

To submit any material for the bulletin, the deadline is 5pm the day before the next edition is due. Please ensure any information you consult is from a reliable source, including the NHS, or Public Health England.

**Thursday 19th October 2023**

# PROVIDER BULLETIN

## KEY DATES FOR YOUR DIARY

Upcoming events can also be viewed in the **EVENTS CALENDAR** in the Provider Zone!

- Black history month until 31<sup>st</sup> October
- Registered manager webinar integrated care – 25<sup>th</sup> October
- Dying matters workshop – 26<sup>th</sup> October
- Saying Goodbye Service – 29<sup>th</sup> October
- 'State of...' report – 18<sup>th</sup> November

### **Registered manager webinar: Medicines from the regulatory perspective: part 3 (in partnership with the CQC)**

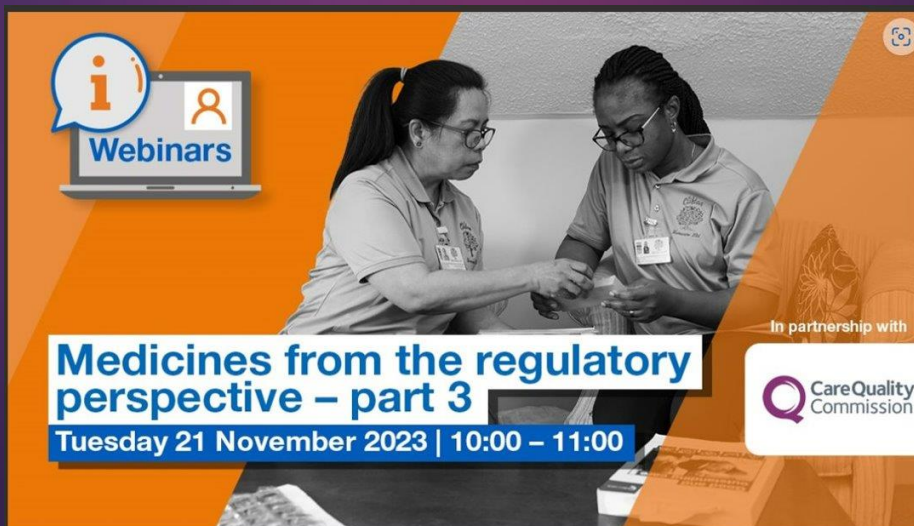
**Tuesday 21 November 2023 | 10:00 – 11:00 | Zoom**

This webinar is delivered in partnership with the CQC.

It will explore the regulations, best practice, advice and practical tools around medicines optimisation in all care settings. People accessing care and support often require help with their medication and medicines remains one of the more common areas of unsafe practice amongst services rated inadequate or requires improvement.

You will also have an opportunity to help shape the content of the webinar during registration, by identifying your priority topics from a list of common areas of concern for providers in relation to medicine administration and management.

**Register now to secure your place <https://bit.ly/3ZQSRFM>**



**Webinars**

**Medicines from the regulatory perspective – part 3**

**Tuesday 21 November 2023 | 10:00 – 11:00**

In partnership with

**Care Quality Commission**

# Capacity Tracker Update – Beware of a Possible Fine

There is national attention moving to focus on the need for Home Support providers to update Capacity Tracker.

Providers must update the Capacity Tracker in line with the DHSC Data Collection Reporting Window.

Guidance on why this information is required which you can access by clicking [HERE](#).

Enforcement action can be taken against any private providers of ASC required to be registered with CQC, who without reasonable excuse fail to submit the information. To avoid this, it is critical that data is submitted by the deadline.

## Winter Planning Guidance

[Working together to deliver a resilient winter: System roles and responsibilities](#)

**Updating Capacity Tracker?** We recommend that there is more than 1 user registered at each location who can update Capacity Tracker to cover periods of absence (*if you are an approver, you will be able to approve new users immediately*)

**Bearing in mind the DHSC Mandate and process that ends with a possible fine.**

**Please see the attached report of c. 480 home care providers in the region who haven't yet filled their capacity tracker in.**

**There is national attention moving to focus on Home Care updating Capacity Tracker.**

**The reporting window for October opened on Sunday 8th and closes on 16th (it's usually the 14th but due to it falling over a weekend providers have 2 extra days)**

**Going Abroad?** Users are reminded that Capacity Tracker is not accessible outside of the UK

**Need Help?** Provider Training Sessions are available - see [here](#) - and remember to share these with colleagues who are also welcome to join our sessions!

**Need Additional Support?** Please contact our Support Centre, Mon - Fri (excluding Public Holidays) 8am - 5pm by phoning 0191 691 3729 or emailing [necsu.capacitytracker@nhs.net](mailto:necsu.capacitytracker@nhs.net)

**Are you a homecare worker who supports people with advanced illness approaching the last months of life?**



**Do you work in the Hull, Bradford and Bromley areas?**

**We'd really like to spend about an hour with you to talk about your work**

**Please contact:**

**[HCW-SUPPORTED@hull.ac.uk](mailto:HCW-SUPPORTED@hull.ac.uk) to find out more**

  
UNIVERSITY  
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*This study is funded by the NIHR Health and Social Care Delivery Research NIHR135128/HSDR.*

## State of the adult social care sector and workforce in England report 2023

I'm pleased to be able to share with you the latest version of our 'State of the adult social care sector and workforce in England' report. The report includes detailed and comprehensive intelligence on changes to the adult social care sector in the last year.

This year we have also announced plans to develop a new and comprehensive workforce strategy for adult social care.

You can find the full report and data visualisations on our [website](#). You can also access updated regional and local data.

Key findings include;

- §The workforce grew by 1% between April 2022 and March 2023 after shrinking for the first time on record the previous year.
  - §The vacancy rate fell to 9.9% - around 152,000 vacancies on any given day – from 10.7% the previous year.
  - §Monthly tracking since March suggests that the vacancy rate has continued to fall, and in August was 8.5% among independent sector care providers. In independent sector care homes, the vacancy rate fell to 5.1% in August, which was below pre-pandemic levels (5.5% in 2019/20).
  - §The turnover rate across the sector was 28.3% in 2022/23 – down slightly from 28.9% the previous year. This means around 390,000 people left their jobs. Around a third of them left the sector altogether.
  - §Adult social care added £55.7 billion per annum to the economy in England (up 8.5% from 2021/22) – which is more than the accommodation and food service industries.
  - §For the first time on record, the proportion of men working in the sector increased from 18% to 19%.
  - §Only 8% of the workforce was aged under 25 - compared with 12% of the economically active population.
  - §The number of registered nurse filled posts increased by 2% in 2022/23 to 33,000.
  - §Between March 2022 and March 2023, an estimated 70,000 people arrived in the UK and started direct care providing roles in the independent sector.
  - §Projections show that we will need 25% more posts (440,000) by 2035 if the number of adult social care posts grows proportionally to the projected number of people aged 65 and over in the population.
- In 2022/23 the adult social care sector was comprised of around 18,000 organisations across 39,000 care-providing locations. The number of people working in adult social care was estimated at 1.52 million in 2022/23; more than in the NHS (headcount of 1.43 million).
- We're grateful to all the social care providers who contribute their data by using the Adult Social Care Workforce Data Set. Without those contributions, estimates of the detail and accuracy we include in the report wouldn't be possible.

If you'd like to know more from the data, find out about our tailored reporting by visiting the [Commission our services](#) section of our website.

## Leading Change Improving Care (LCIC) Programme

The fully funded Leading Change Improving Care (LCIC) programme is aimed at experienced Registered Managers, Clinical Leads and Registered Nurses and can support your care service to make and evidence improvements to CQC.

The programme runs over 5 days (1 day per month, 9.30am to 3.30pm), with attendance required on each day, and it starts on **7<sup>th</sup> November**.

The programme takes a practical look at how to influence and implement necessary changes to meet current and future challenges. It explores how to lead and manage change and provides tools and techniques to drive change and ultimately improve the quality of care delivered. There is a strong emphasis on mentoring and coaching and how to identify and nurture skills in other people to develop high performing teams and grow future talent.

The dates are: 07/11/23, 05/12/23, 16/01/24, 07/02/24 and 07/03/24 and it is being delivered by Leeds Leadership Academy at venues across Bradford District.

The programme is funded by the Skills for Care Workforce Development Fund (WDF) and BCA.

To reserve a place, email [admin@bradfordcareassociation.org](mailto:admin@bradfordcareassociation.org) or click on the link below to book onto the 30 minute induction session on 27/10/23 and secure your place on the LCIC Programme - <https://www.eventbrite.co.uk/e/leading-change-improving-care-lcic-course-induction-meeting-tickets-711251661867?aff=oddtcreator>

For more information, please click [HERE](#).



## CARE REVIEW 24/25

The BCA have asked ARCC who previously conducted the Bradford Fair Cost of Care to support us with the care review 24/25 for the Bradford Care Sector. The detailed report will outline care fee recommendations and considerations for 24/25 based on provider feedback, insights, and market data. To ensure the review and report feeds into the councils 24/25 budget timetable it will be completed in a short time frame over the next 4-6 weeks. Outline below is a high-level overview of the review, and we request providers participate in the workshops, surveys and call for evidence in the coming weeks.

For an overview of the care review, and details on upcoming workshops, please click [HERE](#).

## DEMENTIA COURSES

**Short course programme:** <https://bradford-catalogue.eu-west.catalog.canvaslms.com/>

All of our dementia short courses that are delivered online are £150 per participant (this covers 2 x 3.5 hour sessions). **We do have an offer on our short courses where an organisation can purchase 5 places (across any of the course topics) and receive one free place.** The short courses are specific topics within person centred dementia care – the sessions are interactive, and delivered by experts in the field. We also involve people with lived experience of dementia in the development of our courses.

**Dementia Care Mapping:** [Dementia Care Mapping \(canvaslms.com\)](https://www.canvaslms.com/)

Our Dementia Care Mapping course (DCM) was developed at the University of Bradford by the late Professor Tom Kitwood, it has been revised and updated at regular intervals. DCM is an observational framework that can be used for different purposes including:

- Quality monitoring and improvement
- Individual assessment and care planning
  - Review of key times of the day
- Staff development and training needs analysis.

We deliver DCM as an open online course across the year, each course has 6 sessions (4.5 hours each) that are delivered online. The cost per participant is £975. It is delivered to people across the globe, with participants from the USA, Singapore, France etc as well as more locally!

If an organisation has a number of people they would like to register for DCM, we can look at arranging a course specifically for them – this can be delivered online or in person, the costs would depend on the format and so I would advise to get in touch to find out more about this option.

**Bespoke training:** <https://www.bradford.ac.uk/dementia/training-consultancy/dementia-training/>

We are delivering a number of courses to local NHS Trusts and they range from communication, assessment and diagnosis, decision making and Dysphasia (and many more), and we can tailor a package to suit an organisation, and equally the format of delivery can be online or face to face. The cost of bespoke training packages is very much dependent on a number of factors, but we can tailor any training package to meet financial requirements and budgets.

**Consultancy:** <https://www.bradford.ac.uk/dementia/training-consultancy/dementia-consultancy/>

The consultancy we offer is flexible depending on your requirements. We've worked with organisations to identify areas of development and produce plans to improve care practices in dementia care. This is tailored to suit, so costs would be dependant on requirements, and also to meet your financial requirements and budget.

Our Senior Dementia Care Consultant and Trainer, Lindsey Collins, would be happy to follow up any queries about the bespoke training and consultancy offers.

## FOR ALL RESIDENTIAL CARE HOMES FOR ADULTS OVER THE AGE OF 65 IN BRADFORD

There is an opportunity to contribute to a local research project, which aims to identify how care home staff, residents, family members, hospital staff, GPs, paramedics and district nurses can be better supported when making decisions to transfer residents to hospital. We presented this project at a recent Bradford Care Association meeting so you might remember it. More information about the project can be found here: [Invitation to participate in local research project - YouTube](#)

This project is led by a team in the Yorkshire Quality and Safety Research group based at Bradford Royal Infirmary. Each care home that participates will receive a flat fee of £800 for involvement. If staff take part outside of working hours, they will receive further payment. Residents and families will also be paid for their time according to National Institute for Health Research guidelines (approx. £50 per workshop).

If your service provides residential care for adults aged over 65 in Bradford, we would love to hear from you.

Involvement will include an introductory visit from research nurses on the project as soon as possible. This will be followed up in early spring 2024 by three workshops with residents of your care home and their families and three online workshops to be attended by a few members of staff from your service.

Throughout the workshops, staff and service users will discuss the concept of 'avoidable transfers to hospital' and establish a shared understanding of how we can think about this concept in a beneficial way. We will build on this shared understanding to identify service improvements and future interventions to reduce transfers to hospital considered 'avoidable' by staff and service users. This is an opportunity for staff across the system and service users to hear from each other on this issue and work together to come up with local solutions.

Please do get in touch with Jacqui ([jacqui.elliott@bthft.nhs.uk](mailto:jacqui.elliott@bthft.nhs.uk)) if you are interested in your care home being involved or have any questions about the research.

We look forward to hearing from you,  
Best wishes  
The Research Team

**More information on the next page**

<b>Study title:</b>	<b>Co-producing a shared understanding of avoidable transfers to hospital and recommendations for future intervention development with staff and service users.</b>
<b>Study summary:</b>	<p>It is necessary to explore how transfers to hospital – that have potential to be avoidable - can be reduced for care home residents. This is because of the risks associated with admission, including hospital-acquired infection and loss of independence, as well as pressures on the service and demand for beds. Recent research has identified that transfer decisions often occur not due to clinical need but due to communication with family members, the robustness of advance care planning and access to community services. This suggests areas to focus intervention efforts upon, however richer insight is needed within the UK, given the dominance of North American based evidence to date.</p> <p>What is an 'avoidable transfer of care'?</p> <p>Conceptualising this is difficult due to inconsistent definitions of avoidable transfers and emergency admissions across the literature. Definitions include conditions potentially manageable, treatable or preventable outside of a hospital setting. But, perceptions of staff – in general and at the point of making a transfer decision - are also likely influenced by professional role and care setting they work in. While care home staff feel 'between a rock and a hard place' when weighing up the many risks to the resident, themselves and the broader system, ED doctors often consider hospital an inappropriate place for residents who attend. Further, existing research has not acknowledged the patient and family perspective of avoidable admissions. Before developing interventions to reduce avoidable transfers to hospital for care home residents, it is necessary to explore what stakeholders consider an avoidable admission and how to ensure interventions to reduce them can meet the needs of staff and service users.</p> <p>Throughout a series of workshops (3 with staff; 3 with residents and families), this project aims to:</p> <ul style="list-style-type: none"> <li>• Co-produce a working definition of an 'avoidable transfer to hospital' with staff involved in transfer decisions (i.e. care home staff, paramedics, GPs, nurses, hospital staff) and service users (care home residents and their families/carers).</li> <li>• Co-design an agenda for intervention development in this area, prioritising focus areas and suggestions for local, implementable solutions with staff and service users involved in transfer decisions.</li> </ul>
<b>What is required of the care home:</b>	<ul style="list-style-type: none"> <li>• Up to 6 hours of time from approx. 3 members of staff across three workshops.</li> <li>• Up to 6 hours of time from residents and families across three workshops.</li> <li>• Workshops will be facilitated by the research team.</li> <li>• Workshops with residents and their family members will be hosted in-person at the care home. This will require space for 10-15 people to sit.</li> <li>• For virtual workshops with staff, the research team will send materials, but the practice will be required to ensure the appropriate technological facilities are in place to support the workshop e.g., screen that can host a Zoom/ MS Teams call, private room for attendees to be in. We can come and support the setup of this and explore possibilities for technology to be borrowed if this prevents people from joining.</li> </ul>
<b>Payments/ support costs:</b>	<p>£800 flat fee to participating practices.          Approx. £50 per workshop for residents and family members taking part.</p>
<b>Benefits to patients and/or practice:</b>	<p>The aim of this project is to identify how staff and service users making decisions to transfer care home residents to hospital can be supported within the system they work in. This is preliminary work to suggest ideas for future implementation however the priorities identified will be fed back to NHS England and co-ordinators of the Enhanced Health in Care Homes Framework. There is potential for future projects to test the feasibility of the interventions prioritised by staff and service users in this project.</p>
<b>Please contact:</b>	<p>Jacqui Elliott  <a href="mailto:Jacqui.Elliott@bthft.nhs.uk">Jacqui.Elliott@bthft.nhs.uk</a></p>
<b>Deadline for response:</b>	<p>10<sup>th</sup> November 2023</p>

LEARN ABOUT HOW  
**BREAST  
SCREENING  
WORKS!**

**SATURDAY 21ST OCTOBER**

**12 - 4PM**

**SAINSBURYS CAR PARK  
KEIGHLEY**



**Come see what it's like without  
having an examination.**

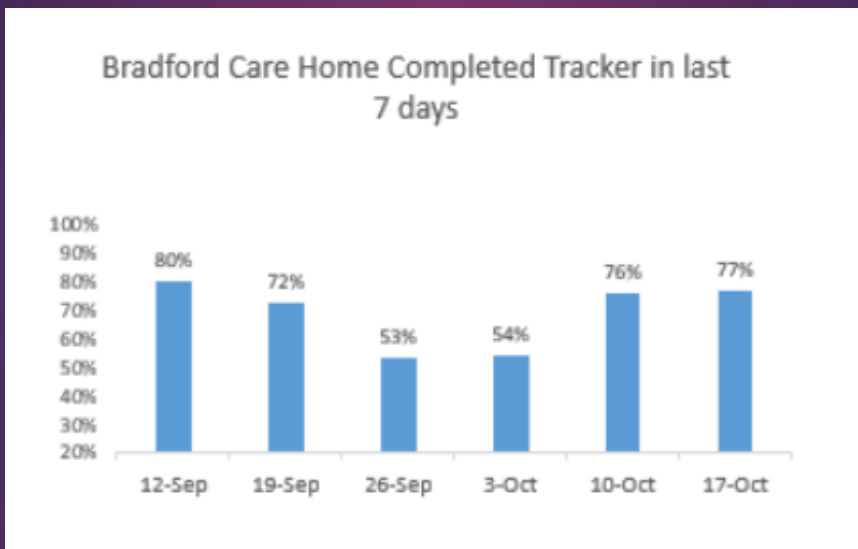
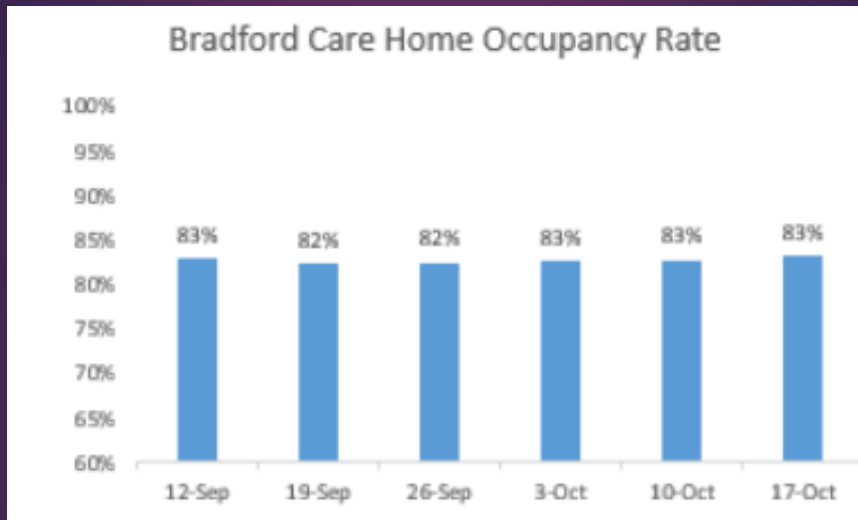
All welcome but we want to encourage those in the learning disability community to come have a chat see our friendly staff!

**NHS**



# BRADFORD CARE HOMES WEEKLY UPDATE

Please find the data below on Care Homes in the Bradford District for your information. The following data has been provided by the Council's Senior Management Team in the Contract and Commissioning Team.



#### Data Sources:

Weekly Deaths, Office National Statistics.  
Covid Infections, Occupancy and Tracker, NESCC Capacity Tracker. Bradford

Outbreaks,  
HPT