

Appendix 2

Progress update 2020/21 - Living Independently in Blaenau Gwent in the 21st Century' Strategy

Supporting Evidence – including impact of COVID 19 pandemic (April 20 to March 21

1. Priority 1 Long term care:

1.1 During 2020/21 the Adult Services department has continued to review and develop our services that deliver priority 1 - Long term care. During 2020/21 this priority has been done within the context of working within COVID 19 restrictions. We have been supporting the most vulnerable people within our communities, many of whom have been isolated, shielding, supporting people who are shielding and living within regulated settings where they have been unable to see our staff, their families or their friends.

1.2 In early April 20, as a response to the COVID 19 pandemic, all care management staff were asked to prioritise their caseloads and respond initially to critical assessments and requests for support only. However, within a matter of a few days it became apparent that our Adult Services teams needed to introduce different models of contact to ensure that we could support all vulnerable adults, whilst reducing face to face visits as much as possible. This has included using different IT solutions as well as where necessary face to face visits wearing appropriate PPE. Staff from Adult Services including our care management services, have been operating over a 7-day period including Bank Holidays and weekends, throughout the pandemic. We have had care management staff working at our acute and community hospitals often undertaking assessments with COVID positive patients, some of whom have been sadly end of life and providing a much needed liaison function between the patients and their families. This enhanced model of support has required us to increase our capacity to facilitate discharges and support all vulnerable people in our Communities (both COVID positive and non COVID people). Staff have worked overtime, additional shifts and many have exceeded their normal contractual hours to meet the challenge. Our Provider teams have been under significant pressure as we have maintained care and support delivery 24/7.

1.3 Throughout the past 12 months', availability of care home and emergency respite support has been challenging with all 15 of our Care Homes being closed to new admissions due to COVID outbreaks at some stage since April 20. A number of care settings have had significant outbreaks which has meant that they have been unable to receive any new placements for several months and the wellbeing of both staff and residents has been a concern and a priority

for our teams. The Adult Services Team has during this period worked closely with our Gwent Local Authority Partners and ABUHB to implement a Standard Operating Procedures (SOPs) for all discharges from hospitals to care settings including a person's own home if they are to receive a domiciliary or reablement care packages. We have also devised a similar SOP for admissions to a care setting from the community in an emergency situation for example as a result of carer breakdown or deterioration in a person's condition. These SOPs outline roles and expectations around testing of patients, recording and sharing of test results and isolation periods. Many residents in care homes, particularly those who are living with dementia have required additional support during periods of isolation, both in their own homes and when living in a care setting. This support has been coordinated by our social care teams and funded by the Welsh Government Hardship grant.

1.4 During the pandemic all Care Home settings have been supported by our Adult Services Commissioning Team to access short term sustainability funding from the Welsh Government Hardship fund. The numbers of residents living in Blaenau Gwent Care Homes has reduced throughout the period and our Commissioning Team continues to work with both our internal and external providers to carefully monitor the market. The team also has also been in very close contact with key partners including Public Health Wales, ABUHB, Environmental Health and our Providers throughout the pandemic as we have:

1. Provided daily monitoring of both staff and resident COVID outbreaks
2. Facilitated arranging COVID tests and more recently coordinated the roll out of the Welsh Government Lateral Flow Devices (LFDs)
3. We have distributed PPE items to all care and community settings across both Adult and Children providers
4. We have distributed relevant Welsh Government COVID guidance to Providers and supported them with disseminating to relevant staff and introducing new ways of safe COVID working.
5. Our staff have undertaking infection control visits and COVID audits when a Care Home has an outbreak – this has been in partnership with ABUHB and PHW.
6. We have coordinated frontline staff teams to support settings who have experienced outbreaks ensuring that minimum staffing levels have been maintained and health and social care needs of residents met – this has meant that Local Authority staff have been deployed to work across both internal and external settings to support our most vulnerable citizens.

7. Coordinated COVID 19 vaccinations and submitted the names of social care staff – both LA and external partners to ABUHB for approval

1.5 Table 1 below – demonstrates the number of citizens for whom the Local Authority commission the placements in our care home settings. These figures do not include those residents living in care homes who are funded by Health Boards, other Local Authorities or self-funding. The table clearly demonstrates the reduction in residents between March 2020 and December 2020. The details for quarter 4 (January to March 21) are currently being analysed and the data will be used to inform our understanding of the market demand both during and after the pandemic.

Table 1 Category	Mar 20	June 20	Sept 20	Dec 20
Nursing Over 65	60	60	62	54
Nursing under 65	7	7	8	5
Residential Over 65	128	112	104	94
Residential Under 65	26	29	28	28
Supported Living Over 65	6	6	5	4
Supported Living Under 65	65	66	65	66
Total	292	280	272	251

1.6 In addition to the data in table 1, below are details of numbers of beds provided across Blaenau Gwent (as opposed to funded by the LA) as a snapshot comparison in February 2020 and also February 2021:

Feb 2020 information:

- Number of care homes across Blaenau Gwent – 15
- Number of beds offered as of Feb 20 – 468
- Number of occupied beds as of Feb 20 – **444**

Feb 2021 information:

- Number of care homes across Blaenau Gwent – 16
- Number of beds offered as of Feb 21 – 480
- Number of occupied beds as of Feb 21 - **329**

1.7 Despite the challenges of the pandemic, the Adult Services teams have continued to review our working pathways across both health and social care.

1.8 The review of our Adult Services structures was put on hold for approximately 6 months during early 2020, but the work has recommenced during late 2020 and a report is currently being finalised on the future working model across our prevention and long-term services with a number of key recommendations being made in relation to for examples: developing a new hospital 'hub' based on the learning from COVID, improving case management processes, standardising administrative processes undertaken by care managers, finance and commissioning with the aim of developing enhanced performance data and streamlining our assessment forms to better support the practices of our staff.

2. Priority 2 Reablement/Enabling services:

2.1 Since April 20 our front door Information, Advice and Assistance (IAA) team has been operating a skeleton rota staff based at the Vitcc Tredegar with the remaining staff working from home. They have continued to focus on enabling citizens to access appropriate support including access to reablement provision that aims to promote independence and reduce dependency on traditional models of care and support. During COVID 19 this has also meant that they have supported our Council Locality Hubs, providing support and advice to those people who were previously not known to Social Services but who required support due to a deterioration in their wellbeing, isolation and shielding. A number of our Community Connectors were initially seconded to the Locality Teams to provide additional capacity and community knowledge. Our work within Blaenau Gwent GP practices, as part of the Compassionate Communities Transformation Project, moved to a virtual model via Microsoft Teams in April 20 and has continued to operate successfully throughout the past 12 months providing vital support to our GP's and their patients. The support provided has more recently been extended to include telephone 'wellbeing' support for people who are leaving hospital after extended inpatient periods and we have also been providing weekly telephone contact with people who may be feeling lonely and isolated during the second period of COVID 'lockdown.'

2.2 Our Community Resource Team (CRT) continues to be the main driver for ensuring that citizens have access to relevant and appropriate rehabilitative opportunities including therapist based interventions. This has included provided reablement support to patients recovering from the impact of contracting COVID 19. Our Community Resource staff (both Health and Social Services employees) have worked across acute, community and our care home providers, delivering frontline care to many people with COVID 19 including supporting with end of life care.

2.3 During 2021 we have been successful in securing Welsh Government Discharge to Assess and recover funding. In total during the year we have secured £77,352 of additional grant funding to manage discharge and hospital flow during the COVID-19 emergency period with the primary aim of:

- expedite these service and practice developments at scale and pace; and
- pooling the expertise and learning at local, regional and national levels.

This is being achieved by Health and Social Care partners:

- Working together and pooling staffing to ensure the best use of resources and prioritisation in relation to patients being discharged, respecting appropriate local commissioning routes.
- On a daily basis reviewing capacity across the system, pooling information from hospital sites, community teams and the national Care and Support Capacity Tool, to which discharge teams will have access from April 2020.
- Minimising the risks associated with multiple contacts for patients, actively seek to implement reciprocal arrangements for delegated tasks between health and social care staff.
- Coordinating the work with local and national voluntary sector organisations to provide services and support to people requiring support around discharge from hospital and subsequent recovery.
- Working together to expand the capacity in domiciliary care, care homes and reablement services in the local area.

3. Priority 3 Day Opportunities/Community Options:

3.1 In April 2020, Social Services took over the management and coordination of the Community Meals service. This provision currently sits within the Community Options service and was due to be part of our wider Community Catering Enterprise. However due to the pandemic the catering enterprise has been put on hold and we have focussed on the reconfiguration of the current Community Meals provision including the promotion of take up of meals. The service is currently providing meals to an average of 122 people per day an increase of 30% since April 20. The service is continuing to develop and for the first time ever, our staff provided community meals on Christmas Day to those who were unable to have family support due to the pandemic.

3.2 Our Community Options Service continues to provide a wide range of day activities to vulnerable citizens aged 18 and over. As at 1st February 20 – 185 people were attending Community Options (day services) on one or more day a week. During the initial lockdown in March 20, in line with Welsh

Government guidance our Community Options Services closed all of its buildings and our support was urgently remodelled to provide critical and emergency respite. In addition to this we redeployed care staff from our Community Options Teams to work across other critical service areas:

3.3 Staff deployment to other areas:

- Cwrt Mytton - 27 staff were deployed to support residents with dementia
- Supported Living - 4 staff were deployed to support adults with a learning disability alongside staff deployed from Augusta Respite Centre.
- Home Care - 3 staff were deployed to cover community and extra care calls
- Community Meals - 4 staff were deployed to support the community meals services
- AUBHB testing courier service - 2 staff supported the coordination of tests to and from Rodney Parade to our Blaenau Gwent Care Homes

3.4 As the pandemic continued we realised that some vulnerable adults and their families needed additional support and required access to daily sessions at both Bert Denning Centre and Lake View. We have been able to gradually and safely open both these buildings for restricted attendance and sessional support. Subsequently our Community Options programme of support has developed further as the pandemic has progressed and a blended 3 level model of service developed:

1. **Level 1 – Specialist support at Bert Denning** for those who require critical support who have complex health needs including hydrotherapy session within the pool as part of a therapy programme
2. **Level 2 – Critical outreach activities** that support citizens to achieve their outcomes either within their own home or community around their home including accompanied walks in line with social distancing and lock down regulations.
3. **Level 3 – Virtual support** including regular telephone contact and sessional digital support and virtual 'teams' sessions.

3.5 As of March 2021 of the original 185 citizens that accessed Community Options:

- 83 are receiving weekly telephone contact
- 12 are joining Virtual activity
- 13 have sadly passed away
- 46 are tenants within a Supported Living provision are receiving their day activities within their accommodation
- 14 citizens accessed critical support

- 4 have moved to live in residential care
- 1 has moved out of county
- 1 has moved to an alternative provider
- 6 are unwell / are in hospital

3.6 Over the next few months in line with Welsh Government advice we will be reviewing our Community Options provision and making recommendation on a future model of provision. This will include a review of the needs of people who have previously attended our activities and a consideration of what level of provision we can safely provide in the 'here and now' during the pandemic. We will also be learning from what has worked well during the pandemic and how this learning can help us develop modern provision moving forward.

4 Priority 4 Assistive Technology:

4.1 The use and access of technologies have been extremely important during the past few months in not only linking our staff with their colleagues and peers but importantly supporting our vulnerable citizens to remain safely at home. Where possible we have ensured that welfare and 'keep in touch' systems have been put in place using technologies such as community alarm systems, mobile phones, tablets and I pads etc. Our teams have worked closely with Worcester Telecare Solutions to ensure that we have been able to maximise the provision that we can offer via our Community Alarm Services with daily / weekly calls being made to those living alone and required to shield. We have provided welfare calls, with the aim of checking how they were, enquiring about their health in particular asking about COVID related symptoms and calling for support should they require it.

4.2 During 2020 we successfully bid for additional funding from the Welsh Government Integrated Care Fund (ICF) to purchased IPads & Amazon echo's which we have successfully promoted and installed throughout Blaenau Gwent. We have drafted an agreement which allows us to loan the equipment to the individuals as part of their care and support planning. These devices have already become popular with our Visual Impairment services as the IPads and Echo's allow individuals to communicate with family members via voice or video calling. They can also organise appointments, set reminders, order shopping and even use apps which read out letters or describe the home setting and even people around them.

4.3 More recently we have been part of a Gwent Independent Living Regional project, which involves us trialling a system called Cascade 3d. We as local authorities in Gwent were required to score each submission on the Sell2Wales process for the product selection. Cascade 3d uses motion sensors throughout an individual's home to monitor movement, light and temperature. This also links to an Amazon echo. Family and social care workers can monitor each individual as they continue to live at home. There are telehealth peripherals which link to the unit to monitor blood pressure, temperature, weight & blood glucose. Health professionals are able to link in

with the individual via the echo to monitor if required. There is also funding for Wi-Fi units if the individual does not have Wi-Fi within their home.

4.4 During 2021 we have secured an additional £63,500 one off funding to enable us to support people at home using technologies. This has included purchasing the units mentions above plus grant funding to increase our supply of dementia companions - Cats, Dogs & Babies which are extremely popular both across our Care Homes and peoples own homes. We were also successful in securing funding for 3 RITA systems, (Reminiscence Interactive Therapy Activities), which are innovative, evidence-based, state-of-the-art digital therapy system which allows people living with dementia to use apps, games and other leisure activities to promote their wellbeing. The 3 units were distributed to 2 dementia care homes during their significant COVID outbreaks when staff were struggling to isolate the residents in their own rooms as part of the infection control requirements. During the past week we have also secured a further 8 RITAs for our care homes.

Photo of Cwrt Mytton resident using a RITA (Reminiscence Interactive Therapy Activities):



4.5 Despite the challenges of the pandemic our staff have continued to work in partnership with our Housing Providers and technology developers so that we can ensure that we promote technologies as much as possible. Our dementia smart flat is currently “under construction”. This will show case home automation, a dementia sensory room & equipment linked to the cooker which can detect if there is someone near the cooker, food boiling over, switch the cooker off and alarm the monitoring centre. This initiative has been previously reported and is funded via Integrated Care Funding (ICF capital monies).

5. Priority 5 Direct Payments:

5.1 The Social Services and Wellbeing (Wales) Act 2014 promotes the use of direct payments for individuals and since April 2016, our Local Authority has been responsible for undertaking and funding Criminal Record Bureau Checks on behalf of the employing individual. In line with the Act we continue

to offer Direct Payments to individuals as part of our care and support assessments as this is an option for providing support to meet eligible needs. 5.2 The number of adults with a direct payment has remained fairly consistent over the last few years and any new approvals have been limited during the pandemic, as many recipients have been shielding and their ability to be supported out and about in their communities restricted. However, support by the DP team for our direct payments recipients and their carers has been extremely important during the pandemic and our DP team has been instrumental in:

- Distributing weekly allocations of PPE
- Providing relevant Welsh Government guidance including information on use of PPE, infection control process and social distancing advice.
- Arranging bookings for vaccinations in line with JCVI guidance
- Providing emotional and wellbeing support.

6. Priority 6 Accommodation:

6.1 During 2020/21 we have continued to have good partnership and working arrangements between our RSL partners including Tai Calon, colleagues in Housing Strategy, the Supporting People Team and the Community Resource Team (CRT) ensuring that key partners are involved when allocating properties to citizens who have complex needs and mobility issues. Our Supporting People Team have supported our commissioned Housing Support providers to move to COVID secure ways of working which have included supporting our Housing Team to ensure that support is provided to our homeless population including those who required emergency accommodation, providing digital support as opposed to face to face contact for those people accessing floating support services and also providing support to those staff working in supported accommodation such as supported housing projects, domestic abuse and homeless accommodation.

6.2 Despite the pressures that the staff have faced, we have remained actively involved in the development of new housing developments including the Melin Project at the former Greenacre site Tredegar and other bespoke accommodation projects throughout Blaenau Gwent. The construction of additional respite units at Augusta Respite Centre, have unfortunately been delayed due to COVID but we are assured that the project should be concluded by October 21. This initiative has been previously reported in our update in 2019/20 are funded via Integrated Care Funding (ICF capital monies).

7. Priority 7 Carers:

7.1 Due to the unprecedented pandemic situation our Carers Support workers have had to adapt their service in order to continue to provide support to unpaid family Carers in the borough. After discussion within the service, with 7.2 Carers and in communication with the GP Surgeries, it was decided that the best way forward would be to provide carer support via phone, email or video calls. We also changed to video calls for our weekly meetings with GP surgeries to retain our regular contact, alongside regular phone calls and emails. As well as providing support calls for new carers accessing the service, we also touched base with many carers that previously accessed the service, to check how they were and, to advise them that support was available should then need it. Feedback from carers has been very positive.

7.3 In addition to referrals received through GP Surgeries and our Social Work Teams, we have also seen a rise in referrals from external organizations and services that hadn't referred previously e.g. Velindre Hospital, Huntington's Society, Ysbyty Tri Chwm's Memory Team and The Stroke Association.

7.4 Various information and support has been provided ranging from COVID specific advice around clarification of restrictions, shielding advice and information on services available such as shopping services through to quite complex emotional support for carers. During the past 12 months, we have had an increase in crisis cases as lockdown progressed, particularly with carers caring for individuals with Dementia, Huntington's Disease, etc.

7.5 The carer support staff along with our wider Social Care colleagues, have made use of BGCBC Social Media to raise awareness of our projects and to let carers know what support was available to them. Throughout Carers Week 2020 we worked closely with the Communications Team to put together daily 'Carers Wellbeing' posts and ensured that these were also shared through a number of other channels such as the Integrated Wellbeing Network, Wellbeing Champions Network and Carers Trust Carers Hub. In addition to the above wellbeing posts, we secured funding for 'Self Care' gift bags and we delivered these to 30 Carers spread across the borough. The Carers that received these were very pleased and some said they were overwhelmed to have been thought of.

Carer Case Study:

Referral received from GP who was worried about D's mental wellbeing and had got consent to refer for carer support. D is caring for her husband. Carers Officer rang her and issues raised included:

- Dealing with own health conditions and pain management
- Role as a carer for husband and adult daughter with mental health diagnosis
- Loss of independence, active lives and jobs
- Family bereavement and dealing with grief

Support offered – in addition to a listening ear!

- Referral to Expert Patient Programme and
- details of their NHS course for living with long term conditions and pain.

- Offer of support at Carers Support Group and assistance in getting an email account set up and access to 'Microsoft teams'.
- Referral to Primary Wellbeing Worker for mental health support
- Offer of support to find volunteering roles – after pandemic.
- Support for daughter to access relevant networks
- Afternoon tea arranged to be delivered to the house as a thank you for being a carer.

Feedback from D – she said *that 'it had been easier to talk to a stranger than her family as she can be honest about how she feels, and that she felt better after talking than she had before the calls.'*

8. Priority 8 Domiciliary Care:

8.1 Blaenau Gwent and Caerphilly CBCs have established a framework of accredited and approved registered domiciliary care providers to deliver Support at Home Services for both Adults and Children. The tender was for new business only – meaning that all existing care packages remained with the same provider thereby ensuring continuity of care to Individuals in receipt of services. The ultimate aim, in response to national concerns in relation to the pressures faced across the sector, was to strengthen the domiciliary care market place here in Blaenau Gwent by effectively recruiting to the local workforce sector and growing our market supply.

8.2 The Covid 19 pandemic has had a significant impact on the delivery of domiciliary care provision. Our Providers and staff have been required to deliver ongoing care and support to our most vulnerable people. Appendix A below – ***Scrutiny Report March 21 - Support at Home Services Tender and Market Performance for commissioned services with Independent providers*** provides a comprehensive report on the current domiciliary care position in Blaenau Gwent including the impact of COVID 19 pandemic.

8.3 Table 2 below provides a summary of the numbers and categories of domiciliary care packages commissioned over the last 12 months. This shows a continued reduction in numbers of packages that we commission. However, at this stage due to the impact of the COVID 19 pandemic, we are unable to attribute this to the changes in practice that we have introduced across Adult Services. Further analysis of this is required as part of the review of the strategy to identify if the reduction is as a result of for example (in addition to COVID 19):

- Impact of our preventative and signposting approach due to the introduction of our Information, Advice and Assistance (IAA) team
- Cultural changes across our teams and partners including ABUHB as we promote strength based assessments.
- Impact of our reablement teams and emergency care @home service
- Promotion of other models of support to meet care and support needs such as Shared Lives, Direct Payments etc

8.4 Finally, it is important to recognise that this data also does not give details of the complexity of packages of care that we are providing including number of calls per day or the length of calls. The complexity of the individuals that we support is increasing as we support more individuals to achieve their care and support wishes to remain in their own home – a key aim of the Living Independently Strategy.

Table 2 Category	Mar 19	June 19	Mar 20	June 20	Sept 20	Dec 20
Sitting Service Over 65	30	26	20	18	16	14
Sitting Service under 65	2	2	3	4	2	2
Home Care Over 65	383	367	349	341	331	302
Home Care Under 65	79	74	67	59	60	64
Total	532	469	439	420	409	382

8.5 Throughout the past 12 months we have continued to develop our Emergency Care @ Home service (DASH). This provides emergency support to avoid hospital admissions and also supports rapid discharge. During 2020/21 we have secured £148,162 additional one off funding to support this provision including supporting additional capacity across the private sector.



Updated Social
Services Support at I