

PUBLIC

MINUTES of a meeting of the **CABINET MEMBER – ADULT CARE** held on 25 June 2020.

PRESENT

Councillor J Wharmby (in the Chair)

Also in attendance were Councillors C Dale, and S Swann.

20/20 **MINUTES RESOLVED** that the minutes of the meeting held on 11 June 2020 be confirmed as a correct record.

21/20 **REVIEW OF URGENT OFFICER DECISIONS TAKEN TO SUPPORT THE COVID-19 RESPONSE** The Cabinet Member was provided 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 had been undertaken.

In the main, the decisions related to short-term temporary arrangements which were subject to regular review. This was particularly important where subsequent Government guidance had been issued. It was intended that as Cabinet was now able to function by meetings being held 'remotely' the need for officers to make urgent decisions would now diminish. However, it was important that officer decisions were kept under regular review by elected members and officers. At the 4 June 2020 Cabinet meeting it was agreed that Cabinet would formally delegate review decisions to the relevant Cabinet Member meeting.

In Table 1 to the report, was an update on the reviews that had taken place since the last Cabinet Member meeting on 11 June 2020. All review decisions to date had 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 was on the agenda as a separate item.

A copy of the most up to date version of the Officer Decision Records was attached at Appendix 1 to the report.

The Executive Director provided clarification on the review relating to the closure of day centre provision for older people. It was 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 had had their care package reviewed and it was continuing to be reviewed on a minimum of a fortnightly basis to check that no additional support was required as an alternative to the

support which would have normally been received via attendance at a day centre.

Derbyshire Carers Association was 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 were being offered.

Officers were actively scoping options to see whether individuals who would normally attend a day centre could be offered alternative provision which would involve activities based outdoors in line with current social distancing requirements. This needed 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 was feasible as individuals in the shielded group had greater restrictions still in place.

RESOLVED to (1) note the review of decisions made under urgent delegated powers arising from the COVID-19 Pandemic; and

(2) agree that future review decisions will be made on a fortnightly basis by the Cabinet Member for Adult Care.

22/20 DISCRETIONARY PAYMENTS IN ORDER TO MAINTAIN OUR SHARED LIVES CARER CAPACITY THROUGHOUT THE COVID-19 PERIOD The Cabinet Member was asked to note the urgent decision taken by Corporate Management Team on 22 May 2020 to make discretionary payments in order to maintain our Shared Lives carer capacity and reliance, with effect from 1 April 2020 to support placements.

From 1 April 2020 it had been agreed to:

- Pay full-time Shared Lives carers an additional £40 per week.
- Pay short break and day support Shared Lives carers the amount which they ordinarily would have earned.

Due to the lack of day and residential short breaks being available to Shared Lives carers they were in effect being asked to provide unpaid care for three days per week 9am until 5pm, plus the 4 weeks 28 days per year (pro rata). Over the two months since the suspension of day and residential services this equated to a total of 27 days unpaid work.

This proposal would be initially implemented for a period of eight weeks, after which a review would take place on a fortnightly basis with the service manager responsible for Shared Lives and the appropriate Group Manager with Assistant Director oversight. The review would ascertain whether the additional payments needed to continue for a further period of time. This would be a delegated decision.

Shared Lives carers provided family based 24-hour accommodation and supported primarily for people with learning disabilities. Some Shared Lives carers also provided both day care and overnight short break opportunities in order that carers of people who continued to live in a family home could have a break from their caring roles. In order to sustain what could be a demanding role, the current offer to Shared Lives carers who provided family type accommodation included the following regular short breaks from their caring role

- Three days daytime breaks per week between 9am to 5pm
- Four weeks residential short breaks

This was typically, though not exclusively, accessed through Direct Care Day Services and residential short breaks provision. The COVID-19 pandemic had resulted in closure of all day and short break services including those run by DCC and the NHS health trust. Consequently, this had curtailed available breaks for Shared Lives carers forcing them to undertake care on a 24/7 basis for the foreseeable future.

Those Shared Lives carers who provided regular short breaks for the families/carers of people with learning disabilities and breaks during the day were currently unable to do so due to both the closure of day services and the rules on social distancing. Consequently, they had seen a significant drop in their income. These Shared Lives carers were not able to take advantage of government schemes for the self-employed throughout the lock down period and were therefore financially disadvantaged unless DCC made an additional payment.

RESOLVED to note the urgent decision taken by Corporate Management Team on 21 May 2020 to make discretionary payments in order to maintain our Shared Lives carer capacity and reliance with effect from 1 April 2020 to support placements.

23/20 INFECTION CONTROL FUND (The Cabinet Member agreed to consider this report as an urgent item due to the imminent deadline for allocation and distribution of the monies) Approval was sought to distribute the remaining 25% of the first tranche of the infection control fund which had been allocated to home care and care home providers.

On the 22 May 2020, the Minister of State for Care wrote to local authorities setting out details of how a new Infection Control Fund should be used. This funding would be paid as a Section 31 grant ring fenced exclusively for actions which supported care homes and domiciliary care providers which must only be used by them to tackle the risks of COVID-19 infections. For Derbyshire the total fund was £9.741m, with the first tranche of two instalments equating to £4.870m.

75% of each instalment was to be paid to care homes providers on a “per bed” basis with no distinction to be made whether the local authority had a contract with the provider or not. Payments had already been made and providers were now submitting their declarations that they would use the funds in line with the grant criteria.

The local authority had the discretion to target the allocation of the remaining 25% of the funding to care homes or to domiciliary care providers and to support wider workforce resilience. The funding must only be used for infection control purposes. It should not be used for fee uplift.

Payment was subject to the Provider having completed the Capacity Tracker at least once and being committed to completing the Tracker on a consistent basis. The local authority must remain satisfied at all times that the funding was being used for infection control purposes. Providers must account for all payments paid out of their allocation and keep appropriate records which must be produced to the local authority upon request. The first tranche of funding had to be allocated by the Council by 26 June 2020.

The Chairman of the Improvement & Scrutiny Committee - People had been consulted and had agreed that the report was urgent and could not reasonably be deferred until the next meeting in light of when the measures were announced, the steps that local authorities were required to take, and the pending deadline. It was also agreed that the Call-in provision could be waived in relation to this decision.

It was proposed to apportion the remaining 25% of the fund as follows:

- Care Homes - allocated on a registered CQC bed basis at £75.73 per bed. This would mean that the whole care home market was treated the same. As with the 75% the fund must be used on Covid-19 infection control measures and may be used towards cleaning and the provision of PPE
- Home Care and Supported Living – whilst the majority of the market was contracted for by the Council, it was proposed to pay all providers a flat rate of £183.87 per client. This would mean that the whole market was treated the same. Providers would be advised that this funding must be used on Covid-19 infection control measures; and may be used towards cleaning and the provision of PPE

The Executive Director of Adult Social Care and Health noted that following discussion and agreement with the Director of Finance & ICT and the Cabinet Member for Adult Care, it was agreed to make additional temporary payments of 10% on fee rates for May and June 2020. This decision was made following Cabinet approval on the 23 April 2020 to make temporary payments of 10% extra to care homes and home care providers to cover additional costs associated with the impact of Covid-19. Cabinet had also agreed at that time

that the Executive Director of Adult Social Care and Health would have delegated powers to make a decision about additional temporary funding for May and June 2020 following discussion and agreement with the Director of Finance and ICT and Cabinet Member for Adult Care. The total payment over the three months was £4.238m.

RESOLVED that the Cabinet Member agrees to distribute 25% of the first tranche of the nationally distributed adult social care infection control fund to the following:

- £75.73 per care quality commission registered care bed
- £183.87 per home care client including non-contracted care

24/20 **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 11 June 2020 (contains exempt information)
2. To consider the report of the Executive Director for Adult Social Care & Health on the review of urgent officer decisions taken to support the Covid-19 Response (contains information relating to the financial or business affairs of any particular person (including the Authority holding that information))