaking assessments. We have however, also continued to visit people at home when needed on a risk assessed basis, to ensure that our assessments are thorough to inform what support we might be able to provide.

In relation to Safeguarding of Adults, we have seen an increase in safeguarding activity and an increase in the complexity of referrals. We are now seeing in the region of 100 to 120 referrals a month. Multi-agency forums have continued to meet virtually. We are part of a Regional Multi Agency Covid-19 response group which now meets monthly. MAPPA, MARAC and VAWDASV arrangements have also continued.

A robust regional approach to managing new and existing Deprivation of Liberty Safeguard authorisations has been agreed, in the light of us being unable to visit care homes. This approach ensures the principles of the Mental Capacity Act are upheld and is consistent with the guidance received from Welsh Government

Within Learning Disability Services, virtual activities have been arranged via skype or teams and individuals have accessed buildings on a 'one to one' basis where this has been necessary. Activity packs have been delivered to people's homes and home visits have also been facilitated to support families.

Carmarthenshire has continued to work with its TEC trading company Llesiant Delta Wellbeing, to develop a TEC Prevention Strategy for the region, and the Connect project in particular has come into its own. The programme combines proactive integrated tele-monitoring and wellbeing calls, with a rapid response and community-based support.

There have been two key developments over recent months, which are providing great hope for the future. The first is the vaccination programme. The Council has worked very closely in partnership with Hywel Dda University Health Board to ensure that the programme is delivered to the first 9 identified priority groups by the end of April. The Council has coordinated the roll out to eligible Council staff as well as independent sector staff. In addition, we have ensured that all of our older care home residents have received their first dose of the vaccination, with some already having had their second doses. At the time of writing the report, over 110,000 people had received their first dose of the vaccination in the Health Board area. This included almost 53,000 Carmarthenshire residents which equates to 28% of the eligible population. There is still a long way to go, but initial signs surrounding efficacy of the vaccine are proving hugely positive.

The second development is surrounding Lateral Flow Device (LFD) testing for the health and social care workforce, as well as care home visitors. We are working with the Health Board to ensure that we are supporting the care home and community care sectors (eg domiciliary care, supported living etc) with the new testing regime of twice weekly testing. It is anticipated that LFD roll-out will be happening across the sector in the coming weeks.

3. Workforce implications

During the second wave, our workforce has continued to amaze us with their flexibility and resilience. Most notably, our in-house residential staff have been deployed to support independent sector care homes where needed at times of Covid outbreaks. Their commitment and compassion can only be described as outstanding.

Our own social care workforce has inevitably been hit by Covid, particularly when community transmission was high, as well as other sickness. Thankfully, no staff have been seriously affected with the illness, but high sickness levels have at times been difficult to manage. Within domiciliary care in early January sickness levels reached 18%, a third of which was Covid related. Staffing levels seem to be starting to stabilise again which is very much welcomed.

Engagement has been maintained with the Trade Unions via the Communities Department Trade Union forum, and issues have been addressed as needed.

The most positive impact on our workforce has of course been the vaccination programme, and the Council has worked very closely in partnership to ensure that all Council and independent sector staff in the nationally defined Priority 1 and 2 groups have received their first vaccination.

Whilst it is hugely positive that staff and those vulnerable people we work with have been considered as the highest priority for the vaccination, we continue to remind our staff that they still must ensure that they maintain social distancing, use PPE in line with guidance and follow good infection control procedures. We will continue to ensure that our staff adhere to these key principles, until national guidance suggests otherwise.

We recognise that the pandemic has had a huge emotional and psychological impact on staff, and the impact of this should not be underestimated. We are therefore doing everything we can to support them and starting to look at how we ensure that our staff benefit from the corporate wellbeing work. We are paying particular attention to how we can support staff who have been involved in care home outbreaks, as we recognise how distressing this has been and the huge emotional toll that it has played. From a management perspective, we will continue to ensure that we keep oversight of the wellbeing of our entire workforce to ensure that they have the resilience to help see us through the challenges ahead.

4. Service user and carer implications

Whilst we have entered into a new business as usual in the way that we support our service users and carers, we have noticed the impact particularly that the length of the pandemic has had on families and loved ones and people are presenting with more complex needs and at crisis point.

The numbers of referrals that we are receiving is at unprecedented levels, with on average 1,100 to 1,200 new referrals coming through Delta Wellbeing each month, 800 to 900 of which require a further Social Services and Wellbeing Act (SSWBA) assessment. The following table provides a summary of the number of referrals that have come in.

SSWBA forms Carmarthenshire Access team and ASRF forms					
Period	IAA	Further Assessment	Total SSWBA forms	Safeguarding assessment	Total Forms
Apr-20	435	617	1052	81	1133
May-20	317	689	1006	99	1105
Jun-20	433	959	1392	110	1502
Jul-20	343	977	1320	126	1446
Aug-20	276	972	1248	128	1376
Sep-20	378	944	1322	132	1454
Oct-20	357	829	1186	105	1291
Nov-20	425	789	1214	102	1316
Dec-20	358	761	1119	93	1212
Grand Total	3322	7537	10859	976	11835

At the moment it is very difficult to predict future demand. We hope that, once vaccinations roll out and we start to see their effect, we can start to reintroduce more options in terms of day support and respite, but in the meantime, we have to do everything we can to support individuals and families to maintain their independence wherever possible and keep safe.

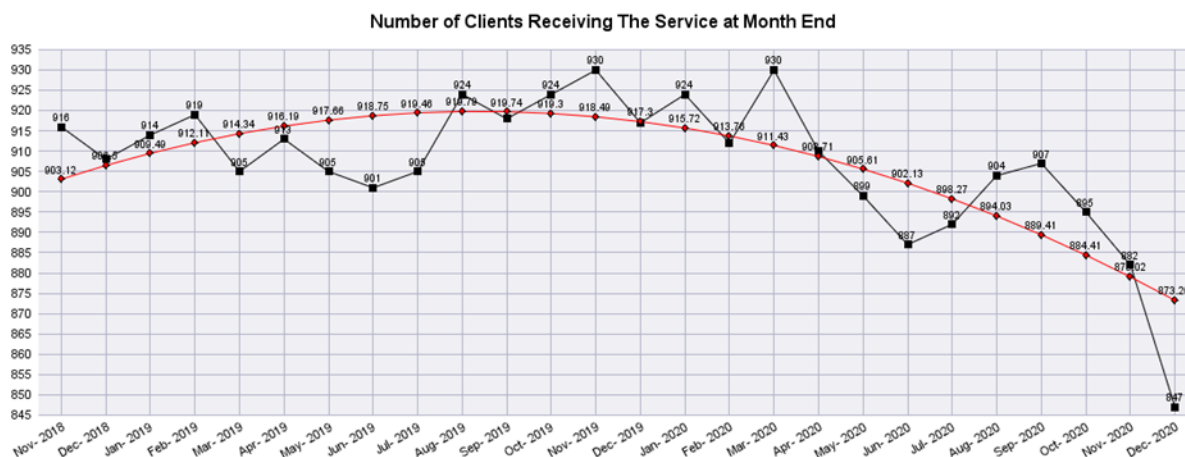
In terms of support for carers, the Committee is receiving a separate report on this today.

5. Financial issues

We have continued to draw down substantial financial support from the Welsh Government Hardship Fund, to help offset some of the additional costs associated with Covid. We have claimed a total of £9,055,542 to date. It is difficult to predict at this stage how this crisis will impact on long-term demand and consequently spend, but we continue to monitor.

We have also benefited from just over £1.2million from the Welsh Government Winter Protection Fund, which has been particularly targeted at ensuring flow through the health and social care system.

We have seen an overall reduction in the number of funded residential and nursing placements for older people, which has had a positive impact on the budget. The decrease in number of placements is shown in the graph below:



Within Mental Health and Learning Disability we did see a slight increase in residential placements and high-cost community packages, as the work to place people in alternative settings was paused for the first six months of the pandemic. The impact of the pandemic on mental health, substance misuse and safeguarding and demand for services is likely to be significant and we are preparing for this in our budget setting for 2021/2022.

We have continued to see some challenges in achieving our predicted PBBs this year. This is offset to an extent by reduced costs following changes in service provision such as Day Services.

6. Communication and engagement

Good and regular communication continues to be critical to supporting staff, as well as recognising the achievements of staff and taking each opportunity to thank them.

There is regular communication with staff via the internet, newsletters, individual letters and published guidance. Team meetings have continued via teams and training modules are being made available via e-learning programmes, wherever possible. The Director of Communities has started to do a regular video message to staff, which has been well received.

Within Adult Social Care and Integrated Services, staff have kept in touch with individuals and families so that we can determine when people may be struggling and respond in a timely fashion. Those who used services and their carers also receive regular letters to update them on what is happening with front line services.

Senior Officers meet 3 times a week to focus particularly on Covid related pressures. Regular contact has also been maintained between Heads of Service and the Executive Board Member, to provide regular briefings regarding issues as they develop.

7. Moving forward

We must make sure that we learn from this unprecedented experience as we reintroduce our services and re-set our strategic and operational priorities. It is not

going to be a case of restarting and getting back to the way we were. This is an opportunity to refresh and renew. Moving forward we will:

- Continue to change and adapt the way we work. For example, we will not be able to fully reopen our day services buildings for some time, to comply with social distancing and minimise risk of infection.
- Continue with virtual activities and provide a service to those most at risk safely. This will impact on families and carers who will continue to need support. So, we will need to do this creatively.
- Escalate our modernisation plans for some services e.g. less building-based services, agile working.
- Require our workforce to be flexible and adaptive in the long term in the event of future uncertainties.
- Prioritise and transform services to respond to those who are most vulnerable.
- Ensure we continue to work really closely with our health colleagues, to ensure that we take a whole Carmarthenshire system approach.

The combination of the vaccination programme and roll out of lateral flow testing gives us all hope that we will in time be able to safely return to some semblance of normal life. It is too soon to do this, but we will consider how we do this in a safe and managed way as soon as we are able to do so.

8. Lessons learnt

Wherever possible, we are taking the opportunity to reflect on how we can improve and do things better in the future. We for example commissioned an independent piece of work to evaluate our approach to supporting care homes in the first wave, and this has been hugely valuable in informing how we have responded in the second wave.

The huge strides forwards in how we have used technology is something that will remain with us, and going forward we need to get the right balance between the use of digital solutions and face to face interaction.

We need to continue to encourage the flexibility of our staff, but also recognise the general fatigue and fear surrounding the future. Reflecting on this, we need to ensure that we have all of the support in place to allow our staff to be resilient and flourish.

This pandemic has taught us that we can do none of this on our own, and working with our partners and staff is absolutely critical. All our processes continue to be in place to manage the various scenarios, so we are confident that we will be able to learn the lessons and manage the challenges ahead together.