

**24 January 2022****Agenda Item: 7****REPORT OF THE SERVICE DIRECTOR FOR AGEING WELL COMMUNITY  
SERVICES****ADDITIONAL CAPACITY TO SUPPORT MORE PEOPLE HOME FROM  
HOSPITAL****Purpose of the Report**

1. This report seeks approval to:
  - a) establish the following re-ablement posts from temporary to permanent posts from 1<sup>st</sup> April 2022 to sustain the additional capacity created to support hospital discharge throughout winter:
    - 16.5 FTE Reablement Support Workers (Grade 2)
    - 5 FTE Senior Reablement Support Workers (Grade 3)
    - 1 FTE Reablement Manager (Band A)
    - 1.5 FTE Occupational Therapists (Band B)
    - 3.5 FTE Community Care Officers (Grade 5)
    - 1 FTE Reablement Coordinator (Grade 4).
  - b) establish the following re-ablement posts permanently from 1<sup>st</sup> April 2022 to support increased hospital discharge:
    - 3.5 FTE Reablement Support Workers (Grade 2)
    - 2 FTE Senior Reablement Support Workers (Grade 3)
    - 0.5 FTE Reablement Manager (Band A)
    - 1 FTE Occupational Therapist (Band B)
    - 2.5 FTE Community Care Officers (Grade 5)
    - 1 FTE Reablement Coordinator (Grade 4).
  - c) establish the following social work posts permanently from 1<sup>st</sup> April 2022 to work with the additional numbers of people requiring support to be able to be discharged home from hospital:
    - 10 FTE Social Workers (Band B)
    - 4 FTE Community Care Officers (Grade 5)

- d) approves the extension of the following temporary post from 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023:

1 FTE Service Improvement Project Manager post (Band C) to continue to support the delivery and embedding of an effective discharge process countywide.

## Information

2. On 13<sup>th</sup> December 2021 Adult Social Care and Public Health Committee approved several temporary posts up to 31<sup>st</sup> March 2022, in order to support increased numbers of people requiring support to return home after a stay in hospital. This formed part of the joint health and social care Winter Plan.
3. The report also shared the work of the Joint Commissioning and Planning Group which is taking an integrated approach to meet the additional 23.7% increased demand to support hospital discharge in 2022/23. This covers the extra care capacity required to support the new Discharge to Assess Policy to support more people directly home, as well as to support the Hospitals Elective Surgery Recovery plans.
4. A business case on how to deliver this additional capacity has been developed by all system partners. The Finance Leads Group of the Nottingham and Nottinghamshire Integrated Care System (ICS) have reviewed and evaluated the business case options that this sets out for how to fund the gap in home-based social care and health care services on a sustainable basis. Recommendations that include the posts in this report are being made to the Clinical Commissioning Group to fund permanently from April 2022 and decisions are due by the end of January.
5. The temporary posts are currently filled by a combination of staff on temporary Council contracts and agency staff. This report is being presented to Committee prior to a decision being made by the Clinical Commissioning Group about the funding, so that it is possible to let the temporary staff know their position as quickly as possible, with the aim of retaining them after the end of March.
6. The additional re-ablement and social work capacity is only part of the range of services and work required to deliver, monitor and evaluate the capacity plan. Additional capacity will also be purchased from the independent sector. Currently a temporarily funded Service Improvement Project Manager has been supporting this work, however funding for this post also ends on 31<sup>st</sup> March 2022. Subject to the external funding being secured, approval is also therefore requested to extend this post for a further 12 months up to 31<sup>st</sup> March 2023.
7. Committee is asked to note that if no further long-term funding is secured post March 2022, the Council will need to reduce its reablement and project management provision in line with substantive funding arrangements. The risks of this are
  - that people will remain delayed in hospital longer after they are well enough to return home
  - in turn, in times of pressure, this may contribute to hospitals not having enough free capacity to admit new people requiring their care

- that more people who could return directly home from hospital will instead move from hospital into short term residential care.
- delays leaving hospital and moves into short term residential care, instead of directly home, means that many people will lose more of their independent living skills and confidence to live at home. In turn this means that more people will require higher levels of support for longer.

## Other Options Considered

8. Different options were modelled as part of developing the business plan to deliver the gap in community care services.

## Reason/s for Recommendation/s

9. To provide extra re-ablement and social work capacity to meet projected additional demand of people who will be able to benefit from it in 2022/2023.

## Statutory and Policy Implications

10. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## Financial Implications

11. The annual cost of the posts in this report are as follows:

	£
Re-ablement posts (39 FTE, permanent)	1,300,735
Social Work posts (14 FTE, permanent)	634,551
Service Improvement Project Manager (1 FTE, temporary)	55,948
<b>Total</b>	<b>1,991,233</b>

The posts are proposed to be funded by the Clinical Commissioning Group as part of a wider business case to support hospital discharge from 1<sup>st</sup> April 2022. If the funding is not secured, the Council will need to reduce the staffing provision to substantive levels.

## Human Resources Implications

12. All posts will be recruited to in line with the Council's HR policy.

## Implications for Service Users

13. The ability for everyone to access re-ablement when they need it has a positive impact on supporting people to live at home independently and confidently.

## RECOMMENDATION/S

That Committee, subject to external funding being secured:

- 1) establishes the following re-ablement posts from temporary to permanent posts from 1<sup>st</sup> April 2022 to sustain the additional capacity created to support hospital discharge throughout winter:
  - 16.5 FTE Reablement Support Workers (Grade 2)
  - 5 FTE Senior Reablement Support Workers (Grade 3)
  - 1 FTE Reablement Manager (Band A)
  - 1.5 FTE Occupational Therapists (Band B)
  - 3.5 FTE Community Care Officers (Grade 5)
  - 1 FTE Reablement Coordinator (Grade 4).
- 2) establishes the following re-ablement posts permanently from 1<sup>st</sup> 2022 to support increased hospital discharge:
  - 3.5 FTE Reablement Support Workers (Grade 2)
  - 2 FTE Senior Reablement Support Workers (Grade 3)
  - 0.5 FTE Reablement Manager (Band A)
  - 1 FTE Occupational Therapist (Band B)
  - 2.5 FTE Community Care Officers (Grade 5)
  - 1 FTE Reablement Coordinator (Grade 4).
- 3) establishes the following social work posts permanently from 1<sup>st</sup> April 2022 to work with the additional numbers of people requiring support to be able to be discharged home from hospital:
  - 10 FTE Social Workers (Band B)
  - 4 FTE Community Care Officers (Grade 5).
- 4) approves the extension of the following temporary post from 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023:
  - 1 FTE Service Improvement Project Manager post (Band C) to continue to support the delivery and embedding of an effective discharge process countywide.

**Sue Batty**  
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### **Constitutional Comments (LPW 13/01/22)**

14. The recommendations fall within the remit of the Adult Social Care and Public Health Committee if the external funding is agreed and included in the annual budget for 2022-2023 to be approved by Full Council in February. If the external funding is not agreed and included in the annual budget for 2022-2023 a separate report will be required to be taken to Policy Committee once funding is agreed to approve it as external funding for additional revenue expenditure in line with the Financial Regulations.

### **Financial Comments (ZS 12/01/22)**

15. The additional Re-ablement, Social Work and Service Improvement Project Manager posts are expected to cost £1,991,233 per annum, funded by the Clinical Commissioning Group. If no long-term funding is secured, the Council will need to reduce their re-ablement, project manager and social work provision in line with substantive funding arrangements.

### **HR Comments (SJJ 11/01/2022)**

16. All permanent posts will be recruited to using the Authority's recruitment policy, the incumbent in the Service Improvement Project Manager post will be offered an extension to their temporary contract subject to funding. The report has been shared with trade union colleagues for information.

### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Winter planning and the National Hospital Discharge Policy – report to Adult Social Care & Public Health Committee on 13th December 2021](#)

### **Electoral Division(s) and Member(s) Affected**

All.

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