

ADASS Home Care and Workforce Rapid Survey

November 2021

Summary

This survey demonstrates a rapidly deteriorating situation in relation to social care for older and disabled people and for carers. In summary, for most areas of care, the trends documented in ADASS's <u>Spring Survey</u> in July and the <u>Rapid Survey</u> reported in September have continued and escalated.

More care at home is being delivered, with 15% more care at home delivered between August and October compared with April to July 2021.

However, it is not keeping pace with increasing levels and complexity of needs. The results highlight that it is not proving possible to scale up provision further. There has been an even bigger increase (164%) in the total number of home care hours that DASSs reported were unable to be delivered. This shows that increases in need are far outstripping even this increased provision.

More people are waiting for assessments, care and support or reviews. Based on figures from respondents, we estimate that 204,241 people are on a waiting list for an assessment in England. There has been a 271% increase in people waiting for more than 6 months for an assessment compared to the previous survey. There has also been a 20% increase in people who have had an assessment and are waiting for care and support or a direct payment and there are 166,136 overdue reviews of care plans.

As a result of the unavailability of care and support due to recruitment and retention issues, around 1 in 10 people are only able to be offered care options that wouldn't have been what would have chosen or need. This might mean that the only care available is in residential care when someone wants and needs to be at home, or unpaid carers having to decide between caring for someone or giving up work.

Additionally, based on the results of this survey we estimate that in the last quarter 3,694 people could not move into their chosen residential or nursing home because of staffing constraints.

Concerns about staffing levels, business closures and handbacks, which were already high and rising, are now even more profound. About twice as many Directors of Adult Social Services are reporting the closure of home care businesses as 6 months ago.

The proportion of DASSs reporting nursing or residential home closures or providers ceasing trading over the past six months was 48%, compared to 35% for the six months prior to that.

Care, support, and safeguards transform lives. But the circumstances this winter, as demonstrated by these findings, show the extent of risks to the wellbeing and life of older and disabled people and carers and to the care staff who support them. It is unarguable that these issues must be addressed, not next year but now.

Introduction

The Association of Directors of Adult Social Services (ADASS) initiated a further Rapid Survey of its members in relation to care markets and workforce on the 2nd November 2021 with a closing date of the 18th November 2021. This was an extremely challenging timeframe, not least because almost all colleagues are dealing with winter pressures, local crises and multiple requests for data and intelligence. We are extremely grateful to everyone who responded, particularly given the tight timescales and other pressing commitments. This is equally a rapid analysis and report back. If there are imperfections then they are due to a judgement that the circumstances are urgent.

There were 85 responses in total (well over half of the 152 DASSs in England), which is notable given its close proximity to our previous <u>Rapid Survey</u> in September (which had a response rate of 71) and the <u>ADASS Activity Survey 2021</u> and <u>Spring Survey 2021</u>, which were published in June and July respectively. This response rate is likely to reflect the seriousness of the current situation. It should be noted that not every respondent answered every question, so we make clear the numbers of respondents for individual questions throughout this analysis.

Where appropriate, we use the average number reported by DASSs to give an extrapolated national figure. We believe this is a helpful indicative figure and are not aware of any bias in terms of those that responded and those that did not. There are issues related to extrapolating from such a sample size. However, we are clear that this is a snap survey, that this is essentially the only such data available and therefore offers an important indicative snapshot of the ongoing situation and a range of interconnected issues.

1. Directors were asked how many hours of home care had been delivered from 1st August to 31st October 2021, and how many could not be delivered.

There has been a further very significant increase in the number of home care hours reported as having been delivered. 79 DASSs responded. The average for the period was 272,341. This is a 15% increase on May-July. If this were to be replicated across the country this would total 41,395,909 hours delivered nationally compared to 36,028,857 hours for the previous period.

Figure 1

Number of homecare hours delivered (1 February- 30 April 2021)	% increase between period ending 30th April and period ending	Number of homecare hours delivered (1 May-31 July 2021)	% increase between period ending 31st July and period ending 31st October	Number of homecare hours delivered (1 August- 31st October 2021)
Averaged & extrapolated	31st July	Averaged & extrapolated		Averaged & extrapolated
34,635,217	4%	36,028,857	15%	41,395,909

Our earlier surveys indicate that there has been increasing needs arising from hospital discharge practice, with more people having very complex needs, and from the community for a range of reasons. This is likely to include pent up needs during different phases of the pandemic, increasing preferences for care at home and needs arising from more people waiting longer for hospital treatment.

However, there has been an even bigger increase in the total number of home care hours that DASSs reported were unable to be delivered, showing that need is far outstripping even this increased provision.

61 DASSs responded. The average was 10,111. If this were to be replicated across England, this would mean that 1,536,993 hours of care could not be delivered during this period due to the absence of capacity. This is a sharp increase on previous levels. The Spring Survey reported an indicative national total of 286,148 hours from February to April and September's Rapid Survey showed 581,282 from May to July.

Figure 2

Number of homecare hours unable to meet due to absence of capacity (1 February-30 April 2021) Averaged and extrapolated	% increase between period ending 30 th April and period ending 31 st July	Number of homecare hours unable to meet due to absence of capacity (1 May-31 July 2021) Averaged and extrapolated	% increase between period ending 31st July and period ending 31st October	Number of homecare hours unable to meet due to absence of capacity (1 August- 31st October 2021) Averaged and extrapolated
286,148	103%	581,282	164%	1,536,993

2. People waiting for assessments, care, direct payments, and reviews

We asked Directors how many people in their local authority area were currently on a waiting list for an assessment of any kind (including Deprivation of Liberty Safeguards (DoLS), OTs as well as Care Act assessments). This question is slightly amended from September's Rapid Survey in that we heard from DASSs that some respondents had included all of those waiting, whereas some hadn't included people waiting for DoLS and OT assessments.

There were 83 responses. The average number awaiting assessments was 1,344. Across England, this would represent 204,241 people on a waiting list for an assessment. Whilst there is no direct comparison, for the reasons mentioned above, this is a very significant increase on the position reported in September's Rapid Survey (70,559), and in the Spring Survey (50,000) where different assumptions of waiting were made. There could be some duplication. However, it gives a fuller picture of the numbers of people waiting for assessments.

2.1 People waiting for more than 6 months for an assessment

81 DASSs responded. The average number waiting over six months was 271. Across England, this would represent 41,192 people waiting over six months for an assessment.

This is a very significant increase (271%) on September's <u>Rapid Survey</u>, which found a council average of 77, and an indicative national total of 11,090. This figure had itself been an increase (58%) from 7,000 in the <u>Spring Survey</u>. Looked at alongside evidence from questions one and two, this shows how, despite rising levels of activity by DASSs, increased need and provision mean that more people are having to wait for longer. This is not just an inconvenience. It means that people's needs are not being met. It is likely to mean that their wellbeing and mental and physical health deteriorates or worse.

3. People who have had an assessment and are now waiting for care and support or for a direct payment to be made?

76 DASSs responded. The average number waiting was 167.

Across England, this would represent 25,468 people waiting for care and support or a direct payment. This is an increase of 20% on September's <u>Rapid Survey</u>, which found a council average of 140, and an indicative national total of 21,280. The <u>Spring Survey</u> put this figure at 19,000.

4. Overdue reviews of care plans (over 12 months, as stipulated in the Care Act)

84 DASSs responded. The average number of overdue reviews or care plans was 1,093.

Across England, this would represent 166,136 overdue reviews of care plans. This is an increase of 4% on the position reported in the <u>Spring Survey</u> (159,271), but a fall from the number reported through the September's <u>Rapid Survey</u> (184,062).

5. People who were waiting for care and support were waiting for a range of support or care, as follows:

Figure 3

Type of care and support that the individual is waiting for	Average percentage
Care at home	54.4%
Rehabilitation / reablement at home or in a care home	10.4%
Residential Care	10.05%
A Direct payment	9.0%

Rehabilitation / reablement at home or in a care home,	7.1%
with time for assessment and planning longer-term post	
hospital discharge	
Nursing Care	6.4%

Note – this is based on 71 responses. Some respondents gave percentage responses that did not total 100%.

6. Inability to offer the right kind of care and support

As a result of the unavailability of care and support due to recruitment and retention issues, the following proportions of people are being offered care options that wouldn't have been what they (or their representative or advocate if they lack capacity) would have chosen (e.g., residential care when they want/ need to be at home, unpaid carers having to take this on or give up work etc).

61 DASSs responded. Responses ranged from 0% - 55%. The average proportion was 10.6%.

In September's <u>Rapid Survey</u>, the average was 13%. So, although DASSs appear to have made some progress despite the pressures on services, around 1 in 10 people are still not able to access the type of care they would have chosen. As noted in September's report, this figure potentially conceals a whole series of important issues, including people ending up in residential care when they do want or need to be there, the inability in some areas to provide sufficient care at home, and the resulting increased burdens upon many unpaid carers or carers having to give up work.

We have not previously asked how many requests for a move to residential or nursing home were requested and turned down by providers due to staffing constraints. We explored the issue on this occasion, but very few councils have this data collated.

42 DASSs reported estimated figures that resulted in an average of 24.3.

If this is replicated across England, 3,694 people could not move into chosen residential or nursing care because of staffing constraints in the last quarter.

7. Provider Closures and Handbacks over the last six months

This question was last reported on in the ADASS Activity Survey, since when there has been an acceleration of closures and contract handbacks. Over the past six months 48% of local authorities have experienced the closure or cessation of trading of residential and nursing homes. This compares to 35% reported in the six months prior to our Activity Survey. For the six months prior to the onset of Covid-19 this figure was 25%.

7 | **Page**

7.1 More Home Care providers have closed during this period

80 DASSs responded to this question. The proportion of local authorities reporting closures, or providers ceasing to trade, for home care is 41% for the past six months.

This compares to 21% for the previous 6 months (reported in our Activity Survey which was published in June 2021). This figure was 15% for the six months prior to the onset of Covid-19. In the current survey, 46 reported zero closures; the highest number of closures given by any one council was 5.

7.2 More Residential / Nursing providers have closed in this period

80 DASSs responded to this question. 41 reported zero closures. 39 reported one or more closure, with the highest number given by any one council was 8.

The proportion of DASSs reporting nursing or residential home closures or providers ceasing trading over the last 6 months was 48%. It was 35% in the previous 6 months (reported in the Activity Survey in June 2021).

7.3 Numbers of people affected by Home Care providers closing down or ceasing trading

Respondents reported a total of 1,535 people who were affected by the closure or cessation of trading of home care providers in the past six months. This is an average of 50 people per council, compared to an average of 21 people in the previous six months (based on the ADASS activity survey). 74 DASSs responded to this question.

7.4 People who have been affected by Residential / Nursing home closures

69 respondents reported that a total of 1,436 people were affected by the closure or cessation of training of residential / nursing care providers (directly reported figure). The highest number reported by a local authority was 200. This is an average of 37.8 people impacted per local authority where it was reported one or more providers closing or ceasing trading in the past six months. This compares to an average of 33 people per local authority in the previous 6 months (reported in our Activity Survey).

8 | *Page*

8. Priority actions over the next 3-6 months to address the workforce issue

Directors were asked to rate key possible actions by the Government:

Figure 4

Suggestion	Ranking September Rapid Survey	Ranking November Survey
Increasing recurrent funding sufficiently to enable parity with NHS roles	1	1
Adding all care workers to the Shortage Occupation List and reducing the salary threshold for immigration	4	2
Increasing the amount of workforce grant funding to end March 2022	3	3
Better recognition from PM and senior politicians to value care as much as medicine and nursing for example	2	4
Waiving the Immigration Skills Charge for care workers, reducing the cost of obtaining the legal Right to Work for care workers	7	5
Supporting investment in regional recruitment campaigns	5	6
Reviewing restrictions on movement between care settings of double-vaccinated and tested care workers	6	7

88 DASSs responded.



ADASS

ADASS is the Association of **Directors of Adult Social Services** in England. We are a charity, a leading, independent voice of adult social care.

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