

## Health Scrutiny Committee

8 December 2020

<b>Title:</b> Winter Planning and Support to Care Homes	
<b>Report of the Director of People and Resilience</b>	
<b>Open Report</b>	<b>For Information</b>
<b>Wards Affected:</b> All	<b>Key Decision:</b> No
<b>Report Author:</b> Thomas Stansfeld Lead Commissioner for Older People	<b>Contact Details:</b> Tel: 02082275120 E-mail: <a href="mailto:Thomas.stansfeld@lbbd.gov.uk">Thomas.stansfeld@lbbd.gov.uk</a>
<b>Accountable Director:</b> Chris Bush, Commissioning Director, Care and Support	
<b>Accountable Strategic Leadership Director:</b> Elaine Allegretti – Director of People and Resilience	
<b>Summary:</b>  <p>As we move into the winter with the growing second wave of COVID-19 all Local Authorities have been asked to draft a winter plan which outlines steps being taken to reduce the impact of COVID-19 and normal winter pressures on the health and social care system. A large part of this winter plan is the work that we are doing with providers, and particularly care homes, to support them during the pandemic.</p> <p>This winter plan pulls on the lessons learnt in the first wave and builds on the support that was put in place to protect our care home residents and staff, support residents and their families in the community and reduce inequalities.</p> <p>The full winter plan has 105 elements which the local authority and the wider health and social care system need to address and can be found at Appendix A to this report. This report highlights the key elements of our Barking and Dagenham Winter Plan for discussion and noting.</p>	
<b>Recommendation(s)</b>  The Health Scrutiny Committee is recommended to:  (i) Note the winter plan including key areas of action and the lessons that have been embedded from wave 1, particularly for care homes.	
<b>Reason(s)</b>  Preparing our winter plan enables us to assure ourselves that we have appropriate plans in place over the winter period to meet demand and need resulting from Covid-19 as well as usual winter pressures. This has allowed us to reflect on the impact of the first wave of COVID-19 and how we can ensure we are best prepared for the winter ahead, particularly in our care homes.	

## 1. Introduction and Background

1.1 During the first wave of COVID-19 there were many measures of support that were put in place for our care market and particularly our care homes. These were outlined in a letter from our Cabinet Member for Health and Social Care Integration, Chief Executive, Director of People and Resilience, Director of Public Health and the CCG which was published on the Council's website. The letter can be found by visiting:

<https://www.lbbd.gov.uk/sites/default/files/attachments/CEO-letter-Care-home-assurance.pdf>

1.2 In summary, this included:

- Seven day support through our Provider Quality and Improvement Team, including the circulation of guidance, advice and communications and facilitation of meetings with Public Health colleagues.
- An Infection Control team, provided by NELFT, to provide advice around infection control.
- Training, particularly around infection control and end of life care.
- Emergency PPE distribution.
- Networking and regular forums with care home managers to share issues, ideas and support. This has included finding additional agency staffing capacity where required.
- A 10% Covid uplift to all providers of older people's services, including Personal Assistants, between April and August. Providers were asked to pass the additional funding on to care workers wherever possible.
- A pathway for COVID+ patients into two specified care homes who had established isolation units.
- Clinical support through a new Care Homes DES (contract) which ensured that care homes were aligned to a named Primary Care Network (PCN) and clinical lead who leads a weekly multidisciplinary 'home round', enabling medicine reviews and hydration/nutrition support. Multi-disciplinary team support will also be available to care homes around reablement, rehabilitation, end of life care, dementia, mental health and workforce development.
- Pharmaceutical support to ensure that medication supply was facilitated, medication reviews were undertaken virtually or over the phone, supporting reviews of newly discharged residents and supporting care homes with medication queries.
- Workforce and wellbeing support to care home staff including counselling, NELFT mental health support, software and tablets to enable easier virtual working and benefits from the hospitality sector, including hot meals and takeaways.

- Intensive testing in any care home facing an outbreak, or at risk of outbreak took place during the first wave but regular retesting of care home staff and residents was not launched until July.
- 1.3 As we now move into the winter period and are experiencing an increase in transmission of COVID-19 we are outlining the support that is being put in place to support the health and social care system through our Winter Plan.
- 1.4 Each year the Council prepares for winter pressures which present in the health and social care sector, however due to the added COVID-19 pressures these are being compiled in our Winter Plan and aligned with regional and national plans for social care. We have worked with our partner boroughs in Havering and Redbridge, BHRUT, NELFT and the CCGs to pull together a plan which supports Barking and Dagenham residents and our care provider market, as well as the wider BHR system. This builds on the support that has already been put in place above, and will continue during the second wave.
- 1.5 The Department for Health and Social Care has provided local authorities with a number of key areas that the Winter Plan needs to address<sup>1</sup>. This includes areas such as support for adult social care, guidance and support on infection control and outbreak management, staff movement, PPE, COVID-19 testing, flu vaccinations, safe discharges, enhanced support for care homes from primary care, support for our direct payment recipients, support for unpaid carers, end of life care, our responsibilities under the care act, how we are supporting the workforce, how we are providing leadership and supporting regional oversight and any extra funding for the sector.
- 1.6 Many of these areas build on the lessons we have learnt from the first wave and will hopefully mitigate the impact of winter on some of our most vulnerable residents.

## **2. Key areas**

### **Joint working**

- 2.1 Throughout the summer and now as we move into winter Barking and Dagenham Council are working in partnership with our neighbouring local authorities and the local health system. As we move into winter this includes joint working on hospital discharges of both COVID+ and COVID- patients, weekly meetings to support and monitor the care market and the commissioning of an infection prevention and control (IPC) team.

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<sup>1</sup> <https://www.gov.uk/government/publications/adult-social-care-coronavirus-covid-19-winter-plan-2020-to-2021/adult-social-care-our-covid-19-winter-plan-2020-to-2021>

## **Lessons Learnt from Wave 1**

- 2.2 As part of ensuring that we embed learnings from the first wave of the pandemic Healthwatch Barking and Dagenham produced a report entitled “Care Homes during COVID-19” which reflects on the thoughts and experiences of residents, families and staff during the first wave of the pandemic. This report has helped to guide the development of our winter plan and has allowed for better representation of the views and voices of our staff and residents in policy development. We will continue to work with Healthwatch and the wider voluntary sector, particularly through BD-CAN, to ensure we make the most of their expertise.
- 2.3 Key areas such as PPE support, communication, visiting for families and friends, and support for our care home staff are key recommendations in the Healthwatch report and we have built on the existing support in this winter plan. That includes Public Health advice and support in COVID secure visiting, enhanced IPC support for all our care staff through the IPC team and ongoing monitoring of our PPE supply chains across North East London and the London Resilience Forum.
- 2.4 We know that during the first wave of the pandemic there were substantial issues in PPE supply, rules on visiting and support for our care settings in the event of an outbreak. As we move into the winter we are ensuring that we are better prepared and we have a strong offer to care homes which includes proactive weekly communications with care homes from Public Health around issues such as visiting and transmission of COVID-19 in the community.

## **Support for Care Homes and Providers**

- 2.5 Our care providers will have ongoing 7 day a week support from our Provider Quality Team and support from Public Health in the event of an outbreak or with any further issues regarding infection prevention and control. An enhanced IPC team is being set up to support our providers with training, queries, advice and direct support with outbreaks. This is an enhanced offer in Barking and Dagenham, funded jointly by the CCG and the local authority, and is available to all care providers in Barking and Dagenham, including Personal Assistants. This universal service aims to reduce the inequality in care and support for caring staff depending on what sector they work in.
- 2.6 In our winter plan we outline provisions being made to ensure that all providers have access to appropriate PPE. Most providers such as home care agencies and care homes can access these through a central government portal. However, we are working with the Independent Living Agency to set up a distribution centre for PPE for our Personal Assistant market and we will continue to provide PPE to our care homes in the event of an emergency.
- 2.7 Additionally, care homes and other providers have been supported to increase uptake of flu vaccinations during the winter period.

## **Visiting**

- 2.8 COVID-19 has meant that our care home residents haven't been able to see their families and friends in the same way for the majority of 2020. We know that this is having an impact on the mental health and wellbeing of our residents, both in and outside of the care homes.
- 2.9 Public Health has, and continues to, support our care homes with guidance on visiting and COVID secure visiting. Currently, due to lockdown, visiting is severely restricted with only window visits allowed. During the summer when national restrictions were eased care homes were allowing visiting in a COVID safe manner. This meant visits in gardens, well ventilated indoor rooms with appropriate social distancing and any gifts or packages being brought into the homes being disinfected.
- 2.10 Many care homes used their IPC funding to deliver COVID secure visiting with extra handwashing stations outside for visitors and shelters and outdoor furniture for garden visits.
- 2.11 To help further mitigate visiting limitations, Care and Support Commissioning, working with the CCG and NHSX, have deployed a series of digital innovations within Care Homes including Facebook Portal and Apple iPads. These devices are primarily intended to support video-chat between residents to family and friends, but also interface with other digital solutions to assess the wellbeing of residents through vital signs observations.

## **Discharges**

- 2.12 Rightly discharges from hospital is an area of national focus after the first wave resulted in exposure of too many care homes to COVID-19 from hospital discharges.
- 2.13 The winter plan outlines the steps that are being taken to support our care homes with discharges from hospitals over winter. A cornerstone of this is the agreement from BHRUT to not discharge any patient to a care home without a COVID test result. The Department of Health and Social Care (DHSC) and the Care Quality Commission (CQC) have asked for Local Authorities to nominate a care home to act as a designated setting to accept COVID+ patients. We have worked with our colleagues across BHR to identify these settings. The settings identified are in Havering and Redbridge and account for roughly 20-35 beds for positive patients to be discharged to. Extra protection has been put in place around these care homes such as a CQC inspection and extra support from NELFT. The aim of this programme is to reduce the risk of COVID transmission to the wider care home market.
- 2.14 Additionally, the local authority will be taking on the lead role for brokering all nursing home placements in Barking and Dagenham from November 2020, taking over from the CCG who have been brokering all of these placements

during the first wave. This will ensure that residents and families have more choice and control in the homes that they are being placed in, as well as the local authority having better oversight of placements and fee rates across the care home marketplace.

### **Staff and resident testing in care homes**

- 2.15 Care home staff are now given coronavirus tests every week and residents monthly. Retesting of care home staff and residents was launched on 6 July in addition to intensive testing in any care home facing an outbreak, or at increased risk of an outbreak. At a minimum, staff are being tested for coronavirus weekly, while residents will receive a test every 28 days to identify anyone with the virus and reduce transmission.
- 2.16 Repeat testing was initially prioritised for care homes primarily looking after over 65s or those with dementia before being rolled out to all adult care homes.
- 2.17 Regular testing is now well established for care homes looking after over 65s or those with dementia.
- 2.18 DHSC has launched a portal for Extra Care and Supported Living providers to register for a one-off testing of all residents and staff. Providers in the borough have started registering on the portal.

### **Financial Support**

- 2.19 The DHSC has issued two rounds of infection prevention and control (IPC) funding for us to distribute to providers which is designed to support providers with infection prevention and control measures. This could include physical changes to buildings to reduce transmission and paying the wages of staff who are self-isolating. The first tranche of funding to Barking and Dagenham providers equated to £1,002,873 and supported 20 care homes, 60 homecare agencies and 29 other providers including extra care and supported living schemes. A second round of IPC funding has been allocated to providers totaling £1,371,688, of which £1,097,494 is allocated to care home and community care providers on a per service user basis. The remaining is to support wider workforce resilience and infection control and will be targeted where need is identified.
- 2.20 There has been an issue of clarity around the allocation of the funds on a per user basis for our community providers. The DHSC has been unable to provide clarity on the number of users registered to each provider and therefore making it very difficult to allocate these funds. Despite escalation, the lack of clear guidance has resulted in a delay to funds being sent to these providers. BHR Boroughs have instead agreed a local process which ensures that all care homes and homecare agencies within Barking and Dagenham, Havering and Redbridge are provided with funding and the funds are currently being distributed.

2.21 It should be noted that this IPC funding is in addition to the 10% uplift in fees between April and August as outlined above. This has ensured that our care market has remained buoyant and we currently have no capacity or provider failure issues in Barking and Dagenham.

### **3. Inequalities**

3.1 During the first wave of COVID-19 it was found that those from BAME backgrounds were more likely to suffer worse outcomes than people of a white ethnicity. This is particularly relevant for our population, by being better prepared and offering more support to our key workers, vulnerable residents and their families we hope that we can reduce the risk of poor COVID-19 outcomes across our population. While much of the focus is on care homes our winter plan also outlines protections in place for our wider care and support market including informal carers, thereby protecting all of our vulnerable residents.

### **4. Next Steps**

4.1 The winter plan that is presented here, and in the Appendix, outlines the key actions of the Council and our partners in working to protect our residents and the health and social care system. Many of these actions are already being implemented across the system while some actions outline steps to be taken in the escalation of COVID-19 transmission in the community.

4.2 As the winter months progress, we will regularly review the winter plan with partners and step up or down actions as needed.

## **Appendices**

Appendix A: Barking and Dagenham Winter Plan