

Name of meeting: Health and Adult Social Care Scrutiny Panel

Date: 1 March 2023

Title of report: Adult Social Care National and Local Picture

Purpose of report: To provide national and local picture of Adult Social Care and its implications for health partners

Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards? Decisions having a particularly significant effect on a single ward may also be treated as if they were key decisions.	Not Applicable
Key Decision - Is it in the <u>Council's Forward Plan (key decisions and private reports)</u> ?	No
The Decision - Is it eligible for call in by Scrutiny?	No
Date signed off by <u>Strategic Director</u> & name	Richard Parry 17/02/2023
Is it also signed off by the Service Director for Finance?	N/A
Is it also signed off by the Service Director for Legal Governance and Commissioning?	N/A
Cabinet member http://www.kirklees.gov.uk/you-kmc/kmc-howcouncilworks/cabinet/cabinet.asp	Cllr M Khan

Electoral wards affected: All

Ward councillors consulted: N/A

Public or private: Public

Has GDPR been considered? Yes

1. Summary

Adult social care is facing ongoing challenges and rising demand nationally as well as locally, with increased pressure on resources and funding. There is a growing need for adequate social care support for an aging population, and a shortage of workers in the care sector. The government has made some efforts to address these issues, but more comprehensive solutions are needed to ensure that everyone who needs social care can access it in a timely and effective manner. This paper outlines key challenges across Domiciliary Care and Care Homes, Intermediate Care as well as wider issues such as workforce shortages, both on a national and local level, and considers what ongoing work in Kirklees is best placed to respond to those challenges. State of Care reports from the CQC and Skills for Care provide much of the national context for this report.

2. Policy Background and Context

The Council's vision for adult social care, which was co-produced with people who use services, family carers and front-line staff, sets the way in which we expect people to want to be supported. This will include greater use of technology, equipment and care at home services, supported by investment into housing opportunities such as extra care housing and bungalows, to enable people to live independently in their own home for longer. Use of residential care will continue to decline and be used by people for shorter periods of time towards the end of their lives.

The Market Sustainability Plan produced as part of the now delayed social care reforms and our Market Position Statement set out how we anticipate services to change over time to meet demand.

3. National Picture



State of Care Headlines

- The Care Quality Commission (CQC) published its annual [State of Health and Care in England report](#) in November 2022.
- The 2022 report marks a departure from previous CQC reports in terms of position and tone and is significantly more critical of the state of care services than in the recent past.
- The report states that staff across health and social care are working under increasingly intolerable conditions, leading to record vacancies, standards slipping nationally, and patients not always receiving the care they need.
- The report highlights the gridlock experienced by some patients trying to access the care they need due to patient flow challenges in acute settings. While the reasons for this situation are complex, the CQC highlights that the main challenge is workforce shortages across the NHS and social care.
- The report found that half a million people may be waiting either for an adult social care assessment, for care or a direct payment to begin, or for a review of their care - 'the failure of successive governments to adequately stabilise social care and address huge vacancies is bringing the whole NHS to a standstill.'
- It also found that 2.2 million hours of homecare could not be delivered because of insufficient workforce capacity, in the first 3 months of 2022, and that 41% of homecare providers said that workforce challenges have had a negative impact on the service they deliver.
- One of the key challenges facing the health and social care system is the backlog of elective appointments, with 7 million people now waiting to receive care.
- Primary care demand currently outstrips capacity to deliver appointments. The CQC reports variation in people's access to primary care services, as well as low satisfaction. The report states that government should manage expectations for the public and support primary care by highlighting that general practice has, for the past eight months, been operating at 20 per cent above pre-pandemic levels of activity.
- CQC also highlight deepening inequalities, in particular the lack of access to care in areas with high levels of deprivation, for people with disabilities, and from ethnic minority backgrounds and the need for this to be addressed as a matter of urgency.
- The report's findings state that years of underfunding and 'political neglect' of the health and social care system has led to sector failings such as, the number of GPs falling despite the government's manifesto promise of 5,000 extra GPs, nine in ten registered NHS dentists are not taking new adult patients and large numbers of patients stuck in hospital longer than they need to be, due to a lack of available social care packages.

ADASS Autumn Survey 2022

[The ADASS Autumn Survey](#) sets out the experience of adult social care from a local government perspective. The findings include:

- The majority of councils (64%) experienced care home closures or the hand back of home care contracts in the second half of 2022 compared with only 25% in the similar period in 2019.
- Between 2021 and 2022 there was a 17% increase in the amount of home care delivered but an 87% increase in the number of home care hours that could not be delivered nationally.

- However, there is 50.7% improvement (from just over 2.2m hours to 1m hours) from the position in the middle of last winter (1st January – 31st March 22) when staff sickness and the impact of omicron were prevalent.

Covid-19 brought about recognition by central government about the need for greater oversight of adult social care. As a result, legislation has been introduced that will increase data collection and analysis in the sector and give the Care Quality Commission an assurance function with local government commissioning of social care.

Requests for support - The number of new requests for adult social care support to local authorities increased among working-age adults, from 560,000 in 2019/20 to 578,000 in 2020/21. However, requests for support by older people fell, from 1.37 million to 1.34 million.

Despite the fall in 2020/21, requests for support are still 6 per cent higher than they were in 2015/16 (1.81 million). Among working-age adults they have increased 15 per cent, from 501,00 to 578,000 over the same period. Among older people, they have increased 2 per cent, from 1.31 million to 1.34 million.

Service delivery nationally - The number of people receiving publicly funded long-term care rose slightly. The number of people receiving publicly funded long-term care in 2020/21 increased by 3,000 (0.3 per cent) to 841,000. This increase was made up of a very small decrease in the number of 18–64-year-old adults receiving long-term care, outweighed by a slightly larger increase in the number of older people receiving long-term care. However, when increases in population size is considered, there was a small decrease in the number of people per 100,000 population receiving long-term care.

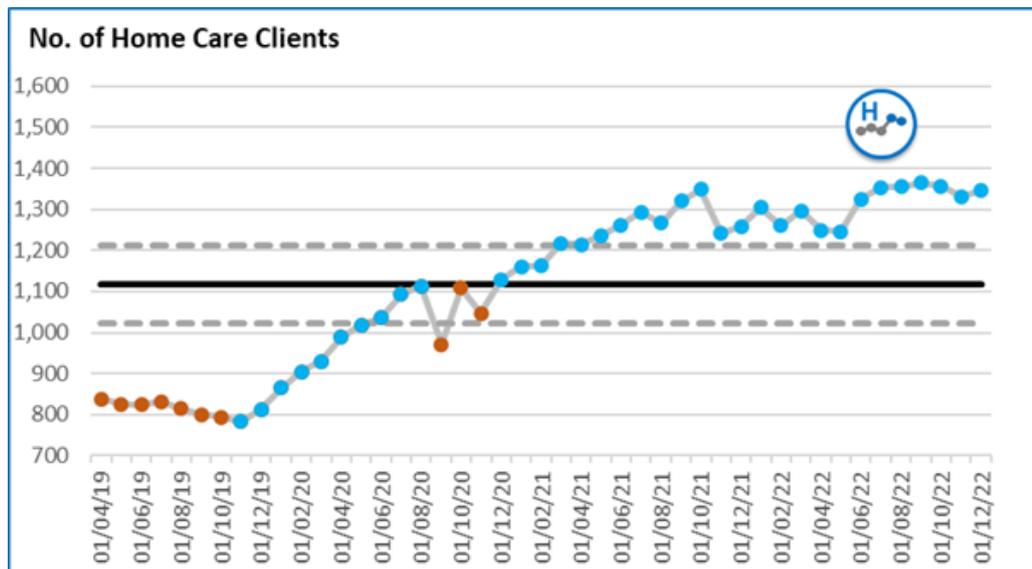
4. Local Context

Domiciliary Care

In January 2023 on average there were 1,330 people per week in Kirklees receiving funded domiciliary care through adult social care. There are 79 home care providers operating in Kirklees.

The number of home care service users being supported has grown by 59% (April 2019 to January 2023). This is 492 additional home care recipients, and an additional 8,907 hours of care a week. (April 2019 to January 2023). In home care we have seen the proportion of

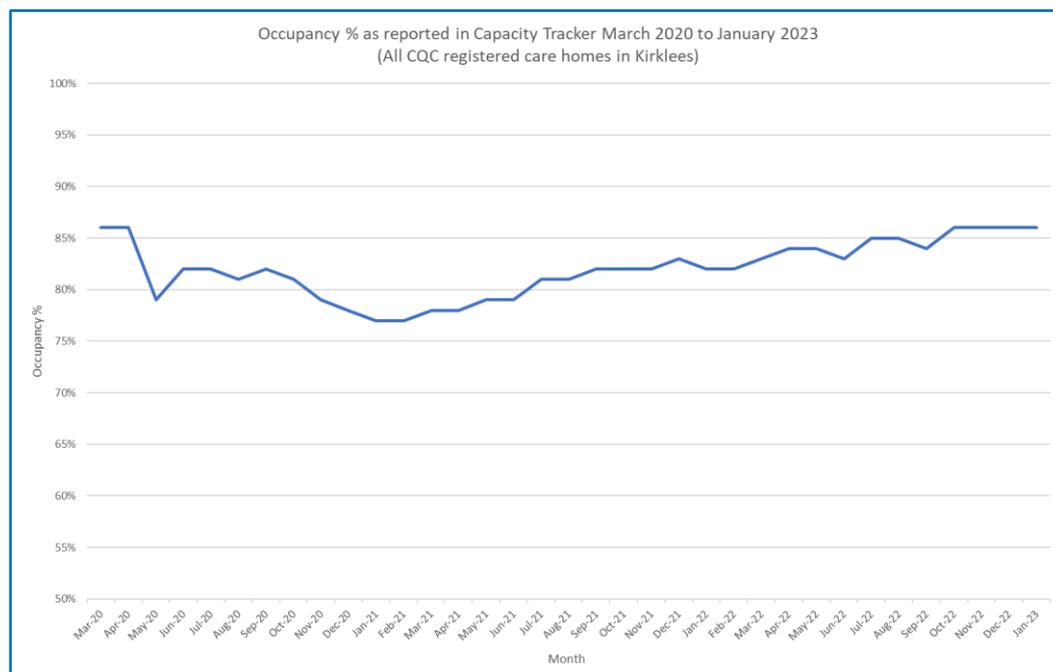
service users receiving intensive support of over 10 hours a week increase by 72% since April 2020 to January 2023.



Unlike many places in the country, Kirklees has minimal waiting lists for people needing a home care package. This is as a result of investment into pay rates for care staff, the work undertaken by In2Care to support recruitment and retention into the sector and the work by the Council’s Occupational Therapists and reablement services to maximise people’s independence and reduce reliance on services.

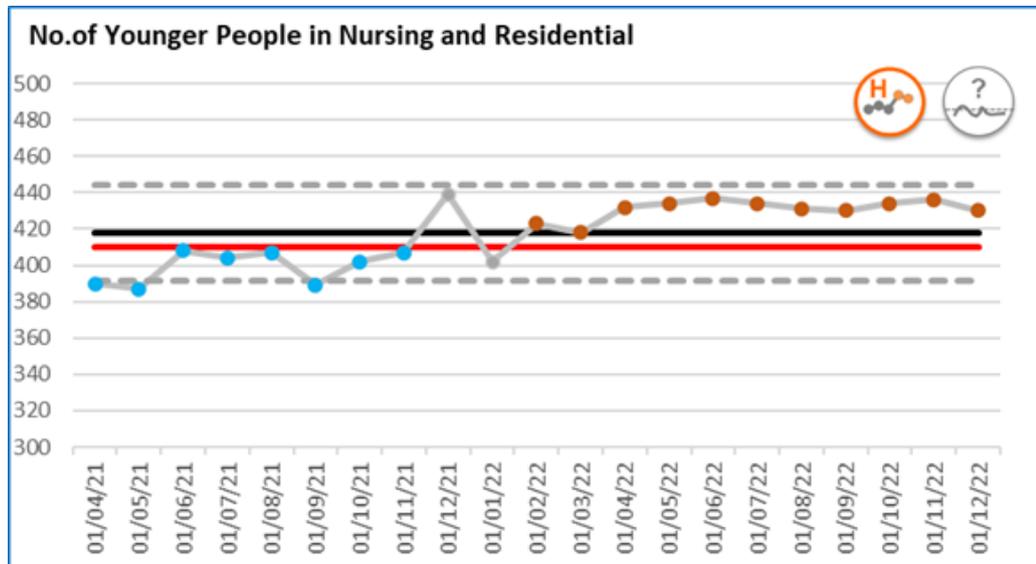
Care Homes

There are 125 care homes (3489 CQC registered beds) in Kirklees and this has reduced by 5 since 2020. Although we saw reductions in the number of people living in care homes as the pandemic hit the sector hard, we have since seen an increase in occupancy over the past 12 months which is now only slight below pre-pandemic levels. Some of this arises from the closure of homes which has reduced the overall number of beds and so increased average occupancy. For standard residential care, there is still adequate capacity in the market.



Kirklees supports comparatively more older people to live at home and comparatively fewer older people to live in a care home.

The numbers of younger adults in nursing and residential care had decreased during and shortly after the covid 19 pandemic, however as the Borough recovers these numbers have started to steadily increase. This is consistent with the increase in the permanent admissions ASCOF indicator for 2021/22. The numbers of younger nursing and residential

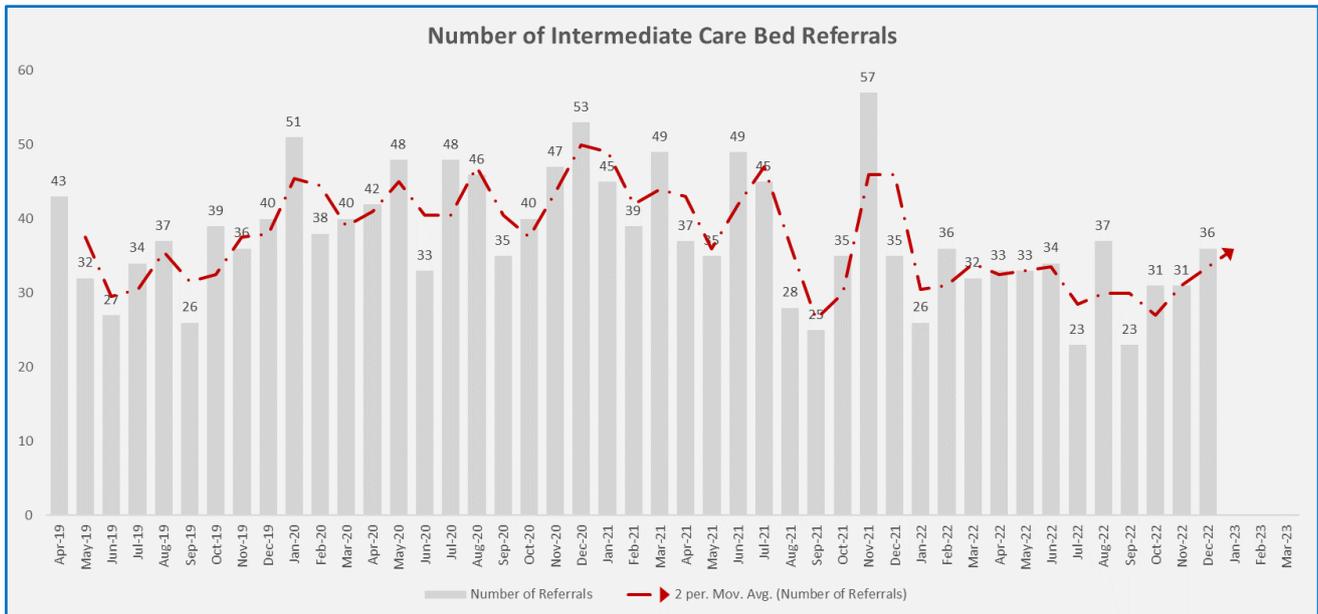


care remain above the target of 410.

Intermediate Care

The National Health Services (NHS) Long Term Plan (LTP) outlines how community services models will be designed for future service delivery. NHS community and intermediate health care packages will be delivered to support timely care, with the ambition of freeing up over one million hospital bed days. Services for older people requires a fundamental shift towards care that is co-ordinated around the full range of an individual's needs (rather than care based around single diseases) and care that truly prioritises prevention and support for maintaining independence. Achieving this will require much more integrated working to ensure that the right mix of services is available in the right place at the right time.

The Kirklees community Intermediate Care Bed (IMCB) occupancy has fallen throughout 2020 and 2021 by 13.5% the average demand is for 48 beds being occupied at capacity across Kirklees at any one time. In view of the ambition to support more people at home (home first), less people are having their needs on discharge met in an intermediate care setting and capacity has been reduced. Bed occupancy has declined from 2016 - 2021 in the IMCB settings (Ings Grove and Moorlands). The average length of stay for patients is 35 days and from the capacity graph it shows that the beds have never been at full capacity.



Demand

The two main referral pathways for demand on social care and social work services come from acute settings or from community settings. An example of increased pressure with corresponding resource would be pressures in local acute settings to discharge clinically fit people as soon as possible. Even though there are good relationships the expectations to arrange discharge and ongoing recovery and support placed upon LA hospital social work teams has increased very rapidly. From one acute trust we have seen 11% average year on year growth in demand for discharge related referrals to social work. Overall, since 2019 volumes have increased by 36%. This is against the social work vacancy levels described in this paper which also affect hospital teams.

Demand from community referrals is now at pre-pandemic levels with increased levels of complexity and a significant rise in referrals relating to self-neglect.

Now

As previous charts have shown demand has fallen and vacancies remain high in part of the care home market. Feedback from the sector suggests that the negative portrayal of the sector in the media over the past few years have significantly impacted interest in new care home placements from both LA funded and those that fund their own care.

There is an expectation that a small increase in demand will be seen as family carers circumstances mean that they are no longer able to support people with increasingly complex needs at home.

In the future

The demand for new places in care homes had been on a downward trend over the past decade, the impact of Covid-19 on the sector has meant the future demand for places is predicted to be lower, the level at which demand will settle is not clear but is not expected to rebound to pre-pandemic levels.

As outlined in the Cordis Bright report future demand is expected to be for shorter more complex packages of support in care homes. If population predictions are correct there will

not be an increase in demand before 2025 when a larger cohort of the baby boomer generation reach a point where care home support may be required.

This future demand has implication for the requirements of buildings, staff skills, and levels of funding that reflect the complex nature of future support needed in care homes.

This also presents an opportunity to reflect on the Council's role as a provider and a key stakeholder in the market.

Workforce

The latest [Skills for Care report](#) sets out the workforce challenges for adult social care.

- The starter rate for the social care workforce fell from 37.3% in 2018/19 to 30.8% in 2021/22 with the overall sector experiencing a 29% turnover rate and 165,000 vacancies in 2021/22 (a 50% increase in vacancies in 12 months).
- Nationally the workforce leavers rate in social work roles was 14.2%, this did reduce over the period of the pandemic but has since returned to 2017/18 and 2018/19 patterns. Our local leaver rate was 10.8% for the same roles.
- Vacancy rates nationally for social work roles are around 9% which again is heading back to pre-pandemic levels.

Locally:

- 22% of the social workers are over 55 years old leading to the concern that when this age group start to retire it will leave a large gap in social work experience and knowledge.
- 30% of social workers are under 35 with much less experience and a need for more experienced staff and managers to mentor them.
- If we are unable to both recruit and retain staff this will leave a void in social work capacity to manage the more complex statutory duty work such as Court of Protection, Adult Safeguarding, Self-Neglect and Approved Mental Health Practitioners.
- The level of complexity for the statutory work has increased and a review of the job profiles, descriptions, and grading highlights this.
- There is ongoing work regarding the grading of posts, which is indicating that social work posts and occupational therapy posts should be a grade higher to reflect the increase in complexity, risk management and mental impact on the social worker and occupational therapists, and overall to manage recruitment and the retention of skilled staff.

Strategic Ambitions and System Impact

- Increase workforce capacity, (reduce pressure of hospital discharges)
- Increase the Personal Assistant (PA) market providing more personalised choice and care to Kirklees residents
- Support local people into employment in Kirklees which has a positive impact on Kirklees economic activity
- Gather/use intelligence relating to the local social care workforce (and potential workforce) to enable future planning/informs strategic commissioning
- Challenge anecdotal and traditional sector wide thinking about recruitment difficulties

- Assist retention in social care by providing good matches and applicants that have the right values/attitudes
- Increase the number and diversity of new entrants into social care
- Improve efficiency/effectiveness of employer recruitment processes
- Understand the barriers and obstacles faced by applicants and providers
- Increased success via employability schemes
- Increase volunteering
- Retaining and developing staff through career progression into senior roles

Working with the Kirklees Care Association, Registered Managers Network and integrated partners on recruitment and retention including:

- Developing the In2care model to ensure that it continues to reflect the needs of the sector in an ever-changing environment
- Sharing Intelligence and insights around the applicant and provider market to support strategic discussions
- Considering opportunities to offer Council incentives to Care Association members, for example the potential to access discount schemes including Vivup and KAL discounts
- Development and implementation of an integrated workforce strategy
- Development of an Enhanced Carer role that incorporates delegated health care tasks
- Consideration of the development of a joint staffing bank to provide a more cost effective, quality short term staffing solution
- Currently developing and refining the learning & development core offer to include direct training, train the trainer and resource sharing across the wider sector, including Personal Assistants
- Training provided on specific request to support services in need, e.g., Recording Skills
- Previously supported a number of leadership and management cohorts to develop existing and aspiring managers

In2care Achievements to Date:

Number of people supported into roles since 2017:

- Traditional roles (domiciliary care, Residential Care etc) 1656
- Personal Assistant Roles: 294
- Volunteering Roles: 88
- 100+ approaches for 1-1 support each month
- 130+ applications for advertised roles each week
- 150+ adverts promoted at any one time
- 7500+ Social Media followers

In2Care was a Guardian Public Sector Award Winner 2019

5. Implications for the Council

5.1 Working with People

The national context for adult social care will undoubtedly have an impact for people in Kirklees. In addition to the local responses outlined in this report, we will continue to deliver our promise in the Kirklees Vision for Adult Social Care to coproduce services

with people and unpaid carers. This work is being overseen by the Kirklees Coproduction Board.

5.2 Working with Partners

Adult Social Care cannot operate in isolation and improving pathways and focussing on keeping people independent, with an accurate trajectory of demand and complexity, will have positive impacts on the wider system. This includes the Integrated Care Partnership (ICP) and the NHS West Yorkshire Integrated Care Board (ICB) arrangements; the acute trusts, the care market (both residential and domiciliary care); Primary Care Networks and across other council services. An example being the introduction of Liberty Protection Standards coming in from 2023 which has the possibility to increase legal challenges and a need for additional staff. However, by planning for this with accurate data/intelligence and demand insight should mitigate some of the risks to other services.

5.3 Placed Based Working

Our operating model has evolved over recent years with a move to locality based teams, investment in developing informal community based capacity and a greater emphasis on a relationship based approach to working with individuals and local communities. This model also promoted a mobile and agile approach to working.

There has been a similar operating model develop across the wider council and the social model of disability is increasingly embedded in the whole council through initiatives such as dementia friendly design, Changing Places Toilets and Project Search. This locality approach, whilst it pre-dated Primary Care Networks and the pandemic, has been invaluable in responding to the pandemic and in developing our way of working with the Primary Care Networks/Neighbourhood model. Given that the commission will be exploring opportunities for people to live more independently for as long as possible, it is likely that there will be insights gained from an early intervention and prevention approach which will include the effectiveness of community-based models and support.

5.4 Climate Change and Air Quality

N/A

5.5 Improving outcomes for children

Ensuring a clear pathway to adulthood for children focusing on outcomes for children and their family carers working across health, social care, education, and housing. Also, encouraging more younger people into work via increased use of apprenticeships and specialist recruitment programs.

5.6 Financial Implications for the people living or working in Kirklees

Work is underway to procure some external support to enable the directorate to understand the demand from demographic growth, including the impact of social care reform (even though this has been delayed until 2025). As a result of the exercise it is

anticipated that efficiencies will be identified and opportunities to improve independence for individuals.

5.7 Other (e.g. Integrated Impact Assessment (IIA)/Legal/Financial or Human Resources) Consultees and their opinions

Full implementation of the social care reforms and rising eligibility and charging thresholds in 2025.

Mental Health Act reform, currently at White Paper, understanding the impact on adult social care will need to be explored.

6. Consultation

N/A

7. Engagement

N/A

8. Next steps and timelines

N/A

9. Officer recommendations and reasons

That the Scrutiny Panel note the contents of the report and the issues raised.

10. Cabinet Portfolio Holder's recommendations

That the Scrutiny Panel note the contents of the report and the issues raised.

11. Contact officer

Alex Chaplin (Strategy and Policy Officer)

12. Background Papers and History of Decisions

N/A

13. Service Director responsible

Michelle Cross/ Amanda Evans