

29 May 2020

Helen Whately, MP
Minister of State for Care
Department of Health and Social Care
39 Victoria Street
London
SW1H 0EU

Dear Ms Whately,

CARE HOME SUPPORT IN THE ROYAL BOROUGH OF WINDSOR AND MAIDENHEAD

In its ongoing, proactive response to the Covid-19 pandemic, the Royal Borough of Windsor and Maidenhead continues to work closely with all partners across the Frimley Integrated Health and Care System (ICS), including Berkshire Care Association (the representative care providers organisation), to support providers of social care to deliver the best possible care to the borough's residents, both in care homes (both for older people and people with a learning disability) and in the community.

Across the borough, there are 1,438* beds in 37 registered care homes including residential and nursing homes for older people, accommodation for people with mental health problems and those with a learning disability. The Royal Borough recognises that providers are the experts in delivering care and support to vulnerable adults and, as such, focuses on working in partnership with them in the provision of good quality care. Staff working in care homes are at the front line of caring for residents and families and as a council and the wider partnership, we are totally committed in our support of all providers in the borough.

17 out of the 37 care homes in the borough have experienced a Covid-19 outbreak. According to formal death registrations up to 15 May, 48 residents in care homes had died where COVID-19 was involved. The Royal Borough recognises the individual loss of those lives and extends heartfelt condolences to all their families and loved ones, including the individual providers and their staff.

The percentage of deaths in care homes which are COVID-19 related compared to all deaths in care homes from 1 January 2020 is 18%; across Berkshire this ranges from 11% to 38%. There is, however, an improving picture across the borough, with no outbreaks recorded between 6 May and 25 May. As a result of widespread testing, a small number (five) of positive, asymptomatic cases have been identified among the residents of two care homes; the providers have been contacted and support offered.

Duncan Sharkey - Managing Director

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There have been many significant challenges to providers since the outbreak of the pandemic:

- At the outset, people being discharged to care homes from hospital were not tested; testing on discharge from local hospitals is now routine.
- Providers have found accessing PPE very difficult, with some reporting that they have had to dedicate some members of staff to source equipment. This remains a challenge to providers and so the launch of the national procurement system for social care providers is critical. Until the national system is launched, the Royal Borough's process for supplying emergency stock to local providers continues to operate efficiently and effectively. We are proud of the fact that at no time during this crisis, were staff at the front line left without PPE.
- Nationally provided testing for care home residents and staff is welcome. However, local providers have reported problems with receiving results with two providers still awaiting results some two weeks after the tests have been performed. To ensure rapid testing where needed, the ICS has provided a smooth and swift pathway for local testing for care providers. Alongside this, the Director of Public Health will continue to prioritise care homes for national testing options as required.
- There are, of course, financial pressures on all partners. The Royal Borough welcomes the additional funding both for local government, the NHS and for providers but this remains inadequate in the face of rising demand and loss of income. The Royal Borough will continue to respond to the Ministry of Housing, Communities and Local Government on this matter.

COLLABORATIVE SUPPORT TO PROVIDERS

The Royal Borough has an existing Care Home Quality Programme, working with all partners. Building on existing collaboration across the sector to improve quality in care homes and the implementation of the Enhanced Health in Care Homes Framework for all providers in the borough, further measures have been put in place to support providers through the COVID-19 period including:

Supportive calls and open communication

The partnership has been in regular contact with all providers from the start of the COVID-19 period, this includes:

- Daily supportive phone calls by the Care Quality Team in adult social care.
- A borough-wide weekly teleconference with providers, social care and NHS staff.
- A twice weekly teleconference hosted by Berkshire Care Association.
- A care home hotline staffed by clinically trained staff to access Infection Control support including out of hours. This line is also used by other organisations when they need guidance or support on matters concerning care homes.
- A weekly email with key local and national information.

As part of the regular calls with providers, all care homes in the borough have confirmed that residents are able to keep in contact with their loved ones via video calls and other means e.g. phone calls, letters, looking at family Facebook pages etc.

Provider support from Berkshire Care Association (BCA)

BCA hosts a long-standing, provider-led “Care Leaders Network” in partnership with the Directors of Adult Social Care and the CCG. A meeting on 17 March led to BCA establishing a provider-led response to COVID-19. The need for constant up to date information, Q&A, support and advice was evident, and as a result BCA established a bi-weekly Zoom call with providers at set times with the same easy access in partnership with the CCG and local authorities.

These meetings are provider-led; this allows providers to ask questions without having to ‘put their head above the parapet’, ensures the provider voice is heard and empowered to make a difference in their organisation. It avoids the duplication of information, guidance and local intelligence, and providers having to share and discuss information with multiple statutory organisations. It ensures that best practice is ‘translated’ to staff on the ground and gives confidence to provider managers. Clinical staff from the CCG attend all meetings, giving accurate guidance, sharing best practice and experiences, dispelling myths and encouraging confidence. Clinicians include, for example, a geriatrician, the Associate Director of Nursing from the CCG and the Care Home Quality Support Team; other clinicians are invited when needed e.g. a psychologist to support with managerial and staff fears and concerns. This approach allowed, for example, providers to be aware of the emerging picture of atypical presentations of COVID-19 in the elderly and managing the condition, managing isolation of dementia patients, using PPE effectively and safely and reducing hospital admissions, whilst addressing staff fears and concerns. This has been invaluable to shared development and information across the area for all provider organisations and continuing to build bridges and integration with statutory organisations.

Many homes who had COVID-19 positive residents shared their experiences in the meetings, and reassured others. BCA believes this is acknowledged in local numbers, in comparison to what they may have been, given the frailty of the residents cared for locally (most are Nursing homes with very frail people with multiple and complex co-morbidities): as well as the unquestionable fragility of the market, staffing and funding.

In addition, for all providers regardless of the setting, Berkshire Care Association:

- Record all meetings and send the link to all providers to watch and share with their teams, on a dedicated, translated, plain worded email every Monday, Wednesday and Friday afternoon: collating all information from national government, local government, NHS and PHE information into one place. This includes shared experiences, documents and templates (e.g. business continuity plan examples).
- Have a dedicated 24/7 phonenumber available to all providers.
- Act as a conduit between concerned care providers and statutory organisations. This has resulted in, for example, resolved access to PPE for non-statutory-contracted services, and raising concerns unitedly e.g. atypical clinical presentations of patients.
- Maintain awareness of the localised picture during outbreak phases, including hospital capacity.
- Promote staff and leadership morale, best practice in leadership, networking, and addressed staff and provider concerns.
- Avoid repetition from multiple agencies to providers by addressing matters unitedly.
- Share provider and staff experiences, learning and initiatives.

Coordination and provision of emergency PPE supplies

Where providers are unable to source PPE through their usual routes, they can access emergency stock, sourced via the Local Resilience Forum (LRF) or purchased by the Royal Borough, through an online portal ([RBWM PPE request form](#)) with same day contactless collection or delivery. To date, the Royal Borough has been able to fulfil all provider requests for emergency supplies. If required, the Royal Borough will support providers to register with the National Supply Disruption Response.

Testing for staff and residents

Alongside national testing options, local testing for keyworker staff and their families has been in place since mid-April provided by Frimley ICS. For the borough, this is located at Ascot Racecourse and administered by the Schools Admission Team. Local providers are able to arrange a test for the next day through an online portal [COVID-19 Test Booking Form](#). 98% of tests arranged through the portal have been for the social care workforce.

For care home residents and people living in their own home, the Frimley ICS has developed a local testing pathway, providing a rapid response, to complement the national testing options.

Infection Prevention Control – Advice and Training

The Better Care Funded Care Home Quality Team and the CCG's Infection Prevention Control Team, alongside Berkshire Healthcare NHS Foundation Trust (BHFT), have provided infection control advice and training to all providers from the outset of the pandemic. This includes care homes, and supported living and domiciliary care providers. Clinicians attend both the local and Berkshire Care Association telecon calls and can be accessed directly through the Care Home Quality hotline, including out of hours. This training follows Public Health England's recommended approach to infection prevention and control; formal offers of training have been disseminated to care homes with a good take up in the borough. There are three super-trainers and 16 trainers available to support care homes.

Financial support to providers

On 27 March 2020, the Royal Borough published guidance regarding additional payments for providers to meet their COVID-19 response. This guidance, see Annex A, was circulated to all providers in the borough and includes payments for additional PPE, staff overtime payments, agency costs, administration, recruitment and training costs. Providers are paid quickly and on trust to ensure they have sufficient cash flow to source PPE and additional staff where needed. Some providers have already submitted claims; a breakdown of the payments already made can be found in Annex B.

Workforce – local co-ordination of returners and volunteers

The Frimley ICS Workforce Bureau is set up to coordinate the deployment of workforce and volunteers across the system. The bureau receives system allocations of returners and volunteers and has implemented daily monitoring of the NHS Capacity Tracker. It holds calls three times per week with system partners to monitor staffing levels and needs across the system in order to deploy staff and volunteers. In addition, the ICS has established a Volunteers Bureau to facilitate access to NHS Volunteer Responders.

Access to clinical support

In addition to infection prevention control advice and training the CCG has:

- Delivered a number of bespoke Health/Infection Prevention Control related training courses and resources for care homes across East Berkshire, for example a Standard Operating Procedure on Walking with Purpose.
- Negotiated with the local hospice to offer additional support to care homes on end of life care and bereavement support for staff.
- Worked with the local Mental Health Services in Berkshire Healthcare Foundation Trust to put a health and wellbeing package in place.
- Provided advice and support to care homes on medication through the Care Home Medicine Optimisation Team.
- Identified a clinical lead for each home and a Clinical Care model led by Primary Care networks.

Access to medical equipment and training

The Clinical Commissioning Group has undertaken an audit of medical equipment needed to manage residents with COVID-19 in care homes. As a result, pulse oximeters have been ordered for some care homes which will be distributed with training when received.

Advocacy services

The Royal Borough has contracts with local voluntary sector organisations to provide advocacy services for older people and people with a learning disability. The approach that the partnership is taking to support care homes is welcomed and endorsed by Age Concern Slough and Berkshire East. In response to the consultation on this care home support plan, Age Concern have commented, *“the partnership approach from the Royal Borough is not only endorsed and highly valued by our charity, but also by the elderly population we both serve. We have found the Royal Borough’s approach to open and consultative approach works well from both a strategic and operational perspective, where we can work in conjunction to plan and evaluate the ongoing needs of the elderly together.”*

CARE GOVERNANCE AND MARKET OVERSIGHT

Daily market oversight and monitoring

The Royal Borough monitors data daily from the NHS Capacity Tracker and LG Inform. This supplements information from the daily calls to providers and safeguarding intelligence in order to respond rapidly to offer support to providers. In order to apply market oversight across East Berkshire, the Royal Borough, Slough Borough Council and Bracknell Forest Council, with NHS partners, have established a twice weekly COVID-19 Care Governance group. The group considers and highlights concerns or challenges being faced by any particular care provider within the area; such as notifications of COVID19 outbreaks, deaths or staff resourcing which might impact on sustainability and continued safe operation within the home. These are then followed up with tailored support. For example, a teleconference was set up with a local care home provider that had experienced several outbreaks. The manager explained that all residents and staff had been swabbed but no results had been received. Over the next few days, all staff received training from the Infection Prevention Control Team and the Frimley ICS testing response attended to undertake re-tests.

Co-ordinated commissioning and support to providers

Across East Berkshire, the CCG and the three local authorities are working together through the existing East Berkshire Commissioning Group and East Berkshire Directors Group to develop and deliver the range of measures to support care home providers during the COVID-19 pandemic. Collaboration across health and social care is strong and continuing to evolve during the pandemic. This partnership also led the commissioning of additional bed capacity to support discharge from hospital. The Royal Borough plays an active role in the Thames Valley LRF and has led the co-ordination of work to understand provider pressures and financial impacts of COVID-19 to inform ongoing support to the market. The LRF has also agreed a protocol for mutual aid to cover a range of scenarios.

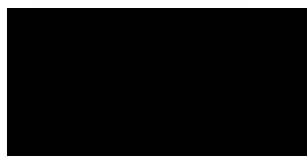
ALTERNATIVE ACCOMMODATION

Throughout the pandemic, the Royal Borough has worked in partnership with the CCG, BHFT, Frimley Health Trust, Slough and Bracknell Forest councils to ensure that people are able to be discharged from hospital in a timely manner and to prevent admissions to hospital where possible. This has built on the existing, highly effective, integrated arrangements.

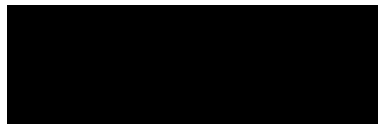
The Royal Borough is not a local provider of care homes for older people and so alternative accommodation for people who have tested positive and are unable to be accepted by their own care home must be commissioned from other local providers. In partnership across East Berkshire, 136 care home beds were block booked for discharge to assess, funded by the £1.3bn to CCGs. A temporary nursing home has also been CQC registered by an experienced local provider on a hotel site; this has not yet been commissioned but is available should the need arise. The local community hospital provider, BHFT, are also able to offer alternative care provision.

The overall approach to supporting local providers has been endorsed by the Health and Wellbeing Board and Local Healthwatch. Despite the challenges of the pandemic, the Royal Borough and its partners are confident that the measures put in place have and will continue to support providers effectively to provide the best quality care for the residents of the borough.

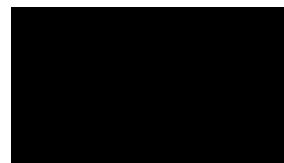
Yours sincerely



Duncan Sharkey
Managing Director
Royal Borough of
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Hilary Hall
Director of Adults, Health
and Commissioning
Royal Borough of Windsor
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Andy Brooks
Clinical Chief Officer
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(* According to the NHS Capacity Tracker/CQC list of care homes, there are 1,598 beds in the borough. However, 80 of those beds relate to a duplicate care home (Gracewell of Ascot is listed twice) and a further 80 beds were registered to a hotel site in anticipation of the COVID-19 surge requirements. The accurate figures are 1,438 beds in 37 care homes.

Royal Borough of Windsor and Maidenhead COVID-19 Payment and Additional Funding Guidance for Providers



Version 2: 5th May 2020

This replaces the previous guidance issued on 27th March 2020.

The Royal Borough of Windsor and Maidenhead has received an allocation of funding from government to support providers in responding to the COVID-19 pandemic. This guidance will be reviewed during the course of the pandemic in line with any further guidance from government.

Adult Homecare Providers - Standard Payments

- Homecare providers contracted to the borough will be paid on plan for care commissioned by the council; this will be subject to a subsequent reconciliation exercise. This does not mean that the council will pay for care that is not actually delivered. It is intended to ensure that providers have adequate cash flow during the COVID-19 period and that invoices are paid quickly. If people refuse care then providers will be entitled to claim for the notice period as per the contract agreed between them and the council.
- Providers will be paid as per the usual process, unless providers request alternative payments as a result of financial difficulty.
- The council will process payments quickly and not hold them up for queries. Queries may be raised and reconciled retrospectively. All providers are requested to submit invoices via email to ensure timely payment.
- Please submit invoices and visit data as normal, as this will enable us to process payments and client charges accurately.

This arrangement will apply to all care provided from week commencing 9th March 2020 through to the end of May 2020. The end date will be reviewed and, if necessary, extended.

Adult Residential and Nursing Homes and Supported Living Standard Payments

- Residential and Nursing Homes and Supported Living providers under contract with the borough will be paid as usual.
- Any new payments for FNC will be paid in full, and the Council will reconcile retrospectively with the CCG. This arrangement will apply through to the end of May in the first instance. The end date will be reviewed and if necessary extended.
- We will work with providers on an individual basis to flex these arrangements if they are experiencing financial difficulties. Please contact the Strategic Commissioning Team at strategic.commissioning@rbwm.gov.uk if you need to discuss this.

Other Community Support Providers

- Providers under contract with the borough will be paid as usual.
- We will process payments quickly and not hold them up for queries. Queries will be raised but will be resolved retrospectively.
- Please submit invoices by email where possible as this will enable us to process payments and charges quickly.

All providers – urgent need for financial assistance

In addition to the measures above, if any providers are experiencing financial difficulties, please contact the Strategic Commissioning Team at strategic.commissioning@rbwm.gov.uk . This will help us to consider whether we can make other changes to current arrangements to assist you.

We will continue to keep providers up to date about financial support that is being put in place nationally. We would ask all providers to review these options. Further information can be found at: www.gov.uk/government/publications/guidance-to-employers-and-businesses-about-covid-19/covid-19-support-for-businesses

Additional payments

For providers with CQC registered premises located in the borough, additional costs incurred through your COVID-19 response will be met by the Royal Borough of Windsor and Maidenhead. This is providing costs are reasonable and social care related, from the grants allocated by the government for this purpose. This includes additional “over and above” business as usual costs (examples in the list below) incurred by providers supporting residents of the Royal Borough of Windsor and Maidenhead who fund their own care.

Providers should capture these costs using a template which will be supplied.

Ordinarily, returns for additional costs should be submitted monthly by the 10th of the month and payment will be made no later than two weeks from submission.

Costs will be expected to be ‘over and above’ business and usual costs and may include:

- Additional cost of overtime paid to regular staff
- Additional agency / temporary staff employed
- Additional costs of recruitment including any additional advertising and training costs for staff to cover workforce shortages
- Any additional costs with “hard to fill” roles such as waking nights/sleep-ins such as additional pay to cover shifts above normal rates
- Additional travel costs
- Additional equipment or PPE purchased; the provider is expected to be using PPE in line with current government guidance
- Costs where the Royal Borough of Windsor and Maidenhead expressly approves the provision of support to a self-funder or a direct payment holder
- Additional administration costs related to the above points

Costs for staff bonus pay and loss of income from self-funders who refuse care will not be paid.

Providers should retain evidence to support expenditure incurred. We will pay this on trust, providing it meets the criteria above. However, we reserve the right to check retrospectively and claw-back funding if evidence is not made available.

Providers of domiciliary care and supported living contracted the borough with registered offices in another local authority area should contact strategic.commissioning@rbwm.gov.uk to discuss their individual circumstances.

Queries

Providers with queries on this guidance should contact the Strategic Commissioning Team at strategic.commissioning@rbwm.gov.uk

Changes have been made to the guidance from Version 1

1. As this funding has now been confirmed by Government to be for a different use to the funding for Clinical Commissioning Groups, the reference to CCGs in the original guidance has been removed. The funding to CCGs is for funding discharges from hospital, not to give providers funding for PPE costs etc.
2. The following in italics has been added to the guidance. It does not change the original guidance but adds clarity.
 - Homecare providers contracted to the borough will be paid on plan for care commissioned by the council; this will be subject to a subsequent reconciliation exercise. *This does not mean that the council will pay for care that is not actually delivered. It is intended to ensure that providers have adequate cash flow during the COVID-19 period and that invoices are paid quickly. If people refuse care then providers will be entitled to claim for the notice period as per the contract agreed between them and the council.*
3. The following sentence has been added. It does not change the original guidance but adds clarity.
 - *Costs for staff bonus pay and loss of income from self-funders who refuse care will not be paid.*

ANNEX B

Support to providers that the local authority has contract with			
	Domiciliary Care	Residential Care	Other Provision
Support being offered	Additional Pay - Current workforce e.g. overtime and enhancements, agency and temporary staff Recruitment Training Equipment and PPE Other COVID-19 associated costs.		
Total Spent to date since on supporting providers the local authority has contracts with, in response to COVID-19	£37,937	£227,668	£0
Support to providers that the local authority does not have contracts with			
	Domiciliary Care	Residential Care	Other Provision
Support being offered	Additional Pay – Current workforce e.g. overtime and enhancements. Agency and Temporary Staff Recruitment Training Equipment and PPE Other COVID-19 associated costs. Self-funders and people receiving direct payments.		
Total spent to date since on supporting providers the local authority does not have contracts with, in response to COVID-19.	£1,131	£11,545	£1,030