



Lancashire County Council
Adult Social Care
Winter Plan 2021/22

Author: Sue Lott, Head of Service

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1. Introduction

The Lancashire County Council (LCC) Adult Social Care Winter Plan is a necessary and critical part of business continuity planning in order to set out continuity actions, key risks and mitigations, and the management of these during what is typically a more pressured part of the year. This year's Winter Plan has required the Authority to take account of the continued challenges and pressures across the health and social care sector in relation to Covid-19 as well as an increasing and sustained pressure across the care market.

The NHS's work to restore its services and address the large numbers of people awaiting appointments, healthcare and treatment continues, alongside national requirements to commence new service initiatives such as the 2-hour urgent care response service. Without robust social care services in place, the NHS locally will be unable to deliver against its trajectory.

The challenges seen currently across the social care market at a sustained and increasing level of risk are unprecedented. The position in Lancashire mirrors the regional and national position and is resulting in significant challenges in various parts of the county. Further workforce risks are likely to materialise across the coming months in the care home sector as mandatory vaccination requirements means a percentage of the workforce will exit the sector. The growing risk to ensuring that there is sufficient capacity to meet peoples' needs, keep people safe and ensure continued 'flow' across the system is not to be underestimated and likely to be exacerbated through the winter months.

The Lancashire County Council Winter Plan for Adult Social Care formally comes into operational effect from 1st November 2021 and will run until the 31st March 2022.

Adult Social Care have been building up year round resilience and expanding services to meet increasing demand across the last few years, securing additional service and assessment staffing capacity through the use of short term/temporary monies, It has been recognised that it is necessary to put these essential and critical services on a more sustainable footing through recurrent funding to provide a much firmer base on which to further integrate and transform services, plus give both LCC staff and independent sector providers some stability in relation to workforce planning, recruitment and retention. Work is underway across each of the 5 Place Based Partnerships (formerly Integrated Care Partnerships or ICPs) to jointly do this on an agreed risk share basis.

Because of the improved resilience that has been established into some of the critical services, under usual circumstances there would be a reduced need for significant increases to services and staffing in planning for winter. However, we know that this year will potentially be one of the most challenging health and social care have faced in recent times. The continued widespread presence of Covid-19 coupled with a likely resurgence of the flu virus plus the significant workforce challenges across the care market means that planning is more complicated than ever before. We also know that across health and social care the workforce is fatigued from the relentlessness of the response to the pandemic. Recruitment, retention, and staff wellbeing are of paramount importance and concern.

The risks and concerns in this winter plan are echoed and mirrored in all the 5 Place Based Partnership plans across Lancashire & South Cumbria, as well as in the overarching Integrated Care System plan. The actions LCC Adult Social Care are taking and the plans already in place are also part of those joint health and social care plans.

Within our LCC Adult Social Care Winter Plan, the focus remains on ensuring we can deliver 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. The

plan also sets out the risks to Adult Social Care being able to achieve this, and the mitigating actions to be taken.

The LCC Adult Social Care Winter Plan dated 4.11.2021 has been signed off by the Adult Services Senior Leadership Team and shared with relevant managers and staff within the Council. The Plan has been shared with the NHS and other partners locally via the 5 Place Based Partnerships, and also with care providers.

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 further mitigating actions where required.

Any significant amendments will be communicated via the issue of an updated version

2. Planning Context (including risk)

In addition to the usual considerations of winter and the extra demand that the time of year places on social care, there are several additional factors and risks 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.

HM Government COVID-19 Response: Autumn and Winter Plan 2021/22 - This plan sets out:

1. The country is now learning to live with covid-19, with the main line of defence being vaccination.
2. This winter could be particularly difficult for the NHS due to the impacts of COVID-19 on top of the usual increase in emergency demand and seasonal respiratory diseases such as influenza (flu).
3. The impact of flu (and other seasonal viruses) may be greater this winter than in a normal winter due to very low levels of flu over winter 2020-21
4. A covid-19 booster vaccination programme for vulnerable people, health and social care staff and adults over 50 and the largest ever national flu vaccination campaign

The plan sets out contingency planning, a 'Plan B' for England which would be enacted if the data suggests further measures are necessary to protect the NHS. Plan B prioritises measures which can help control transmission of the virus while seeking to minimise economic and social impacts. This includes:

- a. Communicating clearly and urgently to the public that the level of risk has increased, and with it the need to behave more cautiously.
- b. Introducing mandatory vaccine-only COVID-status certification in certain settings.
- c. Legally mandating face coverings in certain settings.
- d. Asking people to work from home again, even if only for a short period of time

In section 4 'Supporting the NHS and Social Care', the plan references the additional protection of vulnerable people in Care Homes through the mandatory vaccination requirements for staff. It also references the ceasing of the shielding scheme for people identified as clinically extremely vulnerable and is clear that the Government will continue to assess the situation and the risks posed by COVID-19 and, based on clinical advice, will respond accordingly to keep the most vulnerable safe.

The plan details that the Government will continue to support and work with local authorities and local areas directly to reduce the spread and minimise the impact of COVID-19. This includes support for areas with enduring transmission.

National Adult Social Care: COVID-19 Winter Plan 2021 to 2022 (3.11.2021) – The plan sets out the national measures being taken and the expectations of local systems. The Lancashire County Council plan takes the requirements of the national plan into account with the detail and information contained within it.

Care Market Challenges - The challenges in this sector are seen nationally, and regionally the picture is similar across all North West Local Authorities.

Locally in Lancashire, the pressures are multifactorial including an increase in homecare with 85,460 care hours being delivered to people in comparison to 79,356 care hours being delivered on the same snapshot October date in 2020.

Some of the underlying contributory factors to the current situation include:

- a) Competition from other sectors on pay, terms and conditions, career progression
- b) Better pay and staff benefits in NHS attracts staff in that direction
- c) Challenges of the job
- d) Media view of social care
- e) Self isolation episodes

In addition, there is further impending pressure within the Care Home workforce, with the mandatory vaccination requirements deadline approaching in November 2021. Current estimates are that there could be around a 5% loss of staff from the sector in Lancashire as a result.

Risks also exist in relation to the financial uncertainty for many providers, both as a consequence of the effects of the pandemic but also future demand for their services as peoples' needs and expectations change.

Supporting the stability of the care market remains a priority for the Council within the means and options available to us. 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 make planning a challenge, and multi-agency contingency planning sessions are scheduled as part of business continuity arrangements.

The risks of some providers ceasing to operate altogether, or because of workforce capacity needing to reduce the level of service they provide is a key risk across the coming months.

Demand and Complexity - There are also factors related to increased demand and more people with more complex needs requiring support. Some people have put off asking for social care support due to the pandemic and have a higher level of need than they perhaps would have under usual circumstances, and through the national hospital discharge policy many more people are now discharged with a higher level of need than they would previously.

Waiting times for both social care and occupational therapy assessments have increased across Adult Social Care, in part due to increasing demand and complexity of peoples' needs and circumstances.

The service remains in 'response mode' given the many competing risks and challenges now and across the coming months. Mitigating actions remain in place and will continue to be reviewed across the winter period.

NHS Winter Planning – the NHS have this year been required to submit, in collaboration with key partners at Place Based Partnership and ICS levels, winter planning templates that set out key risks and actions to be taken in respect of demand, capacity, workforce, admission avoidance, hospital exit flow and external events. Additionally, the plans are complimented by urgent care recovery and elective restoration plans.

Hospital Discharge Service: Policy and Operating Model (21.8.2020, updated 5.7.2021) – sets out a nationally mandated discharge process and set of discharge pathways that require people to leave hospital as quickly as possible as soon as they no longer have a 'reason to reside' in a hospital bed. For most people, it is expected that this will be the same day. Although the aim of the policy is to improve the safety of individuals by spending as little time as possible in hospital, it presents challenges in ensuring people are discharged to the right service for them, at the right time. Given the significant workforce challenges across social care and health, there are risks to the smooth delivery of the national policy across this winter.

2 Hour Urgent Care Response – The NHS Community Health Services 2 Hour Crisis Response Guidance and Standards was issued in July 2021. It sets out that by 31st March 2022 all Integrated Care Partnerships must have services in place to provide an 8am-8pm 2hr urgent care response to people aged 18+ who are experiencing a crisis that requires an NHS community intervention within 2 hrs to be able to remain in their own home and avoid a hospital admission. This includes people who reside in a Care Home.

The guidance also includes a 2-hour response where there is a breakdown in informal caring arrangements.

The services must partially be in place from October 2021, building up to the minimum requirements by the end of March 2022. There is no funding for social care within the monies delegated to the NHS for provision of the 2 hour urgent care response, however additional social care capacity will be required in order to deliver the 2 hour response and then enable people to remain at home safely. Given the current social care market pressures, this increases the challenges in supporting the requirements, in particular across this winter.

This is a further key risk for social care delivery during the coming months.

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.

There are a small number of additional posts for LCC operational services contained within the winter plan, and recognising the recruitment challenges for some of these a mitigating position has been agreed on recruiting permanently on a risk managed basis.

Mental Health – demand for mental health services has already increased significantly as a result of the pandemic and its impact on peoples' lives. 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.

Reducing Inequalities – we know that the virus has and continues to have 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 for prolonged periods of time. 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 have on people who need health and social care support.

Brexit – Brexit has had an impact on the social care sector in several ways. Although the direct impact on the social care workforce has not been significant in Lancashire, indirectly due to the number of people working in the hospitality industry returning to their country of origin, the pay and conditions offered in this sector have proved attractive competition for care sector workforce.

There are also increasing costs and supply chain challenge of raw materials used in the delivery of community equipment, mainly steel, which is leading to pressures in securing sufficient volumes of supplies and mounting costs.

Collaborative Planning - We have worked in collaboration with key partners to develop our winter plan, including the NHS, the 3rd Sector, and providers across the care market. In turn, we have collaborated with the NHS and key partners in the development of the Place Based Partnership 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 regular provider webinar and implemented, and where appropriate localised flexibility is applied.

3. Aims and Objectives

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

- To ensure that the Lancashire County Council Adult Social Care Winter Plan sets out how we will meet the needs of citizens who require social care across the winter period
- Within the context of the pressured position of the social care system, ensure the provision of social care services of a sufficient volume and quality to keep people safe and supported, 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 the overriding principle of 'home first' i.e., people should be able to remain in or return to their own home wherever possible, is maintained throughout all decision making at individual and wider commissioning levels

- Continue to maintain the balance between reducing the risks of transmission of the virus and responding to the need for people to receive care and support
- Ensure care is provided in a way that supports people to remain connected with families and loved ones, supports emotional wellbeing, and reduces loneliness
- Have due regard and take relevant actions in relation to individuals and communities who may be more susceptible to the transmission of Covid-19

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

4. Preventing and Controlling the Spread of Infection Within Social Care

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 - Throughout the last 18 months, key messages on Infection Prevention & Control information and guidance have been shared via the regular provider webinars and the on-line provider portal. As regulations and requirements have started to relax, the LCC Infection Prevention and Control Team have continued to support providers where needed with working safely and increasing opportunities for care home visiting to resume in line with national guidance.

The Lancashire Local Covid-19 Outbreak Management Plan remains in place and sets out how we will prevent, respond to, 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 & incidents and actions that will be taken, and support that will be offered to vulnerable people as part of the outbreak management. The plan is publicly accessible via the Lancashire County Council Coronavirus webpage.

Outbreak Support Team – The Outbreak Support Team continues to work with care providers experiencing a Covid-19 outbreak, supporting them with recovery and any actions needed to manage the situation.

Testing - Testing remains a vital part of ensuring the prevention of transmission of the virus and in managing outbreaks, and all social care staff across the care sector are following the testing strategy to ensure they keep vulnerable people as safe as possible.

Internally, Lancashire County Council have also identified staff across the Council in covid-19 critical roles, for whom a mandatory testing policy is in place.

Personal Protective Equipment (PPE)- The requirement to use PPE remains in force for all care providers and supplies of equipment are readily available. Arrangements are also in place to monitor and distribute PPE to personal assistants operating under Direct Payments.

Designated Settings – Designated settings were a requirement during the 2020/21 winter period for people who were Covid-19 positive and therefore unable to return to their new or existing care home placements.

Lancashire ceased its provision of Designated Settings in March 2021. Analysis of the use of the beds showed there was a sustained period with no new admissions, mirroring the reducing rate of hospital admissions. NHS and Social Care partners across the ICS have

discussed the likely demand for designated settings and noting that it has remained extremely low the agreement is in place that people who would access Designated Settings can currently be absorbed within the Acute Hospitals.

The ICS will keep this position under review, working through realistic options should the need arise during this winter.

Covid Funding – Government has recently announced Grant allocations to support the social care sector to meet the costs of infection control measures, testing and vaccination between 1 October 2021 and 31 March 2022. This totals £10M in all and will be distributed to CQC registered services such as care homes, supported living services and homecare services. It will also extend to other services such as substance misuse rehabilitation services and possibly to certain non-registered services such as day services. The money will be allocated in two tranches to providers based on nationally set formula that and are subject to various detailed audit and reporting requirements to ensure compliance conditions are complied with.

5. Flu

As we move into the winter period, the prevalence of flu increases. This winter could be particularly difficult due to the impacts of Covid-19 on top of the usual increase in seasonal flu. There is also a real possibility that the impact of flu will be greater this year due to the very low levels seen during 2020/21 and therefore peoples' lower immunity to it.

In response, the Government are setting off the largest ever flu campaign, encouraging everyone who is eligible to take up the flu vaccine alongside the Covid-19 booster jab. This information and reminders to take up the vaccine has been promoted to all care providers through the regular provider webinar.

In addition to the national programme, LCC will be undertaking an annual workforce programme to encourage and increase protection across our own staff.

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.

6. Service Capacity and Expansion

Across this year, collaborative work has been undertaken with Place Based Partnerships to bring some stability to the workforce and critical services where they are funded by temporary or non-recurrent monies. The level of financial risk is assessed to be low given the monies have been allocated each year for many years, and agreements are in place to move these critical roles and services to a sustainable footing on a risk share basis across partners. For Lancashire County Council, this gives a greater level of year-round resilience by posts being more attractive to prospective applicants as they are on a permanent contract, resulting in lower turnover of staff.

To meet the anticipated demands of this winter, plans have been developed to look at what may be required in terms of additional social care capacity within the financial envelope

available, and also what might be a realistic 'plan B' given the significant pressures across the care market and the challenges with recruitment and retention.

See **Appendix A** for consolidated table and breakdown of costs of additional winter capacity. These include:

Crisis & Reablement Hours

An additional 1200 Crisis/Home First hours per week for winter and beyond if required, have been identified to support people to remain in their own home who are at risk of hospital or residential care admission without urgent support, and also to be discharged quickly from hospital. The support is provided for up to 72 hours (or 5 days on discharge from hospital) and can be anything from a one-off hour to continuous support.

The additional crisis hours will also support the additional demands anticipated through the implementation of the 2 Hour Urgent Care Response service.

An additional 700 'crisis plus' 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 500 Reablement hours per week for winter and beyond if required have been identified in anticipation of more people being discharged from hospital more quickly, and in response to the likely increase in social care demand from the 2 hour urgent care response service. 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 Lancashire & South Cumbria Intermediate Care Transformation Programme.

Residential Rehab/Community Beds

Work is underway to maximise the use of the existing 115 residential rehabilitation beds provided by Lancashire County Council's Older People's Care Services across the county. The Lancashire County Council Moving with Dignity Team are providing a training programme in single handed care to all staff working in the rehabilitation units, as well as to the NHS therapists who work in them. Single Handed care equipment has been purchased for the units and ceiling track hoists are being installed in 20 rooms across the county to support safer and more independent transfers for people with more complex needs.

Additional management and coordination resource will be in place in order to build, manage and coordinate the recruitment, retention and deployment of bank, casual and agency staff to create more effective resilience across the residential service.

If staff volumes allow, this staffing capacity will also form a level of resilience to deliver short term homecare packages where other care provision cannot be secured quickly enough.

A small number of beds are being ringfenced in some of Lancashire County Council's Older People's Care Services' residential care homes to support the care market challenges and 'bridge the gap' where a person needs to leave hospital but there is no care immediately available.

Some care home beds across the independent sector are being block booked by the NHS in some parts of the county, and where these are in place the Lancashire County Council ICAT/CATCH teams will coordinate the oversight of the beds and assessments of people for onward support.

Homecare the workforce pressures facing providers across England have been widely reported and they are replicated in Lancashire. There are various measures that are being taken to improve arrangements in this area. Some of these are financial and are still to be fully worked through at the time of writing this report. Others are process improvements such as changing the care sourcing arrangements. There are communications being shared with providers, staff and the wider public so they understand the pressures facing homecare agencies. And finally, there are changes being made to Direct Payment arrangements which are designed to provide greater flexibility and support for families to arrange their own support for their relatives.

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 provide up to 500 hours of additional support each week. The expansion will also provide opportunity to use the service for people being discharged from the residential rehab units.

To further promote the use of the service and reduce reliance on formal support, additional staffing capacity is agreed to enable a member of the service to be co-located with the 5 ICAT Teams across the County.

Workforce

Due to the recent stability work undertaken, there is less requirement identified at this stage for additional social work and occupational therapy staffing across the winter period to respond to hospital discharge and urgent care in the community. A small number of essential posts have been identified to bolster the resilience and management of the workload and support the transformation of services linked to intermediate care and 2 hour urgent care response.

Due to the continuing impact of the pandemic and the increasing demand for social care assessments, both the volume of people and the time they are waiting is increasing to a level that leads to less manageable levels of risk. The service is actively exploring options to reduce the waiting times for assessment and manage the risk, which may add additional spend into the winter plan. Any additional spend will be agreed in line with the appropriate governance.

Government has also announced a new workforce grant for CQC registered social care providers. The Lancashire allocation is £3.7m, and we will be working closely with care providers to agree best and most effective recruitment and retention initiatives over the winter period to direct the funding towards.

Mental Health

It is recognised, that as a result of the ongoing 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 lockdown periods and the impact of continuing and intermittent social restrictions. Additionally, services both nationally and locally are seeing an increased acuity in first time presentations to our services. Adult Social Care teams and the 24/7 Approved Mental Health Practitioner (AMHP) service work together with NHS partners to support to access the right treatment and support for their needs, in a timely way.

Housing, Adaptations and Community Equipment

In addition to the usual access routes for assessment for community equipment, we are continuing our 'trusted assessor' scheme with some of our home improvement and housing partners whereby certain items of community equipment can be provided by the staff who are undertaking other home improvement tasks in the person's accommodation. This supports the prevention of falls and accidents in the home and improves peoples' independence.

Across this winter, we will be exploring the potential with some of our District Council partners to test out the siting of staff with housing related expertise with our ICAT/ CATCH teams to improve the access and support for people being discharged from hospital.

7. Collaboration across Health and Care Services

Lancashire County Council 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 21st August 2020 and updated 6th July 2021. There is an ICS wide discharge project including 5 Place Based Partnership steering groups where the implementation of the standardised principles, pathways and operating model for Lancashire and South Cumbria is progressed. The continued collaboration to ensure 'flow' in and out of the hospitals is an essential element to the system managing across the winter period.

Winter Planning

Work has taken place in each Place Based Partnership to develop a system winter plan. The system plans are predicated on having sufficient capacity in place across the community, intermediate care services and within the hospitals themselves to avoid hospitals becoming overcrowded and that they remain safe places for patients and staff. The plans also focus on admission avoidance.

The Lancashire County Council Adult Social Care Plan is a key element of the system plans in the contribution to how social care and health will maintain resilience across key services and meet the needs of citizens.

Care Settings

National regulations are still in force in relation to the protection of people in care homes and the hospital discharge process. Hospitals must ensure that a Covid-19 swab result is in place within 48 hours prior to the discharge to enable to care home to manage the safety

of its residents. Thorough handover information should be in place about the person's needs, and regardless of whether the person is an existing or new resident of the care home the requirement to isolate for 14 days following hospital discharge remains in place.

As a health and care system we will continue to work 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.

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 consultations via video technology and the clustering of care homes into designated Primary Care Networks.

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 ICAT/CATCH teams add their weighted team status into the dashboard each day giving visibility of capacity and pinch points.

Sitting behind the escalation system is a set of action cards detailing the response of each organisation when any Place Based Partnership reaches set standardised escalation trigger levels.

Lancashire County Council Adult Social Care have resilience and business continuity plans in place and have stress tested these in October with key social care, health, and independent sector providers in relation to the current care market challenges. Care providers equally have these plans in place, and many have enacted them in recent months. The Lancashire County Council 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.

All care home and homecare providers upload their information regarding staffing, vaccinations, occupancy, PPE levels or new covid-19 infections etc onto the NECS (North of England Commissioning Service) Capacity Tracker. The information supplied by providers enables full visibility of pinch points and where urgent support is required and high-level data extraction is used as part of the ICS system resilience reporting.

To test out existing contingency arrangements and to expand the suite of mitigating actions that may need to be enacted, a multi-agency contingency planning event in respect of the care market challenges took place in October 2021. Supported by military planners, the event enabled ICS partners to check and challenge the level of understanding, implications and action impacts should the pressures increase. Lancashire County Council have also held an internal contingency planning event focussing on actions the Council may enact in emergency scenarios.

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

We know that because of the pandemic and the sustained pressures, we have a social care workforce that is fatigued and experiencing some significant recruitment and retention challenges. Coupled with increasing demand for social care assessments and for care and support, the wellbeing of the workforce is a primary focus.

Lancashire County Council have in place a range of measures to support the health and wellbeing of the Adult Social Care workforce. Keeping physically and mentally well is a key priority. Information, help, and advice is available on the intranet via dedicated coronavirus and staff wellbeing pages and regularly updated, and for staff who do not have access to the intranet, this information is also available on the staff section of the LCC website. Staff are supported by their team managers and 1:1 supervisions have a focus on wellbeing. Monthly staff webinars are in place to ensure staff have access to important updates and can ask questions.

Business continuity plans are in place across all teams to mitigate in the event of increased staff absences across winter.

In supporting people who need social care assessments, 7-day working is in place across several teams working around hospital discharge and avoidance, and the AMHP team operating a 24/7 service. Outside of core working hours, the Emergency Duty Team (EDT) responds to urgent situations.

To maintain sufficient workforce capacity across the most pressured part of the year, 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 named ICAT, CATCH and Care Navigation staff rostered to work across the Christmas and New Year period to support the hospitals are shared within each Place Based Partnership. The response to hospital discharge across the holiday period continues to be a 7-day service, except for Christmas Day where emergencies are covered by EDT.

The wellbeing and resilience of care staff and providers across the wider care market is equally critical. The national testing programme is in place across care settings which supports the health and wellbeing of staff as well as residents. The mandating of vaccination as a condition of employment for care home staff is a further measure to protect the residents and workforce. We know however, that this could also present some significant challenge and instability across the sector with a resulting loss of staff, with the unvaccinated number across the care homes in Lancashire currently standing at around 5%. Work continues to take place to support care homes who have vaccine hesitant staff, and to understand the likely impact to the care market and the wider social care and health system of the loss of a percentage of the workforce.

Care providers also 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 taken in the continued response to the pandemic.

The provider webinars set up by Lancashire County Council during the pandemic are continuing 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 as far as possible in the current climate to support people across the winter period and beyond.

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 and the challenges across the care market, additional restrictions and disruptions 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 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.

In the continuing Covid-19 response, to further support the capacity across the care market during winter and to maintain people's ability to restrict the number of additional caregivers in their home if they choose, we have extended the relaxation of Direct Payment rules for a further 6 months enabling family members to take up this role.

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, support for carers that was previously delivered at drop-in centres or coffee mornings moved to online peer-support platforms and many carers 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. Much of this online provision and activity has continued in addition to more face to face support as restrictions have relaxed, maintaining important support networks for carers.

There is a range of information available to carers both on the Lancashire County Council website and 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 by 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

Lancashire County Council 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

The Welfare Rights Service (WRS) provides comprehensive and independent advice and assistance to Lancashire residents of working age with complex benefit issues, such as appealing decisions and pursuing legal remedies to unfair treatment affecting benefit entitlement. Customers can access the service by referral from our referral partners i.e. any Lancashire County Council service, other community services such as Citizens Advice, district councils, MPs, specialist nurses, mental health services and other community service and organisations.

The WRS provides advice and support to people over pension age with any benefit issue, so whether it's checking to see if there is anything that can be claimed to top-up pensions, or benefits that will help older people to remain living independently such as Attendance Allowance, or Council Tax discounts, we can help. People over pension age can ring the helpline on 01772 533321 to speak with an adviser or to leave a message when staff are not available, and they will receive a call back.

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

11. Winter and Covid-19 – Communications Arrangements

Winter

Lancashire County Council 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.

Helpful advice is provided on the site regarding how to prepare for inclement weather and advice around 'choosing well' in relation 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 Lancashire County Council 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.

Appendix A – Table of Additional Service Capacity and Costs

Service	Approximate Number of People Who Could be Supported		6 month cost £	12 month cost £
Crisis (Home First, Crisis, Crisis Plus)	Crisis/Home First: approximately 45 additional people per week depending on individual need Crisis Plus: approx. 5 additional people per week assuming up to 24hr support at home for up to 5 days		£517,700	£1,035,400
Crisis 'contingency buffer' (available if recruitment levels exceed option 1)			£1,000,000	£1,000,000
Crisis – levelling up allocations (already in progress and out to recruitment)			£800,000	£800,000
Reablement			£234,000	£468,000
AgeUK – Hospital Aftercare/Take Home & Settle Services	Up to a further 30 people per week		£227,500	£455,000
AgeUK – staffing resource to sit with ICAT/CATCH triage and enhance rapid access to services and improved diversion from formal care			£135,000 (12 month cost)	£135,000
Essential posts to deliver stability, resilience and urgent care transformation with the Acute service (2 x G12 18 months)	Required to meet demand		£193,083 (18 months cost)	£193,083 (18 months cost)
Temporary G10 Peripatetic OT Team Manager with Acute services (2 year post test of concept)	Required to meet demand		£105,078 (2 year costs)	£105,078 (2 year costs)
Care Navigation – residential care finding service 3 x G5 posts for 2 years plus 1 x G8 post for 2 years	Required to meet demand		£239,126 (2 year costs)	£239,126 (2 year costs)

Care Home and Homecare resilience – HR and coordination resource (1 x G8 and 2 x G6 for 12 months)			£98,281 (12 month costs)	£98,281
Personal Health Budgets/Discretionary Grants staffing resource to facilitate current Morecambe Bay Pilot roll out and development into BaU (0.5 x G11, 1 x G8, 2 x G6)			£63,913.50	£127,827
Personal Health Budgets/Discretionary Grants funding to facilitate current Morecambe Bay Pilot roll out and development into BaU (includes enhancement to Cares contract to deliver)			£427,200	£854,400
Rapid Access to community equipment to meet 2hr urgent care response demand			£50,000	£50,000
Complete the installation of Single Handed Care Equipment into LCC Residential Rehab Units			£40,000 (one off funding)	£40,000 (one off funding)
Housing Advice and Support sited in ICAT/CATCH (P/T x 5 teams)			£70,000	£140,000
Total			£3,200,881.50 (£4,200,881.50 with £1M crisis 'buffer')	£4,741,195 (£5,741,195 with up to £1M crisis 'buffer')