



**Chief Executive**      **Civic Offices**  
 Euclid Street  
 Swindon SN1 2JH

**Tel:** 01793 463000

---

**Website:** [www.swindon.gov.uk](http://www.swindon.gov.uk)

Our Ref: SK/SC/0504

29<sup>th</sup> May 2020

Dear Minister

**Re Covering Letter for Care Home Infection Control Fund**

This letter sets out the joint work that is in place in Swindon to ensure and provide the ongoing resilience of the care market, with particular reference to the infection prevention and control.

There are fifty one care homes in Swindon with twenty four being residential and/or nursing homes for older people, twenty five for people with learning disability and two for care and support of those with mental health needs. All fifty one homes have completed the Capacity Tracker questionnaire. The current CQC ratings of residential and nursing homes in Swindon is as follows;

	<b>Outstanding</b>	<b>Good</b>	<b>Requires Improvement</b>	<b>Inadequate</b>	<b>Not yet inspected</b>
<b>Older People Residential Homes</b>	3	8	1	0	0
<b>Older People Nursing Homes</b>	0	11	1	0	0
<b>Learning Disability Residential Homes</b>	3	17	2	1	1
<b>Learning Disability Nursing Home</b>	0	1	0	0	0
<b>Mental Health Homes</b>	0	2	0	0	0
<b>TOTAL - 51</b>	6	39	4	1	1

The key partners who are actively working together to ensure ongoing resilience and readiness of the care market are as below:

- Swindon Borough Council, including Adult Social Care, public health and the local Well Being Hub
- Bath, North East Somerset (BaNES), Swindon and Wiltshire (BSW) Clinical Commissioning Group (CCG) and NHS partners
- Great Western Hospital Trust – providing both Acute and Community Health services
- Primary Health Care including Primary Care Networks
- Voluntary and third Sector partners, including Prospect Hospice
- Public Health England
- CQC
- Local Resilience Forum, including all partners and led by Wiltshire police

Each section below sets out the response to each of the areas identified in your letter:

### **1. Confirmation of daily arrangements in place to review the local data and information of the state of the market locally.**

A daily command report structure is in place through Swindon Borough Council with concerns being escalated into Swindon Borough Council Gold Response and Recovery and BSW Gold meeting and Tactical meetings with DASS and/or Director of Adult Social Care in attendance. There is a weekly Local Resilience Forum, attended by the Director of Public Health and SBC Chief Executive alongside partners. Sitreps are used to highlight issues and risks which are taken for high level partner response and partnership discussion and actions; these are in turn taken for action through to local command for planning and implementation. A CCG chaired Community Response Hub with multi-disciplinary partners is in place and continues to meet virtually 3 times per week. There was agreement to establish the care home cell, initially for older people homes due to the increasing number of deaths at the start of Covid-19 within this sector. The establishment of the care home cell has drawn in partners' support and commitment and also enabled support to wrap around care homes whilst also ensuring a lead for each home.

The care home (coordination) cell is composed of leads from four organisations; SBC Adult Commissioning, Prospect Hospice, Great Western Hospital Community Health and BSW CCG; in addition CQC representation from SBC Public Health team. Daily monitoring of all care home status including vacancies, infections and staffing, takes place in Commissioning in Adults Social Care to support placements and packages of support and also to alert the care cell leads of any issues that are arising. Local gathering of daily data has been suspended as a result of the capacity tracker being strengthened and given access to a range of reports. There is now GP support within the care home cell that supports with clinical areas of practice and develops the confidence of care home managers and their staff, an example of this is the GP's support to implement Restore2/Restore2mini, which will also impact on IP&C within the homes. The ambition is to ensure the GP interface and implementation is in place for all fifty one care homes.

The care home cell has made a real difference to those homes who have had covid-19 and resulting deaths in really wrapping round support and impacting on the ceasing

of the spread of the infection. Older people care homes have reported back to commissioners that they have really valued having regular weekly contact and from one person and also being able to go to their lead to seek support.

The care home cell also has oversight and monitoring of the following:

- Training and monitoring of infection, prevention and control (I,P &C). Use of the super trainer model to cascade the training into I,P and C leads in all care homes
- At least weekly contact with each of the care homes to identify any immediate support required and to broker this on their behalf
- Liaison across partners to broker partner contributions e.g. bereavement support for care homes' staff
- The cell links closely with SBC commissioning to act on emerging issues from commissioning risk and issues management from the capacity tracker, safeguarding, CQC emergency framework and PHE notifications

In addition SBC Adult Commissioning are working to manage the changes in market particularly in respect of recovery planning and anticipating future demand through potential "seasonal spikes" relating to Covid-19. This includes work with Newton Europe to develop a local capacity and demand tool to support this planning.

**2. Your system's collective level of confidence that these actions are being implemented or plans are in place to urgently implement, briefly setting out any areas where there are concerns and what support you might need.**

Confidence in Swindon comes from a culture of strong partnership working in order to implement changes and actions at pace. Care homes are of a good standard as indicated through the most recent CQC ratings and this has been optimised through the following:

- Joint commissioning arrangements for commissioning between BSW CCG in Swindon and Adult Social Care
- Weekly provider calls led by commissioning with care homes, domiciliary care, supported living, supported housing, voluntary, community and third sector, CQC and public health. Recent calls to care homes have fed back the value of the support they receive both from the calls and the care home cell
- There is an ongoing assurance process in place from SBC officers to both DASS and DPH
- BSW Swindon Locality community response hub has daily meetings with feedback on status and escalation through to weekly BSW meeting. This gives a fast and efficient response through partnership working.
- Local risk assessment and triangulation is in place by Adult Commissioning with safeguarding, DoLS, social work, BSW CCG and CQC feeding in to the care home cell as appropriate, with clarity in place on commissioning and care home cell distinction and designation.

The Capacity Tracker questionnaire has been completed by all fifty one care homes in Swindon. The key areas that will be priority actions as part of a wider plan to support and implement infection control across care homes and wider providers in Swindon is

shown below. The partnership are confident of being able to take forward the actions other than that of asymptomatic testing where the national implementation will be key.

Priority Plan	Lead	Target
<b>Focus 1: Infection prevention and control measures</b>		
1.3 Paying staff wages while isolating following a positive test – all care homes, particularly those homes who have responded no and ensure clarity of grant terms and conditions.	Head of Commissioning SBC	June 20
<b>Focus 2: Testing</b>		
2.2 Access to Covid 19 test kits for all residents and asymptomatic staff, particularly of all homes who have responded no. Care home cell leads to check testing knowledge and registration and provide support.	Head of Commissioning SBC	June 20
<b>Focus 4: Workforce support</b>		
4.3 Access to additional capacity including from locally coordinated returning healthcare professionals or volunteers. Target of those who have responded no with learning and connections from those homes already implementing. Close working with the acute trust and health colleagues to implement at pace.	Head of Commissioning SBC	June 20

Included in the infection control plan will be the breakdown of the actions that will need to be completed by each home with support from the partnership. The Head of Commissioning, Adults will have oversight of the progress made against the priorities and the additional pieces of work with each care home to achieve all positive responses to the questionnaire.

There are some challenges going forward in support of infection control which have been included in recovery plans across partners.

- Cell to become business as usual and to garner ongoing partner commitment. The benefits and feedback to be understood and fed back to partners alongside the request to the ongoing commitment
- Financial viability and sustainability given the voids across care homes, mostly in older people. This will be undertaken alongside ongoing demand mapping and winter planning.
- Review of redeployed staff, such as environmental health officers, and their added value and expertise
- Capacity of the workforce and market capacity in the event of increased winter infection patterns. This will also need to be mapped and understood.
- Potential ongoing challenge of staff not coming into sector; there have been examples of staff resignation and pressure with families. Conversely, domiciliary care has had ongoing success in recruitment throughout. How do care homes learn and mirror more safety assurance?
- Testing and particularly asymptomatic testing of staff and residents and the risk of staffing levels falling. Under 65s not being tested nor LD homes even with over 70s is an ongoing challenge.
- Enhanced Care in Care Homes Framework is in place for older people's homes however there is a need for pace for mental health and learning disability homes. Emphasis on the consistency of the offer across PCNs and the services and the variation of clinical support from PCN practice linking to also community nursing

- A BSW care home oversight group has been established to ensure there is learning from best practice, ability to identify any key risks, develop a BSW care home dashboard to enable sight of an BSW position.

**3. A short description of the approach that commissioners (LAs and CCGs) are taking to address short-term financial pressures experienced by care providers, taking into account local market context and pressures. This should include reference to any temporary or longer-term changes to fees paid by commissioners.**

This is a key part of Swindon Borough Council’s recovery planning and reporting into corporate Gold and Silver command and also is reported in the wider partnership arrangements. The project plan relating to this sits within Adult Commissioning team and is being undertaken at pace. The voids that are resulting from deaths in care homes, particularly in those for older people, are increasing resulting from covid-19 and also as a result of the usual flow from the hospital and the community not being at previous levels. Alongside this piece of work is the demand mapping in the short, medium and long term and the implications of this on the commissioning strategy.

The council has made some provision in its budget for covering a percentage of care homes void costs from the two payments of £1.6 billion that was paid to councils to support covid 19 pressures. This would only cover social care beds and agreement on the level of funding would be on a case by case care home basis given differing business models. We are aware that a number of care homes are increasing their rates to private/self-funding residents. The council would not be able to financially support the voids in care homes for self-funding residents. The subsequent allocation of the Infection Control Grant funding from Central Government will be paid to all care homes at 75% of the average bed price based on the size of the home as per the terms of the agreement.

Below is the template that has been published in the council’s website which will be updated; both this letter and the template will also be published.

As at 27<sup>th</sup> May 2020

<b>Support to providers that the local authority has contracts with</b>			
	<b>Domiciliary care</b>	<b>Residential care</b>	<b>Other provision</b>
<b>Support being offered</b>	Additional payments to support PPE costs and other relevant Covid 19 expenditure. Access to PPE supplies if unable to obtain in the market. Invoices paid on receipt of invoice instead of with 30 days as per contract. Regular provider calls. In scope for 25% of	Additional payments to support PPE costs and other relevant Covid 19 expenditure. Access to PPE supplies if unable to obtain in the market. Payments made in advance every month rather than mid-month.	Additional payments to support PPE costs and other relevant Covid 19 expenditure. Access to PPE supplies if unable to obtain in the market. Invoices paid on receipt of invoice instead of with 30 days as per contract. Regular provider calls. Supported living

	the infection control grant		providers in scope for 25% of the infection control grant
Total spent to date on supporting providers the local authority has contracts with in response to COVID – 19		£697,874	
<b>Support to providers that the local authority does not have contracts with</b>			
	Domiciliary care	Residential care	Other provision
Support being offered	Regular provider calls. In scope for 25% of the infection control grant	SBC have contracts with all homes in Swindon.	Regular provider calls SBC have contracts with all supported living providers in Swindon.
Total spent to date on supporting providers the local authority does not has contracts with in response to COVID – 19			

Covid-19 monthly payments have been made to care home, domiciliary care and supported living providers. These have been paid for April and May with a 10% payment pro rata being made to older people providers based on a monthly spend with the council. A lower payment of 5% was made to learning disability providers based on the impact of covid-19 at the time and the likely financial pressures. The monthly payments have been profiled to July 2020.

The council has made provision in Swindon of a stock of a range of PPE for providers. This has proved to be useful when supply was challenging and when emergency supplies were needed. Providers have set up a virtual network across Swindon to support each other with mutual aid with staffing and supply of PPE, as well as sharing information. This work was started ahead of covid-19 under a Collaboration rather than Competition project across all providers commissioned by Adults, not just those who are registered.

**4. The approach agreed locally to providing alternative accommodation where this is required, and care arrangements for people who need to be isolated or shielded, where their normal care home does not have capacity to provide this. Costs of providing this accommodation are covered by the £1.3 billion COVID-19 discharge funding via the NHS.**

Alternative hospital discharge has been supported in the Sunflower unit within the acute trust and has to date met the capacity. There has been capacity and ongoing work with care homes over the period to ensure their ability to isolate returning residents for 14 days. Increasingly care homes have become more confident and competent to do this and the role of the trusted assessor and the community discharge hub has helped to wrap around support to do so.

The ongoing surge capacity planner has been under constant review and has identified that additional capacity could be sourced within one of the council's own care homes and also on another site; both could be kept isolated. There is a plan in place with the lead domiciliary provider to provide support and care if and when it is required.

## **5. Local co-ordination for placing returning clinical staff or volunteers into care homes, where care homes request this support.**

This piece of work has been implemented in part and needs a higher profile in the infection control plan as outlined above and collaborative working and mapping to understand and determine the capacity available in the returning and volunteer workforce and the ongoing and changing need. Through the capacity tracker it can be seen that some care homes and wider organisations have been successful in achieving this and therefore there are lessons to be learnt that could help other providers. In addition there may be clinical staff who are not needed across health but who still want to make an ongoing contribution to the ongoing deficit of clinical staff.

There are ongoing plans to support the capacity and the delivery of outcomes in care homes as follows:

- Volunteers have been sourced and work is underway to support people through virtual means. All parish councils are keen to support care homes in their parish and contacts have been made to support greater connectivity
- Working with staffing agencies on providing “clean” staff to support providers (particularly care homes, where sickness absence through either isolation or shielding has impacted).
- Review of volunteers recruited by SBC to undertake work with the shielded group to identify any that may have health and/or care experience to support
- Continued input with the LRF to support homes if required.
- Feedback from older people homes is that the majority have been very well supported by GPs through a heightened range of means mostly virtually and in a very proactive, supportive way
- Community health support has increased in response to increased need of care homes which has been directly brokered with community matrons

The new guidance for self-isolation may impact on care homes in particular going forward with anyone who has been in close contact with a symptomatic person being required to isolate for 14 days irrespective of whether they have symptoms. An urgent piece of work will now be undertaken with providers on contingency planning for these scenarios and what support systems can be put in place. This will include partner organisation and our voluntary and third sector.

We would be very happy to respond to any clarification questions that may be needed and to provide any further information.

Yours sincerely



Susie Kemp  
Chief Executive  
Swindon Borough Council



Sue Wald  
Corporate Director/Director of Adult Services  
Swindon Borough Council



Gill May  
Director of Nursing & Quality  
BSW CCG



Tracey Cox  
Chief Executive Officer  
BSW CCG