

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

12 JANUARY 2023

ATTENDANCE OF THE PORTFOLIO HOLDER FOR ADULTS' SERVICES

Report from: Councillor David Brake, Portfolio Holder – Adults' Services

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Summary

This report details the areas covered by the Portfolio Holder for Adults' Services which fall within the remit of this Committee.

1. Background

1.1. The areas within the terms of reference of this Overview and Scrutiny Committee covered by the Portfolio Holder for Adult Services include:

- Community Care
- D2A pathway changes
- Adults' Mental Health and Disability Services (including Learning and Physical Disabilities)
- Older People
- Public Health – Lead Member, including Health and Wellbeing Boards
- Adults' Partnership Commissioning (25+) and Better Care Fund
- Health and Health Partnerships

2. Community Care

2.1. The Council provides community care services in a range of ways. These can be summarised as the provision of:

- Information and advice
- Prevention and Reablement
- Assessment of social care needs
- Support planning

- Direct provision of support services and Direct Payments
- Commissioning of support services from external organisations
- Provision of equipment and home adaptations
- Ongoing monitoring of quality and service review

2.2 Adult Social Care Teams work across three localities in Medway. This has allowed for greater integration between services and coordination of care with a range of clients across all client cohorts, that is, older people, adults with mental health issues and adults with disabilities (including learning and physical disabilities). These three localities are:

- Locality 1: Rainham & Gillingham
- Locality 2: Chatham & Walderslade

2.3 Locality 3: Strood, Rochester & Hoo One of our most important statutory responsibilities is Adult Safeguarding, and in 2021/22, we received 2053 safeguarding concerns, and investigated 724 of these as Section 42 safeguarding enquiries.

2.4 We have developed our Local Account for 2021/2022 (appendix one), which is an annual review of Adult Social Care that we have produced to inform people living in Medway about the services we offer, our key achievements and priorities for the service. It explains how much we spend on Adult Social Care, what we spend money on, what we are doing to support Medway's residents and how we are progressing against our four strategic priorities.

3. Hospital Discharge Pathway Changes

3.1 Following the cessation of the D2A funding, the Integrated Discharge Team have reframed and are assessing patients in line with the Care Act requirements. Patients will be discharged from the acute hospital when they are clinically ready, either under Pathway 3, (complex discharges, 24-hour placements in a residential setting) or Pathway 1 (packages of care on the community).

3.2 Patients are supported on defined pathways, to firstly go home if possible. This will include their own home or care home that they previously lived in. For those patients who cannot go straight home, they will be discharged on alternative pathways. The culture is inclusive and non-selective, with all patients, regardless of support needs, clearly following a defined pathway. It is patient focused, needs led and ensures that no decision is made without due reference to best practice and relevant case law (i.e., MCA). It will be easy to access and navigate for all stakeholders, patients and staff.

3.3 Discharges will be rapid, effective and mobilise the required services to ensure the patient's immediate needs are met. The Integrated Discharge Team are empowered to 'do the right thing for the patient', offer what is needed to enable their timely discharge, manage risks and expectations from stakeholders.

- 3.4 There will be an embedded Pathway 3 team within the IDT, with sufficient autonomy and skill to ensure patients follow the correct Pathway and have an identified 'Discharge to Assess' bed, as required, mobilised within 24 – 48 hours of referral.
- 3.5 The pathways will continually be evaluated and built on to ensure lessons are learnt and to inform the long-term development of a sustainable, dynamic and proactive whole system approach to managing discharges.
4. Adults' Mental Health and Disability Services (including Learning and Physical Disabilities)
 - 4.1 Better healthcare and support has meant that more children with very complex needs are living to adulthood. The number of adults with a moderate or severe learning disability and hence likely to be in receipt of services aged 18-64 is predicted to increase by 7.9% by 2035. Life expectancy continues to rise, with a predicted increase of 37% of people with a moderate or severe learning disability in Medway who are over 65, against an expected national increase of 32.6% by 2035.
 - 4.2 During 2021/22 Medway supported 705 people with a long-term package of care with a primary support reason of Learning Disability, 650 were aged between 18-64.
 - 4.3 To better manage our duty to assess people who are in crisis and may need to be detained under the Mental Health Act (1983) we have established a small, specialist team of AMHPs (Approved Mental Health Professionals). We also employ additional AMHPs who work in the locality teams, in order to provide additional capacity as part of the AMHP rota. 349 Mental Health Act Assessments were completed in 21/22
 - 4.4 Medway's Community Support Mental Health Team support service works with people to promote recovery from mental ill health. The team provides both short and long-term support on both a group and individual basis. We continue to develop a strength-based outcome focused model of community support.
 - 4.5 Work is being undertaken as part of the Transforming Care Programme to support people with learning disability (LD) and autism who are currently placed in NHS Assessment and Treatment Units to be supported in the community in less restrictive settings.
 - 4.6 59.7% live in their own home and 241 use Direct Payments to purchase their own support for example by employing their own Personal Assistants (PAs). This helps each person to have greater control over the way that they live their lives.
 - 4.7 Users of Direct Payments receive support from the Council's Self-Directed Support Team. In addition to providing general information and advice, the service assists people with employer related issues such as recruitment and

payroll. A prepaid card system is used which makes it easier for service users to access funds, as there is no need for them to set up a dedicated bank account to receive Direct Payments.

4.8 The Council undertakes adaptations, via the Disabled Facilities Grant Scheme, to enable disabled people to access the facilities within their homes. Examples include - ramps, stair lifts and level access showers. The number of DFG adaptations completed between April 2021 and March 2022 was 101 for owner occupier, Housing Association and private tenants and a further 9 for Council Tenant approvals.

4.9 The Council's Deaf Services team support people who are Deaf, hard of hearing or have a dual sensory impairment. Staff are skilled in communicating in British Sign Language (BSL) and Deaf Blind Sign Language. Services include:

- Information and advice (e.g., welfare rights, housing, employment, access to services)
- Specialist assessment
- Equipment recommendations and loans
- Support with accessing interpreters
- Voluntary registration as Deaf or hard of hearing
- Awareness raising and staff training

4.10 Services for visually impaired people are provided via a Council contract with Kent Association for the Blind. This includes:

- Information and advice
- Specialist assessment and initial emotional support (e.g., for people with newly diagnosed eye conditions)
- Rehabilitation and Mobility Training
- Equipment recommendation and loans
- Support with accessing low vision aids
- Support with access computer training and IT equipment
- Voluntary registration and Severely Sight Impaired (Blind) and Sight Impaired (Partially Sighted)
- Support with accessing employment, training and leisure opportunities

4.11 Shared Lives offer the opportunity for people with a learning disability, mental ill health or other needs to receive the care and support while living as part of a family. Shared Lives offer a cost-effective alternative to supported living that provides people with a real home. Shared Lives carers provide placements to young adults who they support in learning the skills needed to live independently and develop networks in the community. It is significantly less expensive than a supported living placement and achieves great outcomes for service users. The service is currently running a project to expand its approved carer base. At the end of the financial year 2021/22, the service had 42 Shared Lives Carers. 32 of those were approved as Long-Term Shared Lives Carers and 34 people were being supported long term.

5 Older People

- 5.1 In line with most parts of the country, the older population of Medway is set to increase significantly in coming years. The most notable forecasted rise will be in people aged over 85 – a rise of 85% between 2015 and 2030.
- 5.2 In Medway the number of people aged 85 and over with dementia is projected to more than double by 2035. The Dementia Strategy highlights that 63% of people with Dementia currently live in their own homes.

Over 65s predicted to have dementia, by age group projected to 2030

Age group	2017	2020	2025	2030	2035	% Change 2017-35
65-69	171	162	187	217	224	31.0%
70-74	329	364	332	381	447	35.9%
75-79	467	526	695	636	742	58.9%
80-84	670	751	869	1,164	1,080	61.2%
85-89	683	722	878	1,072	1,428	109.1%
90 and over	539	597	745	980	1,275	136.5%
Total aged 65+	2,858	3,123	3,705	4,448	5,195	81.8%

Source: POPPI. Crown copyright 2016. Figures may not sum due to rounding

- 5.3 As numbers of older people increase the number of people living with long term health conditions is also projected to increase by about 1,000 in Medway, over the next five years.
- 5.4 This rise in the number of older people within the local population is likely to lead to further increases in demand for health and social care services and adult safeguarding activity, as well as an increase in the prevalence of social isolation.
- 5.5 As of 31st March 2022, the Council were supporting 793 older people (65+) to live in their own homes with a package of care – a reduction from 910 in 2020/21 and 978 in 2019/20.
- 5.6 As of 31st March 2022, the Council were supporting 571 older people to live in care/nursing homes – an increase from 486 the previous year.

6 Public Health – Lead Member, including Health and Wellbeing Boards

- 6.1 As Chair of the Health and Wellbeing Board, the year 2021/22 was dominated by our response to COVID-19 and ensuring that other threats to health and wellbeing continued to be managed and addressed. As part of the latest NHS and social care transformation programme, the Health and Wellbeing Board also had to contribute to the establishment of the Kent and Medway Integrated

Care Board (ICB) and related programmes of work which include population health management.

- 6.2 COVID-19: The Health and Wellbeing Board (HWB) received updates at each meeting on the development of the COVID pandemic and our response to it, including the results of stress tests, the latest assessments based on epidemiological modelling, and the vaccination programme. As the number of cases waxed and waned over the period the HWB raised and responded to concerns about the number of cases in different groups, e.g., school-aged children, and vaccination rates in different parts of the community, among other issues.
- 6.3 As guidance changed the HWB sought clarification on expectations and requirements for testing, vaccination and other measures to limit the spread of COVID. These views were considered in the context of falling mortality rates from COVID and the reduction in the impact of COVID on health services.
- 6.4 New health and care system and population health management: Throughout the period of 2021/22 development work took place to prepare for health and care system changes across England. The formal establishment of Integrated Care Systems (ICS) took place on the 1st July 2022, in line with the requirements of the Health and Social Care Act 2022. Within the Kent and Medway ICS there are different structures which enable all stakeholders to help inform the work to improve health and wellbeing. An officer led body (Integrated Care Board (ICB)) comprised of officers from Kent County Council, Medway Council and the NHS, provides the executive leadership. The work of the executive is overseen by an Integrated Care Partnership (ICP) Committee. This committee is chaired by the leaders of Medway Council and Kent County Council on a 2 year rotating basis. Kent County Council currently hold the chair of the ICP with Medway deputising. The ICP is tasked to deliver the Integrated Care Strategy for Kent and Medway. This strategy sets out the key priorities for the whole system and must take account of local priorities. The ICP is supported in its work to develop the strategy and also implement action by a subcommittee. This subcommittee (Inequalities, Prevention and Population Health Committee -IPPHC) has a broad range of stakeholders. These include community providers, social care, the voluntary and charitable sector, as well as NHS and other specialist organisations.
- 6.5 This new way of working is informed by local priorities, including the Medway Joint Strategic Needs Assessment and Joint Local Health and Wellbeing Strategic that is currently being refreshed.
- 6.6 The Health and Wellbeing Board received a number of papers related to the development of the ICS and population health management, enabling the HWB to provide support and tailor the process to ensure the needs of the Medway Population are addressed.
- 6.7 Annual public health report – independent report of the Director of Public Health

6.7.1 Directors of Public Health have a statutory requirement to produce an independent annual report—these reports are the DsPH’s professional statement about the health of the local community. The focus of this year’s report is Hypertension. The report shines a light on the prevalence of cases locally and the issue of who have high blood pressure but are yet to be identified. The recommendations focus on how we ensure early detection, good treatment and how we can prevent hypertension in the first place.

6.8 Medway Stop Smoking Service

6.8.1 The national ambition is to reduce smoking prevalence to 12% or less by 2022. This is supported locally through tobacco control and stop smoking initiatives. This objective is currently on track with smoking prevalence in Medway having recently reduced from 17.6% (2017) to 14.5% (2021). The targeted work on maternal smoking rates are also at record low levels, with smoking at time of delivery reduced from 17.4% (2017/18) to 10.8% (2021/22).

6.8.2 The Stop Smoking Service supported 1,515 residents in their quit attempt last year. This consistent performance is as a result of a wide range of individual projects and targeted interventions. These include the following: specialist targeted work to support women to stop smoking during pregnancy, a high street shop location in Chatham providing instant free support, clinics in the community and specialist advisors in a range of GP surgeries, and Pharmacies across Medway. The service also offers digital interventions such as text and online advisor appointments to smokers.

6.8.3 The team also continue to work successfully on the tobacco control agenda which includes limiting the accessibility of illicit tobacco in Medway in partnership with Trading Standards, HMRC, and the Police taking a multi-agency approach to tackle the issue. A pilot project is currently being delivered in association with Housing partners to reduce in vulnerable populations. There is continued support and expertise from the team to embed the NHS Long Term Plan ambitions in Medway Foundation Trust.

6.9 NHS Health Checks

6.9.1 Recovery of NHS Health Check delivery was challenging throughout 2021/22 as prioritisation of the vaccination programme meant primary care were directed not to deliver health checks at certain points throughout the year, as the system worked tirelessly to vaccinate our residents against COVID-19. However, despite these challenges great work was able to take place in public health’s outreach team and in GP practices, with a significant increase in the number of people receiving an NHS Health Check, compared to the previous year. The work undertaken by the team in 2021/22 has provided the foundations for 2022/23 to realise pre pandemic levels for delivering health checks.

6.9.2 Public Health also provides and commission a number of other services including:

- 0-19 Child Health service
- Healthy environment
- Dietary intake
- Men in Sheds
- Oral Health promotion
- Physical activity
- Sexual health promotion
- Social Prescribing
- Supporting healthy weight
- Tackling harm caused by alcohol & other substance misuse
- Workforce Development
- Workplace health

7 Adults' Partnership Commissioning (25+) and Better Care Fund

- 7.1 Adults Partnership Commissioning work closely with the Medway and Swale Health and Care Partnership, the place based representation of the Kent and Medway Integrated Care System colleagues, to ensure health and social care services are fully integrated. The wide range of projects are either funded from the Better Care Fund, Medway Council adult social care budget or Kent and Medway Integrated Board central NHS budget.
- 7.2 The Better Care Fund (BCF) is a national initiative which requires the creation of a pooled budget for the commissioning of integrated health and social care services effective from April 2015. The initiative is targeted to progress the integration of services as determined at a local level. Whilst local areas are required to manage a pooled fund for the delivery of restructured services, the fund represents primarily existing investment.
- 7.3 The BCF is underpinned by a legal agreement under Section 75 of the 2006 NHS Act (a s75 agreement). It is the responsibility of Adult Partnership Commissioning to ensure the s75 is in place.
- 7.4 The team manages contracts that help facilitate the discharge from hospital, admission avoidance and social care services. These including Intermediate Care and Reablement Service, care settings and the Medway Integrated Community Equipment Services.
- 7.5 Operationally there is daily direct communication with all Medway social care providers through daily e-mail bulletins and an interactive Provider Portal which highlights any new guidance or information that requires the attention of providers. The portal offers providers easy access to national guidance and local health and social care information, advice on vaccinations, Infection prevention and control (IPC), advice on workforce issues, outbreak control, and details of Medway Council's financial support offer. Survey data from our providers has confirmed that the majority of providers have found this information useful, and they are mostly happy with the amount of information being shared.

- 7.6 Monthly virtual provider forum meetings are held, and direct feedback from our providers has been positive about the support that has been provided. The service has been in regular contact with the regional CQC lead to ensure that intelligence is shared and acted upon as appropriate.
- 7.7 Data returns from providers are monitored through the national Care Home Tracker and responses are provided to issues raised through these routes, including outbreaks.
- 7.8 A dedicated email inbox is monitored daily in order to address any issues or concerns, including cost of living or workforce issues.
- 7.9 System partners work closely together to identify and support care homes requiring additional support. These homes, once identified have targeted support in areas such as medicine management, safeguarding, end of life care, IPC and swabbing. The KMICB has an Infection Prevention and Control (IPC) lead who works with the health Protection team to support care homes. Care Providers are regularly reminded how to access health and wellbeing support services that are offered by Public Health and KMICB.
- 7.10 Adults Partnership Commissioning are established as the main conduit for distributing information to the homes. They also liaise with Public Health in regard to outbreaks, can quickly establish a status on vaccination rates, outbreaks, and workforce issues.
- 7.11 2022 has seen Commissioners begin the re-commissioning for several services including the Intermediate Care and Reablement Service, Support Living Accommodation and the Wellbeing Care Navigation Service.
- 7.12 The Support To Live At Home service
- 7.12.1 This service was commissioned to replace the former domiciliary care framework from April 2020 and provides homecare and support to people in their own home and to those living in the five Medway extra care schemes.
- 7.12.2 'Support To Live At Home' places emphasis on maintaining and improving health and wellbeing, through enablement based care practices, enabling people to live as independently as possible. The design of the service coordinates care provided by local care workers, in a cohesive way with health and social care teams, utilising community assets to provide person centred care and support.
- 7.12.3 This service will start the recommissioning process in 2023.

8 Health and Health Partnerships

- 8.1 As Lead Member for Health, I am pleased with the progress we have made in encouraging an integrated approach in the planning and delivery of health and social care services. I have already set out the changes to the partnerships within Kent and Medway, following the establishment of the

Kent and Medway Integrated Care Board and structures on the 1st of July 2022. At a local level there are 4 health and care partnerships across Kent and Medway that align with local geography and acute hospital catchment areas. The Medway and Swale Health and Care Partnership is the body that brings together, NHS providers of community services, for example therapies and community nursing, GP's and other primary care services, mental health providers and local authority services, including social care, public health, housing etc.

- 8.2 Medway Council has provided specialist data intelligence and public health input that has contributed to the development of the health and care system in Kent and Medway and within the Medway Swale Health and Care Partnership. The outputs of which aim to support everyone in Kent and Medway to have a great quality life by giving them high quality care and support and promote independence.
- 8.3 A key Adult Social Care service is the provision of integrated discharge planning for people who have had a period of hospitalisation. This is provided through the Integrated Discharge Team [IDT], described in section 3 of this report, based at Medway Maritime Hospital.

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Appendices

Appendix 1 - Medway Adults' Service Local Account 2021/22

Background papers

None.