

BRIEFING REPORT

Adults and Health Committee

Date of Meeting: 16 November 2021

Report Title: Winter Plan 2020-21

Report of: Helen Charlesworth-May, Executive Director for Adults, Health and Integration

1. Executive Summary

- 1.1.** The following report sets out the schemes and actions which are being deployed through 2021-22 to address winter pressures. Over the last few months there have been significant emerging pressures in the social care market. This is highlighted through the performance information shown in this report as well as the position in respect of COVID-19 cases.
- 1.2.** The report sets out that a number of schemes have been funded by the Better Care Fund to address these pressures; Block booked beds, Spot purchase beds, Care at Home Hospital Retainer, Rapid response, Social worker support, Flu vaccinations for Care Homes, Domiciliary providers, Complex provider and Extra Care Housing staff, One You falls prevention. Separately the council also funds the Cheshire East People Helping People service.
- 1.3.** In addition to those funded schemes listed, the report also references the actions being undertaken to address these pressures; the deployment of 7-day services, flu vaccine actions, PPE preparations, market and provider sustainability.
- 1.4.** This report supports the strategic aims of the Council's Corporate Plan 2021-25. One of the council's strategic aims is that it empowers and cares about people.
- 1.5.** The winter schemes noted in this report supports the specific actions noted in the corporate plan which are:
 - To prioritise Home First for patients discharged from hospital. Where possible patients are discharged to a home of their choice.
 - Vulnerable and older people live safely and maintain independence within community settings.

2. Background

- 2.1.** Each year a range of schemes are deployed through the Better Care Fund to help alleviate the additional pressures faced by health and social care services through the winter period.
- 2.2.** As part of the monitoring arrangements for the Better Care Fund this report has been produced to inform the Adults and Health Committee of the actions being undertaken by Adult Social Care in Cheshire East for the period 2021-22.
- 2.3.** This report follows a number of annual updates in respect of the schemes deployed and the winter pressures faced. In 2019 a report was presented to Health and Adult Social Care Overview and Scrutiny Committee which detailed the progress achieved across Cheshire East in reducing Delayed Transfers of Care (DTOC) following a 'Deep dive' in 2017. This was followed with a further update in 2020 and the production of the Adult social care: our COVID-19 winter plan 2020 to 2021.

3. Briefing Information

3.1. Winter planning 2021/22

- 3.2.** The winter plan for 2021/22 includes a number of components:
 - Background information
 - Performance information
 - COVID-19 Cases and vaccinations
 - COVID vaccination uptake in care homes
 - Winter schemes
 - 7-day services
 - Flu Vaccine actions for the period 2021/22
 - Mandated vaccines for frontline health and social care staff
 - Personal Protective Equipment (PPE) preparations
 - Market and Provider Sustainability
- 3.3.** The health and social care system in Cheshire East has faced unprecedented pressure as a result of the COVID-19 pandemic. We have seen the very real impact on people's lives.
- 3.4.** Cheshire East Council has through the Better Care Fund established a number of schemes to support the health and social care system through the winter period. The schemes include securing block booked beds, implementing a care at home hospital retainer, rapid response, social work support, People Helping People, increased flu vaccinations, safe steps to reduce falls in care homes, a review of double handling care and spot purchasing additional care beds.
- 3.5.** Thousands of people across Cheshire East rely on the care sector to provide them with the support they require to live their everyday lives. Nationally, two

thirds of people living in care homes for the over 65's are over 85, with around 70% living with dementia. Over a quarter of a million people under 65 also receive support, whether for Mental Health, for Physical Support or Support Living with Learning Disabilities.

- 3.6.** A number of winter plans have been developed and will be enacted as part of the process of responding to increased demand for services through the coming months. This also includes increased pressure as a result of COVID-19. These plans include seasonal flu and winter resilience plans.
- 3.7.** A regional seasonal flu plan has been developed, every year NHS England commission a seasonal Influenza vaccination programme to protect individuals from the flu, preventing severe illness and avoidable deaths, as well as avoiding the occurrence of a flu pandemic which would have a severe impact on NHS services. This plan ensures that there is a comprehensive seasonal 'business as usual' plan and is not the pandemic flu plan.
- 3.8.** On Friday 18th September 2020 the policy paper entitled 'Adult social care: our COVID-19 winter plan 2020 to 2021' was published by the government. The document focused on the required actions for; Local Authorities, the NHS and Adult Social Care providers when approaching the expected challenges that COVID-19 will create during this period.
- 3.9.** The plan set out the government's three overarching priorities for the sector during this period which were:
 - Ensuring everyone who needs care or support can get high-quality, timely and safe care throughout the autumn and winter period.
 - Protecting people who need care, support or safeguards, the social care workforce, and carers from infections including COVID-19.
 - Making sure that people who need care, support or safeguards remain connected to essential services and their loved ones whilst protecting individuals from infections including COVID-19.
- 3.10.** The plan sets out how it intends to do this by:
 - Detailing what the government's national support will be.
 - Establishing expectations of other parts of the system, including local authorities, NHS organisations, and care providers.
 - Putting into practice the recommendations of the Social Care Sector COVID-19 Support Taskforce.
 - Providing a stimulus for further local winter planning and preparedness.
- 3.11.** The plan included the following key areas:
 - Guidance on Infection Prevention and Outbreak Management
 - Managing Staff Movement
 - Personal Protective Equipment
 - COVID-19 Testing
 - Seasonal Flu Vaccines
 - Safe Discharge from NHS settings and Preventing Avoidable Admissions
 - Social Prescribing

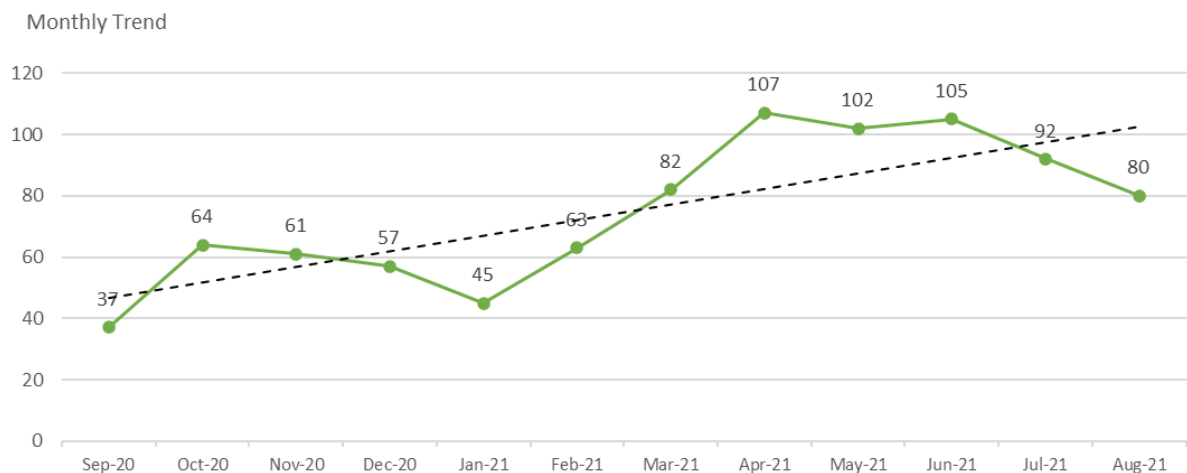
- Visiting Guidance
- Direct Payments
- Support for Unpaid Carers
- End-of-life Care
- Care Act Easements
- Supporting the workforce
- Workforce Capacity
- Shielding and People who are Clinically Extremely Vulnerable
- Social Work and other Professional Leadership
- Funding
- Market and Provider Sustainability
- CQC Support: Emergency Support Framework and Sharing Best Practice
- Local, Regional and National Oversight and Support
- Enhanced Health in Care Homes
- Technology and Digital Support
- Acute Hospital Admissions

3.12. Performance information

3.13. The following performance information shows the demand for adult social care services for the period September 2020 to August 2021. This performance information covers demand for care at home/ home care services, Brokerage Support Plan Tasks (01/09/2020 – 31/08/2021) where the comments relate to Care at Home/Home Care, hospital discharge early brokerage referrals. Overall, the data shows that there is increased demand for services and requests for services from hospital between the period September 2020 and August 2021, there has been an increase for care at home/ home care services from hospital whilst at the same time a decrease in service requests from the community.

3.14. Graph 1 - Brokerage Support Plan Tasks (01/09/2020 – 31/08/2021) where the client was in hospital at the start date of the task and the comments relate to Care at Home/Home Care

3.15. The following graph shows a trend of increasing demand for care at home/ home care services where the client is in hospital.

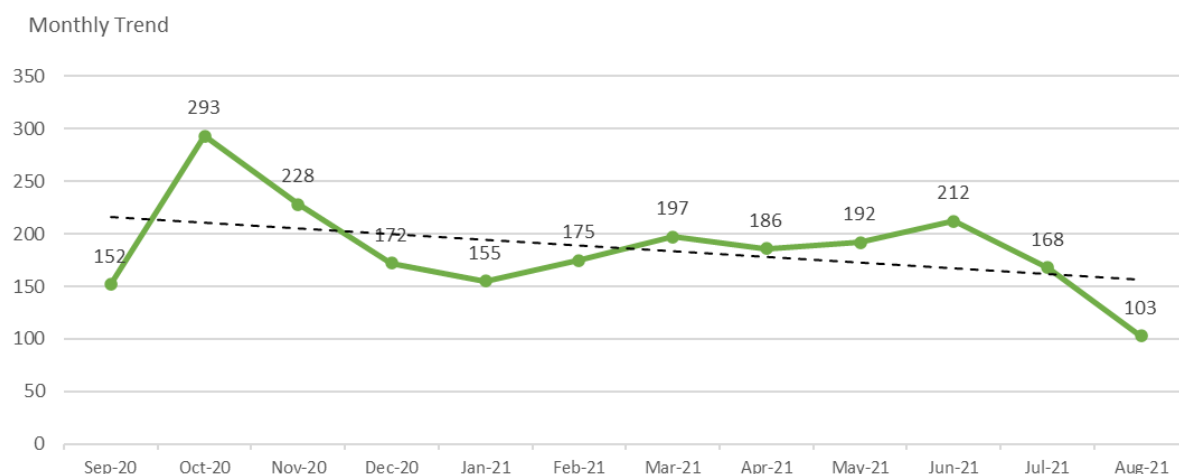


- 3.16. The report includes data on 'Draft Adults Support Plan Care Brokerage Team' task where the client was in hospital at the start date of the task. It also includes data on 'Draft Reablement Plan Care Brokerage Team' tasks and 'New Case In/Action' tasks. Data as of 14/09/21 **Task Start Date** (is on or after 01 September 2020 and is before 01 September 2021).

Month Started	Sep 20	Oct 20	Nov 20	Dec 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21
Tasks	37	64	61	57	45	63	82	107	102	105	92	80

- 3.17. **Graph 2 - Brokerage Support Plan Tasks (01/09/2020 – 31/08/2021)** where the comments relate to Care at Home/Home Care (excludes records where the client was in hospital at the time)

- 3.18. The following graph shows a trend of reduced number of Brokerage Support Plan Tasks where the comments relate to Care at Home/Home Care excluding those in the hospital.

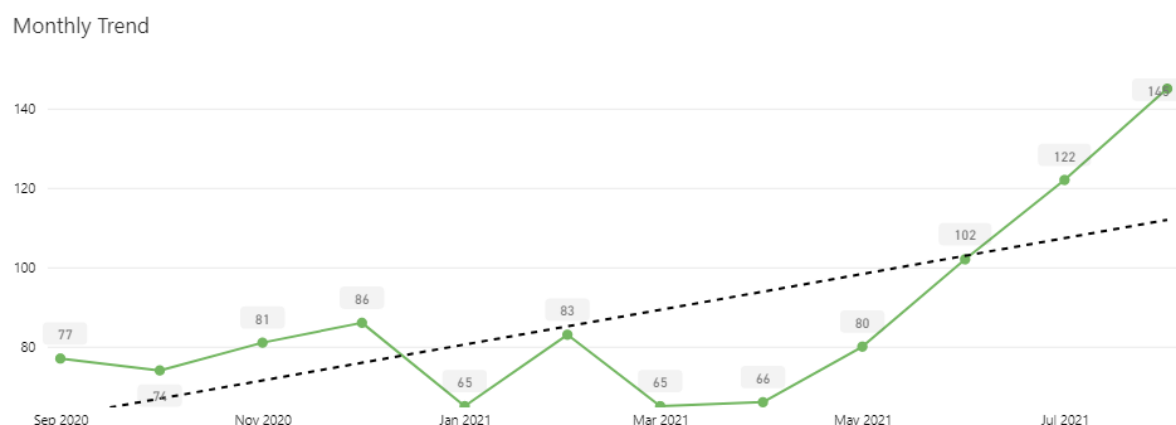


- 3.19. Data as of 14/09/21 **Task Start Date** (is on or after 01 September 2020 and is before 01 September 2021).

Month Started	Sep 20	Oct 20	Nov 20	Dec 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21
Tasks	152	293	228	172	155	175	197	186	192	212	168	103

3.20. Graph 3 - Action Plans (01/09/2020 – 31/08/2021) where the Action Plan Type is 'Hospital Discharge (Urgent Cases Only) Early Brokerage Referral'

3.21. The following graph shows an increasing trend of hospital discharge early brokerage referrals for the period September 2020 until August 2021.



3.22. Data as of 13/09/21, Action Date (is on or after 01 September 2020 and is before 01 September 2021), Action Type (is Hospital Discharge (Urgent Cases Only) Early Brokerage Referral).

	Sep 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	Mar 2021	Apr 2021	May 2021	Jun 2021	Jul 2021	Aug 2021
Action Plans	77	74	81	86	65	83	65	66	80	102	122	145

3.23. COVID-19 Cases and vaccinations

3.24. The following section provides an overview of COVID-19 cases by area (last 7 days), cases by area (whole pandemic) and vaccinations.

3.25. Cases by area (last 7 days)

3.26. As at 14/09/2021 there were 1,384 people (357.9 per 100,000 population) in Cheshire East with at least one positive COVID-19 test result, either lab-reported or lateral flow device (England only) in the most recent 7-day period.¹

3.27. Cases by area (whole pandemic)

3.28. As at 14/09/2021 there had been 36,767 people (9,508.7 per 1000,000 population) in Cheshire East with at least one positive COVID-19 test result, either lab-reported or lateral flow device (England only) since the start of the pandemic.²

¹ <https://coronavirus.data.gov.uk/details/cases>

² <https://coronavirus.data.gov.uk/details/cases>

3.29. Vaccinations

3.30. Nationally as at 14/09/2021 48,439,272 people had received the first dose of COVID-19 vaccine, 44,048,093 people had received a second dose of COVID-19 vaccine. In total 92,487,365 vaccines had been administered.

3.31. In Cheshire East the number of people who had received the first and second dose of the COVID-19 vaccine is listed as a percentage. Government reporting notes that 86.3% of residents in Cheshire East had received a first dose and 80.2% of residents had received a second dose of the COVID-19 vaccine.³

3.32. COVID vaccination uptake in care homes

3.33. As at the week ending 10/09/2021 Cheshire East Council has contracts with 94 care homes to provide accommodation with care services. Of these there are a total of 4930 staff employed, 4615 staff have received a first dose of the COVID-19 vaccination. 4397 staff have also received a second dose of the COVID-19 vaccination. Across the 94 care homes there are some 3247 residents and of these 3207 have received a first dose of the COVID-19 vaccination and 3182 have also received their second dose of the COVID-19 vaccination.

3.34. Winter schemes

3.35. The performance information shows increased demand for community services especially care at home and accommodation with care. A number of the winter schemes are aimed at delivering that additional required capacity, for example the rapid response service will provide additional capacity in the domiciliary care sector, the hospital retainer will also ensure that packages remain open and service users can return to their packages of care following a hospital stay. The council has also commissioned block booked beds to support hospital discharge and prevent admission.

3.36. The planned winter schemes for 2021/22 are as follows:

3.37. Scheme one - Block booked beds £363,297

3.38. Direct award of short-term contracts for 8 winter pressure beds to support COVID-19 pressures, winter pressures, supporting hospital discharges or preventing admission. The rationale for completing a direct award was as follows: an anticipated second wave of COVID-19, non COVID-19 related elective surgery and procedures which were cancelled/postponed are currently being reinstated in hospitals which will increase demand, residents have avoided accessing primary care services and we anticipate a surge in demand on these beds due to people's conditions deteriorating due to lack of treatment, we are now seeing the demand on A & E services in our hospitals rapidly increasing.

³ <https://coronavirus.data.gov.uk/details/interactive-map/vaccinations>

- 3.39. Scheme two – Spot purchase beds £520,463**
- 3.40.** In order to facilitate hospital discharges and prevent unnecessary hospital admissions spot purchase care home beds are deployed.
- 3.41.** All current long term provision is commissioned on a 'spot purchase' basis. Providers are signed up to standard terms and conditions called a 'Pre Placement Agreement' and receive individual placement agreements for each resident placed by Cheshire East Council. The accommodation with care market in Cheshire East is composed of a good mix of small and medium sized providers (SMEs) as well as a number of large, national organisations.
- 3.42. Scheme three - Care at Home Hospital Retainer £40,000**
- 3.43.** Since the implementation of the new Care at Home contract in November 2018 the Council does not pay a retainer fee for the first 7 days for hospital admission or respite; however, the provider is contractually obligated to hold open the care packages for this time. In order to assist with service continuity there may be instances upon agreement from the Contracts Manager where a retainer fee will be paid for up to the following 7 days. (i.e. day 8 to 14). In certain circumstances there may be cases where a Service User is only a few days from being discharged from hospital and so to support a smooth transition a retainer fee may be paid for a nominal number of days. This is only in exceptional cases and needs authorising in partnership with Contracts and Operational Locality Managers.
- 3.44. Scheme four - Rapid response £797,473**
- 3.45.** The Rapid Response Service will facilitate the safe and effective discharge of service users from hospital who have been declared as medically fit for discharge but who may still have care needs that can be met in the service user's own home. The service will seek to prevent readmission to hospital by ensuring wrap around services are in place in the first 48 hours following hospital discharge. The Service will also provide support to service users with complex health needs and end of life support at a level. Through the provision of 7 day working, the service will ensure a timely response to hospital discharge to reduce delayed transfers of care and create capacity and throughput for non-elective admissions.
- 3.46. Scheme five - Social worker support £112,000**
- 3.47.** Social Worker (x1) dedicated to the Discharge to assess beds at Station House, Crewe. Social Care Assistants (x2) additional assessment and care management capacity to support the revised processes around hospital discharge using reablement exclusively for this purpose (East locality).
- 3.48. Scheme six - Cheshire East People Helping People**
- 3.49.** We recognise this is still a challenging time for everyone, so we want to continue to help local people to support one another by harnessing and

supporting the fantastic work already being done in communities across the borough. We are working collaboratively with our partners and local volunteers to channel community-based support to meet the needs of our residents who find themselves isolated without family, friends or a support network. Our service is delivered for the local community, by the local community, with options including:

- Telephone support, advice and reassurance
- Signposting to local and national services equipped to meet specific support needs
- Access to essential food and medical supplies
- Access to priority online shopping slots
- A regular friendly phone call to lift your spirits
- Transportation from hospital to home

3.50. Scheme seven – Flu vaccinations for Care Homes, Domiciliary providers, Complex provider and Extra Care Housing staff

3.51. For older people or those with long-term health conditions, the effects of flu can be much more serious, and in some cases even fatal. For those working in a care home or health and care environment where there are many vulnerable people, it is incredibly important to have the flu vaccine. This not only helps to protect the staff themselves and their immediate families, but also helps to protect very vulnerable residents who might not respond well to vaccination. As well as keeping staff and residents safe and well, reducing the threat of flu also helps you to ensure business continuity; reducing the likelihood of staff being ill and off work and the associated costs of providing bank or agency cover for them.

3.52. Vaccination is also of benefit as it helps to reduce transmission to the wider public and in times of increased pressure on health and social care services, helps to reduce the burden of ill health, and therefore demand on the wider health system at a time when services are already under pressure.

3.53. To ensure social care services to take up the offer of free flu vaccinations, the Cheshire East Council contracts team 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 voluntary 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.

3.54. Scheme eight - One You falls prevention £20,000

3.55. The aim of the project is to work with 150-180 individuals to reduce the risk of falls, as a result of the pandemic, there is a backlog of individuals waiting to access the One You Cheshire East strength and balance classes. The

One You programme takes an evidenced based approach to the prevention of falls which is aligned to the national falls consensus statement. This has been shown to reduce risk of falling by 35-54%. As such, the methodology used has also been found to offer a substantial return on investment by Public Health England, for instance in comparison to costs for hospital admission and treatment. Furthermore, classes offer the additional benefit to older people of reduced social isolation. This has been identified as a particularly significant problem recently due to the pandemic.

3.56. 7-day services

3.57. The Cheshire East Better Care Fund intends to implement a 7-day working plan to increase 7 day working across health and social care across the Cheshire Health and Wellbeing footprint. The Cheshire East Better Care Fund allocated £700,000 to support a range of projects from health and social care partners.

3.58. The refreshed national high impact change model notes in relation to seven-day working it can deliver improved flow of people through the system. For the seven-day working approach to be successful the model notes that it should consider the systems demand, capacity and bottlenecks, it should be pragmatic it doesn't need to be 24/7 across all services. It should include engagement with partners and practitioners. Finally, that the approach should consider the patient and those staff that could be asked to work the weekend.

3.59. A workshop with partners was held on 15/07/2021 to look at the schemes and proposals which had been developed to date, the next steps identified include sign-off through governance and implementation of those schemes.

3.60. Flu Vaccine actions for the period 2021/22

3.61. The annual Flu report was presented to the Adults and Health Committee on 13/07/2021. The Flu report takes a backward look at the 2020/21 flu season and presented planned work to be undertaken during the upcoming Flu season. The aim of Flu vaccination programme in Cheshire East is to ensure high vaccination uptake and preparedness for what was expected to be a challenging winter flu period. The report outlined the following planned work:

3.62. Continue to offer free flu vaccination to all CEC staff, in a way which is most accessible and COVID-secure. This is most likely to continue the use of ID badges rather than vouchers, but this is flexible depending on how staff return to the office.

3.63. Deliver 'A Conversation With' sessions with the director of public health and/or health protection lead to dispel concerns and myths about Flu; but also, to educate and inform about details of the 2021/22 Flu Programme.

3.64. Engage managers to identify staff in the 50-64 cohort and front-line health and social care (as defined), before the start of the next Flu Season. Whilst

we are committed to vaccinating these staff, they will be invited by their GP, therefore it is critical this is communicated to minimise uncertainty.

- 3.65.** Engage the Community Voluntary Sector and the commissioned service Change Grow Live (CGL) to establish vaccination routes for underserved communities who may not be registered with a GP.
- 3.66.** Emphasise and reinforce key infection prevention and control messages (hands, face, space) throughout the winter season.
- 3.67.** Target at risk and underserved population groups to increase uptake working collaboratively with our partners in the NHS.
- 3.68. Mandated vaccines for frontline health and social care staff**
- 3.69.** On 9th September the Government conducted a six-week consultation on protecting patients by mandating vaccination for frontline health and social care staff in England. The key points from the briefing were as follows:
- Consultation launched on 9th September on making vaccination a condition of deployment for frontline workers in health and care settings
 - Staff may be required to have COVID-19 and flu vaccines to protect patients from infection, serious illness or death
 - Consultation will run for 6 weeks and will look at whether requirements should apply for health and wider social care workers: those in contact with patients and people receiving care.
 - If the Government were to implement this proposal, it would mean only those who are fully vaccinated, unless medically exempt, could be deployed to deliver health and care services.
 - The consultation will also seek views on whether flu vaccines should be a requirement for health and care workers.
 - The consultation will seek views on the proposals, its scope and any potential impact it could have on staffing and safety.
- 3.70.** The Secretary of State for Health & Social Care on announcing the launch of the consultation went on to state: “Many patients being treated in Hospitals and other clinical settings are most at risk of suffering serious consequences of COVID-19 and we must do what we can to protect them. We will consider the responses to the consultation carefully but, whatever happens, I urge the small minority of NHS staff who have not yet been jabbed to consider getting vaccinated – for their own health as well as those around them”
- 3.71. Personal Protective Equipment (PPE) preparations**
- 3.72.** All registered providers can still access PPE from the national PPE portal.
- 3.73.** The council’s role in providing PPE has been scaled back, the council only provides PPE to the internal Care4CE service and to registered providers in exceptional circumstances. Government issued guidance to the care sector

as at 19/07/2021 still recommends the use of PPE in a number of scenarios. The guidance notes that until the government is satisfied that the virus is under control it is vital that providers adopt the PPE practises to help limit infections.

3.74. Market and Provider Sustainability

3.75. As part of the system's ongoing efforts to ensure market and provider sustainability the following activities are undertaken:

- Cheshire EAST System Flow Group - The Cheshire Urgent Care System Management Group known as the Cheshire System Flow Group was established in accordance with the Clinical Commissioning Groups' (CCGs) constitution as part of the response to the COVID-19 pandemic to support the five Cheshire and Merseyside Local System Management Groups which were established in response to the COVID-19 outbreak and subsequent pandemic. The Cheshire System Flow Group aims to develop and oversee a Cheshire Urgent Care System work programme to include:
 - Oversee the implementation of the Home First model across the Integrated Care Partnerships (ICP).
 - Work collaboratively to ensure best use of resources and barriers to change are reduced.
 - Ensure local economy system winter and seasonal plans are integrated and fit for purpose.
 - Utilise co-ordinated demand information to inform decisions on future capacity.
 - Understand how cross border localities influence and impact the local system economy.
 - Align funding opportunities through such mechanisms at the Better Care Fund (BCF) to address fluctuations in capacity and demand.
 - Work with providers and partners to ensure that safe care can be provided to all people, through the establishment of hot hubs and other national step-up, step-down initiatives.
 - Identification and management of risks and mitigations, providing assurance to the Cheshire A&E Delivery Board.
- Strategic care home meeting – health and social care professionals meet on a bi-weekly basis to look at any risks and issues which relate to care homes as a result of COVID-19. The group also considers the latest guidance issued by government and will provide communication to the local care sector.
- COVID-19 Highlight reporting – A COVID-19 highlight report is produced on a bi-weekly basis, the highlight report monitors the number of cases of COVID-19 in care homes and the care at home market. A number of services also report the recent impact of COVID-

19 on service delivery which includes complex care, extra care, care at home, care homes, rapid response and brokerage.

- Provider briefing – a provider briefing is distributed to adult social care providers on a bi-weekly basis to provide an update on the number of COVID cases, the latest government guidance relating to COVID-19, information and advice.

4. Implications

4.1. Legal

- 4.1.1. The Rapid Response Service, Winter Pressure (block) beds and the Care at Home Services (Prime Provider and Framework Agreements) have all been commissioned following compliant procurement exercises. Any amendments to those contracts, or additional contracts that are proposed in response to the findings of and suggestions in this report will need to comply with the Public Contracts Regulations 2015 and the Council's own internal rules.

4.2. Finance

- 4.2.1. The costs of the actions listed above are met by the council and the CCG sometimes separately through base budget funding and sometimes working in partnership, for example, through funding from the much larger BCF. At the present time the funding is available to cover these without the need for any change to the Council's Medium-Term Financial Strategy (MTFS).

4.3. Human Resources

- 4.3.1. To ensure that the staff resource is in place to deliver on the winter plan. For any staff who are recruited into a fixed term contract consideration needs to be given as to potential redundancy costs if the contract term exceeds 2 years.

Access to Information	
Contact Officer:	Alex Jones, BCF Programme manager Alex.t.jones@cheshireeast.gov.uk 07803846231
Appendices:	Not applicable
Background Papers:	https://coronavirus.data.gov.uk/details/cases https://coronavirus.data.gov.uk/details/interactive-map/vaccinations https://www.cheshireeast.gov.uk/pdf/council-and-democracy/corporate-plans/cec-corporate-plan-2021-to-2025.pdf