
Decision Maker: ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Date: 28 June 2022

Decision Type: Non-Urgent Non-Executive Non-Key

Title: INTEGRATED SUPPORT TO CARE HOMES PROGRAMME

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Chief Officer: Director of Adult Social Care

Ward: All

1. Reason for decision/report and options

- 1.1 The Integrated Support to Care Homes Programme (Programme) is delivered by a range of individuals across the London Borough of Bromley, NHS South East London Clinical Commissioning Group (NHS SEL CCG) (Bromley) and other One Bromley organisations, forming the Care Home Support Network (Network).
- 1.2 The Network provides health and social care support to 53 CQC registered care homes for older people as well as individuals living with Learning Disabilities, Mental Health and Physical Disabilities. It also supports 6 Extra Care Housing Schemes and 12 Learning Disability Supported Living providers.
- 1.3 This report is for information, providing an update on the Programme. It reflects on the challenges and achievements throughout the Covid-19 pandemic and provides an update on the current workplan and longer term priorities.

2. **RECOMMENDATION(S)**

To note and comment on the content of the report particularly:

- 2.1 The award-winning support that has been offered to care homes throughout the pandemic
- 2.2 The proposed priorities and work areas in the Integrated Support to Care Homes Programme

Impact on Vulnerable Adults and Children

1. Summary of Impact: The Integrated Support to Care Homes Programme (Programme) is delivered to all care homes in Bromley where Older Peoples and individuals living with Learning Disabilities, Mental Health, and Physical Disabilities reside.
 2. The Programme aims to ensure high-quality, person-cantered, and proactive care and support is provided to all care home residents.
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Transformation Policy

1. Policy Status: Not Applicable:
 2. Making Bromley Even Better Priority (delete as appropriate):
 - (2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices.
 - (5) To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.
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Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable: Further Details
 3. Budget head/performance centre:
 4. Total current budget for this head: £
 5. Source of funding:
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Personnel

1. Number of staff (current and additional):
 2. If from existing staff resources, number of staff hours:
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Legal

1. Legal Requirement: Statutory Requirement:
2. Under Section 5 of the Care Act (2014) the LA has a duty to shape and maintain an efficient and effective market of services for meeting care and support needs in the local area
3. The Local Authority must understand the current market and develop knowledge of future needs in relation to demographics, drivers, trends, aspirations, priorities and preferences of people who need or are likely to need Care and Support/Support. The market that is shaped should ensure that any person requiring Care and Support/Support services:
 - Has a variety of providers supplying a variety of services to choose from;
 - Has a variety of high quality services to choose from; and

- Has sufficient information to make an informed decision about how to meet the needs in question.

2. Call-in: Not Applicable:

Procurement

1. Summary of Procurement Implications:

Property

1. Summary of Property Implications:

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications:

Customer Impact

1. Estimated number of users or customers (current and projected): 2,066 care setting residents (no. beds)

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 Introduction

3.1.1 The Integrated Support to Care Homes Programme (Programme) is delivered by an integrated Care Home Support Network (Network), made up of a range of individuals across the London Borough of Bromley (LBB), NHS South East London Clinical Commissioning Group (NHS SEL CCG) (Bromley) and other One Bromley provider organisations.

3.2 The Care Home Support Network

3.2.1 An integrated wrap around support offer to care homes was accelerated in response to the Covid-19 pandemic. Previously, individual teams supported care homes in various ways, sometimes with overlapping functions. Now, teams within the network work in a more integrated and streamlined way, delivering even higher quality care and support as a result. More efficient systems and processes established during the pandemic have now been successfully formalised and mainstreamed. In addition, the relationship with the provider market has changed, working with providers as partners. As a result, the response is more effective, intelligence based and supports the specific needs of care home residents and the market.

3.2.2 The Network provides health and social care support to 53 CQC registered care homes in Bromley, for Older Peoples as well as individuals with Learning Disabilities, Mental Health and Physical Disabilities. It also supports 6 Extra Care Housing Schemes and 12 Learning Disability Supported Living providers (with over 50 individual settings).

3.2.3 LBB and NHS SEL CCG colleagues within the Network work with providers as partners and provide the following specific support:

- **Strategic leadership and oversight** of Integrated Support to Care Homes Programme ensuring activity to support care homes is responds to market needs and co-ordinated to ensure the market is not overwhelmed.
- **Joint commissioning and market development** (older adults) responding to the ongoing changing needs of Bromley residents and ensuring a fit for purpose, high quality local market.
- **Quality improvement** (clinical and non-clinical) – coordination and intelligence sharing via Care Home Operational Group and providing direct support for quality improvement across the boroughs care settings, this includes for example embedding preventative clinical programmes (RESTORE2, React to Falls), delivering a comprehensive training and development. programme and providing hands on support from the LA's Contract and Compliance Team, and the CCG's Care Home Quality Liaison Nurse.
- **Direct Clinical Support** through the exemplary dedicated GP surgery for all older adult care homes, the Bromley Care Practice, as well as continually developing the wider clinical support offer for care home residents.
- Delivery of a highly effective **Covid-19/Flu vaccinations programme**.
- Delivery of an award winning **Covid 19 testing & outbreak management** utilising effective surveillance and response system to support and wrap around care homes in a Covid outbreak.

- **Digitisation of care homes** to deliver more co-ordinated and effective care.
- **Communications** – Regular care home forums and newsletter ensuring care homes have the most up to date information and opportunities available to them.

3.3 Significant challenges overcome by the Network

3.3.1 The Network has successfully navigated the following challenges over recent years:

- a) **Covid-19:** Covid-19 brought significant challenges to the whole health and care system, including the provider market, health and care organisations as well as residents. At the very start of the pandemic, One Bromley partners realised the importance of supporting the capability of the local market in responding to the pandemic and reacted quickly with an integrated care home support offer.

The integrated care home support offer provided by the Network achieved the following:

- i. Prevented the spread and impact of Covid-19 infection in care homes through:
 - training 100% of staff in Infection Prevention and Control (IPC).
 - supporting the delivery of Covid-19 vaccination programme to care home residents and staff, achieving 97% uptake in both cohorts for primary dose. Bromley reached these achievements ahead of its neighbouring SEL boroughs.
 - ii. Provided effective surveillance to identify and manage over 100 outbreaks, supporting providers to:
 - Prevent the spread of the virus.
 - Maintain a safe and effective workforce throughout the outbreak.
 - Deliver high quality symptom control and management including specialist palliative care and Covid treatment bundles (Dexamethasone and O2 therapy) delivered in care homes.
 - Maintaining market sustainability.
 - iii. Supported care home staff to navigate the significant volume of regularly changing Government guidance regarding Covid19 in care homes and streamlined communications with the introduction of the weekly newsletter.
- b) **Hospital admission avoidance:** During Covid-19 (and beyond), the offer of enhanced Covid-19 treatment bundles within the care home setting, proactive Advanced Care Planning for vulnerable residents and specialist palliative care supported residents within their care home. This not only supports the acute sector through admission avoidance, but also ensures residents who are too unwell to be conveyed receive high quality acute-level treatment within the care home setting. It also leads to improved patient experience being cared for in a familiar setting with continuous care and support.

A pilot to provide subcutaneous fluids was also implemented to deliver fluids to nursing home residents and support admission avoidance. This successful initiative will be further enhanced along with offering an Intravenous Antibiotics (IVA) service which is currently in development.

Furthermore, dedicated support from the Public Health team is in place for individual patients with complex IPC issues.

As a result of the Network's significant efforts and the onboarding of a dedicated GP practice for Older Peoples care setting residents, there has been continual improvement in clinical and quality support to these care settings. As a result, the average number of monthly ambulance conveyances has fallen by 13% across care settings in Bromley.

- c) **Hospital discharge into care homes:** Wherever possible the system strives to ensure all patients admitted to hospital are able to return home. However, there is a small cohort of patients that, following an acute episode are no longer able to return home and require 24-hour care in a care home setting. To improve the quality of transfer of patients for residents to care homes from hospital, with input from the Network, the Transfer of Care Bureau developed minimum discharge standards for care home residents.

The Transfer of Care Bureau Service Manager regularly attends the Care Home Forum to provide updates to the providers about recent improvements, key information etc. and to also receive feedback from providers directly. This has helped build a stronger relationship between the hospital team and providers and learn from experience.

Additionally, Trusted Assessor arrangements have been put in place whereby care home and hospital nursing staff work together virtually to assess patients in the hospital requiring a new care home admissions. This has increased efficiency as care home staff no longer need to visit the hospital for assessment and has further built relationships.

- d) **Equitable support to Learning Disability & Mental Health (LD/MH) care settings:** The Network has made significant progress in equity of support to LD/MH settings with providers supported closely throughout Covid-19. There is increased partnership working with providers and they are all included in new initiatives e.g. training, Digital First Programme, LD/MH ECHO community of practice (mobilised in 2021), monthly newsletter and regular LD/MH provider forums.

3.4 Recognition of the Network's success

- 3.4.1 The Network's response to Covid-19 in particular, was recognised by the prestigious national MJ Achievement Awards 2021, winning the Care and Health Integration category.
- 3.4.2 More recently at the inaugural One Bromley Staff Awards in May 2022, the Network won the award for 'Keeping people well and cared for in their communities'.
- 3.4.3 Bromley's approach to rolling out the RESTORE2 deterioration management tool is being showcased by the Health Innovation Network (HIN).
- 3.4.4 Most importantly, the Network's efforts have been well received by the care home providers themselves. A care home manager satisfaction survey was conducted in January 2021 and repeated in March 2022. Across all areas of support i.e. IPC, vaccinations, testing, clinical and End-of-life support, on a scale of 1-5 (5 being highest), support levels scored on average 4.32 at both timepoints, highlighting the high level of support has been maintained.

3.5 The Integrated Support to Care Homes Programme (2022/23)

- 3.5.1** The Programme workplan is driven by NHS England & Improvement's (NHSE/I) Framework for Enhanced Health in Care Homes, and local intelligence of the market. In addition, under Section 5 of the Care Act (2014) the LA has a duty to shape and maintain an efficient and effective market of services for meeting care and support needs in the local area.
- 3.5.2** Additionally, the LA must understand the current market and develop knowledge of future needs in relation to demographics, drivers, trends, aspirations, priorities and preferences of people who need or are likely to need Care and Support/Support. The market that is shaped should ensure that any person requiring Care and Support/Support services:
- a) Has a variety of providers supplying a variety of services to choose from;
 - b) Has a variety of high quality services to choose from; and
 - c) Has sufficient information to make an informed decision about how to meet the needs in question.
- 3.5.3** In Autumn 2021, a stocktake was conducted to take stock of the market position as well as the current health and care provision. It highlighted the excellent progress and successes to date and also identified potential opportunities whilst considering learnings from Covid-19. It culminated in recommended priority areas which have been consulted on and adopted in the 2022/23 Programme workplan. The work areas have already started with significant progress made in some areas.

3.5.4 *All care home priorities:*

- Roll out the Falls and balance training programme for care home staff to prevent and reduce falls, collaborating with the University of Nottingham's Rehabilitation Research Team.
- Roll out the RESTORE2 deterioration management tool training and embed tool within all care home, collaborating with the Health Innovation Network.
- Market development and management continually driving access to local, affordable high quality accommodation (Commissioning and Quality) including an updated Market Position Statement and looking for new opportunities through an Extra Care Housing Transformation Programme
- Support the transition of the care planning system Coordinate My Care to Urgent Care Planning. It is important all care home residents have urgent care plans in place so all parties are aware of their wishes in advance should they need urgent and emergency care. Further strengthen escalation care pathways and interface with NHS 111 and London Ambulance Service, so residents receive the right care, in the right place, at the right time.
- Digital transformation programme rollout – all providers must Data Security Protection Toolkit (DSPT) compliant as this underpins access to a host of digital applications and systems, for example NHS Mail (secure mail), Proxy medication ordering, and electronic case management/assessment for more efficient and secure information sharing.
- Review and develop the training and consortium offer to ensure it is fit for purpose and meeting the current needs of the care home workforce, responding also to national changes.
- Vaccinations, Infection prevention control, and winter planning.

3.5.5 Older Peoples specific priorities:

- Continuing to develop the dedicated primary care offer to Care homes including the Bromleag Care Practice (Older People's GP practice) expansion to also include specialist palliative, end of life care and mobilising further treatment bundles, including intravenous antibiotics (IVA), to prevent unnecessary conveyance for residents where a hospital admission is not in the residents' best interest.

3.5.6 Learning Disability & Mental Health specific priorities:

- Working with residents' GPs to promote high quality and full Structured Medical Reviews (SMR) and Annual Health Checks to counter health inequalities. Individuals with a learning disability generally have poorer health and multiple health conditions compared to those without a learning disability. These reviews are therefore extremely important in ensuring residents in LD care settings have access to the care and support that meets their individual needs.
- Developing a community pharmacy network for LD/MH care homes.
- Continue to offer care home forum, ECHO and newsletter support to LD/MH care homes.

3.6 Conclusion

3.6.1 Significant work around care homes has taken place over the past few years, delivered by the Network. This joint working was accelerated whilst responding to the challenges of the Covid-19 pandemic and has effectively been mainstreamed to continue to provide the high-quality support to all care homes within the borough. Efforts to date have been formally recognised through various awards and by the care home providers themselves.

3.6.2 The Programme workplan for 2022/23 brings many exciting opportunities for the care home sector, not only benefiting the local health and social care system as a whole, but importantly the care home staff, residents and their families.

4. IMPACT ON VULNERABLE ADULTS AND CHILDREN

4.1 The Integrated Support to Care Homes Programme (Programme) is delivered to all care homes in Bromley where Older Peoples and individuals living with Learning Disabilities, Mental Health, and Physical Disabilities reside.

4.2 The Programme aims to ensure high-quality, person-centered and proactive care and support is provided to all care home residents.

5. TRANSFORMATION/POLICY IMPLICATIONS

5.1 The Integrated Support to Care Homes Programme (Programme) addresses the MBEB priority (2) *For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices*

Non-Applicable Headings:	<ul style="list-style-type: none"> 6. FINANCIAL IMPLICATIONS 7. PERSONNEL IMPLICATIONS 8. LEGAL IMPLICATIONS 9. PROCUREMENT IMPLICATIONS 10. PROPERTY IMPLICATIONS 11. CARBON REDUCTION/SOCIAL VALUE IMPLICATIONS 12. CUSTOMER IMPACT 13. WARD COUNCILLOR VIEWS
Background Documents: (Access via Contact Officer)	[Title of document and date]