

RECORD OF OFFICER DECISION

APPROVAL FOR [PROPOSAL]

Decision made

To approve use of Stage 2 - flexibilities under the Care Act 2014 - for Adult Social Care, in line with Schedule 12, Coronavirus Act 2020

Made by: Alison Elliott, Director of Adult Social Services (DASS)

Background

1. As the Director for Adult Social Care I am responsible for any matters relating to adult social care in the County of Wiltshire on behalf of Wiltshire Council. The power to make a decision in respect of this matter is delegated to me pursuant to Wiltshire Council's Constitution.

Reason for decision

2. Regulations dated 31 March 2020 brought section 15 of, and Part 1 of Schedule 12 to the Coronavirus Act 2020 into force so that local authorities in England do not have to comply with certain duties in relation to meeting needs, and carrying out assessments, under the Care Act 2014, and to modify duties to meet needs under the Care Act 2014, until such time as regulations are in force under section 88 of the Act (power to suspend and revive provisions of the Act), or the Act is no longer in force. [Care Act Easements: Guidance for Local Authorities](#) dated 1 April 2020 sets out how Local Authorities can use the new Care Act easements, created under the Coronavirus Act 2020, to ensure the best possible care for people in our society during this exceptional period. The document provides guidance on steps local authorities should take before exercising the Care Act easements (section 6) and describes a four-stage model to support local decision making
3. The DHSC has emphasised that complying with Care Act duties must be 'business as usual' for as long as possible and in as much of each local authorities services as possible. The Care Act easements are not automatic. They are designed to enable authorities to "prioritise the most pressing needs" among those they would normally be under a legal duty should Covid-19 bring about a full-blown resource crisis. Specific circumstances to do with demand and workforce, when the easements can be applied are described and guidance, which councils must have regard to in their decision making, is provided.

Stages 1, and 2. are within Care Act:

Stage 1 - Operating the Care Act in full for as long as possible.

Stage 2 - Using flexibilities under the Care Act to prioritise care and support. E.g. certain types of service need to be changed, delayed or cancelled because of staff absence, carried out in consultation with the person.

Stages 3, and 4. Are within the Coronavirus Act:

Stage 3 - Streamlining services using the Care Act easements. If pressures mount to the point that it is no longer possible to meet Care Act duties in full, then councils should consider taking advantage of the Coronavirus Act provisions to suspend assessments, care planning, eligibility and reviews. DHSC must be notified.

Stage 4 - Whole-system prioritisation of care and support. This would involve reallocating resources between people and different service types to ensure the most urgent needs would be met. This is likely to involve use of the provision in the Coronavirus Act that suspends councils' duty to meet unmet eligible needs under section 18 of the act, other than when this would involve a human rights breach. DHSC must be notified.

The rationale and evidence for our current situation is described below:

Stage 1

In Wiltshire Council business as usual or stage 1 (Care Act easements guidance for local authorities; Annex A Decision-making table) is our default position and we have continued to work fully in line with the letter and the spirit of the Care Act 2014. We took rapid action to ensure we maintained this and, also responded to an anticipated increase in demand due to impact of coronavirus by:

- **Front door:** Moving additional social workers, occupational therapists and information officers to our advice and contact team which takes calls and e mails at the first point of contact to respond to increased volume of contacts and resolve these with high quality signposting, information and advice using personalised, strengths-based approaches; Adult Multi Agency Safeguarding Hub (MASH) took on all aspects of section 42 enquiries, continuing to carry out Investigating Manager role and additionally taking on the Investigating Officer role to free up social work capacity in long term teams;
- **Waiting lists:** Social workers, occupational therapists and customer coordinators (trained and experienced social care workers) taking a proactive and pragmatic approach in contacting people that have been awaiting our input and resolving, reducing or delaying their needs for care and support through use of personalised and strengths-based conversations;
- **Urgent response:** Putting in place dedicated workers to undertake the work that cannot be dealt with at the front door and is a crisis that requires an urgent response; Mental health teams enhanced their duty cover to include people presenting with mental ill health and /or severe anxiety who are not known to secondary mental health services; Community teams for people with learning disabilities prioritised customers most at risk of harm.
- **Releasing provider capacity:** A number of service users contacted us to say they did not need the care and support we were providing at this time as they were able to meet their needs by other means, usually family member(s) now being at home and able to support them. A conversation was had with each person and/or their representative to explore the circumstances, including any significant risks and clear messages conveyed to contact us again if there was a significant change to needs or arrangements to meet needs.
- **Joint working:** Closer working between Wiltshire Council departments and between adult social care and other agencies (including Wiltshire CCG, Wiltshire Health and Care, Avon and Wiltshire Mental Health Partnership Trust and a large number of provider services) to provide rapid response for individuals at significant risk of harm.

Stage 2

We took the decision for individual service types to prioritise short term allocation of care and support and began operating at stage 2 – applying flexibilities under the pre-amendment Care Act - for some parts of the service from week beginning 23 March 2020. This was in

response to providers giving us notice that they could no longer sustain a particular service or were going to close a particular service. It also was in response to implementation of the Covid – 19 Hospital Discharge Requirements (19 March 2020):

- **Service closure:** Orders of St John Care Trust gave notice of closure of day centres attached to care homes for older people. 31 users were contacted by an experienced registered social worker to discuss the closure and their needs. This identified 28 people who were able to meet their needs by others means within their own or community network and three people who needed support as a result of the service closure.
- **Hospital teams:** In line with the national hospital discharge requirements, teams in three acute hospital trusts – Royal United Hospital, Bath, Great Western Hospital, Swindon and Salisbury Foundation Trust – a team covering community hospitals and an intermediate care team commenced working seven days a week from 8am until 8pm. All teams are operating a 'discharge to assess' model and working closely with NHS and care provider colleagues.
- **Reablement:** The three occupational therapy led teams also commenced seven days 8-8 working; The inhouse reablement service has recruited and trained additional support workers. The service combined with Wiltshire Health & Care's Home First Service to provide a single discharge route and maximise staffing capacity. The whole service is now operating as a 'Home First' service.
- **In house domiciliary care:** We have developed a Wiltshire Council domiciliary care service utilising newly recruited and trained workers to ensure capacity in the market to meet demand.
- **Mental health:** Teams have been supporting the discharge of all appropriate in-patients on psychiatric wards. This is to help enable the setting up of an isolation psychiatric ward for the admission of individuals with symptoms of Covid-19 to prevent wider spread.
- **Supporting legal and ethical decision making:** Principal Social Worker and Principal Occupational Therapist have developed and implemented a framework for 'Decision Making in Adult Social Care', supported by guidance on strengths-based working and guidance on the Mental Capacity Act. The principle here is that we will adhere as closely as possible to the Care Act and in line with the Ethical Framework for ASC (DHSC, March 2020). We amended our electronic record system to reflect this and put this in place for all teams from 2 April 2020.
- **Good practice in adult social care:** All of the above took place within the context of embedded good practice approaches of strengths-based working by information officers, social workers, occupational therapists, customer coordinators and others that puts the person at the centre of each conversation and focuses on their assets, provides high quality information and advice and works alongside the person to reach a tailored solution to meeting their needs for care and support.

I confirm that in making this decision I have considered the following in line with Wiltshire Council's Constitution: **(Please insert 'Yes' / 'No' / 'Not Applicable' and any other comments necessary to evidence the issue identified has been addressed)**

Key decision requirements	YES
Views of relevant cabinet member(s), committee chairman, area board(s)	YES – Leader and Cabinet Member
Consideration of the area boards and delegated decision checklist for officers on the issue of when and how to involve local councillors and area boards in decisions about local services	YES

Implication of any council policy, initiative, strategy or procedure	YES
Consultation in accordance with requirements and expectations of consultation with the public	YES A number of partner agencies were consulted including Elizabeth Disney, Wiltshire CCG
Range of options available	YES
Staffing, financial and legal implications	YES
Risk assessment	YES
Involvement of statutory officers and/or directors	Terence Herbert - Chief Executive Officer, People; Alistair Cunningham, Chief Executive Officer, Place; Emma Legg Director, ASC Operations; Claire Edgar Director, LD and MH; Helen Jones, Director, Commissioning; Kim Holmes, Principal Social Worker
Regional or national guidance from other bodies	YES. National guidance confirms the requirement for a decision making report on stage 2 to be considered by the DASS and for the decision to be recorded.
The council's constitution	YES

Conflict of Interest

4. None

Other options considered

5. Fully described in the four stages set out above.



Made by:

Alison Elliott, Director of Adult Social Services

Date: 28 April 2020