



Lancashire County Council  
Adult Social Care  
Winter Plan 2020/21

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## Document Version Control

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## 1. Introduction

Winter planning is a necessary and critical part of business planning in order to set out business continuity and managing major areas of risk during what is typically a more pressured part of the year.

This year, planning has required the Authority to take account not just of typical winter pressures, but also the added challenges that are still evident across the social care sector from the first wave of the COVID-19 pandemic, alongside ensuring readiness for a second wave or further spikes. Combined with this the NHS have targets to meet as part of its post COVID restoration work (commonly known as 'phase 3 planning') which will also bring greater demand to social care. Ensuring the stability of the social care market and sufficiency of care remains of paramount importance and is a critical part of this winter plan.

The Lancashire County Council Winter Plan for Adult Social Care formally comes into effect from 1<sup>st</sup> October 2020 and will run until the 31<sup>st</sup> March 2021. To shore up the ability of Adult Social Care to respond to the ongoing pandemic, several elements of this winter plan are in place prior to the official commencement date and will also need to continue beyond the end of the winter period. The plan aligns to both local Integrated Care Partnership (ICP) and Integrated Care System (ICS) plans, as well as the national Adult Social Care: Our COVID-19 Winter Plan for 2020-21. The National Social Care Task Force published its report on the 18<sup>th</sup> September 2020, and where relevant, this winter plan incorporates recommendations from it.

This winter plan sets out the measures that Lancashire County Council are taking as part of collective planning across the ICS to ensure high quality and responsive services that enable people to maximise their independence, leave hospital as soon as they no longer need a hospital bed or avoid an unnecessary admission, and remain living in their own home for as long as possible. It also sets out the measures being taken to support the care market to be as resilient as possible across the winter months and during the pandemic, and the work underway to restore social care services in a safe and COVID secure way, which had been paused during the first wave of COVID-19.

When systems are under pressure it remains important to collaborate to make best use of public funding and to reduce duplication, and Lancashire County Council will continue to plan with partners to ensure that these principles underpin our collective response to winter resilience.

The LCC Adult Social Care Winter Plan version 2, dated 1<sup>st</sup> October 2020 has been signed off by the Adult Services Senior Leadership Team and shared with relevant managers and staff within the Council. In accordance with the national Adult Social Care: Our COVID-19 Winter Plan 2020/21, Lancashire County Council have written to the Department of Health and Social Care confirming we have put in place a winter plan and have either undertaken actions or are continuing to work with care providers across Lancashire in order to receive the second instalment of the Infection Control Fund.

The range of measures and actions set out in the plan and delivery against it will be monitored on a regular basis by the LCC Adult Social Care Winter Board, which will also agree mitigating actions where required.

A copy of the Lancashire County Council Adult Social Care winter plan will be forwarded to each of the 5 A&E Delivery Boards for inclusion in the system wide winter planning and delivery reporting.

Any significant amendments will be communicated via the issue of a new version

## 2. National and Local Planning Context

In addition to the usual considerations of winter and the extra demand that the time of year places on social care, there are a number of additional factors, risks and reports that have been taken into consideration and influenced the planning for this year.

These include:

**COVID-19** – all the additional pressures that delivering services in the context of COVID-19's continued presence creates for LCC, the NHS and social care providers;

**National Social Care Action Plan (15.4.2020)** - This plan set out a range of measures for Local Authorities to ensure a response to, and which were aimed at

1. controlling the spread of infection
2. supporting the workforce
3. supporting independence, supporting people at the end of their lives, and responding to individual needs
4. supporting local authorities and the providers of care

**National Adult Social Care Winter Plan (DHSC 18.9.2020)** – this plan sets out the key elements of national support available for the social care sector for winter 2020 to 2021, as well as the main actions to take for local authorities, NHS organisations, and social care providers, including in the voluntary and community sector. It incorporates many of the recommendations set out in the national Social Care Task Force report as well as building on the learning and the work undertaken by Adult Social Care across the pandemic so far.

The key elements of the plan include:

1. Confirmation of the continuation of the Infection Control Fund, with an additional £546 million being allocated 'to support providers to stop all but essential movement of staff between care homes to prevent the spread of infection' – including payment of staff who need to self-isolate.
2. The provision of free Personal Protective Equipment (PPE) for 'care workers and people receiving social care' until 31st March 2021 for all Care Quality Commission (CQC) registered adult social care providers (via PPE portal and Local Resilience Forums (LRF)) and a commitment to also support the wider PPE needs of the sector (via Local Authorities).
3. The appointment of a new national Chief Nurse for Adult Social Care to provide clinical leadership to the social care nursing workforce, and who will work alongside the national Chief Social Worker.
4. Proposals for a strengthened monitoring by CQC jointly with Local Authorities where there are concerns for safety or quality.
5. Development of a designation scheme with CQC to designate premises that are safe for people leaving hospital who have tested positive for COVID-19 or are awaiting a test result
6. Make available for free and promote the flu vaccine to all health and care staff, personal assistants and unpaid carers
7. Publish the new online Adult Social Care Dashboard which brings together information from a range of existing sources to give visibility of real time data at a national, regional and local level

**National Social Care Task Force Report (18.9.2020)** – this report summarises the work and recommendations of the Social Care Task Force which was set up to

consider the needs of the social care sector across winter and beyond in the response to COVID-19. It was supported in its work by 8 advisory groups looking into specific areas of care. The final report sets out the critical requirements in increasing resilience in the social care sector at a national, regional and local level and actions that are required to enable people who need social care support to live as safely as possible, whilst maintaining critical contacts and activities that support their health and wellbeing.

**NHS Winter Planning** – the NHS have this year been required to submit, in collaboration with key partners at ICP/MCP and ICS levels, winter planning templates that set out key risks and actions to be taken in respect of Demand, Capacity, Workforce, Exit Flow and External Events.

**NHS Phase 3 Planning & Restoration of Services** - the additional mandate that came to the NHS in July 2020 on how to prepare for the rest of the year, including a return to normal in community health services and a catch up on treatments and operations delayed from earlier this year

**Hospital Discharge Service: Policy and Operating Model (21.8.2020)** – sets out a nationally mandated discharge process and set of discharge pathways that require people to leave hospital within the same day that they no longer have a 'reason to reside' in a hospital bed. This will improve the safety of individuals and the resilience of community services if people spend as little time as possible in hospital, but presents challenges in ensuring people are discharged to the right service for them, at the right time.

**Local NHS Hospital Bed Deficits** – local bed modelling shows an anticipated significant bed deficit to meet the demands of winter and COVID-19, and winter planning needs to provide mitigation for this.

**Workforce** – requirement to consider recruitment and retention both for new or expanded services, along with the resilience and wellbeing of staff which could further impact on already fragile services. Issues such as vacancies, absences and high turnover not only lead to a higher risk of infection transmission, but also mean that capacity is at greater risk of being insufficient to respond to need during the height of the winter.

**Funding** - there is a funding shortfall in what's required to deliver the additional capacity. Proposals have been shared with the ICS regarding system support to this, plus the continuation of essential Improved Better Care Fund (iBCF) funded teams for a further year

**Market Stability / Sufficiency / Suitability** - responding to uncertainties in how the care market may operate in the months ahead, and the difficulties in reliably estimating demand and capacity in the context of so many other variables

**Mental Health** – demand for mental health services is already growing in the aftermath of the COVID-19 peak. Winter and the other pressures listed here are likely to add to that demand both for in-patient services, for safe and speedy discharges and for community services.

**Working to Reduce Inequalities** – we know that the virus has had a disproportionate effect on people from some minority ethnic backgrounds and with certain health conditions and disabilities. People in some care settings have been disproportionately affected in terms of face to face contact with their loved ones and many people have not been able to access their usual support settings and networks. Our aim is to support communities to minimise the risks of transmission of the virus, whilst reducing inequalities in the impact the COVID-19 restrictions has on people who need health and social care support.

**Lancashire County Council Social Care priorities** – areas where improvements or opportunities have been identified that will make a difference to performance or financial controls. Restoration of paused services such as Day Services, and work to ensure the resilience of social care delivery.

**Restoration of Continuing Health Care (CHC) processes** – these were suspended from the 19<sup>th</sup> March 2020 as part of the national response to the pandemic, but they are now being restarted which will have implications for the social work workforce too, as the backlog is tackled and the speed of decision making is expected to quicken. Getting this right has benefits both to individuals, the care market and also to LCC budgets. Getting it wrong could lead to poorer outcomes for people, additional pressures on the market and a potential pressure on the Adult Social Care budget.

**Brexit** - it is unclear at this stage just how severely the health and social care system may be affected by Brexit. It's most likely direct impact on social care is a loss of some workforce capacity, however we know that Lancashire is likely to be at lower risk than some other parts of the UK. Its impact on the NHS workforce and on essential supplies is potentially greater if contingency and resilience plans are not successful, and this could have a knock on impact onto social care in terms of additional demand.

We have worked in collaboration with key partners to develop our winter plan, including the NHS, the 3<sup>rd</sup> Sector and providers across the care market. In turn, we have collaborated with the NHS and key partners in the development of the ICP and ICS system plans. Our adult social care plan is not limited to only those people who receive Local Authority funded care, but also ensures that key actions apply to those who fund their own care. We have also detailed the support offered to informal carers.

Across the winter period and beyond we will continue to work closely with partners, in particular the care market to ensure that relevant advice and guidance is promoted through the fortnightly provider webinar and implemented, and where appropriate localised flexibility is applied.

Responding to and managing the impact of COVID-19 remains of critical importance across the winter period and into 2021. The Lancashire Local Outbreak Management Plan is in place to take actions and support the containment of COVID-19. To minimise the risks of transmission of the virus when moving from healthcare to and between social care settings, an Admissions Policy is in place, endorsed by the Lancashire Local Resilience Forum (LRF). The Policy sets out that individuals must be tested prior to hospital discharge and only where a provider indicates they can safely isolate the person should they be discharged into the preferred social care setting. The Admissions Policy is regularly reviewed and updated in response to new guidance and Infection Prevention considerations.

### **3. Aims and Objectives**

The aims and objectives of the Lancashire County Council Adult Social Care Winter Plan are:

- To ensure that the Lancashire Adult Social Care Winter Plan meets the requirements of the national Adult Social Care COVID-19 Winter Plan
- Ensure the provision of social care services, of a sufficient volume and quality, and that have a focus on maximising independence are in place across the winter period
- To maximise adult social care resilience and support wellbeing, both across the care market and in the Lancashire County Council adult social care assessment and support teams
- Identify, mitigate and minimise risks across the social care system, and work collaboratively with partners to reduce risks across the ICS
- Ensure that people are supported in a safe and COVID secure way, with the right services available in a timely way
- Ensure that a 'home first' focus is maintained throughout all decision making at individual and wider commissioning levels
- Maintain a balance between reducing the risks of the virus and responding to the need for people to receive care and support
- Ensure high quality care and support is designed, commissioned and delivered in a way that upholds peoples' dignity and affords choice and control
- Wherever possible, to ensure care will be provided in a way that supports people to remain connected with families and loved ones, supports emotional wellbeing and reduces loneliness
- To put into practice locally, the recommendations of the Social Care Taskforce
- Have due regard and take relevant actions in relation to individuals and communities who may be more susceptible to the transmission of COVID-19
- To continue work to identify and minimise inequalities across the health and care system

The following sections highlight the activity/work taking place across a number of key areas to meet the aims and objectives stated above.

### **4. Preventing and Controlling the Spread of Infection in Care Settings**

Significant work has been undertaken locally and continues to be in place to prevent and underpin the control of the virus across care settings.

#### **Provider Engagement & Guidance**

Fortnightly webinars are held with all care providers across Lancashire where amongst other key messages, relevant information is shared in relation to Infection Control and COVID-19 Testing guidance and procedures. This information is delivered by subject matter experts from Public Health, and questions raised by providers are responded to and placed on the provider portal for reference purposes.

Guidance has been issued to Care Homes based on national data and information in relation to enabling COVID safe visiting for residents. A localised visiting policy for professionals has also been developed, and is used to minimise footfall into care



settings and ensure all protection measures including risk assessments and use of PPE are in place.

Our Lancashire Local COVID19 Outbreak Management Plan sets out how we will prevent and manage coronavirus cases and outbreaks in the county, including in high-risk settings such as care homes, as well as workplaces and schools. The plan sets out the definitions of outbreaks, actions that will be taken, and support that will be offered to vulnerable people as part of the outbreak management. The plan has been shared widely, and is publically accessible via the LCC Coronavirus webpage.

Information is shared regularly from the Lancashire Health Protection Board with relevant teams in adult social care who are managing the response to provider resilience, COVID incidents and outbreaks.

### **Outbreak Support Team**

Recognising that the challenges of the pandemic are likely to continue through winter and beyond, the Quality, Contracts and Safeguarding Adults Service has recently organised the Covid Outbreak Support Team to assist providers to manage their COVID-19 incidents/outbreaks as effectively as possible, and provide support throughout their recovery. The team work closely with the county council's Infection, Prevention and Control team and NHS partners.

Aligned to this, the county council commissioned My Home Life to deliver wellbeing support to care homes, many of whom suffered excess loss of life during the early stages of the pandemic; we are continuing to explore how we can progress to offering this support more widely.

In each ICP, Outbreak Control Groups are in operation across health and social care, ensuring a coordinated response to prevention and outbreak control that is bespoke to the needs of each care setting.

### **Testing**

Locally, NHS partners have delivered training to all Care Homes in relation to swabbing staff and residents. Care Homes are able to request additional support or refresher training where required.

Testing is a vital part of ensuring the prevention of transmission of the virus and in managing outbreaks, and all eligible care settings are encouraged to register with the national portal to receive the testing kits and ensure that they follow the testing strategy.

### **Workforce**

The importance of restricting the movement of staff between Care Homes, along with a range of workforce measures to limit the transmission of COVID-19 has been shared with providers. The 1<sup>st</sup> tranche of the national Infection Control Fund (c £16m) which was passported directly to providers by the Council, set out further requirements to be met in order to receive and use the monies to support the prevention and management of COVID related challenges. The extension of this fund with a second tranche (c£14M) under the national Adult Social Care Winter Plan is welcomed, and will be similarly distributed to care providers in line with the regulations.

All providers have in place business continuity plans that many have enacted at times during the first wave of the pandemic, and will continue to do so during the winter period if needed.

As part of the initial COVID-19 response to the needs of Care Homes, the Lancashire Temporary Staffing Agency (LTSA) was formed in April 2020 by the Council, to support the resilience of the Care Homes where they had sudden staffing gaps due to COVID related absence. In recognition of the continuing fragility of the care sector, Lancashire County Council has taken the decision to continue this additional capacity until at least 31<sup>st</sup> March 2021 at a current cost of around £50,000 per month. The LTSA at one stage had approximately 140 staff, however as people have started to return to their usual jobs or back to University etc, we are now about to commence a further round of recruitment to shore up capacity for the winter period. So far, we have supported more than 30 Care Homes across Lancashire through the LTSA, and ensured safe services could continue. In compliance with effective infection control, staff require a negative test result before being deployed into any Care Home requiring additional support.

### **Personal Protective Equipment**

The provision of PPE remains of critical importance and Care Home and Homecare providers have been encouraged to register with the national portal to obtain free supplementary supplies. The extension of this scheme until the end of March 2021 is set out in the national Adult Social Care Winter Plan, along with the plans for PPE to be provided via the LRF or Local Authorities to other care providers not eligible for registration on the national portal. Lancashire already has arrangements in place to monitor and distribute PPE to personal assistants operating under Direct Payments.

### **Designated Settings – Winter Discharges**

On the 12<sup>th</sup> October 2020 the Department of Health & Social Care notified Local Authorities of the requirement for designated care settings for people discharged from hospital who have a COVID positive status. The requirement applies to people being discharged into or back into a registered care home setting across the winter period.

The requirement applies to residential and nursing homes for older people, people with dementia and people with a learning disability, mental health and/or other disabilities. Local Authorities are directed to work with the Care Quality Commission to identify local designated accommodation and work to assure their compliance with the Infection Prevention Control protocols.

The requirement for designated settings for people who have a positive COVID-19 test presents significant challenges for health and care organisations, not just in Lancashire but across all areas. The Local Authority has commenced this work with the Care Home providers, the Care Quality Commission and the NHS locally.

## **5. Flu**

As we move into the winter period, the prevalence of flu increases. The ability to implement a successful national vaccination programme will be more important than ever.

In addition to the national programme, LCC will be undertaking an annual workforce programme to increase staff protection via the offer of a free flu vaccination; the programme will be extended out to all staff(except mainstream schools teaching staff

where different arrangements apply) to ensure essential services are unaffected over the winter period

All staff across Adult Social Care have been encouraged to take up the seasonal flu vaccine to support keeping our teams well over winter.

Local authorities have a responsibility to provide information and advice to relevant bodies within their areas, to protect the health of the population and the Lancashire County Council Flu Team provide this advice and support along with other actions to increase uptake of the vaccine.

This year, the community pharmacy seasonal influenza advanced service framework will be amended to enable community pharmacies to vaccinate both residential care/nursing home residents and staff in the home setting in a single visit to increase uptake rates and reduce footfall. The Council are working closely with the NHS locally to ensure that flu vaccinations reach the widest audience including more difficult to reach communities. A joint communications campaign has been developed and will be shared widely across a range of platforms.

## **6. Service Capacity and Expansion**

Work has been undertaken to identify the range of COVID-19 response actions that need to continue and extend across the winter period and beyond, plus new or expanded service capacity to meet the social care demands of the continuing pandemic and the winter period. (See **Appendix A** for consolidated table and breakdown of costs of additional winter capacity)

These include:

### **Consolidation / continuation of existing iBCF funded teams**

We continue to use the iBCF to fund staffing and services that ensure we can provide essential functions including Mental Health Act assessments on a 24/7 basis, effective hospital discharge and admission avoidance, and intermediate care triage, allocation and case management. Funding arrangements are in place to continue these essential teams and services through to March 2022.

The iBCF funded teams/services agreed for continuation are:

**Mental Health** – continuation of 24 hour AMHP service and Integrated Discharge Service

**Intermediate Care (ICAT and CATCH) and D2A assessment services** – continued funding of social work, occupational therapy and care navigation posts

**Promoting Independence Team** – continuation of this team which undertakes a range of cross cutting work to address pressures and deliver budget savings

### **Crisis & Reablement Hours**

An additional 1,600 crisis hours per week for winter and beyond if required, have been identified that support people to remain in their own home who are at risk of hospital or residential care admission without urgent support. The support is provided for up to 72 hours and can be anything from a one-off hour to continuous support.

An additional 2,700 'Home First' crisis hours per week for winter and beyond if required, have been identified that will support more people to leave hospital and return directly home as soon as they no longer need to be there. The home first hours are used to support discharges with and without therapy input, and support people for up to 5 days where formal support is required to recover, with the assessment for onward support taking place at day 3.

An additional 3,000 crisis hours per week and beyond if required, have been identified to enable Adult Social Care to offer enhanced support to those people who have more complicated urgent social care needs and would otherwise be facing an unnecessary admission to a Care Home. The additional hours will enable people to remain in their own home for longer, plus where appropriate they will also enable more rapid hospital discharge and reduced length of stay.

An additional 57 Reablement places per week for winter and beyond if required have been identified in anticipation of more people being discharged from hospital more quickly as part of NHS phase 3 restoration, plus the continuing effects of COVID-19. As the demand on community services grows, the need to maximise peoples' independence becomes ever more critical, and the enhanced service provision may well be required on a long term basis as per the ICS Intermediate Care Review.

### **Roving Nights Service**

An additional 3 'shift runs' per night for winter and beyond if required, have been identified to provide care visits throughout the night for people who have needs but no need of continuous contact throughout the night time period. The service supports people who have more complicated care needs to return to, or remain in, their own home for longer.

This additional capacity could support between an additional 60 - 126 people per week dependent upon care needs.

### **Residential Rehab/Community Beds**

Across the county there are 115 residential rehab/community beds, providing 24hr bed based rehabilitation for people who need a higher level of care and support to achieve their optimum independence. These beds are sited within existing Care Homes, and are provided via the Lancashire County Council Older Peoples' Service working in partnership with NHS community services who provide the therapy services to facilitate rehabilitation.

Additional care staff capacity has been identified for winter and beyond if required, to enable the service to maximise the use of the beds and safely meet the needs of increased volumes of people with more complicated needs and who require support overnight.

A trial referral management service is also proposed across the next 12 months, which sees a dedicated centralised triage function for the countywide residential rehab services. This will enable faster responses to referrers, focussed accuracy checking of information in relation to needs, and free up the Registered Care Home Managers to focus on other critical tasks.

### **Care Provider Resilience**

Within the plans for winter, additional management capacity is costed to support the Crisis and Reablement providers. This is in relation to the increased volume of hours

to be coordinated and rostered, plus link in with and provide feedback to social care assessment teams on increased volumes of service users.

The proposal will also support the crisis and Reablement providers to be able to shore up their management capacity to operate more robustly across 7 day working. This will support both the requirement to deliver a more rapid discharge process and enable people with urgent social care needs to be supported in their own home rather than an unnecessary admission to hospital or a care home, thus freeing up services for people who need that level of support.

The continuation of the Lancashire Temporary Staffing Agency will continue to support the resilience of care homes, in particular where there are staffing gaps due to staff sickness, or in the management of COVID-19 outbreaks.

The Quality, Contracts and Safeguarding Adults Service continues to support providers across a wide range of pandemic related areas, and additional staff are detailed in the winter plan to bolster this service. The service has also developed a specific covid-19 provider failure plan which can be initiated should services be at risk of not being able to meet people's care and support needs as a result of the pandemic. This bespoke provider failure plan is supplementary to the existing plans in place which supports the county council's responsibilities under the Care Act and has been stress tested by the Military.

Providers also receive a daily call from the council where they are asked a range of questions including their PPE status, the staffing capacity and any new or suspected cases of COVID-19. They are also asked how they are managing and whether any additional support is required. This information is shared with contract management teams within the service to follow up and ensure that providers receive the information, advice and guidance they need, linking in to relevant support pathways where necessary.

The government has made available to care providers a grant (with conditions) to support infection control. The funds will be administered by the council, with the period covered by the grant ending March 2021.

### **Hospital Aftercare Service (Age UK)**

The Hospital Aftercare service is present in each Acute Trust across Lancashire, and works alongside discharge teams and NHS colleagues in the Emergency Department to support timely discharge for those people not requiring specialist transport or social care.

The service which is delivered by Age UK on behalf of Lancashire County Council includes "Take Home & Settle" (Tier 1) which provides support for up to 3 hours, and "Follow-up and Support" (Tier 2) which provides low level support for up to six weeks of up to 15 hours over the period.

The planned expansion for this winter and beyond if required, will support up to an additional 800 people per year.

### **Integrated Home Response and Falls Lifting Service**

These services went live in October 2019 across Lancashire, and offer an alternative response to an Ambulance for people who have fallen within their own home and have no injury but need help in getting back on their feet or for those who receive LCC's or Blackpool Council's telecare service and require a wellbeing check. The

service aims to avoid unnecessary call outs of emergency ambulances to older and vulnerable people. Instead of being attended to by North West Ambulance Service (NWAS) the individual is visited by a response and lifting service, building on existing local authority telecare provision.

Up to the end of June 2020, the service responded to over 11,500 calls. Those are potentially visits which an emergency ambulance would need to respond to, if this service wasn't in place. Average response times for the service are just over 27 minutes, which is much better for the individual as they will wait for less time on the floor.

### **Workforce**

Additional Social Work, Occupational Therapy and related social care assessment workforce have been proposed which will expand the capacity of a range of teams to support amongst other things:

- the rapid discharge of people ready to leave hospital
- assessments and reviews
- triage and facilitate admissions into intermediate care services
- support people to move through intermediate care services
- support providers with outbreak management and recovery, and respond to provider failure
- minimise delays in adult safeguarding work
- sourcing appropriate care in a timely way
- support to people who are homeless and at risk of COVID transmission
- meet the increased demand for 'single handed care' assessments

### **Mental Health**

It is recognised, that as a result of the Covid-19 pandemic, the demand for mental health services is likely to increase further, due to both increased mental health prevalence within the population, as well as from suppressed access to mental health support during the lockdown period and continuing social restrictions. Additionally services both nationally and locally are beginning to see an increased acuity in first time presentations to our services. Adult Social Care teams and the 24/7 AMHP service work together with NHS partners to support to access the right treatment and support for their needs, in a timely way.

## **7. Collaboration across Health and Care Services**

LCC Adult Social Care have worked together with the NHS and other partners on winter planning, risk mitigation and opportunities for mutual aid.

### **Hospital Discharge**

The updated national Hospital Discharge Service Policy and Operating Model was published 21<sup>st</sup> August 2020. Work is underway to agree a standardised set of principles, pathways and an operating model for Lancashire and South Cumbria aligned to the national guidance that will enable people leaving hospital to experience the same process, receive the same information and have access to the same service opportunities on discharge. This work also includes developing and agreeing locally the financial arrangements that underpin the operating model.

The updated national model aims to keep people as safe as possible by putting in place pathways that enable people to leave hospital as soon as they no longer need an Acute bed. The expansion of the service capacity set out in the LCC Adult Social Care Winter Plan supports this aim by ensuring there is sufficient service capacity to enable this to happen in a timely way, in the majority of cases on the same day. The expanded services focus on enabling people to have period of recovery and maximise their independence. Planning and decision making at both an individual and commissioning level has a clear 'home first' focus.

In line with the updated guidance, people who are discharged with new or extended care are fully funded for up to 6 weeks. LCC and NHS staff work closely together to ensure that peoples' needs are assessed within that time, and longer term care needs are identified and appropriate support put in place

### **Care Settings**

The Lancashire Admissions Policy is in use and followed by the Hospitals which ensure that people must be tested prior to discharge into a care setting. The Policy further sets out the requirement to communicate the results to the providers and confirm that they can receive the person and provide the appropriate isolation measures. As a health and care system we will be working together to support people to return to the home they were in prior to a hospital admission wherever possible, and avoid unnecessary disruption to their lives.

Adult Social Care are working locally with NHS partners and Care Providers to look at alternative safe options for people who need to leave hospital, cannot return home even with a high level of support and cannot be discharged to their chosen Care Home as the provision of appropriate isolation is not possible. We will also be working closely with the CQC in their role under the national Adult Social Care Winter Plan to designate premises that are safe for people leaving hospital who have tested positive for COVID-19 or are awaiting a test result

Provision under the Enhanced Health in Care Homes framework is in place across Lancashire, with all Care Homes having been designated a clinical lead. Various arrangements are in place across the County under the framework including the sharing of health advice and information with Care Homes through local digital platforms, the provision of enhanced support through health Care Home support teams, the ability to provide GP consults via video technology and the clustering of Care Homes into designated Primary Care Networks.

### **Continuing Health Care (CHC)**

National guidance on the restoration of NHS Continuing Health Care processes was issued on the 21<sup>st</sup> August 2020. The guidance outlines that from the 1<sup>st</sup> September 2020, the CHC process should resume with people who are eligible being assessed in the usual way.

The guidance also sets out the requirement to assess and review everyone who is currently receiving fully funded support through the national hospital discharge arrangements in place from 19<sup>th</sup> March – 31<sup>st</sup> August 2020, by the 31<sup>st</sup> March 2021. Additional funding has been made available nationally, and Adult Social Care are working closely with the NHS locally to agree additional workforce capacity, communications and joint processes to ensure everybody who needs an assessment has one by the deadline. We have approximately 2000 'deferred assessments' to undertake by March 2021.

Collaborative and innovative ways of undertaking the volume of assessments are being developed, including the use of Trusted Assessments and video consults to minimise any unnecessary visits to care settings.

### **Escalation and Resilience**

Adult Social Care have worked with the NHS locally to agree daily reporting into the Escalation Management System Plus (EMS Plus) escalation system in place across the ICS. Hospital Discharge, and Intermediate Care Allocation Teams (ICAT)/Central Allocation To Care and Health (CATCH) teams will add their weighted team status into the dashboard each day giving visibility of capacity and pinch points. Work is underway to look at how service capacity for community intermediate care services such as crisis support and Reablement can be auto-uplifted into the dashboard each day from our existing systems, avoiding the need for additional manual input.

Sitting behind the escalation system is a set of action cards detailing the response of each organisation when any ICP reaches set standardised escalation trigger levels (OPEL 1-4).

LCC Adult Social Care have resilience and business continuity plans in place and have operated these across the pandemic so far. Care providers equally have these plans in place and many have enacted them in recent months. The Quality, Contracts and Safeguarding service work closely with care providers in ensuring plans are in place and appropriate business continuity actions are mobilised as required.

During the pandemic, LCC developed a Care Capacity Tracker and a daily contact process to further support the resilience of the care market. The information supplied by providers enables full visibility of pinch points and where urgent support is required, for example with PPE or new COVID infections. The tracker auto-uploads into the national tracker on behalf of care providers if they want us to do that, and the process has regularly ensured that the Lancashire data into the national tracker is the most complete nationally. Locally, the tracker enables a wider health and care system view of the care market, and high level data extraction is used as part of the ICS system resilience reporting.

## **8. Supporting people who receive social care, the workforce, and carers**

Keeping people as safe as possible, whilst ensuring they get the social care and support needed is integral to this winter plan. Ensuring resilience across the workforce is critical to being able to assess for and deliver social care support.

### **Workforce**

Across winter and the continuing pandemic, Adult Social Care continue to ensure that people receive timely social work and Occupational Therapy assessments, to get the right support at the right time. Additional staffing capacity has been identified to support the response to the anticipated increases in demand from hospital discharge and avoidance, safeguarding work, care sourcing and provider failure & outbreak management. This will minimise the need to pull on community teams who are working at full capacity. Business continuity and resilience plans are in place across all LCC Adult Social Care services.



7 day working is in place across Acute, ICAT, CATCH, Care Navigation and Approved Mental Health Professional (AMHP) teams, with the AMHP team operating a 24/7 service. Outside of core working hours, the Emergency Duty Team (EDT) responds to urgent situations.

As with previous years, annual leave is restricted across December and January to ensure 80% of the workforce is in work, with a minimum of 60% in work in-between Christmas and the New Year. The Acute, ICAT, CATCH and Care Navigation staff rostered to work across the Christmas and New Year period to support the hospitals are shared within each ICP. The response to hospital discharge continues to be a 7 day service, except for Christmas Day which is covered by the Emergency Duty Team.

LCC have put in place a range of measures to support the health and wellbeing of the Adult Social Care workforce. Information, help and advice is available on the intranet dedicated Coronavirus pages, and regularly updated. This includes information for example on COVID-19 testing, symptoms, answers to commonly asked questions, HR and Health & Safety guidance, risk assessments, working from home and mental health & wellbeing advice and resources. Staff are supported by their team managers and 1:1s have a focus on wellbeing. Fortnightly staff webinars are in place to ensure staff have access to important updates, and have the opportunity to ask questions.

The wellbeing and resilience of care staff and providers across the wider care market is equally critical. Providers have business continuity plans in place that contain actions to be taken in respect of winter challenges such as inclement weather alongside many other actions take in the continued response to the pandemic. LCC are further supporting potential capacity gaps across winter with the Lancashire Temporary Staffing Agency.

The national weekly testing programme is in place across Care Homes which supports the health and wellbeing of staff, and homecare providers have been encouraged to adopt similar regimes where they become available. The national Infection Control Fund has been used by care providers to support the control of the virus by enabling actions such as maintaining payments to staff who are needing to isolate, and other measures.

The fortnightly provider webinars set up by LCC during the pandemic will continue across winter, and these will continue to provide and interpret important information and updates along with answers to queries raised.

### **People Who Receive Social Care**

A range of measures have been outlined in the plan to ensure sufficient care and assessment capacity is in place to support people across the winter period and beyond, given the continuing challenges caused by the pandemic.

The additional capacity and measures in place focus on people who need care and support being able to get the right care, in the right place at the right time. Care is provided in a safe way that helps prevent the spread of COVID-19, and upholds peoples' dignity.

Due to the continuing pandemic, additional restrictions may occur both nationally and locally on peoples' lives. Adult Social Care will continue to respond to and work

within, the required public health guidance in place at any one time to ensure that peoples' needs are met. Locally, the Director of Public Health will continue to review and issue guidance as required for care providers to be able to protect their services users with a balanced risk approach. This includes Care Home visiting policies and ways to ensure that people can remain meaningfully connected within the restrictions in place.

Adult Social Care are working through the re-opening of day services for adults with disabilities and older people, with both the LCC services and with providers across the wider care market. Services will be re-opened where possible and provide much needed support for people in a COVID-19 secure way. Where people need alternative services these are being sourced.

During the pandemic, Adult Social Care worked closely with Housing Authorities and NHS services to provide a coordinated response to people who are homeless or rough sleepers, ensuring that they had the support they needed to minimise the transmission of the virus and maintain their health and wellbeing. Work is continuing to look at the coordinated response across the winter period to enable people to get access to the care and support they need.

This winter plan sets out the range of actions and measures being put in place not just for those people who need Local Authority funded care including people who manage their care via a Direct Payment, but also people who self-fund their care and support. People who self-fund their care have access to the range of intermediate care services such as crisis support and Reablement, and to the fully funded 'discharge to assess' pathways operating out of the hospitals under the national guidance.

## **Carers**

Unpaid carers make up a vital part of the support networks for people who need care, with many unpaid carers being the sole carer for their loved ones.

Our support for unpaid carers remains robust and resilient. During the pandemic Carers identified by the council receive regular welfare checks, guidance and support using a range of technological channels. We have provided carers with official letters from the county council so they can evidence their vital role and continue their hugely important work to protect and support the most vulnerable.

Support for carers that was previously delivered at drop-in centres or coffee mornings has now moved to online peer-support platforms and many carers have signed up for this type of online peer support, which includes social activities such as quizzes and information, advice and guidance on health and wellbeing.

There is a range of information available to carers both on the LCC website and also through Carers Centres. Where unpaid carers are approaching Adult Social Care for support in their caring role, specific Carers assessments are undertaken by local Carers Centres and where required formal support is provided to the cared for person.

## **9. Prisons**

There are 5 male prisons within Lancashire, with varying degrees of social care demand. Winter resilience planning has taken place with the two social care providers

who are contracted to deliver support across the Prisons, to ensure that they have contingency plans in place to meet unexpected challenges.

Measures are in place to ensure that the men receive essential social care assessments and support even when tighter restrictions are in place as a COVID-19 prevention or outbreak response.

Adult Social Care are working closely with Prison Governors to ensure the delivery of social care to the men in custody mirrors as closely as possible the care and support they would expect to receive in the community.

A new 'Buddy' scheme is now in operation as a shared programme between the Prisons and Adult Social Care locally and the national organisation RECOOP, training a small number of prisoners to deliver some defined low level support, which enables those men receiving it to have greater levels of independence and emotional support.

## **10. Public Health**

### **Affordable warmth**

LCC works with the district councils to secure national Energy Company Obligation and other external funding through the [Cosy Homes in Lancashire](#) (CHiL) scheme for interventions such as first-time central heating, replacement boilers and insulation measures. CHiL can also offer a home visit that looks at the property, heating type and state of repair, energy usage and will provide support with fuel debt, fuel bills, switching energy supplier etc. Cosy Homes in Lancashire projects target those households living in fuel poverty and at greatest risk of their health being affected by having a cold home, particularly those recently leaving hospital, but also provides an offer of support to all households.

### **Crisis Support**

Help with essential furniture items and white goods is available for those on a low income needing help to maintain or set up a home. Applications to the Scheme are made by an approved referral organisation via the [online application form](#). To support residents with fuel payments LCC works with the Energy Debt Team based at Citizens Advice Preston (who cover all Lancashire districts for this service) to provide discretionary awards for fuel tops ups as part of a package of wider advice and support provided by experienced energy debt advisors.

### **Welfare Rights**

Following some changes, as from April 2020 the Welfare Rights Service (WRS) provides comprehensive and independent advice and assistance to Lancashire residents with appeal tribunal representation, comprehensive benefit advice for people over pension age, consultancy and training. Customers can access the service by referral from our referral partners i.e. any LCC service, other community services such as Citizens Advice, local councils, MPs, specialist nurses, mental health services and any other community service and organisations signed up as a referrer.

Further information on benefits and how to access the service can be found at <https://www.lancashire.gov.uk/health-and-social-care/benefits-and-financial-help>.

Contact is made within 10 working days or 2 working days for very urgent queries. During the current pandemic, arrangements are in place to undertake hearings and give advice remotely. The Welfare Rights Service is also developing an online training

program which can be accessed by LCC staff, other professionals and residents. A guide on how to complete a Personal Independence Payment form is currently available by registering on the LCC website and more courses and guides will be available shortly. The Welfare Rights Service uses social media (Facebook and Twitter) to keep people up to date with any relevant changes and information.

## **11. Winter and COVID-19 – Communications Arrangements**

### **Winter**

LCC has a dedicated 'Winter' page on the website delivering advice to residents such as how to keep warm and well plus information regarding travel, gritting and weather forecasts. Links are provided to partner sites including advice from the NHS and Lancashire Fire and Rescue. Between the 1<sup>st</sup> November 2019 - 31<sup>st</sup> March 2020 the site received 14,584 unique hits showing the importance and value of the provision of information to the citizens of Lancashire.

Helpful advice is provided on the site regarding how to prepare for inclement weather and advice around 'choosing well' with regard to accessing health services and not increasing unnecessary pressure on GP surgeries and Hospitals. Residents are encouraged to take up the flu jab, particularly if they are entitled to a free vaccination, and to encourage older or vulnerable friends, family and neighbours to do the same.

The LCC Winter site will continue to be updated with relevant information and advice throughout the winter period. During bad weather social media and press releases are used to remind people to take care and encourage neighbours to visit those who may be vulnerable living nearby. Key stakeholders are updated about the situation and any effects on service delivery.

### **Intermediate Care Capacity**

Capacity and usage information regarding intermediate care services is circulated daily to key staff across partner agencies via the Lancashire County Council care navigation service. This gives critical information to help good decision making in supporting people to access the right services for their needs.

### **COVID-19**

LCC has dedicated COVID-19 advice and information on the website, including the latest figures, health and wellbeing advice and where to access support, and also a myth-busting section to promote accurate information and help people make informed decisions.

The site includes information on prevention, self-isolation and the Test and Trace service, along with key information about Council services and how they are operating during the pandemic.

Information regarding the Community Hubs that were set up by the District Councils to provide support to vulnerable people during the pandemic, is detailed including direct links to their websites.

**Appendix A – Table of Additional Service Capacity and Costs**

<b>Service</b>	<b>Approximate Number of People Who Could be Supported (per annum)</b>	<b>Half year cost to end March 2021) £</b>	<b>12 month cost £</b>
Crisis (Home First, Crisis, Alternative to Residential)	Home First & Crisis Hours: up to 7000 people Alternative to Residential: up to 1250 people	3,226,600	6,453,200
Reablement	Up to 2,964 people	987,012	1,974,024
Roving Nights	Up to 3,000 people	116,967	233,934
Additional Social Workers (ICAT/CATCH/Reablement/Safeguarding/MH)	Required to meet demand	618,950	1,237,901
OT's	Required to meet demand	328,957	657,915
Increased Provider Leadership	Required to ensure timely response across 7 days	34,500	69,000
Additional Provider on-call	Required to ensure timely response across 7 days	22,500	45,000
SCSOs, Res Rehab referral management & Care Co-Ordination (G6	Required to meet demand	204,821	409,643
Additional Care Staff - res rehab	Required to meet demand	282,000	564,000
BSO	Required to meet demand	107,744	215,488
Additional Age UK Provision	Up to 800 people	105,000	210,000
Restoration of CHC systems and backlog	Required to meet demand	125,000	250,000
<b>Total</b>		<b>6,160,052</b>	<b>12,320,105</b>

