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#### Simon Hobbs

Director of Legal and Democratic Services County Hall Matlock Derbyshire DE4 3AG

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## PUBLIC

To: Members of Cabinet Member meeting - Adult Care

Wednesday, 3 June 2020

Dear Councillor,

Please attend a meeting of the **Cabinet Member meeting - Adult Care** to be held at <u>**10.00 am</u>** on <u>**Thursday, 11 June 2020**</u> in via Skype, the agenda for which is set out below.</u>

Yours faithfully,

Simon Hobbs Director of Legal and Democratic Services

## <u>A G E N D A</u>

#### PART I - NON-EXEMPT ITEMS

1. Apologies for Absence

To receive apologies for absence (if any)

2. Declarations of Interest

To receive declarations of interest (if any)

3. Minutes (Pages 1 - 4)

To confirm the non-exempt minutes of the meeting of the Cabinet Member

– Adult Care held on 16 April 2020.

- 4. Petitions to be Recieved (Pages 5 6)
- 5. Review of Urgent Officer Decisions Reported to Cabinet 23 April 2020 (Pages 7 - 72)
- 6. Exclusion of the Public

To move "That under Regulation 21 (1)(b) of the Local Authorities (Executive Arrangements) (Access to Information) (England) Regulations 2000, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph(s)... of Part 1 of Schedule 12A to the Local Government Act 1972"

#### PART II - EXEMPT ITEMS

7. Declarations of Interest

To receive declarations of interest (if any)

8. Minutes (Pages 73 - 74)

To confirm the exempt minutes of the meeting of the Cabinet Member – Adult Care held on 16 April 2020.

9. Review of Urgent Officer Decisions Reported to Cabinet 23 April 2020 (Pages 75 - 82)

## PUBLIC

**MINUTES** of a meeting of the **CABINET MEMBER – ADULT CARE** held on 16 April 2020 at County Hall, Matlock.

## PRESENT

## Councillor J Wharmby (in the Chair)

Also in attendance was Councillor S Swann.

Apologies for absence were received on behalf of Councillor C Dale.

**10/20** <u>**MINUTES**</u> **RESOLVED** that the minutes of the meeting held on 19 March 2020 be confirmed as a correct record and signed by the Cabinet Member.

#### 11/20 DERBYSHIRE CARERS STRATEGY 2020 – 2025 -

According to the 2011 Census, there were around 93,000 carers in Derbyshire. Out of the top 10 districts nationally, with the highest percentage of unpaid carers, 3 districts fall within Derbyshire. It is estimated that unpaid carers deliver over 2.6m hours of care a week in Derbyshire, saving the local economy an estimated £988 every year.

Evidence from Carers UK suggests that not only are the number of carers increasing, but that carers are taking on greater responsibility for more intensive levels of care. The act of caring is known to impact upon carers' physical, mental and economic health and wellbeing, resulting in carers who are more likely to:

- have a long-term physical or mental health condition
- feel isolated or experience reduced social contact
- be concerned about finances
- have insufficient sleep and time for themselves

Nationally and locally, the increase in both life expectancy and the prevalence of caring creates the need for more effective support and service options. It is widely recognised that good support for carers benefits not only carers, by maintaining and promoting their health and well-being, but also the health and well-being of the person they care for. Supporting carers to continue caring is as fundamental to supporting strong families and communities as it is to the sustainability of the health and social care system. Supporting carers to continue caring supports economic and effective planning as well as morally, being the right thing to do.

There have been many improvements over the last three years in the way carers are supported in Derbyshire, but challenges remain. The Council and

Derby and Derbyshire Clinical Commissioning Group have therefore developed and agreed high level, shared priorities set out in the 'Derbyshire Carers Strategy 2020 - 2025'.

Engagement has been undertaken at various levels with carers, partners and providers across the Health, Social Care and Voluntary sector and included Creative Carers, Healthwatch Derbyshire, Links CVS, Derbyshire Carers Association and the National Development Team for Inclusion. Targeted engagement was also carried out with BAME, Mental Health and Learning Disability carers.

The Council completed the ADASS Carers Self-Assessment, informed by feedback from an on-line survey (completed by over 100 carers) and an engagement event (attended by over 50 carers and partners) both considered instrumental in the formation of the strategy.

The Council also took part in the biennial NHS Digital Satisfaction Survey for Adult Carers in England 2018/19 and the findings from this latest survey are also contained within the strategy.

Overall, we received a range of feedback about what is important to carers, but the key priorities carers cited were:

- Systems and services that support carers: Carers want to access what they need quickly and simply without going through complicated systems and processes
- **Improving carer health and wellbeing**: Carers want acknowledgment of the toll caring can take on their physical and mental health and need proactive support to maintain their health and take a break from caring
- Accurate information which is clear and easy to find: Carers want someone to talk to who has good knowledge and understanding of the system and can make it easier to ask the right questions, particularly around finance and accessing services.

Further priorities set out in the strategy include supporting young carers, the early identification of carers, carer employment and financial wellbeing, involving carers as experts and the support of carers through the wider community and society to make Derbyshire truly 'carer-friendly'. The overall approach is consistent with early intervention, prevention and community support.

The strategy also recognises that investment is required to meet the requirements of the Care Act (2014) and Children and Families Act (2014) to ensure that carers are not pushed to breaking point by a lack of information, advice and support.

Supporting carers remains a priority for Derbyshire's health and social care system. The priorities and actions within this strategy complement and link with the priorities of the Health and Wellbeing Board and the Joined up Care Derbyshire plan to enable the adoption of a comprehensive, whole system approach to identifying and supporting carers.

We have also taken learning from national sources so that the priorities set out in the strategy support the delivery of the Department of Health and Social Care Carers Action Plan (2018) and the objectives for carers outlined in the NHS Long Term Plan (2019), both of which have been strongly endorsed in our discussions with carers locally.

**RESOLVED** that the Cabinet Member approved the implementation of the Derbyshire Carers Strategy 2020 – 2025.

**12/20 EXCLUSION OF THE PUBLIC RESOLVED** that the public be excluded from the meeting during the consideration of the remaining items on the agenda to avoid the disclosure of the kind of exempt information detailed in the following summary of proceedings:-

#### SUMMARY OF PROCEEDINGS CONDUCTED AFTER THE PUBLIC WERE EXCLUDED FROM THE MEETING

1. To confirm the exempt minutes of the meeting of the Cabinet Member for Adult Care held on 19 March 2020.

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Agenda Item 4

Agenda Item No. 2 PUBLIC

> S C A

#### DERBYSHIRE COUNTY COUNCIL

#### **CABINET MEMBER MEETING – ADULT CARE**

#### 11 JUNE 2020

#### **Report of the Director of Legal and Democratic Services**

## **REPORT ON PETITIONS TO BE RECEIVED**

**1. Purpose of the Report** To receive petitions forwarded to the County Council relating to matters contained within the portfolio of the Cabinet Member for Adult Care.

**2. Information and Analysis** In compliance with the Council's Petition Scheme, the following petitions are presented for receipt, investigation and formal response by the Executive Director for Adult Social Care and Health:-

LOCATION/SUBJECT	SIGNATURES	LOCAL MEMBER
Save Beechcroft Local Care Home, West Hallam	1068 (change.org)	Councillor C Hart
Save Beechcroft Care Home	1386	Councillor C Hart
Stop Derbyshire County Council closing Goyt Valley House residential care home in New Mills.	444	Councillor B Atkins
Don't Close Goyt Valley House and 7 Derbyshire Care Homes	231	Councillor B Atkins
Stop Derbyshire County Council closing Goyt Valley House residential care home in New Mills	40	Councillor B Atkins
Object to the proposal of Derbyshire County Council to close 7 residential homes for	327	Councillors B Atkins, Brittain, C Hart, W Major, Moesby, J Twigg and
	Page 5	

older people		Western
Prevent the closure of Gernon Manor, Bakewell	1165	Councillor J Twigg
Object to the proposal of Derbyshire County Council to close 7 residential homes for older people	2857 Epetition	Councillors B Atkins, S Brittain, C Hart, W Major, C Moesby, J Twigg and A Western
Object to the proposal of Derbyshire County Council to close 7 residential homes for older people	61	Councillors B Atkins, S Brittain, C Hart, W Major, C Moesby, J Twigg and A Western
	807	
Objections - The Spinney		Councillor S Brittain

## 3. Considerations (to be specified individually where appropriate)

In preparing this report the relevance of the following factors has been considered: financial, legal, prevention of crime and disorder, equality and diversity, human resources, environmental, health, social values, property and transport considerations.

#### 4. Key Decision No

**5. Call-in** Is it required that call-in be waived in respect of the decisions proposed in the report? No

#### 6. Background Papers

Petition held on file 124.0 in Democratic Services.

## 7. OFFICER'S RECOMMENDATION

(1) that the petitions listed above be received and noted; and

(2) that the Local Members and lead petitioners be advised that in order to alleviate the anxieties for residents, family members and staff, as well as to bring clarity for the market as a whole, an urgent report has been submitted to Cabinet on 4 June 2020 recommending that following the consultation on the future of direct care homes for older people none of the homes proposed for closure will close unless a local care home or alternative provision is available to replace and further consultation is undertaken as appropriate; and a further report setting out a programme of repair and refurbishment for these seven homes, to include any works required immediately to ensure their soundness and safety, will be presented to Cabinet in due course.

## Simon Hobbs

## **Director of Legal and Democratic Services**

Agenda Item 5 PUBLIC

## DERBYSHIRE COUNTY COUNCIL

#### CABINET MEMBER

#### 11 June 2020

## Report of the Executive Director for Adult Social Care & Health

#### **REVIEW OF URGENT OFFICER DECISIONS TAKEN TO SUPPORT COVID-19 RESPONSE**

## ADULT SOCIAL CARE AND HEALTH

#### 1. Purpose of the Report

The purpose of the report is to provide the Cabinet Member with an update in relation to those actions which were the subject of Officer's Decisions utilising emergency decision making powers as detailed in the constitution and to provide assurance in relation to the reviews which have been undertaken. The report also details the process for future reviews and seeks permission to instigate this process.

#### 2. Information and Analysis

The current challenges relating to the COVID-19 pandemic have necessitated urgent decision making processes by the Executive Director for Adult Social Care and Health and Directors to be implemented to ensure the welfare of service users and the public and to safeguard the interests of the Council. The decisions have been made under the urgent delegated powers to Executive Directors as set out in the Constitution.

In the main, the decisions relate to short-term temporary arrangements which are subject to regular review. This is particularly important where subsequent Government guidance has been issued notably in the area of Adult Social Care. It is intended that as Cabinet is now able to function by meetings being held 'remotely' the need for officers to make urgent decisions will now diminish.

However, it is important that officer decisions are kept under regularly review by elected members and officers. At the 4 June Cabinet meeting it was agreed that Cabinet would formally delegate review decisions to the relevant Cabinet Member (CABCO) meeting as these were meetings held in public, virtually if necessary, in order to ensure maximum transparency. A summary of review decisions made by Cabinet members will be reported to Cabinet every two months.

As a further safeguard any significant reductions in service that have been reviewed and substantially maintained over any eight week period will be referred to Cabinet as soon as possible after the eight week period for ratification.

Below, in table 1, is a summary of the reviews that have taken place since Cabinet initially approved these urgent officer decisions on 23 April 2020 and at other subsequent meetings of Cabinet along with notes and suggested recommendations in relation to the decision for the next fortnight. All review decisions to date have been discussed with the Executive Director and Cabinet Member following review by SMT.

A further report in relation to decisions taken in relation to exempt matters is on the agenda as a separate item.

A copy of the most up to date version of the Officer Decision Records is attached as Appendix 1.

Officer Decision	Review notes and recommendation
Adult Social Care Residential Homes for Older People, closure to visitors (ASCODR1)	This has been reviewed on five occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member.
	The latest review on 4 June 2020 notes that it is considered necessary to continue with visiting restrictions to DCC care homes as general social distancing requirements are still in place. It is important DCC maintains this overall position in order to protect vulnerable people living within the homes who may have long term or underlying health conditions which puts them at more risk should they contract COVID-19.
	National guidance has changed to enable family members to visit loves ones at the end of life and this is being delivered locally and this is being facilitated.
	As a result of the latest changes to social distancing arrangements introduced by the Government this week officers are exploring how visiting restrictions

#### Table 1: Summary of officer decision record reviews.

	can be relaxed to enable a relative to meet with a loved one in an appropriate outdoor space, whilst social distancing is maintained. This work will be undertaken in conjunction with Health and Safety and Public Health colleagues to ensure any relaxing of the current arrangements are undertaken in a way that continues to minimise the risk to all parties of infection spread. The outcome of this work will be reported to Cabinet Member and will inform changes to visiting restrictions moving forward. The next review of this decision will take place by Adult Care Senior Management Team on 11 June.
Closure of Older Adults Day Centres and Cessation of service delivery for over 70's in learning disability day Services (ASCODR2)	This has been reviewed on five occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member. The latest review on 4 June 2020 notes it is considered necessary to keep the closure of day centre provision in place due to ongoing social distancing requirements in line with Government guidance that prevent groups of people from different households meeting indoors.
	Clients who would normally attend a day centre have had their care package reviewed and it is continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support is required as an alternative to the support which would have normally been received via attendance at a day centre. Derbyshire Carers Association is also offering support to carers who may have seen their caring duties increase as a result of day centre provision being closed and carers emergency plans are being offered.
	Officers are actively scoping options to see whether individuals who would normally attend a day centre can be offered alternative provision which would involve activities based outdoors in line with current social distancing requirements. This needs to be considered on a case by case basis in order to take into account a range of factors specific to an individual that may dictate whether this is feasible as

	individuals in the shielded group have greater restrictions still in place.
	The next review will take place by Adult Social Care and Health Senior Management Team on 11 June 2020.
Closure of building based Day Centres for people with a Learning Disability	This has been reviewed on five occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member.
(ASCODR3)	The latest review on 4 June 2020 notes it is considered necessary to keep the closure of day centre provision in place due to ongoing social distancing requirements in line with national Government guidance. Clients who would normally attend a day centre have had their care package reviewed and it is continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support is required as an alternative to the support which would have normally been received via attendance at a day centre.
	Derbyshire Carers Association is also offering support to carers who may have seen their caring duties increase as a result of day centre provision being closed and carers emergency plans are being offered.
	For clients with a complex learning disability, where appropriate, individual arrangements have been put in place to ensure there is an alternative day service provision and this is in place to prevent placement breakdown or avoid hospital admission.
	Officers are actively scoping options to see whether individuals who would normally attend a day centre can be offered alternative provision which would involve activities based outdoors in line with current social distancing requirements. This needs to be considered on a case by case basis in order to take into account a range of factors specific to an individual that may dictate whether this is feasible as individuals in the shielded group have greater restrictions still in place.

	The next review will take place by Adult Social Care and Health Senior Management Team on 11 June 2020.
Cessation of planned respite breaks services for Older Adults and people with a Learning Disability (ASCODR4)	This has been reviewed on five occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member.
	The latest review on 4 June 2020 notes it is considered necessary to continue to cease planned respite activity due to ongoing social distancing requirements in line with national Government guidance. The revised guidance from the Government reducing some of the lockdown measures does not suggest the recommencing this type of activity is appropriate at this time. There continues to be clear evidence that spread within care homes is due to bringing people in from the community to these settings.
	Clients who would normally attend a planned respite break have had their care package reviewed and it is continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support is required as an alternative to the support which would have normally been received via respite. Derbyshire Carers Association is also offering support to carers who may have seen their caring duties increase as a result of day centre provision being closed and carers emergency plans are being offered.
	Urgent respite provision is still in place as a mitigation for clients where this is considered appropriate.
	The next review will take place by Adult Social Care and Health Senior Management Team on 18 June 2020.
Homecare Service Suspension / Cessation (ASCODR5)	This has been reviewed on seven occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member.
	The latest review on 4 June 2020 notes it has been agreed that the suspension of 'non-essential'

	homecare services across the county due to an anticipated increased demand on the domiciliary care market no longer needs to be in place. Recent performance reporting suggests that the homecare market is coping with the additional pressures of COVID and there is enough capacity to support any additional hospital discharge activity.
	A comprehensive equalities impact assessment has been undertaken in relation to the operation of the easement and this has also been reviewed and updated in line with feedback from this process.
	Work to reinstate non-essential care calls will commence across the county and where appropriate assessments will take place with individuals to make sure that re-instated homecare appropriately meets needs. We will also communicate the decision to end the use of the Care Act easement to key stakeholders and the Department of Health and Social Care.
Fire Risk Mitigation Work (ASCODR6)	This has been reviewed on five occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member.
	The last review on 4 June 2020 notes that fire risk mitigation works are continuing to take place and unfortunately there have been some delays to the delivery of the work as the risks in relation to COVID have been managed alongside the initial programme plan. There have also been some delays with supply chain issues and this has delayed the work slightly.
	The next review will take place by Adult Social Care and Health Senior Management Team on 18 June 2020.
Financial Charging	This has been reviewed on four occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member.
	At the last review on 4 June 2020, it was noted that the arrangements should continue and were approved for a further two weeks as position remains

	the same. Note that to support market we are not charging client but we are still paying the provider.
	The next review will take place by Adult Social Care and Health Senior Management Team on 18 June 2020.
Integrated Community Equipment Service	This has been reviewed on four occasions by Adult Social Care and Health Senior Management Team.
contract authorisation levels	At the last review on 4 June 2020 it was noted that risks are being managed at the moment. Assurances have been provided by the contract manager about how process is working and there are no particular concerns about the removal of the authorisation levels at present. This arrangement needs to remain in place whilst hospitals return to normal activity increase there is increased demand for community equipment due to an increased number of hospital discharges.
	The next review will take place by Adult Social Care and Health Senior Management Team on 18 June 2020.
Direct Payments to Personal Assistants in the shielded cohort	This has been reviewed on two occasions by Adult Social Care and Health Senior Management Team and a discussion between the Executive Director and Cabinet Member.
	At the last review on 4 June 2020 it was noted that whilst some requirements regarding the shielded cohort have been relaxed to enable them to go outside with one other person, the guidance still clearly indicates that a person should not return to work. Therefore, these arrangements need to be in place to support Direct Payment client's source alternative support where necessary. In all instances Direct Payment recipients have been able to put alternative arrangements in place so at the moment no one is receiving an increased direct payment to cover costs. However it is considered important that this decision remains in place in principle should circumstances for an individual change.
	The next review will take place by Adult Social Care and Health Senior Management Team on 18 June 2020.

Shared Lives carers additional payments	This has been reviewed on one occasions by Adult Social Care and Health Senior Management Team.
	At the review on 4 June 2020 it was noted that due to the lack of day and residential short breaks being available to shared lives carers, individuals are in effect being asked to provide unpaid care for three days per week and this needs to be recognised formally via additional payments. Therefore the current temporary arrangements need to remain in place.
	The next review will take place by Adult Social Care and Health Senior Management Team on 18 June 2020.

## 3. Feedback from Principal Social Worker

The Principal Social Worker has been engaged and consulted with these decisions. The Principal Social Worker is satisfied that the original decisions have been made with due regard for the Department of Health and Social Care Ethical Framework. Where appropriate Care Act easement guidance has been considered and formed part of the decision making process. The Principal Social Worker is aware of the review processes in place.

#### 4. Financial Considerations

As part of the urgent officer decision-making process, regard has been had to financial implications and these are detailed where appropriate on the original Officer Decisions.

#### 5. Human Resources Considerations

As part of the urgent officer decision-making process, regard has been had to human resources implications and these are detailed where appropriate on the original Officer Decisions.

#### 6. Legal Considerations

The reviews of the Officer Decisions made under powers delegated to officers in accordance with the Constitution have ensured that timely consideration is given to the necessity and proportionality of the continuation of those actions outlined in the Officer Decision Records. The preparation of an Equalities Impact Assessment in relation to all the Officer Decisions made using urgent delegated powers and a specific EIA relating to the operation of Stage 4 easements has and will continue to inform decision making.

## 7. Equality implications

As part of the urgent officer decision making process, regard has been had to equality implications within the demand time scales applying. A consolidated Equality Impact Assessment is in development and was reported to the 4 June 2020 Cabinet meeting. Furthermore, Adult Social Care and Health have undertaken a separate Equality Impact Assessment in relation to the use of the Care Act easements in relation to the cessation on non-essential homecare homes.

## 8. Other Considerations

In preparing this report the relevance of the following factors has been considered: Social Value, Human Rights, equality of opportunity, health, environmental, transport, property, social value and crime and disorder considerations.

#### 9. Background Papers

- Officer Decision Records considered by Cabinet on 23 April 2020, 14 May 2020 and 4 June 2020 and published on the county council website.
- Decision making process during Covid Epidemic report to Cabinet 4 June 2020
- Equality Impact Analysis Urgent decisions in relation to council services, functions and assistance
- Equality Impact Analysis Care Act Easements

#### 10. Key Decision

As indicated in reports

# 11. Is it required that the Call-in period be waived in respect of the decisions being proposed within this report?

No

## 12. Officer's Recommendation

The Cabinet Member for Adult Social Care and Health is asked to:

- i. Note the review of decisions made under urgent delegated powers arising from the COVID-19 Pandemic; and
- ii. Agree that future review decisions be made on a fortnightly basis by the Cabinet Member for Adult Care.

#### Helen Jones Executive Director – Adult Social Care & Health County Hall Matlock

## Appendix 1: Copies of the Officer Decision Records with review notes

## DERBYSHIRE COUNTY COUNCIL

## OFFICER DECISION AND DECISION REVIEW RECORD

Officer: Helen Jones S		Service: Adult Social Care
Delegated Power Beir	ng Exerc	ised: Significant management decisions which
		roversial impact on the delivery of services or
achievement of agree	d targets	5
Residential Care		
Subject of Decision:	Adult S	ocial Care Residential Homes for Older
(i.e. services		, closure to visitors
affected)		,
Is this a review of a	Yes, th	is is a review of the decision taken on 20
decision? If so, what	March	2020
was the date of the		
original decision?		tuill he similieent is terms of its offerte on
Key decision? If so have Democratic		t will be significant in terms of its effects on
Services been		inities living or working in an area comprising more electoral divisions in the county area.
notified?		
Decision Taken (speci	ify	Decision taken on 20/3/20 to cease to allow
precise details, includi	•	visits from friends and family.
period over which the		
decision will be in place		Review process
when it will be (further	)	Decision is subject to a minimum of
reviewed):		fortnightly review by SMT and CMT in line
		with national guidance re vulnerable groups and social distancing from HM Government.
Reasons for the Decis	ion	Government advice earlier in the week that
(specify all reasons fo		over 70s would be required to self –isolate
the decisions including	-	within days. The expectation of further
where necessary refer	-	advice from government as to implications
to Council policy and		for care homes, but with none arriving.
anticipated impact of t	he	
decision)		The advice from the Director of Public Health
Where the decision is		and the written guidance updated on
subject to statutory guidance please state how this has		20.3.2020 and the interpretation provided by the DPH, from advice he had received from
been taken into		PHE that in the summary table the words
consideration.		"strongly advised" meant, that we should do
		it.
		In addition it was raised in ASC Bronze that
		staff working in homes were becoming

	anxious about the on-going visits from relatives.
Alternative Options Considered (if appropriate) and reasons for rejection of other options	We considered keeping the homes open to restricted visitors (friends and families only). This was the position we had moved to earlier in the week, but seemed insufficient in the light of the guidance and advice received.
	We considered further social distancing measures. These were to be a letter, to friends/ relatives advising them of the risks, asking them to consider their position and reminding them of hygiene and social distancing measures and the potential to visit outside of the home.
	This was in fact the position agreed at the 8.30 meeting on the 20.2.2020, however, we reverted subsequently after the advice from the DPH and formally changed the decision at a specially reconvened ASC Gold later in the day. Minutes of both meetings are available.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	A risk assessment was not undertaken as the decision was taken urgently in response to national guidance issued by the Government in relation to the COVID-19 Pandemic. Subsequently some adverse impacts have been identified and these have been mitigated against – e.g. by ensuring all DCC HOPs and CCC's have access to Skype technology so family members can keep in touch.
Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	Yes, this decision would have been subject to consultation as it would potentially adversely impact on family members, carers and friends of the individual in the home, as well as the person living in the care establishment. This decision had to balance the need to consult with the increased risk to vulnerable groups. Consultation did not take place due to national advice being issued from the Government regarding the COVID- 19 pandemic response which stated that vulnerable groups needed to undertake

	social distancing to protect their health and wellbeing. Therefore, an urgent decision needed to be taken.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	Staff in the homes are supporting residents on an ongoing basis. Skype arrangements have been put in place in all homes as part of mitigation to enable residents to have contact with friends, family and carers via a virtual meeting space.
Background/Reports/Informa tion considered and attached (including Legal, HR, Financial and other considerations as required))	https://www.gov.uk/government/publications/ covid-19-guidance-on-social-distancing-and- for-vulnerable-people/guidance-on-social- distancing-for-everyone-in-the-uk-and- protecting-older-people-and-vulnerable- adults
	The Principal Social Worker has been engaged and consulted with this decision. The Principal Social Worker is satisfied this decision has been informed by Government advice for residential care and supported living guidance which states:
	'How care homes can minimise the risks of transmission? Care home providers should stop all visits to residents from friends and family. Medical staff and delivery couriers can still visit, but you should leave a hand sanitiser by the entrance and ask them to wash their hands as soon as they enter the building.'
	The Principal Social Worker is satisfied that the decision maker has shown due regard for balancing the impact on Human Rights Act Article 8, Care Act 2014 Wellbeing Principle and the Department of Health and Social Care Ethical Framework when reaching this decision.
	All Adult Social Care homes have been issued with a laptop and staff are supporting remote contact with family and friends via technology including telephone, videos, email and Skype so that essential family contact and links are maintained. All

residents have person centred support plans and personal service plans that identify important others and contingency plans developed to ensure contact is promoted.
13. Financial Considerations
There are no additional costs associated with this decision.
14. Human Resources Considerations
https://www.gov.uk/government/publications/ covid-19-guidance-on-social-distancing-and- for-vulnerable-people/guidance-on-social- distancing-for-everyone-in-the-uk-and- protecting-older-people-and-vulnerable- adults
15. Legal Considerations
<b>Comments from legal 07/04</b> Decision is not time limited – would be beneficial to indicate a review date.
Response: This decision will be reviewed every two weeks by SMT as part of RODR process and this will be referenced in Cabinet Report as mitigation
Decision has HR implications (Article 8 – family life) report should detail how these rights have been balanced and how residents might be supported in having contact with friends and family, otherwise than direct contact.
Response: This is referenced via mitigations provided via Skype and it is acknowledged that this an issue, however it is felt important in the current climate that this has to be balanced against an individual's wellbeing and the risks to a person's health if visiting is permitted within a home increasing chances of transmission of the disease.

Consultation w Cabinet Memb note this is obli	er (s) – please	This took place with Cllr Wharmby by phone on 20 <sup>th</sup> March 2020. Consultation with Cllr Wharmby on Review 19/05/2020 Consultation with Cllr Wharmby on Review 27/05/2020
Decision:	To close all DCC residential homes with immediate effect on 20.3.2020 and to advise independent sector homes of our position and expectation.	
	still in place an national guida family membe being delivere place and has	<b>22/04/2020 -</b> Social distancing requirements nd therefore need to maintain position. The nce now states there is a requirement to allow rs to visit loved ones at the end of life which is d locally. Video calling arrangements are in been positively received. SS is to provide of life procedures across all establishments.
	continue with social distanci therefore it is it to protect vuln may have long puts them at n Feedback from operated resid decision as so the on-going w individuals livit amongst oper Nationally, it is place for care	<b>MT 06/05/2020</b> : It is considered necessary to visiting restrictions to DCC care homes as ng requirements are still in place and important DCC maintains this position in order reable people living within the homes who g term or underlying health conditions which nore risk of COVID-19. In staff working in Derbyshire County Council dential care homes informed the original ome individuals were becoming anxious about visits from relatives and the risk that posed to ng in the home. This remains a concern ational teams in relation to infection control. Is recommended that visiting restrictions are in homes due to concerns about the prevalence in these settings.
	to visit loves of delivered loca consistent app facilitate the in have ensured facilities to allo with people liv	ance has changed to enable family members ones at the end of life and this is being Ily. Direct Care staff are developing a broach to end of life visiting arrangements to nplementation of this national guidance. We that each DCC home has video calling ow family members to keep in regular contact ring in a DCC residential care establishment een received positively received.
		informed PVI Sector homes of this ongoing orm their decision making.

	<b>Review by SMT 21/05/2020:</b> It is considered necessary to continue with visiting restrictions to DCC care homes as social distancing requirements are still in place and therefore it is important DCC maintains this position in order to protect vulnerable people living within the homes who may have long term or underlying health conditions which puts them at more risk of COVID-19.	
Signature and Date:		
Simon Stevens	20/03/2020	

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## DERBYSHIRE COUNTY COUNCIL

## OFFICER DECISION AND DECISION REVIEW RECORD

Officer: Simon Stevens			Service: Adult Social Care
	Exercised	I: Signific	ant management decisions which
could have an adverse or controversial impact on the delivery of services or			
achievement of agreed targets			
Day Care - Temporary C			
Subject of Decision:	Service	ciosure –	Older Adults Day Care
(i.e. services affected)			
Is this a review of a	Yes, orio	ginal decis	sion was taken on 20/03/2020
decision? If so, what		,	
was the date of the			
original decision?			
Key decision? If so			inificant in terms of its effects on
have Democratic			g or working in an area
Services been notified?			more electoral divisions in the
Desision Takan (aposity	county a		of Older Adulta Day Captres with
Decision Taken (specify details, including the per			of Older Adults Day Centres with om 5pm on 20/03/2020
which the decision will be		enectin	5m 5pm 6n 20/03/2020
place and when it will be		Cessati	on of service delivery for over
reviewed):	(10111101)		D Day Services with effect from
,			20/03/2020
Reasons for the Decision	n		ment and PHE advice in relation
(specify all reasons for ta	aking the	to reduc	ing the risk of infection spread in
decisions including wher			to Covid-19 states that those
necessary reference to (		over 70	should self-isolate.
policy and anticipated im	pact of		
the decision)			rast majority of users of our older
Where the decision is su	•		lay centres are over 70 years old
statutory guidance pleas how this has been taken			possible to continue to operate ervices as people move to self-
consideration.	IIIO	isolatior	
			h there are small numbers of
		-	under 70 attending the centres
			also likely to fall into the
			y of having an underlying 'high
			alth condition that means they
		would b	e advised to socially distance.
			ort the government guidance for
		• •	ort the government guidance for s to self-isolate we need to close
<u> </u>			

	our day centres for older adults and
	avoid bringing groups of people together.
	Similarly we need to cease the attendance for those over 70 attending out LD day services so that we can follow government guidance and protect those individuals, other service users and staff from increased risk.
	<b>Review process</b> Decision is subject to a minimum of fortnightly review by SMT and CMT in line with national guidance re vulnerable groups and social distancing from HM Government.
Alternative Options Considered (if appropriate) and reasons for rejection of other options	All individuals will be assessed as to whether they require ongoing alternative support to enable them to manage without their day centre service and this will be provided. Monitoring of the wellbeing of individuals will also be undertaken during the closure period.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	Individual client based risk assessment have been undertaken in relation to this decision and concerns relating to long term planning, carer support, carer breakdown, provision of emergency respite if appropriate and alternative arrangements are being considered.
Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	Yes it would have been subject to consultation with service users. Consultation did not take place due to national advice being issued from the Government regarding the COVID-19 pandemic response which stated that vulnerable groups needed to undertake social distancing to protect their health and wellbeing. Therefore, an urgent decision needed to be taken.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	All clients that have been impacted by this decision are having their care and support plans reviewed to assess whether any additional support is required and consideration is being given

	to how this support may be achieved within current social distancing guidelines and additional guidance to individuals within vulnerable and shielded groups where appropriate.
Background/Reports/Information considered and attached (including Legal, HR, Financial and other considerations as	Staff will be temporarily redeployed to support other service areas responding to the Covid-19 pressures
required))	Legal feedback 07/04/2020 Decision is not time limited, if the issue persists in the longer term then report would be beneficial to highlight longer term strategy to manage the needs of the affected cohort.
	Response: Two week review process is now in place and captured on RODR pro forma
	ODR indicates that individual assessments are to be undertaken to ensure affected person receive the support necessary – update and assurance could be given in the report to confirm timescales and outcomes for these assessments
	Response: This will be detailed in Cabinet report and RODR document, but reviews have taken place and are being actively reviewed by P&P teams every two weeks. If appropriate following an initial RAG rated assessment social work teams are contacting some individuals on a daily basis to check there is no significant change in their circumstances that may require consideration and mitigation.
	Feedback from Principal Social Worker The Principal Social Worker has been engaged and consulted with this decision. The Principal Social Worker is satisfied that this decision has been

	made with due regard for the Department of Health and Social Care Ethical Framework. Whilst this decision was informed by the Government's guidance about social distancing, full consideration has been given to contingency discussions and planning for alternative support evidenced by the statements:
	'All individuals will be assessed as to whether they require ongoing alternative support to enable them to manage without their day centre service and this will be provided.'
	'Monitoring of the wellbeing of individuals will also be undertaken during the closure period.'
	Co-funding contributions will be suspended for clients whose only service is day care, but will continue for clients who access other community-based services.
	<b>Financial Considerations</b> It is estimated that the department will lose approximately £2,800 per week in co-funding contributions. This loss of income will be met from the Covid-19 Emergency Grant.
	Human Resources Considerations Staff will be temporarily redeployed to support other service areas responding to the Covid-19 pressures.
Consultation with relevant	Discussion with Cllr Jean Wharmby on
Cabinet Member (s) – please note this is obligatory.	19/03/2020 Consultation with Cllr Wharmby on Review 19/05/2020 Consultation with Cllr Wharmby on
Decision: Agreed Review agreed 08/04/2020	Review 27/05/2020 by CMT 07/04/2020 and SMT

requirement maintain clo Review by S keep the clo ongoing soo national Go normally att reviewed an minimum of support is re would have day centre. support to co increase as	<b>SMT 22/04/2020</b> - social distancing is are still in place therefore appropriate to sures for a further two weeks. SMT 06/05/2020: It is considered necessary to bure of day centre provision in place due to cial distancing requirements in line with vernment guidance. Clients who would end a day centre have had their care package id it is continuing to be reviewed on a a fortnightly basis to check that no additional equired as an alternative to the support which normally been received via attendance at a Derbyshire Carers Association is also offering arers who may have seen their caring duties a result of day centre provision being closed emergency plans are being offered.
to keep the ongoing soo national Go normally att reviewed an minimum of support is re would have day centre. support to c increase as and carers e	<b>SMT 21/05/2020:</b> It is considered necessary closure of day centre provision in place due to sal distancing requirements in line with vernment guidance. Clients who would end a day centre have had their care package in the continuing to be reviewed on a a fortnightly basis to check that no additional equired as an alternative to the support which normally been received via attendance at a Derbyshire Carers Association is also offering arers who may have seen their caring duties a result of day centre provision being closed emergency plans are being offered.
Signature and Date:	

Simon Stevens 20/03/2020

## DERBYSHIRE COUNTY COUNCIL

## OFFICER DECISION AND DECISION REVIEW RECORD

Officer: Simon Stevens Service: Adult Social Care		
Delegated Power Being Exercised: Significant management decisions which could have an adverse or controversial impact on the delivery of services or achievement of agreed targets		
Day Care - Temporary C	losure / c	essation of Service
Subject of Decision: (i.e. services affected)	Service of	closure – LD Day Services
Is this a review of a decision? If so, what was the date of the original decision?	Yes, original decision date was 23/03/2020. Review has been instigated due to proposal outlined in attached report to utilise two learning disability day service buildings to support clients with complex needs throughout COVID-19 and prevent the breakdown of current care packages or admission to hospital.	
	(near Cro sessiona As this is require a	access to Lea Green Outdoor Centre omford) for two days per week to allow al access to a small number of our clients. is an education establishment this may agreement from the Executive Director of 's Services.
	taxi prov	e Adult Care transport and or contracted ision to support people as appropriate to hese opportunities.
Key decision? If so have Democratic Services been notified?	Yes – it will be significant in terms of its effects on communities living or working in an area comprising two or more electoral divisions in the county area.	
Decision Taken (specify precise details, including the period over which the decision will be in place and when it will be (further)		Closure of building based Day Centres for people with a Learning Disability with effect from 5pm on 23/03/2020.
reviewed):		This will mean the closure of DCC run day centres for people with a day service and advice to PVI services that operate in large groups using a building base to close.

	Other PVI day services that operate in small groups outside and through one to one activity with personal assistance are not at this time being advised to close.
	<b>Review process</b> Decision is subject to a minimum of fortnightly review by SMT and CMT in line with national guidance re vulnerable groups and social distancing from HM Government. The decision has also been reviewed in light of operational recruitments to put mitigations in place to support people with more complex needs who are at risk of hospital admission or placement breakdown.
Reasons for the Decision (specify all reasons for taking the decisions including where necessary reference to Council policy and anticipated impact of the decision) Where the decision is subject to statutory guidance please state	We have already previously agreed, based on Government and PHE advice in relation to reducing the risk of infection spread in relation to Covid-19 states that those over 70 should self-isolate, to cease the service offer for that group.
how this has been taken into consideration.	We have also previously agreed to advise people under 70 attending the centres who fall into the category of having an underlying 'high risk' health condition that means they would be advised to socially distance. To cease attendance.
	Due to the nature of these building based services it is not possible to continue to deliver the service in a way that addresses the requirement for social distancing and so continued delivery increases the risk to service users and staff.
	As such, In order to adhere to the government guidance we need to close our day centres for people with a learning disability and avoid bringing groups of people together.

Alternative Options Considered (if appropriate) and reasons for rejection of other options	We have tried to continue to deliver the service using opportunities to do this in a way that enable social distancing but this has not proven sustainable.
	All individuals will be assessed as to whether they require ongoing alternative support to enable them to manage without their day centre service and this will be provided. Monitoring of the wellbeing of individuals will also be undertaken during the closure period.
	17/04: Options regarding the limited operation of two day centres to support people with complex needs has been considered and approved as appropriate risk mitigation to prevent placement breakdown and reduce the probability of hospital admission.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	Individual client based risk assessment have been undertaken in relation to this decision and concerns relating to long term planning, carer support, carer breakdown, provision of emergency respite if appropriate and alternative arrangements are being considered.
Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	Yes it would have been subject to consultation with service users. Consultation did not take place due to national advice being issued from the Government regarding the COVID-19 pandemic response which stated that vulnerable groups needed to undertake social distancing to protect their health and wellbeing. Therefore, an urgent decision needed to be taken.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	All clients that have been impacted by this decision are having their care and support plans reviewed to assess whether any additional support is required and consideration is being given to how this support may be achieved within current social distancing guidelines and additional guidance to

	individuals within vulnerable and
Paakaround/Donorto/Information	shielded groups where appropriate.
Background/Reports/Information	Feedback from Principal Social
considered and attached	Worker
(including Legal, HR, Financial	
and other considerations as	The Principal Social Worker has been
required))	engaged and consulted with this
	decision. The Principal Social Worker is
	satisfied that this decision has been
	made with due regard for the
	Department of Health and Social Care
	Ethical Framework. Whilst this decision
	was informed by the Government's
	guidance about social distancing, full
	consideration has been given to
	contingency discussions and planning for
	alternative support evidenced by the statements:
	statements.
	'All individuals will be assessed as to
	whether they require ongoing alternative
	support to enable them to manage
	without their day centre service and this
	will be provided.'
	'Monitoring of the wellbeing of individuals
	will also be undertaken during the
	closure period.'
	Co funding contributions will be
	Co-funding contributions will be
	suspended for clients whose only service
	is day care, but will continue for clients who access other community-based
	services.
	Financial Considerations
	It is estimated that the department will
	lose approximately £5,000 per week in
	client contributions. This loss of income
	will be met from the Covid-19 emergency
	grant.

	Human Resources Considerations
	Staff will be temporarily redeployed to support other service areas responding to the Covid-19 pressures. Legal Considerations
	The Council has powers in accordance with s1-6 of the Localism Act 2011 to do that which will be to the 'benefit of the authority, its area or persons resident or present in its area'. The proposed benefit of this action is to support the reduction in COVID-19 infections and reduce the transmission of the virus. Due to the timescales involved it has not been possible to consult affected persons but arrangements have been put in place to assess those current service users who will be impacted by the decision and to ensure that they are provided with alternate support should this be required. An evaluation of the risks of this course of action and the mitigation of these risks and an EIA are being undertaken.
	The decision is a proportionate and reasonable response to COVID-19 risks. The suspension of this service type, in isolation, where other services will continue on a business as usual basis is possible applying flexibilities under the Care Act 2014. It represents a Stage 2 decision as set out within the Care Act easements: Guidance for local authorities
	Background paper to inform 17/04 review decision: SMT report – use of LD Day Services
Consultation with relevant Cabinet Member (s) – please note this is obligatory.	Discussion between Helen Jones and Cllr Jean Wharmby on 23/03/2020 Consultation with Cllr Wharmby on Review 19/05/2020

	Consultation with Cllr Wharmby on
	Review 27/05/2020
Decision:	Agreed by CMT 23/03/2020
	Review agreed by CMT 07/04/2020 and SMT 08/04/2020
	<b>Review by SMT 17/04/2020</b> in light of report embedded as a background paper re proposal to utilise two learning disability day service buildings during COVID-19 outbreak.
	<b>Review by SMT 22/04/2020</b> alongside OP Day Centre closure - social distancing requirements are still in place therefore appropriate to maintain closures for a further two weeks.
	Review by SMT 06/05/2020 It is considered necessary to keep the closure of day centre provision in place due to ongoing social distancing requirements in line with national Government guidance. Clients who would normally attend a day centre have had their care package reviewed and it is continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support is required as an alternative to the support which would have normally been received via attendance at a day centre.
	Derbyshire Carers Association is also offering support to carers who may have seen their caring duties increase as a result of day centre provision being closed and carers emergency plans are being offered.
	For clients with a complex learning disability, where appropriate, individual arrangements have been put in place to ensure there is an alternative day service provision and this is in place to prevent placement breakdown or avoid hospital admission.
	<b>Review by SMT 21/05/2020:</b> It is considered necessary to keep the closure of day centre provision in place due to ongoing social distancing requirements in line with national Government guidance. Clients who would normally attend a day centre have had their care package reviewed and it is continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support is required as an alternative to the support which would have normally been received via attendance at a day centre. Derbyshire Carers Association is also offering

	support to carers who may have seen their caring duties increase as a result of day centre provision being closed and carers emergency plans are being offered.
Signature and Date: Simon Stevens 23/03/2020	

Officer: Simon Stevens			Service: Adult Social Care	
	Exercised	: Signific	ant management decisions which	
could have an adverse or controversial impact on the delivery of services o				
achievement of agreed t	argets			
Day Care - Temporary C				
Subject of Decision:	Service	closure –	planned respite.	
(i.e. services affected)				
Is this a review of a	Yes, review of decision made 23/03/2020			
decision? If so, what	,			
was the date of the				
original decision?				
Key decision? If so	Yes – it v	will be sig	nificant in terms of its effects on	
have Democratic			g or working in an area	
Services been notified?	comprising two or more electoral divisions in the		more electoral divisions in the	
	county a			
Decision Taken (specify			on of planned respite breaks	
details, including the per			for Older Adults and people with	
which the decision will be			ing Disability with effect from	
place and when it will be	(lunner)	23/03/2	J20	
reviewed):		Poviow	process	
			n is subject to a minimum of	
			ly review by SMT and CMT in	
		-	national guidance re vulnerable	
			and social distancing from HM	
		Governi	•	
Reasons for the Decision	า	Govern	ment and PHE advice in relation	
(specify all reasons for taking the		to reduc	ing the risk of infection spread in	
decisions including wher	e	relation	to Covid-19 states that those	
necessary reference to (	Council	over 70	should self-isolate.	
policy and anticipated im	pact of			
the decision)			d to reduce the risk of cross	
Where the decision is su	•		n for both those using respite and	
statutory guidance pleas		-	m residents and so reducing the	
how this has been taken	into		of individuals coming in and out	
consideration.		of the se	ervice is essential.	
		As the v	ast majority of users of our older	
			spite care services are over 70	
			d it is not possible to continue to	
		•		

	operate those services safely as people move to self-isolation.
	Similarly significant numbers of the people using our LD respite services are likely to fall into the category of having an underlying 'high risk' health condition that means they would be advised to socially distance. And so in order to protect them and other residents we need to cease the non- urgent respite delivery.
Alternative Options Considered (if appropriate) and reasons for rejection of other options	All individuals will be monitored and reviewed during the cessation period to ensure that the withdrawal of planned respite doesn't lead to significant risks to their health and wellbeing.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	Individual client based risk assessment have been undertaken in relation to this decision and concerns relating to long term planning, carer support, carer breakdown, provision of emergency respite if appropriate and alternative arrangements are being considered.
Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	Yes it would have been subject to consultation with service users. Consultation did not take place due to national advice being issued from the Government regarding the COVID-19 pandemic response which stated that vulnerable groups needed to undertake social distancing to protect their health and wellbeing. Therefore, an urgent decision needed to be taken.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	All clients that have been impacted by this decision are having their care and support plans reviewed to assess whether any additional support is required and consideration is being given to how this support may be achieved within current social distancing guidelines and additional guidance to individuals within vulnerable and shielded groups where appropriate. Emergency respite is still available where appropriate.

Background/Reports/Information considered and attached (including Legal, HR, Financial and other considerations as required))	Any excess staffing capacity generated as a result of this cessation of service will be temporarily redeployed to support other service areas responding to the Covid-19 pressures
	Legal advice 07/04/2020 (JL): Decision is not time limited, if the problem persists in the longer then report would be beneficial to highlight longer term strategy to manage the needs of the affected cohort.
	Response: Two week review process is now in place and captured on RODR pro forma
	ODR indicates that individual assessments are to be undertaken to ensure affected person receive the support necessary – update and assurance could be given in the report to confirm timescales and outcomes for these assessments
	Response: This will be detailed in Cabinet report and RODR document, but reviews have taken place and are being actively reviewed by P&P teams every two weeks.
	Feedback from ASCH Finance (GW) 07/04/2020 There are no additional financial considerations in relation to this proposal.
	Feedback from Principal Social Worker: The Principal Social Worker has been engaged and consulted with this decision. The Principal Social Worker is satisfied that this decision has been made with due regard for the Department of Health and Social Care Ethical Framework. Whilst this decision

		was informed by the government's guidance about social distancing and COVID-19 guidance in relation to residential care and supported living full consideration has been given to contingency discussions and planning for alternative support evidenced by the following statement:	
		'All individuals will be monitored and reviewed during the cessation period to ensure that the withdrawal of planned respite doesn't lead to significant risks to their health and wellbeing'.	
		Guidance has been issued to frontline assessment staff to inform their person centred conversations when exploring equivalent levels of support. Associated RAG rating records have been regularly completed and updated.	
Consultation with relevant Cabinet Member (s) – please note this is obligatory.		Discussion between Helen Jones and Cllr Jean Wharmby on 22/03/2020 Consultation with Cllr Wharmby on Review 19/05/2020 Consultation with Cllr Wharmby on Review 27/05/2020	
Decision:	Agreed		
	Review agreed by CMT 07/04/2020 and SMT 08/04/2020		
	<b>Review by SMT 22/04/2020</b> - Respite needs to continue to cease non urgent activity to support social distancing and the respite beds are also being utilised to support hospital discharge. Urgent respite provision is still in place as a mitigation.		
	<b>Review by SMT 06/05/2020:</b> It is considered necessary to continue to cease planned respite activity due to ongoing social distancing requirements in line with national Government guidance. Clear evidence that spread within care homes is due to bringing people in from the community.		

We continue to need to reduce the risk of cross infection for both those using respite and long-term residents and so reducing the number of individuals coming in and out of the service is essential.
Clients who would normally attend a planned respite break have had their care package reviewed and it is continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support is required as an alternative to the support which would have normally been received via respite. Derbyshire Carers Association is also offering support to carers who may have seen their caring duties increase as a result of day centre provision being closed and carers emergency plans are being offered.
In addition, the respite beds are being utilised to support hospital discharge and increase bedded capacity in residential care.
Urgent respite provision is still in place as a mitigation for clients where this is considered appropriate.
<b>Review by SMT 21/05/2020:</b> It is considered necessary to continue to cease planned respite activity due to ongoing social distancing requirements in line with national Government guidance. Clear evidence that spread within care homes is due to bringing people in from the community.
We continue to need to reduce the risk of cross infection for both those using respite and long-term residents and so reducing the number of individuals coming in and out of the service is essential.
Clients who would normally attend a planned respite break have had their care package reviewed and it is continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support is required as an alternative to the support which would have normally been received via respite. Derbyshire Carers Association is also offering support to carers who may have seen their caring duties increase as a result of day centre provision being closed and carers emergency plans are being offered.
In addition, the respite beds are being utilised to support hospital discharge and increase bedded capacity in residential care.

	Urgent respite provision is still in place as a mitigation for clients where this is considered appropriate
Signature and Da	ate:
Simon Stevens 2	2/03/2020

Officer: Simon Stevens			Service:	Adult Social Care	
Delegated Power Being Exercised: Significant management decisions white					
could have an adverse or controversial impact on the delivery of services or					
achievement of agreed ta	argets				
Homecare Service Susp	ension / C	essation			
Subject of Decision:			sation in non-essential		
(i.e. services affected)	homecare service delivery across the internal and external homecare market.				
Is this a review of a			ew of a de	ecision taken on 30	
decision? If so, what	March 20	020			
was the date of the					
original decision? Key decision? If so	Yes – it v	will be sic	nificant ir	terms of its effects on	
have Democratic	Yes – it will be significant in terms of its effects on communities living or working in an area				
Services been notified?	comprising two or more electoral divisions in the				
	county a				
Decision Taken (specify precise			-	ease delivery of non-	
details, including the per				are services to adults	
which the decision will be in			ate effect.	care market with	
place and when it will be (further) reviewed):				s cessation across the	
				ed in line with increased	
		-	-	narket to support	
		•	•	e and free up acute bed	
		capacity	/ for Covid	d-19 patients.	
		Review	process		
		This dee	cision has	been implemented	
				and is subject to daily	
				oring by SMT as part its	
				to market	
		-		ily update reports are in rack progress. There is	
		•		place for staffing	
		-		review and risk	
				enables issues to be	
				managers if required to	
				sion making and	
		ongoing	, review.		

Reasons for the Decision (specify all reasons for taking the decisions including where necessary reference to Council policy and anticipated impact of the decision) Where the decision is subject to statutory guidance please state how this has been taken into consideration.	As part of preparing for the significant increase in essential home care capacity demand as a result of the Coronavirus pandemic we have worked with homecare providers both internal and within the external market to undertake a risk analysis of all recipients of homecare services to identify three categories:
	Red: Requires all current care to remain
	safe Amber: Requires some current care to
	remain safe
	Green: Does not require current care to remain safe
	We have reviewed those RAG ratings through our P&P (social work) teams and also identified risk management arrangements for each individual to clarify how long it is felt they can manage without support and to ensure appropriate mechanisms would be in place for reviewing welfare and wellbeing should their service temporarily cease.
	We were advised over the weekend that Health colleagues were required to discharge all patients in the London Road Community Hospital (LRCH) Derby and two other community hospital wards in Ilkeston and Whitworth (Darley Dale) in order to free up that capacity to turn into acute beds to accommodate the expected significant rise in demand next week and over the coming weeks.
	Our homecare services are operating, internally, at around 70% staffing capacity and so there is no room to increase our offer to accommodate the system requirements.

	As a result we need to reduce our delivery of non-essential ('Green') provision to free up capacity to support the urgent hospital discharge work. Action will be taken to ensure service users whose non-essential support is ceased are monitored and supported to stay safe, to ensure that providers are enabled to remain viable through the use of current temporary suspension payment arrangements and that alternative work is provided to them from the hospital discharge cohort as swiftly as possible to minimise costs.
	Cost implications will be monitored and reported on via our finance department into the corporate finance team.
Alternative Options Considered (if appropriate) and reasons for rejection of other options	Work continues to be done through the workforce group to redeploy staff that are displaced through the closure of day services and day centres, though realigning tasks for those who are required, on government guidance, to work from home so that we can free up other staff to work in front line care, to encourage retired staff to come back on a temporary basis, to recruit new staff swiftly and as a last resort to seek assistance from the military but in the very short term we require the immediate use of suitably trained and skilled staff to address this issue.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	Yes risk assessments are being undertaken at an individual client level and this information is being shared between social care staff and clients receiving homecare services. The risk assessment will consider how the reduced or removed homecare cover can be mitigated via other community based support, utilising networks of support, receiving support from other family members and people living in the same household.

Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	Yes, the subject would have normally been subject to consultation with service users. It has not been practicable to undertake consultation over a long period of time as this decision needs to be taken to support the sustainability of the care market in light of increased demand for services due to COVID-19 and hospital discharge arrangements. Engagement has taken place with clients on a one to one basis to discuss the proposed decision and view of individuals can be taken into account before a final decision is made.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	An Equalities Impact Assessment has been produced to support this officer decision.
Background/Reports/Information considered and attached (including Legal, HR, Financial and other considerations as required))	Feedback from Principal Social Worker The Principal Social Worker has been engaged and consulted with this decision. The Principal Social Worker is satisfied this decision is informed by guidance to prepare for the significant increase in essential home care capacity demand as a result of the Coronavirus pandemic. Particular regard has been given to Section 5.1 of the <u>COVID-19</u> <u>Hospital Discharge Service</u> <u>Requirements</u> which allows for a proportionate approach to Care Act duties. Work has been undertaken with both internal and external market homecare providers to undertake a risk analysis of all recipients of homecare services to identify three categories: • Red: Requires all current care to remain safe • Amber: Requires some current care to remain safe

<ul> <li>Green: Does not require current care to remain safe</li> </ul>
These RAG ratings have been agreed and reviewed through social work teams who have identified individual, person centre risk management arrangements for each person with appropriate mechanisms would be in place for reviewing welfare and wellbeing.
<b>Financial Considerations</b> Cost implications will be monitored and reported on via our finance department into the corporate finance team.
Current financial arrangements for the temporary suspension of services will be used to support external providers to manage the gap between current work ceasing and new work commencing. We will track and report the cost implications to corporate finance via our departmental finance team.
The department will lose some co- funding contributions, but this cannot be quantified until we know the number of clients affected. Any loss of income will be met from the Covid-19 emergency grant.
Human Resources Considerations Work continues to be done through the workforce group to redeploy staff that are displaced through the closure of day services and day centres, though realigning tasks for those who are required, on government guidance, to work from home so that we can free up other staff to work in front line care, to encourage retired staff to come back on a temporary basis, to recruit new staff swiftly and as a last resort to seek assistance from the military but in the very short term we require the immediate

use of suitably trained and skilled staff to	
address this issue.	

#### Legal considerations

The Care Act easements: Guidance for Local Authorities ('The Guidance') confirms that a decision to begin exercising the Care Act easements should only begin when (inter alia) demands on social care [has] increased to an extent that it is no longer reasonably practicable for it to comply with its Care Act duties and where to continue to do so is likely to result in urgent or acute needs not being met, potentially risking life. Any change resulting from such a decision should be proportionate to the circumstances. Decisions taken have been informed by discussions with local partners, in particular senior NHS Leadership. Key Stages, as provided for in the Guidance may be enacted together or separately subject to the Guidance requirements. The proposed changes are permissible under the Care Act Easements and reflect proportionate assessment and planning.

A revised assessment process is in place in accordance with Stage 3 and Annex B of the Guidance. This process, provides that all those affected have been consulted. Decision making has been informed by each individual's personal circumstances as well as considering what local and personal resources are available for them to utilise whilst the service is suspended. The planned prioritisation is reflective of the requirements of Stage 4 and Annex C of the Guidance.

All decision making is compliant with the DHSC Ethical Framework and ensures person-centred decision making;

		enabling those with the highest needs are prioritised during the pandemic. An Equalities Impact Assessment is being undertaken in relation to the proposed action and this will assist in informing the reviews of the suspension. The Council has powers in accordance with S1-6 of the Localism Act 2011 to do that which will be to the 'benefit of the authority, its area or persons resident or present in its area.' The proposed benefit of this action is to ensure that resources are most effectively deployed at this point and that hospital discharges can be effectively managed to support the provision of medical assistance for those directly affected by COVID-19. Due to the timescales involved it has not been possible to consult widely but direct consultation with effected service users is being undertaken and the suspension is for a time limited period.
Consultation with relevant Cabinet Member (s) – please note this is obligatory.		Taken to CMT for discussion 30/03/2020 Discussed with Cllr Wharmby and Helen Jones – 30/03/20 Consultation with Cllr Wharmby on Review 19/05/2020 Consultation with Cllr Wharmby on Review 27/05/2020
Decision:	Agreed <b>Review at SMT 22/04/2020</b> - Temporary cessation of homecare needs to continue because capacity is challenging in longer term to June. <b>Review at SMT 06/05/2020</b> - This is a preliminary discussion re reviews and that further information is being sought to inform the review process. The suspension of 'non-essential' homecare services across the county continues to be required due to increased demand on the domiciliary care market and also to support hospital discharge which will free-up acute bed capacity for COVID-19 patients. Health colleagues have undertaken planning and capacity modelling regarding the acute and community	

hospital bed capacity that is required and identified what capacity needs to be released within the system to provide additional acute beds to accommodate the expected significant rise in demand over the coming weeks. This is still considered to be necessary from an operational perspective.

The suspension of 'non-essential' homecare calls will allow vital capacity to be released to effectively respond to the significant increase in demand for 'essential' home care capacity as a result of the COVID-19 pandemic.

Since taking the original decision we have written to all clients who receive non-essential homecare advising them of our approach. Action will be taken to ensure service users whose non-essential support is ceased are monitored and supported to stay safe, to ensure that providers are enabled to remain viable through the use of current temporary suspension payment arrangements and that alternative work is provided to them from the hospital discharge cohort as swiftly as possible to minimise costs.

In line with the Care Act Easement Guidance we have informed the Department of Health and Social Care and this has been acknowledged. We have also informed our partners at Derby and Derbyshire Clinical Commissioning Group.

Following detailed discussion and consideration of available evidence it was agreed by SMT ASCH Gold to continue to continue to deliver work with clients to pause non-essential homecare activity due to original reasons cited in the decision notice above. SMT ASCH Gold are utilising modelling and this indicates that we haven't released the homecare shortfall figure and there is concern that peak still to happen in social care and therefore unclear whether we have service capacity to support demand. Further modelling taking place to look for buffers within direct care where the pausing activity may be able to stop as there is enough capacity. From 06/05 it was agreed that this decision would be reviewed weekly by ASCH Gold.

**Review by SMT at 14/05/2020:** DS has reviewed process and this has been quality assured and one or two

issues have been followed up and are being addressed to
ensure compliance with process/ decision making.

Review of data on slide 3 of operational update from 13/05/2020 to look at the total hours released. Original modelling stated we needed to release 700 hours and latest data suggests 799 hours have been 'released' ready to be utilised and 229 hours have been put into scheduling and 'actually' operationally released.

Area	Accepted	Rejected
Bolsover	17	1
NE Derbyshire	27	4
South Derbyshire	12	3
Chesterfield	19	6
High Peak and Derbyshire Dales	8	7
Amber Valley and Erewash	15	16

Based on understanding of total hours released to date SMT agreed to pausing further release of non-essential hours in Bolsover, North East Derbyshire, South Derbyshire and Chesterfield. Agreement that ASCH need to undertake a piece of work of plan how to restart care and support to people in those areas which may include an assessment to see if care needs have changed and/ or a reablement package. Further review to take place on 21/05/2020.

**Review by SMT 21/05/2020:** Based on understanding of total hours released to date SMT agreed on 18/05/2020 to pausing further release of non-essential hours in Bolsover, North East Derbyshire, South Derbyshire and Chesterfield. Since then the following activity has taken place to plan for this care, where appropriate to be put back in place. It was agreed by SMT on 1/05/2020 that in line with the recommendation noted above that further release of non essential homecare hours will be paused in the localities detailed above, but non-essential hours will

	not be reinstated between now and 6 June until now the outcome of testing in the care home sector is known. A potential mitigation for increased care home staffing absence as a result of testing is to use homecare staffing that has been released from the non-essential homecare packages. An assessment is taking place to look at how many hours can potentially utilised via this mechanism.	
	<b>Review at SMT 28/05/2020:</b> Releasing further non- essential homecare hours is suspended in areas identified in notes above. Planning is continuing to take place in relation to return services from 6 June, but confirmation of outcome of residential care home testing is required. We are aware of some delays with the testing programme so this date needs to be kept under review. There is a lack of sufficient information to date regarding testing results and impact that this may have on staffing across the sector. To note Information regarding the easement has been shared on DCC website, briefing for MPs, briefing for elected members. Letters to clients.	
Signature and Date: Simon Stevens 30/03/2020		

Officer: Simon Stevens		Service:	Adult Social Care	
Delegated Power Being Exercised: Significant management decisions which could have an adverse or controversial impact on the delivery of services or achievement of agreed targets Risk Management in relation to Residential Care				
Subject of Decision: (i.e. services affected)		n works i		specific fire risk idential Care Homes for
		is a revie	ew of deci	ision taken on
Key decision? If so have Democratic Services been notified?	commun	ities living	g or worki	n terms of its effects on ng in an area ctoral divisions in the
Decision Taken (specify details, including the per which the decision will be place and when it will b (further) reviewed):	mainten mitigatic Homes deliver o mitigatic resident <b>Review</b> Decisior fortnight line with	ance and on works i for Older on previou on and en- s and stat process n is subject ly review national and social	dertake essential specific fire risk n our Residential Care People in order to isly identified risk sure the safety of ff. t to a minimum of by SMT and CMT in guidance re vulnerable I distancing from HM	
Reasons for the Decision (specify all reasons for ta decisions including when necessary reference to 0 policy and anticipated im the decision) Where the decision is su statutory guidance pleas	the requisit the requisit the requisit to the	irements here poss with other istancing i sly identifi b be comp	havirus outbreak and for people to work from sible and manage r individuals through it is necessary for ed fire risk mitigation pleted so that residents ported to operate in a	

how this has been taken into consideration.	Property colleagues had identified that all non-essential works should cease to protect their staff from the risk of infection and had suggested that the remaining fire risk mitigation works could be suspended.
	Further detailed discussions have taken place between Directors from both departments to weigh up the risks to residents and ASC staff associated with not completing the works against the risks to Property staff from undertaking them and it has now been agreed that those fire risk mitigation works and any other essential maintenance will continue to be completed.
Alternative Options Considered (if appropriate) and reasons for rejection of other options	Property and ASC managers and staff will complete individual risk assessments for each establishment / area of work and seek to ensure that infection control measures and social distancing requirements are maintained whilst the operatives are on site, including ensuring that the work area is closed to access for residents and staff whilst the tradespeople are on the premises.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	Ongoing risk assessments have taken place to inform the wider mitigation works programme by Property Services and colleagues in health and safety.
Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	No, this would not have been subject to consultation with service users and the public as it relates to maintenance of residential care homes. It is separate to the decision which has been subject to consultation regarding the long-term strategy for Direct Care Homes for Older People.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	Not applicable as decision relates to maintenance work.

Background/Reports/Information	Property fire risk mitigation reports and
considered and attached	work progress documents.
(including Legal, HR, Financial and other considerations as required))	Feedback from Principal Social Worker
	The Principal Social Worker has been engaged and consulted with this decision. The Principal Social Worker is satisfied that this decision has been made with due regard for the Department of Health and Social Care Ethical Framework when reaching decisions which take due account of existing legislation and guidance alongside flexible approaches to ensure safety standards are maintained as evidence in the following statement: 'Property and Adult Social Care managers and staff will complete individual risk assessments for each establishment / area of work and seek to ensure that infection control measures and social distancing requirements are maintained whilst the operatives are on site, including ensuring that the work area is closed to access for residents and staff whilst the tradespeople are on the premises.'
	Financial Considerations
	There are no additional costs associated with this decision.
	Legal Considerations
	The proposed work and the risks inherent in either undertaking or discontinuing this has been carefully evaluated. The decision to continue the work is a proportionate response to this evaluation. In the event of new guidance being received regarding the presence of operatives within residential settings the decision should be promptly revisited.

Consultation with relevant Cabinet Member (s) – please note this is obligatory.		Taken to CMT for discussion w/c 30/03/2020 Discussion with Cllr Wharmby 30/03/2020 Consultation with Cllr Wharmby on Review 19/05/2020 Consultation with Cllr Wharmby on Review 27/05/2020	
Decision:	Agreed		
	Review agreed	by CMT 08/04/2020 and SMT 07/04/2020	
	continue and an ensure social di	<b>22/04/2020:</b> This essential work needs to appropriate risk assessment is in place to stancing. SS to address query from check the staffing levels in homes in an	
	<b>Review by SMT 06/05/2020:</b> It is considered essential that this fire risk mitigation work continues and appropriate risk assessment are in place to ensure social distancing requirements are fulfilled.		
	Property and Adult Social Care and Health managers and staff are undertaking individual risk assessments for each establishment / area of work and seek to ensure that infection control measures and social distancing requirements are maintained whilst the operatives are on site, including ensuring that the work area is closed to access for residents and staff whilst the tradespeople are on the premises. The status of the work is to be checked prior to next review to see if this ODR can be closed as the work is completed.		
Signature and D	outstanding fire Manor and work being isolated in completed acros working fire alar of the work. With considered esse continues and a	<b>T 21/05/2020:</b> Work is continuing with alarm work at East Clune and Gernon thas paused due to clients with COVID-19 their bedrooms. Work needs to be so the whole site to ensure that there is a im in place so this is delaying completion thethese key tasks outstanding it is ential that this fire risk mitigation work oppropriate risk assessment are in place to stancing requirements are fulfilled	

Officer: Helen Jones			Service: Adult Social Care and Health all care packages
Delegated Power Being	g Exe	rcised: Ei	
-		•	client contribution guidance to meet rvice due to Covid-19
Is this a review of a decision? If so, what was the date of the original decision?	on? If so, what on 8 April e date of the		review of a decision approved by CMT
Key decision? If so Yes, have Democratic Services been notified?			
Decision Taken (specify precise details, including the period over which the decision will be in place and when it will be (further) reviewed):		be as ou This dec review to arranger service a with nati distancir	ent charging for specific scenarios will attlined in the attached appendix. ession will be subject to a fortnightly o make sure that the change ments appropriately reflect operational arrangements which are in place in line onal guidance regarding social ng and supporting vulnerable people
Reasons for the Decision (specify all reasons for taking the decisions including where necessary reference to Council policy and anticipated impact of the decision) Where the decision is subject to statutory guidance please state how this has been taken into consideration.		A numbe and som accessir circumst which ch different	but the COVID-19 pandemic. er of services have now been closed be clients are prevented from ing other services. In these ances, guidance is required to outline harging regime applies in these scenarios.
Alternative Options Considered (if appropriate) and reasons for rejection of other options		continue technica funding	alternative option would have been to to charge clients, which we could lly have done under our current co- scheme. But as the clients are no eceiving a service, it was thought that

	they would consider this to be unfair and would give rise to numerous complaints.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	No risk assessment was carried out with regards to the ceasing of charging. But risk assessments were carried out for all clients to ensure that they would be safe when their services were removed.
Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	No. We would not expect to go to consultation when removing a charge, only when introducing or changing a charging regime.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	No.
Background/Reports/Infor mation considered and attached (including Legal, HR, Financial and other considerations as	There will be a reduction in income, but this is not expected to be significant, as the number of clients who cease to receive any services is a small proportion of the total client base.
required))	Principal Social Worker Comments:
	https://www.gov.uk/government/publications/co ronavirus-covid-19-changes-to-the-care-act- 2014/care-act-easements-guidance-for-local- authorities#annex-b-guidance-on-streamlining- assessments-and-reviews
	Local Authorities should always ensure there is sufficient information and advice available in suitable formats to help people understand any financial contributions they are asked to make, including signposting to sources of independent financial information and advice.
	Legal approved – 07/04 No comments on ODR received from HR and Corporate Finance
Consultation with relevant Cabinet Member (s) –	Consultation with Cllr Wharmby on Review 19/05/2020

please note this is		Consultation with Cllr Wharmby on Review	
obligatory.		27/05/2020	
Decision:	08/04/20		
	continua	<b>20 – SMT Review</b> – no changes and tion of arrangements approved for a further two GW to provide assurance.	
	continua weeks as support r	<b>20 – SMT Review</b> - No changes and tion of arrangements approved for a further two s position remains the same. Note that to market we are not charging client but we are still he provider.	
	continua weeks as support r	<b>Review by SMT 21/05/2020:</b> No changes and ontinuation of arrangements approved for a further two veeks as position remains the same. Note that to upport market we are not charging client but we are still aying the provider	
Signature and Date: Julie Vollor			

		Comises Ashelt Consist Come and
Officer: Helen Jones		Service: Adult Social Care and Health
Delegated Power Being	Exercised	: Emergency Powers
		o sufficient equipment to support
(i.e. services affected)	discharg	e of people with reablement or
	rehabilita	ation needs at home
Is this a review of a	Yes, the	original decision was approved by CMT
decision? If so, what	on 08/04	/2020
was the date of the		
original decision?		
Key decision? If so	No	
have Democratic		
Services been notified?		
Decision Taken (specify	•	
details, including the per		To suspend current senior clinician
which the decision will be		approval process and equipment
place and when it will b	е	prescription matrices to support the
(further) reviewed):		objectives of:
		sufficiency of supply
		quickly (same day where needed)
		and easily facilitated seven days a
		week
		<ul> <li>reduce the need for two carers</li> </ul>
		Derbyshire Clinical Commissioning
		Group as joint commissioners of this
		service will also be asked to make a
		decision to support this action.
Reasons for the Decision		On 19 <sup>th</sup> March Government issued
(specify all reasons for ta	aking the	'COVID-19 Hospital Discharge Service
decisions including wher	е	Requirements'.
necessary reference to C	Council	This document sets out the Hospital
policy and anticipated im	pact of	Discharge Service Requirements for all
the decision)		NHS trusts, community interest
Where the decision is subject to		companies and private care providers of
statutory guidance please state		acute, community beds and community
how this has been taken into		health services and social care staff in
consideration.		England, who must adhere to this from
		Thursday 19th March 2020. It also sets
		out requirements around discharge for
		health and social care commissioners

	(including Clinical Commissioning Groups and local authorities).
	Based on these criteria, acute and community hospitals must discharge all patients as soon as they are clinically safe to do so. Transfer from the ward should happen within one hour of that decision being made to a designated discharge area. Discharge from hospital should happen as soon after that as possible, normally within 2 hours.
	Implementing these Service Requirements is expected to free up to at least 15,000 beds by Friday 27th March, with discharge flows maintained after that
	Section 8.4 Equipment and Assistive Technology, of these Requirements states the local commissioner for NHS and Social Care Equipment must ensure: "Simple approval process for more complex patients requiring hospital beds, pressure relieving equipment and hoists. This should be through discussion and verbal approval to order. Current senior clinician approval process and equipment prescription matrices will be stood down. "
	A simple approval process for more complex patients requiring hospital beds, pressure relieving equipment and hoists is still in development.
Alternative Options Considered (if appropriate) and reasons for rejection of other options	Amend authorisation for other prescribers who work for the other authorities with whom we have the cross-border agreement to allow for next and same day delivery without authorisation, which is likely to be the biggest help. This has been done for Sheffield and could be done for Nottinghamshire and Leicestershire.

	Increase the limits in prescriber item/basket totals on TCES, which would speed up most orders, but flag excessive ones, which indicate a higher level of complexity
	Continue with current authorisation arrangements and equipment matrices until there is evidence that the above objectives are no longer being met. This is not in line with Government Requirements.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	It is worth noting that there is an inherent risk that by removing authorisation levels and professional checks that more expensive and/or technically incorrect equipment might be assigned to a client to facilitate discharge. As noted the costs of allocated equipment might also be high due to limited knowledge of clinicians who are unfamiliar of lower cost suitable equipment.
	The Council and CCG have ensured that the Community Equipment Service has clinical professional available 7 days a week to provide guidance and support to prescribers who are unfamiliar with the ordering system.
	We have also introduced a staged relaxation of the authorisation levels which can be flexed up and down depending on the demands from the hospital discharge teams. The normal cost sharing with CCG for equipment will need to be scrutinised to ensure Adult Care and Health do not contribute for clients being discharged under these amended arrangements. Finally, there is a risk that DCHS and the acute hospitals will want to maintain this arrangement once this challenging period settles down. Neither of these organisations have any budgetary

Would the decision have been the su consultation with and the public. If this is not practic	ibject of service users so, explain why	responsibility for the ICES contract. It is therefore strongly recommended that authorisation levels are reinstated as soon as the pressure on the acute hospitals is released. No this change will not reduce availability of service provision so there is no need to consult with clients of this service	
steps that have c	or will be taken		
to communicate Has any adverse groups with prote characteristics be and if so, how wi mitigated?	impact on ected een identified	All eligible clients will continue to receive access to this service	
Background/Reports/Information considered and attached (including Legal, HR, Financial and other considerations as required))		Legal have reviewed the decision and following further discussion it has been agreed that the changes to the authorisation levels can be managed within the existing contract management approaches and this does not require a Cabinet Report or formal contract variation.	
Consultation with relevant Cabinet Member (s) – please note this is obligatory.		Consultation with Cllr Wharmby on Review 19/05/2020 Consultation with Cllr Wharmby on Review 27/05/2020	
Decision:	Decision 08/04/2020		
	<b>Review by SMT 22/04/2020</b> and the following was noted: Risks are being managed at the moment. At next fortnightly review seek assurances from lead officers about how process is working and if there are concerns about removal of authorisations in terms of budget implications.		
	<b>Review by SMT 06/05/2020:</b> 06/05/2020: Risks are being managed at the moment. Assurances have been provided by the contract manager in the attached briefing note about how process is working and there are no particular concerns about the removal of the authorisation levels at present.		

Review by SMT 21/05/2020: Risks are being managed at	
the moment. Assurances have been provided by the	
contract manager in the attached briefing note about how	
process is working and there are no particular concerns	
about the removal of the authorisation levels at present.	
CS will consider whether this arrangement continues to be	
in place in conjunction with health partners and update for	
the next review.	
Signature and Date: 08/04/2020 – Helen Jones	

Officer: Helen Jones		Service: Health	Adult Social Care and	
Delegated Power Being Exercised: Emergency Powers				
Subject of Decision: (i.e. services affected)	To pay additional Direct Payments to adult social care and children's social care clients during COVID-19 pandemic to enable them to issue full pay for Personal Assistants in the Shielded Cohort for a 12 week period whilst they are advised to self-isolate.			
Is this a review of a decision? If so, what was the date of the original decision?	No			
Key decision? If so have Democratic Services been notified?	Yes			
Decision Taken (specify details, including the peri which the decision will be place and when it will be reviewed):	od over e in	number in the sh pander self-isol 21 Marc not able the Gov are not able to a policy re propose where n paymen for pers to work regardir home. <i>A</i> that this 10 clien This dee minimur Social C appropr	of Person hielded co hic who ha ate for a p ch 2020. A to immed rernment s classified access sta esponse is ed that DC becessary to enal onal assis due to go ng the Shi As of 05/0 proposal ts. cision will m of forthi Care SMT	fied that there are a nal Assistants who are ohort for the COVID-19 ave been advised to beriod of 12 weeks from As these individuals are diately access some of support schemes, and as sick and therefore atutory sick pay a local s required. It is C Adult Social Care, , makes additional ole full contractual pay stants who are unable overnment guidance elded Cohort to stay at 5/2020 it is estimated relates to no more than be subject to a ightly review by Adult to check that it is ntinue with the nts.

	A further review of the decision would
	need to take place at the end of the initial 12 week shielded cohort self- isolation period in case Government suggests further periods of self-isolation. At this point we would need to consider the long-term sustainability of this emergency decision.
Reasons for the Decision (specify all reasons for taking the decisions including where necessary reference to Council policy and anticipated impact of the decision) Where the decision is subject to statutory guidance please state	It is considered important that DCC develops a local additional response to the national guidance to support future recruitment of personal assistants employed through direct payments through fair terms and conditions through the crisis.
how this has been taken into consideration.	We are aware locally from engagement with people in receipt of a Direct Payment in Derbyshire that employers have been in communication with the insurance providers, payroll services and direct payment support services regarding payment arrangements whilst they have been advised to self-isolate.
	Whilst some are able to access support, a significant proportion of employers are being referred back to the local authority by their liability insurance provider for a decision on funding. Some insurance advice to individuals has been that they cannot furlough because they receive public funding. These arrangements are placing unnecessary confusion and additional stress on individuals which could be partially mitigated by the introduction of the proposed local policy to support PA's in the shielded cohort.
	The question and answer issued alongside the guidance published on 21 April 2020 <u>'Coronavirus (COVID-19):</u> Q&A for people receiving a personal budget or personal health budget' does state there is no automatic entitlement to the job retention scheme for personal

	assistants, and the DHSC doesn't expect personal assistants to be furloughed. The national guidance states: 'In general, the government expects that the Coronavirus Job Retention Scheme will not be used by many public sector organisations, or individuals who employ people through funding provided to them as a direct payment.
	During this shielding period some Direct Care recipients may need to put temporary arrangements in place. Therefore, it is proposed that additional payments are issued to those DP clients where a regularly personal assistant is unable to work so that they can still receive their care from another PA.
	As well as adopting this approach for Adult Care clients, the approach will also apply to any personal assistants employed to support children whose parents are in receipt of a direct payment. All direct payments are processed by the Direct Payments Team located in Adult Social Care Finance.
Alternative Options Considered (if appropriate) and reasons for rejection of other options	We can advise clients to attempt to access the Job retention scheme via <u>HMRC</u> , however for most this would be via their payroll provider and most payroll providers are advising individuals that it doesn't apply to direct payments, which leads to further confusion for individual employers. It is additional administration and work for clients, along with a likely charge from payroll providers.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	There are no adverse effects in making this decision other than cost to the local authority detailed in the finance section below. There is a risk in not making this decision, that clients may not have sufficient funding to pay a second personal assistant and choose to go

Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	without vital care if concerned about funding until they have successfully managed to claim via the HRMC claim process. Some clients may have contingency to cover costs, at least on a short-term basis, but some clients, especially with smaller budgets may be disadvantaged. No, this is not a decision which would be taken in any normal circumstance and is a temporary arrangement to support individuals for a 12 week period in the shielded cohort.
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated? Background/Reports/Information considered and attached (including Legal, HR, Financial and other considerations as required))	There are no adverse impacts on individuals taking this decision, including protected groups. In fact, the policy decision supports protected groups to maintain their independence and sustain care and support arrangements. <b>Finance - GW</b> Need to ensure that, in cases where the Direct Payment has to be increased on an interim, the purchase order Request need to have the COVID-19 question marked as yes so that we can identify this additional cost which can be
	charged to the additional funds that Derbyshire County Council has received to support the COVID-19 pandemic response. Children's Services We have liaised with Children's Services throughout the development of these proposals (Linda Dale and DI McKenna) and they are in agreement with the proposed approach. This will enable us to have a consistent approach across DCC.
	<b>Principal Social Worker – VW</b> To avoid exclusion we need to consider robust and appropriate systems to ensure awareness of this is sufficient

		and accessible advise and information is provided to include letter, contact from allocated workers and information made available on our website		
		HR Implementation approach needs to align the payments with the DCC position		
		agreed yesterday at CMT on payments to relief staff.		
Consultation with	n relevant	To be confirmed		
Cabinet Member	r (s) – please	Consultation with Cllr Wharmby on		
note this is obligation	atory.	Review 27/05/2020		
Decision:	CMT agreed 06/05/2020			
	<b>Review by SMT 21/05/2020:</b> As requirements for people within the shielded cohort remain in place and this means that they have to self-isolate at home, these arrangements need to be in place to support Direct Payment clients source alternative support where necessary. The decision relates to less than 10 individuals so there are no significant cost implications for the authority.			
Signature and Date: Helen Jones 06/05/2020				

			Comrises Adult Cosial Core and
Officer: Helen Jones			Service: Adult Social Care and
*For emergency powers, this would be the Executive Director			Health
Delegated Power Being Exercised: Emergency powers *The delegation			
detailed in the Constitution to the specified officer or emergency powers			
Subject of Decision:			e discretionary payments in
(i.e. services affected)	order ma	aintain ou	r Shared Lives carer capacity
	and relia	nce with	effect from 1 April 2020 to
	support placements.		
Is this a review of a	No		
decision? If so, what			
was the date of the			
original decision?			
Key decision? If so			ot affect significant numbers of
have Democratic			nore electoral divisions. It does
Services been notified?		-	ling more that £500,000.
Decision Taken (specify	•		April 2020 it is proposed to:
details, including the per			ay full time Shared Lives carers
which the decision will be			n additional £40 per week.
place and when it will b	e		ay short break and day support
(further) reviewed):			hared Lives carers the amount
			hich they ordinarily would have arned.
		Due to t	he lack of day and residential
			eaks being available to shared
		lives ca	rers they are in effect being
		asked to	o provide unpaid care for 3 days
		per wee	k 9 to 5 plus the 4 weeks 28
		days pe	r year (pro rata). Over the 2
			since the suspension of day and
			tial services this equates to a
		total of 2	27 days unpaid work.
		This pro	posal would be initially
		impleme	ented for a period of eight weeks,
		after wh	ich a review will take place with
			vice manager responsible for
			Lives and the appropriate Group
		-	er with Assistant Director
		-	nt on a fortnightly basis. The
			would ascertain whether the
		addition	al payments need to continue for

	a furth on power of the state This second difference
	a further period of time. This would be a
Reasons for the Decision	delegated decision.
(specify all reasons for taking the	DCC Shared Lives carers provide family based 24 hour accommodation and
decisions including where	support primarily for people with learning
necessary reference to Council	disabilities.
policy and anticipated impact of	
the decision) Where the decision is subject to statutory guidance please state how this has been taken into consideration.	Some Shared Lives carers also provide both day care and overnight short break opportunities in order that carers of people who continue to live in a family home can have a break from their caring roles
	<ul> <li>In order to sustain what can be a demanding role, the current offer to DCC Shared Lives carers who provide family type accommodation includes the following regular short breaks from their caring role</li> <li>3 days daytime breaks per week between 9am to 5pm</li> <li>4 weeks residential short breaks</li> </ul>
	This is typically (though not exclusively) accessed through DCC Direct Care day services and DCC or health residential short breaks provision.
	The COVID-19 pandemic has resulted in closure of all day and short break services including those run by DCC and the NHS health trust. Consequently, this has curtailed available breaks for Shared Lives carers forcing them to undertake care on a 24/7 basis for the foreseeable future.
	Those Shared Lives cares who provide regular short breaks for the families/carers of people with learning disabilities and breaks during the day are currently unable to do so due to both the closure of day services and the rules on social distancing. Consequently, they

Alternative Options Considered (if appropriate) and reasons for rejection of other options	have seen a significant drop in their income. These Shared Lives carers are not able to take advantage of government schemes for the self-employed throughout the pandemic response period and are therefore financially disadvantaged unless DCC makes an additional payment. Despite a recent local marketing and media campaign to highlight this valuable role, recruiting Shared Lives carers has been very difficult in Derbyshire. We are very concerned that without providing some additional support to this valuable resource we will be unable to sustain existing carers throughout the COVID-19 pandemic and may also risk losing those carers who may feel they are no longer able to, or afford to continue in this role. Consequently, we propose to make an additional £40 per week payment to all our Shared Lives carers until such times we can reintroduce our previously agreed respite/short breaks arrangements. For short break and day support carers a 'one off' payment was considered, but this was thought to be unfair due to the different level of support that each carer gives. The proposed method better reflects the range of activities undertaken by the carer to support each individual/s they care for.
	A summary of approaches taken in other local authority areas is attached as Appendix 1.
Has a risk assessment been conducted- if so what are the potential adverse impacts identified and how will these be mitigated	The risk for the department is that if we do not show some recognition of the time that carers are putting in they will become very disgruntled and potentially look to end the Shared Lives placement they support. There is a risk of losing

Mould the decision normally	some very good carers and the people they are caring for would then have to be place in significantly more expensive care and support packages put in place. For short break and day support carers the risk to them is no income and no opportunity to take advantage of the governments schemes. The risk to the department is the loss of Shared Lives carers.
Would the decision normally have been the subject of consultation with service users and the public. If so, explain why this is not practicable and the steps that have or will be taken to communicate he decision	
Has any adverse impact on groups with protected characteristics been identified and if so, how will these be mitigated?	No groups are being negatively impacted.
Background/Reports/Information considered and attached (including Legal, HR, Financial and other considerations as required))	<ul> <li>Comments from Finance</li> <li>The weekly costs of these proposals are estimated to be: <ul> <li>Full Time Carers - £1,800</li> <li>Respite Carers - £1,500</li> </ul> </li> <li>With the total cost for the 8 weeks being £26,400</li> <li>This would be a commitment against council resources and partially offset</li> </ul>
	from the non-ring-fenced Covid-19 Government Grant. All decisions around meeting Covid-19 costs are unlikely to be fully funded from current Government additional funding available. As such implications will fall on the ability to provide services for the rest of the financial year and into the medium term
	<b>Comments from Principal Social</b> <b>Worker</b> Shared Lives is an important way we can help support people to stay as

		independent as possible and our Shared Lives carers require both skill and commitment to values of caring for others. This commitment helps to ensure Shared Lives arrangements are safe, supported and valued. This in turn should support the wellbeing of clients. Information about these arrangements need to be appropriately shared in accessible formats.
		<b>Comments from Legal</b> No implications from a Care Act perspective. It seems to be a financial decision around how much is allocated for this purpose. It is sensible to seek to support these providers, given the market shaping duties under the Care Act.
Consultation with relevant		Consultation with Cllr Wharmby on
Cabinet Member (s) – please		decision 27/05/2020
note this is obligatory.		00/05/0000
Decision:	Agreed by CMT 22/05/2020.	
	27/05/2020 – agreed that payments would be after the	
decision was reported to Cab Co.		
Signature and Date:		
Helen Jones 22/05/2020		

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