

COVID 19 – Provider Engagement Webinar

Friday 20th March

Welcome

- Welcome and Introductions
- Purpose of today's webinar
 - Key messages from LCC
 - Addressing provider queries and concerns
 - Setting out our approach to engagement with you
- How will the webinar work today?
- How to participate: submitting questions

Webinar Agenda

- Key messages from:
 - Louise Taylor, Executive Director of Adult Services & Health and Wellbeing
 - Sakthi Karunanithi, Director of Public Health & Wellbeing
- Approach to provider communications and engagement
- Service/theme-specific updates: LCC, CQC and NHS
- Question and answer session
- Next steps and close

Key messages from Louise Taylor

Key Messages from Sakthi Karunanithi

Approach to provider communications and engagement: working together

- General updates including FAQs, links to national guidance shared on the LCC Care Service Provider Engagement Portal **only** and **not** via email distributions lists:
 - <https://www.lancashire.gov.uk/practitioners/health-and-social-care/care-service-provider-engagement/>
- The Portal now contains a place where you can post general queries to us
- Please look at the website everyday, we will update by 5pm daily
- For specific queries continue to use the Contractmgt.care@lancashire.gov.uk email address

Key messages from Infection Control – Anita Watson

Support from LCC Infection Prevention team

- Basic IPC resources available on <https://www.lancashire.gov.uk/practitioners/health/infection-prevention-and-control/>
- Training sessions being developed – looking at being delivered via video/webinar.
- Contact infectionprevention@lancashire.gov.uk
- Follow us on Twitter @LancsIPC

If neither the care worker nor the individual receiving care and support is symptomatic, then no personal protective equipment is required above and beyond normal good hygiene practices. These routine PPE supplies should be procured through your usual channels

Aprons, gloves and fluid repellent surgical masks should be used when performing personal care for symptomatic people. If there is a risk of splashing, then eye protection will minimise risk.

Surgical masks are in the process of being distributed to care providers from the DHSC.

LCC have a small supply to help providers with symptomatic residents before they receive their supply.

Please can providers work together and share any spare supplies with others who are in urgent need.

https://mcusercontent.com/83b2aa68490f97e9418043993/files/7dc2af9f-bf19-4dc3-883a-f1f8700019c9/180320_PPE_for_care_sector.pdf#page=1

Please refer to the letter sent to you yesterday; we will upload this on the Portal.

Financial Arrangements

Khadija Saeed

(Head of Corporate Finance)

Headlines:

- The council will make payments based 'on plan' from April
- There will be no requirement for adult social care providers to submit service confirmation either via the care portal or via invoice in order to receive a payment
- Care suppliers are requested to continue to update care portal records for as long as they are able, to reduce administrative effort now and in the future

- The first payments 'on plan' are expected to be made w/c 30 March 2020
- Relating to payments for direct care providers including:
 - Care homes for older people in Lancashire – both nursing and residential care
 - Care homes for adults aged between 18 and 65 years located in Lancashire
 - Domiciliary care – including home care, crisis services and reablement
 - Supported living services - for adults with learning disabilities or mental health needs
 - Day services

- All payments to providers will be made on the basis of the current level of care commissioned, rather than the actual level of service provided.
- Payments will be adjusted monthly to reflect any changes in packages of care entered onto the care portal.
- If no changes are made to records on the care portal, the provider will continue to receive payment at the last recorded level.
- Care suppliers are requested to continue to update care portal records for as long as they are able to do so. This will help reconciliation at a future point in time.
- Payments will continue to be made to care providers at the last commissioned level if suppliers are not able to update their records.
- There is no requirement to submit service confirmation either via the care portal or via invoice in order to receive a payment.
- Where the provider is able to submit confirmations of any adjustments to care provided these will be reflected in the next period's payment.
- In the event that a care provider has not been able to keep the care portal updated it is expected that providers will keep appropriate records in relation to the more substantial changes to care support they provide. This will support future reconciliations.
- These measures aim to maintain cashflow and reduce the administration burden on providers at this critical time.

Other support to be provided:

- If you are experiencing cashflow issues, you must let us know, we will look to provide financial support
- We are looking into making advance payments for providers where these are required
- Sick pay – we understand that this is and may become a major draw on supplier finances. We are working through how we can enhance payments to providers to fund some of the additional pressure

Contract Management Issues

Karen Thompson

Contract Management

- Prioritising our work
- Temporary cessation of proactive monitoring for some contracts
- Developing new ways of working
- Continued support and assurance for our providers/service users/staff
- Duty Team to be increased to respond as required
- Working with our commissioning colleagues to support the Authority Response
- Dedicated COVID-19 Team to support the Authority Response
- Expectation for Homecare Framework providers to be responsive to urgent, short-term packages to support hospital discharge and reduce pressures on crisis hours

Safeguarding Issues

Lisa Lloyd

- We will continue to undertake our Safeguarding statutory duties in accordance with the legislation.
- Where legislation/guidance is amended we will reflect those changes in our practice and approach.
- MASH will continue to receive safeguarding alerts.
- Safeguarding enquiries passed to our social work team will be considered in terms of risk and priority, and where they can be safely delayed they will be.

Reduced footfall and social distancing issues:

- LCC supports provider decision making, consistent with government advice on social distancing and infection prevention measures.
- LCC will also support you to have discussions about whether visits from professionals are essential, can be done in another way or delayed.
- The service will rely on other partners to complete safeguarding enquiries and will be a point of contact for advice, consultation etc.
- As providers you are nearest to the individual and will be asked to undertake safeguarding enquires and supported to do so.
- The safeguarding service will only complete urgent visits when someone is at significant risk and we need to make the person/s safe.
- We will be continuing to work in partnership with providers to gain reassurance around individual safeguarding plans.

Adult Social Care Services

Rachael Meadows-Hambleton

- Keeping up to date with national guidance and communicating regularly with all staff across the services via e-mail and intranet.
- Daily reviews of staff capacity and where the pressures are within systems and service.
- Working closely with partners internally and externally to monitor and review pressures within other sectors which require a combined or supported response.
- Reviewed the ability of all staff to be able to work from home and ICT equipment has been and is being issued to facilitate this on an urgent basis.
- Utilising staff resources and skills to the best effect, gathering information about transferrable skill sets.
- Redeployment of some staff into other services where appropriate and safe

- Reduced non-essential business to free up capacity and resource. Responding to urgent and critical business initially.
- Considering flexible working patterns for staff to provide wider coverage of service delivery.
- Reviewing processes to enable staff to work quickly and with more autonomy.
- Reviewing how LCC staff may be able to support community organisations who can then continue to provide essential community based services to vulnerable citizens.
- Encouragement for staff to think about sharing care of dependents, such as childcare to enable the workforce to continue to undertake core duties.
- We need to maintain good working relationships with all our providers to ensure that we can continue to meet our statutory duties and obligations.

The In House Provider Perspective Nicola Clear (Head of Service for Disabilities)

Underpinning Approach

- Following national guidance - working at speed to interpret and implement
- Leadership - **key** as this is placing many under immense pressure
- Fast decision making – what is needed, free staff and managers up to deliver
- Review of how current operating systems work and what can change to support
- Ability to quickly get guidance out and translate – developed practical plans for each service area
- Using FAQ

Underpinning Approach

- Deliver the necessary for staff – PPE, guidance, support , guidelines , ICT equipment
- New ways of working - change where necessary and look at different model
- Acknowledge the loss taking place as life changes for everyone and impact on morale – very important
- Personal resilience
- Working together – providers at local level , what can we share , knowledge, advice , solution , experience, resource

Current challenges

- Pace of staff workforce reductions – daily attention
- Recruitment- reviewing and working up a plan to try and increase workforce, recruit quickly , safely ,
- Training – review essential delivery, move to on line, webinar, risk management for essential ie first aid and physical contact type training
- Service continuity and critical cover for 24 hour services – possible live in continuous model over week instead of daily shift changes
- Guidance to staff to best support individuals with disabilities struggling with the social distancing and restrictions being advised, following MCA principles
- Safeguarding – looking to implement ways to ensure restrictions on how life is at present don't result in risk to people supported
- Managing risk to staff from infection

Commissioning and Procurement Issues – Clare Mattinson & Paul Fairclough

- As a response to the COVID-19 outbreak, central government has published a Procurement Policy Note (PPN).
- The PPN gives information and guidance on public procurement and responding to the outbreak, and permits the council to procure services with extreme urgency.
- The council acknowledges there will be uncertainty around ongoing and upcoming procurement exercises.
- The council will be applying this PPN guidance as it reviews and determines what this means for each service contract in the coming days.
- Our priority is to maintain market stability and we will be reviewing our activity and response on an ongoing basis.
- We are reviewing all commissioning activity and will be working with local providers on a collaborative basis to identify issues and agree actions and mutual expectations including flexible deployment of staff and resources
- We will be asking providers for information about Self Funders.

Key messages from CQC

Naison Chaparadza

- **Essential visits** - essential maintenance visits should continue to ensure premises and equipment in the services are safe. Providers to risk assess contractors.
- **Current guidance on visitors** is not blanket - follow government guidance and risk assess as required if relatives want to visit.
- DBS - checks (transferring a DBS) we have asked our national panel for guidance and await a response.
- **Notification and reporting cases of COVID-19 and suspected cases-** report all suspected cases for people and staff to CQC as usual using Regulation 18 notification , copy in all stakeholders such as CCG and Commissioners to reduce the burden of reporting separately

- **CQC Local Contacts:**
- Ginny Ryder North Lancs areas of Morecambe and Blackpool
- Dave Coop Central Lancs CCG West Lancs CCG and South Cumbria, top half of Morecambe, Chorley South Ribble and South Cumbria
- Tracey Devine - East Lancashire
- Providers in **Special Measures** service we are still waiting for national guidance on that.
- **New inspection process** – under development and will be based on risk.

NHS Key Messages

Please can care home managers :

- 1) accept trusted assessments
- 2) accept asymptomatic people who are coming out of hospital
- 3) keep the EMS bed capacity tracker up to date
- 4) keep the ADAM monitoring tool up to date

The Government has agreed the NHS will fully fund the cost of new or extended out- of-hospital health and social care support packages, referred to in this guidance. This applies for people being discharged from hospital or would otherwise be admitted into it, for a limited time, to enable quick and safe discharge and more generally reduce pressure on acute services.

[Coronavirus \(COVID-19\): hospital discharge service requirements](#)

Question and Answer Session

Next steps

- Webinar recording and minutes will be uploaded to the Care Service Provider Engagement Portal
- Any new updates from LCC shared via the Portal by 5pm each working day
- Please use the Portal as the main communication channel for general queries re: COVID 19
- We welcome your feedback – if you found this useful we will do it again!

THANK YOU