

# Report of the Cabinet Member Adult Social Care and Health Services

## Introduction

I have been asked to report as follows for Full Council on 1st October 2020:

By Councillor Shaw on the Covid situation, especially outbreaks in care homes, and the measures taken.

## Response

### 1. Overview

1.1 Devon is one of the areas of the country so far least impacted by COVID-19 related cases and fatalities. Even relative to its low level of community-based transmission of COVID-19, Devon has experienced significantly fewer outbreaks and fatalities in its care homes than is typical elsewhere.

1.2 The following key actions have been identified by DCC the NHS and independent sector providers as contributing factors to minimising the impact of COVID-19 on the staff and residents of care homes in the county:

- Locking down in advance of government guidance, typically in early March;
- Learning from international infection prevention and control best practice;
- Taking a collaborative whole system approach to managing the pandemic;
- Ensuring that Personal Protective Equipment was available and funded;
- Resisting requests to take new residents without confirmed test results;
- Introducing additional 'quarantine' capacity to facilitate hospital discharge;
- Funding additional costs including those relating to any necessary isolation of residents and recognising reduced occupancy;
- Minimising the use of peripatetic staff including the use of agencies;
- Working jointly in the recruitment, training and deployment of staff.

1.3 We have shared our experience of the first wave with the Health and Social Care Committee in written evidence to its Management of the Coronavirus Outbreak Inquiry.

### 2 Planning in partnership

2.1 This collaboration with the local health system and local providers continues as we develop a local plan for [Phase 3](#) of the response to COVID-19 and ensuring alignment and co-ordination with the local [Adult Social Care Winter Plan](#). This will shape the work across the system over the next 6 months.

### **3 COVID-19 testing in care homes**

- 3.1 National testing challenges continue, but work locally is taking place to support care homes and we continue to do this through a number of channels and forums including weekly provider meeting, on-going care home webinars and through our [provider network website](#) where we provide up-to-date information and advice.
- 3.2 In Devon, weekly monitoring of the capacity tracker ensures we are aware of which care homes are signed up to national testing. We also have arrangements in place including via the COVID mailbox for care homes to register concerns or flag challenges with the National Testing Portal.
- 3.3 The national testing strategy is that all care home staff (including bank and agency staff), including those without symptoms, should be tested every week. The Adult Social Care Winter Plan also states that 100,000 tests a day will be ring fenced for care homes with testing taking place every 7 days for staff and 28 days for residents.
- 3.4 All care homes can now apply for coronavirus testing kits to test residents and staff, regardless of whether or not anyone has coronavirus symptoms via the [National Testing Portal](#). Capacity for testing via the National Testing Portal has been substantially increased.
- 3.5 We are taking part in a Department of Health and Social Care COVID-19 testing pilot within Extra Care Housing (ECH) and Supported Living (SL) to inform future national testing requirements and testing strategy for people living in ECH and SL, of which there are 324 properties in Devon.
- 3.6 People living in these properties, their homes, have a range of needs including mental health needs, physical disability needs, learning disability or autism needs. They also have a greater level of independence than people in care homes and subsequently can play a more active role in the community and therefore have different infection risks to manage, this can be challenging for those who have more risky behaviours and for the staff that support them.

### **4 Visiting arrangements in care homes**

- 4.1 National guidance requires the local authority Director of Public Health to make a risk assessment about visiting care homes in their area, to support care homes to have visiting policies in place.
- 4.2 Devon's Director of Public Health has [written to care homes on 11 September](#) advising that at present, providing infection control guidance is followed, care homes can continue with their own visiting policies. However, this situation is subject to an ongoing dynamic risk assessment and may change in the future, at which point care settings will be notified. Our priority is to ensure that everyone is as safe as possible, should we see an increase in local coronavirus cases.
- 4.3 Any restrictions, as we are seeing in some other parts of the country, are usually prompted by local authority areas being placed on the PHE watchlist.

## 5 Support to care homes in Devon to date

5.1 There have not been any unplanned care home closures across Devon as a result of the pandemic but ADASS has expressed concerns nationally on the [viability of care homes](#)

5.2 What we are seeing in Devon is a rising numbers of voids as individuals and families are reluctance to place into care homes. To support care homes in Devon we have put a number of elements in place, these include:

5.2.1 Weekly monitoring via the care homes capacity tracker enable is to have oversight of risks to business continuity and viability by:

- understand care availability
- monitor voids and vacancies
- maintain oversight of testing,
- PPE status and infection control issues

5.2.2 Those identified with 15% voids receive weekly phone calls providing the opportunity for care homes to raise concerns including viability concerns

5.2.3 Service Recovery Teams providing leadership and oversight if care home managers are absent from work

5.2.4 Agency support if staff are unable to work

5.2.5 Voids funded, PPE costs and additional staff costs covered

5.2.6 £3.9M additional and targeted funding to care homes:

- 5% additional funding on all commission business between April and June
- 5% additional funding on all commissioned business between July and September

5.2.7 Infection Control Fund (£10.5M for Devon) - £950 per bed and a second additional payment from unallocated funds

5.2.8 Funding to support client isolation costs for 14 days post placement

5.3 The Adult Social Care Winter Plan is underpinned by a [£546M extension of the Infection Control Fund](#), likely to be in the region of c£9M in Devon, to support care providers including to meet the additional costs associated with limiting staff movements between settings and any subsequent recruitment requirements.

5.4 Free PPE for all care providers and care worker will also be provider to registered and non-registered care providers until the end of March 2021.

5.5 An Adult Social Care Standard Operating Procedure has also been developed to support the consistent management of outbreaks in care homes.

## 6 Hospital Discharge

6.1 Updated hospital discharge guidance has been received that includes the return to pre-COVID-19 arrangements for assessment and funding of people with Continuing Healthcare needs.

6.2 Social care needs assessments and NHS Continuing Healthcare (CHC) assessments of eligibility have recommenced from 1 September 2020. Together

with local NHS teams we will need to reassess, by the end of March 2021, all those people assessed and funded under previous COVID-19 arrangements.

6.3 People needing additional follow-on care after being discharged from hospital will be supported by a [£588 million fund](#) to cover adult social care or the immediate costs of care in their own home. The national expectation is that 65% of those aged 65+ will require no further care and 95% of those admitted to an acute hospital will be discharged home.

6.4 It is policy across Devon that testing takes place, and the result is known prior to discharge. Care homes receive funding to be able to put in place arrangements to support 14 days of isolation within care homes for new placements.

## **7 The contribution made by the STP Proud to Care COVID-19 Immediate Recruitment Campaign**

7.1 The Devon STP health and care organisations worked jointly in the recruitment, training and deployment of staff by launching a joint immediate recruitment campaign on 26 March 2020, just before the first #clapforourcarers.

7.2 The campaign ran until 5 July 2020 and directly recruited 209 people, who were employed in front-line healthcare assistant roles across the Devon STP health and care organisations (see breakdown below).

7.3 The majority were recruited into permanent roles, with 74 people employed in permanent care worker roles with adult social care providers, including 49 in domiciliary care and 25 in residential care in Devon County Council's geographical area.

7.4 In addition, 17 people were employed on a temporary basis (including 3 redeployees) in Social Care Reablement and the Durrant Care Hotel, via Temp Solutions. This made a total of 91 new recruits in Devon County Council's geographical area.

7.5 A new STP Proud to Care campaign in Autumn/Winter 2020 will attract new people to important health and care vacancies in Devon:

- To support winter pressures.
- To support recruitment in anticipation of a local or national resurgence of COVID-19.
- To fill vacant posts (See Appendix 1), particularly in domiciliary care, to support hospital discharge and encourage people to remain independent at home, where possible, and residential homes.
- To benefit from government's [Plan for Jobs](#) including the Kickstart Scheme, apprenticeships (including nursing apprenticeships) and traineeships at a time of high unemployment

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