

CABINET

11 HYDREF 2021

EFFAITH PWYSAU CENEDLAETHOL O RAN GOFAL CYMDEITHASOL YN SIR GAERFYRDDIN - ADRODDIAD CYFARWYDDWR STATUDOL Y GWASANAETHAU CYMDEITHASOL

Y Pwrpas:

Er mwyn bodloni'r gofynion o dan y Côt Ymarfer a gyhoeddwyd o dan y Ddeddf Gwasanaethau Cymdeithasol a Llesiant, rhoi gwybod i'r Cynghorwyr am yr heriau, y risgiau a'r amgylchiadau lle mae materion staffio'n effeithio ar ein gallu i gyflawni ein cyfrifoldebau statudol, a briffio'r Prif Weithredwr a'r Cynghorwyr ynghylch materion sy'n debygol o achosi pryder ymhlith y cyhoedd a strategaethau i ymdrin â'r sefyllfaoedd hynny.

Yr argymhellion / penderfyniadau allweddol sydd eu hangen:

- Nodi cynnwys yr adroddiad a'r goblygiadau, a'r camau allweddol sy'n cael eu cymryd.
- Ystyried unrhyw gamau pellach y gellid eu cymryd i reoli'r sefyllfa.

Y Rhesymau:

Cydymffurfio â'r canllawiau statudol a sicrhau bod yr aelodau'n cael digon o wybodaeth am sut mae pwysau cenedlaethol yn effeithio ar drigolion Sir Gaerfyrddin a'r camau allweddol sy'n cael eu cymryd i reoli'r sefyllfa.

Angen ymgynghori â'r Pwyllgor Craffu perthnasol - Amherthnasol

Angen i'r Cabinet wneud penderfyniad Nac Oes

Angen i'r Cyngor wneud penderfyniad - Nac Oes

YR AELOD O'R CABINET SY'N GYFRIFOL AM Y PORTFFOLIO:-

Y Cynghorydd J. Tremlett (Deiliad y Portffolio Gofal Cymdeithasol ac Iechyd)

Y Gyfarwyddiaeth:

Cymunedau

Y Cyfarwyddwr:

Jake Morgan

Swydd:

Cyfarwyddwr y

Gwasanaethau

Cymunedol

Rhif ffôn: 01267 244697

Cyfeiriad e-bost:

JakeMorgan@sirgar.gov.uk

EXECUTIVE SUMMARY

CABINET

11TH OCTOBER 2021

Impact of National Social Care Pressures in Carmarthenshire - Report of the Statutory Director of Social Services

1. What is the purpose of this report?

Under the Code of Practice issued under the Social Services and Wellbeing Act the Director of Social Services has a duty to advise Councillors on – amongst other things – the challenges, risks and circumstances where staff issues affect our ability to discharge our statutory responsibilities, and to brief the Chief Executive and Councillors on matters likely to cause public concern, and strategies to deal with those situations.

Members will be aware of the widespread reports on demand and pressures on hospitals, social care, community Health and the Welsh Ambulance service. The focus of this note is on the challenges facing Social Care in Wales, the impact of this on the residents in Carmarthenshire and some of the actions we are taking to mitigate this. Although the most acute pressures are in older people services the report also notes pressures in mental Health, learning disabilities and Children's Services.

2. Background to pressures

The Association of Directors of Social Services wrote collectively on the 17th September to the Welsh Government. In it they described services as being under unprecedented pressure across Wales:

'It is our view that significant pressures are now more profound and wide ranging than at any time during the management of this COVID-19 pandemic. This situation is starting to limit our ability to support some of our most vulnerable people in the community... social care and health are under significant pressure and the demand continues to grow exponentially in comparison to capacity. Moreover, the added complexity of those presenting to social care services is unique and unprecedented.'

There has been extensive media coverage across the UK highlighting these issues.

There is a broad understanding locally and nationally that there are multiple external factors impacting on our ability to deliver social care. These include:

- A reduction in immigration since the UK left the European Union. This has increased the need for the hospitality industry to recruit locally, effectively competing for the same pool of staff as social care.
- A reduction in staff prepared to continue to work in the sector with some making lifestyle choices post the pandemic to reduce working hours.
- Continuation of furlough for some employment groups hardest hit by COVID.

- A general fatigue in the workforce with some seeking to leave the workforce or work in other areas after the pressures of COVID.
- An increase in, vulnerability, loneliness, and frailty in older people across our communities.
- Longer stays in hospital and delays on receiving medical intervention during COVID has led to a higher level of complexity and people needing greater levels of support.
- An increased reluctance to consider residential care because of COVID 19 and the requirement to self-isolate on entry even when double vaccinated and testing negative.
- Continued restrictions on residential care- The absence of up to a third of residential care admission capacity because of guidance requiring closure of admissions if there are two staff cases of COVID 19. Some large homes have effectively been closed to admission for months because of tiny numbers of staff contracting COVID 19 through community transmission.
- Incidence of COVID 19 remain very low in older, vaccinated vulnerable people with pressure on staffing largely because of the guidance surrounding household Covid contacts being unable to work rather than overall incidences of COVID 19.
- Less entry level applicants in all sectors exacerbated by record numbers going to higher education.

It is hard to put an individual weighting to these separate issues, but it is clear services that were previously stable have very rapidly faced an unprecedented increase in demand alongside significant recruitment and retention challenges. It has been described across the sector as a 'perfect storm' leading to unprecedented challenges in service delivery.

3. Homecare

National problems in relation to the delivery of Homecare (also known as Domiciliary Care) are significant. Until 2014 Carmarthenshire incrementally reduced the proportion of the homecare market delivered directly through the Council from 75% of all packages to less than 25%. Since 2014 we have grown the capacity of the in-house service. As of today, the county commissions or delivers 1153 packages of long-term Homecare. Approximately 35% of the total number hours of care is delivered by our in-house team. This rises to approximately 38% when we include reablement. The Council has committed to incrementally increase this. Our in house residential and homecare services have been a vital safety net throughout the pandemic.

We are currently agreeing between 10 and 15 new packages a week. However, this is not keeping up with demand and despite still supporting as many people as we were prior to the pandemic we now have:

- 52 clients waiting for a homecare package in the community. (There are some clients in addition to this receiving some form of bridging support)
- 52 waiting for a homecare package in hospital
- 26 waiting for a reablement package in the community.

In the last week the fragility was illustrated with the independent sector handing back 13 packages they were unable to deliver. There are also people with reablement who require long term care but are unable to move on.

4. Residential care

The number of people receiving residential care remains significantly below that of the pre pandemic position. Admissions are slow and hampered by COVID guidance that means up to a third of homes are unable to take placements at any one time. This is causing a significant challenge to hospitals. We have approximately 880 older people in residential care. 48 of these are in short term placements, some of whom are waiting for homecare. We are of the view that Welsh government should publish updated admissions guidance that reflects the lower risks following the successful vaccination programme in our residential homes.

The complexity of those in homes has increased significantly and a review is underway to consider the level of staffing needed to support these individuals and whether their needs can always be met long term in residential care.

Outbreaks amongst staff in care homes are small and there is little or no evidence of high levels of transmissions within residential care homes with staff contracting COVID in the community. Overall, the sector is relatively stable.

Homes are experiencing some staff recruitment issues and we have seen significant wage inflation in the sector which is likely to impact on the cost of care to individuals and the authority in the next financial year. Our in-house Children's homes have a growing number of vacancies.

Overall though the position is stretched but stable.

5. Assessment/ social work Capacity

Because of an increase in the number and complexity of referrals we currently have 240 assessments outstanding. These cases are deemed to need an assessment of need but are yet to be allocated. All people waiting have been screened and RAG rated red, amber, or green. All cases rated as red are prioritised for urgent allocation. All those in hospital who are deemed medically fit for discharge are now allocated. All emergency referrals are allocated on the day received to the short-term assessment duty officers. Whilst we have 244 waiting on average, we are now receiving more than 650 requests for assessment a month. It has proved impossible to fill all existing posts despite re-advertising.

Children's Services have also seen a significant increase in demand with assessment teams carrying caseloads that are, in some cases higher than they should be. Whilst all statutory cases are allocated this is having an impact on first line managers, as small number of whom are now carrying some cases. Small numbers of vacancies in some teams that have been impossible to fill or even get applicants. This pressure is also feeding into prevention and family support services that support families in the community with the increase in demand leaving them less responsive and with some waiting lists.

6. Workforce

Recruitment and retention of additional and sufficient staff in Homecare, residential care and social work is the primary risk and is the root cause of the challenges nationally and in the sector. In Carmarthenshire the position is:

- In House Homecare- 37 vacancies (FTE) There are currently 12 applicants being interviewed and processed.
- Private Homecare- 49 vacancies (FTE)
- In the last week 15 staff have left across the sector with 12 new staff being employed. None have left our in-house service. Reasons given are multiple but there is considerable movement within the sector.
- In House residential Care - we currently have 23 care staff vacancies although recent recruitment has been positive, and the numbers are reducing. Children's residential has 9 vacancies across the 3 units.
- Children's Social Work- there are currently 6 vacancies with some posts having been advertised on multiple occasions.
- Older Peoples Social Work- There are currently 9 social work vacancies
- Mental health Social Work- there are currently 7 social work vacancies (This includes newly created posts). Cover of the out of hours rota in this area remains problematic.

Overall, the authority has close to one in five social work posts vacant, when you take out the newly created mental health posts. Some functions of these posts are now being carried out temporarily by staff easier to recruit and by a small number of agency staff. This is challenging and we are taking action to remedy. Given these vacancies the productivity of the existing services and staff is impressive but not sustainable.

7. Key Actions

We have a range of mitigating actions and work underway in place to help us manage the position. Amongst many others I have highlighted the following:

- Those waiting for care or assessment are risk assessed via a Rag rating system, offered alternatives (such as residential care) or are choosing to receive short term care in a residential setting whilst they wait. Whilst the overall numbers are below many other authorities the position is more challenging in terms of the availability of care than it has ever been. The Senior management team and Heads of service quality assure the decision making in this. Further independent quality assurance of our risk management is also planned.
- We continue to develop alternative care / step down options with the health board including additional step-down beds at Llys y Bryn, reablement enhanced with recruited health staff in a new initiative from the NHS and further multiple actions to improve ward assessments and patient flow. Whilst this reablement initiative is positive this temporary NHS initiative is a very small part of the overall actions required and recruitment has yet to start to these temporary NHS posts.
- We are deploying one off funding from Welsh Government to support terms and conditions of homecare staff.

- We are acting to both support the independent sector and to recruit to expand our in-house service. Pay within our own service is well above market rate and is now significantly above £11 per hour for most of our staff delivering care. Pay varies considerably in the independent sector. It is evident from this that delivering the living wage nationally will not impact on most care staff in Carmarthenshire who already receive it.
- We continue to pay overtime rates for additional hours homecare staff work on top of their contracts
- The impact of recruitment initiatives and fluctuations in demand are monitored twice a week through an emergency gold command structure that I chair. The corporate management team is then updated on a weekly basis. The Lead member receives formal updates weekly and all Gold Command actions.
- We have placed additional resources in HR and across the organisation centralising Recruitment and fast tracking the appointment process.
- We have an extensive campaign agreed and complete rebranding of our offer has been completed. This in the process of being rolled out.
- A fundamental review of our social work offer has been complete with benchmarking terms and conditions across Wales. Recommendations from this will be progressed in the coming week.
- We have created additional traineeship and seconded additional internal staff onto the social work degree. A wider long-term apprenticeship for care staff to qualify whilst working with NVQs and then progress onto the social work degree is planned across Children and adult services.

Welsh Government understand we need a significant additional long-term investment to improve terms and conditions across the sector. We need long term investment to reduce the hours staff have as client contact time to make the job more attractive, but this will, again, require a significant long-term investment from Welsh Government. We have had critical short-term funding, but we must have a settlement long term that enables us to adequately fund older peoples social care and transform the model of delivery.

8. Conclusion

This report sets out challenges and risks which are significant but are being managed. Any significant risks going forward will be considered carefully and reported where necessary. Members can be assured that the position is being managed locally but that it is inevitably impacting on individual's quality and overall provision of care in Homecare.

We have a robust system of reporting, decision making and management in place with clear lines of sight corporately and through the political leadership. Judging the effectiveness and impact of our current set of actions will only be possible in the next 3-4 weeks.

Members are asked to note the position and consider if any more actions are necessary.

DETAILED REPORT ATTACHED?	NO
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IMPLICATIONS

I confirm that other than those implications which have been agreed with the appropriate Directors / Heads of Service and are referred to in detail below, there are no other implications associated with this report:

Signed: Jake Morgan

Director of Communities

Policy, Crime & Disorder and Equalities	Legal	Finance	ICT	Risk Management Issues	Staffing Implications	Physical Assets
NONE	YES	YES	NONE	YES	YES	NONE

2. Legal

This report has been produced to comply with the statutory duty imposed on the Director responsible for the social care function.

3. Finance

The challenges facing this service are causing significant variations to the planned budget. The variances are reported bi-monthly as part of the normal Budget Monitoring cycle. Significant variances include: -

- Underspend on residential care homes for older people – linked to demand
- Overspend in residential care homes and supported accommodation for learning disability / mental health – linked to delays in delivering the savings proposals
- Underspend in day services across all sectors which creates service pressures in Direct Payments and Home Care

There is significant new activity being undertaken to mitigate the risks outlined. Welsh Government has offered several new funding opportunities to meet these additional costs, which includes the Social Care Recovery Fund. Each of the funding streams have a project lead to monitor progress and report outcomes and spend to the funding body.

However, the pressure on this service will inevitably have a long term impact on the cost of provision and will present longer term budget challenges to our Medium Term Financial plan, especially when Welsh Government withdraw the Hardship Funding.

5. Risk Management Issues

The report highlights national risks in relation to the delivery across social care. It also highlights some of the key actions being taken to manage these risks. It will be critical that the impact of these actions is monitored closely so further action can be taken if the position does not improve.

The risks are also highlighted on the departmental and corporate risk register.

6. Staffing Implications

The report has no direct implications in relation to staffing. Any changes in roles, grading or terms and conditions because of actions being taken will need to follow the appropriate HR procedures.

CONSULTATIONS

I confirm that the appropriate consultations have taken in place and the outcomes are as detailed below

Signed: Jake Morgan

Director of Communities

1. Scrutiny Committee – N/A

2. Local Member(s) - N/A

3. Community / Town Council – N/A

4. Relevant Partners - N/A

5. Staff Side Representatives and other Organisations - N/A

**CABINET MEMBER PORTFOLIO
HOLDER(S) AWARE/CONSULTED**

YES

Cllr J. Tremlett has been fully consulted with the content of the report.

Section 100D Local Government Act, 1972 – Access to Information

List of Background Papers used in the preparation of this report:

THERE ARE NONE