

**REPORT TITLE: Adult Social Care Infection Control and Testing Fund Round 3:
Distribution to Providers**

Dates between which decision will be taken	Earliest date: 10 th November 2021 Latest date: 12 th November 2021
Cabinet Member	Councillor Carole Allaway-Martin, Adult Social Care Commissioning
Key Decision	Yes
Purpose of Report	<p>To seek approval to pay grant funding to adult social care providers, including those with whom the council does not have a contract, as described in Local Authority Circular: Adult Social Care Infection Control and Testing Fund (published 21st October 2021) in accordance with a determination under section 31 of the Local Government Act 2003 of a ring-fenced infection control grant to local authorities 31/5765 (the “Determination”) for the purposes of:</p> <ol style="list-style-type: none"> 1. reducing the rate of COVID-19 transmission within and between care settings through effective infection prevention and control practices and increasing the uptake of staff vaccination against Covid 19 and flu. 2. conducting testing of staff and visitors in care settings to identify and isolate positive cases and enabling close contact visiting where possible.
Recommendations	<p>That the Cabinet Member for Adult Social Care Commissioning delegates authority to the Executive Director of Adult Social Care and Public Health to:</p> <ol style="list-style-type: none"> 1. Pay providers of bed based care in Gloucestershire , including residential drug and alcohol settings and CQC regulated community care providers (i.e. domiciliary care, extra care and supported living), including those with whom the council does not have a contract, the stipulated 70% of the Infection Prevention and Control fund allocation received pursuant to the Determination on a “per bed” basis (for care homes) or “per user” basis (for CQC regulated community care providers) for the purpose of reducing the rate of COVID-19 transmission within and between care settings through effective infection prevention and control practices and to pay any undistributed funding from such allocation to eligible providers for the same purpose. 2. Allocate 1% of the Infection Prevention and Control fund allocation to meet the council’s administrative costs arising from the distribution of the funding described in this report and the council’s reporting

	<p>obligations in respect thereof.</p> <ol style="list-style-type: none"> 3. Allocate and pay the remaining 29% of the Infection Prevention and Control fund allocation to adult social care providers that are nominated by the Executive Director of Adult Social Care and Public Health in consultation with the Cabinet Member for Adult Social Care Commissioning in order to support other COVID-19 infection prevention and control measures subject to the provisions of the Determination. 4. Pay providers of bed based care in Gloucestershire , including residential drug and alcohol settings and CQC regulated community care providers (i.e. domiciliary care, extra care and supported living), including those with whom the council does not have a contract, the stipulated 70% of the Vaccination fund allocation received pursuant to the Determination on a “per bed” basis (for care homes) or “per user” basis (for CQC regulated community care providers) for the purpose of increasing COVID-19 and flu vaccine uptake among their staff and to pay any undistributed funding from such allocation to eligible providers for the same purpose. 5. Allocate and pay the remaining 30% of the Vaccination fund allocation to support staff with COVID-19 and flu vaccinations in other care settings, including non-registered settings, and to provide additional support to providers that are nominated by the Executive Director of Adult Social Care and Public Health in consultation with the Cabinet Member for Adult Social Care Commissioning in order to support other COVID-19 vaccination measures subject to the provisions of the Determination. 6. Pay providers of bed-based care in Gloucestershire, including residential drug and alcohol settings and bed-based care providers with whom the council does not have a contract, the stipulated 75% of the Testing fund allocation received pursuant to the Determination on a “per bed” basis for the purpose of testing staff and visitors in care settings to identify and isolate positive cases and enable close contact visiting where possible, and to pay any undistributed funding from such allocation to eligible providers for the same purpose. 7. Allocate and pay the remaining 25% of such Testing fund allocation to providers of community services and other eligible care providers in Gloucestershire that are nominated by the Executive Director of Adult Social Care and Public Health in consultation with the Cabinet Member for Adult Social Care Commissioning in order to support other testing related measures subject to the provisions of the Determination.
Reasons for recommendations	To seek approval to offer the ring-fenced Infection Control and Testing Fund grant funding to bed-based and community care providers on the basis and for the purposes set out above and in the main body of this report.
Resource Implications	The cost of the proposals set out in this report will be fully met from the £388 million ring-fenced Infection Control and Testing Fund for England. Gloucestershire’s allocation therefrom is £4,860,330 based upon

there being 6,235 registered care home beds in the county.

The Adult Social Care Infection Control and Testing Fund allocation was received by the Council on 26th October 2021. All funds are required to have been paid to and spent by qualifying recipients by 31st March 2022. The Council is required to establish that all funds are utilised for the purposes specified in the Determination and will ensure that returns are submitted pursuant to the terms of grant agreements that will be entered into with grant recipients.

The grant distribution will be according to these proportions:

Element of fund	Direct award (70%)		Discretionary (30%)	Note
Infection prevention & control fund £2,989,540	£1,662,898 to care home providers	£429,780 to community providers	£866,967 to distribute to provision appropriately and £29,895 administration	Any unclaimed portion of the aforementioned 70% direct award to be added to and allotted as part of the discretionary 30%
Vaccination fund £296,589	£116,941 to care home providers	£90,671 to community providers	£88,977 to distribute appropriately	Any unclaimed portion of the aforementioned 70% direct award to be added to and allotted as part of the discretionary 30%

Element of fund	Direct award (75%)	Discretionary (25%)	Note
Testing fund £1,574,201	£1,181,570 to care home providers	£392,631 in LA discretion to distribute appropriately	Any unclaimed portion of the aforementioned 75% direct award to be added to and allotted as part of the discretionary 25%

All monies to be distributed by the Council are from the government's Infection Control and Testing Fund only. The total to be distributed in respect

	<p>of Gloucestershire shall be a sum not exceeding the £4,860,330 that has been paid to the council for distribution between care providers under section 31 of the Local Government Act 2003 of a ring-fenced infection control grant to local authorities 31/5765 (the “Determination”).</p> <p>Funding from the Infection Prevention & Control fund, the Vaccination fund and the Testing fund will be released by the council to eligible recipients in two tranches. The first tranche (in respect of the period October 2021 to December 2021), which represents 60% of such funding (i.e., £2,916,198), shall be released by the council no later than 15th December 2021. The second such tranche (in respect of the period January 2022 to March 2022), which represents 40% of such funding (i.e., £1,944,132), shall be released no later than 15th February 2022.</p>
Background Documents	<p>The Department of Health and Social Care’s Local Authority Circular: Adult Social Care Infection Control and Testing Fund Published 1st July 2021</p> <p>Determination under section 31 of the Local Government Act 2003 of a ring-fenced infection control grant to local authorities 2021to 2022 No. 31/5765 (the “Determination”).</p> <p>https://www.gov.uk/government/publications/adult-social-care-infection-control-and-testing-fund-round-3/annex-a-grant-determination</p>
Statutory Authority	<p>Government via Local Authority Circular: Adult Social Care Infection Control and Testing Fund Published 21st October 2021</p> <p>Determination under section 31 of the Local Government Act 2003 of a ring-fenced infection control grant to local authorities for 2021 to 2022 No. 31/5765 (the “Determination”).</p>
Divisional Councillor(s)	All
Officer	<p>Sarah Scott Executive Director of Adult Social Care and Public Health Gloucestershire County Council</p> <p>01452 328497 Email: Sarah.L.Scott@gloucestershire.gov.uk Gloucestershire County Council, Shire Hall, Westgate Street, Gloucester, GL1 2TG</p>

Timeline

The fund commenced on 21st October 2021 and concludes on 31st March 2022.

Background

1. The Adult Social Care Infection Control Fund was first introduced in May 2020, to support adult social care providers in England to reduce the rate of COVID-19 transmission. In April 2021, it was consolidated with the existing Rapid Testing Fund, to support additional testing of staff in care homes, and enable indoors, close contact visiting where possible.
2. By September 2021, these funding streams had provided over £1.49 billion ring-fenced funding for infection prevention and control, and £396 million for testing in care settings.
3. Due to the success of the extended Infection Control and Testing Fund in supporting care providers to reduce the transmission of COVID-19, this fund was extended until 31 March 2022, with an extra £388 million of funding to support the care sector to put in place crucial measures over the winter period. This brought the total ring-fenced funding for infection prevention and control to almost £1.5 billion and support for testing to almost £400 million in care settings.
4. The purpose of the 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 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
5. The funding to which this report relates consists of 3 distinct allocations, namely: (a) infection prevention and control (IPC) funding allocation, (b) vaccines funding allocation and (c) testing fund allocation.
6. The terms of the Determination provide that 70% of the IPC element of the funding should be passed directly to care homes within the local authority's geographical area on a 'per beds' basis, and to CQC-regulated community care providers within the local authority's geographical area on a 'per user' basis, including to social care providers with whom the local authority does not have existing contracts.
7. The local authority has the discretion to target the allocation of the remaining 30% of the IPC allocation on other COVID-19 IPC measures for the care sector, including supporting other care settings and providing additional support to care providers who are currently experiencing an outbreak.
8. As with previous funding rounds, local authorities may use a small amount of the Infection Prevention and Control Fund allocation funding (capped at 1% of their total IPC allocation) for reasonable administrative costs associated with distributing and reporting on this funding.

9. Gloucestershire County Council proposes to use 1% of the total Infection Prevention and Control Fund allocation to support administrative costs associated with distributing and reporting on this funding.
10. In Gloucestershire the remaining 29% of the total Infection Prevention and Control Fund allocation will be used to support other COVID-19 infection prevention and control measures, specifically to:
 - Fund further provision of the Infection Prevention and Control nursing team to support care homes with infection control measures
 - Support providers of supported living (non – regulated) and day services with infection control costs
 - Offer further support to recipients of the 70% for infection control measures
11. The terms of the determination with regard to the Vaccine element are that 70% should be passed directly to care homes within the local authority's geographical area on a 'per beds' basis, and to CQC-regulated community care providers within the local authority's geographical area on a 'per user' basis, including to social care providers with whom the local authority does not have existing contracts. The funding is for use for Covid 19 and flu vaccination costs.
12. The local authority has the discretion to target the allocation of the remaining 30% of the vaccines allocation to support staff with COVID-19 and flu vaccinations in other care settings with vaccine measures specified in the Grant conditions.
13. The terms of the determination with regard to the Testing element are that a direct funding portion should be allocated straight to care homes within the local authority's geographical area on a 'per beds' basis, including to social care providers with whom the local authority does not have existing contracts. At a national level, this represents 70% of the testing allocation. However, this will vary by local authority, depending on how many of each type of setting there is within the local authority's geographical area.
14. The local authority has the discretion to target the allocation of the remaining portion of the testing allocation to support the care sector to operationally deliver testing.
15. In view of the high number of care homes in Gloucestershire, the Testing allocation for care homes in the county shall be 75% and the Rapid Testing allocation to support other elements of the care sector in the county at the council's discretion shall be 25%.
16. Funding recipients will be required to sign a grant agreement with the council which provides that the funds will be used on the basis prescribed under the Determination. Funding recipients will also be required (on request) to provide the council with receipts or such other information as is necessary to evidence that the funding has been used for its intended purpose only. Funding recipients will further be required to electronically submit a bi-monthly return detailing spend and will

have to be completing the capacity tracker as per grant conditions to access any of the funds.

Options

17. Option 1

To distribute the council's Infection Prevention and Control funding allocation in accordance with the Determination with 70% going directly to care home and community providers in Gloucestershire, 1% to administrative costs and 29% to support other infection prevention and control measures.

To distribute the council's Vaccination funding allocation in accordance with the Determination with 70% going directly to care home providers in Gloucestershire and 30% to other elements of the care sector to support staff in other care settings with vaccine measures specified in the Grant conditions.

To distribute the council's Testing funding allocation in accordance with the Determination with 75% going directly to care home providers in Gloucestershire and 25% to other elements of the care sector to support the operational delivery of testing.

This is the preferred option as it conforms with government guidance and will support the reduction of transmission of Covid 19.

18. Option 2

Not to distribute the funding to Gloucestershire care providers.

This is not recommended as it is both against government guidance and could impede the reduction of transmission of Covid 19.

Risks

19. Given that support provided to care providers by local authorities using the Infection Control and Testing Fund Ring-Fenced Grant may be subject to the UK's international obligations on subsidy control, the council is required to comply with relevant subsidy control rules when making allocations of such grant.

20. It is the view of the Department of Health and Social Care (the DHSC) that the proposed payment of such grant is consistent with the UK's international obligations on subsidy control. This is because the measures will help detect COVID-19, hence reducing its incidence and spread, and are over and above that which care providers would normally be expected to provide; and due to the potential of the Rapid Testing Fund Measures to limit the transmission of COVID-19 and therefore prevent loss of life, such measures are of particular importance to care users, workers and their families, as well as being in the general public interest. Furthermore, without intervention they would not be provided by the market at the level or quality required, and thus to secure their

provision, compensation needs to be provided to incentivise an undertaking or set of undertakings.

21. On this basis, the risk of the council receiving an order to repay the proposed grant funding under the subsidy control rules is considered to be small.
22. There is a risk of not providing the proposed grant funding, given that this would exacerbate infection control difficulties for providers already in turbulent times and could impede the reduction of transmission of Covid 19.

Financial implications

23. All monies to be distributed by the council are from the government's Infection Control and Testing Fund only. The total to be distributed in respect of Gloucestershire shall be a sum not exceeding the £4,860,330 that has been paid to the council for distribution between care providers under section 31 of the Local Government Act 2003 of a ring-fenced Rapid Testing Fund to local authorities for 2021 to 2022 No. 31/5765 (The Determination).

Climate change implications

24. Carbon emissions are neutral and the decision is not vulnerable to climate change.

Equality implications

25. Has an Equalities Impact Assessment (EIA) been completed? Yes – considerations are in the main body of the report.
26. The Cabinet Member should read and consider the Equalities Impact Assessment in order to satisfy themselves as decision makers that due regard has been given.

Data Protection Impact Assessment (DPIA) implications

27. No data protection implications have been identified.

Social Value implications

28. N/A

Consultation feedback

29. Although we are seeking to distribute the monies as a matter of urgency discussions have been had with the Gloucestershire Care Provider Association (GCPA) to ensure that the provider perspective regarding the administration of the grant has been considered.

Officer recommendations

30. It is recommended that the funding is distributed to providers as outlined in Option 1 as a matter of urgency.

Performance Management/Follow-up

31. The proposed payments will be made under grant agreements which will require providers to submit evidence of spend which will be reviewed to ensure that funds have been spent appropriately.