

Report

Report to:	Social Work Resources Committee
Date of Meeting:	2 June 2021
Report by:	Director, Health and Social Care Executive Director (Finance and Corporate Resources)

Subject:	Care at Home Services
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ update the Committee on the implementation of the new electronic scheduling system within Care at Home Services and to seek approval for the establishment of an infrastructure to improve support, management and co-ordination and monitoring of scheduling, aligned to the times in which services are delivered

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the contents of this report be noted;
- (2) that the proposal to redesign the management arrangements for scheduling and response within the Service over extended working hours be approved;
- (3) that the proposal to transfer the Out of Hours management responsibility for the Service from Emergency Social Work Services to the new extended Care at Home Service be approved;
- (4) that £2.658m that had previously been approved for future budget strategies, including supporting the costs of transitional change in the Care at Home Service be utilised to support the transition towards the proposals outlined within this report;
- (5) that the changes to the Care at Home Establishment as detailed in Section 7.0. are approved; and
- (6) that a further report detailing the proposals for the wider redesign on the service be presented to a future committee.

3. Current Position

- 3.1. Care at Home Services are pivotal in supporting older adults and people with long term health conditions to live at home safely. The South Lanarkshire service directly employs almost 1000 mostly local people, who in turn support over 1600 service users each week.
- 3.2. The Service currently undertakes over 25,000 visits to service users each week. In-line with changing demographics, the Service is increasingly supporting individuals with complex needs who require multiple supports each day, with the proportion of services delivered in evenings and at weekends increasing year-to-year as a result.

- 3.3. The scheduling of visits has long been a challenge within the service due to an outdated IT system. Our current legacy system, SWISPlus has been in operation for over 25 years and while electronic, it relies heavily on the manual scheduling of visits. This leads to significant inefficiencies both in the terms of the scheduling process and in the way that staffing capacity is utilised. Such inefficiencies result in increased costs, downtime, increased use of overtime to cover services and more staff time spent traveling which diverts staff time from service user contact.
- 3.4. Feedback from frontline staff indicates that they do not feel fully supported via the current model of delivery as a significantly reduced management presence operates out of hours, at weekends and on public holidays. There is therefore a need to ensure future models provide adequate management support at the times that services are provided to support the operational delivery of services and the health and safety of a staff group who routinely work alone in communities.
- 3.5. Prior to the Pandemic, the Service procured Total Mobile, a new, sector leading, computer system that will transform and modernise the way it operates. The system offers a range of benefits to service users and staff:
- ◆ **Dynamic scheduling** – the systems technology dynamically schedules visits based on settings, minimising the need for manual intervention
 - ◆ **Improved continuity** – the system enables improved service user matching and enables us to monitor and report on continuity
 - ◆ **More localised working** – the system optimises the best use of Home Carer time and minimises the time they have to travel, giving them more time to concentrate on supporting service users
 - ◆ **Real time service monitoring** – the system provides the Care at Home Service with significantly improved information that enables us to ensure we can monitor service delivery in real time. This enables us to respond to changes quickly. Enabling us to react when staff are running late and prevent visits being missed
 - ◆ **Communication** – the new system provides Home Carers with access to much better information about service users and their needs. Information is available via an app on staff mobile phones and they will also be able to record information electronically, meaning that other professionals will be able to respond more quickly to the needs of service users
- 3.6. The implementation of the system has been delayed as a result of the Pandemic but is now being implemented across the Service. A pilot commenced in the Bothwell and Uddingston areas on 01 March 2021. The pilot has proved very successful and has exceeded our expectations, and as a result, work is now underway to extend the systems use to the remainder of the Hamilton locality. This is scheduled to be completed by the end of May 2021. Following implementation in Hamilton, the system will be extended to Rutherglen/Cambuslang, Clydesdale and East Kilbride localities, in that order, by the end of 2021.
- 3.7. The introduction of the new technology significantly changes the focus of how the service operates. In particular, it enables the service to be managed in a less reactive way, providing managers with real-time information that facilitates decision making and enables significantly improved support to both staff and service users.

- 3.8. The implementation of the system is at an early stage and it is difficult to quantify benefits. However, there is already confidence that the introduction of the system will result in efficiencies in the future. Early indications suggest that the system manages the use of available resources considerably better than the current processes. This is achieved by improved route planning, accurate identification of availability and a reduction in time spent travelling between service users.
- 3.9. The introduction of the new system introduces genuine opportunities to transform the operations of the service and address longstanding issues in relation to efficiency, transparency and staff and service user support. Ultimately, it is believed that the system will reduce downtime within the service, with less time spent travelling between service users and a reduction in the reliance on overtime.
- 3.10. The significant growth in volume and complexity of Care at Home delivery is projected to continue. Care Inspectorate activity over recent years has highlighted concerns about the capacity of the Service to meet this demand, particularly the ability to meet complex health needs with the current staffing model. The supporting infrastructure has remained relatively static for almost 10 years and the model of service delivery needs to change to meet the challenges and requirements of the new decade.

4. Current Model of Delivery

- 4.1. South Lanarkshire Council (SLC) operates a registered Care at Home Service in each of its four localities. The current model became operational in 2012 and brought together Home Help Organiser and Social Work Assistant roles into an integrated team. A hybrid role of Community Support Co-ordinator (CSC) was established as part of this model. This role has been responsible for:
- ◆ scheduling care
 - ◆ supervising staff
 - ◆ statutory service review functions
 - ◆ statutory Social Work tasks of assessment and care management
- 4.2. The current Community Support Coordinator role encompasses a broad range of responsibilities making the roles exceptionally demanding given the fast pace of the Care at Home environment. Recent inspection activity has highlighted the need for the services structure to modernise and for roles to be redesigned to make them more manageable for staff and to reflect a career structure that encourages progression within the service.
- 4.3. Amongst other things, each locality team undertakes a scheduling and a duty function. This function largely operates between the hours of 7:00am and 4:45pm (4.15pm on Friday). A limited Out of Hour's response is then provided by the Emergency Social Work Service (ESWS) in evenings, weekends and on public holidays.
- 4.4. Essentially, the scheduling and duty functions are responsible for the allocation of work to staff and responding to issues that arise during the course of the day. This would include arranging staff cover in the event of absence, supporting staff that are running late, responding to service user or staff concerns. This is a critical role that ensures the Service responds to changing situations. However, the function is very reactive and tends to respond to calls from staff or service users. This is particularly true Out of Hours, where the volume of Care at Home related calls dominates the business of ESWS. On average, over 34,000 calls taken by ESWS are Care at

Home related, accounting for over 75% of all calls. This poses significant risks to both ESWS and to the Care at Home Service.

- 4.5. As a result, there are significant limitations to the support that the Service offers to staff and service users. The introduction of Total Mobile provides an opportunity to introduce significant improvements to this if infrastructure is realigned.
- 4.6. The current staffing resource allocated to scheduling and duty is as follows:
 - ◆ 30.85 FTE Community Support Co-Ordinators
 - ◆ 3.78 FTE Home Care Support Workers
 - ◆ 3.5 FTE Social Work Assistants
- 4.7. There is also currently an establishment of 24.6 FTE Home Care Support Workers, These posts are graded on par with Home Carers and their use has been flexible and directed to meet local frontline operational needs. As a result, 15.14 FTE Home Care Support Workers are currently in post and budgeted for and the funding for the remaining 9.46 FTE posts has been directed towards frontline posts.
- 4.8. Of the 15.14 FTE posts that remain, 3.78 FTE support the current scheduling and duty arrangements. The other posts provide a varied support to the service and the tasks associated with the role are being incorporated into the new roles outlined within this report and other roles, like Social Work Assistants that are being developed within the Service.

5. Proposed Model of Delivery

- 5.1. In October 2019 and March 2020, Social Work Committee supported a review of the Care at Home Service which considered the changing circumstances; increasing demand; complexity; and new opportunities. This report provides further detail about the proposed new model. The Pandemic and the advent of the new electronic scheduling system has led to a shift in priorities for the redesign of the Service as it has become increasingly evident that the model currently in operation is insufficient to support the real-time monitoring and response required to support staff and service users going forward.
- 5.2. The Care at Home Service has changed significantly in recent years. Twenty years ago the Service provided a significant proportion of its services during office hours. However, the changing need of service users has resulted in a seismic shift towards seven day services that are provided during the day, in evenings and at weekends. The supporting infrastructure has not kept pace and the majority of management support continues to be provided during legacy office hours during weekdays.
- 5.3. There is a critical need to align the scheduling and response function to the times that services are delivered to ensure that the Service is responsive to the support needs of service users and staff and the increasing need for services to be arranged over seven days to support the hospital discharge function. There is a widely held view that the current Out of Hour's arrangements are insufficient and present risks to both ESWS and Care at Home Services and there is an urgent need to address this.
- 5.4. The technology that is now available both via Total Mobile and other Council systems provide significant opportunities to work differently. The last year has seen a significant shift towards agile working and it is believed that a new scheduling and response model could capitalise on this to facilitate a number of benefits:
 - ◆ Care at Home Services assuming responsibility for the scheduling and response co-ordination during the hours of 6:30am to 11:00pm every day of the year

- ◆ ESWs being released to focus on its key statutory functions out of hours
- ◆ a blended approach to locality based scheduling and response services, with staff being office based during the day and working from home out of hours
- ◆ significantly improved management support for staff and service users aligned to the times that services are delivered

- 5.5. It is proposed that new arrangements are implemented on a phased basis to coincide with the implementation of Total Mobile across locality teams. This would see the new model fully implemented by the end of 2021, with Care at Home assuming responsibility for Out of Hours from ESWs in the same phased way.
- 5.6. The nature of the role required of staff working within the new model is different from that of a Community Support Co-ordinator. It is therefore proposed that two new roles are created, a Support Scheduling Assistant, who will be responsible for the scheduling of services and response to low level enquiries and a Scheduling Support Supervisor, who will take responsibility for the co-ordination of the service and respond to more complex situations. The proposed staffing is:
- ◆ 2 FTE Team Leaders
 - ◆ 14.4 FTE Scheduling Supervisors
 - ◆ 46.8 FTE Scheduling Assistants
- 5.7. The Team Leader posts will operate outwith normal working hours and provide management and support to the service across localities. The Scheduling Supervisor and Scheduling Assistant posts will operate over a shift rota that will ensure operational response between the hours of 6.30am and 11pm.
- 5.8. The volume and potential complexity of enquiries that will be received via the teams requires supervisory support to be in place during all hours of operation and this is reflected in the proposed span of control.
- 5.9. The new roles that are being introduced will incorporate and replace the roles currently undertaken by the Community Support Co-ordinator and Home Care Support Worker posts outlined earlier in this report and as such, it is proposed that these posts are deleted from the establishment as outlined at 7.1
- 5.10. The changes will be monitored as the scheduling systems is embedded. As further efficiencies are identified the impact on the wider Care at Home structure will be reported to a future committee.

6. Project Support Team

- 6.1. The scale of the implementation of the new scheduling system is significant with the programme of work well underway rolling the system out across the Service. At the end of implementation, the requirement for ongoing support will be critical to the continued success. An ongoing programme of upgrades to the system takes place on a minimum quarterly basis with the requirement for user testing and updating of processes and procedures within the Care at Home Service. The development and delivery of training to all staff within the Care at Home Service will be required on an ongoing basis in-line with recruitment requirements to ensure continuity of service. Development of reporting tools to support the Service will be crucial as the system is fully implemented.
- 6.2. Engagement with other councils who implemented the system reported failures when support was withdrawn too quickly following implementation.

- 6.3. In order to ensure the continued success of the scheduling system, it is proposed to extend of the Project Support Team up to a maximum of a further 24 months with support being withdrawn on a gradual basis during this period.

7. Employee Implications

- 7.1. The employee implications are detailed below. The scheduling posts will be created on a permanent basis with the Project Team posts remaining temporary for up to a further two years.

Post (Social Work)	Current No. of Posts (FTE)	Proposed Number of Posts (FTE)	Change	Grade	SCP range	Hourly rate	Annual salary	Annual salary with on costs	Gross Cost inc on costs 30.3%
Team Leader Out of Hours	0	2	2	G3 L8 plus 4	85 - 86	£25.03 - £25.39	£45,677 - £46,334	£59,517 - £60,373	£119,034 - £120,746
Scheduling Supervisors	0	14.4	14.4	G2 L4 plus 2	59 – 61	£17.03 – £17.55	£31,078 - £32,027	£40,495 - £41,731	£583,128 - £600,926
Scheduling Assistants	0	46.8	46.8	G2 L1 plus 2	36 - 37	£12.14 - £12.33	£22,154 - £22,499	£28,867 - £29,317	£1,350,976 - £1,372,036
									£2,053,138 - £2,093,708
Community Support Co- ordinators	66.4	35.55	-30.85	G3 L2	63 – 65	£18.08 – £18.60	£32,994 - £33,943	£42,991 - £44,228	(£1,326,272 - £1,364,434)
Home Care Support Workers	24.6	0	-24.6	G1 L4	30 – 31	£11.12 - £11.29	£21,452 - £21,780	£27,953 - £28,380	(£423,208 - £429,673)
Social Work Assistant (ESWS)	6.19	2.69	-3.5	G2 L4 plus 4	63 – 65	£18.08 – £18.60	£32,994 - £33,943	£42,991 - £44,228	(£150,469 - £154,798)
									(£1,899,947 - £1,948,905)
Performance & Support Officer	1.0	1.0	0.0	G3 L4	72 - 74	£20.61 - £21.25	£37,611 - £38,779	£49,007 - £50,529	£49,007 - £50,529
Performance & Support Assistant	2.0	2.0	0.0	G2 L1	34 - 35	£11.78 - £11.98	£21,497 - £21,862	£28,011 - £28,487	£56,022 - £56,974
									£105,029 - £107,503
Total	100.19	104.44	4.25						£258,221 - £252,307

- 7.2. The proposals contained within this report reflect a permanent change to the structure of the service. All posts except the Project Team would be created on a permanent basis. The Project Team would be temporary for up to a maximum of two years.
- 7.3. Given the scale of the change proposed, in depth consultation will take place with staff and trade unions both collectively and individually throughout the process, to ensure that the best outcomes can be achieved for staff and the service as new posts are established and the posts of Home Care Support Worker and Community Support Coordinator are deleted from the establishment.
- 7.4. There will also be a requirement to consult with staff from Emergency Social Work Services to facilitate the transfer of 3.5 FTE Social Work Assistant posts to the Care at Home service.
- 7.5. As part of the wider programme of consultation, alternative options will be explored with existing staff as part of a collective matching process. This will include consideration of the Support Scheduling Supervisor and Support Scheduling Assistant posts contained within this report. In addition, the establishment of Social Work Assistant posts, which are the focus of a separate report to Social Work Committee, will also provide another option for staff impacted by the proposals. The matching process will also seek to give early consideration to posts that will form part of the future report to Committee.

8. Financial Implications

- 8.1. At both the Council meeting on 26 February 20 and the Executive Committee on the same day, it was agreed that the council underspend of £2.658m in its revenue budget would be used for future budget strategies, including supporting the costs of transitional change in the Care at Home Service.
- 8.2. Previous reports on 04 March 20 and 07 August 20 have sought funding for a Project Team and Hospital Discharge Team totalling £0.509 per annum, this cost was to be included in the £2.658m provision to support the Care at Home Service.
- 8.3. In respect of the staffing restructure to support scheduling the current cost of the existing service is £1.949m and the recurring costs of the proposal will be £2.094m, resulting in a net cost of £0.145m.
- 8.4. The cost of extending the project implementation team will be £0.108m per annum and up to a maximum of £0.216m over a two year period.
- 8.5. It is anticipated that the posts will be appointed to during the third quarter of the 2021/22 financial year, with an estimated six month cost of £0.126m.
- 8.6. It is proposed that funding is drawn down from the £2.6m transitional funding allocated to support the redesign of the service as outlined at 8.3 and 8.4. The forecast drawdown in 2021/22 is £0.635m.
- 8.7. In summary, the £2.658m temporary commitment to support the Care at Home Services, will meet the costs of the Project Team, the Hospital Discharge Team, the Scheduling restructure and the Project Scheduling Team.

8.8. It was previously agreed that efficiencies realised as a result of the implementation of the new system would fund its ongoing costs. However, as part of the Integrated Joint Board's financial plan, £0.156m has been allocated for the cost of the scheduling system for 2021/22. Discussions are ongoing with the Chief Financial Officer to confirm the permanency of this funding. Once this position has been confirmed, should funding still be required the intention is to convert up to 11.6 FTE Home Carer posts to meet the ongoing cost of the system. This will be released as a result of more efficient use of staff time and a reduction in the use of overtime.

8.9. In addition, future reports will be brought to Committee, setting out the future proposals for the use of the transitional money and a longer term strategy and structure for the Services, which will also include recommendations about financial sustainability of the remodelled service. These reports will cover financial implications and requirement for investment. In the interim, the Resource will take forward the proposed incremental changes, requiring recruitment to key roles to support this transition. The request is to approve these posts on a permanent basis, should the longer term remodelling impact on this, there is scope to minimise employee impact and deploy employees to other posts available within the resource as a result of natural turnover. The posts approved on a permanent basis to date total £0.470m and if there are no further requests for the use of this funding then monies will be available until 2025 to fund the permanent posts.

9. Climate Change, Sustainability and Environmental Implications

9.1. There are no implications for Climate Change, sustainability or the environment in terms of the information contained in this report.

10. Other Implications

10.1. Currently the Service is failing in a number of areas associated with the current model of delivery as well as capacity in the Service to meet the statutory requirements of safe delivery of services. These posts are required to ensure that the Council meets its statutory duties to provide assessment and care management functions for supported people and carers.

10.2. There is a requirement to ensure that as a Council we demonstrate a commitment to redesign of Services and investment to ensure safe practice in accordance with the Regulations for a Registered Care at Home Service.

10.3. There are no sustainable development issues associated with this report.

10.4. There are no other issues associated with this report.

11. Equality Impact Assessment and Consultation Arrangements

11.1. This report does not introduce a new policy, function or strategy, or recommend a change to existing policy, function or strategy and therefore no impact assessment is required.

11.2. Consultation has taken place with the Trade unions regarding the report

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21 May 2021

Link(s) to Council Values/Objectives

- ◆ improve later life
- ◆ deliver better Health and Social Care outcomes for all

Previous References

- ◆ Social Work Committee report, 04 March 2020

List of Background Papers

- ◆ None

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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