

NORTH LINCOLNSHIRE COUNCIL

Health and Wellbeing Board

North Lincolnshire Care Home Support Plan

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To inform the Health and Wellbeing Board of the development of a care home support plan. The plan is in place to support the sector to continue to provide quality care to the vulnerable residents of North Lincolnshire throughout the coronavirus pandemic and beyond.
- 1.2 There has been a long history of working together with the care home sector in North Lincolnshire and we have built on existing partnership arrangements to design the care home support plan which is a good example of integrated working.
- 1.3 The care home support plan is an element of the Covid-19 outbreak plan in that it aims to reduce outbreaks and keep the residents and workforce safe and well.

2. BACKGROUND INFORMATION

- 2.1 North Lincolnshire Council and the North Lincolnshire Clinical Commissioning Group are committed to working with care home providers and their workforce to ensure that people living in care homes are supported during the unprecedented challenges that Covid-19 presents.
- 2.2 There are 60 registered care homes in North Lincolnshire with 1972 placements registered with the Care Quality Commission (CQC), employing on average 2250 people. The independent sector provide 59 of these care homes with 7 being registered to provide nursing care. The council runs Sir John Mason House intermediate care centre. The sector is a mix of small medium enterprises and larger national organisations.

- 2.3 The care home support plan is a partnership between, the care home sector, Northern Lincolnshire and Goole NHS Foundation Trust, Rotherham Doncaster and South Humber NHS Foundation Trust, North Lincolnshire Clinical Commissioning Group and North Lincolnshire Council.
- 2.4 By way of summary narrative the care home support plan covers the following:

Support available to all care homes

- Daily contact by the Provider Development Team (NLC) to review local data and care home resilience checks against the capacity tracker and other advice and guidance including access to protection equipment and testing.
- Daily telephone contact from the community nursing service.
- Focusing on the clinical concerns of residents and establishing if they have had any hospital discharges. All residents discharged from hospital are reviewed within 24 hours by the Community Response Team. If appropriate visits to the care homes from the community nursing team take place.
- Training in infection prevention control, end of life and clinical observations.
- The Community Response Team and primary care review residents/patients and ensure advanced care planning is in place.

Support for care homes where there are known or suspected cases in either the resident or staff population

- Contact from a Clinical Commissioning Group (CCG) infection prevention control nurse to provide specialist advice and support for managing a suspected or confirmed outbreak.
- Clinical support via primary care teams and the community nursing service as required for any home with a confirmed outbreak and those with a suspected outbreak. The level of support depending on the number of residents and staff involved, to support environmental issues, isolating residents.
- Public Health England telephone advice and support when an outbreak is first declared.

Rapid intensive support where there are significant safety or quality concerns reported

- Multi-agency incident management meeting called by Public Health England or the local public health team depending on the scale and nature of the incident.
- Clinical review of residents via primary care and the community response team to ensure all appropriate actions and oversight is in place.
- Specialist infection, prevention and control input and care home site visits must be undertaken in these circumstances.
- Support with workforce needs across a graduated approach including access to NHS staffing if needed.
- Alternative accommodation if required via commissioned service.

- 2.5 The plan also includes further information on how we will support and manage:
- Infection prevention and control (IPC)
 - Covid-19 testing
 - Personal protective equipment
 - Workforce support, and
 - Clinical support
- 2.6 These arrangements enable partners to continue to build an even stronger understanding of the sector and support in place and address any risks and issues of concern (see appendix for the full plan).
- 2.7 The strategic oversight of the support plan is being undertaken by the Director of Adults and Community Wellbeing (DASS) Director of Public Health (DPH) and the Director of Nursing and Quality CCG. This group is supported by an operational team reviewing and delivering on the support plan.
- 2.8 The Chief executive has written to the minister for social care and confirming the plan is in place, has been through assurance and meets the minimum requirements.

3. OPTIONS FOR CONSIDERATION

- 3.1 The Health and Wellbeing Board are asked to consider the report and note the development of the care home support plan as an example of good integrated working.

4. ANALYSIS OF OPTIONS

- 4.1 The care home support plan is set in the context of our shared ambitions, strategic principles and operating model as set out in the North Lincolnshire Health and Care Integration Plan.

5. RESOURCE IMPLICATIONS (FINANCIAL, STAFFING, PROPERTY, IT)

- 5.1 The care home sector have agreed to using the Infection Control Fund discretionary element to build a robust recruitment campaign marketing North Lincolnshire and the sector as a good place to work and collectively support a centralised induction programme for all care workers.

6 OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)

- 6.1 The support plan is currently available to all adult care homes in North Lincolnshire.

7. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED

- 7.1 North Lincolnshire has a well-established Health and Care Standards Board with representation from public health, community and acute providers, care home and home care agencies and Healthwatch. The board has been successful in developing a shared approach and consistency for the sector and has been a vehicle for engagement in the development of this care home support plan.

8. RECOMMENDATIONS

- 8.1 The Health and Wellbeing Board is asked to note the development of the integrated care home support plan.

Director of Adults and Community Wellbeing

Church Square House
SCUNTHORPE
North Lincolnshire
DN15 6NR
Author: Karen Pavey
Date: 16 June 2020

Background Papers used in the preparation of this report –

The North Lincolnshire Care Home Support Plan

Where appropriate the report has been seen and commented on by (✓ or n/a)

Cabinet Member	Human Resources	Legal & Democratic	Finance	Asset Management	IT	EMT
x						

SAFE WELL PROSPEROUS CONNECTED

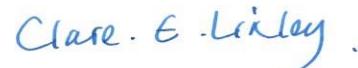
North Lincolnshire Care Home Support Plan

Version & Document Control	
Information Marking	Official
Document title	North Lincolnshire Care Home Support Plan
Lead Officer	Victoria Lawrence, Head of Social Work and Assurance
Version	V1.0
Status	Draft
Approved by	Karen Pavey, Director of Adults and Community Wellbeing
Date approved	29 May 2020
Last updated	12 June 2020
Change history	Please note the emerging evidence in respect of COVID-19 is rapidly evolving; therefore further amendments may be required as new evidence and guidance emerges.
Review date	30 June 2020
Retention period	1 Year
Storage location	Website / local drive

Authorisation and sign-off

Signed on behalf of the Local Authority	
By	Karen Pavey
Position	Director Adults &Community Wellbeing
Date	29 May 2020

Signed on behalf of the Local Authority	
By	Penny Spring
Position	Director Public Health
Date	29 May 2020

Signed on behalf of the CCG	
By	Clare Linley
Position	Director of Nursing and Quality
Date	29 May 2020

Contents

1.	Executive summary.....	3
2.	The sector.....	3
3.	Introduction.....	3
4.	Summary of the plan	4
5.	Guidance	5
6.	Oversight and governance	6
7.	Data intelligence	7
8.	Leadership support	7
9.	Infection, prevention and control	8
10.	Personal protective equipment.....	9
11.	Testing.....	9
12.	Workforce support.....	11
13.	Clinical support	12
14.	Financial Support.....	13
15.	Key Teams – roles and functions	14
16.	Care home education and training	16
	Appendix A	18
	Appendix B	20
	Appendix C	21
	Appendix D	22
	Appendix E	23
	Appendix F - Letters to providers	24

1. Executive summary

North Lincolnshire Council and the NHS North Lincolnshire Clinical Commissioning Group is committed to working with care home providers and their workforce to ensure that people living in care homes are supported during the unprecedented challenges that COVID-19 presents.

This support plan outlines the partnership work taking place across the health and social care system to ensure people are supported and the care home sector is resilient. It sets out our offer of support to care homes and how we will continue this going forward (see action plan, appendix A).

North Lincolnshire has a long history of working together with the care sector and we have built on existing partnership arrangements to design our care home support plan.

As a health and care system we have been responsive to supporting the sector and helping them deal with the challenges of the COVID-19 pandemic.

The care home sector plays a vital role in keeping people safe and well in North Lincolnshire.

The care home support plan is set in the context of our shared ambitions, strategic principles and operating model as set out in the North Lincolnshire Health and Care Integration Plan.

2. The sector

There are 60 registered care homes in North Lincolnshire with 1972 placements registered with the Care Quality Commission (CQC), employing on average 2250 people. The independent sector provide 59 of these care homes with 7 being registered to provide nursing care. The council own and run a facility for short term rehabilitation and re-ablement on behalf of the health and care system.

Currently there are 1498 people residing in the care homes with 838 placements funded by the council and/or CCG and a further 660 private/other council/CCG placements. The care home sector is a mix of small/medium enterprises and larger national organisations.

3. Introduction

The purpose of this care home support plan is to detail the North Lincolnshire partnership approach to supporting care homes during the COVID-19 pandemic. The care home support plan has been developed to support sector resilience through an enhanced offer of support to enable the delivery of quality care and the safety of both residents and staff. The care home support plan includes how we will manage and support the following key elements:

- Oversight and governance
- Leadership
- Infection prevention and control
- Testing
- PPE

- Workforce Support
- Clinical Support and
- Financial Support

The plan has been developed to promote understanding of the offer and provides clarity regarding roles and responsibilities. It aligns to national and regional guidance in relation to supporting care homes and any statutory responsibilities.

4. Summary of the plan

The care home support plan is summarised below. It has been set out using the single organisational model used across health and care as an offer of support based on level of need.

Support available to all care homes (universally available)

- Regular contact by the provider development team to review local data and care home resilience checks against the capacity tracker and other advice and guidance including access to PPE and testing – currently available daily.
- Daily telephone contact from the community nursing service focusing on the clinical concerns of residents and establishing if they have had any hospital discharges. All residents discharged from hospital are reviewed within 24 hours by the community response team. If appropriate, visits to the care homes from the community nursing team take place.
- Training in infection, prevention and control, end of life and clinical observations.
- The community response team and primary care review residents/patients and ensure advanced care planning is in place.
- Provision of infection, prevention and control advice.

Support for care homes where there are known or suspected cases in either the resident or staff population (targeted)

- Contact from the CCG nursing team or a public health IPC nurse to provide specialist advice and support for managing a suspected or confirmed outbreak.
- Clinical support via primary care teams and the community nursing service as required for any home with a confirmed outbreak and those with a suspected outbreak. The level of support depending on the number of residents and staff involved.
- Public Health England telephone advice and support when an outbreak is first declared.

Rapid intensive support where there are significant safety or quality concerns reported (specialist)

- Multi-agency Incident Management meeting called by Public Health England or the local Public Health team depending on the scale and nature of the incident.

- Clinical review of residents via primary care and the community response team to ensure all appropriate actions and oversight is in place.
- Specialist infection, prevention and control input and care home site visits may be undertaken in these circumstances.
- Support with workforce needs across a graduated approach includes access to NHS staffing if needed.
- Alternative accommodation if required.

5. Guidance

National and regional guidance recognises that care providers have a vital role to play during the response to the COVID-19 pandemic, to be supported by health and social care systems.

National guidance issued by the Department of Health and Social Care (DHSC), Care Quality Commission (CQC) and Public Health England (PHE) on the 2nd April 2020 titled 'Admission and care of residents during COVID-19 incident in a care home' set out the guidance for managing residents care during this pandemic, including the management of discharges from hospital.

The publication of 'COVID-19: Our action plan for adult social care' on the 15th April by the DHSC added further guidance and set out a range of requirements to support controlling the spread of infection in care settings, use of personal protective equipment (PPE), managing outbreaks and safe discharge from the NHS to social care settings.

The Chief Nursing Officer England issued a letter on the 1st May 2020 titled 'Urgent CCG assistance to supporting care homes; Training the trainers on infection, prevention and control' and a supporting document by NHS England and Improvement (NHS E/I) was issued on the 5th May 2020 titled 'Responding to COVID-19, Principles to deliver an enhanced universal support offer to care homes in the North East and Yorkshire Region'. These two publications set out a clear mandate for ensuring all care homes had timely access to infection, prevention and control training plus other supportive measures.

The government announced a new care homes support package backed by the adult social care infection control fund, to tackle the spread of COVID-19 in care homes on the 14th May 2020. The accompanying guidance sets out the steps that must now be taken to keep people in care homes safe, and the support that will be brought together across national and local government to help care providers put this into practice. The Minister of State for Care wrote to councils and care providers outlining the details of the support package providing additional advice and resources to help stop the spread of infection. The letter requires councils to work with partners to review their care home support plan in line with the guidance for publication.

6. Oversight and governance

The strategic oversight of the care home support plan is undertaken by the Director of Adults and Community Wellbeing (DASS), Director of Public Health (DPH) and the Director of Nursing and Quality CCG. The DASS is the responsible decision maker for oversight of sector resilience and compliance with safeguarding duties. The DPH is the responsible decision maker for specialist advice on matters of testing and IPC and the Director of Nursing and Quality is the responsible decision maker for ensuring adequate access to IPC training and advice and clinical support for care homes. This group is supported by an operational Care Home Oversight Group designing and delivering on the support plan (see summary of oversight and governance arrangements, appendix B).

North Lincolnshire has a well-established Health and Care Standards Board with representation from public health, community and acute providers, care home and home care agencies and Healthwatch. Partners provide mutual support to continue to improve care quality and ensure a culture of high support high challenge across the care sector. The board has been successful in developing a shared approach and consistency for the sector and has been a vehicle for engagement in the development of this care home support plan.

Further engagement with the sector is through the strategic care home group recently enhanced with the attendance of public health and the CCG.

The Care Home Oversight Group has representation from:

- North Lincolnshire Clinical Commissioning Group (NLCCG)
- North Lincolnshire Council (NLC)
- Northern Lincolnshire and Goole NHS Foundation Trust (NLaG)
- Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)

This group is responsible for ensuring all operational requirements are enacted and any barriers or new developments are managed. Any issues that cannot be managed by this group or those where senior approval is required will be escalated to the Executive Care Home Group. The group will also report into the monthly Integrated Commissioning and Quality Executive (ICQE) meeting. Engagement with the Health and Wellbeing Board facilitates the sharing of information, on which they provide high level views and oversight.

The group meets a minimum of twice weekly and has the responsibility for delivering against the training requirements, has oversight and prioritisation of whole care home testing, is responsible for facilitating mutual staffing support as required, and shares / reviews data and intelligence from a number of sources to ensure resources are effectively distributed to the area(s) of greatest need.

The Local Resilience Forum spans the four unitary authorities, North Lincolnshire, North East Lincolnshire, Hull and East Riding of Yorkshire, there is a direct information flow to this forum for sharing support and or escalating issues for wider consideration. The forum also ensures best practise is shared and encourages collaboration.

A Strategic Care Home partnership Group has been established with proprietors attended by the Director of Public Health, the Director of Nursing and Quality and the Director of Adult and Community Wellbeing (DASS).

7. Data intelligence

The operational group reviews data and intelligence to aid the prioritisation of support required across the system to care homes. Information from a number of sources is fed into this group, this includes;

- Provider Development Team daily calls
- Community nursing daily huddles
- Infection, Prevention and Control Specialist Nurse visits.
- Wider nursing visits e.g. CHC nurses or generalist nurses.

A single accurate, complete and contemporaneous dataset is essential for oversight of sector resilience and to aid the facilitation of support across the system. To meet this requirement a North Lincolnshire care home dashboard has been created to include as a minimum the following elements within it:

- All elements from the capacity tracker
- Deaths within care homes
- RAG rating

The dashboard will be continually developing to include additional intelligence regarding training, testing and shielding.

Next steps:

- In addition to the data set we will implement an evaluation process to monitor impact and outcomes for our local residents.

8. Leadership support

North Lincolnshire partners will work with care home providers to build on their leadership and capability. The offer of support includes:

- Provision of a tablet to all care homes for video conferencing to support communication, consultation, and the delivery of the training offer to support good practice and continuous learning.
- NHS email accounts for all care home providers to support communication and the secure exchange of sensitive information.
- A named nominated contact, within the North Lincolnshire Council (NLC) Provider Development Team to provide support, direction and / or coordinate requests to other partners across the system. This support is currently available on a daily basis.
- A named clinical lead to provide clinical support to residents.

- Safeguarding and quality assurance arrangements are continuing to support the safe delivery of care during these challenging times.
- Written communication regarding the key elements of the support offer to registered managers and proprietors (see appendix E).
- Virtual presentations and workshops for registered managers.
- The local resilience forum receives weekly updates on the progress of this plan and is available to escalate any local challenges that need wider engagement or solutions.

9. Infection, prevention and control

North Lincolnshire partners are taking a proactive approach to work with care homes to apply national guidance on preventing and controlling infections; including use of PPE, isolation practices, decontamination and cleaning processes. The offer of support includes:

- Dissemination of PHE and relevant guidance through the Provider Development Team.
- Appropriate contact maintained with all care homes with clear routes for signposting and facilitating advice and guidance around concerns such as staffing, personal protective equipment (PPE) and infection, prevention and control (IPC) concerns.
- Support to ensure accurate and up to date information is submitted to the capacity tracker.
- Contact with all care homes on a daily basis who identify concerns within the capacity tracker and respond with appropriate additional support.
- Access to infection, prevention and control (IPC) advice and a visit (or if appropriate a telephone call) from an IPC nurse/nurse with knowledge of IPC when this is required.
- Provision of a full range of IPC training, including the 'Train the Trainer' programme and face to face training within care homes.
- Access to a community nurse on a daily basis (this might take place virtually). The nurse will have a good knowledge of IPC.
- Utilising our partnership approach we will ensure that care homes are able to promptly access testing for residents and staff and support them to do so where they are having difficulty in this regard. Please see further details below.
- Support to develop plans to manage an outbreak. These will include advice and guidance from an IPC perspective where necessary.
- Visiting staff will, where possible, visit care home residents who are known to be COVID-19 positive at the end of their working day to help to prevent the spread of infection. As agencies providing care we will collaborate to help to reduce footfall into care homes.

- Support will be provided to ensure all residents have a personalised care and support plan.
- Primary Care Networks and pharmacists will work together to ensure a joined-up approach around medication supply, structured medication reviews, supporting reviews of new residents or those recently discharged and addressing medication queries.
- All residents will be tested prior to discharge from a hospital to a care home.
- Health and social care partners will make appropriate individual arrangements for residents where a care home does not have capacity and capability to isolate their residents returning from hospital in line with national guidance.
- Commissioning of additional alternative accommodation to support the isolation of people leaving hospital on a short term basis to be available in June 2020.

Next steps:

- Open the additional alternative accommodation capacity in June with pathways to support.

10. Personal protective equipment

North Lincolnshire has worked with the local resilience forum to maximise supply locally. The partners will work with care home providers to support their access to the correct PPE and having the skills to use appropriately. The support offer includes:

- Details of approved stockists distributed.
- Local warehousing and distribution capabilities for PPE.
- New guidance communicated to all providers and interpreted as required.
- A local process for care providers to request emergency PPE support through the Provider Development Team.
- IPC training which includes correct use of PPE.
- Monitoring of the situation and escalation via LRF.

11. Testing

The North Lincolnshire approach to testing is to compliment the national arrangements to ensure timely access to testing for staff and residents and appropriate support following testing. The offer of support includes:

Staff testing

Pillar 1 (local testing undertaken by NLaG) – All care home employees are able to access Pillar one staff testing for symptomatic staff or any member of their household who is symptomatic. This is via a generic referral form submitted to the following email inbox nlccg.nlnestaffswabbing@nhs.net. This service is a drive through service with locations in Scunthorpe and Grimsby with an average turnaround time of 48 hours from swabbing to a result. Individuals are contacted with their result and if they have consented on the referral form this are also shared with their line manager.

Pillar 2 (regional testing sites) - For asymptomatic staff who wish to be tested this must be undertaken via Pillar 2 testing sites, closest location is the north side of the Humber Bridge. This is accessed via the Government website <https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested#essential-workers>

Additionally staff may agree to be tested as per the roll out of whole care home testing locally further detailed below.

Resident testing

If a care home suspects a new outbreak and it has been 28 days or longer since their last case the care home must continue with the normal process of contacting the Yorkshire and Humber Health Protection Team who will offer advice, guidance and arrange for swab tests to be sent for the symptomatic resident(s).

Whole care home testing - It is important that whole home testing is undertaken in a coordinated way to provide the best support in terms of outbreak management, workforce planning, and preventing the spread of COVID-19 in care homes.

By prioritising and coordinating whole home testing locally, we can ensure that those homes at greater risk from outbreaks receive the testing sooner and all homes are offered support throughout the process.

A prioritisation matrix has therefore been agreed, in line with national prioritisation recommendations. See table below:

Criterion	Priority level
current or recent significant outbreak (>15% Residents and/or staff symptomatic)	Highest
over 50 beds (occupied)	High
increase in known deaths	High
2 or more residents returning to the home from hospital in last 2 weeks	Medium
Residents not older people	Medium
CQC requires improvement	Low

All care homes are requested to inform the Provider Development Team if they wish to participate in whole care home testing. These requests are then reviewed and prioritised at the twice weekly Care Home Oversight Group and care homes informed of the planned dates in which they will begin testing. This also includes whole staff testing as part of the care home.

Training and support to undertake the swab testing will be provided by the IPC specialist nurses and the community nursing team from NLaG. The RDASH Community Mental Health and Learning Disability teams are also able to provide advice around supporting a person with a learning disability or mental health need with testing.

Follow up support is provided to each home dependent upon the results and support required. This will be coordinated via the Care Home Oversight Group.

Next steps:

- The local approach to testing will be updated to include how antibody testing and track and trace will be provided for care home residents and staff.

12. Workforce support

North Lincolnshire partners will enable care home providers to maintain the safety and wellbeing of their staff, minimise staff movement between care homes, maintain safe staffing levels and support recruitment to the sector. The offer of support includes:

- Access to educational support including IPC specialist nurse advice and end of life specialist advice, when required.
- Support to increase the use of technology and access to virtual training programmes.
- Support with recruitment will be provided where requested, including DBS testing and recruitment and induction materials.
- Ongoing promotion and support of the national recruitment campaign including input of local case studies.
- Provision of an information pack promoting staff wellbeing and providing details of where and how staff can access wellbeing, emotional and psychological support.
- Opportunities to support workforce from any return to practice staff as part of the national 'Bring Back Staff' campaign will be explored and considered.
- Care homes will be provided with support to maintain safe staffing levels considering mutual aid options if required. The system partners have agreed a range of graduated options to support care homes to continue to deliver safe staffing levels throughout this period of time (see appendix B). This approach is designed from a lower level of need increasing to a higher intensity of support need. Access to the higher options of support will be through an urgent incident management meeting.

Next steps:

- Clarify indemnity issues for staff working in care homes employed by the NHS and progress the local offer.
- Prioritise deployment of any future returning health professionals to areas of most need, including the care home sector.
- Volunteer opportunities, including befriending offer, to be extended to care homes.
- Implement a localised media/recruitment campaign alongside the promotion and support of the national recruitment campaign.

13. Clinical support

North Lincolnshire partners will work collaboratively with care providers to meet the clinical needs of residents; ensuring care homes have clinical support when they need it. The offer of support includes:

- Everyone discharged from a hospital to a care home will be followed up by a face to face visit by a nurse or allied health professional involved in the discharge, a community nurse or, where there is one, the named nurse attached to the care home. This maybe virtual.
- All care homes will have access to the Community Response Team (CRT) and Unscheduled Care Team including a GP when required via the NL Single Point of Access service – 24 hours a day.
- Development of multidisciplinary team (MDT) weekly ‘rounds’ (virtual if appropriate) including GPs, community nurses, allied health professionals (AHPs) and social workers to support the care of vulnerable residents.
- All care homes are being provided with additional clinical equipment and the necessary training to support remote assessments.
- Access for care home staff to psychological support in addition to the pastoral support already provided.
- Telephone or video technology will be available to assess residents remotely.
- Support will be given with staff and resident testing as required.
- Virtual access will be made available to a team of appropriate specialists e.g. Macmillan Nurses.

Next steps:

- Implementation of weekly multidisciplinary team (MDT) ‘rounds’ (virtual if appropriate) including GPs, community nurses, allied health professionals (AHPs) and social workers to support the care of vulnerable residents.

- Progression of the named clinical lead offer.

14. Financial Support

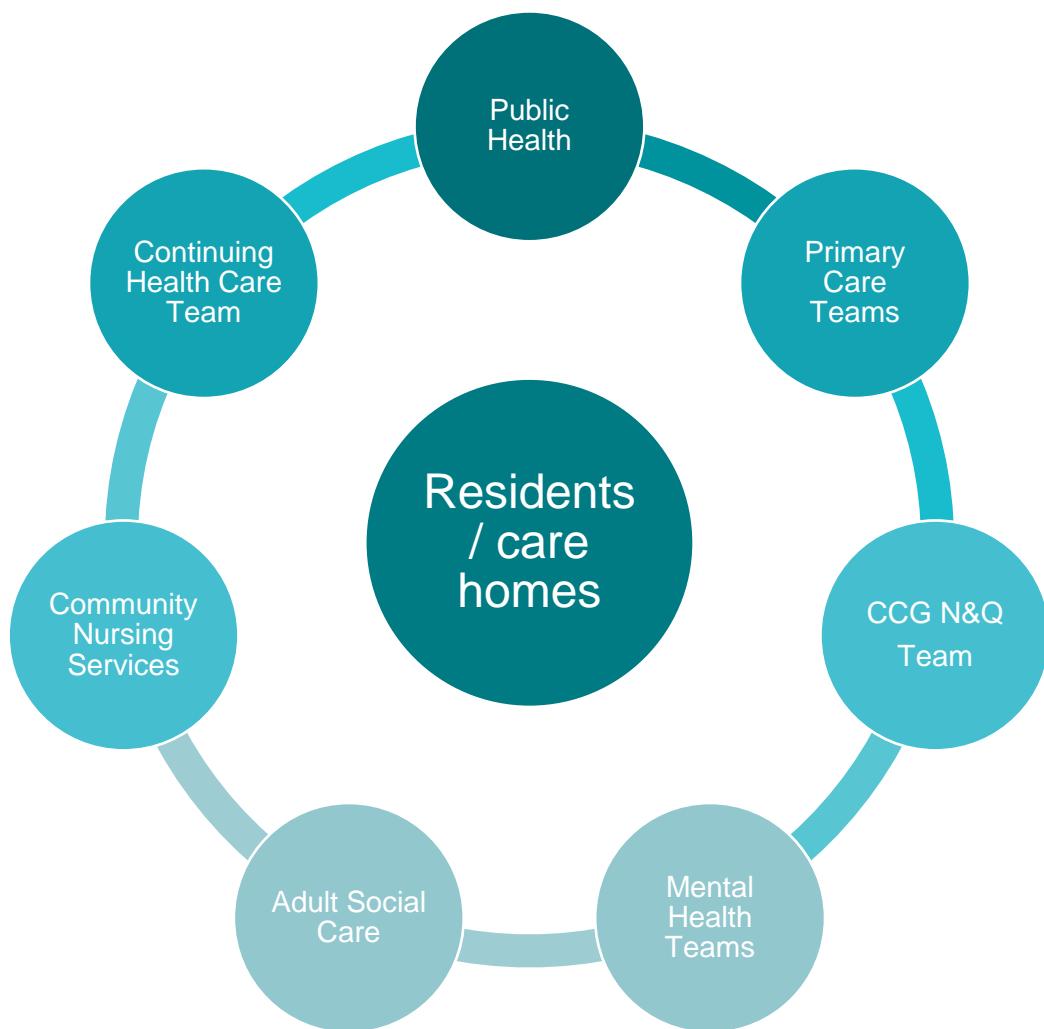
The council works in partnership with care homes to improve quality and establish and agree the cost of providing care in North Lincolnshire. The council and CCG recognises the financial challenges being experienced during this period by the care sector to manage and stop the spread of COVID-19. The financial support offer includes:

- The fee rate agreed by the council and CCG for 2020/21 is a 5.49% increase to the base fee rate, paid from April 2020.
- A 'COVID 19 Grant' payment for the April to June period for all North Lincolnshire care providers.
- Information and access to possible additional financial support, including Business Rate Relief, Small Business Grants and Supplier Relief on an open book basis.
- Distribution of 75% of the first instalment of the Infection Control Grant directly to care home providers on a 'per bed' basis in line with guidance.
- NHS funding is being utilised to support discharge from hospital and to prevent hospital admission.
- The CCG continues to review financial support to care homes on an individual basis.

Next steps:

- Work with care providers regarding assurance of the first payment of the being spent in full and expenditure is aligned to the Infection control fund guidelines, prior to distribution of second instalment.
- Agree use of 25% grant not distributed on a 'per bed' basis for infection control measures. This may involve support for extra care and domiciliary care infection control measures, contingency to fund any safe staffing support requirements, and a localised recruitment campaign.

15. Key Teams – roles and functions



Continuing Health Care Team (NLCCG)

- All team members are assigned to a cohort of care homes.
- Regular contact made with each care home to undertake case management support for CHC and interim funded patients.
- These calls will be utilised as an opportunity to gather soft intelligence and signpost as appropriate regarding any concerns or issues to either Local Authority or the CCG Nursing team.
- To ensure a consistent approach a standard set of questions will be used.

Public Health (NLC)

- Specialist Public Health advice and leadership in relation to outbreak management, testing and IPC.
- Support to the programme of IPC training.
- Liaison with PHE Health Protection Team.

Public Health England

- PHE are directly informed of any suspected outbreaks by the care homes.
- Risk assessments are undertaken to understand the position and level of outbreak.
- PHE can provide IPC advice and support on cohorting and isolation.
- High numbers of staff sickness, resident confirmed cases or an increase in deaths will trigger increased input from PHE.
- If significant concerns are raised then PHE contact Local Authority and / or the CCG to establish the local position and decide whether an IMT is required.
- Additionally PHE are responsible for coordinating resident testing for COVID-19 at the beginning of a new suspected outbreak.

Community Response Team (MDT)

- Support to care homes where there are any clinical concerns regarding the management of residents with suspected or confirmed cases of COVID-19 symptoms following visits and supporting the care home.
- Utilisation of the GP within CRT to assist with the clinical management of patients and ensuring no unnecessary hospital admissions.
- Support and review of the residence advanced care planning alongside Primary Care enabling the management of the resident in line with their wishes and appropriate management of their health needs.

CCG Nursing and Quality Team (NLCCG)

- Direct contact with any identified care homes where there is a suspected or confirmed outbreak.
- Specialist advice and support to manage the COVID-19 outbreak.
- Site visits to assess and advise on isolation and cohorting options, assessment of the environment, facilities and the appropriate use of PPE.
- Specialist IPC advice will be obtained on a consultancy basis from a neighbouring CCG or via NLaG's IPC specialist nursing team.

Mental Health & Learning Disability teams (RDaSH)

- Clinical supervision to support the leadership structure in smaller/independent homes.
- Will extend virtual mandatory training resources to include care home staff.
- Will ensure that clear details of post discharge from mental health inpatient care, 72 hour follow up arrangements are agreed with care homes and included in care plans.
- All 72 hour follow up and crisis assessments will be completed face to face with the patient.
- Virtual multi-disciplinary meetings will be arranged to support care home routines.

- Clinic appointments will be held virtually where possible to reduce the impact on care homes of staff attending the homes.
- Continue to offer specialist advice regarding management of mental health issues, challenging behaviour and physical health issues associated with a learning disability and specialist memory services advice for the care of people with a diagnosed dementia.

Provider Development Team (NLC)

- Nominated single point of contact for signposting to the most appropriate service if required.
- Daily calls with all care homes as part of the commissioning responsibilities.
- Daily calls will review the information submitted in the capacity tracker.
- The advice and support is focused on PPE supply issues, staffing concerns and any intelligence in terms of suspected or confirmed COVID-19 residents or staff.

Social Work Teams (NLC)

- Assessments and reviews of residents care and support needs and plans.
- Social Workers from the Locality Social Work Team assigned to each care home who will participate in weekly MDTs.
- Response to safeguarding concerns and safeguarding enquiries.

Community Nursing Team (NLaG)

- Clinical assessment and treatment plans for any patient within a care home who requires nursing input.
- This team will also provide non specialist IPC advice and guidance whilst in care homes, alongside education and training to care homes that might be required.
- Daily contact to offer clinical support and advice in relation to all residents ensuring there is a daily visit offered and undertaken as appropriate.
- All discharges from hospital to be clinically assessed following admission to the care home within 24 hours by the most appropriate clinician.
- Support and review of the residence advanced care planning alongside Primary Care enabling the management of the resident in line with their wishes and appropriate management of their health needs.

16. Care home education and training

Training and education

There are three key work streams aligned to training and education within care homes and these are:

- IPC training, including the correct donning and doffing of PPE and cleaning of equipment.
- Clinical observation training to support clinical assessments within care homes – temperature, blood pressure, pulse rate, respiratory rate and pulse oximetry.
- End of life training including the management and care for patients within the care home.

IPC training

- This project is led by Nursing and Quality Team within NL CCG.
- A programme of planned virtual training has been established utilising the training platform 'Project ECHO' which the clinical skills training has been utilising.
- This training consists of a live virtual training session where IPC, PPE guidance and swab testing are discussed and staff are required to demonstrate their knowledge and understanding.
- This is being supported through named trainers from different partners (NL CCG, NLC and NLaG) which is coordinated via NL CCG.
- Additionally bespoke sessions will continue in terms of training and support, during any face to face care home site visits.
- Agreement around the prioritisation of care home training will be determined by the Care Home Oversight Group utilising the shared intelligence.

Clinical observations training

- This project is led by community and therapy services within NLaG.
- To support ongoing clinical assessments via video conferencing of residents during the COVID-19 pandemic care homes are being supplied with an agreed level of clinical equipment purchased centrally to enhance the assessment.
- Virtual training is being provided via a partnership approach across NLaG community services, Provider Development Team and project ECHO.
- The training takes places twice a week with the roll out of the clinical equipment following the training.

End of life training

- This project is led by community and therapy services within NLaG.
- To support and enable the homes to manage patients at the end of life within the care home and the support available to manage the patient.
- Virtual training is being provided via a partnership approach across NLaG community services and project ECHO.
- The training is offered to all care homes and is taking place twice a week

Appendix A

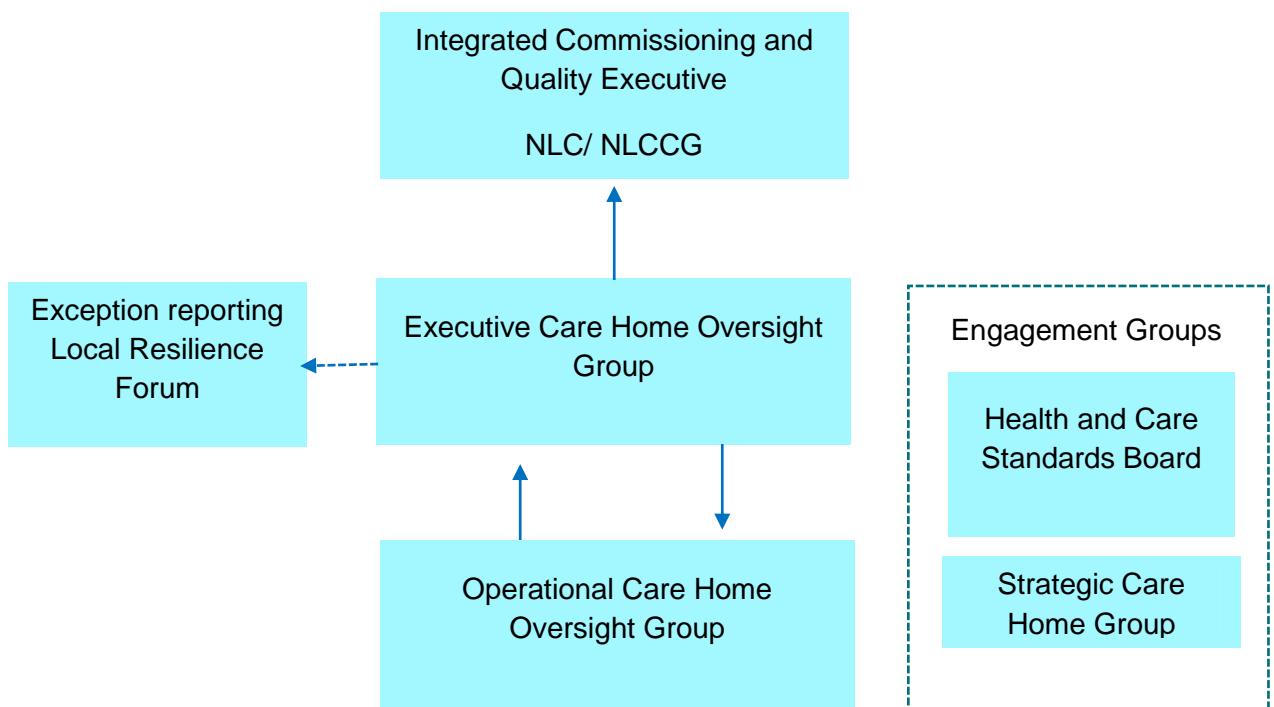
Action plan as of 29 May 2020

Objective	Timescale	Responsible Lead	Action
Oversight and governance			
Strong and effective oversight and governance of the care home support plan.	30/06/2020	Public Health Consultant	Implement evaluation process to monitor impact and outcomes for local residents.
	30/06/2020	Public Health Consultant	Embed regular reporting processes to the Health and Wellbeing Board.
Infection, prevention and control			
Care homes are able to prevent and control infections in line with national guidance.	30/06/2020	Head of Social Work and Assurance	Open additional accommodation alternative capacity in June with pathways to support.
	30/06/2020	Public Health Consultant	Implement rolling programme of regular whole home testing and extend whole home testing to wider pool of Care Homes to include those catering for people with learning difficulties and mental health problems.
	30/06/2020	Public Health Consultant	Update local testing approach to include how antibody testing and track and trace will be provided for care home residents and staff.
Clinical support			
Work collaboratively with care providers to meet the clinical needs of residents.	31/07/2020	Deputy Director, Nursing and Quality	Implementation of weekly multidisciplinary team (MDT) 'rounds' (virtual if appropriate) including GPs, community nurses, allied health professionals
	30/06/2020	Deputy Director, Nursing and Quality	Progression of the named clinical lead offer to align a Practice or PCN level Clinical Lead to all Care Homes by the end of June 2020.

Objective	Timescale	Responsible Lead	Action
Workforce			
Care home providers are enabled to maintain the safety and wellbeing of their staff, minimise staff movement between care homes, maintain safe staffing levels and support recruitment to the sector.	30/06/2020	Deputy Director, Nursing and Quality	Clarify indemnity issues for staff working in care homes employed by the NHS and progress the local offer.
	30/06/2020	Deputy Director, Nursing and Quality	Prioritise deployment of any future returning health professionals to areas of most need, including the care home sector.
	30/06/2020	Head of Social Work and Assurance	Volunteer opportunities, including befriending offer, to be extended to care homes.
	31/07/2020	Head of Social Work and Assurance	Implement a local media/recruitment campaign alongside the promotion and support of the national recruitment campaign.
Finance Support			
To gain assurance of effective utilisation of the infection control fund.	26/06/2020	Head of Social Work and Assurance	Establish assurance process to ensure first payment of Infection Control Fund is spent in full and expenditure is aligned to infection control fund guidelines prior to distribution of second instalment. Records and evidence to be retained by care provider detailing how money has been spent.
	26/06/2020	Head of Social Work and Assurance	Agree use of 25% discretionary element of the grant for infection control measures. This may involve support for extra care and domiciliary care infection control measures, contingency to fund any safe staffing support requirements, and a localised recruitment campaign.

Appendix B

Oversight and governance



Appendix C

Safe staffing support

North Lincolnshire partners have developed a suite of options to support all care homes to continue to deliver safe staffing levels throughout this period of time. The suite of options is a graduated approached that is designed from a lower level of need increasing to a higher intensity of support being required. This should not detract from any business as usual functions that the care home providers already have in place to manage staffing shortfalls but is an enhancement to the options available.

If either Tier 5 or 6 are potentially required to ensure safe staffing levels an urgent (within 24 hours) Incident Management meeting must be arranged including a minimum of 3 partners, with representation from NLC, NL CCG and NLaG. This meeting will have the responsibility for determining the level of need based on a risk assessment of all factors and options already undertaken. Any potential financial input will need to be agreed as part of this groups function on a case by case basis but not necessarily within the IMT meeting, as approval may be required from outside the group's membership.



Appendix D

COVID19 Care Home Support > Implementation Status																																																																																			
Local Authority: North Lincolnshire		Contact name: Victoria Lawrence E-mail: victoria.lawrence@northlincs.gov.uk																																																																																	
Total number of CQC registered care homes in your area: 60		Please submit local plans (covering letter and this template) to CareandReform2@communities.gov.uk by 29 May.																																																																																	
Complete																																																																																			
<p>*Please enter the number of registered Care Homes in your local area, where the corresponding action or support is in place</p> <p>Key COVID19 Support Actions for Care Homes</p> <p>Focus 1: Infection prevention and control measures</p> <table border="1"> <tr> <td>1.1) Ability to isolate residents within their own care homes</td> <td>59</td> <td>No</td> <td colspan="2"></td> <td>This will be an expectation of the Infection Control Grant.</td> </tr> <tr> <td>1.2) Actions to restrict staff movement between care homes</td> <td>56</td> <td>No</td> <td colspan="2"></td> <td></td> </tr> <tr> <td>1.3) Paying staff full wages while isolating following a positive test</td> <td>25</td> <td>No</td> <td colspan="2"></td> <td></td> </tr> </table> <p>Section complete</p> <p>Focus 2: Testing</p> <table border="1"> <tr> <td>2.1) Registration on the government's testing portal</td> <td>41</td> <td>No</td> <td colspan="2"></td> <td>A local offer is in place to coordinate and support Care Homes with whole home testing. Care Homes that are currently eligible to register have done so or were previously participants in the pilot.</td> </tr> <tr> <td>2.2) Access to COVID 19 test kits for all residents and asymptomatic staff</td> <td>31</td> <td>No</td> <td colspan="2"></td> <td>Some Care Homes that have accessed testing either through the CQC pilot or the portal, have reported experiencing difficulties and delays in receiving and returning their swabbing kits.</td> </tr> <tr> <td>2.3) Testing of all residents discharged from hospital to care homes</td> <td>43</td> <td>No</td> <td colspan="2"></td> <td>Testing prior to discharge is consistently in place. Some Care Homes experienced residents being discharged from hospital without testing earlier in the pandemic.</td> </tr> </table> <p>Section complete</p> <p>Focus 3: Personal Protective Equipment (PPE) and Clinical Equipment</p> <table border="1"> <tr> <td>3.1) Access to sufficient PPE to meet needs</td> <td>60</td> <td>No</td> <td colspan="2"></td> <td>All Care Homes have been supported to access PPE including the Council providing 'bridging' stocks if required.</td> </tr> <tr> <td>3.2) Access to medical equipment needed for Covid19</td> <td>54</td> <td>No</td> <td colspan="2"></td> <td>All Care Homes who required medical equipment (BP Machines, Pulse Oximeters and Tympanic Thermometers) have been provided with it.</td> </tr> </table> <p>Section complete</p> <p>Focus 4: Workforce support</p> <table border="1"> <tr> <td>4.1) Access to training in the use of PPE from clinical or Public Health teams</td> <td>60</td> <td>No</td> <td colspan="2"></td> <td>All Care Homes have received IPC training.</td> </tr> <tr> <td>4.2) Access to training on use of key medical equipment needed for COVID19</td> <td>53</td> <td>No</td> <td colspan="2"></td> <td>All Care Homes have been offered Clinical Observation training and good attendance is evidenced. Some Nursing Homes declined as they felt the training was not required for their staff.</td> </tr> <tr> <td>4.3) Access to additional capacity including from locally coordinated returning healthcare professionals or volunteers</td> <td>40</td> <td>Yes</td> <td colspan="2"></td> <td>The majority of Care Homes report confidence in their workforce capacity. The North Lincolnshire Care Home Support Plan includes graduated options of support to ensure safe staffing levels are maintained, if required. The national Bring Back Staff campaign has not had uptake locally.</td> </tr> </table> <p>Section complete</p> <p>Focus 5: Clinical support</p> <table border="1"> <tr> <td>5.1) Named Clinical Lead in place for support and guidance</td> <td>39</td> <td>No</td> <td colspan="2"></td> <td>All Care Homes have access to clinical support and guidance from the local Single Point of Access (SPA), which includes provision of a GP from 8am to 8pm.</td> </tr> <tr> <td>5.2) Access to mutual aid offer (primary and community health support)</td> <td>56</td> <td>No</td> <td colspan="2"></td> <td>All Care Homes have access to clinical support and guidance from the local Single Point of Access (SPA), which includes provision of a GP from 8am to 8pm. A Clinical Response Team has been established to provide primary and community health support into Care Homes.</td> </tr> </table> <p>Section complete</p>						1.1) Ability to isolate residents within their own care homes	59	No			This will be an expectation of the Infection Control Grant.	1.2) Actions to restrict staff movement between care homes	56	No				1.3) Paying staff full wages while isolating following a positive test	25	No				2.1) Registration on the government's testing portal	41	No			A local offer is in place to coordinate and support Care Homes with whole home testing. Care Homes that are currently eligible to register have done so or were previously participants in the pilot.	2.2) Access to COVID 19 test kits for all residents and asymptomatic staff	31	No			Some Care Homes that have accessed testing either through the CQC pilot or the portal, have reported experiencing difficulties and delays in receiving and returning their swabbing kits.	2.3) Testing of all residents discharged from hospital to care homes	43	No			Testing prior to discharge is consistently in place. Some Care Homes experienced residents being discharged from hospital without testing earlier in the pandemic.	3.1) Access to sufficient PPE to meet needs	60	No			All Care Homes have been supported to access PPE including the Council providing 'bridging' stocks if required.	3.2) Access to medical equipment needed for Covid19	54	No			All Care Homes who required medical equipment (BP Machines, Pulse Oximeters and Tympanic Thermometers) have been provided with it.	4.1) Access to training in the use of PPE from clinical or Public Health teams	60	No			All Care Homes have received IPC training.	4.2) Access to training on use of key medical equipment needed for COVID19	53	No			All Care Homes have been offered Clinical Observation training and good attendance is evidenced. Some Nursing Homes declined as they felt the training was not required for their staff.	4.3) Access to additional capacity including from locally coordinated returning healthcare professionals or volunteers	40	Yes			The majority of Care Homes report confidence in their workforce capacity. The North Lincolnshire Care Home Support Plan includes graduated options of support to ensure safe staffing levels are maintained, if required. The national Bring Back Staff campaign has not had uptake locally.	5.1) Named Clinical Lead in place for support and guidance	39	No			All Care Homes have access to clinical support and guidance from the local Single Point of Access (SPA), which includes provision of a GP from 8am to 8pm.	5.2) Access to mutual aid offer (primary and community health support)	56	No			All Care Homes have access to clinical support and guidance from the local Single Point of Access (SPA), which includes provision of a GP from 8am to 8pm. A Clinical Response Team has been established to provide primary and community health support into Care Homes.
1.1) Ability to isolate residents within their own care homes	59	No			This will be an expectation of the Infection Control Grant.																																																																														
1.2) Actions to restrict staff movement between care homes	56	No																																																																																	
1.3) Paying staff full wages while isolating following a positive test	25	No																																																																																	
2.1) Registration on the government's testing portal	41	No			A local offer is in place to coordinate and support Care Homes with whole home testing. Care Homes that are currently eligible to register have done so or were previously participants in the pilot.																																																																														
2.2) Access to COVID 19 test kits for all residents and asymptomatic staff	31	No			Some Care Homes that have accessed testing either through the CQC pilot or the portal, have reported experiencing difficulties and delays in receiving and returning their swabbing kits.																																																																														
2.3) Testing of all residents discharged from hospital to care homes	43	No			Testing prior to discharge is consistently in place. Some Care Homes experienced residents being discharged from hospital without testing earlier in the pandemic.																																																																														
3.1) Access to sufficient PPE to meet needs	60	No			All Care Homes have been supported to access PPE including the Council providing 'bridging' stocks if required.																																																																														
3.2) Access to medical equipment needed for Covid19	54	No			All Care Homes who required medical equipment (BP Machines, Pulse Oximeters and Tympanic Thermometers) have been provided with it.																																																																														
4.1) Access to training in the use of PPE from clinical or Public Health teams	60	No			All Care Homes have received IPC training.																																																																														
4.2) Access to training on use of key medical equipment needed for COVID19	53	No			All Care Homes have been offered Clinical Observation training and good attendance is evidenced. Some Nursing Homes declined as they felt the training was not required for their staff.																																																																														
4.3) Access to additional capacity including from locally coordinated returning healthcare professionals or volunteers	40	Yes			The majority of Care Homes report confidence in their workforce capacity. The North Lincolnshire Care Home Support Plan includes graduated options of support to ensure safe staffing levels are maintained, if required. The national Bring Back Staff campaign has not had uptake locally.																																																																														
5.1) Named Clinical Lead in place for support and guidance	39	No			All Care Homes have access to clinical support and guidance from the local Single Point of Access (SPA), which includes provision of a GP from 8am to 8pm.																																																																														
5.2) Access to mutual aid offer (primary and community health support)	56	No			All Care Homes have access to clinical support and guidance from the local Single Point of Access (SPA), which includes provision of a GP from 8am to 8pm. A Clinical Response Team has been established to provide primary and community health support into Care Homes.																																																																														

Appendix E

COVID-19 Financial support to social care providers - summary 29 May 2020

Support to providers that the local authority has contracts with			
	Domiciliary care	Residential care	Other provision
Support being offered	£114,200 (Covid Grant) £43,289 (annual fee increase)	£402,843 (Covid Grants) £105,951 (annual fee increase)	
Total spent¹ to date since on supporting providers the local authority has contracts with in response to COVID-19	£666,283		
Support to providers that the local authority does not have contracts with			
Support being offered	£48,200	£3,000	
Total spent² to date since on supporting providers the local authority does not contract with in response to COVID-19	£51,200		

¹ Spent = funding or support has already reached providers.

² Spent = funding or support has already reached providers.

Appendix F - Letters to providers



Date: 17 March 2020

www.northlincs.gov.uk

FAO Care Providers
Via Email

Church Square House
30-40 High Street
Scunthorpe
North Lincolnshire
DN15 6NL

Dear Colleague

We are writing in recognition and appreciation of the vital role you have in supporting vulnerable adults in North Lincolnshire to be safe and well. We would like to provide assurance that North Lincolnshire Council with our local health partners will work in partnership to support your agencies and workforce during what will undoubtedly be challenging times as a result of the national COVID 19 virus situation.

We are in a good position in North Lincolnshire due to the very high quality of the care you provide. The work that you have been undertaking in recent months to strengthen your business continuity arrangements and the strong partnership relationships across North Lincolnshire will also be key to us providing an effective coordinated response.

The Provider Development Team will continue to be the point of contact for you and can be contacted by email providerdevelopment@northlincs.gov.uk on and phone on 01724 298185.

Members of this team will communicate regularly with you, as there is more information to share and to discuss and co-produce plans and responses as required. Please do not hesitate to contact them with any issues or suggestions of how we can work better together to support vulnerable people at this time.

The Government Guidance is being continually updated and there is a dedicated Corona Virus page on the Government website www.direct.gov.uk. The links to the latest guidance in relation to Care Homes, Home Care and Supported Living published on 13 March 2020 can also be found below. Please refer to this website and the Care Quality Commission, as your regulatory body for further information.

Thank you for your continued dedication and compassion to providing quality care and support to the residents of North Lincolnshire.

Kind regards

A handwritten signature in black ink, appearing to read "Karen Pavey".

Karen Pavey
Director Adults and Community Wellbeing
North Lincolnshire Council

New guidance issued for adult social care providers in relation to COVID-19 – 13 March 2020

Public Health England has issued new guidance in relation to care and support provision in residential settings and where care is delivered in people's own homes. It is designed to ensure people who receive care are well supported.

The guidance is available on the GOV.UK website. There is separate guidance for the following types of provision:

- [residential care](#)
- [supported living](#)
- [home care](#).



Guidance on residential care provision

This guidance is aimed at local authorities, clinical commissioning groups (CCGs) and registered providers of accommodation for people who need personal or nursing care. This includes registered residential care and nursing homes for people with learning disabilities, mental health and/or other disabilities. [Access the guidance here](#).



Guidance for supported living provision

This is aimed at local authorities, clinical commissioning groups (CCGs), community health services and providers of care and support delivered within supported living environments (people in their own homes), including for people with mental health conditions, learning disabilities or autistic adults. [Access the guidance here](#).

There is guidance issued by Public Health England (PHE) for individuals, families and informal care workers of [what to do to maintain home care support safely, if they are advised to isolate themselves at home](#).

Guidance on home care provision

This guidance is aimed at local authorities, clinical commissioning groups (CCGs) and registered providers, who support and deliver care to people in their own homes, including community health services.



It takes account of latest government advice on self-isolation, set out in [guidance issued by Public Health England](#). There will also be separate guidance setting out arrangements for people in prisons.

Provision of care and support in people's home is a high priority service, in that most care and support cannot be deferred to another day without putting individuals at risk of harm. It is therefore vital that these services are prioritised and this guidance will support you in doing this. This guidance will be regularly updated. [Access the guidance here](#).

North Lincolnshire Council

Date: 23 April 2020

www.northlincs.gov.uk

FAO Care Providers
Via Email

Church Square House
30-40 High Street
Scunthorpe
North Lincolnshire
DN15 6NL

Dear Colleague

Further to my letter sent in March, we wanted to reiterate our recognition and appreciation of the vital role you have been undertaking in supporting vulnerable adults in North Lincolnshire. These have been challenging times, with ever changing guidance and requirements placed on the sector, and we applaud you for your efforts made to meet these challenges. The good news stories, solidarity and partnership working shown has been truly heartwarming.

We are aware that certain costs at this time may have increased, and that you are having to undertake work differently. Therefore, we shall be distributing a Covid Grant to care providers in recognition of this. Further information regarding the Grant and the mechanisms of how this will be applied will be communicated with you later in the week.

The Provider Development Team will continue to be the point of contact for you and can be contacted by email at providerdevelopment@northlincs.gov.uk and phone on 01724 298185. The members of the team will continue to maintain regular contact with you, share information as it becomes available, champion the hard work that you have been undertaking and escalate any concerns or questions that you may have.

We thank you also for your support and the information you have provided to the teams, this has helped to ensure that locally issues are addressed, and that in partnership we work together to ensure that the most vulnerable remain supported and protected.

Thank you again for your continued dedication and compassion to providing quality care and support to the residents of North Lincolnshire.

Kind regards



Karen Pavey
Director Adults and Community Wellbeing
North Lincolnshire Council

North Lincolnshire Council

www.northlincs.gov.uk

Date: 30 April 2020

FAO: Care Providers
Via Email
[Enter Provider Name]

Church Square House
30-40 High Street
Scunthorpe
North Lincolnshire
DN15 6NL

Dear Colleague

In reference to my letter sent earlier this week we are now in the position to inform you of your Covid 19 Grant payment from North Lincolnshire Council to help towards any additional costs you are experiencing in these challenging times.

In addition to the 20/21 fee increase of 5.49% to the base fee from April 2020, we are pleased to inform you that your organisation will also receive the below amount for the period of April to June 2020.

[insert grant amount]

The amount of grant allocation has been based on Care Home occupancy, with a factor applied that considers staffing ratios.

We ask that this additional money is utilised for ensuring the payment and continued protection of your frontline staff, including the necessary PPE.

Alongside the Covid Grant, there are a range of additional support services available to your organisation from North Lincolnshire Council. Please see the attached appendix for further details. If your organisation is experiencing extreme financial difficulties, supplier relief may be available on an open book basis.

The Provider Development Team will continue to be the point of contact for you and can be contacted by email at providerdevelopment@northlincs.gov.uk and phone on 01724 298185.

Thank you again for your continued commitment, flexibility and compassion to providing quality care and support to vulnerable adults in North Lincolnshire.

Kind regards



Karen Pavey
Director Adults and Community Wellbeing
North Lincolnshire Council

Service	Details	How to access
DBS Checks (Free of charge)	<p>Any healthcare professional who provides personal care to a vulnerable adult or child is legally required to hold an Enhanced DBS check.</p> <p>In response to COVID-19, the Home Office and Disclosure and Barring Service have put temporary arrangements in place to provide standard and enhanced DBS checks and fast-track emergency checks of the adults' and children's Barred Lists.</p> <p>The council acts as an Umbrella Body for DBS checks through which local organisations (once registered) can process their checks. In support of those organisations providing personal care the usual admin fee for processing checks for additional staff in response to COVID-19 is being waived.</p>	<p>Follow the link below for more information regarding this:</p> <p>https://www.gov.uk/government/publications/covid-19-free-of-charge-dbs-applications-and-fast-track-barred-list-check-service</p> <p>For further information contact: Tracy.marrison@northlincs.gov.uk</p>
Business Support Helpline	Dedicated helpline to provide advice and support to businesses in North Lincolnshire.	<p>For further information contact:</p> <p>businessinfo@northlincs.gov.uk</p> <p>01724297330</p>
Business Rate Relief	<p>As the billing authority for North Lincolnshire, North Lincolnshire Council administers business rates for non-domestic properties, and this extends to the administration of nationally set business rate reliefs (including small business relief and charity relief).</p> <p>Care providing businesses which have non-domestic premises in North Lincolnshire could potentially benefit from business rate relief, some already do so.</p>	<p>More information on business rate reliefs, in addition to an online enquiry form, can be found at:</p> <p>https://www.northlincs.gov.uk/jobs-business-and-regeneration/business-rates/reliefs/#1533048313139-84110775-357f</p>
Small Business Grants	<p>In response to COVID-19, the Government announced a package of financial measures designed to support businesses impacted by the pandemic.</p> <p>As part of the measures, small business grants of £10k are payable to businesses in receipt of small business relief. Some homecare providers have already registered and been paid, others that appear to be eligible are yet to register and are being encouraged by officers to do so at the earliest opportunity. Cash could be paid within 3 days if the registration includes all of the information necessary to process the grant payment.</p>	<p>Eligible businesses (those in receipt of small business relief as at 11th March 2020) should apply if they have not already done so at:</p> <p>https://investinnorthlincolnshire.com/</p>

Supplier Relief	<p>North Lincolnshire Council is committed to continuing to work closely with our suppliers to deliver the best outcomes for our residents. We are guided by The Cabinet Office policy note PPN 02/20 Supplier Relief as we continue to make best use of resources whilst supporting the local economy and supply chain.</p> <p>https://www.gov.uk/government/publications/procurement-policy-note-0220-supplier-relief-due-to-covid-19</p> <p>Our aim is to support service continuity, protect infrastructure, supply chains and jobs. We are having individual conversations with suppliers where services are affected by Coronavirus to understand their particular circumstances and in some cases to provide relief where information is shared with the Council on an open book basis.</p>	<p>Please get in touch with your regular Council contact to discuss further.</p> <p>Alternatively, please email procurement@northlincs.gov.uk with Supplier Relief in the subject line and include the details of your NLC contact name and contract details.</p>
-----------------	--	--

North Lincolnshire Council

Date: 30 April 2020

www.northlincs.gov.uk

FAO: Care Providers
Via Email
[Enter Provider Name]

Church Square House
30-40 High Street
Scunthorpe
North Lincolnshire
DN15 6NL

Dear Colleague

In reference to my letter sent earlier this week we are now in the position to inform you of your Covid 19 Grant payment from North Lincolnshire Council to help towards any additional costs you are experiencing in these challenging times.

in addition to the 2020/21, fee increase of 5.13% to the standard base hourly rate with a larger increase to the rural premium from April 2020, we are pleased to inform you that your organisation will also receive the below amount for the period of April to June 2020.

[insert grant amount]

The amount of grant allocation has been based on commissioned activity and the total number of staff employed by the Home Care agency.

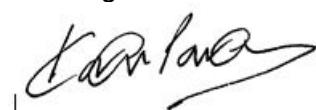
We ask that this additional money is utilised for ensuring the payment and continued protection of your frontline staff, including the necessary PPE.

Alongside the Covid Grant, there are a range of additional support services available to your organisation from North Lincolnshire Council. Please see the attached appendix for further details. If your organisation is experiencing extreme financial difficulties, supplier relief may be available on an open book basis.

The Provider Development Team will continue to be the point of contact for you and can be contacted by email at providerdevelopment@northlincs.gov.uk and phone on 01724 298185.

Thank you again for your continued commitment, flexibility and compassion to providing quality care and support to vulnerable adults in North Lincolnshire.

Kind regards



Karen Pavey
Director Adults and Community Wellbeing
North Lincolnshire Council

Service	Details	How to access
DBS Checks (Free of charge)	<p>Any healthcare professional who provides personal care to a vulnerable adult or child is legally required to hold an Enhanced DBS check.</p> <p>In response to COVID-19, the Home Office and Disclosure and Barring Service have put temporary arrangements in place to provide standard and enhanced DBS checks and fast-track emergency checks of the adults' and children's Barred Lists.</p> <p>The council acts as an Umbrella Body for DBS checks through which local organisations (once registered) can process their checks. In support of those organisations providing personal care the usual admin fee for processing checks for additional staff in response to COVID-19 is being waived.</p>	<p>Follow the link below for more information regarding this:</p> <p>https://www.gov.uk/government/publications/covid-19-free-of-charge-dbs-applications-and-fast-track-barred-list-check-service</p> <p>For further information contact: Tracy.marrison@northlincs.gov.uk</p>
Business Support Helpline	Dedicated helpline to provide advice and support to businesses in North Lincolnshire.	<p>For further information contact:</p> <p>businessinfo@northlincs.gov.uk</p> <p>01724297330</p>
Business Rate Relief	<p>As the billing authority for North Lincolnshire, North Lincolnshire Council administers business rates for non-domestic properties, and this extends to the administration of nationally set business rate reliefs (including small business relief and charity relief).</p> <p>Care providing businesses which have non-domestic premises in North Lincolnshire could potentially benefit from business rate relief, some already do so.</p>	<p>More information on business rate reliefs, in addition to an online enquiry form, can be found at:</p> <p>https://www.northlincs.gov.uk/jobs-business-and-regeneration/business-rates/reliefs/#1533048313139-84110775-357f</p>
Small Business Grants	<p>In response to COVID-19, the Government announced a package of financial measures designed to support businesses impacted by the pandemic.</p> <p>As part of the measures, small business grants of £10k are payable to businesses in receipt of small business relief. Some homecare providers have already registered and been paid, others that appear to be eligible are yet to register and are being encouraged by officers to do so at the earliest opportunity. Cash could be paid within 3 days if the registration includes all of the information necessary to process the grant payment.</p>	<p>Eligible businesses (those in receipt of small business relief as at 11th March 2020) should apply if they have not already done so at:</p> <p>https://investinnorthlincolnshire.com/</p>

Supplier Relief	<p>North Lincolnshire Council is committed to continuing to work closely with our suppliers to deliver the best outcomes for our residents. We are guided by The Cabinet Office policy note PPN 02/20 Supplier Relief as we continue to make best use of resources whilst supporting the local economy and supply chain.</p> <p><u>https://www.gov.uk/government/publications/procurement-policy-note-0220-supplier-relief-due-to-covid-19</u></p> <p>Our aim is to support service continuity, protect infrastructure, supply chains and jobs. We are having individual conversations with suppliers where services are affected by Coronavirus to understand their particular circumstances and in some cases to provide relief where information is shared with the Council on an open book basis.</p>	<p>Please get in touch with your regular Council contact to discuss further.</p> <p>Alternatively, please email <u>procurement@northlincs.gov.uk</u> with Supplier Relief in the subject line and include the details of your NLC contact name and contract details.</p>
-----------------	---	---

North Lincolnshire Council

Date: 15 May 2020

www.northlincs.gov.uk

FAO: Care Providers

Via Email

Church Square House
30-40 High Street
Scunthorpe
North Lincolnshire
DN15 6NL

Dear Colleague

We are writing in recognition and appreciation of the vital role you have in supporting vulnerable adults in North Lincolnshire to be safe and well. I am writing to update you on the local support to your sector. Myself as the Director Adult Social Services, Penny Spring Director Public Health NLC and Clare Linley Director Nursing & Quality CCG are now working together as the executive leads for support to Care Homes. We would like to provide assurance that we will work in partnership to support your residents, agencies and workforce during what is undoubtedly a challenging time.

You will have seen that care homes are now able to order coronavirus testing via a 'portal' on the GOV.UK web site, although we have been told that there have been problems with the process. There are a number of ongoing communications with the Department of Health and Social Care on this. We have agreed to operate against a common set of principles and create a local approach using our local testing facilities where at all possible.

Correspondence was sent from DHSC to Directors of Public Health yesterday indicating they should work with Directors of Adult Social Services to prioritise homes for testing based on minimising further impact to residents and additional local intelligence. We will be working with this concept and as a matter of urgency we will develop the practical mechanism for implementing prioritisation in North Lincolnshire.

At this time Public Health England are still the first point of contact for you however we urge you to make contact with us via the usual route The Provider Development Team who will continue to be the point of contact for you and can be contacted by email providerdevelopment@northlincs.gov.uk and phone on 01724 298185 if you are concerned.

For now, we would ask that you work with us and let us know where you have been sent swab kits from DHSC or another national stakeholder before you start testing systematically. This will enable us to provide the best support to you.

We have also asked DHSC to ensure there is a single mechanism for communication with care homes via the area's Director of Adult Social Services, as we are aware that there are currently many different routes of communication and this is confusing.

Finally we are all really clear that testing is put into a wider context of prevention of spread of infections and there are many interventions that make a big impact on this, we will continue to support you and will be writing to you next week to explain the new support offer.

Our initial outline thoughts has been shared with the Health and Care standards board and further conversations are expected during next week to explore opportunities for supporting the sector as we finalise our offer to you.

Kind regards

A handwritten signature in black ink, appearing to read "Karen Pavey".

Karen Pavey
Director Adults and Community Wellbeing
North Lincolnshire Council

North Lincolnshire Council

Date: 21 May 2020

www.northlincs.gov.uk

FAO: Care Providers
Via Email

Church Square House
30-40 High Street
Scunthorpe
North Lincolnshire
DN15 6NL

Dear Colleague

Following on from the letter from Karen Pavey (Director of Adult and Community Wellbeing) on Friday 15 May 2020, I am writing to explain further the North Lincolnshire support offer to Care Homes in relation to whole home Coronavirus (COVID-19) testing to compliment the national arrangements.

It is important that whole home testing is undertaken in a coordinated way to provide the best support in terms of outbreak management, workforce planning, and preventing the spread of COVID-19 in Care Homes.

By prioritising and coordinating whole home testing locally, we can make sure that those homes at greater risk from outbreaks receive the testing sooner, and best enable the local health and social care partners to support Care Homes during the process.

To achieve this we would like Care Homes to keep in regular communication with the Provider Development Team regarding the requests for testing and the outcomes of testing. We therefore ask that you notify the Provider Development Team in the following circumstances:

- You have informed the Public Health England Health Protection Team of a new suspected outbreak
- Before accessing the online portal to request whole home testing - the team will support you to complete the digital request form if required
- When you have received the swabbing kits
- When you have received the results

This will enable us to review the whole home testing requests and prioritise them in order of risk. The prioritisation criteria we will use locally will be aligned to the national prioritisation criteria including number of residents and staff with symptoms, size of the care home, number of recent hospital discharges and deaths.

For those Care Homes in most urgent need of whole home testing, timely and coordinated testing will be provided via our local swabbing and testing facilities. Where Care Homes are using the swabbing kits provided through the portal, the local Community Swabbing Team can offer training to Care Home staff in undertaking swabbing using the kits provided.

The Provider Development Team will in turn keep you updated in terms of timeframes for undertaking swabbing and how we will support your needs with this.

Public Health England are still the first point of contact for you in the event of an outbreak of COVID-19, however we request you keep in regular communication with the Provider Development Team regarding testing to enable us to provide the best support we can to you. The Provider Development Team can be contacted by email providerdevelopment@northlincs.gov.uk and phone on 01724 298185.

Yours sincerely



Penny Spring
Director Public Health
North Lincolnshire Council

North Lincolnshire Council

Date: 19 May 2020

www.northlincs.gov.uk

FAO: Care Providers
Via Email

Church Square House
30-40 High Street
Scunthorpe

North Lincolnshire
DN15 6NL

Dear Colleague

Support Offer to Care Homes in North Lincolnshire

Thank you for all you and your staff are doing to keep your residents safe during the Covid-19 pandemic. These are unprecedented times and we continue to hear of some exceptional work in Care Homes across our local area.

In conjunction with colleagues across the NHS, Public Health Team and Local Authorities we are proposing an offer of additional support to every Care Home (with and without nursing) based on a series of principles:

Leadership Support

- As a Clinical Commissioning Group (CCG) and Local Authority (LA) we are working in partnership with primary care, mental health services, and hospital and community colleagues to deliver an enhanced health support offer.
- Your Care Home will have a named nominated contact, within the Provider Development Team to provide support, direction or coordinate requests to other partners across the system.
- Your Care Home will have access to a named clinical lead to provide clinical support to residents.

Prevention

- Your Care Home will have access to infection, prevention and control (IPC) advice and receive a visit (or if appropriate a telephone call) from an IPC nurse/nurse with knowledge of IPC when this is required. This can be requested via your named nominated contact (see above).
- Your Care Home will be offered a visit by a community nurse on a daily basis (this might take place virtually). The nurse will have a good knowledge of IPC.
- Your Care Home will be supported to develop plans to manage an outbreak. These will include input from the local provider of IPC where necessary.

- As a CCG and LA we will have an understanding of the services and support in place within your Care Home and help you to address any risks/gaps.
- We will, on a daily basis, call all Care Homes who identify concerns within the Capacity Tracker. Where the Capacity Tracker is not being used you will be supported to do so.
- A multidisciplinary team (MDT) of GPs, community nurses, allied health professionals (AHPs) and social workers will deliver a weekly (virtual if appropriate) round to support the care of vulnerable residents.
- We will work with you to ensure all your residents have a personalised care and support plan.
- We will work with you to ensure that Care Homes are able to promptly access testing for residents, staff and where appropriate family members, and support them to do so where they are having difficulty in this regard.
- Visiting staff will, where possible, visit care home residents who are known to be Covid+ at the end of their working day to help to prevent the spread of infection. As agencies providing care we will collaborate to help to reduce footfall into your Care Homes.
- CCG staff, Primary Care Networks and pharmacists will work together to ensure a joined-up approach around medication supply, structured medication reviews, supporting reviews of new residents or those recently discharged and addressing medication queries.

Timely access and additional Clinical Support

- Everyone discharged from a hospital to your care home will be followed up by a face to face visit by a nurse or allied health professional involved in the discharge, a community nurse or, where there is one, the named nurse attached to your care home. This maybe virtual.
- All Care Homes will have access to the Community Response Team and Unscheduled Care Team when required via the NL Single Point of Access service – 24 hours a day.
- All Care Homes are being provided with additional clinical equipment and the necessary training to support remote assessments.
- Telephone or video technology will be available to assess residents remotely.
- Your staff will be made aware of where and how to access psychological support.
- Support will be given regarding staff and resident testing as required.
- You will receive weekly access to a MDT of appropriate specialists.

Workforce

- We will increase the educational support available to you including ensuring your staff have access to infection prevention and control specialist nurse advice and End of Life Specialist advice, when required, for all Care Homes.
- Local partners are developing a framework to support care homes to maintain safe staffing levels.
- Technology and access has been made available to support virtual training programmes.
- Support will continue regarding recruitment opportunities.

You will already have seen elements of this support and, over the next few weeks, we would like to further increase the access and support you are receiving. To understand more about this offer and ask any questions we have arranged three, one hour presentations that you will be able to access using the virtual Microsoft Teams platform. These sessions are planned as follows:

- Thursday 21st May 2020 – 14.00hrs – 15.00hrs
- Friday 22nd May 2020 – 14.00hrs – 15.00hrs
- Monday 1st June 2020 – 13.00hrs – 14.00hrs

If you would like to book onto one of these sessions please let the Provider Development Team know which session you wish to attend and they will arrange the booking for you.

Thank you once again for all you are doing to keep your residents safe.

Kind Regards

Penny Spring

Penny Spring
Director Public Health



Karen Pavey
Director Adult and Community
Wellbeing (DASS)

Clare E Linley

Clare Linley
Director of Nursing & Quality