

Report

Report to:	Social Work Resources Committee
Date of Meeting:	20 May 2020
Report by:	Director, Health and Social Care

Subject:	Transformation and Service Improvement Programme
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1. Purpose of Report

1.1. The purpose of the report is to: -

- ◆ provide an update of progress of the Transformation and Service Improvement Programme in relation to the following services and the impact the Coronavirus (COVID-19) has had on these services:
 - South Lanarkshire's Care Facilities Modernisation Programme
 - Adult and Older People's Day Services Review
 - Care at Home Services Improvement Programme

2. Recommendation(s)

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

- (1) that the content of the report be noted.

3. Background

- 3.1. As part of South Lanarkshire Council's commitment to improve later life for adults and older people and to meet the future needs and wishes of residents and service users, a programme of Transformation and Service Improvement is being undertaken by the Health and Social Care Partnership. This work supports the delivery of the Integrated Joint Board's (IJB) Strategic Commissioning Plan and continues to strengthen many of our community-based supports.
- 3.2. Coronavirus (COVID-19) which is a fast spreading virus that can cause more severe symptoms in people who are older or have weakened immune systems, impacted significantly on the elderly and vulnerable population of South Lanarkshire. It has also affected the business of the Health and Social Care Partnership that has had to focus on protection and continuity of care at a time of significantly reduced staff availability and slowed the progress of the Transformation Programme. The workstreams affected are the Care Facilities Modernisation Programme; the evidence-based review of Adult and Older People's Day Services; and the Care at Home Improvement Programme.
- 3.3. In summary, the Partnership has been refocusing its resources on key activities that will support the community in responding to the prevailing situation. The measures that have been put in place are designed to support core functions, ensure that services for the most vulnerable such as Care at Home and Care Homes are maintained and to work with NHS, community and acute colleagues to support patient flow, optimise access to critical health services and save lives. The Service

has stood down services which are non-essential and/or increase the risk of the infection spreading.

4. Current Position

4.1. Care Facilities Programme

4.1.1. As highlighted above the Care Homes Modernisation Programme has slowed down due to the need to concentrate capacity on core service delivery and in response to the requirements around social distancing and non-essential activity. This includes a delay in the build of the new care hub and technology enabled homes in Blantyre, postponing a consultation event in Clydesdale area and a delay in concluding the work to develop a firm proposal for the Larkhall and Stonehouse area project. It is however worth noting that whilst the work with the care facilities is limited there is still some technical design work being undertaken by Housing and Technical Resources staff involved in this programme.

4.1.2. A key task for the Partnership has been to rapidly free up space in the acute hospitals in anticipation of peaks in COVID-19 related demand for beds. This has been successfully achieved and has included:

- ◆ purchasing additional Nursing Home beds
- ◆ the two former South Lanarkshire Council care homes, McWhirter's in Larkhall and Kirkton in Blantyre have been temporarily recommissioned and staffed to support service users with lower level needs
- ◆ Health and Social Care Partnership (HSCP) staff (Nursing and Social Care) have also been operating an empty wing of Bothwell Castle care home, however this has been stood down.

4.1.3. These resources are required to deliver additional care at a point in time where the community workforce is depleted across the entire Social Care sector. McWhirter is primarily being used for people who should be at home but where there has been very limited capacity to start new Care at Home packages. Kirkton has been on standby should the numbers of referrals increase rapidly. These three units have been staffed through a combination of redeploying residential staff, day service staff and using other council employees particularly from South Lanarkshire Leisure and Culture. NHS Lanarkshire and HSCP Managers have delivered training to support these employees into a Social Care role and to undertake vital signs monitoring to support the targeting of Primary Care Services for these residents.

4.2. Adult and Older People Day Service Review

4.2.1. It has been necessary to pause the work of the Adult and Older People Day Service Review to release capacity to respond to the COVID-19 situation. Good progress was made in relation to consultation and gathering an evidence base to guide future service transformation. Initial findings have indicated a need for further examination of the extensive number of operational buildings attached to these services and to the continuation of historical transport methods. The consultation has brought to the fore a need to consider how services can be more person-centred, flexible and responsive to the changing needs of individuals. These issues will be the subject of a future report.

4.2.2. The COVID-19 contingency plan for business continuity within Adult and Older People Day Services correctly anticipated an up to 30% staff absence alongside the requirement for the traditional day service to be suspended. A significant cohort of the Day Care team are operating an alternative delivery model focussed on supporting the most vulnerable people to: remain safely within their own homes, reduce stress and distressed presentation, provide essential personal care, prevent

carer breakdown, and ultimately to avoid the need for individuals to require either Residential or Hospital Services. Thus far, this approach has been successful with no service user requiring a higher level of acute or residential placement. Demand for the alternative model of service delivery has increased as the weeks of lockdown, social distancing and shielding have progressed. From an initial service delivery of circa 550 hours in the first week, this has increased to circa 980 hours by week four. All 800+ cases are risk reviewed weekly and the Service provides a rapid response to changing need. An increase in need may be due for example to individuals becoming unwell, (including being symptomatic or COVID-19 positive) or where some of our adult population with learning disabilities have a limited understanding of the risks to their own and others' safety by not employing the national guidance on staying at home.

- 4.2.3. A further third of the Day Services care workforce are currently deployed into other parts of the Resource such as Residential Care Homes, Home Care and Care and Support Services. These staff are fully trained registered carers with the necessary skill set and experience to function well in these alternative settings
- 4.2.4. Other services currently undertaken by Day Services staff includes the provision of home from hospital or residential care transport. Day service staff are fully trained in passenger assistance methods and are therefore able to support timely discharge using fleet service vehicles whilst ensuring that shielding and social distancing is maintained. Other individuals are also supported using this service to attend urgent cancer treatment appointments.
- 4.2.5. Four centres, one in each locality have remained open as management hubs to support the work of this dispersed model of day service delivery and the associated functions which have been referred to. Administrative and management processes have been quickly developed to support the model including an electronic staff scheduling system. The learning and experience which has come from this rapid re-modelling will be taken forward into the Day Services Transformation Programme.
- 4.2.6. There is uncertainty about the time frame for relaxation of the lock down measures. Given the significant frailties and underlying health conditions of this service user group, it is likely that this may be one of the last services to be fully reinstated. Shielding and social distancing for this group is likely to last far longer than for the general population however this may be the opportune time to make changes to what the service will be after the lockdown ceases.
- 4.3. Care at Home Service
- 4.3.1. Much of the Improvement Programme for this service is also suspended as the managers have concentrated on maintaining service delivery for those with the greatest vulnerabilities when staff absence is high and there is a need to minimise the number of people in acute care awaiting a care package. Members are aware of the age profile of this workforce which includes staff considered vulnerable or indeed shielded and of the necessity of symptomatic employees not having contact with frail elderly service users. The Service has continued to deliver services to people within their own homes across all localities and have been supported by redeployed staff. Induction training has been provided to all additional staff, to ensure they have the necessary skills to carry out the duties of a Home Carer. The Care at Home Service has a mobilisation plan in place to enable the transfer of employees to cover areas critically affected by absence. This information is monitored daily and necessary notifications are provided to the Care Inspectorate.

- 4.3.2. The Care at Home team have been working closely with other services to bring in additional staff and release capacity for personal care. A very successful model has come from work with Community Resources and Education to set up a Community Meals Service. This is a model that some other Partnerships already have in place as a business as usual model. This service was rolled out in South Lanarkshire Council from the 3 April 2020 starting with East Kilbride locality and was fully operational by Easter. This involves the delivery of meals in lieu of a Home Carer being required to attend to prepare a meal. 75 staff from Education and Community Resources have stepped forward to support this initiative which will allow Home Carers to concentrate on personal care tasks. The Service proposes that the HSCP workstream of the Council's Recovery Programme considers how this initiative could be maintained within existing financial resources.
- 4.3.3. The Service has maintained communication with the Care Inspectorate about the improvement activity for the Hamilton and Rutherglen Services. The Care Inspectors have now extended the Improvement Notice for Hamilton until September 2020. The Care Inspectorate have suspended their programme of Inspection activity meantime. The post COVID-19 recovery programme will include work to fully reinstate the improvement actions for these services. In the meantime, the Service has ensured that there is appropriate management capacity in place and is working with HR to consider a programme of recruitment to the new roles agreed such as the Senior Carer posts.
- 4.4.4. Both the internal and framework providers have maintained service delivery. Open care packages have reduced by 52 from 4872 to 4820 since January and is within the normal range. There has also been some capacity to take on some new packages. There has been a need to prioritise care, remodel some care packages and take account of particular services such as day services and some respite provision not operating as before. The wider impact of family members being furloughed, working from home or being in the vulnerable/shielded categories have also cumulatively changed the nature of service delivery for some people. Along with the measures described in the previous paragraphs these factors have mitigated some of the impacts of the circumstances on service delivery.
- 4.4. Personal Protective Equipment (PPE)
- 4.4.1. Assessing risk and maintaining the safety of the workforce has been paramount. This has been carried out in line with national guidance COVID-19: Information and Guidance for Social or Community Care and Residential Settings and the National Infection Prevention and Control from Health Protection Scotland. The guidance, shared with staff, outlines the information they require to minimise the spread of the virus and maintain their own safety and that of the service users.
- 4.4.2. PPE is a priority to maintain this safety. PPE currently used by Social Care staff includes disposable gloves, disposable aprons, disposable face masks, disposable arm sleeves, anti-bacterial hand sanitiser, anti-bacterial wipes and clinical waste bags. The Service has worked closely with the Trade Unions on this matter regarding both the supply and use of PPE.
- 4.4.3. The current guidance issued on 2 April 2020 by the Scottish Government has been agreed across the four UK nations and reflects the PPE requirements by different staff across the public sector. It gives clarity on the recommended PPE when carrying out direct care within people's own homes and takes into account whether the service user is shielding or where there is a member of the household who is a possible or confirmed case of COVID-19.

- 4.4.4 South Lanarkshire was the first area to establish a distribution hub at one of the Day Services building for PPE. It has been working with NSS to ensure that the backup supplies the providers were available locally. The hub is successfully operated and supported by staff from across the Council. The supply of PPE has been a concern and the Hub team has worked strenuously to maintain the supply and ensure that it is distributed effectively and responsively to providers who contact them. The role of the hub has recently been extended to supporting PPE supply to Personal Assistants and unpaid carers.

5. Employee Implications

- 5.1. As indicated in the report there are significant volumes of human resource activity taking place to support the HSCP response. There are considerable employee welfare matters in relation to both vulnerable groups and which impact on service continuity. The redeployment of staff and staff working additional hours is sustaining services meantime.
- 5.2 It is becoming increasingly clear that there is unlikely to be a return to business as before. Some of this is positive in respect of the approach to agile working and use of technology which the Resource wants to retain and build upon. However, for individuals and groups more vulnerable to the impact of COVID-19 infection a return to previous models of service delivery will be at best be many months away and ultimately may not be advisable. The programme of work to consider the recovery and adjustment period has commenced and further and likely ongoing changes to delivery models and ways of working are anticipated.

6. Financial Implications

- 6.1. There is a significant element of financial risk associated with the response to the pandemic. There are costs associated with sustaining services and in terms of standing up new services to meet increased demand. The Chief Finance Officer and Chief Officer has worked with colleagues in the North and the acute sector to draw together a Pan Lanarkshire Mobilisation Plan for the Scottish Government which sets out some of the estimated costs associated with the activities described above.

7. Climate Change, Sustainability and Environmental Implications

- 7.1. There are no implications for climate change, sustainability or the environment in terms of the information contained in this report.

8. Other Implications

- 8.1. At this moment the risk implications associated with this report are being monitored through a COVID-19 risk report.
- 8.2. There are no other risks associated with this report.

9. Equality Impact Assessment and Consultation Arrangements

- 9.1. There is no requirement to carry out an impact assessment in terms of the proposals contained within this report.
- 9.2. There is also no requirement to undertake any consultation in terms of the information contained in this report.

Val de Souza
Director, Health and Social Care

27 April 2020

Link(s) to Council Values/Ambitions/Objectives

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

Previous References

- ◆ Social Work Committee Report
- ◆ Elected Members Briefing Report

List of Background Papers

- ◆ none

Contact for Further Information

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

Ian Beattie, Head of Health and Social Care

Ext: 3701 (Phone: 01698 453701)

Email: ian.beattie@southlanarkshire.gov.uk