URGENT DECISION FORM



TO BE UPLOADED ON TO THE INTERNET BY DEMOCRATIC SERVICES

Date: 06/05/	2021	Ref No:						
Type of Decision:								
Cabinet Decision	Yes	Council Decision	N	lo				
Key	Yes	Non-Key						
Subject matter:								
Distribution of the new Adult Social Care Infection Prevention and Control and Testing Fund April 2021-June 2021, to Care Homes, high-risk Supported Living Providers and other Community Settings in accordance with grant conditions								
To distribute the fund rate of transmission infection prevention a to conduct additional living and extra care s	of Covid-19 within and control practices rapid testing of staff settings, to enable cl	and between care and increase the upt f and visitors in care	settings thake of staff homes, higl	nrough effe vaccinatior h-risk suppo	ctive and			
Equality Impact Ass [Does this decision procedure or workin negatively impact o people? If yes – co summarise issues in recommendations – Corporate HR]	change policy, ng practice or n a group of omplete EIA and lentified and	Not Applicable						
Decision taken:								
The Emergency Pov	vers Group is aske	d to:						
 Note Bury Council's further allocation of an additional £1.2m from the recently announced new Adult Social Care Infection Prevention and Control and Testing Fund April 2021-June 2021 Note the grant conditions and the distribution methodology Note the reporting requirements May to July 2021 								
Decision taken by:		Signature:	Date:					

Chief/Senior Officer/Cabinet Chair		
	Wishin	
After consultation with:		
Cabinet Member (if a Key Decision) or Chair or Lead Member (as appropriate)	A. a. Sing	13.05.21
If it is a Key Decision, the Chair of Scrutiny Committee to agree that the decision cannot be deferred	Councillor Robert Caserta consulted	13.05.21
Opposition Leader or nominated spokesperson (Council Decision) or	Councillor Nick Jones consulted	14.05.21
Leader or Majority Group Member on Overview and Scrutiny Committee (if a Key Decision) to agree that the decision cannot be deferred		
Leader of second largest Opposition Group (if a Key/Council Decision) to agree that the decision cannot be deferred	Councillor Michael Powell consulted	13.05.21
Leader of second largest Opposition Group (if a Key/Council Decision) to agree that the decision cannot be deferred	Councillor James Mason consulted	13.05.21

1 Background

- 1.1 The Adult Social Care Infection Control Fund was first introduced in May 2020. The fund was extended in October 2020 and, by March 2021 had provided over £1.1billion of ring-fenced funding to support adult social care providers in England for infection prevention and control (IPC). The Rapid Testing Fund was introduced in January 2021 to support additional rapid lateral flow testing of staff in care homes, and enable indoors, close contact visiting where possible.
- 1.2 Due to the success of the Infection Control Fund and the Rapid Testing Fund in supporting care providers to reduce transmission and re-enabling close contact visiting, these funding streams have been consolidated and extended until June 2021, with an extra £341 million of funding nationally. This is a new grant, with separate conditions to the original Infection Control Fund, the extension to the Infection Control Fund and the original Rapid Testing Fund. This brings the total ring-fenced funding for infection

prevention and control to almost £1.35 billion and support for lateral flow testing to £288 million in care settings.

- 1.3 The purpose of this fund is to support adult social care providers, including those with whom the local authority does not have a contract, to:
 - Reduce the rate of Covid-19 transmission within and between care settings through effective infection prevention and control practices and increase the uptake of staff vaccination.
 - Conduct additional rapid testing of staff and visitors in care homes, high-risk supported living and extra care settings, to enable close contact visiting where possible.
- 1.4 The funding will be paid in a single payment in April 2021. All funding must be used for the measures outlined in the summary embedded below.



Local Authorities should pass on:

- 70% of the IPC allocation to care homes on a 'per bed' basis, and CQC-regulated community care providers on a 'per user' basis; and
- 60% of the rapid testing allocation to care homes on a 'per beds' basis

within the local authority's geographical area, including to social care providers with whom the local authority does not have existing contracts.

1.5 The local authority has discretion to use the remaining 30% of the IPC allocation, and 40% of the rapid testing allocation to provide further support to the care sector, as outlined in the guidance.

The allocation is based on 1844 registered CQC beds at March 2021 and includes 57 care homes and 1232 Community Care Users at March 2021, using the Capacity Tracker service User data.

2 Financial implications

2.1 Bury's total allocation of the new Infection Prevention and Control and Testing Fund is £1,204,936 million for the period 1^{st} April to 30^{th} June 2021 the % distribution is set out in the table below-

	Infection Prevention and Control (IPC) Allocation			Rapid Testing Allocation				
Total Quantum	£202,500,000				£138,695,00 0			
Column	52.5%	17.5%	30%		60%	40%		

Proportion								
	Allocation to Care homes and Residential Drug and Alcohol settings (A)	Allocation to community care providers (CT Data) (B)	LA discretionary amount (C)	Total ICF allocation amount (D)	Allocation to Care homes and Residential Drug and Alcohol settings (E)	Discretionary Community Care Funding (CT Data) (F)	Total RTF allocation amount (G)	Local Authority IPC and Rapid Testing Combined Total (H)
BURY	£421,975	£90,782	£219,753	£732,510	£330,305	£142,121	£472,426	£1,204,936

This paper seeks permission to distribute:

- 70% of the Infection Prevention and Control Fund to Care Homes (52.5%) and Community Care Providers (17.5%) such as high-risk Supported Living.
- 60% of the Rapid Testing allocation to Care Homes

The remaining discretionary amounts of 30% and 40% respectively will be retained by the local authority to be used for providers considered to be high-risk and its use determined by the Community Commissioning Management Team in line with the grant conditions.

3 Reporting

3.1 Local authorities are required to distribute the money in line with the grant circular and are required to provide 2 high level returns by the dates below.

Reporting point 1: 19 May 2021Reporting point 2: 30 July 2021

3.2 Providers are also required to complete the Capacity Tracker at least once per week until 30th June 2021.

4 Recommendation

4.1 Approve the Infection Prevention and Control and Testing grant allocation based on 2.1 above and note the reporting requirements as set out in 3 above.

Deborah Yates Provider Relationship Manager 26th April 2021