

North West Elected Member Commission

Examining the impact of Covid-19 on people with care and support needs, their families, carers and communities.

Introduction

- The Commission was set up to contribute to a wider piece of work looking at lessons learned from the Covid-19 pandemic.
- The aim was to investigate the following:
 - ***“What has been the impact of the pandemic on people who use adult social care services, their families and our communities and what does this tell us about the role our communities should play in supporting people to live independently at home?”***
- The Commission was established by North West ADASS and used the existing network of NW Adult Social Care Portfolio Holders for its membership.
- Key lines of enquiry were agreed

The Approach

- An approach similar to a parliamentary select committee was taken.
- The Commission wanted to gather evidence from as many different people as possible.
- Evidence would be written but also heard at 'listening sessions' with the Commission Members.
- In early September, The Commission published a 'Call for Evidence'. This was also produced in an easy read format.
- People asked to submit their story of the pandemic.
- 41 submissions were received which covered stories relating to 102 people

CALL FOR EVIDENCE

call for evidence

Investigating the impact of Covid-19 on adults with social care needs and the role of our communities in providing support

Listening Sessions

- The Commission held four virtual listening sessions in October 2020
- In the listening sessions, The Commission heard from 16 people who were a mix of people who have care and support needs, family members and carers, and organisations who support people.
- People were given 30 minute slots which allowed for them to tell their story and members to ask questions.

Session	Theme
Session 1 – 2 nd October 2020	Community and voluntary sector organisations -
Session 2 – 6 th October 2020	Commissioned Adult social care providers -
Session 3 – 13 th October 2020	Adults aged 65 and over
Session 4 – 16 th October 2020	Adults aged 18-64

What people told us

- The stories told us that, for the majority, life had been extremely challenging over the period of the pandemic and was having a significant impact on people's mental wellbeing.
- Many people told of the stresses caused by the lockdown. Services were stopped. Contact with statutory services was difficult. Phones not being answered. People felt abandoned.
- People's mental wellbeing significantly impacted.
- Some people had to start providing significantly more amounts of care to family members which placed (and continues to place) huge stresses on families.
- Accessing services digitally were a benefit to some but also excluded others who found it extremely hard or impossible to access services or support offered in this way.
- Some people spoke of the immense value of community services which provided things like food, weekly check-in calls and information.
- Not being able to visit relatives in care homes or supported living accommodation had caused huge amounts of distress to people.
- Some people who have direct payments were frustrated at not being able to use them differently and more flexibly eg to buy an IPAD.

What organisations told us

- The stories told of rapid adaptation to the needs of people by services and innovation driven by necessity and a sense of moral obligation.
- Community organisations, especially, responded and adapted quickly making very practical decisions to support people eg establishing a website, street level WhatsApp groups, food parcels, recruiting volunteers etc.
- Organisations described a sense of freedom to do things for people who may not ordinarily access the service and of being allowed to be 'brave'. Taking managed risks was encouraged.
- Some services described the switch to digital services and the challenges they faced eg taking payments, inclusion. But they also described a future where digital services should play a more prominent role in offering greater personalisation and choice.
- Organisations providing statutory social care told of their frustration at national policy and guidance which changed often.
- There were frustrations at local communications which tended to focus on the virus rather than services and support available to people.
- A care home provider told of the dedication of staff, the difficulties and distress caused by balancing protection with quality of life and the value of links they had developed with other care homes and community organisations such as the library and local theatre.

Conclusions

- The needs of family or other unpaid carers are increasing. They are an essential part of the 'system' and the pandemic has increased the pressures on them. The pandemic has created a new generation of carers who perhaps hadn't envisaged playing this role but require support, information and guidance to avoid future problems.
- Mental health, anxiety and depression was the overriding issue for people, their families and organisations resulting from the pandemic. The pandemic has taken its toll on physical health but we ignore the impact on mental health now and in the future at our peril. We must look at ways of supporting people, carers, the care and support workforce in the long-term.
- The pandemic has meant for some that personalisation has been reduced and human rights are impacted (eg loss of care home visiting); for others it has provided greater opportunity to accessing services in ways that suit them (eg use of digital). People want more flexibility to use their direct payments as they wish. Personalisation should be strengthened as a result of this. The effects of it were evident in the stories we heard.
- Providers benefitted from the flexibility to be creative and deliver services in ways which suited them and their communities. In the pandemic this was driven by necessity and a 'permission' to do what it takes but led to possibly more personalised services and better outcomes for people.
- 'Blended' approaches to care and support emerged as a key development ie the mix of digital and other forms of service delivery such as face to face.

Recommendations for Councils



1. Councils should say thank you to all adult care and support services
2. Take active steps to build the capacity of the community and voluntary sector to provide health, care and wellbeing services.
3. Strengthen the wellbeing support, guidance and information available to family and unpaid carers.
4. Increase the use of direct payments and make them quick and easy to obtain and more flexible.
5. Use role as place-based leaders to communicate across organisations helping vulnerable and isolated people.
6. Support creativity in your providers.
7. Work to make digital services part of blended approaches to meeting need.
8. Collaborate with care home providers and provide leadership to design approaches for safe visiting in care homes.
9. Work with providers and people who use services to redesign day services and shape the market to allow for greater choice, flexibility and accessibility for people.

Recommendations with regional and national significance

1. Identify and share best practice in particular in relation to infection control, facilitating visits, use of direct payments, working with volunteers, day service provision and outcome-based commissioning.
2. Bring the needs of family and unpaid carers to the forefront and recognise this group of people in strategies and approaches relating to the adult social care workforce, living well at home, and preventing deterioration and hospital admissions.
3. Facilitate the development of new models of care based on the experience of the pandemic. For example, day services.

Closing Remark

We firmly believe that adult social care services, which includes councils, independent providers, unpaid carers and the community and voluntary sector, played a vital role in protecting lives and will continue to support people affected long after the virus is gone.

We believe adult social care must now be recognised and placed on an equal footing with the NHS with a fair funding settlement and long-term plan. We owe this to the thousands of people who have care and support needs and those working tirelessly to support them in an environment which often seems unfairly weighted against them.

It is social care's time. If not now, then when?

Publication

- The report and all other materials can be accessed on the NW ADASS website www.nwadass.org.uk
- The report has been sent to the 23 North West Portfolio Holders for Adult Social Care, DASSs and those people who contributed to the report.
- The report has also been shared with the following
 - North West MPs
 - National ADASS
 - The Local Government Association (LGA)

Thank you



The Elected Members who formed The Commission and North West ADASS wish to thank all of those people who bravely shared their story.

The work is dedicated to them and the thousands of people and organisations like them.