

PUBLIC

**MINUTES** of a meeting of the **CABINET MEMBER – ADULT CARE** held on 08 December 2020

**PRESENT**

Councillor J Wharmby (in the Chair)

Also in attendance were Councillors C Dale and S Swann.

No apologies had been received.

**61/20** **MINUTES RESOLVED** that the minutes of the meeting held on 26 November be confirmed as a correct record.

**62/20** **REVIEW OF URGENT OFFICER DECISIONS TAKEN TO SUPPORT THE COVID-19 RESPONSE** The Cabinet Member received an update in relation to Officer's Decisions utilising emergency decision making powers and assurance in relation to the reviews which had been made.

The decisions related to short-term temporary arrangements which were subject to regular review. It had been intended that as Cabinet was now able to function by meetings being held 'remotely' the need for officers to make urgent decisions would diminish, however, they would be kept under regular review by elected members and officers. On 4 June 2020, it had been agreed that Cabinet would formally delegate review decisions to the relevant Cabinet Member, with a summary of review decisions made be reported to Cabinet every two months.

The report detailed summary updates on the reviews taken place since the last Cabinet Member meeting on 26 November 2020. All review decisions had been discussed with the Executive Director and Cabinet Member following review by Senior Management Team. A copy of the most up to date version of the Officer Decision Records was attached at Appendix 1.

The Principal Social Worker had been engaged and consulted with over the initial decisions and had reviewed the latest updates. They were satisfied that the original decisions had been made with due regard for the Department of Health and Social Care Ethical Framework, the Care Act easement guidance and were aware of the review processes in place.

**RESOLVED** that the Cabinet Member note (1) the review of decisions made under urgent delegated powers arising from the COVID-19 Pandemic; and (2) that future review decisions would be made on a fortnightly basis by the Cabinet Member for Adult Care.

## **63/20            ADULT SOCIAL CARE INFECTION CONTROL FUND ROUND**

**2**     A second round of the Infection Control Fund (ICF) had now been made available to cover the period 1 October 2020 to 31 March 2021. Payments to the Council would be made in two equal instalments, one in October 2020 and another in December 2020.

Pursuant to section 31(4) of the Local Government Act 2003 the Secretary of State attached conditions to the payment of the grant. These conditions specified that all funding must be used for COVID-19 infection prevention and control measures and local authorities were required to pass 80% of each instalment to care homes within the local authority's geographical area on a 'per beds' basis and to CQC-regulated community care providers within the local authority's geographical area on a 'per user' basis, including to social care providers with whom the local authority did not have existing contracts. All providers were required to have completed the care tracker, to report on spending incurred and their future anticipated spend. All funding provided had to be spent in line with the infection prevention control measures and had to have been spent by specific timescales.

However, the local authority had discretion to use the remaining 20% of each payment on other COVID-19 infection control measures, including providing support to other care settings, and wider workforce measures in relation to COVID-19 infection control.

The Council expected to receive Payment 2 of the Grant Payment in December 2020. 80% of the grant payment would be distributed to Providers. It was recommended that the remaining 20% of Payment 2 funds would, in combination of any underspend from Payment 1 be shared between care homes and home care providers to further assist with meeting the costs associated with Personal Protective Equipment, Staffing Costs and to help with facilitating improved visiting arrangements in their care home. Payments would be made on a per bed basis for care homes and per Council client for home care providers. Any un-allocated underspend would have to be repaid to DHSC.

If as suggested the Council used part of the 20% Payment 1 funding allocation to make up the unit cost for community providers, then this would leave £1.649m. It had been proposed that the Council used this funding in the short term to assist with:

- Direct Payment/Shared Lives allocated funds on a case by case basis to help cover additional costs associated with infection control especially those linked to maintaining wages of Personal Assistants (PAs) who needed to isolate and use of alternative staff.
- To support providers to request emergency assistance to assist with exceptional costs associated with isolating staff and use of agency staff to cover those isolating. This offer would be only available to care

homes services subject of Outbreak Control Team meetings to ensure service viability or to Home Care services where majority staff group were needing to self-isolate.

- To cover the costs of any Council staff needed to transfer to Provider services for short periods of time due to impact of COVID-19 on provider workforce.

It had been recommended that the remaining 20% of Payment 2 funds would, in combination of any underspend from Payment 1 be shared between care homes and home care providers to further assist with meeting the costs associated with provision of infection prevention and control procedures. Payments would be made on a per bed basis for care homes and per Council client for home care providers.

**RESOLVED** that the Cabinet Member supported (1) the allocation of government grant funding towards improved infection prevention and control procedures (IPC) as described in the report. It had been proposed to redistribute the unallocated funds of £0.344m for care homes from the first Payment with a contribution of £0.106m from the 20% discretionary element from the first Payment of the October ICF Grant to make up the funding for community based services so that all received the grant of £336.03 per client per Payment as specified by DHSC; (2) that the remainder of 20% discretionary element from the first Payment, totalling £1.649m, was used to (a) support people in receipt of Direct Payments and people in shared lives with any IPC costs; (b) assist providers subject to outcome control meetings where they adversely impacted by COVID-19; (c) to cover the costs of any Council staff needed to transfer to Provider services for short periods of time due to the impact of COVID-19 on provider workforce; and (3) that the 20% of Payment 2 grant, would in combination of any underspend from Payment 1 be shared between care homes and home care providers to further assist with meeting the costs associated with provision of infection prevention and control procedures. Payments would be made on a per bed basis for care homes and per Council client for home care providers.

**64/20**      **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 consider the report of the Executive Director of Adult Social Care and Health on an Urgent Decision Taken by the Head of Paid Service (Contains information relating to the financial or business affairs of any particular person (including the Authority holding that information))

