

Crisis in a crisis

# Domiciliary Care

**Purpose:**  
To discuss and  
explore the  
broader issues.

Understanding of domiciliary care -  
current situation, the deteriorating  
situation over recent years

Tell you what we have done /  
doing

Look at the broader implications  
and solutions

# Service Profile

Domiciliary Care is the cornerstone of Adult Social Care and Health. All other services in adults are reliant on domiciliary care and the impact of the crisis affects all elements of the service.

**Current Service 35,756 monthly hours and the trend is upward**

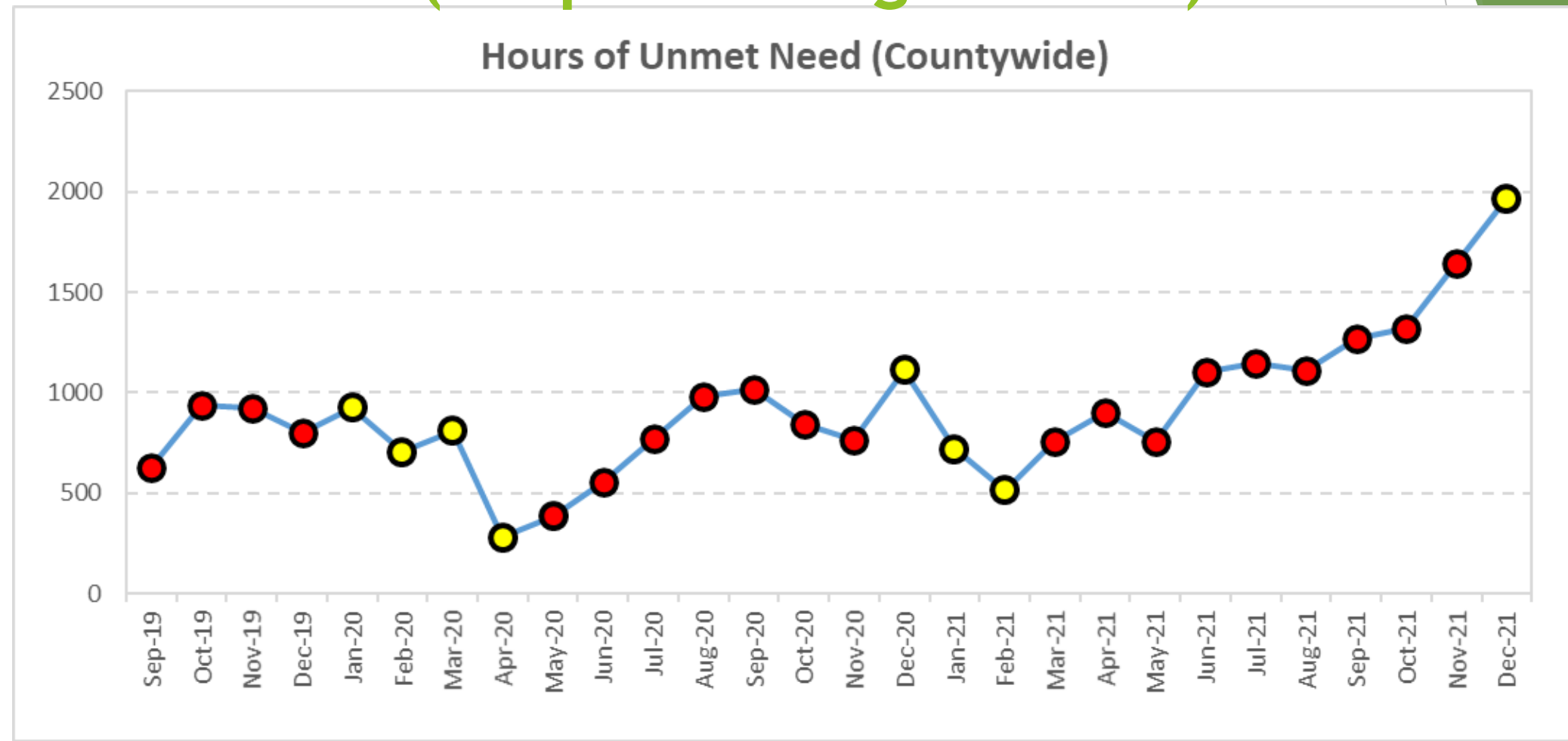
▶ What constitutes domiciliary care?

- Enablement
- Long term care/ dementia
- EOL
- Night service

▶ What do we do?

- Care & support plans identify an individual's needs & outcomes
- It could be four double handed calls per day
- It could be walking to the paper shop

# Demand - Unmet Need (People waiting for Care)



**Notes: Increasing Trend; Yellow points indicate the Covid Waves**

# Demand - Where are the people with Unmet Need

Where are these People	Hours	People	%
Change to Existing Care Plan Based on Need	99.25	11	5%
No Care Being Received (Waiting for Care at Home)	805.00	104	43%
With Reablement (Waiting for Long Term Care)	239.00	23	13%
In Hospital fit for Discharge	712.50	49	38%
<b>TOTAL Hours of Unmet Need as at 06/01/20222</b>	<b>1855.75</b>	<b>187</b>	<b>100%</b>

*Notes: Increasing Trend from a normal position of between 600 - 800 Hours*

# Demand - Unmet Need by Patches

TWUD Patches	Dec-21
Abergavenny Town	374.25
North Abergavenny	62.5
South Abergavenny	30.75
West Abergavenny	74.75
<b>North Monmouthshire</b>	<b>542.25</b>
Central Monmouthshire	53.5
Usk & District	216.5
Monmouth Rural	67.25
Monmouth Town	277.5
<b>Central Monmouthshire</b>	<b>614.75</b>
Caldicot Town	343.25
Chepstow Rural	37.75
Chepstow Town	264.25
The Levels	165.75
<b>South Monmouthshire</b>	<b>811.00</b>
<b>Total</b>	<b>1968.00</b>
<b>Number of People waiting for POC</b>	<b>187</b>



# Demand - Complexity Across Adult Service Delivery

Adult Services	People	Weekly Hours	Supply
<b>Domiciliary Care</b>			
-Independents	438	4,745.50	Down
-Independents (24 Hour Live in Care)	18	2,872.25	Up
-Inhouse	262	2,340.25	Down
-Unmet Need	187	1,968.00	Up
<b>Care Home Placements</b>			
-InHouse	30		Stable
-Independents	271		Down
-Independents (Out of County Placements)	81		Stable
-Independents (In County Placements)	190		Down
<b>Others (Supported Living, Respite, Sitting)</b>	230		Stable
<b>No of People Supported</b>	<b>1436</b>		

*Notes : Does not include the people we support with no POC*

# Strategic Direction

- The Act - Person centred and asset based approach that focusses on “what matters”
- Place Based - Developing a place based approach that focuses on a community and the individuals that live within “place”. Statutory services will work with communities - focus on enabling, prevention, well-being and inclusion.



# Integrated Services (impact of demand)

Integrated Services	Nov-19	Nov-20	Nov-21	Demand	Comments
Referrals each month	255	252	261	Stable	People presenting are more complex
Caseloads	2133	2730	4168	Up	Increased demand on therapies
People on waiting lists	80	115	734	UP	Caseloads already well above average
Workforce	Nov-19	Nov-20	Nov-21	Numbers	
Workforce (Direct Care)		180	182	Stable	Increased sickness & problems recruiting
Workforce (Practitioners)					Increased sickness

**Notes: Does not include services provided by CLDT, both Adult Mental Health Teams**

# Workforce Data Care at Home



# Labour Turnover

All SCH	
Year	Turnover
2019/20	8.53%
2020/21	8.80%

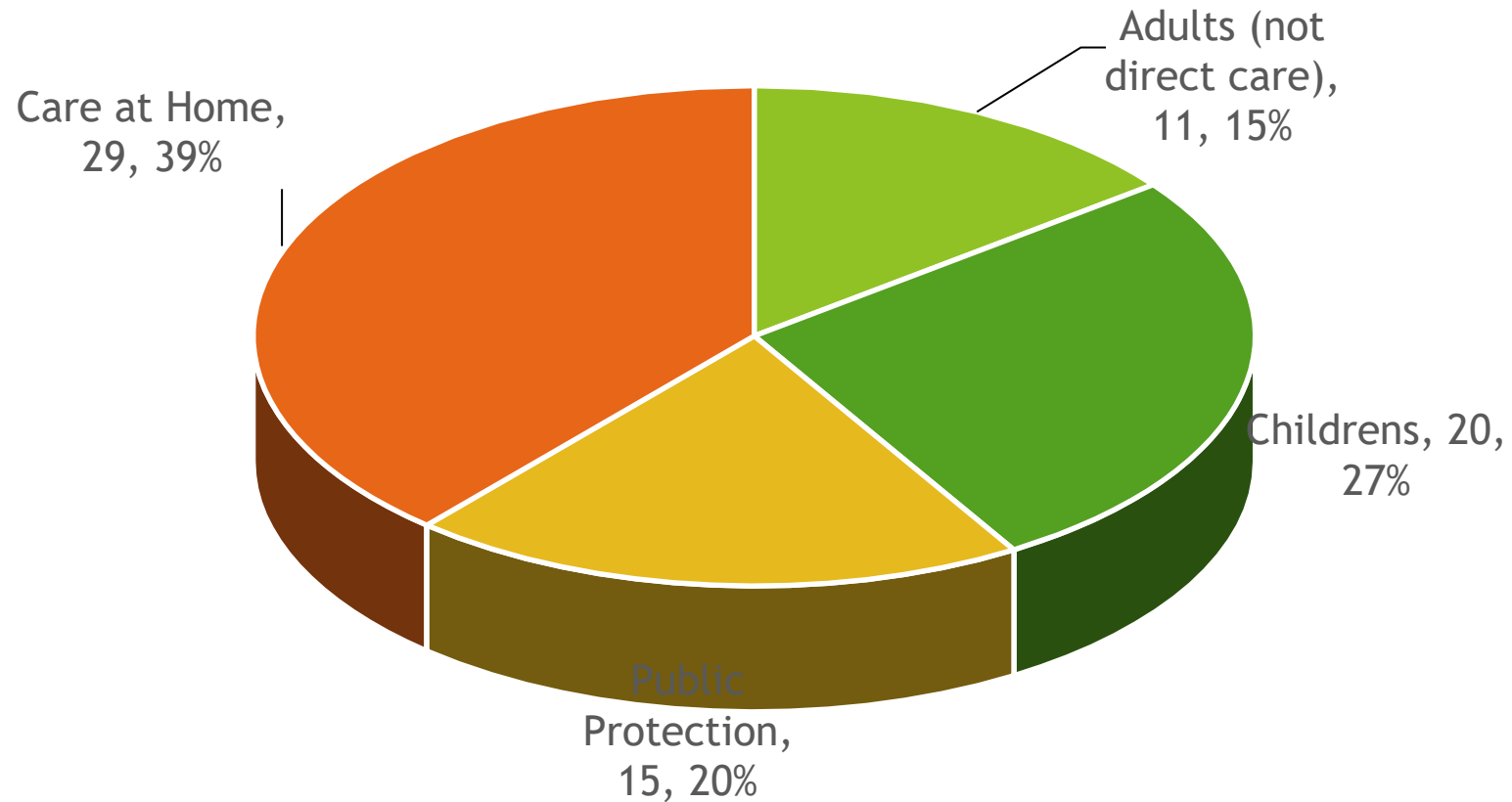
Adult Services	
Year	Turnover
2019/20	11.12%
2020/21	7.99%

All Wales National Average	
2020/21	12%

Children's Services	
Year	Turnover
2019/20	4.63%
2020/21	10.21%

Direct Care (All Care at Home Teams)	
Year	Turnover
2019/20	9.85%
2020/21	6.84%

# New Starters since March 2021



93% of applications came via the Indeed website

# Age Profile - Care at Home Team

Over half the workforce are over 45 years old.

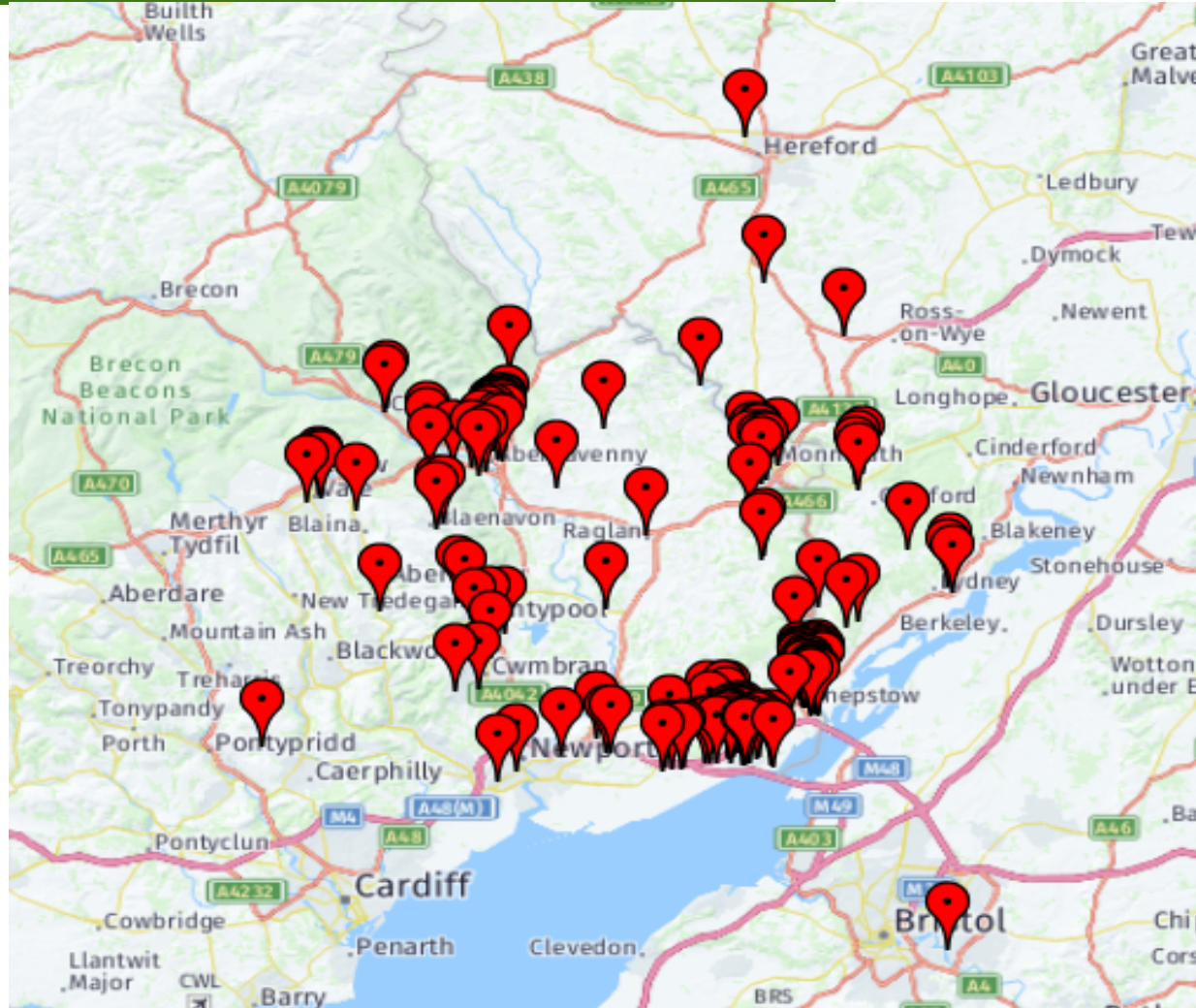
	16-24	25-34	35-44	45-54	55-64	65+	Total
Central	0	7	9	11	13	4	44
North	7	21	17	22	20	5	92
South	2	5	6	17	8	2	40
Total	9	33	32	50	41	11	176
%	5%	19%	18%	29%	23%	6%	

# Care at Home Teams: Length of Service

61% of the total workforce have 5 years or less service.

	Less than 1 year	1 - 2 years	3 - 5 years	6 - 10 years	11 - 15 years	16 - 20 years	21 - 25 years	26 - 30 years	30+ years	Grand Total
CARE AT HOME CENTRAL	5	16	9	6	4	0	4	0	0	44
CARE AT HOME NORTH	16	14	21	14	8	9	6	2	2	92
CARE AT HOME SOUTH	8	11	9	0	5	4	1	2	0	40
%	16%	23%	22%	11%	10%	7%	6%	3%	2%	176

# Where our staff live



I wanted to join MCC as I feel it can offer me more opportunities in the future.

I left because of the lack of training and continuous pressure to work over time.

Why people applied to join Monmouthshire

I am using this has an opportunity to try something new, as I was in an office style job previously.

To make a difference to others.

Not getting enough hours in my previous job.



# Impacts

- Public Transport network across the county and across county boundaries
- Limited Affordable housing
- National labour market (Brexit & Covid)
- Registration Social Care Wales - retiring earlier, put off joining
- Rurality of communities
- Negative media messaging - working in care
- Limited access to further education in locality (Social Care qualifications)
- Limited apprentices in care available

# Employment Data

Employment by Occupation in Care, Leisure & Other Service Occupations combined:-  
Monmouthshire is **6.9%** against Wales which is **9.9%** and **9%** in the whole of the U.K.

Unemployment figures for Monmouthshire is **3.4%** and in Wales is **4.4%** and **5.0%** in the whole of the U.K.

# Reasons for leaving employment

“Career change”

“Enjoyed my job but Covid-19 made me rethink my vocation”

“Moved to self employed”

“Reduced hours and more work life balance in another employment.”

“Changes within my job time constraints and lack of staff.”

## What has been positive during your time in MCC?

“Making a difference to a person who’s being supported and working as a team.”

“I would consider working for MCC again.”

## What can MCC do to improve?

“Employ more people at a better rate of pay.”

## How is the culture working within MCC?

“I enjoyed my time working and was supported very well”

“Frustrations with work life balance”

# The change required...

- Change the narrative - from last resort to aspiration
- Change the model - to care we must know people ordinarily and respond accordingly.
- Change the terms and conditions of employment across the whole sector
- Change the way we work with our partners

# Ways Forward

- TWUD
- Place based - will encompass all aspects of a community - 3<sup>rd</sup> sector, housing, education, residential settings, the community itself etc
- Micro carers

# Budget

- The hidden unmet need and cost going forward would be significant - based on commissioning the current unmet need of 2,000 hours = circa £2 million

# If Nothing Changes

## Key risks

- R & R
- Family stress
- Individual harm and neglect
- Reputation
- Place based and TWUD not achievable