

Health and Adults Social Care and Communities Overview and Scrutiny Committee

Date of Meeting: 5th November 2020

Report Title: Adult Social Care COVID-19 Update

Portfolio Holder: Cllr. Laura Jeuda - Adult Social Care and Health

Senior Officer: Mark Palethorpe, Executive Director of People, Director of Childrens Services & Director

1. Report Summary

- 1.1. Cases of COVID-19 continue to increase in Cheshire East and more widely across the North West and the Borough has recently been declared a Tier 2 High risk area. This update summarises the current situation in relation to COVID-19 in care homes, care at home, and complex care in Cheshire East. It also summarises measures which have already been put in place, and actions which will be taken to minimise risk of COVID-19 transmission in Adult Social Care settings.

2. Recommendations

- 2.1. The review and scrutiny of the actions undertake and plans to continue to support care provision in Cheshire East due to the Covid-19 pandemic.

3. Reasons for Recommendations

- 3.1. To ensure that the Council has robust contract management, and quality assurance process in place to minimise risk of COVID-19 transmission in Adult Social Care settings.

3.2. Accommodation with Care

3.2.1. Current situation

- 14 care homes as of 23/10/20 are currently experiencing a COVID-19 outbreak, according to the Infection Prevention and Control team definition of 2 or more related cases amongst staff and residents.
- Of these, 4 homes are past the 14-day isolation period and 7 homes currently have no confirmed cases among residents.
- Care home staff are tested weekly through the Whole Home testing programme which enables early identification of the virus so that they can self-isolate and prevent potentially spreading the virus to residents and other staff.
- The majority of cases among staff are asymptomatic.
- Residents are routinely tested monthly for the virus unless there is an outbreak in which case all residents are tested.

3.3. Care at Home

3.3.1. Current situation

- Suspected and confirmed COVID-19 cases amongst staff and service users have remained relatively low. On the 23/10/20 there are 10 confirmed cases among service users and 7 among staff.
- Care at Home providers are generally coping well. One or two providers have experienced issues over staffing levels particularly due to unplanned school closures, however, the Contract Management team has worked closely with these providers to resolve these issues as they arise.

3.4. Complex Care

3.4.1. Current situation

- There continue to be no reported suspected or confirmed cases of COVID-19 amongst residents of Complex Care settings although the number of confirmed staff members is less than three.

4. Other Options Considered

- 4.1. The Council has a statutory duty to manage the Care Market, to ensure that our residents are safeguarded, and also has contractual responsibilities directly with a number of carer providers across Cheshire East. Therefore it is not an option to do nothing.

5. Background

5.1. Accommodation with Care

5.1.1. Measures currently in place

- The Whole Home Testing Programme in which staff are tested weekly, and residents are tested every 4 weeks, continues and is generally working well. The programme has helped to identify asymptomatic staff members at an early stage so that they are able to self-isolate and prevent the spread of the virus to residents and other staff members.
- To date care homes have received £3.8 million of funding from the Government's Infection Control Fund to support with workforce resilience and isolation measures. Cheshire East received the first tranche of funding from Round 2 of the Infection Control fund on 2nd October 2020. The total funding allocation (tranche 1 and 2) for the Borough is £4.71 million. In accordance with the guidance 80% of the funding will be distributed to eligible care homes and community care providers in Cheshire East. With regard to the 20% discretionary element of the funding, the Council has decided to also pass this directly to local care homes and community care providers for infection control and workforce resilience, with a small percentage of this (5%) retained in the first instance for contingency purposes.
- All care homes have an Infection Prevention Control Outbreak Plan supported by an Outbreak Management Toolkit issued by the Council. These can be quickly stepped up in the event of an outbreak and appropriate support put in place from the Infection Prevention and Control service and the Council's Quality Assurance team.
- Officers are also working with care providers to ensure that their staff and care home residents are able to access flu vaccinations to ensure that there is resilience in the care workforce.
- Monthly care home webinars have been set up in partnership with Cheshire CCG for care home providers with themed agendas such as Winter Planning, infection control, digital services etc. The first webinar was held Thursday 15th October and had a focus on Infection Prevention Control and flu vaccination. It was well attended by care providers,
- Weekly mutual aid calls have been reinstated for Accommodation with Care providers. These calls provide an opportunity for care home managers to share good practice and offer mutual support.
- The Department of Health and Social Care are making iPads available to care homes who successfully apply to enable residents to stay in touch with their loved ones and facilitate GP consultations.

- Infection Prevention and Control (IPC) visits continue to be made by IPC nurses to care homes which have experienced more serious outbreaks. These calls provide vital support and advice to homes and are well received.
- Market position/ sustainability reviews continue to be undertaken on a monthly basis by way of a Multi -disciplinary preparedness call on a fortnightly basis.
- The Quality Assurance Team continue to undertake weekly contact calls to all care homes across the Borough. The purpose of this contact call is to seek assurance of the effective ongoing safe service delivery and address any emerging risk.
- Analysis of COVID-19 outbreaks data has been undertaken to identify trends in the types of homes in which outbreaks occurred, to determine which homes may be most at risk of having an outbreak. This information will be used to target support.
- A two-tiered approach has been introduced for Quality Assurance; care homes will be sent a list of trigger questions, and a desktop review will be used to determine which homes are at higher risk of quality issues and therefore require a face-to-face Quality Assurance visit, and which homes can continue to be monitored virtually.
- Care homes' dynamic risk assessments of whether to facilitate friends and family visiting, and what the visiting arrangements should be, have been sampled and quality assured.
- Care homes have been asked how they are communicating with friends and family of their residents, and whether any support is needed to improve this, to help ensure that friends and family adhere to visiting guidance. Recommendations from this are being taken forward.

5.1.2. Actions to be taken

- The Council is working with CCG colleagues to identify designated settings which are capable of supporting Covid 19 hospital patients who are medically for discharge but require support to enable them to fully recover. These settings must be able to isolate patients from any other residents to prevent any risk of onward transmission of the virus.

- Officers will continue to monitor the implementation of the Anti Body testing from the Department of Health and Social Care across selected care homes in the Borough.
- An audit is underway to ensure that all care homes are signed up to the PPE portal and are able to access sufficient stocks of PPE via this route.
- Ongoing work has been taking place locally with CCG colleagues in relation to seasonal flu vaccination for both Care Homes residents and staff along with the wider provider market. Officers will work with home and care provider managers to identify a Flu champions in their organisations to highlight the immunize programme and encourage colleagues to participate in the programme to be immunised. The flu champion will work alongside the aligned GP surgery to get either the District Nurse in for a full day to immunise the work force during their shift. Alternatively the flu champion can book a day with the Community Pharmacy to have this done on site.

5.2. Care at Home

5.2.1. Actions taken to support Providers

- The CLIPPER system continues to help providers source PPE, and there continues to be positive feedback on the system. CEC continue to support providers with PPE where necessary.
- Infection Prevention and Control training has been rolled out to all domiciliary care providers. Training was delivered over MS Teams by a nurse from Cheshire CCG, and attendees demonstrated donning and doffing (taking on and off) of Personal Protective Equipment to check they were doing it correctly. 36 Cheshire East providers were trained in total, and those who attended gave positive feedback that the session was useful, and they learned something new.
- £378k has been distributed to Care at Home and complex care providers from the Government's Infection Control Fund for workforce resilience measures including ensuring that staff are able to receive their full wages while sick or self-isolating due to Covid-19.
- Community care providers with a registered office in Cheshire East will receive a share of the second round of the Infection Control Fund on a per service user basis (including commissioned and self-funded packages of

care). This will support them with specified infection control and workforce resilience measures.

- Weekly mutual aid calls have been reinstated for Care at Home providers. These now include guest expert speakers and offer an opportunity for providers to work together to develop collective solutions to common problems.

5.3. Complex Care

5.3.1. Actions taken to support providers

- Cheshire East Council is part of a pilot scheme to roll out COVID-19 testing for Supported Living settings and Extra Care Housing schemes, similar to the Whole Care Home Testing Programme.
- The 'outbreaks preparedness toolkit' for care homes is being rolled out to Complex Care settings. It will contain information and advice on what steps these settings can take to reduce the risk of outbreaks of COVID-19 and seasonal infectious illnesses and minimise the impact if outbreaks do occur.
- Providers are being supported with PPE, as described above for Accommodation with Care and Care at Home.
- Complex and Extra Care Housing care providers with registered offices in Cheshire East will also receive a share of the Government's Infection Control Fund.

6. Implications of the Recommendations

6.1. Legal Implications

- Local Authorities have a duty under the Care Act 2014 to ensure we meet our statutory obligations.
- The Council effectively manages contracts to ensure that value for money is provided, and that the person continues to receive quality of care in accordance with the Provider's contractual obligations.
- The Council has a statutory Safeguarding role which it must fulfil diligently and in accordance with statutory requirements.

6.2. Finance Implications

- The sector has reported they are facing challenges due primarily low occupancy and increased costs relating to PPE. Close monitoring of business viability remains in place.

6.3. Policy Implications

- This proposal is in keeping with the requirements of the Care Act 2014 and does not have any specific policy implications

6.4. Equality Implications

- The focus has been on ensuring that service users and carers continue to be able to access information, advice, and be able to continue visiting family members placed within Care Homes and Complex Care settings. Care providers have made extensive use of new technologies to ensure communication between family members and relatives.

6.5. Human Resources Implications

- There are no known direct Human Resource implications for the Council arising from this report at this time. Depending on the staffing requirements of the designated settings there may be a need to redeploy Care4CE staff to support these schemes.

6.6. Risk Management Implications

- The continuing Covid-19 pandemic and with the risk of a second wave or spike in COVID19 combined with winter pressures could place significant pressures on the Social Care market. Detailed planning is taking place with CCG colleagues and with social care providers to plan for the coming months and mitigate risks.

6.7. Rural Communities Implications

- There are no direct Rural Communities implications arising from this report.

6.8. Implications for Children & Young People/Cared for Children

- There are no implication arising from this report to note in relation to Children & Young People.

6.9. Public Health Implications

- COVID19 has had profound impacts on many people who use services and their carers. It will be important to understand and support Adult Social Care

service users and carers with any long-term impacts in terms of both Mental and Physical Health and Wellbeing.

7.

7.1. Climate Change Implications

The Council is currently reviewing policy developments for Social Value in response to Covid-19 recovery planning. This includes local Social, Economic and Environmental impacts

8. Ward Members Affected

8.1. All wards are affected

9. Consultation & Engagement

- Ongoing engagement continues a regular basis with providers across the Borough. The main methods of communication are via the provider mutual aid calls, themed Webinars and weekly contact calls via the Quality Assurance team. In addition to this engagement direct support is provided from the local Infection Prevention Control service and CCG teams.

10. Access to Information

N/A

11. Contact Information

11.1. Any questions relating to this report should be directed to the following officer:

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