

## Cabinet

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**Date of Meeting:** 13 April 2021

**Report Title:** Covid-19 – Update on Response and Recovery

**Portfolio Holder:** Cllr Sam Corcoran - Leader of the Council  
Cllr Craig Browne - Deputy Leader of the Council

**Senior Officer:** Lorraine O'Donnell - Chief Executive

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### 1. Report Summary

- 1.1. Cabinet have received eight detailed reports since June 2020 on how the Council, working with its partners, continues to respond to the COVID-19 pandemic and plan for the recovery from it.
- 1.2. In view of the enduring nature of the national and international public health emergency, this report provides a summary of key developments and by exception reporting since 1 March 2021.
- 1.3. On 22 February, the Government published a document called “COVID-19 Response Spring 2021” which includes a “roadmap” for easing restrictions in England, starting with schools and colleges on 8 March.  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/963491/COVID-19\\_Response\\_-\\_Spring\\_2021.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/963491/COVID-19_Response_-_Spring_2021.pdf)
- 1.4. At the time of writing steps 1a and 1b have been instigated, including the re-opening of schools to all pupils, and allowing care homes residents to have one visitor.
- 1.5. The report also summarises the latest information on infection rates which have fallen considerably since last reported.

- 1.6. The financial impact of the pandemic on the council continues to be significant. A further update is provided in section 6.2. It is important to note that over £200m has been provided in ringfenced grants for specific purposes, the majority of which has been or is to be passported directly to other organisations. This may create an incorrect impression that all the council's COVID pressures are funded. Furthermore, the administration costs of passporting money directly to other organisations fall directly on the Council. This is significant in the case of business grants and infection control in care homes grants, for example.
- 1.7. The report will also be of interest to the Corporate Overview and Scrutiny and the Audit and Governance Committees.
- 1.8. It is important to note that there may be other new developments following the publication of this report. Verbal updates will be given at the meeting, as appropriate.

## **2. Recommendations**

- 2.1 That Cabinet note the issues outlined in the report.
- 2.2 That Cabinet recommend to Council a Supplementary Revenue Estimate for £1,561,000, fully funded from the Covid-19 Emergency Grant, to increase the budget for Leisure Services Commissioning. This reflects reported spending in 2020/21 in support of the provision of leisure services in the borough.
- 2.3 That Cabinet approve a Supplementary Revenue Estimate for £881,340, fully funded from the DfE Holiday Activity Fund Grant to increase the 2021/22 Early Help & Prevention Service Budget. This grant will enable the Council to pass on grant funding to local organisations to deliver school holiday activity and food for children who are pre-school and school age and eligible for Free School Meal entitlement.
- 2.4 That Cabinet delegate authority to the Director for Children's Services to distribute the DfE Holiday Activity Fund Grant and to approve a temporary and limited variation to the Corporate Community Grant policy to extend the scope of payments made under the policy to include Holiday Activity Grants made under the DfE grant determination half programme 2021 No 31/5325. That for this limited period section 3.9 of the policy will be amended to enable private businesses who provide holiday club activity to apply for this grant between March 2021 and April 2022 only.

## **3. Other Options Considered**

- 3.1. Not applicable.

## 4. Background

4.1 The WHO Weekly Epidemiological Update issued on 16 March 2021 showed an increase in infections with 3.03 million new cases of Covid-19 reported in the previous week (a 10% increase from the previous week).

4.2 As of 16 March, there have been nearly 120 million Covid-19 cases worldwide and 2.66 million deaths.

4.3 The latest international, national and local statistics are available from the following data dashboards:

<https://covid19.who.int/>

<https://coronavirus.data.gov.uk/>

[https://www.cheshireeast.gov.uk/council\\_and\\_democracy/council\\_information/coronavirus/latest-covid-19-figures-for-cheshire-east.aspx](https://www.cheshireeast.gov.uk/council_and_democracy/council_information/coronavirus/latest-covid-19-figures-for-cheshire-east.aspx)

<https://www.gov.uk/guidance/the-r-number-in-the-uk>

<https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-vaccinations/>

4.4 Three vaccines to protect against Coronavirus are being rolled out nationally to priority groups. By the week ending 11 March, the total number of people vaccinated was 24,196,211. 159,533 people, 74.56% of the eligible population of Cheshire East residents who are registered with Cheshire GP Practices have received their 1st Dose.

4.5 The UK Government National Restrictions continue at the time of writing. The Prime Minister announced changes on 22 February. Details of this change are found here: <https://www.gov.uk/guidance/national-lockdown-stay-at-home>

4.6 The respective administrations of Northern Ireland, Scotland and Wales have introduced measures that have been tailored to their country's circumstances.

4.7 In the last full week of data until 14 March 2021, 190 people in Cheshire East tested positive. The local infection rate was recorded as 50 cases per 100,000 population. This represents a 23% reduction in cases from the previous week.

4.8 Initially rates for Cheshire East were falling more rapidly than the England average; they have now converged. Hospital capacity is improving with fewer patients requiring hospital care. As of 16 March, East Cheshire NHS Trust had 14 occupied COVID beds (5% of capacity) and Mid Cheshire Hospitals NHS Trust had 29 occupied COVID beds (6% of capacity). This indicates that the

national lockdown introduced in January has been successful in reducing the epidemic and its impacts on the NHS.

- 4.9 Case rates in Cheshire East have decreased. However, data for the 7 days up to 14 March show infection rates for the 4-11 and 12-16 age groups increased by 29% and 71% respectively compared to the previous week. 17-18 year olds increased from 0 to 49.7 per 100,000. As the number of infections continue to fall, we will see a small number of cases causing large swings in percentage change. Rates are falling in all age bands for the 60+ group. As before, the highest rates were recorded in the working age population - 20-29 age group (105 per 100,000) and the 30-39 age group (94 per 100,000).
- 4.10 With the planned return of all pupils to school on 8 March, enhanced Lateral Flow Testing measures have been put in place to assist all secondary schools implement the national programme. After the initial two week school based testing programme, pupils will be expected to carry out twice weekly home testing. A report of the school based programme will be prepared for members.
- 4.11 Infection prevention and control within Care Homes and the weekly testing of care home staff has helped detect people who may not have symptoms and as a result reduces the risk of a serious outbreak. As of 8 March, care homes have begun to offer the Government's new LFT programme to enable a designated family member to visit a loved one.
- 4.12 Financial support for Local Authorities at Local COVID Alert Level Medium and High is to fund the following activities:
- a. Targeted testing for hard-to-reach groups out of scope of other testing programmes.
  - b. Additional contact tracing.
  - c. Enhanced communication and marketing e.g. towards hard-to-reach groups and other localised messaging.
  - d. Delivery of essentials for those in self-isolation.
  - e. Targeted interventions for specific sections of the local community and workplaces.
  - f. Harnessing capacity within local sectors (voluntary, academic, commercial).
  - g. Extension/introduction of specialist support (behavioural science, bespoke comms).
  - h. Additional resource for compliance with, and enforcement of, restrictions and guidance.

## **5. Update and by exception reporting on Council actions**

5.1 Cheshire East Council continues to respond to the Coronavirus pandemic. At the same time the Council has continued to strive to:

- deliver essential local services
- protect our most vulnerable people
- support our communities and local businesses.

5.2 A summary of the key changes since the March update that have continued to be delivered by the Council is provided below.

5.3 *Test and Trace and Outbreak Management* – In total, between the national, and subregional contact tracing teams, 86% of positive cases are successfully contacted and closed in Cheshire East. Our local contact tracing team increases this proportion significantly, but due to data collection methods, this is not reflected in the national data. The local contact tracing team makes four attempts where possible to contact individual cases at various times daily between 8.30am and 7.00pm (Saturday 10.00am–1.00pm). They also use texts, letters and emails as methods of contacting individuals. However, there are some cases where the team are unable to successfully contact trace certain individuals due to the following factors: (1) incorrect or no contact details for the case (including on internal databases), (2) no response from the case, (3) case refuses to speak to the team, and (4) incorrect data sent from the national team and no requirement to contact trace.

5.4 To attempt to increase the number of successfully contacted cases, the TTCE Programme team are looking to pilot an enhanced contact tracing model in April to support the local contact tracing team. This pilot will utilise the Cheshire East Swab Squad and will involve deploying a small number of ‘door knockers’ to try and contact those individuals who have not been successfully contacted by telephone. Risk profiling will be undertaken to establish which individuals should be contacted by this team. If this is successful, it will be fully implemented in March/April 2021. Discussions are also underway with Cheshire Constabulary as an ultimate escalation point to refer cases to if the team are aware or concerned that an individual is not self-isolating. In addition, a new Microsoft Dynamics 365 case management system has also been implemented to improve local data and information sharing across the organisation. Finally, from April 2021 a new self-isolation framework will be implemented, which will see the role of the local contact tracing team evolve from a purely contact tracing role and into a welfare case management role. This new role will see the team supporting individuals throughout their self-

isolation period with a range of touchpoints to support with their physical, social, and emotional needs.

5.5 Alongside the Cheshire East Swab Squad, several testing initiatives have now been introduced in Cheshire East:

- From 1 March 2020, the national government rolled out the 'Community Collect' programme to support members of households, childcare or support bubbles of school staff and pupils. The local testing sites in Crewe and Macclesfield were turned into collection points where individuals could collect lateral flow test (LFT) kits between 1.30pm-7.00pm every day. To support this initiative, Local Authorities have been asked to take part in a 'Local Community Collect' programme by offering collection points in their areas. Cheshire East Council is currently awaiting a stock of approximately 18,000 LFT kits and will use a number of asymptomatic testing sites as collection points. In addition, home testing kits can also be ordered online.
- From 15 March 2020, local residents were able to access LFT's at six dedicated asymptomatic testing sites, as well as at a number of community pharmacies. These require pre-booking and the full list of sites can be found on the Cheshire East booking portal:  
<https://cheshireeast.zipporah.co.uk/LFT.Bookings>.
- From 5 April 2021 (subject to change at time this report was written), Cheshire East was chosen by the DHSC to pilot a dual use testing site using the Crewe local testing site. If successful, this will see testing sites being use for both LFT and PCR testing.

5.6 *Covid-19 Mass Vaccination* – The COVID vaccination programme continues to be rolled out with the focus on Priority groups 5 and 6. The uptake rates in the the priority groups remains high. The Council is currently working with Health colleagues and the commissioned local Carers Hub to identify unpaid carers who are eligible for the vaccination under Priority Cohort 6 and are not already known through other means such as GP register, SALT returns and carers assessments/allowance.

5.7 At the time of writing, data obtained from care homes suggest that 96% of care home residents have been vaccinated and 77% of care home staff, there are variations in uptake across this sector. This is in part due to homes where there were outbreaks having to delay the vaccination process. Local Authority staff are working closely with NHS colleagues to follow up those homes and to encourage staff who may be reluctant to be vaccinated.

- 5.8 Uptake rates amongst social care staff is also high with 83% of eligible staff already vaccinated. Local Authority staff are working closely with the NHS to address vaccine hesitation. Factors such as individuals being pregnant or seeking fertility treatment, along with concerns regarding allergies, have been highlighted as the most common reasons for vaccine hesitation.
- 5.9 *Communities – Clinically Extremely Vulnerable (CEV) Support: People Helping People* was a service created by Cheshire East Council 12 months ago. It works collaboratively with new and existing Voluntary, Community, Faith and Social Enterprise (VCFSE) sector partners and local volunteers to channel community-based support to meet the needs of our residents. This service is recognised amongst all residents across the borough as an essential community service. Some key recent updates associated with this service are as follows:
- 5.9.1 The Shielding guidance with the ‘Stay at Home’ message for the Clinically Extremely Vulnerable became effective on the reintroduction of the National Lockdown on 5 January 2021 and last until 31 March 2021. 25,143 residents in Cheshire East have been contacted by MHCLG informing them to take extra precautions and that if they require additional support to contact their Local Authority.
- 5.9.2 By 18 March, 1,400 residents who asked for support were contacted through the Council’s People Helping People service, with the main request being linked to accessing food. During the calls to residents, other support needs were identified which often related to mental health, social isolation, fuel poverty and digital exclusion.
- 5.9.3 From 31 March, the Council is expected to provide similar support to those who are being asked to self isolate. The intention is to reduce the spread of COVID-19 by providing practical, emotional and social support to those who need to self-isolate. The expectation is that local authorities will develop a support offer alongside effective communications to improve awareness of when people need to self-isolate, how long for, what this involves, its importance in stopping the spread of the virus, the support available and the consequences of breaking the rules.
- 5.9.4 The government is providing £12.9 million funding per month for the next four months (starting in March and continuing until June), with a review point in May, to help councils meet the costs involved in assessing people’s practical support needs and helping them access support. Details on the funding for Cheshire East Council is not yet confirmed. This support will be provided through the Council’s Communication, Local Contact Tracing, and People Helping People teams.

- 5.10 *Adult Social Care* – The Commissioning Team have provided significant support for the Adult Social Care Market during the Covid-19 pandemic to ensure market stability and the safe service delivery and provision of care for the residents of Cheshire East. This includes Care Homes, Care at Home (Domiciliary Care), Complex Needs, Extra Care Housing and Supported Living schemes.
- 5.11 *Care homes* - Of all care sectors, care homes have been the most significantly impacted by the pandemic with many homes having experienced at least one Covid-19 outbreak. Care homes have been supported throughout by the Council's Quality Assurance team as set out in previous Cabinet reports.
- 5.12 The number of homes currently in an active outbreak situation (within 14 days of a confirmed case) is declining, and as at 17 March 2021 was at two. A further 21 homes had a last confirmed case between 14 days and 28 days ago. Confirmed cases are highest among care home staff which accords with lower vaccination rates for staff than residents.
- 5.13 As of 8 March, care home residents have been allowed one designated regular visitor provided the home is not in an outbreak situation. Local visiting guidance has been updated for the homes in accordance with national guidance. Feedback from care homes is that the visiting arrangements are going well with no reported issues of visitors not abiding by the requirements around PPE and testing. Care homes report visits have been welcomed with emotional reunions with family members.
- 5.14 All care homes have now received government funding via the Infection Control Fund (Rounds 1 and 2) and the Rapid Testing Fund to support infection control, workforce resilience and Lateral Flow Testing regimes. Care homes were also invited to apply (along with other care providers) for additional funds under the Workforce Capacity Fund which, as the name suggests, is designed to increase staffing capacity to support continuity of care and hospital discharge. Unlike other funding streams there was no requirement to passport the funding directly to providers and so a decision was taken to award the limited available funding to those providers that were able to demonstrate a clear plan on how the funds would be used to increase capacity within the short timeframe of 31 March 2021. 14 care homes were successful in being awarded funding.
- 5.15 Whole home and Lateral Flow Testing continues in care homes. Revised guidance on testing for professionals visiting care homes was published on 17 March. The main changes to the guidance are:
- The default position is that without a negative test, the professional should not be allowed into the care home (unless in an emergency, unless

overridden by the care home manager following a risk-based decision, or unless their entry is required by law such as CQC inspectors).

- For NHS professionals, care homes should see evidence from the professional of a negative rapid Lateral Flow Test within the last 72 hours, which shows they are following the NHS staff testing regime.
- As per the previous guidance, professionals who are not part of regular testing for NHS staff or CQC inspectors (for example professionals such as podiatrists or engineers) will need to be tested at the care home in the same way as visitors.
- If they are visiting multiple care homes in one day, they will now only need to be tested at the first care home they visit that day and can use evidence of this test at the next care home they visit that day.
- CQC inspectors will now test at home using a Lateral Flow Test on the day of a care home inspection, in addition to their weekly PCR.
- Like care home staff, visiting professionals are exempt from testing for 90 days following a positive PCR test, unless they develop new symptoms.

5.16 *Domiciliary care* - On the whole domiciliary care providers have coped well with the additional demands of the pandemic. There have been some isolated staffing issues due to sickness or the need for self-isolation but commissioners have worked closely with the care providers to help them resolve these issues and some providers have experienced an upturn in recruitment levels due to the prevailing economic circumstances.

5.17 More recently there has been an upturn in demand for domiciliary care which is impacting on the number of people awaiting a suitable package of care. Particular pinch points are double handling packages of care. An increase in carer breakdown also represents a risk factor impacting on the demand for domiciliary care. Additional capacity is currently being sought for the Care Brokerage team to facilitate more timely care sourcing and to explore creative solutions to care provision e.g. split or shared care packages. It is envisaged that the Workforce Capacity Fund will help to increase capacity within the sector as 19 domiciliary care providers successfully applied for the funding.

5.18 Domiciliary care staff are eligible for the Covid-19 vaccination under Priority Cohort 2 – Frontline Health and Social Care Workers. Latest available data which is collated directly from care providers suggests that vaccination rates are 83% for frontline care workers but 73% when including back office staff (who are sometimes required to deliver care).

- 5.19 *Complex care/ Supported Living* - Like domiciliary care, there have been a relatively small number of issues related to complex care and supported living. Someday services were unfortunately forced to close at the start of the pandemic.
- 5.20 Regular testing of staff is now taking place at Supported Living and Extra Care Housing schemes.
- 5.21 Providers of complex care were eligible to apply for funding from the Workforce Capacity Fund. A total of nine providers were successful.
- 5.22 *Extra Care Housing* - Although sadly there have been a small number of Covid related deaths of residents at Extra Care Housing schemes since the start of the pandemic, there have been no major outbreaks. Housing and care staff now receive regular Lateral Flow Tests.
- 5.23 The major area of concern for residents of the Extra Care Housing schemes at Oakmere and Willowmere was the temporary closure of the restaurant facilities in line with Government regulations. An alternative meal delivery service was put in place.
- 5.24 The Local Authority have been supplied with some PPE via the Local Resilience Forum (LRF) and the Department for Health and Social Care (DHSC) since the 24 March 2020. This arrangement with the LRF has been extended to the end of June 2021, with the Council receiving fortnightly deliveries of PPE directly to our offices in Sandbach on a fortnightly basis. The Council continue to distribute PPE to eligible organisations across Cheshire East. So far, the Council has distributed just over 5 million items of PPE locally. This includes schools who have been supported to access PPE prior to re-opening, and with the change in national guidance the LRF PPE supplies are also now being distributed to Carers of family members (who do not live with the person that they care for) via the Carers Hub and Wishing Well.
- 5.25 PPE stock has also been locally purchased and we have a sufficient supply in stores. As part of the Council's recovery and outbreak planning, we will continue to supply providers with PPE on a mutual aid basis as and when required.
- 5.26 *Children's Social Care* – We are continuing to see that families' needs are more complex as a result of the pandemic, which is increasing demand and providing additional challenges to services.
- 5.27 On 9 March the government laid The Adoption and Children (Coronavirus) (Amendment) Regulations 2021 following a public consultation. The regulations will come into force on 30 March 2021 and will see an extension of the current flexibilities for medical reports (for fostering and adoption), virtual visits and Ofsted inspection cycles.

- 5.28 Rapid progress has been made in permanency planning for children, and our cohort of cared for children is reducing. We have now achieved 25 adoptions this year. We recently attended a regional leadership event where we presented on the positive impact we have achieved for children and young people through the Mockingbird project which provides a peer support network to foster carers. Fostering was included on the annual leaflet which goes to all Cheshire East residents which will hopefully result in an increase in inquiries on becoming a foster carer.
- 5.29 We celebrated social work practice with all our teams on World Social Work Day on 16 March in an online staff workshop. Some social workers shared their experience of having the Covid-19 vaccine in Team Voice to encourage colleagues to receive a vaccination. Foster carers have now been offered vaccinations which is very positive as it will support children and young people to continue to access family homes and to experience stability in where they are living.
- 5.30 *Prevention and Early Help* – Over 22,600 vouchers have been distributed to families and young adults in need through the Winter Grant Scheme since the beginning of December. The grant is continuing to be used as intended - to offer practical support in the form of food and utilities payments for vulnerable children, young people and adults, as agreed by Cabinet on 1 December. This has included provision of food vouchers for families eligible for free school meals over the Christmas period, February half term, and will also include the Easter holidays. In January, the scheme was extended to include support for vulnerable families to replace or access white goods. A referral process is in place for professionals to refer families who need this support which is working well. One parent said, “We are incredibly grateful for your help; it feels like a weight has been lifted.”
- 5.31 Holiday activities will be taking place for families over Easter using the DfE holiday activity fund. The aim is to provide healthy food and enriching activities to disadvantaged young people. The DfE have confirmed that they are happy with our proposal for the use of the fund.
- 5.32 *Education and Skills* – The return to school and college for all pupils has been a success. The attendance in schools across Cheshire East on Monday 8 March was 80% with 97.7% attendance in primary schools. This is against a national attendance rate of 68% overall and 95.69% attendance in primary schools. Schools, colleges, and the Education Service have worked extremely hard to ensure all arrangements are in place for the safe return of all pupils. We provided all schools with template letters for children and parents to reassure them about the return to school and the expectations around attendance. We

produced a guide for professionals who were working with families to support the transition back to school, help to address anxieties and any barriers to attendance. Guidance was also provided to schools and colleges on updating risk assessments and reducing transmission.

- 5.33 Full attendance data from secondary schools was phased over the first week to allow for the rapid testing of pupils. Rapid testing of secondary aged pupils is going well, and we have a robust system in place to monitor incident rates in schools and put the right support in place. The Education team have visited a number of secondary schools and have been very impressed with the calm organisation that has been seen with implementing the testing arrangements.
- 5.34 In the run up to the return to school of all pupils in March, secondary schools, special schools and colleges were asked to carry out three Lateral Flow Tests (LFT) on each student as they returned, and to prepare them for twice weekly home testing once these had been completed, to help control the spread of the virus. Participation by students is voluntary and while most schools have reported very high levels, there have been some schools where students have been more reluctant to be tested. In these cases, staff have tried to encourage students to participate, pointing out the advantages and helping to reduce any anxieties.
- 5.35 Schools were able to start testing from 1 March and this is now almost complete. The number of tests carried out by each school ranges from 2,000 to almost 7,000. Concerns about the accuracy of the tests have been raised but there have been less than 20 'void/ inconclusive' results reported, all of which gave a conclusive result on re-testing.
- 5.36 A total of 23 positive cases in pupils have been found since the start of March, of which 17 have not shown any symptoms and so would have been in school were it not for the tests.
- 5.37 Home testing has now been rolled out to nursery setting. Kits have been delivered and colleagues in this sector started home testing from 22 March.
- 5.38 The council has dedicated resource to the roll out of LFT across Cheshire East. This has enabled schools to have access to advice and support when setting up the testing sites and has enabled the council to have some oversight of the process through ongoing dialogue with schools and by visiting test sites, while they are in operation.
- 5.39 Our focus is on pupil wellbeing and catching up on learning, and we are continuing to assist schools in supporting pupils' mental health and wellbeing,

so they can help those who are most anxious. Plans are also being discussed for summer schools and catch up programmes. We are working with schools to develop a recovery plan, which will focus on how schools need to adapt the curriculum to address gaps in knowledge and the curriculum during the last year.

5.40 At the beginning of March, parents across the borough received offers of secondary school places for children starting in September 2021, with the majority getting their first choice of school. The council has worked with the local schools to offer preference places to 98% of Cheshire East residents (an increase from 97% in 2020) with 92% being offered their first preference of secondary school (compared to 91.6% in 2020). These figures are expected to increase before pupils start in September 2021, as some parents will decline places as their circumstances change and places become available. The school admissions process has continued during the coronavirus outbreak, with the council co-ordinating this for most state schools in Cheshire East. Schools have adapted well, offering virtual tours to help parents in making preferences for their child's school and they will now be working with primary schools and parents to prepare children for their move to secondary school. The number of applications for school places in Cheshire East continues to increase. In 2021, the total number of applications was 4621 with 470 applications received from families living outside the borough, an indication of the popularity of Cheshire East schools.

#### 5.41 *Business Support*

The Council is continuing to support those businesses required to close due to lockdown or similar measures through distribution of grants. The table below provides a breakdown of the allocation of the current grants available to businesses.

The council is continuing to engage with businesses throughout this period and is developing longer term support plans for the local economy to support economic recovery.

<b>Total received @ 16 Mar 2021:</b>		
	<b>Applications Approved</b>	<b>Payments Made</b>
<b>Mandatory Grants via Rates:</b>	<b>18,263</b>	<b>£ 36,544,406</b>
<b>LRSG (open)</b>	3,190	£ 2,254,435
<b>LRSG (closed)#1 November</b>	2,916	£ 4,685,024
<b>LRSG (sector)</b>	3	£ 2,286
<b>CSP (wet led)</b>	271	£ 271,000
<b>LRSG (closed)#2 December</b>	8,965	£ 15,246,661

<b>CBLP</b>	2,918	£	14,085,000
<b>Discretionary Grants:</b>			
<b>ARG</b>	2,053	£	4,370,973
<b>TOTAL</b>	<b>20,316</b>	<b>£</b>	<b>40,915,379</b>

- 5.42 *Leisure Centres* – the council’s leisure centres have been closed during the third national lockdown. In accordance with government’s roadmap to recovery, outdoor sports facilities, can re-open on 29 March. Indoor leisure facilities can re-open for individual use, e.g. gyms and swimming pools, from 12 April. Group exercise classes and indoor sports, such as badminton and 5-a-side football, can re-start no earlier than 17 May.
- 5.43 There has been significant reductions in income during the pandemic with income effectively reduced to zero during the periods of closure under lockdown rules.
- 5.44 It has been necessary, therefore, for the council to provide further payments to council’s commissioned leisure operator, ESAR. This has been through advance payments of the 2021/22 management fee of £1.561m during 2020/21. Cabinet approved a Supplementary Revenue Estimate of £500,000 in December 2020 to increase the Leisure Commissioning Budget for 2020/21 which was used to provide additional financial support to Everybody Sport and Recreation. Further detail on the financial support provided during 2020/21 is provided in **appendix 1**.
- 5.45 Based on the latest forecast of Everybody Sport and Recreation’s income and costs, reflecting the third lockdown and phased re-opening, it is no longer appropriate to provide advance payments for the 2020/21 financial year, but instead to recognised that this will be an unrecoverable cost of the pandemic. It is, therefore, recommended that a Supplementary Revenue Estimate for £1,561,000, fully funded from the Covid-19 Emergency Grant, is provided to replenish the budget for the payment of the management fee to Everybody Sport and Recreation in 2021/22.
- 5.46 In addition, the council has been awarded £961,000 through the National Leisure Recovery Fund which will be passed on to the Trust. If there is no further funding for public leisure facilities announced by Government, it will be necessary to further increase the Leisure Services Commissioning Budget to ensure the council’s leisure centres can remain open to enable local people to access cost-effective health and wellbeing facilities that will be so important as we recover from the pandemic.

## 6. **Implications of the Recommendations**

### 6.1 **Legal Implications**

- 6.1.1 The Coronavirus Act 2020 has been supported by a multiplicity of regulations which provide a legal basis for enforcement etc. Supported by copious and frequent guidance notes which purports to assist in the interpretation of the regulations.
- 6.1.2 Any necessary urgent decisions made by the Council in response to the pandemic have followed the relevant process set out in the Constitution.
- 6.1.3 As amendments are made to adapt to changing social circumstances, infection rates, new COVID variants and the vaccination programme, the definitive legal position is time-specific and subject to frequent change.
- 6.1.4 The tier restriction regulations (The Health Protection (Coronavirus, Restrictions) (All Tiers) (England) Regulations 2020) came into force on 2 December 2020 and four substantive amendment regulations were made in rapid succession on 16, 19, 26 and 31 December 2020. The lockdown regulations came into force on 5 January 2021 which provide the legal framework for the implementation and enforcement of national restrictions. The key elements are the restrictions on individual freedom to associate, restrictions on travel, closure of non-essential retail and entertainment venues.
- 6.1.5 There have been significant new regulations prohibiting international travel, quarantine provisions for overseas visitors, increased fines for unlawful gatherings and regulations designed to clarify and extend the enforcement provisions, powers of police constables and PCSOs which have been extended from 2 February to 31 March 2021.
- 6.1.6 The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020 remain in force and make provision for the conduct of local authority meetings up until 7<sup>th</sup> May 2021. On 25 March, the Government announced that this provision will not be extended. This is very disappointing. Alternative arrangements are being considered.
- 6.1.7 The vaccination programme success is likely to result in changes to the regulatory regime. On 22 February 2021, the Prime Minister set out a 'roadmap' to the easing of lockdown restrictions in England, with four 'steps' setting out greater freedoms, subject to scientific data endorsing further relaxation. From 8 March with all children and students (on practical courses) returning to face-to-face education. There will be twice-weekly rapid testing for secondary and college pupils as well as regular testing of teachers.

- 6.1.8 From 8 March, people are also allowed to leave their home for recreation and exercise outdoors with their household and support-bubble (if eligible), or with one other person from their household. Care homes residents are also allowed to have one regular visitor.
- 6.1.9 Step 1 also provides, from March 29, outdoor gatherings of up to 6 people or 2 households will be allowed. Outdoor sports facilities will be allowed to reopen and people allowed to participate in formally organised outdoor sports.
- 6.1.10 Whilst the 'stay at home' rule ended on March 29, the advice to continue working from home remains and travel abroad is still prohibited except for a small number of permitted reasons.

## 6.2 Financial Implications

- 6.2.1 The potential financial impacts of the COVID-19 pandemic are regularly reported to members via Cabinet with additional briefings provided via Audit and Governance and Corporate Overview and Scrutiny Committees and Member written briefings.
- 6.2.2 This report presents the latest financial position and identifies Government funding already provided or claimed to date. Significant levels of uncertainty remain over the final projected financial implications for local authorities and the approach to funding costs and income losses associated with the pandemic, continue to change as the severity of the pandemic has changed. This creates issues with producing an accurate forecast of financial consequences compared to the Council's Medium-Term Financial Strategy.
- 6.2.3 The returns to Central Government identify three main types of financial pressure:
- (i) **Un-ringfenced Expenditure and Income Losses**  
The most recent forecast of financial pressures from COVID-19 on the Council's 2020/21 budget for Services is £33.9m. The figures are under frequent review. Grant funding to support expenditure and income losses is detailed in Table 1 below, in a format consistent with previous reports. £25m of un-ringfenced Support Grant has been allocated to date for the 2019/20 and 2020/21 financial years; and £3.5m has also been claimed so far under the Income Compensation Scheme. The Government also announced that £100m had been top sliced from national grant provision totals to provide support to keeping leisure centres open; the Council has been allocated £964,000 (as shown in Table 2). Table 1a identifies funding announcements provided as

part of the Spending Review 2020, which will feature as part of the management of COVID related financial impacts in 2021/22 and potentially beyond.

(ii) **Collection Fund**

Potential losses on the Collection Fund relate to Council Tax and Business Rates income. The Government requires councils to spread the deficit over the next three years, although a compensation scheme has been announced, to cover up to 75% of irrecoverable losses. Cash shortfalls in-year are currently expected to be in the region of £10.7m. The Council will continue to recover late payments where practicable, however some losses will be permanent; for example, where businesses have ceased trading, individuals are now entitled to Council Tax Support Payments, or where growth in the tax base has slowed down compared to forecasts.

(iii) **Ringfenced Expenditure**

Table 2 provides information about the activities the Council has been undertaking which have received specific Government funding.

**Table 1: The approach to un-ringfenced funding for 2020/21 has changed over time**

Announced	Funding for CEC	Notes
(England total)		
<b>19<sup>th</sup> March</b>	£9.150m (£1.6bn)	Adult Social Care based payment
<b>18<sup>th</sup> April</b>	£10.539m (£1.6bn)	Payment per capita to help reflect lost income
<b>Sub-Total</b>	<b>£19.689m (£3.2bn)</b>	
<b>2<sup>nd</sup> July</b>	£2.712m (£0.5bn)	Adult Social Care / deprivation based payment
<b>12<sup>th</sup> October</b>	£2.578m (£1bn)	To provide resources for winter. This tranche of funding has been used to equalise all payments using the same approach as the July payment, now referred to as the COVID Formula.
<b>Total</b>	<b>£24.979m (of £4.6bn)</b>	

<b>2<sup>nd</sup> July</b>	<b>£6m</b> (£n/k) for Income Compensation	Estimated total – subject to claims process. £3.5m claimed so far, in 2 of 3 data collection rounds  Compensation at 75p in £1 for losses above 5% of sales, fees and charges budgets
<b>2<sup>nd</sup> July</b>	<b>£nil</b> for Collection Fund	Compensation at 75p in £1 for losses (to be received in 2021/22); and defer residual Collection Fund deficit over 3yrs

**Table 1a: Un-ringfenced support announced for 2021/22**

<b>Announced</b>	<b>Funding for CEC</b>	<b>Notes</b>
<b>(England total)</b>		
<b>18<sup>th</sup> December</b>	£8.508m (£1.55bn)	5 <sup>th</sup> Tranche of Emergency Funding Grant
<b>18<sup>th</sup> December</b>	£1.5m (£n/k) for Income Compensation	Sales, Fees & Charges compensation scheme extended for April-June 2021

6.2.4 Un-ringfenced government funding received to date as detailed in Table 1 (above) is currently **£25m, of which £1m was utilised in 2019/20**; and the income compensation scheme is anticipated to bring in **£6m**, if settled in full. There is potential that there could be a shortfall in funding compared to the overall financial impact on the Council. The MTFS reflects that costs that are deferred, such as capital spending impacts (of £8.7m) and Collection Fund losses are managed through existing risks provisions within the Capital Programme or through use of the Collection Fund Earmarked Reserve. By taking this approach the Council is creating flexibility by carrying-forward unspent COVID revenue Grant funding at year-end that can support the outturn position or provide financial support in the 2021/22 financial year. This position will be subject to ongoing analysis and review as part of the outturn reporting.

6.2.5 Returns to central government now include estimates for potential costs, and losses from sales, fees, and charges, in the 2021/22 financial year. The budget approved by Council in February 2021 was balanced on the understanding that COVID related financial impacts would be managed from additional COVID funding. Early estimates for the full year indicate the potential financial impact in 2021/22 could be as much as £17.6m.

This is set against the potential funding identified in Table 1a above of £10m.

6.2.6 Mindful of the possibility for further expenditure/net cost pressures going forward, it will be important to continue to review, understand and mitigate the potential shortfall between additional financial impacts and the funding provided by Government. The Council continues to engage in several activities:

1. Managing and reviewing the financial forecasts in response to guidance and the local response to the emergency, and how this affects the Council's revenue budget.
2. Further analysing the Government proposals to compensate losses from Sales, Fees and Charges.
3. Analysing the level of Collection Fund losses across the three financial years 2021/22 to 2023/24; and
4. Reviewing the consequences of funding shortfalls on the Council's Capital Programme and how this impact on the Council's long-term funding of capital expenditure.

**Table 2: Specific Grants are valued at c.£250m**

Activity (National Total)	Spending forecast*	Funding	Variance
Test & Trace (£300m)	£1,533,331	£1,533,331	£0
Towns Fund (Capital £5bn)	£750,000	£750,000	£0
Dedicated Home to School and College Transport (£67m)	£625,506	£625,506	£0
Rough Sleeping/ Next Steps Accommodation (£3.2m+£10m) **	£157,648	£68,400	£89,248
Active Travel (£225m)	£743,050	£743,050	£0
Re-Opening High Streets (£50m)	£339,533	£339,533	£0
Culture Recovery Fund (£1.57bn)	£180,000	£180,000	£0
Infection Control in Care Homes (£600m)	£5,320,292	£5,320,292	£0

Infection Control in Care Homes (£546m) 2 <sup>nd</sup> Tranche	£4,712,872	£4,712,872	£0
Business Grants (£12.3bn)***	£87,445,000 (spending to date)	£95,514,000	Awaiting guidance
Discretionary Business Grants (£617m)***	£4,357,000 (spending to date)	£4,372,250	
Local Restrictions Business Support Grants (£3.3bn) ***	£59,181,176	£59,181,176	
Christmas Support Payment (Wet-led pubs)	£236,800	£236,800	
Lockdown Grants (Businesses) (£4.6bn)	tba	tba	
Business Rate Holiday (£10.7bn)	£62,339,000	£60,561,068	£1,777,932
Council Tax Hardship (£500m)	£2,691,326	£2,062,635	£628,691
Local Bus Network (£167m)	£229,632	£229,632	£0
Emergency Assistance Food and basic necessities (£63m)	£326,293	£326,293	£0
Contain Outbreak Management Fund (£per/head, based on Tier) (5 tranches to 23 Feb)	£7,024,494	£7,024,494	£0
School Condition Grant (Capital) (£n/k)	£589,604	£589,604	£0
Wellbeing for Education Return (£8m)	£55,403	£55,403	£0
Compliance and Enforcement Grant (£60m)	£158,572	£158,572	£0
Bus Service Support Grant (CBSSG) Restart scheme	£671,101	£675,474	(£4,373)

(£n/k)			
Self Isolation Test and Trace Support Payment (£110m)	£498,790	£498,790	£0
Clinically Extremely Vulnerable Individuals (£73m)	£452,136	£452,136	£0
Covid Winter Grant Scheme (£170m)	£880,472	£880,472	£0
Domestic Abuse Building Capacity Fund (£6m)	£50,000	£50,000	£0
Leisure Centres (£100m)	£963,513	£963,513	£0
Workforce Capacity Fund (£120m)	£725,319	£725,319	£0
Rapid Testing Fund (£149m)	£1,361,266	£1,361,266	£0
Vaccine Roll-out Funding (n/k)	tba	tba	£0
Community Testing Funding (£11m)	£356,076	£356,076	£0
Holiday Activities and Food Programme 2021 (grant is split £88,630 for 2020/21 and £792,710 for 2021/22)	£881,340	£881,340	£0

\* Note: where 'Spending Forecast' equals 'Funding' this does not necessarily indicate the full extent of spending to date but does demonstrate the expectation that funding will be fully utilised.

\*\* Whilst spending in relation to Rough Sleeping/ Accommodation exceeds specific Covid grant funding in this respect, the balance is being met by other Housing grants/ reserves, and as such there will not be an additional pressure on the Revenue Account.

\*\*\* Business Grant scheme funding has been combined to date. Scheme totals can also vary if payments are subject to review or appeal.

6.2.7 Further specific grants may become payable and require local administration in response to the emerging status of the pandemic response.

6.2.8 LGA and CCN collate returns from all member councils, though the types of financial pressure vary from council to council depending on their circumstances. For example, whether they provide social care, have a strong tourist economy, or the extent of deprivation. The overall impacts are similar across councils and Cheshire East Council is not an outlier. The Council will continue to support lobbying by the LGA and CCN in their aim to ensure fair settlement of the financial pressures facing local authorities.

### **6.3 Policy Implications**

6.3.1 COVID-19 is having a wide-ranging impact on many policies. Any significant implications for the Council's policies are outlined in this report.

### **6.4 Equality Implications**

6.4.1 Implications of any changes and restrictions will continue to be reviewed on a regular basis.

6.4.2 Vaccination programmes are prioritising people by age (50 years and older) and those who are clinically vulnerable. The Government published the QCovid risk calculator created by the University of Oxford to support the NHS coronavirus response. It is an evidence-based model that uses a range of factors such as age, sex, ethnicity, and existing medical conditions to predict risk of death or hospitalisation from COVID-19. The model is being used to fast-track vaccinations and encourage more at-risk people to shield until 31 March 2021.

6.4.3 As mentioned in paragraph 5.30, over 21,500 vouchers were distributed over the Christmas period to families and young adults in need through the Winter Grant Scheme. The grant is to offer practical support in the form of food and utilities payments. The scheme was originally due to end March. It will now be extended in 2021/22.

6.4.4 We carried out individual risk assessments for staff with protected characteristics, particularly in relation to BAME colleagues and staff with a disability and are issuing regular reminders to keep these under review as circumstances may change.

6.4.5 We hosted a workshop on 4 March to understand how to improve our communications about the COVID-19 vaccine in targeting local under-served communities. This forms part of the ongoing work that is taking place with the NHS Cheshire CCG in dispelling myths and rumours about the vaccine and to encourage take up of the jab. Information shows there is a lot of hesitancy amongst some local communities including some ethnic groups, asylum seekers, Travellers, homeless

people, boating and multi-faith groups. The session was hosted by our communications team, our local community engagement team and a representative from the NHS Cheshire CCG. Members of the community who attended included a freelance translator, the Waterways Chaplaincy, the Arch Deacon of Nantwich (subbing for the Bishop of Chester) and the manager of a homeless shelter in Crewe. The session was very insightful, with discussions around worries and fears amongst our underserved communities about the vaccine. It was noted that there is a need to support and represent our Bulgarian, Slovakian, Czech, Portuguese, East Timor, Polish and Romania communities more than we do currently. Discussions developed around how this could be achieved.

- 6.4.6 It was also noted that more work needs to be done around the accessibility of the vaccine. Many communities would be willing to have their job if medical teams were able to come to them – e.g. those in the homeless shelter who aren't registered with a GP, the boating community, Travellers, older residents living in rural areas and many of the BAME community, as they can struggle to access services. The session was extremely uplifting, with an overwhelming feeling of positivity for the work the vaccination programme has done to date. All community representatives on the call were extremely keen to work with the council and the CCG to help further the scope of the work being done and to raise vaccination numbers amongst our underserved audiences. Actions have been noted and work is underway. Updates will be shared on this work in due course.

## **6.5 Human Resources Implications**

- 6.5.1 The latest data on staff absences on 18 March 2021 are 23 (28 *last month*) staff self-isolating and working from home, 27 (34 *last month*) staff self-isolating and not working from home (role doesn't allow), 4 (9 *last month*) Covid-related absences, and 102 (106 *last month*) non-Covid-related absences.
- 6.5.2 Staff vaccinations: as at 18 March 1864 staff are eligible for vaccinations due to their role. Of these, 85.6% have had a first vaccination.
- 6.5.3 There continues to be regular communication with staff and good co-operation with the Trade Unions.

## **6.6 Risk Management Implications**

6.6.1 The risk environment around COVID-19 remains dynamic. Risk registers have been maintained as part of the Council's response to date and the plans for recovery. Business Continuity Plans are being kept under review.

## **6.7 Rural Communities Implications**

6.7.1 COVID-19 is having an impact across all communities, including rural communities. The support for small businesses will support rural business.

## **6.8 Implications for Children & Young People/Cared for Children**

6.8.1 There are implications for children and young people. There are implications for schools, early help and prevention and children's social care which are summarised in the report.

## **6.9 Public Health Implications**

6.9.1. COVID-19 is a global pandemic and public health emergency. There are implications for Cheshire East which are summarised in the report.

## **6.10 Climate Change Implications**

6.10.1 There have been positive benefits of fewer cars on the road. This includes most staff who have been working from home. There has also been lower demand for heating/lighting offices.

## **7 Ward Members Affected**

All Members.

## **8 Consultation & Engagement**

8.1 Formal consultation activities were initially paused due to the lockdown restrictions. However, we are now undertaking all consultations following a review on a case by case basis to ensure that we can continue to operate effectively.

## **9 Access to Information**

9.1 Comprehensive reports on COVID-19 can be found on the Council's and the Government's websites.

## **10 Contact Information**

Any questions relating to this report should be directed to the following officers:

Frank Jordan, Executive Director Place and Deputy Chief Executive

Jane Burns, Executive Director Corporate Services