

## Cabinet

---

**Date of Meeting:** 9 March 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

---

### 1. Report Summary

- 1.1. Cabinet have received seven 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 February 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) The Government will ease restrictions at the same time across the whole of England. The roadmap sets out four tests against which data will be reviewed – vaccine deployment, vaccine efficacy, infection rates and risk assessment of new variants of concern - and four steps over the period from 8 March until 21 June to gradually ease restrictions. Appendix 1 summarises the four steps.
- 1.4. The publication of the roadmap is welcome as it allows some preparatory time to manage the easings required on 8 March. However, it brings significant

pressure on schools, care homes and council staff providing advice and support, as well as the on-going pressures on Public Health colleagues.

- 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 will be other new developments following the publication of this report. Verbal updates will be given at the meeting, as appropriate.

## 2. **Recommendation**

- 2.1 That Cabinet notes the issues outlined in the report.

## 3. **Other Options Considered**

- 3.1. Not applicable.

## 4. **Background**

- 4.1 The WHO Weekly Epidemiological Update issued on 16 February showed a continued fall in infections with 2.7 million new cases of Covid-19 reported in the previous week (9 - 16 February).
- 4.2 From 30 December 2019 through to 18 February 2021, over 109 million Covid-19 cases and 2.4 million deaths have been reported globally. (*From covid19.who.int*)
- 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. In the week ending the 14 February an additional 2,320,419 people received a vaccination for Covid-19 in England. This took the total number of people vaccinated to 12,844,193. 198,745 are in the Cheshire CCG area. Data are not published on a local authority level.
- 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 from 16 February 2021, 582 people in Cheshire East tested positive (up to February 2021). The local infection rate was recorded as 119 cases per 100,000 population. The corresponding rate for England was 124 cases per 100,000. The estimated R rate is 0.7 to 0.9 nationally and 0.6 - 0.9 regionally as of 19 February.
- 4.8 Within Cheshire East there had been a steep decline in cases from a rate of 498 per 100,000 seen on 4 January to the locally calculated rate of 119 per 100,000 as of 16 February; a 22% decrease on the previous 7 day period. Initially rates for Cheshire East were falling more rapidly than the England average; they are now converging. Hospital capacity is improving. As of 21 February, East Cheshire NHS Trust had 48 occupied COVID beds (17% of capacity) and Mid Cheshire Hospitals NHS Trust had 88 occupied COVID beds (15% of capacity). This indicates that the national lockdown introduced in January has been successful in reducing the epidemic and its impacts on the NHS. Unfortunately, COVID related deaths in Cheshire East have risen since the beginning of January and have plateaued with 42 deaths in the last week. As deaths follow the epidemic and hospital admission curve by a few weeks, a fall is expected in the next month.
- 4.9 Case rates in all age groups have steeply decreased. For under 25 year olds, the 19-24 age group has the highest rate at 217 per 100,000 as of 18 February, followed by those 17-18 at 75 per 100,000. All other age bands under 25 are

converging around 40 per 100, 000. Cheshire East is not seeing rises in school age infections reported in the national media. Rates are falling in all age bands for the 60+ group. The 20-29 and 30-39 groups have the highest rates at 221 and 164 per 100 000 respectively as of the 19 February.

- 4.10 Covid-19 infections linked to schools in both staff and pupils continue to fall. Whilst the National Lockdown has closed schools for the majority, nurseries and special provision have remained open, and all schools remain open for the children of key workers and vulnerable children. At 15 February, there were 13 pupils and 26 staff with current positive tests making 23 schools with positive cases. While evidence suggests that transmission amongst school age children increases during term-time it is difficult to quantify the level of transmission within schools compared to other settings. The risk of infection from behaviours and contacts within schools cannot be separated from that taking place outside of schools as detailed in the paper linked below.
- [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/948617/s0998-tfc-update-to-4-november-2020-paper-on-children-schools-transmission.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/948617/s0998-tfc-update-to-4-november-2020-paper-on-children-schools-transmission.pdf)

A new ECDC report from late December reinforces the messages from the SAGE paper about being unable to quantify transmission rate in schools:

<https://www.ecdc.europa.eu/en/publications-data/children-and-school-settings-covid-19-transmission>

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. Adult social care data from 19 February showed 18 care homes with 2 or more cases.

- 4.11 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 February 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 local contact tracing teams, as well as Cheshire & Merseyside Hub, 96% of positive cases are successfully closed in Cheshire East.
- 5.4 The TTCE Programme team are looking to pilot an enhanced contact tracing model in March 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 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.
- 5.5 The Cheshire East Swab Squad was established on Monday 11 January 2021 and is comprised of 11 individuals, including 2 team leaders, who have been trained to undertake lateral flow testing (LFT) in Cheshire East. They are an emergency response team who can respond to support with COVID outbreaks or areas/settings of concern and have also been undertaking LFT for priority cohorts and internal frontline staff during the lockdown period. The team also train other organisations to undertake LFT and distribute kits on a regular basis. The team are currently supporting over 65 organisations in Cheshire East. Alongside this testing team, the TTCE Programme team are looking to roll out a range of other LFT initiatives in March as part of a large de-escalation programme for general population testing as lockdown restrictions ease. This will include a pharmacy model, to enable participating pharmacies across Cheshire East to do LFT, and the implementation of a Dynamic Response Team who will manage several mobile LFT sites across Cheshire East. The

TTCE Programme team are also working closely with DHSC to hopefully pilot a dual use testing site at Crewe.

- 5.6 *Covid-19 Mass Vaccination* – Cheshire East received its first supplies of the Pfizer vaccine at the end of December 2020 and has subsequently received supplies of the Oxford Astra Zeneca vaccine. Since then our two local hospitals and our GP surgeries have been rolling out the local vaccination programme to the priority groups identified by national policy. Thanks to their efforts and those of the many volunteers who have assisted the sessions, vaccination coverage for the first four groups on this list has been successful with over 95% coverage in groups 1-3 and over 85% coverage in group 4. From 15 February the focus of the programme has moved to priority groups 5 and 6. This includes adults with significant longer term health conditions.
- 5.7 On 17 February a Mass Vaccination Centre opened at Alderley Park Science Centre. The centre will provide the additional capacity needed for the later phases of the programme, including the second doses of the vaccinations. Due to the success of the local campaign, the borough had a nationally determined reduction in its vaccine supplies to enable other areas of the country to catch up. Work continues to enable any eligible person from groups 1-4 who missed the initial call to be vaccinated, including any social care staff.
- 5.8 The Government set a target for all persons within priority cohorts 1 – 4 of the Covid-19 Vaccination Deployment programme to be offered their first dose of the vaccine by mid-February. Care home staff and residents are in Priority Cohort 1. At the time of writing, data obtained from care homes suggest that 92% of care home residents have been vaccinated and 72% of care home staff, although it should be noted that the data has not been verified by Health colleagues. Vaccinations in two homes were delayed because of active outbreaks. A survey of care providers is currently underway to understand the reasons why some staff are reluctant to have the vaccine.
- 5.9 The Council has taken a prominent role alongside CCG colleagues in offering vaccinations to frontline Health and Social Care workers, as defined by the NHS Green Book on Immunisations, who form part of Priority Cohort 2. This includes some Council staff as well as frontline staff working in CQC registered and non-registered care agencies, personal assistants as well as others working with clinically vulnerable people such as some Housing and Children’s Providers.
- 5.10 The Council is now required to report on the number of frontline Health and Social Care workers eligible for the vaccination, the numbers offered the vaccination and the number known to have had the first dose. Out of 1,704 CEC staff invited for the vaccination, it is known that at least 1,299 had received

the first dose by 11 February 2021 with data still to be submitted from some managers.

5.11 *Communities – Clinically Extremely Vulnerable (CEV) Support: People Helping People* was a service created by Cheshire East Council which 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 quickly becoming recognised amongst all residents across the borough as an essential community service. Some key recent updates associated with this service are as follows:

5.11.1 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. 17,500 residents in Cheshire East that had underlying health issues were contacted by MHCLG informing them to take extra precautions and that if they require additional support to contact their Local Authority.

5.11.2 By the 15 February, 1,234 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.

5.11.3 On 15 February, an additional 1.7 million people in England were added to the list of people advised to shield due to new criteria being added to identify those who may be clinically extremely vulnerable (CEV). This increased the number of people being asked to shield across England to 3.9 million. The new additions have been included as a new predictive risk model is being used to help clinicians identify adults with multiple risk factors that make them more vulnerable to Covid-19. This is called the QCovid algorithm. The algorithm takes into account ethnicity, sex registered at birth, BMI, medical conditions, and other socio-economic factors. In Cheshire East, 2,613 individuals aged between 18 and 70, have been added to the Shielded Patient List which will prioritise them in receiving a vaccination. Similar figures for the 70+ cohort are expected to be also added to the Shielded Patient List week commencing 1 March. Shielding for the new and existing cohort was extended from 21 February until 31 March.

5.11.4 MHCLG have stated that the funding per head of CEV population will remain the same to support Councils with additional capacity to meet the expected increased demand.

- 5.12 *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.
- 5.13 Given the latest national lockdown, in addition to winter pressures to support the domiciliary care market we will re-commence payment for commissioned care and not claw back hours that are undelivered due to COVID-19 pandemic.
- 5.14 Cheshire East has received the second tranche of funding from Round 2 of the Infection Control fund in January. This will support care providers to limit staff movement, support safe visiting among other workforce resilience and infection control measures. The second tranche of funding has been passported to providers in accordance with the guidance.
- 5.15 The Council has also received the Rapid Testing Fund at the end of January. 80% of the fund has been passported directly to care homes and the remaining 20% will be issued to Extra Care Housing and Supported Living locations in the borough to support the increased testing of staff.
- 5.16 The Workforce Capacity Grant has also been received in February and a plan submitted to the Department of Health and Social Care conforming how this will be utilised. Providers wishing to access this fund will be required to apply using a short application form.
- 5.17 All of the additional funding streams must be spent by 31 March 2021.
- 5.18 Commissioners have formalised, in partnership with Health colleagues across Cheshire, a hospital discharge pathway for patients who are being discharged to a care home. The pathway, which reflects latest national guidance, is designed to provide guidance and assurance for care home providers. A Cheshire wide webinar was delivered to care homes on the 14 January 2021. The 'Working Together for Safe Transfers and Recovery' webinar was delivered in Partnership with Cheshire CCG, Infection Prevention control and Public Health. There were over 45 care homes who attended the webinar and feedback has been very positive particularly from providers who have adopted the hospital pathway.
- 5.19 A multi-agency Communications Task and Finish group has been established to co-ordinate and enhance joint communications between Cheshire East and Cheshire West and Chester Councils, Cheshire CCG, and other Health colleagues. This will support and supplement local ongoing communication methods such as monthly webinars, Mutual Aid calls and Provider briefings.

- 5.20 Whole home testing continues with care home residents and staff. This has proved effective in identifying asymptomatic staff members at an early stage enabling them to self-isolate to prevent onward transmission in the care home. Additional changes are to be made to coronavirus outbreak testing in care homes from Monday 22 February. The guidance from the Department of Health and Social Care has been issued to all care homes across the Borough and officers will work closely with homes to ensure the changes are implemented in a timely manner.
- 5.21 Care homes have now fully adopted the requirement to undertake Lateral Flow Device (LFD) for their workforce. This testing method compliments the current whole home testing programme that is in place within each home. LFD training webinars have been delivered to care at home providers and are scheduled in March for complex care providers.
- 5.22 Local care home visiting guidance has been revised to reflect the national requirements. Where possible, care homes are continuing to facilitate safe visiting of relatives and family members. Public Health and the Quality Assurance team are working closely with care homes to ensure they are doing all they can to support safe visiting arrangements in care homes for family members and relatives.
- 5.23 Commissioners are part of the Social Care Employment partnership task and finish group that is being led by Skills for Care. The focus of the group is to explore how to support career promotion and virtual meaningful work experience for people across Cheshire East provider services.
- 5.24 Infection Prevention Control Service (IPC) and the Care Quality Commission have undertaken focused IPC visits to a number of care homes across the Borough. The feedback and reporting detail from both agencies has been very positive in relation to the effective management of the homes outbreak IPC management plans and process they have in place.
- 5.25 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 undertake a risk management assessment and seek assurance of the effective ongoing safe service delivery for residents. A care home visiting schedule has now been developed and Quality Assurance Officers will be undertaking onsite visits to homes starting from March 2021.
- 5.26 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, 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 under 5 million items of PPE locally.

- 5.27 PPE stock has 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 PPE on a mutual aid basis as and when required.
- 5.28 *Children's Services* – Our new interim Director of Children's Services (DCS), Ged Rowney, started at the beginning of February 2021, to maximise strategic capacity within Children's Services. This role will support services to continue to prioritise outcomes for children and young people while also responding to the changing demands and challenges as a result of the pandemic. This is an interim arrangement for the next six months while we work on developing a long-term structure that will enable us to deliver our ambitious plans for children and young people and the Council's Corporate Plan.
- 5.29 We know that for some vulnerable children and young people, attending education or an early years setting increases their safety. At the start of school closedown to all pupils in January, we assessed all the children and young people known to our services and determined which would be safer by attending education or a setting. We developed an individual plan for each child who was not attending to mitigate this risk and to encourage them to attend. We are continuing to monitor the children are not attending to ensure effective support is in place. Bi-weekly safeguarding partnership meetings continue to take place, and vulnerable children who are not in education continue to be a priority for the partnership. There is a shared partnership response to safeguarding all children, especially as some vulnerable children and young people may be less visible at this time.
- 5.30 Cheshire East has been asked to speak at an LGA conference on how we have mitigated the risk to babies and children under two throughout the pandemic, which is recognition of our work in this area.
- 5.31 *Children's Social Care* – We are continuing to see increased complexity in demand to domestic abuse services. Frontline workers have received vaccinations, however our foster carers have not as they are not in a priority group (as determined nationally). We feel it is important that they are prioritised for vaccination to enable children and young people to continue to access family homes and to experience stability in where they are living.
- 5.32 Rapid progress has been made in permanency planning for children, and our cohort of cared for children is reducing. We have now achieved 23 adoptions this year.

- 5.33 *Prevention and Early Help* – Child Health Hubs – a joint venture with the NHS to enable families to access medical clinics and support in a community setting rather than needing to attend a hospital – are now running from two of our Children’s Centres. The Jaundice Baby Clinic and Unsettled Infant Clinic are running from Monks Coppenhall, the Child Phlebotomy Clinic is running from Broken Cross. We have had positive feedback from parents on these clinics, and we put in a proposal bid to Nesta to be a centre of excellence for early years provision based on our work around Child Health Hubs and integration with the NHS.
- 5.34 A new mental health training pilot is taking place for Prevention staff to support practitioners working with children, young people and parents and carers who are experiencing mental health issues, particularly as the challenges of the pandemic have had an impact on residents’ mental health and wellbeing.
- 5.35 Joint youth patrols between the Youth Support Service and PCSOs have been taking place during lockdown to disrupt young people from mixing in groups.
- 5.36 Over 21,500 vouchers have been distributed to families and young adults in need through the Winter Grant Scheme since the beginning of December. The grant is to offer practical support in the form of food and utilities payments. This has included provision of food vouchers for families eligible for free school meals over the Christmas period and February half term. In January, the scheme was extended to include support for vulnerable families to replace or access white goods. The scheme will continue until the end of March. A referral process is in place for professionals to refer families who need this support which is working well.
- 5.37 *Education and Skills* – Attendance at Cheshire East schools has now stabilised (over 7,800 pupils were attending as at 8 February), and we are confident that the right children are in school, however we continue to monitor attendance on a daily basis.
- 5.38 The Prime Minister set out the 'roadmap' for the easing of restrictions on 22 February and confirmed during this announcement that all students would return to schools and colleges on 8 March. Planning is taking place to ensure we are ready to support schools with reopening.
- 5.39 Schools and colleges across Cheshire East are continuing to carry out Lateral Flow Tests on their staff twice a week. Staff within our Special Schools and those working on a one to one basis with clinically vulnerable children have had Covid vaccines as a significant number of children and young people they work with are at increased risk from the virus. Positive Covid cases within schools had reduced before half term. Media messages were shared over half term to encourage people to stay safe and stick to the rules to support schools to open

safely after half term to vulnerable pupils and children of keyworkers and to enable Cheshire East schools to open safely from 8 March.

5.40 The Department for Education (DfE) have asked us to share our training package for schools on supporting children’s mental health and wellbeing on return to education as an example of good practice.

5.41 We are piloting a programme of support for parents to support children with phonics and reading at home and this has been well received to date.

5.42 *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.

In 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.

Total received @ 22 Feb 2021:		
	Applications Approved	Payments Made
<b>Mandatory Grants via Rates:</b>	<b>14,961</b>	<b>£ 28,319,810</b>
LRSG (open)	3,192	£ 2,255,235
LRSG (closed)#1 November	2,821	£ 4,524,324
LRSG (sector)	3	£ 2,286
CSP (wet led)	254	£ 254,000
LRSG (closed)#2 December	5,890	£ 7,786,965
CBLP	2,801	£ 13,497,000
<b>Discretionary Grants:</b>		
ARG	1,686	£ 3,199,857
<b>TOTAL</b>	<b>16,647</b>	<b>£ 31,519,667</b>

5.43 *Leisure Centres* – the third lockdown is having further significant impact on Everybody Sport & Recreation (ESAR), the charitable leisure trust established by the Council to operate its leisure centres, with income from memberships and participation reduced to zero during periods of closure. The Council has applied for financial support through the £100m National Leisure Recovery Fund, originally launched to enable the reopening of public leisure facilities following the second national lockdown in November 2020. However, this funding is unlikely to be sufficient to support ESAR during the third lockdown and to recover in the medium term. If the council wishes to ensure that the Council’s leisure centres are able to reopen following the latest lockdown and

that the trust is able to recover to a sustainable financial position during 2021/22, the Council will be required to provide additional financial support.

- 5.44 *Enforcement* – Over a two-week period in January, officers from Regulatory Services made visits to more than 1,000 businesses to offer them support and guidance to help keep their staff and customers safe. 97% of businesses were fully compliant with the current government restrictions to control the spread of the virus. Of those that were not fully compliant, these were for minor issues such as incorrect signage and were addressed through further advice and guidance. Further visits and patrols will take place to ensure compliance remains high.

## 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 the 2 December 2020 and 4 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 Feb 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.

6.1.7 The vaccination programme success is likely to result in changes to the regulatory regime. The announcements made on 22 February 2021 setting out a 'roadmap' to ease lockdown restrictions in England will require crystallising onto a regulatory regime and any legislative changes will be disseminated as soon as reasonably practicable.

## **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 £34.1m. 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; and a claims process to access this funding is in progress. 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 £10.9m, but this may rise as a consequence of the most recent national lockdown. 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**

<b>Announced</b>	<b>Funding for CEC</b>	<b>Notes</b>
<b>(England total)</b>		
<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. £2.1m claimed so far, in 1 <sup>st</sup> 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>	(£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. This is a changing position and the MTFs and TQR reflect that costs that are deferred, such as capital spending impacts (of £8.7m) and Collection Fund losses which are managed through the Collection Fund Earmarked Reserve. This position will be subject to ongoing analysis and review as part of the outturn reporting.

6.2.5 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.£240m**

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	£59,181,176	£59,181,176	

Support Grants (£3.3bn) ***			
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) (3 tranches to 29 Dec)	£3,951,278	£3,951,278	£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 (£n/k)	£671,101	£675,474	(£4,373)
Self Isolation Test and Trace Support Payment (n/k)	£310,141	£310,141	£0
Clinically Extremely Vulnerable Individuals (£32m)	£210,000	£210,000	£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)	£n/k	£n/k (pending claims process)	£n/k
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

\* 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.

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

6.2.7 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 Vaccinations are prioritising older people (65 and older) and those who are clinically vulnerable. The Government has 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 5.36, 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 will continue until the end of March
- 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.

## **6.5 Human Resources Implications**

- 6.5.1 The latest data on staff absences on 18 February 2021 are 28 (*34 last month*) staff self-isolating and working from home, 34 (*28 last month*) staff self-isolating and not working from home (role doesn't allow), 9 (*27 last month*) Covid-related absences, and 106 (*91 last month*) non-Covid-related absences.
- 6.5.2 Staff vaccinations: as at 18 February 1858 staff are eligible for vaccinations due to their role. Of these, 80.6% 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 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 and plans have been tested against concurrent risks of EU Exit and winter pressures which have materialised in the last month.

## **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