

Short-term and long-term impact of the Government's approach to the COVID-19 pandemic on the provision and delivery of social and domiciliary care for disabled and vulnerable people, and the need to ensure the sustainability of social care services

House of Lords

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Key messages:

- Adult social care is at the frontline of responding to the unique challenges posed by Covid-19 and carers are doing an incredible job.
- Government funding and liquidity measures to support councils are very welcome, as they are facing significant extra costs from the demands created by Covid-19 as well as a significant loss of income. In relation to adult social care, councils are supporting care providers who face additional costs in ensuring continuity of care for those who rely on their support, as well as seeking to protect staff and the people they support from infection by Covid-19, and then providing care to this who fall ill with the virus.
- Funding must be kept under close and regular review. This will be particularly important to ensure both the immediate and the long-term sustainability of the provider market, which is facing severe pressure as a result of Covid-19.
- Addressing the unsatisfactory situation regarding Personal Protective Equipment (PPE) remains a priority for councils. The social care workforce and other appropriate key council staff need to be provided immediately with sufficient and sustainable supplies of PPE and a system put in place to guarantee future supply. In addition, accessible and appropriate testing facilities are urgently needed for this workforce and people receiving care in their own homes.
- We welcome the updated PPE guidance from Public Health England around social care settings, the first one focusing on care homes was issued last week. We now urgently need to see the updated guidance on domiciliary care.
- The intended nationally co-ordinated 'Clipper' system for supply of PPE to social care has been delayed since April 6 2020 and we have no date for when this will be in place. We urgently need a launch date. In the interim, social care is reliant on PPE deliveries to Local Resilience Forums (LRF's). LRFs need far greater certainty of timing and quantities of ongoing 'drops'.
- Councils, operating under the Coronavirus Act and guidance on Care Act 'easements', may face difficult decisions on prioritising their resources and capacity. It is not inconceivable that some decisions may be questioned or challenged. The easements guidance must therefore also be kept under close and regular review and revised as necessary based on implementation experience of the easement measures. Any measures for oversight and monitoring of the easements must be sensible, proportionate and not burden councils with unnecessary reporting requirements.

Briefing

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Further information:

Personal Protective Equipment (PPE)

- Councils continue to have major concerns about the availability of Personal Protective Equipment (PPE). The social care workforce needs PPE urgently – the priority should not just be the NHS.
- The ‘Clipper’ system for supply of PPE to social care has been delayed since April 6th and we have no date for when this will be in place. We urgently need a launch date. In the interim, supply is variable across the country and the national PPE delivery service to adult social care is via Local Resilience Forums (LRF’s). LRFs need far greater certainty of timing and quantities of ongoing ‘drops’. Accessing PPE is an ongoing issue – good quality supplies must be available throughout the coming weeks.
- For councils and care providers, the current arrangements for accessing PPE are not fit for purpose and are failing to provide what is needed on the frontline. It is vital that the arrangements set out in the adult social care plan and associated guidance are urgently translated to the reality on the ground.
- We have heard numerous reports from councils about how this is affecting their ability to care for their communities. One council reported their delivery of PPE was delayed by over a day last weekend, and when they received it, it was only 40 per cent of what they were promised. Another council area reported how its discharge system fell over one day because of a lack of PPE supplies in local care homes. Another council noted how, given the change in guidance meaning we are in a 'period of sustained transmission', care staff should wear eye protection, a fluid repellent mask, gloves and an apron - and this must be changed between contacts. This council has done some scenario planning and found that in a medium sized care home, this would use 10,000 pairs of gloves in a day. This has huge implications for PPE stocks.

Testing

- Testing for social care staff and those they are supporting is just as vital an issue as it is for colleagues working in the NHS. The sooner we can confirm staff status (for example ‘not yet infected’, ‘infected’, ‘infected and have antibodies’) the sooner they can get back to work.
- Councils have a central role in supporting national efforts to free up hospital beds. The discharge of people who need ongoing support from social care is an absolute priority for councils and the availability of both PPE and testing will be critical to this work.
- It is welcome that Government announced that they will offer testing for the adult social care workforce. However, a lot of councils have raised concerns about how the testing will operate in practice, including use of regional rather than local centres and the need for staff to travel by car, often long distances.
- We are seeking urgent clarification of the plans and process for the roll-out of testing including accessibility of testing centres and home testing.

Profile and recognition of adult social care

- Adult social care and support is a vital service in its own right. It helps people of all ages to live the life they want to lead. It binds our communities, helps sustain the NHS and provides essential economic value to our country. Too often health and social care are set on unequal footings, with the latter viewed (sometimes solely) in terms of the role it can play in supporting the former.
- Adult social care has a crucial role to play in responding to Covid-19. Through home care, residential and nursing care and care in other settings, social care is on the frontline of keeping people safe and well (particularly vulnerable people) and helping to prevent the spread of the virus. It also has a vital role in helping to mitigate the severe pressures facing the NHS.
- The recognition of this in the Government's Action Plan for social care is very welcome. The current emergency has thrown into high relief the fragility of the sector and the extent to which it is under-funded and under-valued.
- This recognition must not be temporary. This emergency has highlighted the essential value of social care to the wider public and this needs to be harnessed in thinking about the future of care and support.

Funding

- The additional £3.2 billion funding made available for local government to respond to Covid-19 is welcome. It is particularly welcome that this money is not ring-fenced as it recognises that councils are best placed to decide how it is spent. The challenges we face are significant, wide-ranging and vary from place to place, so it is imperative councils can decide how best to respond to the specific pressures they face in their local area. In the future it is important that local government's funding continues to be kept under constant and close review.
- This funding is important for the range of council services that contribute to community safety and resilience, but also the range of services they commission. The voluntary and care provider sectors are two sectors that we know are under enormous strain. For the former, and as fundraising monies decrease at this time, their income from councils will become even more important.
- Adult social care is already starting from a position of historic underfunding and pressure. Prior to the Covid-19 pandemic, we estimated that adult social care faces a funding gap of £810 million for the year 2020/21 (rising to £3.9 billion in 2024/25).

Providers

- Providers are facing a particularly challenging situation as demand increases and capacity reduces as staff become ill or have to self-isolate. Providers estimate this is currently over 20 per cent of staff. To keep providing the same level of care they need to recruit additional workers to compensate. Providers also face additional costs in sourcing PPE.
- The LGA and ADASS published a note – 'Temporary Funding for Adult Social Care providers during the Covid-19 Crisis'. In this, we encourage all local authorities to talk to providers locally to see what the most appropriate response is to ensure their continued viability.

- Many councils have already acted to make additional payments to care providers though fee uplifts, lump sum payments, agreements to meet additional costs and support in kind.
- The LGA and ADASS's note does not prescribe a payment increase but does say that initial evidence suggests that nationally the temporary cost pressures might be in the region of 10 per cent. Provider organisations have said pressures exceed that. The LGA and ADASS are working with provider membership organisations nationally to monitor actual increase in costs and councils will be doing the same with their local providers.
- The NHS and local government are doing everything that they can to get patients out of hospital who are fit enough to be discharged to maximise the number of beds for patients who have Covid-19. This will require local systems to provide social care packages for those who need it. Ensuring that the adult social care market does not collapse is a prerequisite to this work.
- Local government has been given £3.2 billion to help with the response to the virus. This not ringfenced but the Government has referred to the additional pressures on adult social care and on providers. Any temporary support to adult social care providers will have to be met from this resource although there are many other financial pressures on local authorities arising from Covid-19. It is likely that additional support from Government will be required to ensure that councils can continue to meet these additional costs and still deliver balanced budgets in accordance with their statutory duty.

Coronavirus Act and government guidance

- The Government has deemed it necessary to enable councils to ease some of their statutory duties under the Care Act. The Coronavirus Act and Care Act easements guidance enable councils to prioritise capacity and resources to maximum effect in the current and coming period when demand and pressures will be significantly increased.
- Guidance on how these changes will be implemented has now been published. The guidance is clear that 'easements' should only be used when absolutely necessary and that councils should do everything they can to continue meeting their existing duties.
- The guidance also makes clear that councils remain under a duty to meet needs where failure to do so would breach an individual's human rights under the European Convention on Human Rights (ECHR) including the right to life under Article 2, the right to freedom from inhuman and degrading treatment under Article 3 and the right to private and family life under Article 8. Councils are also expected to operate with due regard to the recently published Ethical Framework for adult social care.
- The Coronavirus Act and accompanying guidance put councils in uncharted territory, and it is possible that decisions councils may make may be challenged. The LGA will work closely with councils and relevant partners to collect information on issues councils encounter in operating under the easement measures. We will share this insight with DHSC to ensure that possible future iterations of the guidance reflect the real experience of implementation.

Action Plan

- On 15 April, the Government published *Covid-19: our action plan for adult social care* (the 'Plan'). It was updated on 16 April and covers England only. The Plan sets out the Government's approach to supporting adult social care during the pandemic.
- The Government states that its priority is 'for everyone who relies on care to get the care they need' during the pandemic. The plan recognises that social care is not simply about meeting people's needs but 'helping people to live the best possible life'. It also recognises that social care is for people of all ages and is delivered in different settings to people of all ages and unpaid carers.
- The Plan pays strong tribute to the care workforce, stating that 'we as a nation are indebted to their selfless dedication.' It also acknowledges that the Plan is not a substitute for the long-term action that is needed on social care, which includes 'putting social care on a sustainable footing.' The Plan is arranged around four main pillars:
 - Controlling the spread of infection
 - Supporting the workforce
 - Supporting independence, supporting people at the end of their lives and responding to individual needs
 - Supporting local authorities and providers of care