

ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE 7 SEPTEMBER 2020

COVID-19 RECOVERY UPDATE

JOINT REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES AND DIRECTOR OF CORPORATE RESOURCES

Purpose of the Report

The purpose of this report is to provide the Committee with a detailed update on progress made within the Adults and Communities Department in implementing its interim recovery plans following the outbreak of the Covid-19 pandemic, and to set out initial proposals for longer term recovery planning and strategic change in accordance with the Council's Recovery Strategy.

Policy Framework and Previous Decisions

- 2 March 2020 saw the lockdown of people and services to control the rise in infection rates from Covid-19 and protect the NHS services' ability to respond to the health needs of the population.
- In response to the pandemic, and in accordance with legislative changes and Government guidance for local authorities, Adults and Communities services have been reviewed and amended to enable continued service delivery, with critical services prioritised for staff resources and those services that are essential to support the most vulnerable service users. This was undertaken in line with Government instruction to assist with infection controls, safety of people and staff and protection of the NHS resources in acute hospitals.
- A departmental Covid-19 Steering Group was instigated with senior managers and business partners to oversee and lead the crisis response and escalation process. Sub cells of this group focus on key service delivery areas with activity data reported daily.
- Recovery planning and actions are in place to embed new ways of working enacted during this phase of the emergency, to restore prior services where appropriate, and to future proof our service delivery where this can benefit both people who use services and staff.

Services and other Key issues

Adult Social Care

6 **Older Adults and Hospital Discharge** - A Discharge Co-ordination Hub was created providing a single point of access for all hospital referrals, including community

- hospitals and the out of county hospital discharges. The Department's Hospital Team became part of the triage service located with the Discharge Hub.
- Previously adult social care undertook assessments on wards. This has changed to virtual working, except for patients with complex care requirements and/or requiring assessment under the Mental Capacity Act. Safeguarding concerns are still responded to by a face to face visit on the wards.
- The Discharge Hub provides a single space for partners to work together to safely discharge patients in a timely manner, facilitating between 150-200 discharges for County residents per week; other than Pathway 0 (home with no support) the clear majority leave on Pathway 1 (home with support). 65% of the patients that are discharged on these pathways leave on the day or the day after they become medically fit.
- The enhanced hospital discharge offer includes extra staffing from the Customer Service Centre, Brokerage Team, Review Team and Occupational Therapy (OT) Reablement service. Staff have been redeployed to work in this service also providing some Out of Hours support.
- Working Age Adults Disability Services As building based services such as Day Services and Short Breaks have ceased during this period, service users and carers have been put under enormous pressure whilst in lockdown. The Department has been working with providers to risk assess individuals and put in place alternative service provision on a 1:1 basis where this is a need to manage the health and safety of individuals or carers. Virtual multi-disciplinary team (MDT) meetings are held weekly to review risks and agree actions taken where needed.
- 11 Staff have continued to keep in contact with individuals and their carers by phone or email, visiting households using the appropriate Personal Protective Equipment (PPE) when needed.
- The Learning Disability Partnership Board has been suspended during this period and planning for the annual training conference has been postponed for this year. Members have signed up to Notify, a messaging/alert system that keeps them in touch with each other and the Council's website which continues to keep members up to date with the latest guidance in Easy Read. Members have just completed a feedback session on the use of face coverings and exemption criteria, developing a message and badge that explains why they are not able to wear a face covering due to their disability if that is the case. Written evidence of this exemption is not currently required, and they are being directed to support groups who will offer advice and guidance. The Police are fully aware and supportive of these developments.
- 13 Transforming Care progress during this period has been slow and moves from hospital to new community settings are problematic currently as support providers are managing staffing and accommodation safety in line with current Government guidelines. Adult social care staff and Health colleagues receive regular updates on the position.
- 14 Accommodation moves planned have been paused due to the availability of supply and support but are now beginning to resume where possible.

- Working Age Adult Mental Health Services There has been a rise in demand for mental health support during this period with traditional health access much reduced. Extra staff capacity has been needed to deal with urgent demands. The Mental Health Reablement Workers have been redeployed to assist with urgent mental health discharges and community support, freeing up much needed bed space and health interventions for those most at risk. The Adult Mental Health Professional (AMHP) service has continued to be delivered with the appropriate PPE being worn as necessary to keep people safe.
- 16 Safeguarding and Deprivation of Liberty Safeguards (DOLS) Whilst initially there was a decrease in cause for concern and safeguarding, referrals have now increased, mainly in hospital and residential care settings. However, as the restrictions continue, and families are spending more time together, and there is limited access to formal support activities, community referrals have also risen.
- 17 The Adult Safeguarding Board has been meeting remotely and progressing work where this has been appropriate. Capacity to progress retrospective Serious Case Reviews and interviews has been limited with member organisations focus on the Covid-19 response.
- 18 Completing DOLS assessments has been difficult with care homes reluctant to allow visits and not having capacity to provide the information needed to complete assessments. DOLS staff have been using video conferencing where they can and are progressing assessments. DOLS Court of Protection hearings have been continuing on a remote basis.
- 19 **Customer Service Centre -** The Adult Social Care Customer Service Centre has seen increased activity with shielding vulnerable people enquiries, mental health services, safeguarding and supporting hospital discharges.
- 20 Call handlers have been enabled to work from home and a new telephone system is in place to support this and email contact activity has been re-focussed to ensure a timely response.
- 21 **Shielding Vulnerable People –** The Department was asked to respond to the Government's request to create welfare services for vulnerable people, understanding both demand and capacity.
- During week beginning 23 March 2020, the NHS wrote to approximately 1.5 million people nationally whom it had identified as being at risk of contracting the Covid-19 virus because of the circumstances of their underlying conditions.
- The letter gave basic information regarding hand hygiene and self- isolation, as well as inviting people to register using an online web form if they felt they had an urgent need of support.
- In response, the County Council established a single telephone helpline to triage incoming calls on the issue and has worked closely and in partnership with local District and Borough Councils in responding and supporting shielding cohorts. Contact calls have been managed through the First Contact Plus teams managed by Public Health, and the departmental Customer Service Centre.

- During June 2020, 24,995 Leicestershire residents were identified and written to as requiring shielding. 58% (14,400) of people on the Leicestershire list have subsequently registered for support. Of these, 45% (6,500) were directly contacted by the County Council because they responded to say that they had difficulties in obtaining essential supplies or felt that their care needs were not being met. 27% (3,900) of those registering for support overall were known to adult social care services.
- 62% (8,900) of those registering for support were referred to District Councils for further follow-up. Those people had access to essential supplies and no care needs. 2% (185) were passed back to the Department for further investigation because it was felt that an adult social care intervention should be explored.
- 27 Direct Services All building-based services including Community Life Choices and Short Breaks, were required to close due to social distancing and infection control guidelines. Providers were asked to continue to provide support to individuals, maintaining contact and offering support within their own homes or with daily exercise. However, a limited availability for emergency short term provision for those most at risk has been maintained; for example, the Department has currently had occupancy within its Short Breaks service for an individual required by the Court to be removed from their current home arrangements, and also at one of the day services' establishments a person whose carer needed crisis relief.
- 28 **Emergency Care Team** 56 staff located in the Council's provider building-based services which was required to close were redeployed to support in-house reablement and provide an Emergency Care Team (ECT). This has enabled the Department to respond to urgent hospital discharge and home care provision. Day Services and Short Breaks staff have been required to adapt to working in people's homes and to different working patterns to meet this response.
- People who are no longer accessing building-based services have been supported at home and to access the community where this has been possible. Following advice from legal and insurance colleagues, a protocol has been developed that enables staff to be redeployed in to care homes to support where the service is at risk of failure to deliver a safe service to support the care and safety of residents. To date, it has not been necessary for staff to be utilised to support care homes.
- The Crisis Response home care service has continued to operate throughout this period and provides emergency support to people at home if commissioned services are unavailable.
- The in-house reablement service, HART (Home Care Assessment and Re-Ablement Team), has continued to provide services throughout the Covid-19 response to facilitate early hospital discharge/prevent hospital admission, for those who can regain a level of independence. Staff have been fully supported throughout this time with appropriate PPE and mechanisms which promote the highest standards of infection control practices.
- 32 Throughout the Covid-19 period, the Department has seen a reduction in demand for reablement services from hospital referrals, in part due to the increased discharge destination of residential care. This has impacted on the ability of adult social care to ensure that people are given the opportunity to regain independence and to return to

their homes post recovery. This has been addressed by a number of actions across the system to recognise patients with reablement potential. Increased involvement by reablement staff inside the Discharge Hub and therapy staff on the wards has helped to identify reablement goals, which has resulted in an increased number of referrals to reablement bringing capacity and demand levels closer to the normal level.

- Occupational Therapy (OT) Services The Lightbulb Service offer has paused due to anxiety from service users about working in houses and due to the unavailability of contractors and materials to progress referrals. OTs continue to support reablement and moving and handling referrals by remote working where possible and are undertaking essential visits using the appropriate PPE.
- 34 Strategy and Commissioning engagement with Adult Social Care Providers The Authority has engaged extensively with providers throughout the emergency, to understand their challenges and concerns, to tailor the Council's response accordingly, and to communicate important information. Briefings/weekly conference calls are held which are open to all adult social care providers, with separate service-focussed conference calls for residential care, domiciliary care, Supported Living and Community Life Choices (CLC) services. These include updates on finance, PPE, Infection Prevention and Control (IPC), testing, recruitment, and opportunities to ask questions directly to senior staff; attendance is good at these calls and feedback has been very positive from attendees who have found them useful and informative.
- It is recognised that one-to-one communication is sometimes more appropriate to explore detail and confidential matters, and the Authority has:
 - telephoned individual home care and care home providers frequently (between daily and three times a week) to discuss issues including workforce, infection prevention and control, and capacity, and to offer bespoke advice and support;
 - offered support to complete national and local data trackers;
 - publicised a Provider Communication Line, which provides one route in to the Department for queries on a range of issues;
 - made available a PPE emergency service, operational seven days a week, to triage urgent requests for PPE;
 - launched a care homes infection prevention and control service;
 - developed a targeted approach for providers in difficulty, with early identification of issues, support to prevent crisis, and virtual and in-situ support in the event of provider instability, including in Covid-19 positive environments.
- **Support to Care Homes** In response to a national Ministerial request, a letter outlining the support to care homes was submitted to Government covering:
 - testing access and requirements;
 - PPE access and requirements;
 - finance;
 - workforce recruitment and training;
 - clinical support;
 - advice and communication;
 - preventing infection;
 - managing Covid-19 cases.

The Committee previously received a briefing note on this issue dated 3 June 2020.

37 Subsequently a Care Homes Support Plan has been published which details the support available in all the areas noted above. This can be accessed via the following link:

https://bit.ly/2ExrYBi

- There are 182 registered care homes in the County. As of 14 July, 72 of those care homes have experienced an outbreak; this number equates to around 39%, which is in line with regional and national averages. Most of the outbreaks occurred in April and May and currently there are only seven ongoing situations and very few new outbreaks reported since early July.
- 39 The Council has paid close attention throughout the crisis to capacity within its provider markets, and through new uses of data has worked to understand demand and maximise capacity and 'flow' in the system.
- 40 Providers have been instrumental in submitting data regularly through national and local 'trackers' which have informed this work. Officers have also followed up any matters requiring clarity to discuss matters of risk, and to encourage and support providers to complete the data trackers.
- Tolerances have been set with associated escalation as necessary, such as where capacity dips or where providers are experiencing workforce issues.
- Domiciliary care providers have maintained a good level of capacity throughout the period of the pandemic. Infection rates in both service users and staff have remained low and not significantly different to that of the general population. As of 14 July, domiciliary care providers report that less than 1% of service users are Covid-19 positive, and only 10% of providers are working with people who are symptomatic. Domiciliary care providers report that they can take on new business, and the number of people awaiting care is lower than pre-pandemic levels.
- Dementia Support It is recognised that the Covid-19 period has been very challenging for people with dementia and their family and friends who support them. The Authority has:
 - communicated dementia support tools for dealing with Covid-19;
 - disseminated advice relating to walking with purpose;
 - promoted the Dementia Support Service;
 - published information for and provided support services for carers;
 - issued guidance on capacity and consent relating to the Covid-19 test.
- The Authority has worked closely with external agencies in helping care homes to access partner training and services.
- 45 **External Recruitment Support** Through the Department's <u>Inspired to Care</u> team, a free offer was developed quickly to recruit and onboard care professionals on behalf of providers to fill any potential gaps in the workforce. The Inspired to Care team was expanded to give them the capacity to manage the recruitment process from candidate attraction to first day of work. This offer included a values-based interview

process, free Disclosure and Barring Service and a free rapid-induction programme, commissioned by Skills for Care, including induction training via e-learning (virtual care certificate). This contributed to a reduced time to hire period of between 20-30 days.

- A large recruitment advertising campaign, 'Keep Leicestershire Safe and Well at Home', was launched to support the recruitment of care and support professionals during the pandemic. The campaign featured across social media, radio, broadcast, digital outdoor advertising space, county wide circular newsletter 'Leicestershire Matters' and televised news including BBC East Midlands Today. A 'Refer-a-Friend' scheme was launched for the current external workforce to participate in and boosted the impact and reach of the campaign by showcasing the positive impact care professionals have on the lives of the people they support, showing how they go above and beyond to ensure that vulnerable people stay safe and well.
- Over 2,000 applications, CVs and enquiries have been received. The Department was able to attract, recruit, onboard and place 56 people into external care professional roles. The remainder were and continue to be sent to social care employers to supplement their attraction efforts for them to contact directly.
- As redeployed staff moved back into their substantive roles, the Authority is now transitioning away from the agency model and is supplementing the external market with candidate leads generated through continued efforts in attraction. In the last three weeks, over 590 CVs and candidate enquiries have been sent through to the external market to process directly, and appreciative feedback has been received from the external provider market who has employed many of the candidates.
- 49 **Direct Payments** More than 3,000 service users and carers chose to receive Direct Payments to manage their care and support rather than using managed services. Support has been provided for these service users and carers in order to help them manage their care and support whilst staying safe.
- 50 Regular mailshots have been sent out alongside a dedicated Helpline and information on the Council's website, giving Direct Payment holders advice and information on Covid-19 related issues, e.g. shielding and self-isolation, PPE and employment issues as well as information about how to manage their care and support whilst their normal care services were reduced or suspended.
- Colleagues redeployed from Business Support and Library teams, supported by managers, have provided invaluable support to the Helpline allowing Customer Service Centre and Care Pathway colleagues to focus on more urgent work. The use of agreed escalation points provided quick access to social care teams where care services were in danger of breaking down or where carer strain became an issue.

Communities and Wellbeing

Due to the pandemic and following the lockdown announcement in mid-March 2020, action was taken to suspend most Communities and Wellbeing services as they represented predominantly public facing services.

- All venues, activities and learning programmes closed or were suspended by 20 March 2020, in line with Government advice. Staff were asked to work from home with immediate effect and appropriate IT equipment checked to ensure that key officers could work from home. Some staff continued to carry out regular site inspections to ensure Health and Safety compliance and security throughout the lockdown period. Volunteering activity was suspended.
- Notices and information explaining the closure were placed on venues, websites, social media outlets and an e-blast was issued. Where necessary, customers were contacted directly, for example where advanced bookings needed to be cancelled and refunds issued. Library charges for overdue books were cancelled and book loans were extended in advance of the closure dates to enable people to loan up to 24 books.
- A central enquiry line was established, and Frequently Asked Questions (FAQs) bulletins were issued to inform people of the arrangements that had been made.
- As the lockdown was implemented, the service was in the closing stages of an HR action plan to re-structure its staffing resources. This was completed during the lockdown period by introducing virtual interviews to complete the final stages of the process. The new structure became operational from 1 July, meeting its original deadline.
- As part of the response to supporting critical services, over 60 members of staff have been redeployed to operate the Direct Payments Helpline; support recruitment to social care, helping with the reopening of Country Parks, PPE distribution and transport. Some of this work is still ongoing. In addition, casual staff from the Heritage and Creative Learning Service have been furloughed.

Support Services

- PPE Strategically, the response to shortages of PPE has been to ensure that PPE products (face masks, gloves, aprons etc) have been sourced from suppliers to support the Council's internal workforce, and to support where appropriate external providers (care homes and domiciliary care providers) who may have had challenges in sourcing products from their own designated suppliers.
- Military aid was established across the wider Leicester, Leicestershire and Rutland (LLR) footprint to procure emergency supplies for a range of stakeholders (including the Council and its providers). The Council acted as a broker between external residential and domiciliary care providers, schools and Local Resilience Forum (LRF) emergency supplies.
- Operationally, a central procurement hub was established to draw information from internal services to better understand what levels of stock were required to maintain services and to place strategic orders to maintain supplies. Regular track and monitoring processes were put in place to gain understanding of the external provider position with accessing appropriate PPE, and the issue has been a standard item on weekly provider teleconferences.
- A robust verification process through Trading Standards services underpinned the procurement to ensure purchases of safe product. This has proved challenging as

- around 70% of products reviewed failed to comply with the necessary safety standards and legal requirements. Although this has meant that no money has been wasted, it has proved challenging to source quality products.
- 62 **Aerosol Generating Procedures (AGPs)** A multi-agency response was instigated to ensure that staff (residential care, domiciliary services and personal assistants employed by those on Direct Payments or personal health budgets) across LLR had access and were 'fit-tested' to FFP3 masks.
- A particular area of challenge has been the procurement of these specialist masks (FFP3). Supplies have proved very hard to secure; the situation is being continually monitored.
- 64 In addition, the Authority has not been able to order high volumes of PPE products due to suppliers placing limits on order numbers and suppliers are also not always able to provide products previously reviewed and felt to be satisfactory, necessitating further checks.
- 65 **Adult Social Care Finance -** Reconciliation of invoices and payments have continued during this period with payment runs still as planned. Financial assessments have continued remotely where possible for new services.
- The introduction of the Hospital Discharge guidance has seen all discharge and hospital avoidance packages from 19 March 2020 commissioned by adult social care but funded by the Clinical Commissioning Group (CCG). The guidance was clear that this support would be free at the point of delivery for all until the emergency period was announced as ended. That meant that financial assessments were unable to be progressed and any service user contributions collected for this period.
- 67 Contact has been made with people to advise them of the current funding situation and of the need to undertake a financial assessment when Health funding ceases.
- 68 **Integrated Adult System (IAS)** The LAS (Liquidlogic Adults System) team have been supporting teams to amend processes to enable the correct information collection and reporting for the Covid-19 period.
- Remote LAS support has been available to staff as they work from home and changes to systems have been communicated.
- The LAS team have provided significant support to the Shielding Vulnerable People work as information and data supplied to the Department was poor and incorrect in many instances. LAS was used to assist with the identification of people on the list for contact.
- 71 **Business Support Teams** Business Support staff have continued to maintain a minimal presence at office bases to support office safety and accessibility for those staff who are unable to work from home either due to work requirements or personal circumstances.
- 72 Staff have also maintained a physical support service to teams with clerical and administrative duties needed to ensure service delivery and have worked remotely

where possible with operational teams, to continue the delivery of services and contacts needed.

- 73 The team has also undertaken additional roles and tasks to support:
 - shielding work;
 - the administration of the aerosol generating procedure;
 - mask fit testing booking;
 - volunteer support (distribution of packs and expense claims);
 - Direct Payments helpline and the production and administration of PPE packs for visits to service users and contracted providers and first aid boxes.

Some of these roles will be retained through recovery into business as usual and will need to be factored into capacity analysis.

Recovery

Recovery Strategy

- 74 The County Council's Covid-19 Recovery Strategy (2020-21) sets out the key principles, governance structures and phases upon which recovery of the Council's functions and services will be based. Interim Recovery is described as:
 - The need to ensure safe service recovery in the short-term protecting the vulnerable and helping to ensure the Council delivers against its commitments;
 - Will require Heads of Service to develop and implement practical interim
 arrangements for service users, partners, suppliers and staff. Such arrangements
 will be necessary and applicable to the short-term but may not be appropriate or
 sustainable for the longer term.

Guidance Review

The Department has put in place a Recovery Steering Group to co-ordinate the Department's service area recovery plans and provide oversight and governance for the changes identified and recovery actions agreed. Assistant Directors and Heads of Service within each service area have identified how the service needs to adapt or has adapted.

Recovery Planning

- All service areas within the Department were asked to identify all changes made to service delivery and processes that have been put in place as a response to the Covid-19 emergency period. The changes were then logged, and a tracker was developed to help understand the impact of the changes in place and what would be needed to provide resilience at the right time to ensure that the models of delivery were flexible and timely, given the uncertainty of the pace and scope of any recovery.
- Opportunities and new models of delivery that have worked well are captured and plans to adopt and embed where appropriate are built in to recovery plans.

- 78 Changes and new ways of working have been put into the relevant phases of the Department's recovery timeline and action plans are being scheduled for sign off by the Department's Management Team.
- The tracker is used to monitor progress of the actions towards recovery and highlight any risks or challenges for implementation.
- The Department is keen to ensure that members of the Council's Recovery Group have links with other departments and other key partner organisations' recovery plans, to ensure best fit and influence in line with the Department's service outcomes and Adults and Communities Strategy.
- In total, 113 changes to ways of working due to Covid-19 have been noted in a Recovery Plan. Recovery actions are being phased in line with Government plans and links with other departments and key organisations' recovery plans to ensure synergy and coherence. Further work will also be undertaken to ensure adherence with, or changes to the Department's service outcomes and Adults and Communities Strategy.

Business Area	Number of changes
All of Adults and Communities	9
Care Pathway	24
Direct Services	7
Strategy and Commissioning	22
Communities and Wellbeing, Finance, Business Support	51
Total	113

Staff and Manager Engagement

- A series of deep dive workshops to explore areas of change and what the new normal should look like have been undertaken. The 90 minute duration of these virtual sessions focused on the following areas:
 - Pathways of Care;
 - Target Operating Model (TOM) Recovery;
 - Community Life Choices (CLC);
 - Hospital Discharge;
 - · Communities and Wellbeing;
 - Digital Opportunities;
 - · Recruitment, Induction, Training and Wellbeing;
 - Direct Payments, Finance and LAS;
 - Business Support;
 - Staff and Office Based Accommodation;
 - Commissioning and External Market.

- 83 Engagement in these sessions by staff was good, with an average of 40 attendees per session. The sessions were well received, and comments and questions were facilitated to ensure that lessons learnt were captured as well as suggestions for improved and resilient practice going forward.
- The Department's Recovery Steering Group has been responsible for co-ordinating and driving the Department's recovery and resilience planning. This meets twice weekly and is managed by the Covid-19 Steering Group with extended membership to include the Department's Senior Leadership Team and relevant business partners, to ensure that specific requirements for corporate support and alignment to corporate recovery plans are considered.
- The Department has Assistant Director lead representation for recovery on the Council's Policy and Strategy Working Group, and the corporate principles and guidance for the Council's recovery have been embedded in the Department's recovery planning.
- 86 Each change has been identified on a recovery tracker and changes have been RAG rated to establish the correct level of governance and scrutiny needed for recovery. The tracker is used to monitor the progress and phasing of recovery actions and is reported twice weekly to Steering Group members.
- The Department's Departmental Management Team considers where changes may have significant impact on finance or require corporate or political exception reporting, impacts on service users or statutory responsibilities. Recovery update reports are completed in line with the Council's reporting requirements.
- The Lead Members are regularly updated on recovery plans and actions at their regular briefings with the Director.

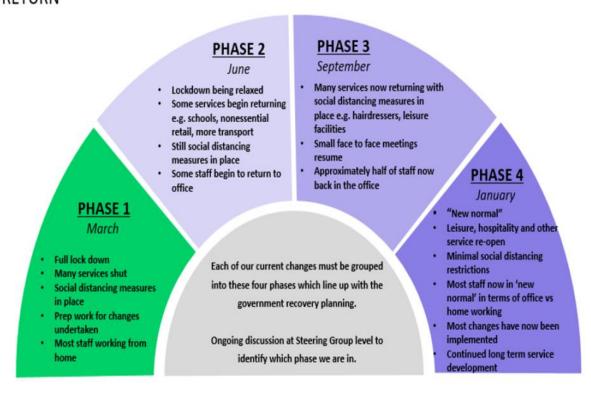
Service wide changes

- All staff who can work remotely have been enabled to do so with IT kit and environmental support made available.
- Work station risk assessments are in place and Health and Wellbeing tools are available online with regular corporate and departmental updates sent.
- 91 PPE stocks are now located at locality offices for use by staff who need to visit households.
- The message to staff is to work from home and use remote communication where possible limiting face to face contact to those that are essential.
- 93 Virtual meetings have been set up with providers and partner organisations to support the continued delivery of services and integrated ways of working.
- 94 Regular contact with service users and carers for safe and well checks have been established with risk assessments and escalation points in place.

Current Position

The diagram below illustrates the anticipated phasing of recovery and the Department is currently implementing Phase 2 recovery changes identified in each service area.

A&C COVID-19 RECOVERY PLANNING PHASED RETURN





Service Area Specific Recovery Actions

Adult Social Care

- Older Adults and Hospital Discharge Recovery actions The Department is looking to retain, in part, the enhanced hospital discharge offer as further instruction and guidance is due to be issued by the Government, which will move the Department into part 3 of the NHS Covid-19 response. Demand and capacity modelling is underway for Care Pathway teams and the HART service to ensure the best use of staff resources to future proof services.
- Post discharge packages are currently commissioned by social care but funded by the CCG as part of the emergency discharge process. Care Pathway staff are reviewing the post discharge packages in readiness for the end of the emergency period and return to appropriate funding sources including self-funding and social care funding.

- New Direct Payments requests are being processed after a pause due to the changed funding arrangements for hospital discharge.
- 99 **Working Age Adults Disability Recovery Actions** Planned accommodation moves have recommenced for those people who are currently in residential care being supported to move to less restrictive options and more independent living settings identified.
- 100 Community Enablement Workers are now picking up enablement programmes with individuals, working with people to increase independent living skills.
- 101 MDT meetings will continue with partners in health and housing and risk assessments used to identify escalation as appropriate to manage risk of deterioration and harm.
- 102 Working Age Adults Mental Health Recovery Actions Mental Health Reablement Workers are resuming activity to support recovery and self-reliance of individuals who are struggling to manage their daily living needs through depression, anxiety, low self-esteem and mood.
- Support for Hospital Discharge will continue to be in place linking with the Housing Enablement Team to ensure suitable accommodation and support is available on discharge.
- 104 **Safeguarding Adults Recovery Actions** The Safeguarding Adults Board has resumed work on Adult case reviews and are progressing the LLR business plans.
- 105 The Department continues to work with care homes to ensure that good information and practice with regards to infection control and restrictions in place are safe and that people are safeguarded from harm.
- 106 The Department is undertaking investigations where needed and agreeing action and support plans to keep people safe.
- 107 **DOLS Service Recovery Actions** Best Interest Assessors are continuing to progress assessments remotely where possible and are doing face to face reviews where this is possible.
- 108 Care homes are still reluctant to allow visiting except for close relatives due to increased infection risks.
- 109 DOLS assessments are being prioritised to ensure new requests and appeals are dealt with in a timely way and that reviews are given a proportionate response.
- 110 In-House Direct Services Provision Recovery Actions Emergency provision has been maintained for Day Services and Short Breaks during the emergency period and this continues to be provided.
- 111 The Department is looking to resume some services to support carer breakdown and high risk service users in need of additional support from the end of August, subject to continued removal of lockdown restrictions.

- 112 All buildings have now been signed off as Covid-19 compliant and the process for the safe return of individuals is in place.
- 113 **Emergency Care Team -** Staff from closed services will continue to provide support to community based reablement and crisis response with a limited number supporting the phased return of building based service provision.
- 114 **Strategy and Commissioning Recovery Actions** The Authority's monitoring of data submitted by care homes indicates that the sector is experiencing increasing levels of vacancy, as occupancy within homes diminishes during the crisis. Analysis is underway to understand how vacancy levels relate to financial sustainability for providers, and to develop a risk-based approach to the Authority's future market shaping for care home services.
- 115 **Domiciliary Care Actions** The sector has remained relatively stable during the pandemic and there have been no major issues in meeting demand. The sector has been actively supported with advice around PPE and a proportion of the Infection Control Fund has been utilised to support providers with additional costs. Review of low risk packages continues to look at those packages that need to continue. A temporary contract for the delivery of hot meals to older residents was also utilised to take the pressure off domiciliary care providers at lunchtimes.
- 116 Weekly conference calls with providers have been relatively well attended and are expected to continue on a fortnightly basis for the foreseeable future.
- 117 **Community Life Choices Actions –** Considerable work has been undertaken to support CLC providers and Direct Payment holders who may purchase services from them. When the pandemic began, and buildings-based activities had to be paused, the Department worked with providers to risk assess all 1,200 individuals who used the service to highlight those that were particularly vulnerable.
- 118 Providers have been creative in looking at alternative ways to deliver their services making use of technology such as Zoom, and the Department has established a learning platform by which providers could collaborate and share best practice.
- 119 Direct payment holders have had a dedicated phone line to call with their queries and concerns and several mailshots have gone out to them on issues such as finance, PPE and training.
- 120 Moving forward, the Department is looking at the medium term shape of CLC as it is not yet possible to return services to the pre-Covid-19 model. Over the coming months all service users will be reviewed to fully understand their service needs and work will take place with providers on how they can shape their service offer for the next six months. Longer term, the Department will be looking at a major procurement of CLC including looking at various models to achieve this with an aim to adapt to the changing aspirations of individuals, in particular young people coming into adult services who may have a different perspective on what daytime activities should look like.
- 121 **Continued Support for Care Homes** Considerable activity has been undertaken to support care homes. Homes have been supported with testing, coping with staffing issues due to staff self-isolating and the additional costs of PPE. Homes have successfully been able to access two rounds of the Integrated Better Care Fund (IBCF) to help meet additional Covid-19 related costs.

- 122 There is regular contact with providers and each provider has a weekly 1:1 phone call and there is also weekly (moving to fortnightly) conference calls that providers can dial into to keep up to date.
- 123 Nearly 40 bulletins have also been produced to keep providers informed. The Department has also made its support offer to care homes accessible via the Care Home Plan which is an interactive document containing the latest advice and guidance for providers.
- 124 Occupancy is beginning to emerge as an issue for some providers, as residents move on or pass away, lower demand means that places are not being re-filled. The Department is trying to proactively work with providers with the most vacancies to address this issue and shaping the Care Home Market will be a major focus in coming months as the after effects of Covid-19 begin to impact on long term viability for some homes.
- The Department is also working with providers to help them complete the National Care Home Tracker. The Tracker helps to identify areas of concern to providers and to benchmark areas of strength and weakness compared to the national average. Accessing primary care support and identification of the Lead Clinician have been flagged as areas of particular concern and the Department is working with Health partners and providers to address this.
- 126 Homes have also been comprehensively RAG rated to identify those most in need of intervention and support.
- 127 Work is also taking place to return to pre-Covid-19 levels of support given to care homes on quality and to drive improvement. This includes looking at ways this could be achieved which would minimize visits into homes but still be robust enough to have a real impact.
- 128 Procurement and Contracts Resuming Several procurements were put on hold during the pandemic. Some procurements were undertaken during the pandemic to meet needs which emerged such as the temporary contract for the home delivery of hot meals and the procurement of PPE. Much of the paused procurement activity is now being restarted.
- 129 The contract for Stairlift Maintenance has just been completed and awarded and work on two major procurements, the Dementia Support Service and Home Care for Leicestershire (Domiciliary Care) will resume. Preparatory work for the Home Care for Leicestershire will start in October so the procurement can be achieved in line with the revised timeline which was agreed by Cabinet in June.
- 130 Adult Social Care Finance (ASCF) Recovery Actions The main components of ASCF recovery are in relation to service user payments, the End of the Covid-19 Recharge Period, induction training for Care Pathway staff and recruitment.
- 131 <u>Service User Payments</u> Whilst offices have been closed many service users who would normally visit to collect their money have been transferred over to an emergency cash card system. Only service users whose risk assessment suggested the safety of this option have been transferred, others were still supported locally generally, but not exclusively through a revised appointment system.
- 132 Initial evaluation of this initiative has established that the provision of cash cards, would in most cases, be the best interest decision and will therefore be the default

- position going forward. Work is now in progress to establish any associated costs and any necessary alternatives for service users for whom the Council is an appointee or deputy.
- 133 End of Covid-19 Re-Charge Period The Department has received notification from the NHS that the re-charge period will end on 31 August 2020. An action plan has been developed in conjunction with the Care Pathway and Business Support colleagues to ensure that those service users affected will have all the necessary information relating to this change and that all related Care and Support and Financial Assessments are facilitated.
- 134 <u>Induction Training for Care Pathway Staff</u> Induction training on ASCF was halted due to the pandemic. Consideration is now being given to how best to provide this training virtually and how best to use the technologies available. The ultimate aim will be to have a range of interactive modules on the Learning Hub.
- 135 First 'Microsoft Teams' inductions have been set up for 24 August and 7 September 2020 which if successful would become the new normal.
- 136 <u>Recruitment</u> Recruitment was put on hold at the height of the pandemic. This has now recommenced and systems to facilitate the training and mentoring of new staff have been devised recognising the requirements of keeping staff safe.
- 137 **IAS Recovery Actions** Much of the work of the IAS support team had to be suspended during the pandemic including floorwalking though helpline support has been maintained throughout.
- 138 Induction training sessions for new Care Pathway staff were also suspended and a virtual alternative was trialled. Work has now been instigated to look at more robust interactive alternatives.
- 139 The team also supported the Shielding work in collaboration with corporate and district colleagues. Recovery will require the review of the records on LAS and the instigation of retention schedules this will be subject to more information expected from Ministry of Housing Communities and Local Government in early September.
- 140 The team is now returning to work associated with IAS roadmap releases and to matters associated with the Fit for the Future Programme.
- 141 **Business Support Recovery Actions** Business Support teams are now supporting recovery in making offices Covid-19 secure, facilitating any actions to ensure corporate sign off and maintaining daily occupancy registers. The team is also supporting the corporate IT rollout across the Department. The pandemic forced services to work differently and this is now reflected in further recovery work:
 - using digital systems and technology to streamline and facilitate workflow including further developing the on-line task request forms and case conferencing;
 - working with Property Services on the use of buildings/offices and local consideration of opening hours;
 - review of Business Support.

- 142 **Communities and Wellbeing Recovery Actions -** Whilst the physical aspect of services was suspended, a range of virtual activity was developed across the various service areas of Communities and Wellbeing.
- 143 All services continue to signpost local people via the Council's website to best practice activities, information, resources, advice and guidance. In addition, the Council's own digital offers have been enhanced with the creation of new content.
- 145 **Libraries** Digital loans from the library service rose dramatically at the start of lockdown and have continued to rise, with June 2020 figures showing a rise of 136% on the same month the previous year.
- 146 The library online offer has been further developed to include or signpost people to more digital content including:
 - Two Code club sessions helping families and young people learn computer coding skills (50 families taking part).
 - A monthly book club for people to discuss their reading with an online community (1,000 views).
 - Virtual Wriggly Readers sessions targeting under 5s and families (1,300 views within 24 hours of posting).
 - The annual Summer Reading Challenge with national partners has moved online, encouraging young readers to maintain the reading habit during the summer months. https://summerreadingchallenge.org.uk/
 - The Reading Well for Health and Wellbeing offer has continued to guide people to free resources. One of the reading lists focuses on mental health and wellbeing.
 https://reading-well.org.uk/books/books-on-prescription/mental-health
 - Volunteer partners have moved some of their shared reading activities online.
 These sessions offer therapeutic reading activity for those emerging from their experience of mental health issues. https://www.leicestershiresharedreading.org/
 - A virtual work club has been set up to assist people with job searching and job applications.
- 147 The library at Gartree Prison was closed and resources put on the wings for prisoners to access and staff supported delivery through provision of quizzes and competitions. The prison is now moving to recovery through a click and connect service.
- 148 All Council funded libraries are now offering a Click and Collect library service as well as some libraries that are managed by local communities. This enables customers to order books for collection at the following libraries.
- 149 As of 10 August, all 16 Council funded libraries are offering managed access to browsing in the library. Customers can book online or telephone to book a slot. On entering, people will be asked to record their contact details for test and trace purposes. Hand sanitiser will also be provided for people to use on entry. All returned books will be placed in quarantine for 72 hours before being returned to shelves.
- 150 **Museums and Heritage** The planned summer exhibition for Charnwood Museum DoYouSeeWhatlSee? was transformed into an online exhibition, allowing nine months of co-produced work by over 100 people from targeted groups (Homeless,

- Black and Minority Ethnic Communities, learning difficulties, vulnerable young, migrant communities), to be showcased.
- 151 A virtual tour of the 1620s House and Garden was developed by staff and has been made available on the website, allowing people to interact with this building during lockdown.
- 152 Services continue to deliver against externally funded projects. These include the Arts Council funded 'Project Enlightenment', which is working with artists to develop a new Science, Technology, Engineering and Maths educational programme for the 1620s House and Garden; 'Unlocking Sounds for People with Dementia', which is led by the British Museum and being delivered in partnership with Leicester University and Museum Development East Midlands, funded by Arts Council England, which has been a key resource for museums across the County and the East Midlands, providing advice, guidance and online training. Work has taken place with funders and partners to re-shape these projects in light of Covid-19, including making greater use of digital engagement.
- 153 The links below are examples of some of the new and enhanced content created during this period:
 - https://www.bosworthbattlefield.org.uk/ 899 views of the new home learning content since release at end of April.
 - https://www.doningtonleheath.org.uk/ 206 views of the new home learning content since release at end of April.
 - https://www.communitycurators.co.uk
 - https://www.leicestershire.gov.uk/leisure-and-community/libraries
 - https://www.mdem.org.uk
 - https://www.leics-als.ac.uk/
- 154 The service has used social media such as Facebook and Twitter to continue to engage with our service users.
- 155 **Record Office** The two most popular family history services, Ancestry and Find My Past, have been made available for library and Record Office customers to access from home instead of on site therefore extending its reach beyond the Record Office.
- 156 Work was started on collecting and recording local people and communities' experiences of the pandemic. This has included the launch of #Isolatedbutinspired, a social media project to collate and curate videos representing how people spent their time during the Coronavirus pandemic. The aim is to share the positivity and sense of community evident in recent months and eventually preserve as a digital resource. Over 2,600 people have contributed so far.
- 157 The Record Office maintained its response to subject access requests relating to legal action/public enquiries.
- 158 Museums, Heritage sites and the Record Office are planning managed access to venues from early September. This is to allow remedial collections and building preparation to take place before opening.

- 159 The Collections and Conservation Team is supporting the Strategic Property redevelopment of Snibston Colliery Park, around the development of a Heritage trail and relocation of material on site.
- 160 **Creative Learning Services** School customers (as part of our Creative Learning Services offer) were contacted to determine what services they required to maintain learning from home and classroom resources for children of key workers and vulnerable children. Work is returning to normal in preparation for supporting subscribing schools from September. Consultation is now taking place with schools on future requirements and the development of a new digital offer.
- 161 Audience Participation Team The Audience Development Team is piloting a Virtual Arts Award, in response to Covid-19 and working with children in care through virtual schools and corporate parenting. The model will be used to develop a Leicestershire 'Culture Mark' to engage and recognise diverse communities through heritage and arts.
- NextGen2020 Cultural Festival has been postponed until September 2021 and work is taking place on a young person's heritage forum to reframe the focus. Over 100 young people will co-design and co-produce this event communicating to professionals how they can use culture to support young people to be their best selves.
- 163 A volunteer remobilisation survey has been designed which will be sent out to over 400 Communities and Wellbeing volunteers. It will aid recovery and explore and mitigate, where possible, barriers to re-engagement.
- 164 In October, the Audience and Participation Team will commence work to develop a series of culture hubs, based primarily in Community Managed Libraries. The aim is to widen community engagement in culture through locally determined programmes of activity delivered by local CML volunteers and through online methods. This will enhance existing local capacity and networks and bring communities together. The team will also develop a programme of time-limited projects aimed at engaging specific community audiences at risk of isolation such as adults with learning difficulties or autism.
- Leicestershire Adult Learning Service (LALS) At the start of the lockdown period, approximately 2,800 adult learners and apprentices were studying with the Council's Adult Learning Service. To help ensure learners were able to continue progressing towards their goals, classes have been moved online where this is possible. For those more practical courses where this has not been possible tutors have continued to keep in touch with their groups and provide support through the lockdown period.
- 166 Ensuring learners are not disadvantaged is a priority and LALS tutors have been grading work of those learners studying GCSEs and other qualifications. A range of new online courses has also been developed including: Wellbeing and Good Mental Health (delivered in collaboration with Leicestershire Recovery College), pre-GCSE English and Maths and Gaining Confidence using ICT https://www.leics-als.ac.uk/course/view.php?id=4296.
- 167 The Vulnerable Person Resettlement Project (funded by the Home Office and delivered in partnership with Charnwood Borough Council) has provided extra

- resources for refugees to access IT equipment. The programme, which is currently supporting 28 families, enables learners to develop their language skills and further improve the use of IT in a safe environment.
- In collaboration with local food banks and Children Centres, the Family Learning Team is sending out packs of resources to support home learning and LALS Learning and Work Advisers are providing online Information, Advice and Guidance (IAG) to support residents who have recently become unemployed.
- 169 Looking forward to the next academic year, LALS are planning changes to the range of courses traditionally offered and methods of delivery are being adapted. Some courses will continue to be delivered online where this has proved successful and there will be a mix of online and classroom-based activities across all subject areas. The traditional days and times of delivery are also likely to change to accommodate smaller groups and flexible working.

Support Services

- 170 It is clear that the good practice that allowed services to operate safely and protect staff and service users throughout the pandemic should be maintained whilst also preparing for any future localised outbreaks or wider national wave. The Department will continue to follow Public Health England guidance and ensure the supply of PPE.
- 171 In preparing for winter we will be working with health colleagues and other LLR partners to ensure the resilience of our own services and of those that we commission and their readiness to facilitate discharge.
- 172 The following work is currently underway:
 - Seasonal Flu Planning the Department is working at pace corporately and with the newly formed LLR Sustainable Transformation Partnership Flu Board. The action planning encompasses both internal and contracted services.
 - Cold Weather Planning the Department and LLR partners are meeting to sign off this year's action and communication plans.
 - Brexit risk assessments and plans are being reviewed corporately and the Department is involved in this process.
 - The Authority now has a robust centralised procurement and stock control system
 to mitigate any threat to PPE supplies. The LRF Emergency stock remains as a
 back-up with both the Quality and Contracts and Direct Payments Enquiry
 line/Helplines remaining in place to provide additional support, guidance and
 access points to this stock should it be needed.
 - Winter Pressures the LLR Health Resilience Partnership will be meeting in due course to progress any necessary planning outside of that already in place for Covid-19.

Lessons Learnt and Strategic Change Proposals

Core recovery changes and lessons learnt for all departments in Adults and Communities

173 Staff remote and flexible working will continue into and beyond recovery given the positive productivity and capacity results.

- 174 Staff and teams have adapted to alternative methods of service delivery that can bring some efficiency savings and reduced costs going forward.
- 175 Health and wellbeing services are now in place to help people to adapt to the new ways of working.
- 176 The further utilisation of IT and care technology is being actively explored to enhance our service offers.
- 177 Integrated working with partners in Health and Housing will resume at pace to deliver system wide benefits and cost savings.

Recovery Principles

178 The Department has followed the Corporate guidance (as set out below) in devising its recovery actions and decisions to ensure that alignment with the Council's direction of travel and plans for recovery and future service resilience.

Guidance Points and Expectations

It is important to ensure that the key considerations outlined below are reflected in the interim recovery plans. Existing recovery plans within Departments can be reviewed alongside this guidance.

Area	Guidance Points	Support	
DMTs/Change Boards are best placed to manage the process of Recovery Planning, given the varied starting points. Transformation Unit Business Partners available to provide support and to assist with coordination.			
Finance (Nick Wash)	 Minimise the cost of Recovery. Spend approval limits established, with additional costs to be mitigated within service/Branch/Department budgets wherever possible. Alternative, more efficient, service options and delivery approaches to be evaluated to reduce cost. Consider the impact of service recovery plans on LCCs insurance requirements Consider the impact of service recovery on income levels and existing SLAs/Contracts 	Finance BPs	
Workplace (David Scott)	 Working from home to be the preferred model in any interim plans. Define the true need for office/premises space, IT requirements and face-to-face interactions with staff and/or service users using Workplace and Health & Safety guidance. Where necessary, ensure the application of social distancing measures for staff, visitors and service users. 	Workplace & Wellbeing Property BPs	
Wellbeing (Gordon McFarlane)	 Ensure the ongoing impact on teams is understood - in areas such as productivity, wellbeing, motivation, culture – accessing the required support to mitigate the risks and enhance potential benefits. Consider the need for changes to working patterns/hours to accommodate/mitigate wellbeing pressures. 	Workplace & Wellbeing People Services BPs	
Digital Value (Steve Pugh)	 Digital technology to be applied in future service design, including to help manage/schedule service demand. The potential uses of Digital technology to be shared via the Digital Value programme. 	IT BPs	

Departmental Recovery Statements

179 The Adults and Communities recovery statements are:

"We will continue to drive forward our service principles of promoting independence and strengthening self-resilience to enable people to get best outcomes from our support.

We will review our current models of service delivery and embed new practices that enhance our offer to people and staff.

We will future proof our resilience plans in line with our duties and powers to ensure a timely response to any further outbreaks or incidents.

- We will listen to feedback from people and staff and use this to inform our practice.
- We will align our recovery with the LCC guidance and ensure a corporate and strategic fit for the future of our service performance and delivery."
- 180 The Adults and Communities Strategy refresh has been updated to include the Covid-19 impact on future delivery of our services and changes that are needed to ensure that we can deliver our ambitions in line with the changes needed to keep people safe and have the opportunities for best outcomes following our support.

Resource Implications

- 181 There has been a significant financial impact on adult social care which could be potentially in the region of £13.5m and will need to be monitored including:
 - Care providers have been supported by the end of July with around £3m for additional costs being incurred and £11m in an advance payment to support business cashflow.
 - Passported nearly £3m of the Infection Control Fund directly to care providers in the first instalment of grant.
 - Changes in the level of demand from the service users for commissioned services.
 - The cost of hospital discharges is estimated to be £4m by end of July which will be funded by the NHS Covid-19 Discharge Fund;
 - Delaying changes to services for example moving service users from residential care to supported living.
 - Loss of income from service users for commissioned services
 - Additional cost of PPE is estimated to be around £700k for services provided by the Council.
- The budget for Communities and Wellbeing is £5,150,746. It is estimated that the implementation of lockdown will mean that the service will lose approximately £256,000 in a shortfall of income normally derived from admission charges, room hire and library charges.
- 183 The development of digital access to services will require investment and this may be challenged by the limitations on corporate finances as the Council moves out of lockdown.
- Any additional costs relating to the recovery of services will be considered as part of the overall medium financial planning process with the aim to minimise any impact.
- 185 The Director of Corporate Resources and the Director of Law and Governance have been consulted on the contents of this report.

Background Papers

186. None.

Circulation under the Local Issues Alert Procedure

187. A copy of this report will be circulated to all members under the Members' Digest service.

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Equalities and Human Rights Implications

188 Equality and Human Rights Impact Assessments (EHRIA) for the Recovery activities will provide a framework for screening and where necessary, full EHRIAs for these implementation and delivery activities will be undertaken.

Partnership Working and Associated Issues

- 189 Recovery plans for Health and Housing partners have been considered in line with the departmental principles of recovery. Lead officers are providing social care input to ensure joint agreement for changes and impacts on service delivery.
- 190 Delivery of departmental Recovery will require continued development to maintain effective working relationships with a range of partners including, but not limited to, colleagues across all other County Council departments, community libraries, cultural organisations, voluntary and community groups, NHS, district and borough councils, Leicester City and Rutland County Councils, blue light services, and social care service providers.

Risk Assessment

191 The main strategic risk to achieving the ambitions and objectives for recovery is the availability of funding for Adult Social Care and Community and Wellbeing Services. The Department and wider Council's effective management of this risk will depend on the financial and wider resourcing impact of the Covid-19 crisis, the level and management of demand for social care services, support needed and transfer of responsibilities by partner organisations in particular the NHS, improvement in delivery and efficiency of internal and commissioned services, and workforce recruitment and retention.