

**CAMBRIDGESHIRE COUNTY COUNCIL'S RESPONSE TO COVID-19**

**To:** Communities and Partnership Committee

**Meeting Date:** 20 May 2020

**From:** Adrian Chapman, Service Director: Communities and Partnerships

**Electoral division(s):** All

**Key decision:** No

**Outcome:** The Council's response to COVID-19 and our strategies for county-wide recovery will have a significant impact on outcomes for individuals and communities.

**This report provides an update on:**

- the Council's ongoing response to the current Coronavirus pandemic
- the specific response from, and impacts on, services within the remit of this Committee

**Recommendation:** The Committee is asked to:

**Note the progress made to date in responding to the impact of the Coronavirus.**

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## 1. BACKGROUND

- 1.1. The coronavirus pandemic has affected every part of life - in Cambridgeshire, across the UK and globally. In the UK, over 220,000 people have been infected by the COVID-19 virus, more than 34,000 have sadly died and the country has been in lockdown for over 7 weeks. Thousands of businesses are currently closed across Cambridgeshire, with staff furloughed or working from home and every single person in our County has had to change the way they live their lives.
- 1.2. In these very challenging circumstances, the Council has reacted quickly with the dual focus of responding to the crisis and keeping critical services running. Our workforce and our councillors have moved to working from home if possible and, where face to face services are critical, these are being carefully planned and safely delivered. We have changed almost overnight to work in different ways to support the most vulnerable people in our communities, developing new responses and maintaining all critical services.
- 1.3. Local Government around the UK, and indeed around the world, is beginning to think about the longer term impact of the COVID-19 pandemic – the detrimental effects on more vulnerable individuals and groups but also the opportunities for positive change. Officers and Councillors are working with their professional networks to determine the ‘right’ way to tackle recovery, sharing ideas and good practice. To ensure that the Council takes a strategic approach to recovery and redesign, a Recovery Framework has been developed.
- 1.4. The Council’s recovery framework will be built towards ambitious definitions for individual, community and countywide outcomes. It will determine both the immediate and longer term steps the Council needs to take to play its part in achieving these outcomes across Cambridgeshire. Further details of the Council’s Recovery Framework can be found here: [COVID19 and Recovery Report May 20](#)

## 2. ONGOING RESPONSE

- 2.1 In April, a report to this committee gave details of the initial response to the Coronavirus pandemic, nationally and locally. Reporting structures and governance were detailed as well as the immediate priorities for the Council, which included:
  - Supporting the NHS, particularly through quick and effective response to new Hospital Discharge Guidance
  - Supporting our care homes
  - Establishing a county-wide coordination hub so that shielded and vulnerable self-isolators are supported with supplies of food, medicine, and other essential support
  - Ensuring that vulnerable children are supported during the pandemic
  - Implementing measures to protect and support our workforce
  - Managing our supply chain
  - Maintaining public trust and confidence by providing good and regular communication and by amplifying public health and government guidance
- 2.2 During the last four weeks, work has continued in all of these critical areas as it has become increasingly clear that many of our emergency response activities will need to stay in place for several months, at least. Further details on our immediate response and how we are shifting from emergency to ‘new normal’ services is included in this month’s reports for each Directorate, which are available here: [COVID 19 Weekly Reports](#)

- 2.3 Since the last committee cycle, we have also set up a response to deal with tracking and tracing and are awaiting further guidance on our role in this work. We have set up a Track and Trace sub-group to ensure that we have a robust local system which meets the requirements of the national contract tracing programme. Initial information suggests that contact tracking will predominantly be done at a regional/national level through Public Health England; our local role appears to fall into 4 areas:
- Support for people who are told to self-isolate after testing positive who have no immediate support from family/friends
  - Support for local outbreaks, from Public Health and Environmental Health colleagues, working alongside the regional PHE Health Protection Team
  - A role in the flow of data around this activity – from testing, through contact tracking, to local support for those who need it
  - Communications to amplify the national messages around take up of the NHS app/online reporting of symptoms, getting tested and self-isolation for those with symptoms and for those who have tested positive
- 2.4 We are currently reviewing “OUR PLAN TO REBUILD: The UK Government’s COVID-19 recovery strategy” which was published on 11<sup>th</sup> May, considering implications for our services and workforce and planning accordingly with our partners.

### **3. COMMITTEE SPECIFIC HIGHLIGHT REPORTS**

- 3.1 This Committee has responsibility for both its ‘business as usual’ services, and for oversight of the Countywide Coordination Hub.

#### **3.2 Cambridgeshire Libraries and Archives**

- 3.2.1 We have significantly enhanced the library service digital service offer, and this continues to be well received with take-up increasing each week. There were 308 new digital members in April, and 58,107 e-issues were made (almost three times more than the same time last year). Library Facebook ‘engagements’ have more than tripled with up to 80,000 impressions in a month. In the last 4 weeks we have seen 12,000 post engagements and 10,383 video views. Followers have exceeded 5,000, a 25% increase.
- 3.2.2 The Spring Library Presents programme was cancelled, and so we are bringing forward our digital plans: 115 artists submitted ideas, and we have selected 19 to take forward, all funded through Arts Council grant.
- 3.2.3 Our Archives service is maintaining a basic enquiry service, accepting accessions of records at risk, updating catalogues, and conducting regular checks of archive store security and environmental conditions.
- 3.2.4 The recent Government guidance suggests that libraries may begin to re-open from 4 July at the earliest; work is now beginning to consider how this will be achieved safely, protecting both our staff and visitors. We will be monitoring the national advice on this very carefully, and will make appropriate announcements closer to the time that re-opening is confirmed.

3.2.5 Meanwhile, many of our library staff members are contributing actively to the work of the Countywide Hub as part of our Community Response Service. Further details about this are provided below.

### **3.3 Cambridgeshire Skills**

3.3.1 Cambridgeshire Skills continues to support 241 active learners and, in addition to this, we are making wellbeing calls to 62 of our most vulnerable learners. A number of courses have been made available online – around 20 so far in total, including courses such as ‘Employability – Get that Job’, ‘Get into Retail’, and a Health and Wellbeing course

3.3.2 The service has also facilitated the production of 200 craft packs, which were made and distributed to families in parts of the county, and our Sewing Bee “Make a Scrub Bag for the NHS” campaign has begun, requesting donations (e.g. material) and volunteers to make a bag (or bags), with 30 packs having already been distributed

3.3.3 A new service – ‘Open New Doors’ – launched on 15 May. This service provides a wide range of opportunities for learning and activities for people who are shielding or otherwise at home. The service, funded through the existing adult skills funding arrangements, seeks to provide opportunities for people to be active at home, to maintain their emotional wellbeing, to learn new skills or take part in different activities, and to remain connected. Examples include maths and English training, cookery and gardening lessons, an expanded digital library offer, and a wide range of materials to boost peoples’ wellbeing including exercise classes.

### **3.4 Domestic Abuse and Sexual Violence Services**

3.4.1 There has been an anticipated increase in referrals into our domestic violence advocacy service of around 25% compared with the average weekly referral rate for 2019/20. Our services have been adapted to manage this increased demand, with all services remaining open and available. Refuges are operating as normal and we have spare capacity should that become necessary. Our proactive outreach services are also continuing as normal, and these have reported a small increase in referrals for male victims.

3.4.2 There has also been a small increase in requests for counselling services from the Sexual Violence service. Our sexual violence services now have telephone helplines working remotely and technology is in place for virtual counselling.

3.4.3 Local domestic abuse charities will be bidding for additional funding for refuge provision through the new MHCLG Domestic Abuse Safe Accommodation: COVID-19 emergency support fund.

### **3.5 Cambridgeshire Registration Service**

3.5.1 The Registration service is only able to register deaths at present, and the revised legislation enables this to take place over the telephone. There were no changes made in the recent guidance published by Government on easing of the lockdown restrictions, including that relating to ceremonies and registration of births.

3.5.2 However, small weddings may be able to take place from June at the earliest, and so the service is considering how this can be achieved safely.

### **3.6 Coroner Service**

3.6.1 Due to restrictions, the Coroner Service is only able to hold inquests which can be carried out remotely. This will inevitably lead to a backlog of cases to be heard when the lockdown measures are lifted, and so we have been identifying additional space to hold inquests when that time comes, including space at Huntingdon Town Hall.

3.6.2 The Coroner Service has been assisting with the planning for additional mortuary capacity, this now being in place.

### **3.7 Countywide COVID-19 Coordination and Response Hub**

3.7.1 The service continues to lead the work of the Countywide Coordination Hub, which has been established to:

- co-ordinate the distribution of support to the Shielded group
- help ensure that services provided by key workers are sustained at safe and appropriate levels through the redeployment of staff and the deployment of volunteers
- ensure with our partners that we are making the best use possible of all available resources to minimise anxiety, to co-ordinate social action, and to ensure those most vulnerable are benefitting from appropriate community support
- work closely with District/City Hubs to ensure all vulnerable people are supported

The Countywide Hub is focussing on maintaining the formal oversight of support necessary for the Shielded group of residents, whilst the district/city hubs are supporting other vulnerable residents and supporting community-led action.

3.7.2 As at 15 May, there were 16,264 people on the registered shielded list across Cambridgeshire and Peterborough. Around one third of this group report they have no support in place. The NHS has identified over 29,000 people across Cambridgeshire and Peterborough who need to be shielded from the virus, and so both they and we continue to encourage people to register. The analysis of the 16,264 that have registered so far shows the following distribution by home address:

- Huntingdonshire – 23.2%
- South Cambridgeshire – 20.2%
- Peterborough – 18.2%
- Fenland – 15.8%
- Cambridge City – 11.8%
- East Cambridgeshire – 10.7%

3.7.3 The Hub aims to contact newly shielded people by letter or email within 24 hours of us receiving notification. We are then following up with telephone contact within 7 days, to enable us to identify any support needs and how we will maintain contact going forwards. Over the last 7 days, 92.5% of calls have successfully met this standard, with the average time taken between the Hub being notified that someone is now registered and us making first telephone contact over the last 7 days being 3.6 days.

- 3.7.4 Shielded people then receive regular contact from the Hub based on their triaged level of need, in the form of a telephone call (where there is an ongoing need or where the resident has no other support arrangements in place), or via email/letter, to remind those that do have support that we are here for them whenever needed. We are soon to launch a texting service to supplement this work. Of the regular calls being made in the last week, 80% have not required any further action beyond the call. 11.5% of calls were able to be resolved by our new Community Response Service, further details of which are described below.
- 3.7.5 Anyone needing help is able to access that help in a number of ways, including via the 'I Need Help' digital forms on our web site. Of those submitted, 68% have asked for help with food or shopping, 28% with medication or prescriptions, 10% with emotional or wellbeing support, 7% with household maintenance and 3% with personal care. A further 12% required other forms of help (n.b. people can ask for help with multiple issues per form).
- 3.7.6 At time of writing, the Hub has received 3,735 general telephone enquiries overall to our 0345 number. In addition, the Hub has responded to 8,665 other direct requests for help and support, largely relating to food, medicines and other supplies.
- 3.7.7 Since the last Committee meeting, the Hub received additional data of people who need to register to be shielded but have not yet done so, AND who the national shielding team have been unable to make contact with or where that contact resulted in an incomplete outcome. Around 4,500 names appeared on this initial list, and we have continued to receive the details of around 100 new people daily that fall into this category. We invoked a major operation to safely visit the homes of all of these people to ensure they were safe and well, that they had all of the food and essential supplies they needed, that they had arrangements in place to sustain their supplies going forwards, and to encourage them to formally register as shielded. The visits are taking place with the support of Team Rubicon, the British Red Cross, Cambridgeshire Fire and Rescue Service, our District Council partners, and a range of volunteers. At time of writing, visits in four out of the six city or district council areas had been concluded, and around 80% of people were at home and confirmed as safe and well. Follow up visits to those not at home continue to be made. Also at time of writing, around 60 urgent requests for help have been recorded from these visits, including people who had no access to food and medicines. Arrangements are now in place for every one of those to receive their urgent supplies and for the Hub to continue to provide them going forwards.
- 3.7.8 Prior to the visits above being made, the Hub wrote personally to everyone on the list to explain we would be visiting, to provide a password they could use to validate the authenticity of the caller, to explain how the visit will be carried out on the doorstep and with stringent social distancing measures in place, to list the specific questions that will be asked, and to provide our full contact details should they be concerned. This, and the visits themselves, generated a significant volume of incoming calls to our 0345 telephone line, with around 400 calls per day during the operation. These were largely from people seeking confirmation that the visitor to their address is legitimate and not a scammer.
- 3.7.9 Also at time of writing, there are 6,361 Shielded people across Cambridgeshire and Peterborough who are receiving a national food delivery over the next week. This is around 3,000 fewer than last week, and suggests that more people are now able to access supermarket home delivery slots. However, there have also been some issues with the national scheme (e.g. planned deliveries not arriving), and so we are investigating this

reduction to confirm the cause. There have been a small number of cases where the Hub has provided a food delivery direct where a national delivery has failed to arrive.

- 3.7.10 The Hub logistics operation, based from a warehouse facility in Alconbury Weald, continues to deliver urgent food and other essential items, as well as PPE across the health and care sector. Red Cross volunteers are continuing to work closely with the council and health partners in this operation. General food parcels (sufficient to last one week) have so far been delivered to 1,400 people, with an additional 409 people receiving more specialist food.
- 3.7.11 The facility that enables shielded people to be able to pay for items supplied to them has been a national challenge. The Hub has therefore concluded its work to establish mechanisms for people to be able to pay for their food and other supplies where they can, without having to expose themselves to risk of harm. We have developed a suite of options that will equip people with the ability to pay, and volunteers and public servants with the tools they need to accept payment safely and securely. This work has been shared with our partners across Cambridgeshire as it is not specific to the shielded group.
- 3.7.12 The Hub's new Community Response Service has now launched. 62 redeployed and newly trained staff and volunteers are now undertaking their roles as Community Outreach Officers; in the first week of operation 26 tasks were completed across the county on behalf of Shielded residents. The staff and volunteers have been hugely motivated to support vulnerable and isolated residents with examples of tasks completed including delivering exercise materials for a wheelchair bound person, arranging for a new washing machine to be provided, collection and delivery of specialist food including halal and gluten free produce, as well as gate fixing, lawn mowing and delivery of medication. There has been some very positive feedback with one satisfied resident writing to us to say "this is outstanding community support". This is important work as it ensures that someone who is at greatest risk from the virus is able to remain safely shielded at home.
- 3.7.13 In the past few days, we have contacted 140 volunteers registered with the Hub who had originally indicated that they would be prepared to work in a care setting. We are inviting them to receive training to help care homes with a wide range of support including delivering activities, kitchen duties and other non-personal care duties.
- 3.7.14 The Hub has made contact with all those known to us that are providing care to family or friends to ensure they have the support they need to continue this vital role. Many have been grateful for the opportunity to talk to someone, and several people have requested specific help and support. Importantly, they all know how to contact us should their needs, or those of the people they're caring for, change in any way.
- 3.7.15 Alongside maintaining the direct support necessary for the shielded population, we are turning our attention to how we can maintain permanently some of the positive features of this new way of working – for example, support for self-organised social action, safe data sharing with our partners, rapid and creative decision making, and expansive collaboration across a broad partnership. Part of this has involved some positive discussions with our colleagues in Cambridgeshire ACRE and the Cambridgeshire and Peterborough Association of Local Councils to discuss the role of town and parish councils in the current work, and, importantly, to explore how we can build on our already strong relationship with

local councils as part of the recovery work and beyond. Further details of our initial thinking will be shared at the next Committee meeting.

#### 4. FINANCIAL IMPLICATIONS

4.1 The estimated financial impact on the Council has been submitted to MHCLG in two returns, in common with other Councils. In many areas these remain indicative and uncertain estimates contingent on the length of disruption and the impact on activity levels, and it is expected that these will be further refined and validated, in the run-up to the July GPC meeting. GPC will be asked to approve any necessary budget revisions or grant allocations at that stage. The following table presents the summarised estimated impact, at this stage, for this Committee, as submitted to MHCLG. These do not necessarily relate to what the request in budget revision will be:

4.2

		<i>Headline full-year estimates for this Committee submitted to MHCLG in early May 2020 £000</i>					
April commitments £000	Committee name	New commitments	Income forgone	Impaired savings	Gross Total	Specified funding	Net Total
491	C&P	1,356	712	65	2,133	-177	1,956

4.3 There are a range of financial implications that relate to this Committee as a consequence of the pandemic. These are summarised as follows:

- The Coroner Service will incur additional costs when it can begin to hold inquests once again, and we will need to invest in additional assistant coroner capacity to help remove the increasing backlog of cases as quickly as possible
- Similarly, there will be a significant backlog of registrations and ceremonies to deal with in the Registration Service when the lockdown measures are lifted, and this will result in the need for additional staff capacity. The service is also experiencing a significant reduction in income
- Both Cambridgeshire Skills and Cambridgeshire Libraries rely on income generated through room hire and other services; in the current climate, this income is not being received
- We had planned to implement a restructure of our Domestic Abuse service as a result of a Government grant ending. However, to ensure we maintain sufficient capacity to support people affected by domestic abuse, the restructure is being delayed, leading to a possible service overspend
- There are also some direct costs associated with the work of the Countywide Hub, notably the supply of food and essential supplies
- Finally, the council has so far invested £100k in funding to the Cambridgeshire Community Foundation Coronavirus Fund, and a further £75k is likely to follow. This fund is providing urgent financial help to groups that are directly supporting communities impacted by COVID-19



## **5. ALIGNMENT WITH CORPORATE PRIORITIES**

- 5.1 The current Coronavirus pandemic will have both an immediate and a longer term effect on all of the Council's priorities. The impacts will be monitored and managed through our risk logs and recovery plans and will feed into the annual review of Council strategy.

## **6. SIGNIFICANT IMPLICATIONS**

- 6.1 It is likely that we will see a rise in referrals to children's services both locally and nationally as the pressures on families increase. Demand may also grow in adult services as the effects of interrupted care on chronic conditions emerge. It is therefore essential that we plan for an extended period of response and that the recovery programme rapidly identifies interventions which may minimise detrimental impacts. The continued leadership role of this Committee in our Think Communities approach is vital to help mitigate against these pressures.
- 6.2 In spite of the additional funding that has been allocated by the Government, the Council is still facing a deficit of nearly £8m which, if not supported through further Government funding rounds, will have to be met by considering all options available to this council. A range of scenarios will need to be developed and tested to support business planning. As patterns of demand and behaviour become clearer following the immediate response stage, the organisation will need to have a range of options and contingency plans in place to anticipate and mitigate against financial pressures.
- 6.3 Our COVID-19 response has relied not only on the commitment and hard work of our own workforce and providers but also on the huge number of volunteers and community organisations who have come forward to help in their communities. As part of recovery and redesign work we will be learning from this fantastic community and partner response and further developing our Think Communities approach.
- 6.4 As a Council, our greatest asset is our people. Our workforce has mobilised in many different ways, working wherever they are needed to deliver critical services, often under very challenging circumstances. We continue to work carefully across all teams to ensure our workforce is well equipped, stays resilient and feels supported as we tackle this crisis together.

<b>Implications</b>	<b>Officer Clearance</b>
<b>Have the resource implications been cleared by Finance?</b>	YES/NO Chris Malyon
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?</b>	N/A
<b>Has the impact on statutory, legal and risk implications been cleared by the Council's Monitoring Officer or LGSS Law?</b>	YES/NO Fiona McMillan
<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	YES/NO
<b>Have any engagement and communication implications been cleared by Communications?</b>	YES/NO Christine Birchall
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	YES/NO Adrian Chapman
<b>Have any Public Health implications been cleared by Public Health</b>	YES/NO Liz Robin

<b>Source Documents</b>	<b>Location</b>
Service highlight reports for all Directorates sent to Members weekly.	<a href="#">Covid-19 Emergency Reports</a>