

Appendix One Herefordshire Council and COVID-19

Care Act easements

The Coronavirus Act 2020 sets out the following easement of Care Act 2014 duties as below.

- a) Councils will not have to carry out detailed assessments of people's care and support needs in compliance with pre-amendment Care Act requirements. However, they will still be expected to respond as soon as possible (within a timeframe that would not jeopardise an individual's human rights) to requests for care and support, consider the needs and wishes of people needing care and their family and carers, and make an assessment of what care needs are to be provided.
- b) Councils will not have to carry out financial assessments in compliance with pre-amendment Care Act requirements. They will however, have powers to charge people retrospectively for the care and support they receive during this period, subject to giving reasonable information in advance about this, and a later financial assessment.
- c) Councils will not have to prepare or review care and support plans in line with the pre-amendment Care Act provisions. They will however still be expected to carry out proportionate, person-centred care planning which provides sufficient information to all concerned, particularly those providing care and support, often at short notice.
- d) The duties on councils to meet eligible care and support needs, or the support needs of a carer, are replaced with a power to meet needs.

The Easement measures will operate alongside the [COVID-19 Hospital Discharge Service Requirements](#). Councils do not have to undertake financial and eligibility assessments for people who are being discharged as part of the enhanced hospital discharge service.

Assessment process

Capacity levels will continue to be monitored to assess whether it is possible to maintain normal Care Act assessments and reviews.

As well as supporting decision making on the most appropriate route for patient discharge, the Council's other key contribution to the Coronavirus COVID-19 hospital discharge pathway, is to take referrals and move people out of acute hospital beds in order to maintain flow.

The Council will also need to maintain the usual contact and triage arrangements for people in the community, and make proportionate assessments where necessary. The Council will therefore introduce a COVID-19 assessment process for as long as the circumstances require.

The COVID-19 assessment process must still involve a short assessment, which would capture sufficient information, based on the Care Act domain, to make a decision about whether an individual needs care and the most appropriate care when leaving Hospital. This would avoid introducing delays into the COVID-19 hospital discharge pathway, and allow best use to be made of social work capacity. A similar assessment is being drafted for those in the community whilst currently utilising current assessment forms. The undertaking of assessments would be completed in line with the Councils Guidance for Assessment Prioritisation Escalation Policy (copy attached as **Appendix A**) and in most cases, where possible, will be undertaken over the phone in order to reduce the risk of spreading infection.

Any assessment process will include the consideration of an individual's Human Rights and also take into account the COVID-19 Ethical Framework for Adult Social Care, with a guidance document attached as **Appendix B**.

Individuals, who need care, would be referred to Broker in the usual way, along with the new assessment that includes sufficient information for providers to understand the care required.

A Care Act compliant assessment and support plan along with a financial assessment would be completed at the first opportunity following the conclusion of the coronavirus COVID-19 epidemic. Individual's financial contributions to their care would be backdated for the care they receive during the period from initiation to completion of the financial assessment.

Decision-making about personal budgets, including direct payments, and care plans will be undertaken with minimum restraints on flexibility and innovation in how needs can be met, including use of exceptional circumstances policy to pay family members where no alternatives available.

A light touch financial assessment will be conducted to establish provisional charges based on financial information that is readily available to the council, including DWP pension/benefit information.

Individuals who are assessed as being able to manage, without regulated care during the coronavirus COVID-19 epidemic, would be referred for support from the voluntary and community sector, and also the Councils Talk Community. They would be contacted at the first available opportunity following the conclusion of the coronavirus COVID-19 epidemic to determine whether they would wish to proceed to a Care Act compliant assessment.

Routine Care Act reviews will be suspended until future notice, whilst urgent reviews, in the event that individuals who are receiving Council funded care services require immediate and significant changes to their care, would be maintained in line with the Escalation Policy.

Duties under the Care Act relating to safeguarding adults at risk will continue to be discharged. Safeguarding activity will be prioritized to ensure that cases are investigated and resolved in a timely way proportionate to the severity of the concern.

Prioritisation

Prioritisation would be achieved by:

- a) Triaging new referrals through the COVID-19 assessment process, and brokering home care for medium and high-risk individuals, with home care for low risk individuals deferred. As above, they will be contacted at the at the first opportunity following the conclusion of the coronavirus COVID-19 epidemic to determine whether they still wish to proceed to a Care Act compliant assessment.
- b) Working with Home Care providers to triage existing home care packages, continuing care for medium and high-risk individuals, and suspending care for low risk individuals. It is expected that the total number of Green rated individuals equate to 182 people, 1,100 hours out of a total 10,000 hours commissioned on a weekly basis. These people would be notified individually of the changes to their care and given an opportunity to raise any concerns. Packages will only be suspended in those area where this is necessary to free up capacity for new high and medium risk individuals and support hospital discharges. It is important to note that Herefordshire has a high number of self-funders within the market and this needs to be considered with all decisions.

A system of welfare checks would be put in place for low risk individuals for whom care services has been deferred of suspended. These might include occasional care visits, voluntary and community sector support, and / or telephone contacts.

Herefordshire Council

Covid 19 Care Act Easement Operational Criteria for Allocation and Assessment Prioritisation and Escalation Process

1. Introduction

This document sets out the allocation and escalation criteria of Adult Social Care cases where through the Covid emergency there is insufficient capacity to assess all individuals and or insufficient resources to meet needs in the usual way. This guidance has been written with reference to the Care Act Guidance and the Ethical Framework guidance published by the Department of Health in Response to Covid -19.

We are committed to providing a consistent service to adults in Herefordshire but in the current climate this may not be possible. This procedure has been devised in recognition of the potential need for us to have to make difficult decisions should the need arise.

The primary goal of the escalation process is to determine the needs of the adult and also identify who could fulfill those needs in the absence of any formal care arrangements being identified. The purpose of the escalation process is to assess the adult's current situation, taking into consideration any historical concerns, the impact of the current COVID 19 situation and subsequent lockdown and any identified or potential risks, and then make a decision about the level of risk.

2. General Principles

Non Urgent Work

Routine planned reviews or reassessments that are not resulting from a change of need which put the adult or their carer at risk. These will not be undertaken until further notice unless the work can be undertaken by phone and there is capacity and it is deemed appropriate by the Locality Manager for it to be undertaken.

New Assessments and Change of Needs

The framework for new assessment and assessments associated with substantial changes in needs will continue to be delivered. Where and when assessment capacity is compromised, all new and change of needs cases will be triaged as follows:

Triage – Higher level risk

- **Priority 1** : Crisis intervention to prevent immediate harm within the same day up to 48 hours (this includes safeguarding responses) .
- **Priority 2** : Urgent intervention preventing imminent breakdown of care arrangements, hospital discharges (this includes safeguarding) .

Triage – Lower level risk

- **Priority 3** : Where there is staffing capacity and where a telephone assessment can be undertaken this can be undertaken but there is no immediate concern of breakdown in care arrangements or safeguarding risk to the customer or carer.
- **Priority 4** : Low level needs; will not be assessed – advice, guidance and signposting will be provided over the phone.

All triaged cases that lead to an assessment, must take into account the Care Act Easement and resources available, for example Home care and the agreed level of need established with The Council that Home Care providers would be providing. (see appendix Councils Prioritisation Tool).

Note: *Once a formal decision is made that as an authority we are moving to Stage 3 under the Easement of the Care Act, it is unlikely we will be able to continue to allocate all Priority 3 or 4 type cases from this point. We however will continue to adhere to all relevant duties and responsibilities as required, and in particular ensure that consideration of an individual's Human Rights are not breached.*

Where individuals have been assessed, needs have been identified and there is no care or partial care and support available in addition to consideration of an individual's Human Rights; these cases need to be tracked and recorded as they are likely to be among our most vulnerable residents as they may have already been prioritised for allocation.

Any concerns regarding these individuals must be escalated to the Locality Manager and should concerns not be resolved; escalated to Service Managers, Jo Haycock, Karen Capewell and Justine Bennett and appropriate system partners to explore alternative options. If this cannot be resolved at this stage, these adults must be escalated to the AD of Operations (Mandy Appleby).

All cases that cannot be allocated will need to be tracked – Appendix A

3. Escalation of priority cases

Any concerns regarding individuals with an urgent need, or those that have needs that must be met to avoid a breach of their human rights, that cannot be allocated, or provided for once assessed MUST be escalated to the Locality Manager and should concerns not be resolved, then escalated to Service Managers, Jo Haycock, Karen Capewell and Justine Bennett. If this cannot be resolved at this stage, these adults must be escalated to the AD of Operations (Mandy Appleby).

All cases that need to be escalated to service manager/AD – Appendix B

Additional Information

Where possible, as much of the assessment process and care planning will be done by telephone with full written case notes and a record of any decision made, with visits only taking place in those situations where there is felt to be no safe alternative. All assessments will be required to be proportionate to the need. Usual statutory requirements with regards to the Mental Capacity Act, Deprivation of Liberty Safeguards and Safeguarding will remain unchanged but will be monitored in respect of capacity and demand.

PPE

Before any direct service or family contact please ensure that you have sought advice on the appropriate PPE guidance. The official guidance has changed on this so will not be set out here but can be found at <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control>

Financial Assessments

Currently for individuals leaving hospital and for urgent care provision to avoid actual admission to hospital, the Department of Health Discharge Guidance applies. For these individuals, there is an alternative fast track process which excludes a financial assessment.

As part of the Care Act Easements and prioritisation of work, a decision may need to be taken to pause financial assessments for new individuals needing social care services. All such

decisions, which will affect how you work, will be communicated if they arise either due to referral demand or workforce capacity issues.

Analysis of recommendations against the COVID-19 Ethical Framework for Adult Social Care

Guidance from the Department of health and social care have been released (current publication 19th March 2020) titled '**RESPONDING TO COVID 19 THE ETHICAL FRAMEWORK FOR ADULT SOCIAL CARE**'.

It is recognised that during this current time, difficult decisions will need to be made given the exceptional pressures we will have with regards to work force capacity time, resources and information.

Decisions still made in a manner that are in accordance with the law, and in line with statutory guidance, as well as professional judgement.

The framework is a 'support tool' to support planning and decision making to ensure that ample consideration is given to any ethical values, as well as principals when organising and delivering adult social care and reinforce that consideration of any potential harm that might be suffered, and the needs of all individuals is always central to decision-making.

The framework reminds us that appropriate written records are needed when decisions are taken, with the relevant justification to ensure accountability.

	COVID-19 assessment process	The likely effects on prioritising home care / Care Homes placements and other commissioned services once Easement of Care Act enacted
<p><u>Respect</u></p> <p>Recognising that every person and their human rights, personal choices, safety and dignity matters.</p>	<p>The assessment process will continue to provide people with the opportunity to express their views and preferences, however the ability for HC to continue to meet this choice may be restricted.</p> <p>Where a person may lack capacity, the COVID-19 assessment process will continue to ensure that a person's best interests and support needs are considered by those who are responsible or have relevant legal authority to decide on their behalf.</p> <p>HC will communicate that a full assessment will be available at the end of the crisis.</p>	<p>The ability to meet a person's choice of care and support including home care and care home placements may be restricted due to the available resource or lack of choice during the COVID-19 emergency period.</p> <p>Choice, for any commissioned services, is likely to be highly restricted and in some cases, no choice will be available. Following the end of the COVID-19 epidemic, all assessments will be reviewed.</p>
<p><u>Reasonableness</u></p> <p>Ensure that decisions are rational, fair, practical</p>	<p>It would not be reasonable to continue to operate the normal Care Act compliant care/financial assessment as HC would have</p>	<p>It would not be reasonable for people at low risk to continue to receive home care whilst new</p>

<p>and grounded in appropriate processes, available evidence and a clear justification.</p>	<p>insufficient resources to deliver this function, and people would be required to wait long periods of time for an assessment.</p> <p>The use of COVID-19 assessment ensures that decisions are made based on the evidence and information provided.</p> <p>At this time, it is reasonable to consider alternative options and new ways of thinking.</p>	<p>people at high and medium risk were unable to access home care.</p> <p>Full consideration of an individual's needs, as well as their Human Rights, will be considered in line with HC's Escalation Policy and in consideration of those with priority needs.</p> <p>Careful consideration of an individual will be undertaken to avoid any delay regarding hospital discharges as well as consideration of an individual who was previously in the community and needs to transfer into a Care Home setting.</p>
<p><u>Minimising harm</u></p> <p>Striving to reduce the amount of physical, psychological, social and economic harm that the outbreak might cause to individuals and communities. In turn, this involves ensuring that individual organisations and society as a whole cope with and recover from it to their best ability.</p>	<p>The use of COVID-19 assessment process enables people to receive assessments without the need to see people face-to-face when ever safe and possible to do so therefore supports social distancing and reduces the risk of contracting or spreading the virus.</p> <p>It enables HC to make informed decisions based on information and evidence provided which support vulnerable people.</p>	<p>By prioritising individuals who require Home Care and/or Care Homes, or any other care and support services - this will minimise the need for these individuals to be admitted to acute hospital.</p>
<p><u>Inclusiveness</u></p> <p>Ensuring that people are given a fair opportunity to understand situations, be included in decisions that affect them, and offer their views and challenge. In turn, decisions and actions should aim to minimise inequalities as much as possible.</p>	<p>The COVID-19 assessment process will apply for all care groups and will ensure people, families and carers continue to be involved in their assessment process.</p> <p>It enable decisions to be transparent, with clear justification.</p>	<p>Home Care Providers and Care Home Providers, along with HC's adult social care teams are potentially likely to need to prioritise individuals with higher need over those are deemed to have lower needs . A process is in place in order to do this.</p> <p>Individuals and families will be notified individually of the changes to their care and given an opportunity to raise any concerns.</p> <p>Clear and transparent decision making will be required. Communication will need be needed to support those effected.</p>

		Reviews will be undertaken if an individuals circumstances change to a point or at the end of the emergency period.
<p><u>Accountability</u></p> <p>Holding people to account for how and which decisions are made. In turn, this requires being transparent about why decisions are made and who is responsible for making and communicating them.</p>	<p>SMT, Cabinet and NHS partners have been consulted on this decision, and an Equality Impact Assesment has been completed.</p> <p>Guidance has been completed for staff to enable them to work in the new arrangements. Ensuring that staff are aware of the changes and supported if required to work outside of their normal areas of expertise.</p>	<p>SMT, Cabinet and NHS partners have been consulted on this decision, and an Equality Impact Assessment has been completed.</p>
<p><u>Flexibility</u></p> <p>Being responsive, able, and willing to adapt when faced with changed or new circumstances. It is vital that this principle is applied to the health and care workforce and wider sector, to facilitate agile and collaborative working.</p>	<p>Where possible services are being aligned with health to maximise efficiency and effectiveness to the benefit of the Herefordshire citizens.</p> <p>The arrangements are being monitored daily and will continue to evolve to respond to the changing circumstances.</p> <p>Enables HC to respond and adopt to change as they may occur. Ensuring that both Health and social care workforce are working together.</p>	<p>The available home care and Care Homes are being monitored daily to ensure that HC can meet the needs of people at high and medium risk, or can attempt to address any service failures at the earliest chance possible.</p> <p>Other commissioned services are being kept under review.</p> <p>Consideration for flexible use of Direct Payments can be considered.</p> <p>Utilising Herefordshire' significant volunteering capacity is being co-ordinated to support individuals who are most vulnerable. This in turn supports the Council to target formal services to those with the greatest need.</p>
<p><u>Proportionality</u></p> <p>Providing support that is proportional to needs and abilities of people, communities and staff, and the benefits and risks that are identified through decision-making processes.</p>	<p>The COVID-19 assessment enables HC to assist people with care and support needs within the resource available.</p> <p>Continue to act on statutory duties where possible.</p> <p>Provide support for those that now need care or have extra responsibility to care for others.</p>	<p>The prioritisation of home care and Care Homes enables HC to assist people with priority care and support needs, within the resource available.</p> <p>Clear decision-making processes and a clear written record.</p>

<p><u>Community</u></p> <p>A commitment to get through the outbreak together by supporting one another and strengthening our communities to the best of our ability.</p>	<p>The COVID-19 assessment process utilises the role of voluntary, community sector and HC's Talk Community (for example referring people for the delivery of food parcels).</p> <p>Using available resources and deployment of staff to assist and support the community.</p>	<p>Individuals who can manage without regulated care for a short period may be referred for support from the voluntary, community sector and HC's Talk Community.</p> <p>A system of welfare checks will be put in place for low risk individuals for whom home care has been deferred or suspended.</p> <p>These might include occasional care visits, voluntary and community sector support, and/or telephone contacts.</p>