

## Winter Plan 2020/21

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2	<b>Theme 1: Preventing and controlling the spread of infect</b>			
3	<b>Reference</b>	<b>Actions Required by Local Authorities</b>	<b>Current status</b>	<b>Requirement fully met (Y/N)?</b>
4	1.1	continue to implement relevant guidance and circulate and promote guidance to adult social care providers in their area, including for visitors		
5	1.2	<a href="#">directors of public health should work with relevant partners including Public Health England and local health protection boards to control local outbreaks and should refer to the contain framework</a>		
6	1.3	support care homes, working with local partners to carry out learning reviews after each outbreak to identify and share any lessons learned at local, regional and national levels		
7	<b>Managing staff movement</b>			
8	1.4	distribute money from the Infection Control Fund, and submit returns on how the funding has been used in line with the grant conditions		
9	1.5	<a href="#">consult the guidance available on redeploying staff and managing their movement, and support providers in their area to access other initiatives – for example Bringing Back Staff</a>		
10	1.6	continue to review contingency arrangements to help manage staffing shortages, within social care provision, through the winter, with the aim of reducing the need for staff movement		

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11	1.7	provide clear communication to social care providers regarding the importance of implementing workforce measures to limit COVID-19 infection, signpost relevant guidance, and encourage providers to make use of additional funding where appropriate		
12	1.8	actively monitor Capacity Tracker data to identify and act on emerging concerns regarding staff movement between care settings, including following up with care providers who are not limiting staff movement		
13	<b>Personal protective equipment (PPE)</b>			
14	1.9	<a href="#">follow all relevant guidance on use of PPE, including recommendations for those providing support to people with learning disabilities or autistic people</a>		
15	1.10	<a href="#">make use of free government-funded PPE stocks where needed and in line with COVID-19 PPE guidance. Care homes and domiciliary care providers, along with some others, are eligible to register for the PPE portal guidance and can obtain free PPE through this route. Providers ineligible to register for the portal (for example, personal assistants), should obtain PPE from their LRF (if it is continuing to distribute PPE), or their local authority</a>		
16	1.11	in the event of urgent need for PPE stocks, use the National Supply Disruption Response (NSDR) or contact their LRF to access free emergency supply from the LRF stockpile		
17	1.12	report shortages via Capacity Tracker and/or the CQC community care survey		
18	<b>COVID-19 testing</b>			

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19	1.13	ensure positive cases are identified promptly, make sure care providers, as far as possible, carry out testing as per the testing strategy and and, together with NHS organisations, provide local support for testing in adult social care, if needed		
20	1.14	actively monitor their local testing data to identify and act on emerging concerns, including following up with care homes that are not undertaking regular testing, as per the guidance		
21	<b>Seasonal flu vaccines</b>			
22	1.15	support communications campaigns encouraging eligible staff and people who receive care to receive a free flu vaccine		
23	1.16	direct providers to local vaccination venues		
24	1.17	work with local NHS partners to facilitate and encourage the delivery of flu vaccines to social care staff and residents in care homes		
25	<b>Theme 2: Collaboration across health and care</b>			
26	<b>Reference</b>	<b>Actions Required by Local Authorities</b>	<b>Current status</b>	<b>Requirement fully met (Y/N)?</b>
27	<b>Safe discharge from NHS settings and preventing avoidable admissions</b>			
28	2.1	(including commissioning of care home beds). The local		
29	2.2	establish an Executive Lead for the leadership and delivery of the discharge to assess model;		
30	2.3	establish efficient processes to manage CHC assessments in line with the guidance on the reintroduction of NHS continuing healthcare (as well as the discharge guidance), which includes extending the use of the Trusted Assessor Model and digital assessments		
31	2.4	assessments, drawing on discharge funding but without		

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32	2.5	work with partners to coordinate activity, with local and national voluntary sector organisations, to provide services and support to people requiring support around discharge from hospital and subsequent recovery		
33	<b>Enhanced health in care homes</b>			
34	2.6	themselves arrangements are in place.		
35	<b>Technology and digital support</b>			
36	<b>Social prescribing</b>			
37	2.7	work closely with SPLWs (social prescribing link workers) to co-ordinate support for people identified by health and care professionals as most needing it, especially those impacted by health inequalities and autistic people and people with learning disabilities		
38	2.8	ensure SPLWs have the support and equipment to work remotely and access GP IT systems		
39	<b>Theme 3: Supporting people who receive social care, the v</b>			
40	<b>Reference</b>	<b>Actions Required by Local Authorities</b>	<b>Current status</b>	<b>Requirement fully met (Y/N)?</b>
41	<b>Supporting independence and quality of life</b>			
42	3.1	give a regular assessment of whether visiting care homes is likely to be appropriate, within their local authority, or within local wards, taking into account the wider risk environment		
43	3.2	if necessary, impose visiting restrictions if local incidence rates are rising, and immediately if an area is listed as 'an area of intervention'		
44	<b>Direct payments</b>			

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45	3.3	consult the new guidance for the actions that they should undertake to ensure that people receiving direct payments, their families and carers are able to meet their care and support needs this winter		
46	3.4	give people with direct payments the level of flexibility and control as envisaged in the Care Act and NHS Direct Payment regulations and accompanying guidance, allowing them to stay well, and get the care and support they need		
47	<b>Support for unpaid carers</b>			
48	3.5	make sure carers, and those who organise their own care, know what support is available to them and who to contact if they need help		
49	3.6	follow the direct payments guidance and be flexible to maximise independence		
50	3.7	ensure that assessments are updated to reflect any additional needs created by COVID-19 of both carers and those in need of social care		
51	3.8	to consider how they can reopen safely or be reconfigured to		
52	3.9	where people who use social care services can no longer access the day care or respite services that they used before the pandemic, work with them to identify alternative		
53	<b>End-of-life care</b>			
54	3.10	ensure that discussions and decisions on advanced care planning, including end of life, should take place between the individual (and those people who are important to them where appropriate) and the multi-professional care team supporting them. Where a person lacks the capacity to make treatment decisions, a care plan should be developed following where applicable the best interest check-list under the Mental Capacity Act		

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55	3.11	implement relevant guidance and circulate, promote and summarise guidance to the relevant providers. This should draw on the wide range of resources that have been made available to the social care sector by key health and care system partners and organisations including those on the NHS website and those published by the Royal Colleges of GPs		
56	<b>Care Act easements</b>			
57	3.12	only apply the Care Act easements when absolutely necessary		
58	3.13	notify DHSC of any decisions to apply the Care Act easements		
59	3.14	communicate the decision to operate under easements to all providers, people who need care and support, carers and local MPs in an accessible format		
60	3.15	meet the needs of all people where failure to do so would breach an individual's human rights under the European Convention on Human Rights		
61	3.16	<a href="#">follow the Ethical Framework for Adult Social Care when making decisions regarding care provision, alongside relevant equalities-related and human rights frameworks</a>		
62	3.17	work closely with local NHS CHC teams, to ensure appropriate discussions and planning concerning a person's long-term care options take place, as early as possible after discharge		
63	<b>Supporting the workforce</b>			
64		<b>Staff training</b>		
65	3.18	ensure providers are aware of the free induction training offer and encourage them to make use of it		
66	3.19	promote and summarise relevant guidance to care providers		
67		<b>Supporting the wellbeing of the workforce</b>		

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68	3.20	maintain, where possible, the additional staff support services which they put in place during the first wave of the pandemic		
69	3.21	review current occupational health provision with providers in their area and highlight good practice		
70	3.22	promote wellbeing offers to their staff and allow staff time to access support, as well as promoting to providers in their area		
71		<b>Workforce capacity</b>		
72	3.23	continue to review contingency arrangements to help manage staffing shortages within social care provision through the winter		
73	3.24	consult the guidance available on deploying staff and managing their movement, and support providers in their area to access other initiatives – for example Bringing Back Staff		
74	3.25	consider how voluntary groups can support provision and link-up care providers with the voluntary sector where necessary		
75	3.26	support providers, in their area, to complete the capacity tracker and update their adult social care workforce data set (ASCWDS) records to help ensure effective local capacity monitoring and planning		
76	<b>Shielding and people who are clinically extremely vulnerable</b>			
77	3.27	Local authorities will coordinate local support if shielding is reintroduced in a local area. This includes provision of enhanced care and support for CEV people on the shielded persons list		
78	<b>Social work and other professional leadership</b>			

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79	3.28	ensure that their social work teams are applying legislative and strengths-based frameworks (including those based on duties under the Care Act and Mental Capacity Act) and support partner organisations such as the NHS to do the same		
80	3.29	ensure social work practice is fully cognisant of and acts on the issues of inequality and deprivation and the impact this has on communities and people's access to health and social care services		
81	3.30	understand and address health inequalities across the sector and develop actions with partners, where required, taking into account the implications of higher prevalence of COVID-19 in Black, Asian and minority ethnic communities and inequalities experienced by people with learning disabilities, autistic adults, and people with mental health difficulties		
82	3.31	review their current quality assurance frameworks and governance oversight arrangements to ensure that winter and COVID-19 pressures do not reduce the ability to deliver high-quality social work practice		
83	3.32	develop and maintain links with professionals across the health and care system to ensure joined-up services		
84	3.33	<a href="#">Social Care, ensuring that NHS partners fully understand their responsibilities to apply the ethical principles and values as part of discharge to assess delivery</a>		
85	3.34	ensure that the application of new models and pathways are offering the best possible outcome for individuals, their families and loved ones, advocating for them and advising commissioners where these pathways cause a conflict		



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86	3.35	review any systemic safeguarding concerns that have arisen during the pandemic period and ensure actions are in place to respond to them, enabling readiness for any increased pressures over the winter period		
87	3.36	support and lead social workers and safeguarding teams to apply statutory safeguarding guidance with a focus on person-led and outcome focused practice		
88	<b>Theme 4: Supporting the system</b>			
89	<b>Reference</b>	<b>Actions Required by Local Authorities</b>	<b>Current status</b>	<b>Requirement fully met (Y/N)?</b>
90	<b>Funding</b>			
91	4.1	provide DHSC with information about how the money Infection Control Fund has been spent by 30 September 2020		
92	4.2	continue to maintain the information they have published on their websites about the financial support they have offered to their local adult social care market		
93	4.3	provide regular returns to DHSC on the spending of the extended Infection Control Fund in line with the grant conditions		
94	<b>Market and provider sustainability</b>			
95	4.4	work with local partners to engage with the Service Continuity and Care Market Review, and – when requested – complete a self-assessment of the health of local market management and contingency planning leading into winter		
96	4.5	continue to work understand their local care market; and to support and develop the market accordingly		
97	4.6	continue to support their provider market as needed, to secure continuity of care, including promoting the financial support available		
98	<b>CQC support: Emergency Support Framework and sharing best practice</b>			

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99	4.7	work with the CQC to promote and inform providers about monitoring processes		
100	<b>Local, regional and national oversight and support</b>			
101	4.8	write to DHSC by 31 October confirming they have put in place a winter plan and that they are working with care providers in their area on their business continuity plans, highlighting any key issues if needed, in order to receive the second instalment of the Infection Control Fund. These plans should consider the recommendations of this Winter Plan, and involve NHS and voluntary and community sector		
102	4.9	continue current oversight processes, including delivery of Care Home Support Plans and engagement with regional feedback loops		
103	4.10	continue to champion the Capacity Tracker and the CQC community care survey and promote their importance as a source of data to local providers and commissioners		
104	4.11	establish a weekly joint communication from local directors of adult social services and directors of public health to go to all local providers of adult social care, as a matter of course, through the winter months		
105	<b>Care home support plans</b>			
106	4.12	whether care homes were able to implement infection prevention and control measures		
107	4.13	access to support, including clinical support from primary care		
108	4.14	the expanded offer of COVID-19 testing for all residents and asymptomatic staff		
109	4.15	their overall supply of medical and personal protective equipment and training to use it effectively		

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3	<b>Actions required to fill gaps</b>	<b>By Who?</b>	<b>By When?</b>	
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25	<b>services</b>			
26	<b>Actions required to fill gaps</b>	<b>By Who?</b>	<b>By When?</b>	
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39	<b>workforce, and carers</b>			
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89	<b>Actions required to fill gaps</b>	<b>By Who?</b>	<b>By When?</b>	
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