

Scrutiny for Policies Adults and Health

Adult Social Care response to Covid-19

Health and Social Care Tactical Cell – Mel Lock

Key Activities - Commissioning

- Dedicated webpage has been established to support the adult social care provider market acting as a single point of contact for providers as well as providing news, guidance and FAQs https://ssab.safeguardingsomerset.org.uk/covid19/
- Fee uplift to support Care Market
- Mobilisation of Henford Court Care Home
- Further support to the Care sector; rescoped the cell to include all of the market and developing a data set for SCC, CCG and Sompar

Community Connect:

- Supporting the Community Resilience cell work to ensure that all people identified as shielding or at risk in Somerset are supported
- The Community Connect infrastructure that we have built over the last 5 years has stood us in good stead for this pandemic. Integrated working with ASC teams in localities, hospitals and at Somerset Direct has enabled us to continue to provide community led solutions and support a large number of people at home.
- CCS has provided over 32,000 community support activities to the public in the 4 weeks since lockdown on 23rd March
- Somerset Sight and Deafplus have adapted their services to enable them to continue to support people with sensory loss
- Age UK have also stepped up their provision and adapted ways of working so that they can support people remotely.
- Working closely with Spark Somerset and Somerset Community Foundation to ensure that VCSE organisations are supported
- Additional funding provided to Community Connect organistions to meet increased demand during the pandemic
- Grown our Microprovider network and supported this valuable workforce by provider regular webinars, advice and improved quality assurance processes

Key Activities - Operations

- Revised ASC operating model, which include mobilisation a 7 day workforce
- Weekly deliveries of PPE to Care Sector the past 3 weeks. Effective collaboration across the organisation to achieve this.

Hospital Interface Service;

- Hospital avoidance and discharge model up and running
- Required to free up 50% bed capacity in the hospitals and worked intensively to discharge people as soon as possible, preferably to their own home but many to interim placements.
- Very successful in releasing bed capacity, which fell below 50% in the acute trusts.
- New discharge lounges in the Acute hospitals now manage all discharge arrangements.
 Social care staff are part of the reduced multi disciplinary discharge teams in these lounges.
- Cases may be transferred to the Somerset Care co-ordination hub for follow up. It is from the hub people may be transferred to a Community Hospital or a pathway bed.
- HIS staff working in the virtual neighbourhood teams work with those people discharged to Community Hospitals and pathway beds to support their transfer in a timely manner to long term care options, which preferably involve that person returning home.

Finances

- To support the Adult Social Care Market a one-off payment equivalent of 10% increase in fees for a 3 month period across **all** homecare provision in residential and nursing care. Total of £3.0m funded by central government COVID19 Emergency funding grant
- Working with the CCG to agree funding streams for the additional discharge capacity that
 has been put in place both through increased block bed provision, increased spending on
 spot beds and the opening of Hendford Care Home. Current estimates are that these
 provisions will cost £4.1m.
- Procurement have produced a schedule estimating the cost of the required PPE to be £452.5k per week, projected to the end of September as a potential PPE spend of £10.8m.
 Discussions are taking place with the CCG regarding the possible sharing of these costs.

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ASC Operational Model - Covid-19 Response

Somerset Direct

workforce home working

Safeguarding

Business as Usual Looking to increase hours of working

DOLS

Scaled down service
May need to increase hours to provide
specialist support

AMHP HUB

Business as usual

May need to increase hours

Business Support

All aspects of this model will need to include Business Support.

7 days per week 8.30 - 5pm

Across Community/MH

- Business as usual
- Triage
- Pathway 1 D2A establish move on plans for on-going support
- Robust links with Somerset Direct
- Link in with Community Resilience Hub
- Sourcing Care Home Care/Unmet needs and Bed Coordination
- · Links in with Neighborhood Hub
- · Welfare telephone calls
- Links with Rapid Response
- Links across all Community Hospital's
- 7 Day working covering 8.30am 5pm
 Calls to <u>Covid</u> 19 helpline outside of these hours handled by out of hours service if necessary
- ASCW/SW/OT LL and LM
- this will include additional support for OOH to ensure 24/7 cover is robust

Hospital Discharge

Neighbourhood/Locality – Integrated with Health

HIS/Community/MH/DOLS – 7 day working 8.30am – 5pm

- · Links with triage/working from home workforce
- Pathway 1 D2A establish move on plans for on-going support
- · Links with Rapid Response
- Flexible ASC OT's provision responding to demand
- Links across Community Hospitals
- Business as usual Moving and Handling, management of risk, MCA, BI
- · Admission avoidance to acute/inpatient
- Assess/arrange short term POC
- Access/arrange medium term support options
- Link in with Commissioning surrounding Provider Market stability, risks and pressures
- Provide support to Provider Market in collaboration with health colleagues
- Decision making in accordance with Ethical Framework and Human Rights
- Supervising SW
- 7 day working covering 8.30am 5pm including aspects of commissioning (Sourcing Care, etc)
- ASCW/SW/OT LL and LM
- Will be mixture of home-based working, community, face to face visits and links within Neighbourhood hub

Discharge Lounge –

HIS to provide – 7 days 8am – 8pm

Support discharge decision making
 Continued Social Work presence to

 Continued Social Work presence to provide expertise surrounding Mental Capacity, MCA and BI, Ethical Framework and Human Rights Act

YDH – 1 x LL- link into RUH YDH – 2 x SW

MPH-IxLL-link into WGH

MPH - 2 x SW

HIS LL will have lead roles f 7 days 8am – 8pm

- Pathway 1 Discharge to Assess
- MCA, Ethical Framework and Human Rights

HIS LL will have lead roles 7 days 8.30am – 5pm

- Pathway 2/3 assessment/review – establish move on plans
- Links in Rapid Response OT's linked with service
- MCA, Ethical Framework and Human Rights

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A new hospital avoidance and discharge service has been set up in Somerset in response to the Covid-19 crisis.

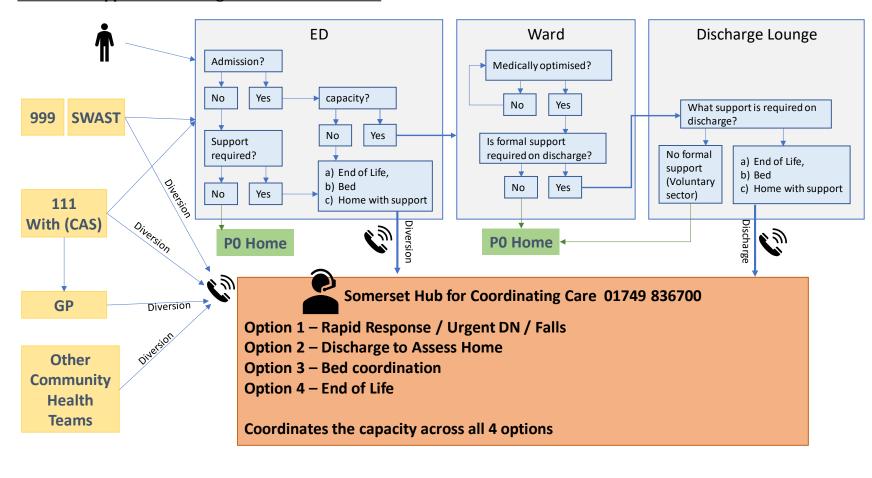
This has been set up in partnership between Somerset County Council (SCC), Somerset Foundation Trust (SFT) (which incorporates Musgrove Park Hospital and Somerset Partnership Community Provider), and Yeovil District Hospital (YDH).

The new offer will support both admission avoidance and hospital discharge through one central point with two key changes.

- Our acute hospitals will facilitate a rapid MDT Discharge lounge function and
- Community Health and Social Care will coordinate all care from a new hub, building on existing arrangements.

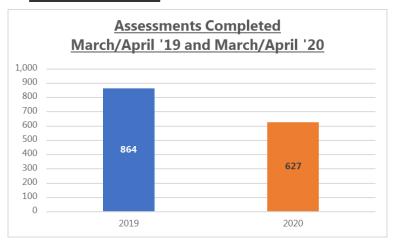
This capacity has been expanded considerably in response to the current situation, with more rapid response, more home support, and additional intermediate bed capacity. The overall system flow is outlined in the diagram here and on the next slide.

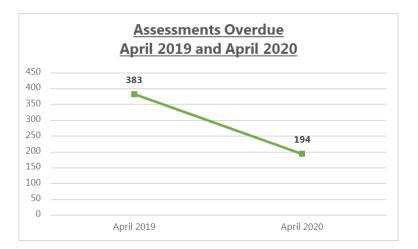
Somerset Supported Discharge and Diversion Model



Key performance information

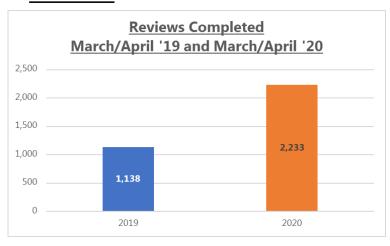
Assessments:

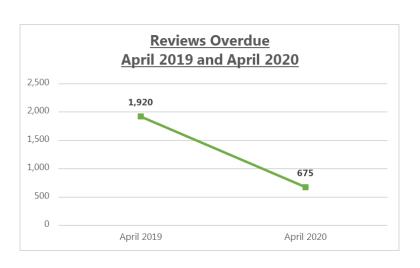




Completed assessments for March/April '20 were down by 27% compared to March/April '19. However, assessments overdue also reduced by approx. 49%

Reviews:



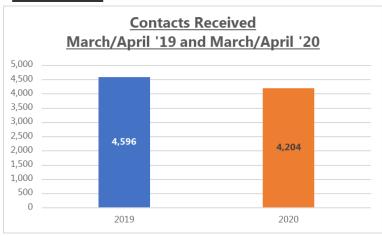


Completed reviews for March/April '20 increased by 96% compared to March/April '19. The number of overdue reviews reduced to 675 – a reduction of over 1,300 (65%) compared to April '19



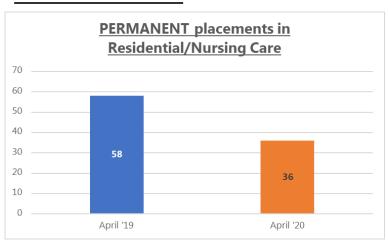
Key performance information

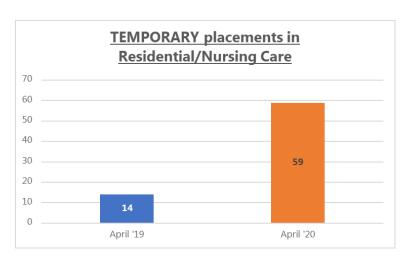
Contacts:



The number of contacts received by Adult Social Care in March/April 2020 was approximately 14% lower than the same period in 2019.

New Placements:





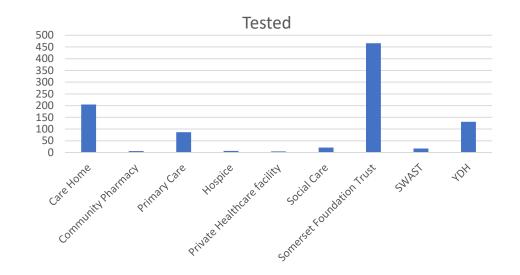
The total number of new placements made increased from 72 in April '19 to 87 in April '20 (an increase of 21%). However, there was a significant shift in the split between temporary and permanent. 64% of placements made in April '20 were temporary compared to 19% in April '19.



REFERRALS RECEIVED BETWEEN 1 APRIL 2020 – 25 APRIL 2020

945 people have been tested

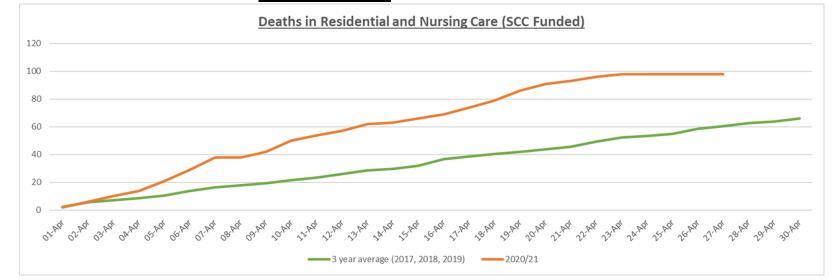
Referral Source	Tested
Care Home	205
Community Pharmacy	6
Primary Care	87
Hospice	7
Private Healthcare facility	5
Social Care	21
Somerset Foundation	
Trust	466
SWAST	17
YDH	131
Grand Total	945



Positive / Negative Results	
Indeterminate	5
Inhibitory	1
Negative	699
Positive	197
Grand Total	902

Awaiting 43 results

RECORDED DEATHS OF <u>SCC FUNDED</u> CLIENTS IN RESIDENTUAL AND NURSING HOMES



Average over those 3 years shows 66 deaths in April.

The figure for April 2020 to date* is 98 *28/04/20