

P&C COVID-19 EMERGENCY PLANNING HIGHLIGHT REPORT

SERVICE AREA:	Commissioning - Adults
REPORT AUTHOR:	Caroline Townsend
REPORTING PERIOD:	Week ending 17 th April 2020

KEY ACTIVITY HEADLINES

General Update:

- Police have been provided with a list of local providers, including voluntary sector. They have agreed not to stop key workers from these providers. In addition, personal assistants will be supported with access to a Key worker ID badge. An internal process has been agreed, and a simple process to share with social workers and DP providers is being finalised to inform them how to access this support.
- 10% uplift being given to all providers from 20th April to help meet the additional costs of Covid. Communications have been released today and letters are being sent to providers to notify them.
- MCHLG returns were submitted this week providing an overview of the financial impact of Covid, including the impact on savings delivery.
- The following additional capacity has been agreed with the CCG, to be funded from the NHS covid monies:
 - Additional block bed provision - 370 additional beds
 - Additional Learning Disability provision at Barber Gardens and the Manor
 - Distress Fund for domiciliary care providers
 - Incentive payments (up to an additional £3/hour) for hard to place packages for domiciliary care
 - Additional NRS community equipment
- Discussions are ongoing with the CCG to fund the following additional capacity:
 - Learning Disability community capacity
 - Extra Care capacity
 - 10% fee uplift to providers
- Following discussions with the CCG and health partners, the development of a rest centre is on hold, with agreement to review the need for this if additional capacity is required to meet the demand we are seeing across the system.

The Covid-19 business continuity response has been organised across 3 workstreams. An overview of key actions and progress specific to each workstream is outlined below

Workstream A – Voluntary sector / Mental Health / Housing Related Support / Carers and NRS

- Process for weekend critical incident cover has been developed and was implemented last weekend. Contract manager cover was in place over the Easter weekend.
- Template for proactively gaining numbers of new cases/deaths / staffing issues is now in place
- Process for providers accessing volunteers has been completed and is now live. Volunteer information for providers to access went out on Wednesday.
- NRS – access to equipment continues to work well and NRS are now operating 7 days a week.
- Housing related support: Staff are becoming increasingly anxious about infection risk as a result of clients flaunting the rules. Cambridgeshire Police are now working with us and some of our hostel providers to help enforce the government messages around social distancing. Prisons will start to grant early release to some prisoners from next week – all will be ‘released on temporary licence’ and should only be released at present if they have accommodation to go to – actual numbers still not known - further details expected next week

Workstream B - Homecare and extra care

- CCG Infection Control Nurse attended the provider forum this week to deliver an update on infection control and use of PPE, specifically masks.
- Following active Contract Management calls and the forums held this week, homecare providers seem to be coping and managing well. Providers are actively engaging with contract managers and commissioners where there are issues.

- Some providers are giving us extra capacity.

Workstream C - OP Care Homes, LD Residential, LD Supported Living, Day Services

- Outbreak procedure and tool have been drafted, and comments received. Any outbreak should now be reported to CMPR. The team allocate an Incident Lead, who coordinates the response for the care home / setting. This may include clinical support, practical support, escalation via CCG / LA or a safeguarding response, if required. In each case, operational leads will be notified of activity in one of their settings.
- Residents that cannot be placed into Block Beds will now be placed and transacted by the Complex Case Team at the CCG – thereby removing the need for separate business cases for spot placements.
- All discharges from hospital will now be swabbed in line with national guidance.
- Testing for care workers has been announced.

RISKS / CHALLENGES (AND MITIGATION)

Risks

Risks	Mitigations
Market capacity	<p>c. 370 additional beds purchased from existing providers</p> <p>R10% fee uplift to meet additional covid costs granted to providers</p> <p>Further opportunities for additional residential beds are being explored</p> <p>Domiciliary care capacity being supported by allocation of volunteers to support providers to maintain capacity</p> <p>Brokerage operating single function for health and social care to manage impact to market. Extended hours and 7 day working in place</p> <p>LD brokerage function integrated into brokerage to ensure capacity is maximised effectively</p> <p>Daily capacity overview managed via brokerage</p> <p>Distress fund established for providers.</p>
Lack of PPE	<p>National PPE helpline has been established</p> <p>Single provider contact line and email established so provider issues can be escalated and responded to quickly</p> <p>Process for DP personal assistants established to enable access to local authority PPE supplies</p>
Staff capacity	<p>Redeployment of staff and allocation of volunteers from hub – process in place</p> <p>Additional brokerage capacity established and fast track training in place</p> <p>Dedicated transformation and BI resource identified</p> <p>Staff absence being tracked and impact being monitored</p>

	Reprioritisation of workload to support key priorities.
Discharge delays from hospital	<p>Ongoing communications with providers to manage advice on Covid-19 and ensure compliance with guidance</p> <p>Regular communications with health and CQC and key partners to ensure information exchange and issues highlighted quickly</p> <p>D2A pathway agreed and established</p> <p>Integrated brokerage function for health and social care</p> <p>Local authority agreed as lead commissioner for additional community capacity</p> <p>Brokerage extended hours and 7 day working established.</p>
WORKFORCE UPDATE	
Commissioning currently has 25 staff absent due to Covid-19: <ul style="list-style-type: none"> • Self-isolating due to symptoms: 3 • Self-isolating due to family member having symptoms but working from home: 8 • Social Distancing due to underlying medical condition but working from home:14 	
FINANCIAL IMPACT (increase in costs / reduction in income)	
<ol style="list-style-type: none"> 1. 10% fee uplift for providers to meet additional costs of Covid 2. Cost of c.370 additional block beds being purchased. 3. Cost of additional community equipment 4. Cost of additional capacity for LD provision 5. Cost of additional extra care provision – seeking agreement from CCG for cost 6. Extension of non-charging period for Lifeline to 12 weeks, loss of income. 7. Extension of contracts for interim beds 8. PPE equipment purchase 9. Additional funding requests from providers to come via hardship payment. 10. Loss of income from client contributions 11. Impact on savings delivery 	
COMMUNICATIONS	
<p>Communications have been released to the market today to notify providers of a 10% uplift to fees to help them meet the demands of Covid.</p> <p>Regular communications are in place with providers to keep them informed of advice, guidance, response etc. A central communications log has been established to track all communications</p>	

A central telephone and email contact have been established for provider queries.

Daily communications are being distributed to operational managers to keep them abreast of commissioning/brokerage/contract developments