## East Lothian Integration Joint Board

**REPORT TO:** East Lothian Integration Joint Board

**MEETING DATE:** 10 December 2020

**BY:** Chief Officer

**SUBJECT:** Adult Social Care Winter Preparedness Plan 2020-21

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### 1    PURPOSE

1.1    To advise the East Lothian Integration Joint Board of the publication of the Adult Social Care Winter Preparedness Plan[1] and to present the implications of the Plan for the delivery of services through the winter period by East Lothian Health and Social Care partnership and partners.

### 2    RECOMMENDATIONS

The IJB is asked to:

2.1    Accept the Adult Social Care Winter Preparedness Plan and the requirements and actions within to ensure delivery of high quality and sustainable Adult Social Care services over the winter months.

2.2    Note the actions underway and planned in East Lothian, which support the requirements of the ASPC Winter Plan.

2.3    Note the HSCP will scrutinise the ASP Winter Plan and agree other actions to deliver its requirements.

### 3    BACKGROUND

3.1    The Adult Social Care Winter Preparedness Plan, published at the beginning of November 2020, following a period of consultation, sets out necessary actions for partners, including HSCPs, to deliver sustainable adult social care (ASC) through winter 2020-2021.  This supports other, established and planned actions in East Lothian HSCP, to focus on reducing Delayed Discharges and to deliver the NHS Lothian Winter Plan.

3.2    The ASC Plan takes into account experience of service delivery to ASC clients through the COVID-19 period, evidence relevant to the ASC sector[2]

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[1] Adult Social Care Winter Preparedness Plan 2020-21
[2] Evidence Paper

and the Care Home Review report[3] which considered management of COVID in care homes in Scotland.

3.3 The ASC Plan defines Adult Social Care clients as those aged over 18, with a wide range of care and support needs and who receive support in home, care home and community settings through public, independent and third sector organisations. The Plan notes that across Scotland:

- Around 245,000 (1 in 20) people receive social care and support

- Around 60,000 people receive home care at any one point

- 77% of people requiring social care services or support are aged 65 and over

- Around 90% of residents in Care Homes are aged 65 and over and 1 in 2 are aged over 85

- Younger adults with physical and learning disabilities or mental health conditions also receive ASC support

- Poorer health and wider inequalities within any social care cohort heightens the risk from COVID-19.

3.4 The plan notes that COVID-19 presents particular challenges for some client groups:

- People with dementia and their carers

- People with autism and learning disabilities

- People with a sensory impairment and those with communication needs (who the report emphasises need communicated with using appropriate means and accessible formats).

3.5 In December 2019, there were 206,400 people employed in the social service sector in Scotland. An estimated 690,000 unpaid carers, of which around 29,000 are young carers, also provide significant support.

3.6 There are 4 elements to the Plan, which commit to several actions (Appendix 1):

- Learning from evidence to protect people who use social care support from the direct impact of COVID-19, and wider winter viruses

- Ensuring that people have good physical and mental health and wellbeing through provision of high quality integrated care services

- Supporting the social care workforce to enable the delivery of safe support and care and to have positive mental health and wellbeing

- Working in collaboration to plan and deliver quality care.

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[3] Care Home Review Report

3.7    In addition, the Plan acknowledges the importance of technology and digital support to staff within the social care sector and the need for them to have suitable equipment to *"…provide and receive effective, safe social care services and ensure that innovation is maximised."* during the COVID pandemic and in the longer term. Digital health and care and data strategies are in development to support this. Actions to deliver digital solutions are shown in appendix 2:

3.8    The Scottish Government, working with COSLA, the Care Inspectorate and other partners will carry out national monitoring of the delivery of the ASC Plan strategic priorities.

3.9    The establishment of local oversight arrangements will ensure challenges to delivery of the Plan's priorities are identified early and acted on.

3.10   There are numerous actions across East Lothian HSCP services which support delivery of the ASC Plan:

- Adult Social Care Workforce:

  - Weekly staff briefing to ASW workforce, this includes a wellbeing slot and reinforcement of the various web-based and app-based tools for emotional support.

  - Daily 'duty' liaison between Adult Protection Duty Manager, Council Officer, Adult Social Work Duty team and duty Mental Health Officer to provide a co-ordinated response to all 'front door' emergencies

  - Social work offices provided appointment based flu clinics to maximise vaccination uptake

  - Work base management ensures all social work bases are COVID aware, with infection control and access and movement restrictions in place. Staff are limited to a blended work pattern of home plus one office base

  - The East Lothian Duty Team is participating in a national pilot (as one of five local authorities involved) applying the 'Near Me' video tool as a method of accessing social work support.

- Adult Social Care Availability:

  - Resource Allocation risk assessment and care prioritisation is carried out three times a week for adult social care community referrals.

- Transformation Programme:

  - A test of change is underway in Dunbar of provision to people 65+ and their carers to meet replacement care needs/sitter services and to address social isolation. After evaluation of this approach, county-wide initiatives will follow

- o Establishment of new, Area Partnership based, Resource Co-ordinator posts to support service users for whom pre-COVID service models remain unavailable

- o Work is underway with all third sector providers of day/community services to remodel service provision to enable safe and sustainable reopening

- o Internal adult resource services are providing services to high risk service users at 45% of pre-COVID levels to ensure infection control and compliance with social distancing

- o Mental health services have moved to online models of support.

- Carers:

  - o HSCP colleagues are working collaboratively with carer organisations in reviewing the East Lothian Carers' Strategy to consider COVID experience to date and to identify, promote and utilise opportunities for innovation in supporting carers.

- Primary Care:

  - o Through the NHS Lothian Scheduling Unscheduled Care programme, each HSCP is responsible for the creation of local pathways to provide timely access to appropriate unscheduled care services

  - o The first phase of the project is intended to reduce' front door' demand for Emergency Department services by directing patients to more appropriate services based on assessment of need

  - o The second phase of the project will implement pathways within localities to ensure patients are directed to the service most relevant to their needs in their area

  - o To deliver these patient pathway changes within East Lothian, a Single Point of Access (SPOA) will be created for health and social care services within the county

  - o The SPOA will liaise with HSCP services: CWIC; CWIC Mental Health; CWIC MSK (musculoskeletal (including respiratory rehab)); Community Treatment and Care Service (CTAC); and social work to ensure each patient gets the right care, from the right person, at the right time

  - o The SPOA will also be available to Lothian Flow Centre, 111 (NHS24) Acute Hospitals (for patients nearing discharge) GPs, and the Scottish Ambulance Service.

**4      ENGAGEMENT**

4.1     All opportunities are being taken to engage with partners, patients and clients in the development of service change to deliver services over winter while responding to COVID-related pressures.


**5      POLICY IMPLICATIONS**

5.1     There are no further policy implications arising from the contents of this report.


**6      INTEGRATED IMPACT ASSESSMENT**

6.1     None of the elements of the Adult Social Care Winter Preparedness Plan are considered to require Integrated Impact Assessments.


**7      DIRECTIONS**

7.1     None of the plans for winter set out in this paper require the development of specific directions.


**8      RESOURCE IMPLICATIONS**

8.1     Financial – The ASC Plan notes that in 2020 an allocation of £150 million of the Scottish Government's additional COVID funding went to the social care sector to support it in dealing with the loss of income and increased costs arising from the pandemic.

8.1.1   Additional funding of up to £112 million, allocated in agreement between Scottish Government, COSLA, and other partners will support the Winter Preparedness Plan.    All allocations will need to demonstrate *"…additionality of services and value for money."* The current indicative allocations are:

- £50 million to support the additional costs of restricting staff movement across care settings

- £50 million for the Social Care Staff Support Fund and winter sustainability funding through to the end of March 2021

- £7 million for Health Boards to invest in Nurse Director teams to support increased infection protection and control measures in care settings

- Up to £5 million for additional oversight and administration costs associated with responding to the pandemic and outbreak management

8.2 Personnel – Investment in HSCP staffing is underway through the NHS Lothian Winter Plan to deliver local action to meet local need and to reduce front door demand. Further ASC Plan related investment for necessary extra staff will be sought when available and as appropriate.

8.2.1 In addition, staff will be involved in local planning for service change and staff allocation to prioritise and improve service delivery through the winter months.

8.3 Other – None


## 9 BACKGROUND PAPERS

9.1 Appendix 1 – Summary of the four elements of the Adult Social Care Winter Preparedness Plan 2020-21

9.2 Appendix 2 – Technology and Digital Support.

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**Appendix 1 – Summary of the four elements of the Adult Social Care Winter Preparedness Plan 2020-21**

*Learning from evidence to protect people who use social care support from the direct impact of COVID-19, and wider winter viruses*

This will be achieved by:

- Maintenance of high quality adult social care services, supported by public health measures to protect society from viruses over winter

- Action in all organisations to continue effective infection prevention and control

- Development in all staff groups of the knowledge and skills to continue to improve safety and quality of care (supported by SG investment in training).

- Safeguarding of the health and safety of staff, with digital service delivery where possible

- Adherence to clear procedures on negative test requirements on admission to residential care from the community

- Daily review of COVID symptoms in care home residents and staff (a checklist is in development) to ensure early responses to any potential outbreak

- Increased nursing provision in care homes or, increased nursing support to care homes

- Prioritised delivery of a future Covid-19 vaccine to care home residents, vulnerable people in their own homes and paid and unpaid care workers

- High uptake of the seasonal flu vaccine in social care workers, unpaid carers and personal assistants and for client groups receiving social care support.

In addition, guidance on care home visiting will seek to open up visits to residents while maintaining infection control requirements and the safety of residents and staff. Increased testing will include in its scope designated visitors to care homes. All developments will be overseen by local teams.

**New Winter Measures** (and possible future legislation) seek to:

- Encourage providers to minimise staff movement within and between care settings to reduce the risk of transmission

- Support the adoption of 'staff cohorts' (small staff teams for groups of clients) where possible within care homes and in other settings, such as care at home

- Require agency staff who work in care homes with COVID to self-isolate for 14 days, before moving to another setting

- Oblige providers to record all staff movement between care settings.

All these measures and associated guidance are subject to review and updating.

***Ensuring that people have good physical and mental health and wellbeing through provision of high quality integrated care services***

This will be achieved by:

- HSCPs extending the 'Home First' approach, supported by multi-disciplinary working across health and social care and 'Intermediate Care' and 'Hospital at Home' approaches

- Local authorities considering the balance of risk of COVID transmission to clients and carers from restarting services against any potential harm from continuing a limited delivery of services

- Discussion between Scottish Government, Health Boards and IJBs on necessary additional funding to support services

- Maintenance of robust NHS support to people using adult social care provision, aiming to ensure people stay well for as long as they can and through mobilisation of support services, avoid admission where possible

- That following any hospital admission, delayed discharges are minimised through patients returning to their home or to a homely setting with the right support, in line with Home First approaches

- Delivery of appropriate packages of care and consultation with unpaid carers on their capacity to provide care.

- Continuing input from the multi-disciplinary primary care team to innovative delivery of services to all age groups through telephone and 'Near Me' assessments to minimise potential transmission of infection. Where clinically or otherwise necessary, face-to face appointments will follow PPE and other guidance.

- The multidisciplinary primary care and community teams to continue to deliver urgent care and support for palliative and end of life care and to consider their role in supporting care homes within their practice area

- Enhancement of the COVID Community Pathway support people over winter to respond to increased cold and flu symptoms which may mimic COVID-19 symptoms

- Improvements to anticipatory care planning (ACP) and to end of life care and support, with person-centred and sensitive conversations between clinicians and individuals about end of life care wishes.

***Supporting the social care workforce to enable the delivery of safe support and care and to have positive mental health and wellbeing***

This will be achieved by:

- Continuation of the Scottish Government Social Care Staff Support Fund, ensuring staff continue to be paid when ill or self-isolating as a result of COVID-19

- Maintenance of access for all adult social care workers to local NHS Board workforce wellbeing services, to PROMIS (the health and social care wellbeing national hub) and the NHS 24 mental health support service

- Increased awareness and utilisation of the Disclosure Scotland Priority COVID Staff and the Accelerated Recruitment processes to speed up appointments to adult social care services.

- HSCPs to review local level workforce plans and staff rosters to identify risk of staffing deficits and to take supportive action as required

- Continuing access to PPE for all social care workers and unpaid carers and dissemination of information and updated PPE guidance for social care providers

- All care home staff, including agency staff in care homes will continue to be offered weekly COVID-19 testing

- Expansion of routine testing to health and care staff who visit care homes, and other residential settings

- Introduction of testing for designated visitors to care homes where this supports continuation of safe visiting.

- Continuing the testing of social care staff and their clients if they or a close contact displays COVID symptoms and expanding testing to all care at home staff when capacity allows

- Improved support to unpaid carers through increased funding to carers organisations and a national campaign, publicising the support available and acknowledging the important role of unpaid carers.

- Introduction of a retrospective financial support scheme for adult social care staff who could not work due to shielding.

***Working in collaboration to plan and deliver quality care***

This will be achieved by:

- Continuance of daily huddles between the IJB Chief Officer, Chief Social Work Officer, Director of Nursing, Director of Public Health and Clinical Director (and where appropriate The Care Inspectorate) using

appropriate assessment tools and consideration of local data to review the situation for adult care homes in their area and to agree corrective action.

- Expansion of the remit of this group to consider all adult social care provision and to agree action as required to maintain service delivery

- Support to local providers to review and update their continuity plans to reflect winter issues

- Continuing scrutiny and improvement action by The Care Inspectorate. If indicated, its powers to intervene may be enhanced.


**New winter measures:**
- In the event of a suspected outbreak this winter the HSCP will immediately provide support to care providers

- Whilst awaiting confirmation of an outbreak providers should be supported by local partners to immediately review their infection prevention and control processes and to brief all staff on the heightened risk

- Where any single member of staff or a care home resident shows symptoms of COVID, along with testing and self-isolation of the individual(s) concerned, the local Public Health Team should provide same day advice on whether all staff and residents should be tested and take the necessary action

- All staff and residents (where clinically appropriate) at care home sites should be tested immediately on confirmation of one positive test, with the Health Board prioritising the analysis and communication of test results, ideally within the same day

- Staff not at work on the day an outbreak is confirmed will be required to be tested and receive a negative result prior to returning to work. Local health protection teams should provide advice on additional follow-up testing

- Local oversight teams are to provide support for care homes in managing outbreaks and ensuring continuity of care by providing mutual aid – for example through staffing if the provider is unable to secure sufficient support through normal routes

- National and local partners, including care providers, working together to plan and prepare for EU exit, must take into account that at the end of the Transition Period on 31 December the concurrent risks of COVID-19 resurgence,  flu and severe weather will be present.

**Appendix 2 – Technology and Digital Support**

Scottish Government plans:

- Commit £500,000 to ensure all care homes to have access to digital devices, connectivity and support to keep their residents safe through the national Connecting Scotland Programme. We will work to ensure that moving services online reduces inequalities and does not exclude the least advantaged in society from the services they may need the most.

- Publish a 'Digital in Care Homes Action Plan' to ensure residents and staff in our care homes can benefit from a range of digital tools and approaches. We will make NHS email accounts available to all Care Homes to provide greater communication and integration of services.

- Look to build upon the success of the use of Near Me video consulting by extending its uptake into social care and care homes.

- Roll out a digital tool to support people with Covid19 and its longer-term effects to help them manage their condition from home or a homely setting and a clinical assessment tool to enable an early diagnosis of COVID for care home residents following initial testing.

- Support trials of outbound calling for telecare as a model for wide-scale implementation to deliver a more proactive telecare service.

- Work with key partners to develop approaches to keep people safe during the winter, including promoting the new Purple Alert App for people living with dementia and those around them, and the new About Digital and Me (ADAM) assessment tool to help people keep connected and independent.

- Encourage service commissioners and providers to consider and engage with national programmes on how technical or digital solutions may help to protect residents from COVID-19 and connect them to their loved ones. This includes the use of Near Me, vCreate, mental health support, clinical assessment tool and more.

- Promote working with local Connecting Scotland Lead Contacts who can advise on available support to get people connected.