Older People, Carers and Unscheduled Care Performance Report

(Quarter (3) 2021/2022)

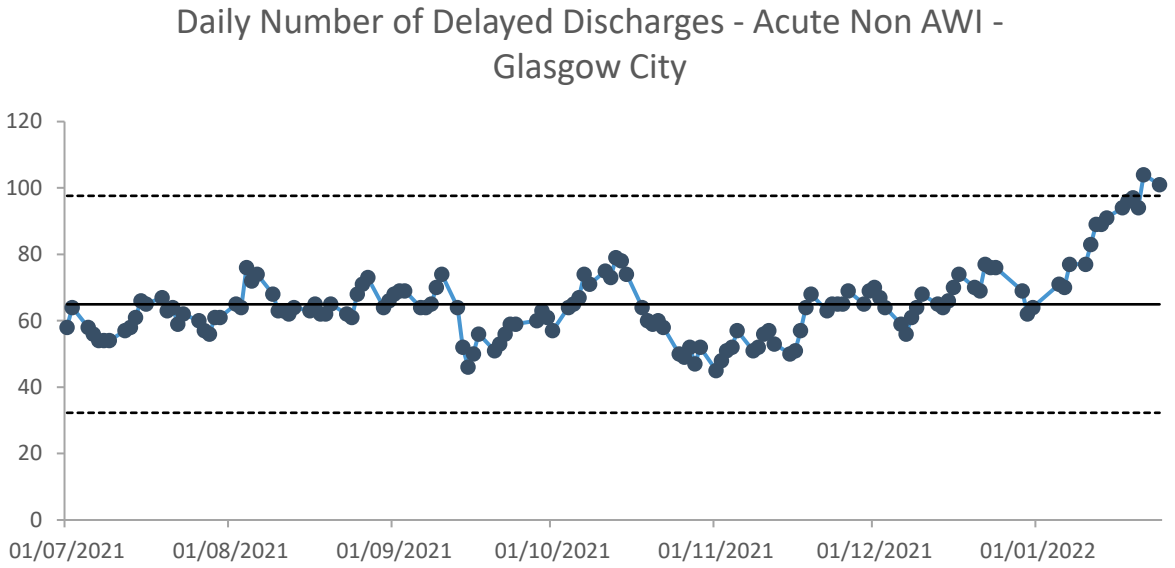
Frances McMeeking,
ACO for Operational Care Services

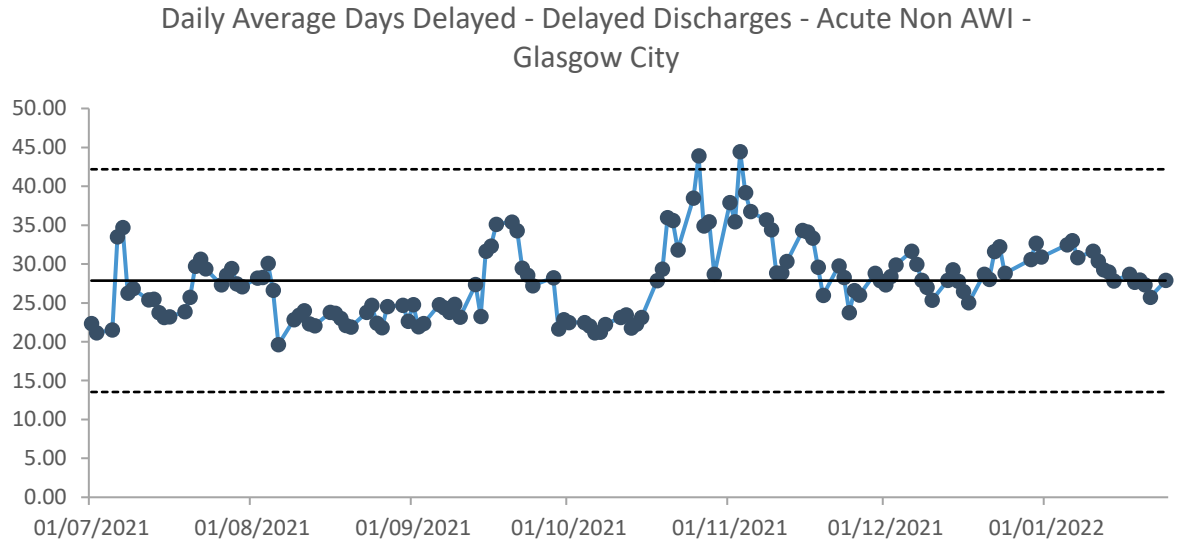
Stephen Fitzpatrick,
ACO for Older People & South Locality

Introduction

- Delayed Discharge
- Impact of Covid
- Strategic Priorities: Residential & Day Care Services
- HSCP Care at Home
- Intermediate Care: Step Down, D2A & Actions Underway
- Future challenges and opportunities

Delayed Discharge: Acute AWI & Daily Number of Delays





- The above graphs evidence that Delayed Discharges have been increasing throughout 21/22 within Glasgow, whilst the average Days Delayed have remained consistent throughout the year.

- The Delays are categorised into delay codes with the top three delay reasons coded. They are the following:

  - 24C being the most prevalent reason at 25.5% of total delays; awaiting place availability in a nursing home
  - 51 with the second highest scoring at 14.9% of total delays; legal issues (including intervention by patients' lawyer) informed consent and / or adult protection issues.
  - 27A with the third highest scoring at 14.5% of total delays; Awaiting place availability in an intermediate care facility.

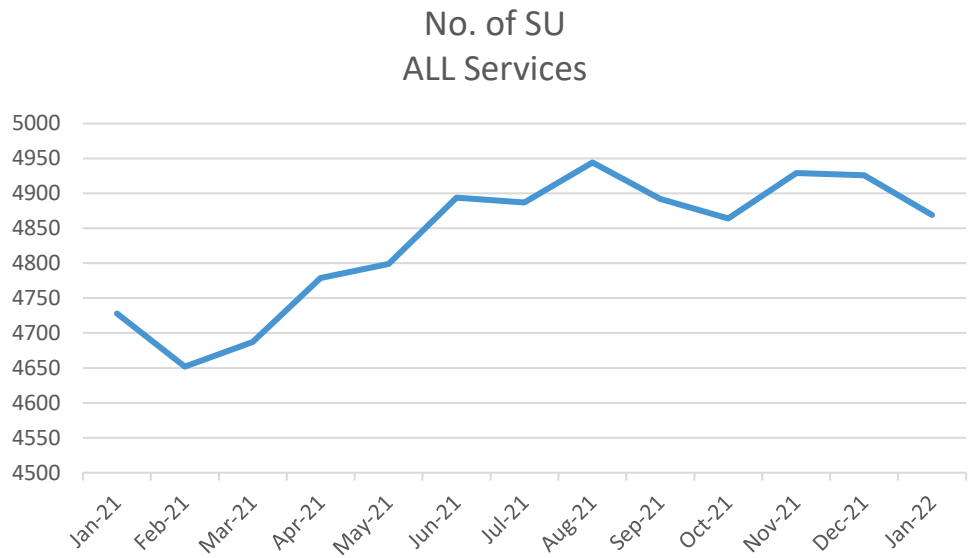
Impact of Covid

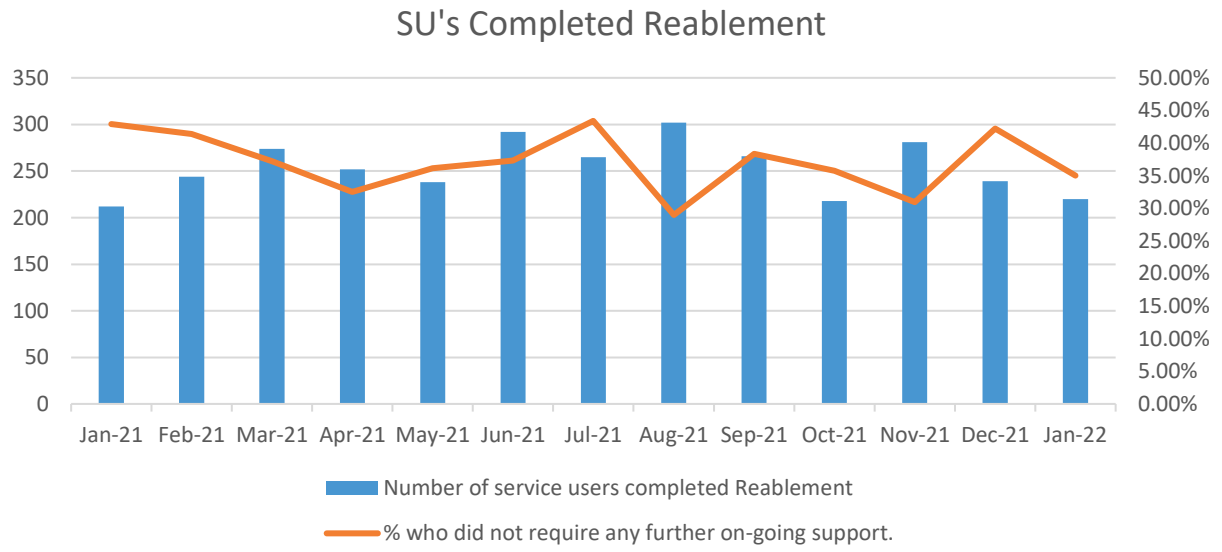
- Direct impact on admissions to care homes. At January 2022 40% of care homes were closed or partially closed to admissions due to Public Health outbreak status
- IMC beds have been impacted by Covid due to ongoing outbreaks. Closures range from 2 – 5 weeks (December – March 2022)
- Discharge to Access - New pathway, where people are assessed in a Care Home environment, not a hospital setting - With 182 admissions from Jan 21 to Jan 22.
- Care homes are risk averse to hospital admissions due to staffing resources, staggered admission policies, families and carers challenging on isolation periods and testing, police investigation (Kopper) and the recruitment challenges for nursing and senior social care staff. Staff retention is an emerging issue.
- Wards closed to discharge due to covid outbreak or close contact status of patient
- IPC Guidance for Admissions to Care Homes is the same as Delta and despite the fact that Omicron illness is severe. The same issues have applied across all Adults & Older People's Care Homes within the city.

Strategic Priorities - “Enabling Independent Living for Longer” Residential and Day Care Services

- Occupancy as at February 2022 is 97.3%
- New rapid “Discharge to Access” pathway to maximise appropriate access to long term care. This is a right time approach to discharge with full assessment in a homely setting.
- The 5 HSCP residential care homes have participated in the national pilot of “Near Me” to support engagement with residents and their families. All statutory social work reviews have been completed in the last 6 months (97%)
- All 10 day care units were reopened in August 2021 and remain fully operational, although all are impacted by current guidance on social distancing, IPC measures
- Our wellbeing strategy for residents and staff has been the cornerstone of our care and support, enabling our residents to live well. All 5 care homes are fully open, with very active communities and family engagement plans in place to enable our residents to remain engaged

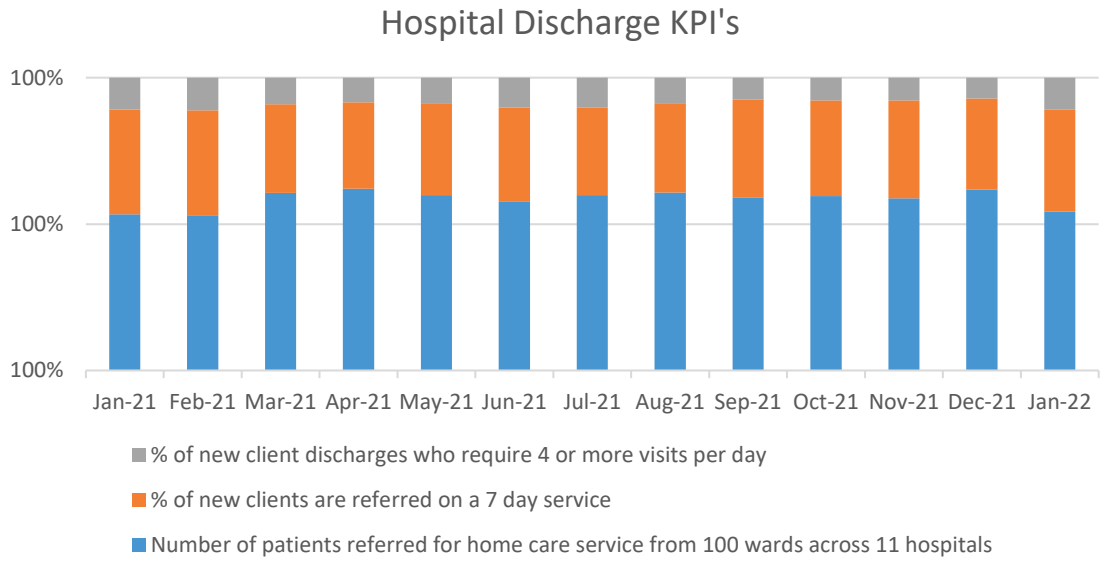
HSCP Care at Home

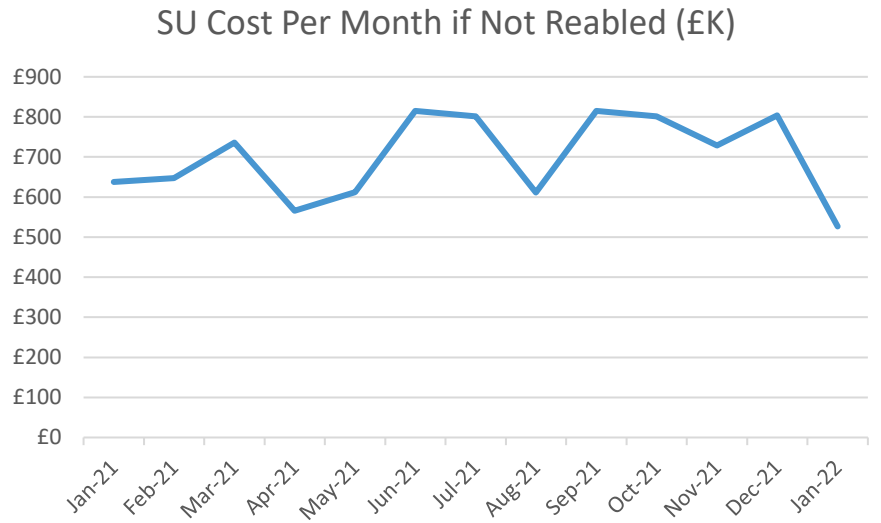




- Throughout 21/22 there has been an average increase of approx. 300 service users across Care at Home.
- The average number of Homecare visits per week has increased from approx. 58 000 at March ‘20 to approx. 84 000 as of Jan ‘22.
- 59.9% of services are delivered out of hours, evenings and weekends.
- A total of 3 091 completed reablement within the last 12 months.
- In Jan 2021, 1 293 service users completed reablement and required ongoing support. As of Jan 22, 1 633 completed and required ongoing support (26.3% improvement over previous year whilst operating in a pandemic).

Current Position January 2022

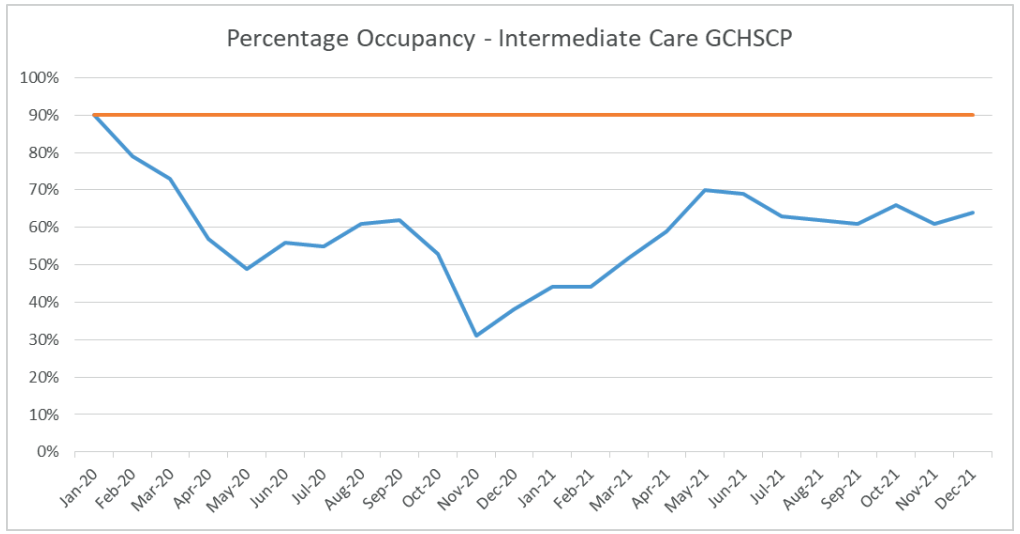


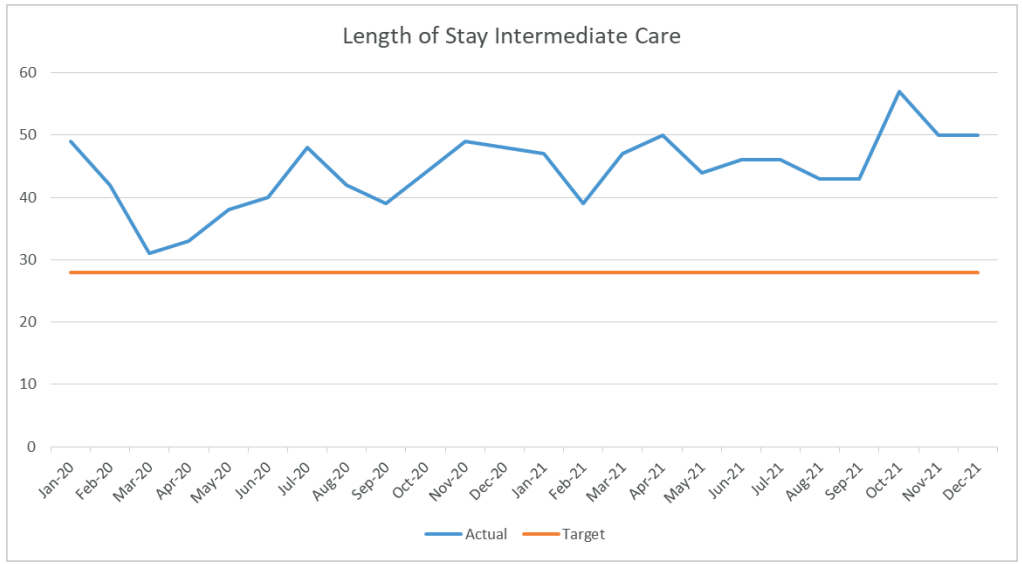


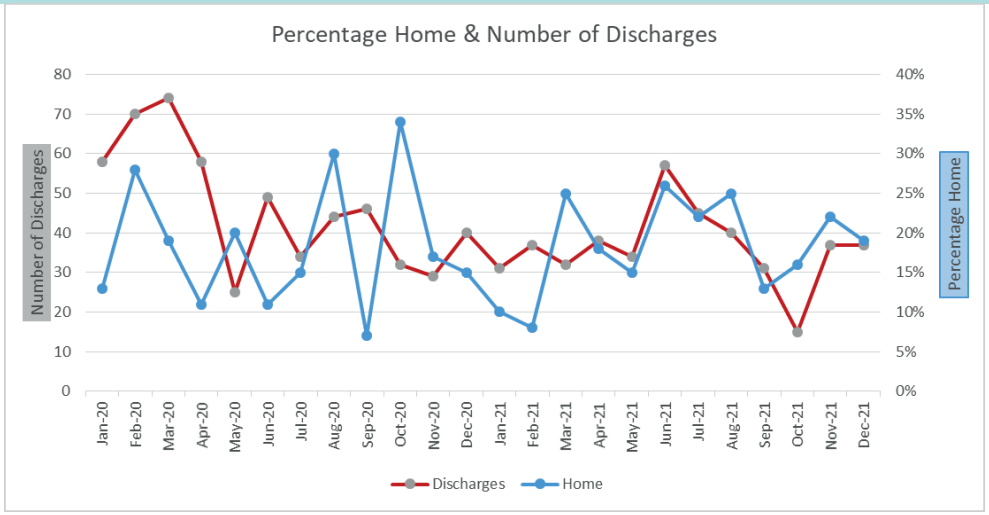
- 15 874 discharges from hospitals have been supported since the 01/04/2020 no delay order as at Jan 2022
- 4 869 service users are now receiving home care services
- Reablement services are fully operational to accommodate new referrals from hospitals and communities. All new service users are being fully assessed with care needs supported. Year to date breakdown below:

1	2573 Clients have fully completed or partially completed reablement services
2	1633 of these Clients (63%) **did** then transfer to mainstream services
3	940 of these Clients (37%) **did not** then transfer to mainstream Home Care Services
4	If these 940 Clients had remained on mainstream home care services the annual cost, would be £6.8m

Intermediate Care – Step Down



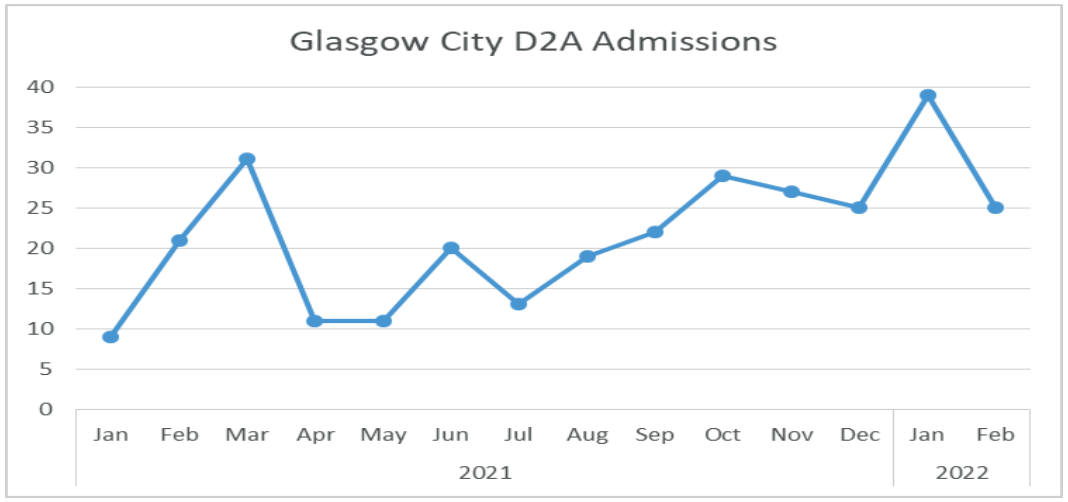


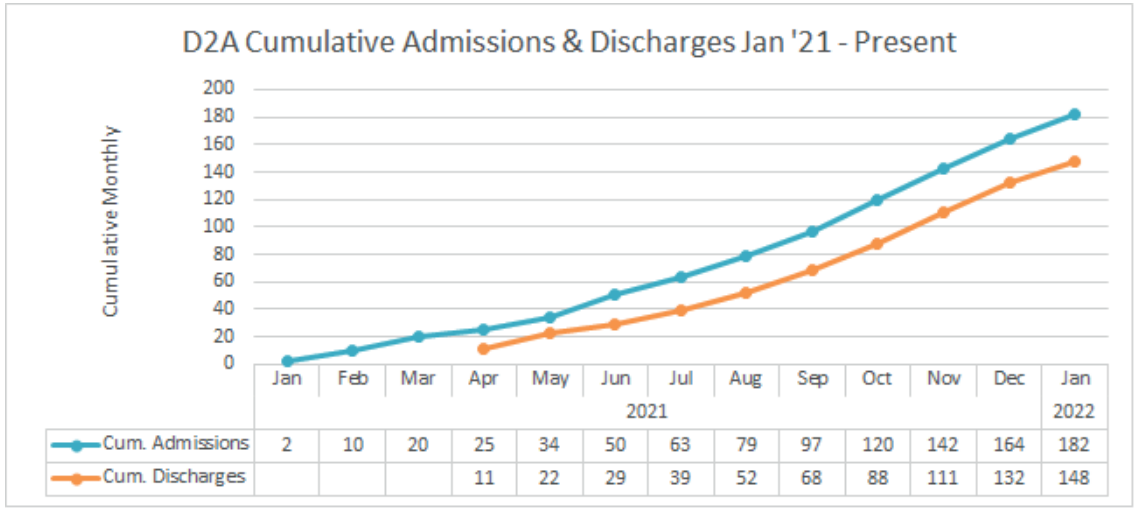


Intermediate Care has been significantly impacted upon throughout the pandemic.

- Unit closures due to outbreaks
- Loss of one unit long term
- Reduction in admissions / discharges / throughput from around 70 per month to current 30-40 – skews impact on percentage changes to outcomes
- Increased length of stay due to capacity to move people onto alternative care placements
- Levels of people going home as a percentage of total discharges

Intermediate Care – Discharge to Assess





	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan
Cum. Admissions	2	10	20	25	34	50	63	79	97	120	142	164	182
Cum. Discharges				11	22	29	39	52	68	88	111	132	148

Discharge to Assess

- Increasing activity – July 21 to date
- Cumulative impact to Dec 21 – 164 admissions
- Remains key element of Intermediate care activity

Intermediate Care – Actions Underway

Actions Underway with Step Down Intermediate Care

- Ongoing support to providers
  - To maximise use of available capacity to support admissions at the earliest opportunity
  - To support throughput and a focus on discharge to home

- New Tender process in place to complete by May 2022 – a move from 6 units to 5 unit
- Increased contract scrutiny to promote activity and support provision
- Additional support through Care Home Assurance Team, Commissioning
- Commenced Daily Huddle in October 2021 to provide additional focus
- Wider support to all care providers
- Revised action plan for overall Intermediate Care scrutinised through Older People Core Leadership Team – April 2022

Future Challenges and Opportunities

- The current Covid 19 regulations for both Community Services and Adult Care Services (IPC, Testing, Open with Care, vaccination and booster programmes) will understandably feature heavily in the model of care and support as we step into recovery
- Testing of staff (PCR & LFD) is mandatory in care homes. The UK Government's statement on the removal of funding, and the potential for isolation periods to be removed for the wider public will prove particularly challenging for a workforce supporting our most vulnerable members of our community
- Absence levels remain at an all time high for both Care at Home (15.1%) and Residential (17.3%), which reflects a range of issues (long Covid, pending operations, mental health, fatigue, existing long term conditions)
- Workforce planning – the HSCP have over the last two years invested in using TV adverts, social media and local initiatives to attract new recruits to the services, with over 357 staff recruited in the last year. Unfortunately recruitment and retention of staff remains a challenge in the current market, with competition and opportunities for employment at an all time high
- Well being and the support to the mental health of our workforce and residents has and will be a key priority. Early indications are that staff will need significant bespoke support in the months and years ahead
- The frailty levels of patients being referred to Home Care and Residential Care is trending upwards, with an increase in clinical support and personal care

Future Challenges and Opportunities

- Focus on Intermediate Care Action Plan – scope including wider services of Step Down, Complex Care, Discharge to Assess, wider Community Services with opportunity to co-ordinate activity and impact
- Impact of significant estate changes as part of PCIP to support management of increased community / primary care activity
- Changes to CAC – due to reduce and close during 2022 – potential increased impact on Primary Care services and return to individuals attending Emergency Department
- Opportunity to build on Unscheduled Care Delivery Plan to mitigate this, including communication, managing expectations, building capacity
- National Care Service – will it mitigate these complex, often structural challenges?
- Accommodation Strategy – keeping pace with shift in the balance of care