

Adult Social Care and Communities Scrutiny Committee

25 January 2022

Report from the Executive Director of Adult Social Care and Public Health

Adult Social Care Update

Social Care Reform

As previously reported to this Scrutiny Committee, the Government released in September the policy document “Build Back Better. Our Plan for Health and Social Care”. The Government has now developed and published in December a more detailed White Paper entitled People at the Heart of Care: adult social care reform.

Building on the Policy Paper, the White Paper sets out what is described as “*an ambitious 10-year vision for how we will transform support and care in England. Our vision puts people at its heart and revolves around 3 objectives:*”

1. *People have choice, control and support to live independent lives.*
2. *People can access outstanding quality and tailored care and support.*
3. *People find adult social care fair and accessible.*

Person-centred care is a key theme running through this vision. Genuine choice and control about personalised care and support can enhance quality of life and promote independence in a way that matters to individuals. We know that there are already strong examples of our vision in action, where people can choose the type of care and support that really works for them, happening in pockets across the country. Therefore, an important part of what we want to do is make this happen more consistently, so that everyone – no matter where they live – can benefit.

The document then further outlines the 10-year vision for adult social care followed by a summary of opportunities that the Government intends to build on to achieve its vision; setting out a number of policy chapters covering:

- *housing, technology and embedding innovation*
- *how we can empower those who draw on support and care, unpaid carers and families*

- *our strategy for the social care workforce*
- *how we will make sure the proposals in this white paper are effectively delivered to support our vision*

The Government also reiterates its commitment to reform how people in England pay for their care so no one needs to pay more than £86,000 for their personal care costs, alongside more generous means-tested support for anyone with less than £100,000 in chargeable assets.

Fuller details on all of these issues will be provided as they become available but in the meantime the White Paper can be accessed via:

<https://www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper/people-at-the-heart-of-care-adult-social-care-reform>

ASCOF Indicator

At the last meeting of the committee, there was a discussion regarding the performance against the percentage of adults with Learning Disabilities in employment indicator in the performance dashboard. The data from March 2020 showed that 0.8% of people with a Learning Disability were in employment and is a national indicator that is collected as part of the Adult Social Care Outcomes Framework (ASCOF) data set. This is compared to data previous years performance: 2019 3.1%, 2018 6.4%. 2017 6.8% and 2016 8.7%.

This particular ASCOF measure has been a bone of contention for some years now as Local Authorities have different approaches when it comes to “long term support”. The ASCOF Measure is the number of people known to Council Services in employment, however the criteria are detailed below.

“The definition of individuals ‘known to the council’ is restricted to those adults of working age with a primary support reason of learning disability support who received long term support during the year in the settings of residential, nursing and community but excluding prison”

The team who supports people with a Learning Disability to gain employment are based within the County Council’s Enablement, Innovation and Employment Services (EIE service). This service is not counted as providing long term support,

so all the people they help into employment are not counted in the indicator mentioned above. In effect the work of the team diverts people away from long term services and so it means there are fewer people captured by this indicator. Other Councils may still channel this work via their day services and therefore they will therefore count that activity towards this indicator.

All Councils report differently therefore this is not a good indicator of what is going on with some Councils still reporting very high figures. The British Association for Assisted Employment (BASE) and other organisations continue to lobby Government to change this descriptor back to “Known to Adult Social Care” as this gave a better indication of the actual picture.

Of the 333 people that the EIE service have placed in work through since 2015, 251 are known to Adults or Children’s Services. 55% are known to learning disabilities services. 87% of those placed in work are still in work at 26 weeks, although the 52 weeks sustainability data has dipped slightly due to the impact of Covid.

The past 12 months have been difficult as some people with a Learning Disability have lost their jobs during the pandemic and the EIE service is finding that some of their customers still lacking confidence in returning to or finding new work. The EIE Service are doing a lot more pre-employability work to increase confidence and there has been a shift in the sectors recruiting so more work is needed to encourage people to reconsider their employment goals. But the EIE service are continuing to find employment and are still working with ASC to encourage referrals.

Mandatory Covid-19 vaccinations for Health and Social care staff

Care home staff

In November 2021 Covid-19 vaccination for all staff entering care homes in England became compulsory. While the Department of Health and Social Care predicted in their ‘Statement of Impact’ that between 3-12% of care home staff may leave due to the vaccination policy, the impact has been lower than this in Gloucestershire based on a targeted survey of a sample of care homes (reported previously to Scrutiny).

As of 23rd December 2021, 93% of staff in both older and younger adult care home settings have received both doses of the vaccine, and 95% at least one vaccine. The remaining 5% (approximately 400 staff) will either have been granted medical exemption, be in the process of requesting medical exemption, or be on maternity leave. This data relies on care homes updating coverage data on the NHS Capacity Tracker and may therefore underestimate true coverage. Numbers of staff that have left, or moved within, the care sector due to the legislation is not collected on the NHS Capacity Tracker.

In terms of impact on GCC directly employed staff, the legislation has had minimal impact and a very small number of staff (less than 5) will be leaving the service due to the legislation.

Health and Social care staff extension

In December 2021, legislation was passed to require all service user facing staff working in services which deliver CQC regulated activities (for example: domiciliary care, adult day services and drugs and alcohol services) to be vaccinated against Covid-19 (2 doses). This extends the previous legislation which came into force in November 2021 making it mandatory for people entering CQC registered care homes to be vaccinated and will include the majority of staff working in the health and social care sector. It will also include those in administrative and managerial roles.

At the point of writing, there were 873 regulated activities registered with CQC in Gloucestershire across community health and social care, although some providers may register for more than one regulated activity (more information on CQC regulated activities is available on this website) <https://www.cqc.org.uk/guidance-providers/registration/regulated-activities>).

To be compliant with the legislation, staff will need to have received two doses of the vaccine by 1st April 2022. A booster dose is not currently being mandated; however, this may change. If someone is not currently vaccinated, they must have received their first dose by 3 February in order to have their second by 1 April.

Gloucestershire County Council is developing communications to social care providers to raise awareness of the legislation and signpost employers and staff to vaccination clinics in the county. These communications will be targeted at;

- GCC employed social care staff
- GCC and NHS commissioned social care providers
- Wider independent social care sector

As there is no single record of vaccine coverage in the wider social care sector, registered managers will be encouraged to understand the potential impact of the legislation on their service by collecting information on vaccine coverage and escalating potential staff retention issues with commissioners.

As with the previous guidance for care home staff, reasons for exemptions are minimal and include a previous severe reaction to the vaccine, or a choice to temporarily opt out of the vaccination programme while pregnant. If a member of staff believes that they are exempt they will be required to formally apply for an exemption through NHS 119 and their GP.

Assurance of Quality of Provisions in Care Homes

During the last committee meeting questions were raised regarding how we assure ourselves of the quality of care in older people's care homes. The listed below details how we gain assurance:

1. Our Proud to Care team support the market with the selection and recruitment of staff to ensure that we have good quality staff working in our system.
2. Our Proud to Learn team works with providers to ensure that they are aware of and able to access development opportunities for both the care workforce and management.
3. We have recently moved what was the "Care Home Support Team" into integrated commissioning to become the "Care Sector Support Team" and are developing the new role to ensure that all our workforce are signposted and offered training on clinical areas as well as the fundamentals of care.
4. We have infection control nurses in place to support care providers with provision and management of good infection control procedures in care homes.

5. The Brokerage Contract Managers, (CM's) manage contract compliance with OP care providers and liaises with CQC, Safeguarding and commissioners to ensure contract compliance and address quality issues as they arise. Depending on the area of concern CM's will either work with CQC, CCG Quality Team the IPC Team, Safeguarding or Adult Social Care operations or a mixture of the relevant stakeholders
6. Our Safeguarding Team works with CQC, Brokerage and commissioners to address safeguarding concerns in specific providers and monitor across the sector as a whole.
7. CQC registers providers and inspect to ensure quality standards are met; they also work closely with Safeguarding, Brokerage and Commissioners to address quality concerns with specific providers and the market.
8. When there is a quality concern raised about a provider CQC, Safeguarding (if it is a safeguarding issue) and Commissioners work together and with the provider to address this.