

Sean Harriss Chief Executive

Helen Whately MP

Minister of State for Care

28<sup>th</sup> May 2020 Our ref:SH2020/HW

Dear Minister,

## Harrow Council COVID-19: Care Home Support Package

This is Harrow Council's response to your letter of 14<sup>th</sup> May 2020 and details the Covid-19 care home support package. As an outer London Borough, our support package has been developed in the context of the responses from the London Region, North West London (NWL) CCGs and borough based need. The responses are complementary and referenced accordingly in this letter and the associated Annexes A-E.

#### London Region

The Covid-19 challenge has been significant in London due to early and rapid spread of the virus, local patterns of deprivation, high levels of air pollution and the high proportion of ethnic minority populations in most London boroughs.

Across the capital, London local authorities responded to the challenge and our responsibilities under the Civil Contingencies Act by working together as London ADASS and Chief Executives, alongside NHS partners to identify issues, galvanise responses and lead several pan-London initiatives. We brought our co-ordinated response together through the Strategic Co-ordination Group (SCG) and joint governance with NHS London.

Using data and evidence we developed a comprehensive understanding of the London adult social care markets (care homes and home care agencies) during the spread of COVID-19. Our commissioners used this as a key part of their daily interaction to support providers. It has underpinned and strengthened relationships with providers locally and provided information on care homes across borough boundaries, which has streamlined the work and reduced the burden on providers. Since mid-March this has supported local operational responses: prioritising active delivery of personal protective equipment (PPE), ensuring appropriate staffing levels and providing Public Health infection control advice and support.

Being alert to emerging issues in system which led to care home challenges and our early response (we started reporting care home deaths and Covid cases from 23<sup>rd</sup> March) allowed action to be taken to respond in London and provided early warning nationally via the SCG of issues that would develop across the country.

A summary of the work across London and issues for the future are captured at 'Annexe A: London Region Response'.

#### North West London

We have worked with NWL CCGs and our local Harrow CCG to support the care home and provider market. The details of these complementary programmes, including roles and responsibilities for NWL, Harrow CCG and Harrow Council are provided in Annexes B and C are outlined as follows.

#### Joint work to ensure care market resilience locally

Harrow Council and Harrow CCG are working in close partnership to support care homes in Harrow. The information gathered from daily calls to care homes is shared between both organisations and the Local Resilience Forum (LRF), which is routinely used to inform targeted interventions and ensure that the appropriate level of clinical support needed is identified and promptly made available.

The NWL approach to supporting care homes is detailed at 'Annexe B: NWL Care Home Programme Summary'. We are confident that the support has been offered to all our care homes with a high percentage of delivery, particularly to those of highest priority. When a comprehensive intervention is required the Care Home Support Team is called upon by the LRF to assist the home either through direct support or facilitating access to specialist support or resources.

Harrow CCG has established a range of enhanced services to support care homes, including 24/7 access to medical support, minimum once-weekly pro-active calls to care homes by lead GPs, pro-active calls to high risk homes on the weekends and in-hours access to a centrally co-ordinated community support service to general practice, including access to geriatric and palliative care support.

As part of the local response there is a nominated single clinical lead for all 56 residential and care homes. The CCG has an agreed approach for the completion of outstanding care plans prioritising those at risk and with complex needs. Training and education is being regularly provided to support with the use of PPE, adherence to guidance and the implementation of infection control measures through NWL quality visits and on-going local authority support.

In addition to this Harrow CCG is providing a local testing service to support with rapid access to testing in response to outbreaks and wider testing services to all type of homes for Harrow residents including, sheltered, supported, domiciliary, care and residential homes that are yet to be tested.

The details of the delivery of these functions by Harrow CCG and Harrow Council are provided at 'Annexe C: Care Homes Frailty Response Team'.

## **Financial Arrangements**

Harrow Council has undertaken the following measures to support providers during the Covid period to date in accordance with the Government's COVID-19 Funding, ADASS framework, Government's Policy Procurement Notice (PPN) 02/20 and Harrow Procurement Team's advice:

- i.Accelerated payment terms for social care providers implemented. Payment of invoices brought forward from the Council's default 30 days to 14 days (some social care providers already on immediate payment terms).
- ii.Payments to day care / home care providers are now paid on a scheduler basis (reducing the administrative burden of raising invoices) for planned care for the period 23<sup>rd</sup> March 20 to 30<sup>th</sup> June 20 (subject to review), regardless of

whether the service user has cancelled the package or the provider has closed the service or provided an alternative. The cost of this is estimated at just under £500k.

- iii. Recipients of Direct Payments have been advised to continue paying their providers regardless of whether the service has been cancelled, ceased or an alternative service is being provided.
- iv.An enhanced Covid home care rate has been agreed for a three week period following hospital discharge
- v.Training on the use of PPE has been delivered and PPE has been provided as requested by providers.

Additional temporary funding of 5% to care home, extra care and supported housing and MH providers for all placements commissioned by Harrow was agreed by the Leader on Friday 15<sup>th</sup> May. This covers the period 23<sup>rd</sup> March to the end of June. The purpose of this payment is to provide financial support to enable the providers to continue their services, pay staff and suppliers, meet additional Covid related costs and contribute to their resilience to continue operation throughout the Covid period and the recovery phase thereafter. This currently equates to approx. £600k of funding.

Harrow Council was allocated £1.736m from the Government's Infection Control Funding. In accordance with the guidance, 75% £1.302m will be allocated to care homes in accordance with the grant conditions. The remaining 25% funding (£0.434m) will be allocated according to specific care home needs as included in the action plan but also to support home care providers to ensure that provider market within the community is resilient.

In accordance with the discharge guidance published on 19<sup>th</sup> March and the April 2020 further guidance, work continues across the NWL region to agree the discharge funding between the council and the CCG.

Whilst not directly related to external care home providers, the Council have engaged additional staffing to support the discharge pathway and social care operations, including additional support to our in-house residential provision. The Council have also purchased a small number of block beds to ensure adequate supply within the local area. These costs will be funded from the Council's allocation from the £3.2bn Covid Funding and have been included in the MHCLG return.

## Approach agreed locally to provide alternative accommodation

The borough had witnessed approximately 134 average daily void beds during COVID-19 period to date, due to the number if outbreaks seen. This has been approx 11% of the total bed capacity in the borough. However, I can confirm that the Council and CCG have jointly identified capacity to ensure residents continued to receive support at alternative care home placements, where we opened transitional beds for quarantine purposes.

As part of Harrow's strategic approach to securing a range of providers in Harrow, the Council has also agreed an enhanced home care hourly rate to support home care providers caring for Covid residents for two weeks after discharge.

## Local co-ordination for placing returning clinical staff or volunteers into care homes

NWL has a strong focus on staff testing to support the safety of workers and residents, whilst the various national options are available to staff, we have also sign posted them to local access either at a primary care hub or through testing at their place of work.

I confirm the current level of the support offer covers all the areas below

- Infection prevention and control
- Testing
- PPE and equipment supply
- Workforce support
- Clinical support

These are outlined in the NWL Care Home Support Programme at Annexe B and Harrow CCG's local plans for the Care Homes Rapid Frailty Team (RFT) which are well established as detailed at Annexe C. The RFT support plan extends to home care and other providers acknowledging the need to ensure that all residents and staff providing care for vulnerable people are protected from Covid regardless of their residential setting. In addition Harrow CCG has plans for all care homes to be offered testing by 29<sup>th</sup> May and these are provided at Annexe C.

# Harrow's Care Home Support Plan

Harrow has a broad range of care homes and care providers including national chains and small local charitable organisations meeting the diverse needs of Harrow residents. The CQC currently has 56 care homes registered in Harrow and the impact of Covid and the individual provider's response has been different. This is the context that Harrow Local Authority, CCG and NWL have developed the care home support plan.

There are weekly forums for care home, home care and Mental Health/Learning Disability providers to update on Covid matters and representatives include Public Health, ASC Officers, CCG colleagues, including clinical staff. This has provided a good forum for communication and feedback to assist the local response to Covid. There has been a high response rate by providers to the Capacity Tracker. This information and the analysis by LSE has been used to develop the Harrow Care Home Support Action Plan.

The Capacity Tracker Implementation Status Template is provided at Annexe D and the Harrow Care Home Support Action Plan at Annexe E. A small number of care home providers have been identified for specific support, but in general, a number of the actions are included in the CCG RFT Plan and are on-going to ensure that practice on infection control is embedded.

In developing this response, Harrow has engaged with care providers, Health and Wellbeing Board and Local Resilience Forum chairs, Healthwatch, care provider forum and local VCS/Advocacy provide and will work on their comments responses to refine and develop further our offer. The response will be published on Friday 29<sup>th</sup> May on the Harrow Council website

While we are pleased to be able to outline the comprehensive and generally effective nature of the work that Harrow Council has undertaken with NHS partners across London, NWL and Harrow in support of Care Homes it is important that we raise the nature and extent of the challenge we have faced in doing so in respect of this is that in many instances the support and approach taken has been locally and regionally driven "in spite of" rather than "because of" an effective national system and approach. In particular:

• The absence of a comprehensive and effective national strategy and focus on care homes from the start of the pandemic has led to many potentially avoidable problems and outbreaks

- The long-term and acute challenges faced by social care as a result of an underfunded system which does not fund or regard social care on a similar basis to the NHS has led to specific weaknesses in the care home sector
- The lack of an effective national supply of PPE has required innovative and effective local solutions in order to ensure infection control rather than this being in place on a national basis
- The difficultly in ensuring testing was available for care home staff and residents at the earliest stages in the pandemic has created many problems meaning that some of our most vulnerable residents and staff came onto the testing programme much later than NHS colleagues which undoubtedly lead to many issues in care homes
- The remaining lack of clarity about the systematic testing and retesting of care homes
- The care home support packages need to be expanded accordingly to the wider care market including home care, sheltered housing to avoid community infection spread and acknowledge to range of providers for services to vulnerable people

Harrow has worked within the London, NWL and local place based context to develop robust packages of support for care homes specifically and has extended this across the care market to include home care providers, sheltered and extra care providers. The Covid response has galvanised the system across NWL to develop an integrated approach, building on established foundations at NWL and local levels. Sustaining and managing the response to Covid will be a long term function across the health and care system. There will be financial and organisational challenges but there is a commitment to build on levels of integration and collaboration achieved.

The situation is dynamic both in respect of Covid, but also the Government's health and care integration agenda and the NHS Covid Recovery Plans. Harrow is committed to working with its partners across health, voluntary and community sector and local communities to ensure that there is resilience for future waves, that developments align with the recovery at all levels. The plans for securing resilience in the care market will be reviewed in this context and amended accordingly.

Yours sincerely,

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Sean Harriss Chief Executive