



PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL
STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 February 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Long Term Care Performance Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Jill Paterson, Director of Primary Care, Community and Long Term Care
SWYDDOG ADRODD: REPORTING OFFICER:	Julia McCarthy, Head of Long Term Care

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

This report aims to provide an update on the Quarter 3 activity and highlight areas of relevance to the performance management relating to Continuing NHS Health Care (CHC) and Funded Nursing Care (FNC) within Long Term Care.

Cefndir / Background

The revised National Framework for Continuing Health Care (CHC) was implemented on 1 April 2022.

As part of the Framework, Boards are required to receive a quarterly report on CHC, and this paper fulfils that requirement. Its intention is to inform the Board of developments and current issues relevant to CHC, both nationally and locally.

AsesiadAssessment

Care Homes

The table below outlines the Nursing Home Sector across West Wales and bed capacity. There are currently 23 Nursing Homes providing a mix of General and Dementia nursing care. These Nursing Homes have a potential capacity of 1076 beds (nursing and residential beds combined). There are currently no dementia nursing beds in Ceredigion, whilst five homes in Pembrokeshire and eight homes in Carmarthenshire provide dementia care. There are also two Specialist Providers.

Carmarthenshire		Pembrokeshire		Ceredigion	
Affalon	52	Ashdale	27	Blaendyffryn	30
Allt y Mynydd	44	Belmont Court	27	Brondesbury Lodge	28
Blaenos	38	Brooklands	40	Plas Cwmcynfelin	56
Cartref Annwyl Fan	52	Fairfield	43		
Glasfryn	24	Meadows	60		
Hafan y Coed	107	Park House Court	87		
Peniel House	31	Parc Y Llyn	48		
Parc Wern	55	Rickeston Mill	29		
Plas y Dderwen	66	Williamston	34		
Ty Mair	74	Woodfield	24		

Hywel Dda University Health Board (HDdUHB) is currently commissioning 556 residents in Nursing Homes. These residents are funded via CHC, Funded Nursing Care (FNC) and Section 117 (S117).

Care Home Residents				
County	CHC	FNC	S117	Total
Carmarthenshire	76	145	28	249
Ceredigion	30	69	12	111
Pembrokeshire	80	85	31	196
Total	186	299	71	556

Escalating Concerns

During Quarter 3, no Providers were under the Escalating Concerns Process. However, more recently, (Quarter 4) a nursing home in Ceredigion entered the Escalating Concerns process on 12 January 2024 and a Formal Suspension of Placements is in place. The Home is being closely supported by the Local Authority and the Long Term Care Team.

Sustainability in the Care Home Sector

Older Adult Care Homes across the region remain at risk from a financial perspective. Care Home Providers have expressed concerns to commissioners about the current cost of living crisis and the impact this is having upon their financial sustainability. Care Home fees have significantly increased over recent years in recognition of the increased costs of food, fuel and inflation, however, a minority of providers remain dissatisfied with our fee rates.

The demand for high cost placements for individuals with complex behaviours/health needs is also increasing. Coupled with the increase in the ageing population, it is anticipated that there will be further demand for care and support services including a range of housing options. The complexity of need will also continue to grow as the number of people living with dementia and multiple co-morbidities increases. A continuing shift towards more specialist residential and nursing care is required but in current conditions it is difficult to see the Market delivering that at sufficient pace or scale.

Recruitment and retention of staff is a key challenge across Social care and this is impacting on both domiciliary and residential care.

The Sector remains fragile and the impact which rising costs has on sustainability of services is a national concern.

Recent Developments

A purpose built 84 bed dementia nursing/residential home in Llwynhendy, Llanelli is currently under construction by Padda Care, with the aim to open in November 2024. Padda Care has

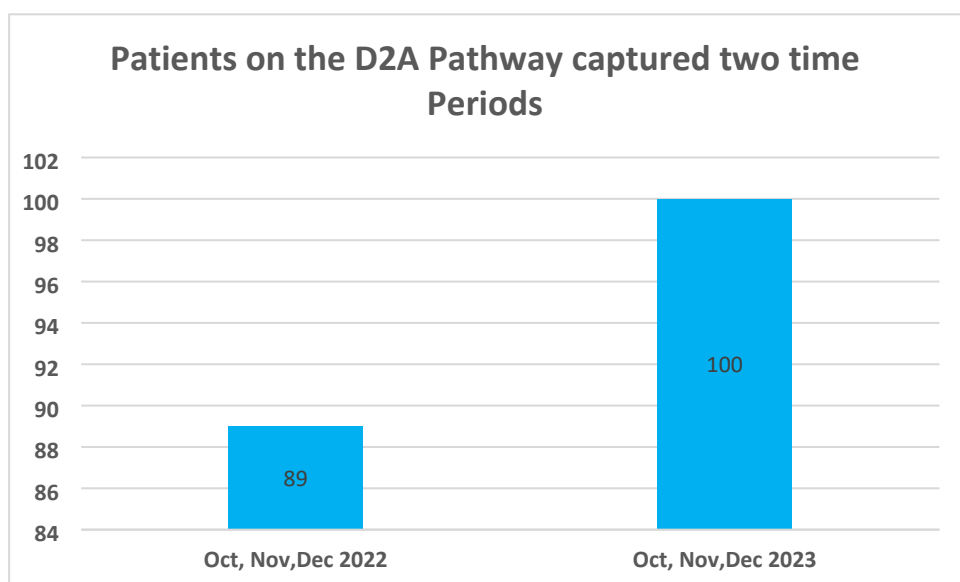
also purchased land in Cross Hands, with the aim to build a further 65 bed dementia nursing/residential home during late 2025.

The Regional Partnership Board is exploring the possibility of a public sector Nursing Home based at Pentre Annywl Fan, Llanelli. A feasibility study is required to determine whether a public sector Nursing Home is a viable option within the region. Legal advice is currently being obtained to determine any legal restrictions preventing the public sector from operating a Nursing Home.

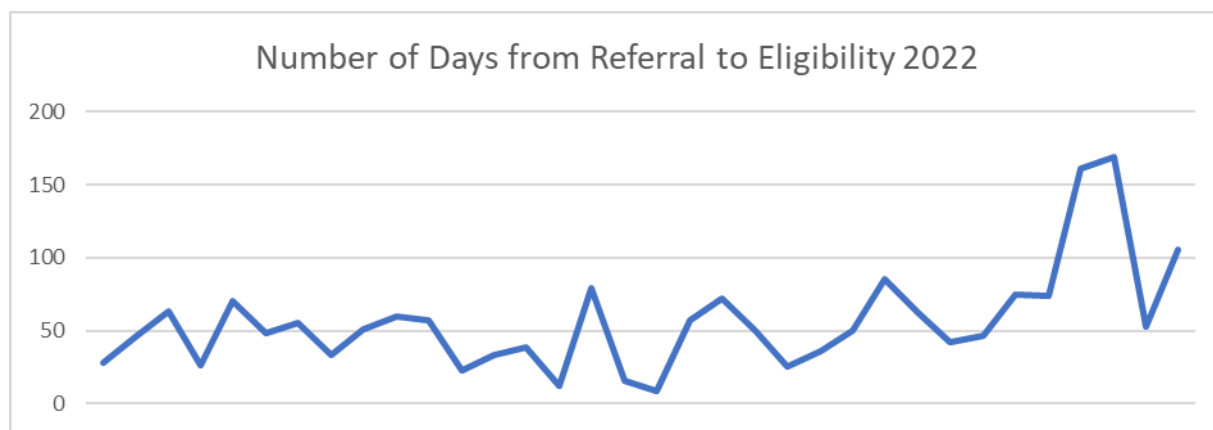
NHS Discharge to Assess Pathway (D2A)

The Long Term Care team (LTC) relaunched the D2A pathway in October 2023 to enhance patient flow via an increased visibility of the Long Term Care Team within the Acute sites. The aim was to identify suitable patients requiring long term care in a timely way by moving the expertise of the Long Term Care team closer to patients and clinical staff. The team now attend Board Rounds at various hospital sites. This support has been well received by ward staff and also promotes consistent decision making across the Organisation. Since the re-launch, the team have increased the team capacity from 3.6 Whole Time Equivalent (WTE) nurses to 5.6WTE nurses.

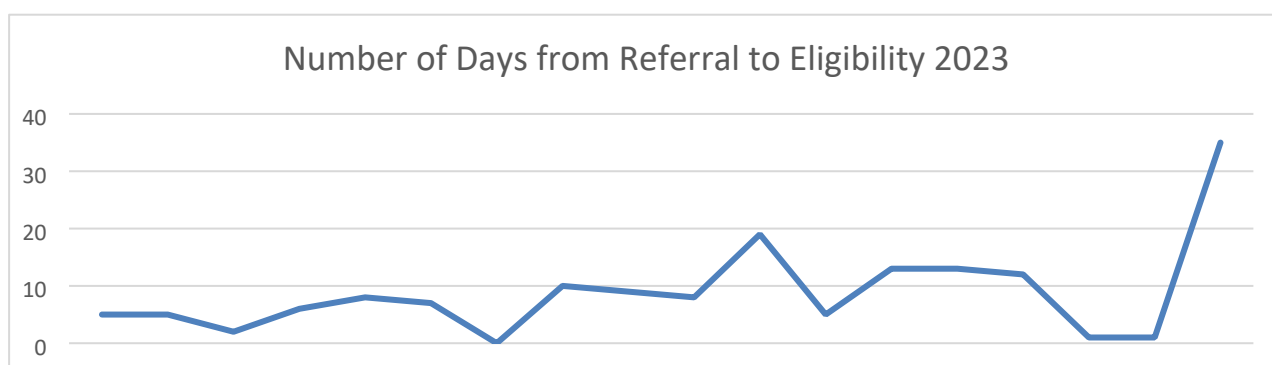
The below compares D2A data from Quarter 3 2023 to Quarter 3 2024.



The graph above illustrates that the number of patients discharged via D2A has increased from 89 to 100.



In Q3 2022, the average numbers of days from referral to assessment was 62 days.



In comparison for Quarter 3 2023 the average number of days from referral to assessment was 12 days. This data shows that the relaunch of the D2A pathway has demonstrated an 80% reduction in the number of days from the referral to Assessment.

The LTC Pathway Team are now fully embedded across all the hospital sites. This will help ensure patients requiring long term care are assessed in a timely manner, in an appropriate environment and expedites patient flow.

Number of individuals receiving care at home

Q3 2023/24				
County	Number of Patients	Number of hours per week with agency	Number of hours per week with Health Board Team	Average hours of care/person/week
Carmarthenshire	38	1164.49	449.58	62
Ceredigion	14	918	24.5	67
Pembrokeshire	18	1132.91	164.5	72
Hywel Dda Total	70	3215.40	638.58	67

Hywel Dda University Health Board is currently commissioning packages of care for 70 individuals within their own homes totalling 3853 hours of care each week. Which remains fairly static in comparison with the last quarter figures of 3899 hours of care each week. Average weekly hours provided per person are approximately 67hrs.

Appeals

The opportunity to challenge a CHC assessment is via the Appeals process. This enables individuals and/or their family members, or representatives to challenge decisions made by the Eligibility Panel. Such challenges may be based on either:

- The procedure followed by the Panel when making their decision on the patient's eligibility for CHC, or
- The application of the Primary Health Need (PHN) consideration by the Multi-Disciplinary Team (MDT).

Two Appeals were submitted in Quarter 3.

Disputes

Disputes are formal challenges by other statutory organisations, ie Local Authorities, regarding eligibility for Continuing NHS Healthcare.

No disputes were submitted in Quarter 3.

Retrospective Reviews

The retrospective claims process for the organisation is managed through the Long Term Care team. The process enables individuals to claim for retrospective CHC funding should they believe they were eligible for CHC funding for past care needs.

Eight Retrospective Reviews were submitted in Quarter 3. All activated retrospective claims are completed within the six month timescale and no Ombudsman enquiries/complaints relating to retrospective claims were received in this Quarter.

	Full Eligibility	Paternal Eligibility	No Eligibility	Eligibility % of Claim Days	Care Fees Reimbursed
Phase					
Phase 7 – 17/18	1	5	3	36%	£97,193
Phase 7 – 18/19	2	7	3	48%	£100,107
Phase 7 – 19/20	5	15	5	34%	£184,632
Phase 7 - 20/21	5	9	0	74%	£204,915
Phase 7 – 21/22	2	4	2	32%	£35,844
Phase 7 – 22/23	2	5	2	50%	£87,254

The number of retrospective claims peaked between 2019 – 2021 and an increase in eligibility is noted from 2020 – this was during the COVID-19 pandemic and CHC assessments had been suspended.

Court of Protection (CoP)

The Long Term Care Team are supporting an increasing number of Court of Protections cases which takes a significant amount of time due to the complexity of such cases. This is a national concern, shared amongst all Health Boards.

Deprivation of Liberty Safeguards (DoLS)

DoLS activity and demand for Quarter 3

Demand within Quarter		
New Referrals	Requests for Further Authorisations / Renewals	Total Demand
197	8	205

Work continues within the team to increase the rate of assessments undertaken and this has been given new impetus by the announcement that Liberty Protection Safeguards (LPS) have been indefinitely postponed.

DoLS outstanding demand for Quarter 3

Outstanding Demand at Quarter End		
Unallocated Referrals Awaiting Assessment	Allocated Referrals with Assessments in Progress	Total Referrals Awaiting Assessment
66	8	74

The total number of assessments pending allocation is reducing (66 at the end of this quarter as opposed to 90 at the same point last year) we have also reduced the period of time cases remain unallocated to less than 12 weeks, down from 24 weeks at the same time last year.

Referral rates remained steady in this quarter and match long term averages.

Argymhelliad / Recommendation

The Strategic Development and Operational Delivery Committee is asked to:

- **NOTE** and review the performance reviews undertaken by the Long Term Care service within this report.
- **RECEIVE ASSURANCE** that processes are being followed in line with the Welsh Government Frameworks.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.6: Seek assurances on the development and implementation of a comprehensive approach to performance delivery and quality management, to incorporate all performance requirements set by the Board, WG, regulators and inspectors, that enables all staff with managerial responsibility to strive for excellence whilst effectively delivering the basics.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable

Amcanion Cynllunio Planning Objectives	7a Population Health 7b Integrated Localities 6c Continuous engagement
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	National Framework for Continuing Health Care (CHC)
Rhestr Termiau: Glossary of Terms:	<p>Continuing NHS Healthcare (CHC) A complete package of ongoing care arranged and funded solely by the NHS, where it has been assessed that the individual's primary need is a health need. Continuing NHS healthcare can be provided in any setting. In a person's own home, it means that the NHS funds all the care that is required to meet their assessed health social care needs to the extent that this is considered appropriate as part of the health service. This does not include the cost of accommodation, food or general household support. In care homes, it means that the NHS also makes a contract with the care home and pays the full fees for the person's accommodation as well as their care.</p> <p>Decision Support Tool The Decision Support Tool (DST) is designed to support the decision-making process. The tool must only be used following a comprehensive assessment of an individual's care needs. It is not an assessment in itself and it does not replace professional judgement in determining eligibility. It is simply a means of recording the rationale and facilitating logical and consistent decision-making. The DST is designed to ensure that the full range of factors that have a bearing on an individual's eligibility are taken into account in reaching the decision, irrespective of client group or diagnosis. It provides practitioners with a method of bringing together and recording the various needs in 12 'care domains' (see below), or generic areas of need. Each domain is broken down into a number of levels of severity.</p> <p>Deprivation of Liberty Safeguards (DoLS)</p>

	<p>The Mental Capacity Act 2005 contains provisions that apply to a person who lacks capacity and where care arrangements amount to a deprivation of their liberty</p> <p>NHS Funded Nursing Care (FNC) The provision of NHS Funded Nursing Care derives from Section 49 of the Health and Social Care Act, 2001 (now replaced, in relation to Wales, by Section 47(4) and (5) of the Social Services and Well-being (Wales) Act 2014), which excludes nursing care by a registered nurse from the services which can be provided by local authorities. NHS Funded Nursing Care applies to all those persons currently assessed as requiring care by a registered nurse in care homes. The decision on eligibility for NHS Funded Nursing Care should only be taken when it is considered that the person does not fall within the eligibility criteria for CHC.</p> <p>Primary Health Need An individual is deemed to be eligible for CHC when their primary need is a health need: 'the primary health need approach'. This is determined by consideration of the four key characteristics of need: nature, intensity, complexity and unpredictability.</p>
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Risk of financial implications should reviews not be undertaken in the timeframe allowed
Ansawdd / Gofal Claf: Quality / Patient Care:	No impact
Gweithlu: Workforce:	No workforce issues identified
Risg: Risk:	Risk of challenge from the Ombudsman for non compliance with framework.

Cyfreithiol: Legal:	The Health Board could be put at risk of legal challenge from patients, their family members, and Social Care colleagues (among others) if the processes are not followed
Enw Da: Reputational:	The Health Board could be put at risk of reputational damage if the Health Board does not follow processes
Gyfrinachedd: Privacy:	No privacy issues identified
Cydraddoldeb: Equality:	No equality issues identified