

# BRIDGEND COUNTY BOROUGH COUNCIL

## REPORT TO CABINET

19 OCTOBER 2021

### REPORT OF THE CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING

#### VARIATION TO THE OLDER PEOPLE PARTNERSHIP S33 AGREEMENT

#### RELEASING SERVICE CAPACITY WITHIN THE COMMUNITY RESOURCE TEAM

#### 1. Purpose of report

- 1.1 The purpose of this report is to request approval to vary the current Overarching Partnership Agreement for integrated community services with Cwm Taff Morgannwg University Health Board to include provision for a pilot scheme utilising Health Care Support Workers within the Community Resource Team. The intention of the pilot scheme is to seek to mitigate the current risks linked to reduced service capacity due to the inability to recruit to vacant social care worker posts.

#### 2. Connection to corporate well-being objectives/other corporate priorities

- 2.1 This report assists in the achievement of the following corporate well-being objectives under the **Well-being of Future Generations (Wales) Act 2015**:

- **Helping people and communities to be more healthy and resilient** - taking steps to reduce or prevent people from becoming vulnerable or dependent on the Council and its services. Supporting individuals and communities to build resilience, and enable them to develop solutions to have active, healthy and independent lives.
- **Smarter use of resources** – ensure that all resources (financial, physical, ecological, human and technological) are used as effectively and efficiently as possible and support the creation of resources throughout the community that can help to deliver the Council's well-being objectives.

#### 3. Background

- 3.1 During the transition arrangements for the health board boundary change, Cwm Taf Morgannwg University Health Board (CTMUHB) signaled a commitment to continue to work in partnership to deliver intermediate care services for Adult and Older People's Services. Following negotiation in terms of the content and structure of this agreement the formal partnership agreement took effect from 1st April 2019.

#### 4. Current situation/proposal

- 4.1 It is forecast that the long-term impact of COVID-19, alongside the already known pressures of an ageing population, increasing dementia rates and more complex

and challenging needs is going to result in increasing demands on already pressurised services.

- 4.2 The demands on care and support at home services are significantly increasing, care at home hours delivered in August 2021 were 7-8% greater than those hours provided in April 2020, before the pandemic took effect.
- 4.3 Due to the ongoing COVID-19 pandemic, demand has increased for both hospital and community services and both are operating under significant pressure.
- 4.4 Difficulties in recruiting to social care support posts mean that current resources are not adequate to meet the increasing demand, therefore creating bottlenecks at critical service points that have resulted in reduced flow within the hospital and community systems.
- 4.5 The reported difficulties in recruitment does not seem to be affecting our Health Board partners to the same degree.
- 4.6 In order to maintain and deliver safe, timely and efficient health and social care, there is an urgent need to work in partnership with CTMUHB to increase service capacity.
- 4.7 In August 2021, a report was written for the Bridgend Integrated Locality Group triumvirate and Bridgend County Borough Council (BCBC) Adult Social Care with a proposal that CTMUHB recruit 4 Whole Time Equivalent (6 x 25 hr contracts) band 2 Community Health Care Support Workers (HCSW) into the current integrated Community Resource Team (CRT) structure to provide support for people to reduce the need for social care input. The aim of this was releasing social care capacity within the current system and therefore improve the availability of short-term assessment care packages within the locality.
- 4.8 As a joint venture, it is proposed that this pilot follows similar management procedures that are in place for existing joint arrangements within the CRT.
- 4.9 The HCSW's will comply with CTMUHB policies and procedures and be accountable to their Local Authority/CTMUHB line manager within CRT.
- 4.10 The HCSW's will meet regularly with their CRT Line Manager for clinical and operational support.
- 4.11 The proposed pilot will be monitored closely by the lead for CRT who will report on its effectiveness in terms of quality, safety and people experience outcomes.
- 4.12 After seeking legal advice within the Health Board and BCBC it has been recommended that a variance under the current Section 33 Agreement be initiated.

## **5. Effect upon policy framework and procedure rules**

- 5.1 There is no direct impact on the Council's policy framework and procedure rules. The pilot scheme is being undertaken under a variance to the current Section 33 agreement for Community Integrated services.

## 6. Equality Act 2010 implications

- 6.1 An initial Equality Impact Assessment (EIA) screening has identified that there would be no negative impact on those with one or more of the protected characteristics, on socio-economic disadvantage or the use of the Welsh language. It is therefore not necessary to carry out a full EIA on this policy or proposal.

## 7. Well-being of Future Generations (Wales) Act 2015 implications

- 7.1 The proposal to pilot the use of Community Health Care Support Workers within the community resource team supports the five ways of working under the Well-being of Future Generations (Wales) Act 2015, as follows:

**Long Term** – the proposal aims to have a positive impact on service delivery by bringing additional capacity in community services to release beds in hospital that are occupied due to people being unable to access care and support. This releases capacity within the hospital to undertake interventions on acutely ill people.

**Prevention** – Community Resource Team services are essential preventative services that aim to mitigate the need for more costly residential care placement, where individuals are supported to maintain independence and live in their own homes for as long as is possible and appropriate to do so.

**Integration** – the Community Resource team is an integrated service governed under a Section 33 agreement with Cwm Taf Morgannwg University Health Board.

**Collaboration** – the proposal is founded on close collaboration between the primary care, community services and secondary health services.

**Involvement** – Key stakeholders have been involved to help shape the proposal to ensure a co-productive resolution to the current recruitment difficulties.

## 8. Financial implications

- 8.1 It is proposed that the posts within the pilot, which is planned to commence in November 2021, are funded from the eleven 20 hr Support Worker vacancies currently within the CRT services. This will require cross charging between the agencies which is a current monthly activity for other posts within the integrated community services.
- 8.2 The proposed posts are benchmarked at Band 2 £18,005- £19,337 pro rata. The BCBC vacancies are on a Grade 5 which is £20,092 pro rata and therefore sufficient to cover the costs.

## 9. Recommendations

- 9.1 It is recommended that Cabinet:

- considers the contents of this report, the current challenges this proposal aims to mitigate; and
- delegate authority to the Corporate Director for Social Services and Wellbeing, in consultation with the Interim Chief Officer, Finance, Performance and Change and the Chief Officer, Legal, HR & Regulatory Services, to negotiate and enter into a variation agreement to the Overarching Partnership Agreement for the integrated community services with Cwm Taff Morgannwg University Health Board Board to include provision for a pilot scheme utilising Health Care Support Workers within the Community Resource Team in accordance with the proposal set out in this report.

**Claire Marchant**  
**Corporate Director – Social Services and Wellbeing**  
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**Contact officer:** Michelle King  
Integrated Community Services Manager- CRT

**Telephone:** (01656) 815888

**Email:** Michelle.King@bridgend.gov.uk

**Postal address:** Trem y Mor Offices, Bettws Road, Bettws, Bridgend.

**Background documents:** None