	А	В	С	D	E	F	G		
1		L B Wandsworth - Winter Plan - Key Actions							
2	Reference	Actions Required by Local Authorities	Current status	Requirement fully met (Y/N)?	Actions required to fill gaps	By Who?	By When?		
3	0.1	Local authorities and NHS organisations should continue to put co-production at the heart of decision-making, involving people who receive health and care services, their families, and carers		Yes	No further action required	AD Adult Social Care Services			
4	0.2	Local authorities and NHS organisations should continue to recognise the importance of including care provider representatives in local decision-making fora, ensuring they are involved throughout		Partly	Provider forums to be held	AD Adult Social Care Services	30 November 2020		
5		Local authorities must put in place their own winter plans, building on existing planning, including local outbreak plans, in the context of planning for the end of the transition period, and write to DHSC to confirm they have done this by 31 October 2020. These winter plans should incorporate the recommendations set out in this document. NHS and voluntary and community sector organisations should be involved in the development of the plans where possible		Yes	No further action required	Head of Strategic Performance			
6	0.4	Local authorities and NHS organisations should continue to address inequalities locally, involving people with lived experience wherever possible, and consider these issues throughout the implementation of this winter plan		Yes	No further action required	AD Adult Social Care Services			
7	0.5	Local authorities must distribute funding made available through the extension of the Infection Control Fund to the sector as quickly as possible, and report on how funding is being used, in line with the grant conditions		Yes	No further action required	AD Business Resources			
8	0.6	Local authorities must continue to implement relevant guidance and promote guidance to all social care providers, making clear what it means for them		Yes	No further action required	AD Commissioning			
9		Local systems should continue to take appropriate actions to treat and investigate cases of COVID-19, including those set out in the contain framework and COVID-19 testing strategy. This includes hospitals continuing to test people on discharge to a care home and Public Health England local health protection teams continuing to arrange for testing of whole care homes with outbreaks of the virus		Yes	No further action required	Head of Health and Care Strategy			
10	0.8	Local authorities should ensure, as far as possible, that care providers carry out testing as set out in the testing strategy and, together with NHS organisations, provide local support for testing in adult social care if needed		Yes	No further action required	AD Commissioning			
11		Local authorities should provide free PPE to care providers ineligible for the PPE portal, when required (including for personal assistants), either through their LRF (if it is continuing to distribute PPE) or directly until March 2021		Yes	No further action required	Head of Health and Care Strategy			
12		Local authorities and NHS organisations should work together, along with care providers and voluntary and community sector organisations, to encourage those who are eligible for a free flu vaccine to access one		Yes	No further action required	AD Commissioning			
13	0.11	Local authorities should work with social care services to re-open safely, in particular, day services or respite services. Where people who use those services can no longer access them in a way that meets their needs, local authorities should work with them to identify alternative arrangements		Yes	No further action required	Head of Health and Care Strategy/ AD Commissioning			
14	0.12	Local authorities and NHS organisations should continue to work with providers to provide appropriate primary and community care at home and in care homes, to prevent avoidable admissions, support safe and timely discharge from hospitals, and to resume Continuing Healthcare (CHC) assessments at speed		Yes	No further action required	AD Commissioning			
15		Local authority directors of public health should 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 and immediately move to stop visiting if an area becomes an 'area of intervention', except in exceptional circumstances such as end of life		Yes	No further action required	AD Commissioning			
16		Theme 1: Preventing and controlling	the spread o	of infection	in care settings				
17	Reference	Actions Required by Local Authorities	Current status	Requirement fully met (Y/N)?	Actions required to fill gaps	By Who?	By When?		

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18	1.1	Continue to implement relevant guidance and circulate and promote guidance to adult social care providers in their area, including for visitors		Yes	No further action required	AD Commissioning	
19	1.2	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		Yes	No further action required	Director of Public Health	
20	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		Partly	Learning reviews to take place working with CCG	Director of Public Health	30 November 2020
21	Managing sta	aff movement					
22	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		Yes	No further action required	AD Business Resources	
23	1.5	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		Yes	No further action required	AD Commissioning	
24	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		Yes	No further action required	AD Commissioning	
25	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		Yes	No further action required	AD Commissioning	
26	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		Yes	No further action required	AD Commissioning	
27	Personal pro	tective equipment (PPE)					
28		Provide PPE for COVID-19 needs (as recommended by COVID-19 PPE guidance) when required, either through the LRF (if in an area where they are continuing PPE distribution), or directly to providers (if in an area where the LRF has ceased distribution)		Yes	No further action required	Head of Health and Care Strategy	
29	1.10	Report shortages to the LRF or to DHSC		Yes	No further action required	Head of Health and Care Strategy	
30	COVID-19 tes	sting					
31	1.11	Ensure positive cases are identified promptly, make sure care providers, as far as possible, carry out testing as per the testing strategy and , together with NHS organisations, provide local support for testing in adult social care, if needed		Yes	No further action required	Director of Public Health	
32	1.12	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		Yes	No further action required	Director of Public Health	
33	Seasonal flu						
34	1.13	Support communications campaigns encouraging eligible staff and people who receive care to receive a free flu vaccine		Yes	No further action required	Director of Public Health	
35	1.14	Direct providers to local vaccination venues		Yes	No further action required	Director of Public Health	
36	1.15	Work with local NHS partners to facilitate and encourage the delivery of flu vaccines to social care staff and residents in care homes		Yes	No further action required	Director of Public Health	
37		Theme 2: Collaboration acr	oss health a	and care se	rvices		
38		Actions Required by Local Authorities	Current status	Requirement fully met (Y/N)?	Actions required to fill gaps	By Who?	By When?
39	Safe dischar	ge from NHS settings and preventing avoidable admissions					
40	2.1	Jointly commission care packages for those discharged (including commissioning of care home beds). The local authority should be the lead commissioner unless otherwise agreed between the CCG and the local authority		Yes	No further action required	AD Commissioning	
41	2.2	Establish an Executive Lead for the leadership and delivery of the discharge to assess model		Yes	No further action required	Head of Health and Care Strategy	
42	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		Yes	No further action required	Head of Health and Care Strategy	
43	2.4	Secure sufficient staff to rapidly complete deferred assessments, drawing on discharge funding but without negatively impacting on care home support		Yes	No further action required	AD Adult Social Care Services	

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44	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		Yes	No further action required	AD Adult Social Care Services	
45	2.6	Provide appropriate accommodation for people who have been discharged from hospital, if their care home cannot provide appropriate isolation or cohorting facilities, as set out in the Adult Social Care Action Plan. Every local authority should work with their respective CCG, to ensure that they have safe accommodation for people who have been discharged from hospital with a positive or inconclusive COVID-19 test result. Discharge funding has been made available via the NHS to cover the costs of providing alternative accommodation		Yes	No further action required	AD Commissioning	
46	2.7	Consider adopting the cohorting and zoning recommendations published by ADASS, working with providers. This should include ensuring early partnership discussions with providers, about the safety and feasibility of implementing these arrangements within their care homes		Partly	Support providers to implement where required	AD Commissioning	30/11/2020
47		ealth in care homes					
48	2.8	Actions for Health colleagues, but LAs should assure themselves arrangements are in place		Yes	No further action required	AD Commissioning	
49	ecnnology	and digital support			T	<u> </u>	
50	2.9	Work with NHS organisations to support eligible care homes in their local area to apply for a tablet device as part of the NHSX offer		Partly	Continue to work with CCG and care homes to support roll out	AD Commissioning	Ongoing
51	Social presc	ribing					
52	2.10	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		Partly	Front Door Pilot to be aligned to Social Prescribing. Enhanced Care Navigation Service to be implemented.	Director of Public Health	31/01/2021
53	2.11	Work with NHS organisations to ensure SPLWs have the support and equipment to work remotely and access GP IT systems		Yes	No further action required	Director of Public Health	
54		Theme 3: Supporting people who recei	ve social ca	re, the wor	kforce, and carers		
55	Reference	Actions Required by Local Authorities	Current status	Requirement fully met (Y/N)?	Actions required to fill gaps	By Who?	By When?
56	Supporting i	independence and quality of life					
57	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		Yes	No further action required	Director of Public Health	
58	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'		Yes	No further action required	Director of Public Health	
59	Direct payme	ents T			T	1	
60	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		Yes	No further action required	AD Adult Social Care Services	
61	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		Yes	No further action required	AD Adult Social Care Services	
62	Support for	unpaid carers					
63	3.5	Make sure carers, and those who organise their own care, know what support is available to them and		Yes	No further action required	AD Commissioning	
_		who to contact if they need help					
64	3.6	Follow the direct payments guidance and be flexible to maximise independence		Yes	No further action required	AD Adult Social Care Services	
	3.6 3.7			Yes Yes	No further action required  No further action required		
		Follow the direct payments guidance and be flexible to maximise independence  Ensure that assessments are updated to reflect any additional needs created by COVID-19 of both			·	Services AD Adult Social Care	

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68	End-of-life of	care					
69	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		Yes	No further action required	AD Commissioning	
70	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		Yes	No further action required	AD Commissioning	
71	Care Act ea	sements					
72	3.12	Only apply the Care Act easements when absolutely necessary		Yes	No further action required	Director of Adult Social Care and Public Health	
73	3.13	Notify DHSC of any decisions to apply the Care Act easements		Yes	No further action required	Director of Adult Social Care and Public Health	
74	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		Yes	No further action required	Director of Adult Social Care and Public Health	
75	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		Yes	No further action required	AD Adult Social Care Services	
76	3.16	Follow the Ethical Framework for Adult Social Care when making decisions regarding care provision, alongside relevant equalities-related and human rights frameworks		Yes	No further action required	Director of Adult Social Care and Public Health	
77	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		Yes	No further action required	Head of Health and Care Strategy	
78	Supporting	the workforce					
79		Staff training					
80	3.18	Ensure providers are aware of the free induction training offer and encourage them to make use of it		Yes	No further action required	AD Commissioning	
81	3.19	Promote and summarise relevant guidance to care providers		Yes	No further action required	AD Commissioning	
82		Supporting the wellbeing of the workforce					
83	3.20	Maintain, where possible, the additional staff support services which they put in place during the first wave of the pandemic		Yes	No further action required	AD Commissioning	
84	3.21	Review current occupational health provision with providers in their area and highlight good practice		Partly	Providers have guidance on how to support staff & get additional support outside their organisation.  Further work to establish OH practices and share good practice.	AD Commissioning	30/11/2020
85	3.22	Promote wellbeing offers to their staff and allow staff time to access support, as well as promoting to providers in their area		Yes	No further action required	AD Commissioning	
86		Workforce capacity					
87	3.23	Continue to review contingency arrangements to help manage staffing shortages within social care provision through the winter		Yes	No further action required	AD Commissioning	
88	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		Yes	No further action required	AD Commissioning	
89	3.25	Consider how voluntary groups can support provision and link-up care providers with the voluntary sector where necessary		Partly	CCG to attend VS provider forum in November	AD Commissioning	30/11/2020
90	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		Yes	No further action required	AD Commissioning	
91	Shielding ar	nd people who are clinically extremely vulnerable					
92	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		Partly	Preparations for restarting of shielding are in progress with most actions complete	Head of Strategic Performance	When and if shielding is reintroduced
		and other professional leadership			most delicine complete		

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94	Reference	Actions Required by Directors of Adult Social Services and PSWs	Current status	Requirement fully met (Y/N)?	Actions required to fill gaps	By Who?	By When?
95	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		Yes	No further action required	Head of Safeguarding and Professional Standards	
96		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		Yes	No further action required	Principal Social Worker	
97		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		Yes	No further action required	Director of Adult Social Care and Public Health	
98	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		Yes	No further action required	Principal Social Worker	
99	3.32	Develop and maintain links with professionals across the health and care system to ensure joined-up services		Yes	No further action required	Director of Adult Social Care and Public Health	
100	3.33	Lead local application of the Ethical Framework for Adult Social Care, ensuring that NHS partners fully understand their responsibilities to apply the ethical principles and values as part of discharge to assess delivery		Yes	No further action required	Head of Health and Care Strategy	
101	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		Yes	No further action required	AD Adult Social Care Services	
102	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 reediness for any increased pressures over the winter period		Yes	No further action required	Head of Safeguarding and Professional Standards	
103	3 3N	Support and lead social workers and safeguarding teams to apply statutory safeguarding guidance with a focus on person-led and outcome focused practice		Yes	No further action required	Principal Social Worker	
104		Theme 4: Suppo	orting the sy	stem			
105		Actions Required by Local Authorities	Current status	Requirement fully met (Y/N)?	Actions required to fill gaps	By Who?	By When?
106	Funding						
107	4.1	Provide DHSC with information about how the money Infection Control Fund has been spent by 30 September 2020		Yes	No further action required	AD Business Resources	
108	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		Yes	No further action required	AD Business Resources	
109	4.3	Provide regular returns to DHSC on the spending of the extended Infection Control Fund in line with the grant conditions		Yes	No further action required	AD Business Resources	
110	Market and p	rovider sustainability					
111	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		Yes	No further action required	AD Commissioning	
112	4.5	planning leading into winter  Continue to work understand their local care market; and to support and develop the market accordingly		Yes	No further action required	AD Commissioning	
113	4.6	Continue to support their provider market as needed, to secure continuity of care, including promoting the financial support available		Yes	No further action required	AD Commissioning	
114	CQC suppor	t: Emergency Support Framework and sharing best practice					
115		Work with the CQC to promote and inform providers about monitoring processes		Partly	Communicate through provider forums	AD Commissioning	Ongoing
116	Local, region	nal and national oversight and support					

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117	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 organisations where possible		Yes	No further action required	Head of Strategic Performance	
118	4.9	Continue current oversight processes, including delivery of Care Home Support Plans and engagement with regional feedback loops		Yes	No further action required	AD Commissioning	
119	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		Yes	No further action required	AD Commissioning	
120	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		Yes	No further action required	Director of Adult Social Care and Public Health	