# COVID-19 EMERGENCY PLANNING HIGHLIGHT REPORT

SERVICE AREAS:	Commissioning
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### **NEW GUIDANCE AND IMPACT**

Test and Trace has been discussed at the two most recent Provider Forums, this is in addition to the Homecare Contract Management Meetings that have been undertaken. It is suggested by providers at the present time, they are seeing minimal impact of track and trace on their workforce so far, but this will be a watching brief as previously indicated in the last report.

## **NEW CHALLENGES AND ACTIVITY**

As documented in the previous report, Homecare Forums have moved to fortnightly scheduling. It was clear this benefitted the content, discussion and in fact challenges at the most recent meeting.

Concern is apparent from the homecare provider base around ongoing financial challenges associated with COVID.

Infection Control Fund – the final allocation of 25% being worked through. Collation of commissioned hours is being reviewed to inform the allocations and distribution of funds to the wider domiciliary care market, including extra care and supported living providers.

75% element of allocation has been distributed to all homes. Work ongoing to collect reporting information.

**Current Care Home Outbreaks** 

- Number of providers being supported: 6
- Overall number of providers (live cases): 7

### **RECOVERY ACTIVITY**

Day Services Recovery- planning to support providers to resume day services is now in hand. Communications due to providers this week to give guidance and encouragement to consider steps for reopening. Provider forum to be arranged for 22 July. Work is being undertaken by the Contracts Team to review provider short to medium term plans and risk assessments.

Barber Gardens – work ongoing to transition from 'Covid' operations to Business as Usual. MDT in place with weekly meetings with the Provider (lifeways) to manage the transition.

Contract Team work plan- Draft work plan (post C-19) being reviewed against Commissioning work streams to align and map activity and pressures in capacity in relation to business as usual.

# **DECISIONS MADE SINCE LAST REPORTING PERIOD**

Active Contract Management is now being undertaken for homecare, beginning with the most high risk/profile contracts (Block Provision).

Contract review meetings have commenced across the Mental Health and Voluntary Sector contracts, to discuss plans for resuming some business as usual.

## **NEW FINANCIAL IMPLICATIONS SINCE LAST REPORTING PERIOD**

A project group is being established to oversee transition planning for the Covid beds, as NHS funding is only in place for these until the 20<sup>th</sup> September 2020. Transition planning includes working jointly with finance and operations.

### **WORKFORCE CHANGES**

Test and Trace could have bearing on staffing levels as disclosed above. Currently providers are not feeding back a significant impact, but this is being closely monitored on an ongoing basis.

There has been evidence of an upturn in recruitment in homecare which has resulted in additional capacity. However, a caveat needs to be added to that and providers will agree, that some of that upturn is a result in furloughed staff and staff that have been released from sectors which are not currently able to provide staff with work.

# Commissioning currently has 15 staff absent due to Covid-19:

- Self-isolating due to symptoms: 0
- Self-isolating due to family member having symptoms but working from home: 0
- Social Distancing due to underlying medical condition but working from home:15

## **COMMUNICATIONS**

A letter has now been sent to all providers informing them of the cessation of the 10% Resilience Fund. Within this letter providers have been made aware of the timescales for the final 25% Infection Control Fund allocation. Supported Living providers have been contacted to submit their commissioned hours for the week beg 22 June, to help inform the allocation of the final 25%. Both of the above messages have been followed up in the provider newsletter on 1 July.

Residential and Supported Living forums have switched to fortnightly.

A survey is being developed to circulate to all providers to obtain feedback on the regular newsletter, with a view to focusing it to the needs / wants of providers as we move into business as usual.