Committee on Community Care – ARM report 2021

The [CCC (committee on community care)](https://www.bma.org.uk/what-we-do/committees/committee-on-community-care/committee-on-community-care) is a multi-branch of practice group that considers and reports on changes, trends and policy in community care. CCC’s role is to connect the dots between branches of our medical practice - and the joins between primary, secondary and social care. We monitor policy and trends, pinpoint unmet care needs, and promote new and novel approaches. We draw on the expertise of our diverse membership such as GPs, specialists in elderly medicine and palliative care, psychiatry, doctors in training and those working in public health and community medicine to inform and advise the BMA.

This year, the UK has continued to struggle with the effects of the COVID-19 pandemic which have brought to the fore systemic issues affecting care being delivered in community. CCC has been calling for adequate protection for all health and social care staff so we have been pleased to see the successful roll-out of the vaccine programme, which has protected the most vulnerable patients and staff working in care settings against COVID-19. The CCC [echoes the concerns](https://www.bma.org.uk/bma-media-centre/mandatory-vaccination-for-nhs-staff-is-incredibly-complex-issue-says-bma) of Dr Chaand Nagpaul that the mandatory vaccination of NHS and care home staff is a complex issue, which should involve proper consultation of the relevant organisations. Without extensive consultation and discussion, the mandatory vaccination ruling could risk further alienating a depleted and under resourced workforce and increase pressures on the sector.

Standardising our governance structures

One of our key projects this year was to undertake a governance review and standardise our structures and processes in line with the rest of the BMA under the direction of the Organisation Committee. As part of this, we have amended our elections processes and formalise our working relation with [BMA’s Patient Liaison Group,](https://www.bma.org.uk/what-we-do/committees/patient-liaison-group/patient-liaison-group) in the hopes that this will result in a more accessible pathway to membership.

Future proofing social care

The CCC contributed to the public health team’s [paper on social care reform](https://www.bma.org.uk/media/3216/bma-calling-for-action-for-social-care-in-england-report-sept-2020.pdf) by highlighting their own experiences of working in social care, and what they felt worked well and what needed improvement. By providing accounts of on the ground experience, the committee has been able to bring to light some of the challenging aspect of delivering community care within the social care system. To highlight some of these views, the chair published a [blog](https://www.bma.org.uk/news-and-opinion/an-obvious-solution-to-the-social-care-question) outlining the committee’s ambition to overhaul social care and meet the standards of care patients need and deserve.

The chair of CCC, Dr Ivan Camphor, attended the [BMA’s social care roundtable](https://www.bma.org.uk/advice-and-support/nhs-delivery-and-workforce/social-care/social-care-in-england) held in January 2020, which brought together leaders from across the social care settings to consider the key challenges facing social care across the UK and ways we can work together to address these. The event reinforced what those of us working in community settings have been known for years and we are in desperate need - better funding to improve access and quality of social care, a significant investment in our social care workforce, and a culture that values the social care sector and recognises its importance to the wider health and care economy. Social care has long been neglected by the government and the BMA has a duty to support those who are so vital in the delivery of continuous, proactive healthcare. As such, CCC will be looking into its priorities for social care in the upcoming session, taking into consideration discussions from the roundtable and our ongoing committee meetings and continue to work closely with the BMA’s public health team.

The CCC will be continuing its work on pushing for reform of the social care system by working closely with the public health team in the next session. The aims of this work will be to make sustainable changes to the way health and social care sectors interact and work with one another. Following the publication and second reading of the Health and Social Care Reform bill, the committee would like to work collaboratively to influence practical solutions to the long-term systemic issues in the social care sector.

CCC working groups

This session, we have also trialled a new way of working at committee level and we have created two working groups to explore some of our policy priorities. Our two working groups are focused on advance care planning and on delivery of care in care homes.

The advanced care planning working group has agreed that a patient centred approach is key to delivering comprehensive, continuous care via an ACP. This fundamental view forms the basis of the working group’s perspective when deciding it’s objectives. The advanced care planning working group is looking into what needs to be considered when creating a ‘gold standard’ ACP. This will include what the patient should expect from their ACP, how to start the process and which clinicians should be involved and responsible for the initiation and completion of the plan. The ACP working group is closely following the developments of the [Ministerial Oversight group for DNACPR](https://www.gov.uk/government/groups/ministerial-oversight-group-on-do-not-attempt-cardiopulmonary-resuscitation-dnacpr-decisions#membership) and hopes to contribute to their work through the BMA’s medical ethics team.

The care homes working group has been looking at the best ways to improve the delivery of care in care homes. They will be setting out short- and long-term objectives for care homes, which include better funding, better pay for care homes staff and standardised training to ensure patients receive the same care, wherever they are. This will tie in with the committee’s wider work with the public affairs team, and the BMA’s Health and Care Bill working group.

Input into pan- BMA policy work

Over the session, the committee has inputted on various pan-BMA projects and policy consultations, including on the gender pay gap in medicine review, into the pan-BMA working group on workforce planning and the review on notifications of complaints to the GMC. Moreover, CCC officers have regularly attended and inputted into pan-BMA COVID- 19 strategy calls, highlighting the plight of community care.

The CCC has also been invited to take part in the BMA’s Health and Care Bill working group and is looking forward to collaborating with colleagues to highlight the most problematic areas of the bill. The lack of accountability and the seeming increase in power for the secretary of state is of serious concern for the CCC and the committee would appreciate more information on the interface between local and national accountability structures. The CCC would also like to see greater clarity on how these reforms and the new system for Integrated Care System (ICS) in England will impact the social care sector.  The committee has recognised the absence of stakeholder engagement in the creation of this bill and hopes to be able bring its expertise to the table when the BMA challenges the government’s proposals.

Looking forward

As we continue to emerge from the pandemic, we look forward to engaging with the rest of the association to feed in our experiences and helping to build upon the BMA’s key asks for social care for the post-COVID world and help build alliances that would achieve it. The future of community care holds promises as we move forward.

**If you want to know more about CCC’s work, please get in touch with us at**[**info.ccc@bma.org.uk**](mailto:info.ccc@bma.org.uk)