

Social Care Sector Covid-19 Support Taskforce
Guidance, Good Practice and Innovation Advisory Group
Final report on recommendations

Group Chairs:

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Introduction

The Guidance, Good Practice and Innovation Advisory Group was set up by the Social Care Sector COVID-19 Support Taskforce to consider how we best support the sector through guidance, good practice and innovation. The Advisory Group is co-chaired by Kathryn Smith, Chief Executive of SCIE and Professor Robin Miller of University of Birmingham. Support in pulling together the recommendations was provided by Ewan King from SCIE.

The remaining members of the group are:

- Alyson Scurfield, Chief Executive, TSA
- Caroline Speirs, Head, Think Local Act Personal
- Alex Fox, Chief Executive, Shared Lives Plus
- Simon Bottery, Senior Fellow, The King's Fund
- Steve Allen, Chief Executive, Friends of the Elderly
- Martin Routledge, Social Care Future
- Joe Micheli, City of York Council
- Liz Jones, Policy Director, National Care Forum
- Carly Tutty-Johnson, Programme Manager, Public Health England
- Jeremy Porteus, Chief Executive, Housing LIN
- Gareth Lyon, Head of Policy, Associated Retirement Community Organisations
- Karyn Kirkpatrick, Chief Executive, Keyring
- Judith Richardson, Acting Director of Health and Social Care, NICE
- Professor Martin Knapp, LSE
- Michael Voges, Executive Director, Associated Retirement Community Operators
- Dez Holmes, Director, Research in Practice
- Vic Rayner, Executive Director, National Care Forum
- David Cundy, Director of Programmes, Centre for Better Ageing
- Andy Tilden, Director of Operations, Skills for Care

The Group met on the 17 July 2020 and discussed a range of challenges and opportunities facing the sector, and identified a long list of recommendations. The Group was then asked to split into a further three groups – one covering guidance, one covering good practice and the final one covering innovation – and work on more specific recommendations. The draft recommendations were discussed at the Social Care Sector Covid-19 Taskforce Board on 12th August 2020.

Practical application advice or barriers to overcome to support implementation

The following practical considerations were suggested to support the production and implementation of guidance:

- Both SCIE and TLAP have Coproduction advisory groups who can be involved in the coproduction of materials at short notice
- Attention needs to be paid to both the messaging, which must be simple and clear (ideally through e.g. infographics) and the media: direct routes such as the Care app should be encouraged but will need to be supplemented with other media
- Guidance must reflect the diversity of social care provision, including eg shared lives, supported living, extra care housing, (care homes, day care/ day services and domiciliary care are also named checked in it.)
- Coproduction with front line staff so it is intelligible and in a language people of all backgrounds can understand
- Coordinate the publishing and distribution of guidance to ensure services are not inundated
- Guidance should be made more accessible to frontline care staff through e.g. being available via apps, and be in formats that are clear, quick and easy to understand e.g. infographics, examples of practice, key learning points
- Guidance should always have consideration of inequalities, taking-into-account use of plain English, building in targeted messaging where appropriate and disseminating via digital and non-digital channels in order to reach the most vulnerable groups (e.g. people with learning disabilities, people living with dementia, unpaid carers, and black & minority ethnic communities)
- Each new guide should be accompanied by learning webinars, online surgeries and group discussions (which SCIE has run for social workers, commissioners and care home managers) to share the key points from the guidance, address questions and share good practice.

Recommendations: Guidance

Social care responsibilities in local outbreaks of COVID 19

Rationale for this recommendation

As local outbreaks and actions to contain these are likely to occur over the coming months, clearer guidance is needed for local authorities, and other statutory agencies, on how to effectively manage local lockdowns

Recommendation: produce new guidance for commissioners, providers and others in relation to 'local outbreaks' (including testing arrangements, track and trace, coordination and use and interpretation of local data)

Accessibility & accuracy of social care guidance

Rationale for this recommendation

The care and support workforce is fragmented and diverse, employed across around 18,500 organisations that are typically very small and, in a pandemic, will be over-stretched. Guidance is not effectively, quickly or consistently 'cascaded' down through the management structures of the sector.

A vast amount of guidance has been produced, covering every facet of social care. But much of it is written in differing styles, formats and is out of date, or inaccessible to front line workers and people who use services/carers. This rapid review would ensure that all guidance is has a consistent look, format, style and is up to date.

Recommendation: to conduct a rapid review of all Covid-19 guidance to ensure they are still relevant, up to date and written in a consistently accessible style. As part of this, apply a consistent process whereby all relevant guidance can be curated for use across the sector with a systematic programme to communicate guidance directly with care and support staff.

Guidance coproduction & stakeholder groups

Rationale for this recommendation

Having a standing pool of coproduction peer reviewers would mean that the Government could quickly access and elicit the contribution of people with lived, in turn increasing the quality, accessibility and relevance of the guidance experience.

Similarly. An advisory group of wider social care stakeholders would ensure that guidance is relevant, timely, accessible and ultimately owned by the sector

Recommendation: Develop a pool of ‘coproduction peer reviewers’ and a sector stakeholder group who could provide rapid feedback on guidance

Discharge from hospital to care settings

Rationale for this recommendation

Given the difficulties which occurred during the first wave of the virus, this guidance needs an overhaul to reflect the lessons from the first round of COVID and the fact that it has to be a proper shared partnership decision with the care home, not a blanket policy.

Recommendation: Review and reissue guidance on the discharge of people from hospital to care settings

Relevant resources

- NICE guideline NG179, ‘COVID-19 rapid guideline: arranging planned care in hospitals and diagnostic services’, includes recommendation 6.1 ‘Test inpatients to ensure they do not have COVID-19 before they are discharged from hospital to other care settings including care homes and hospices.
- The Housing LIN curates a [Home from Hospital](#) interactive directory of local examples of practice

Visiting friends and carers
<p>Rationale for this recommendation</p> <p>As we emerge from more restrictive environments, we need clear guidance on how we safely open and make accessible extra care and other housing with care and houses and facilities.</p>
<p>Recommendation: Guidance on safe visiting for friends and carers for supported living and extra care housing care settings, including safety in communal settings, issues around catering or other on-site facilities</p>
<p><i>Relevant resources:</i></p> <p>SCIE and Kings College London produced guidance on opening up day centres which includes relevant materials</p>

Use of guidance
<p>Rational for this recommendation</p> <p>The national partners have found that there is stronger update of guidance, and better, more informed use of guidance, if there is targeted face to face (digital) follow up, e.g through webinars and training.</p>
<p>Recommendation: fund a short term programme to provide advice through the regions to local government on how to maximise the use of guidance. Undertaken by an alliance with ADASS, LGA and SCIE and with a significant regional focus, this could include supported self-assessment against the good practice guidance, peer support, mentoring in key areas.</p>

Use of PPE
<p>Rationale for this recommendation</p> <p>Whilst good guidance now exists for social workers and care workers working in registered providers on use of PPE, we need equivalent guidance for family carers, non-registered workers and personal assistants.</p>
<p>Recommendation: Guidance on supply of PPE for family carers, non-registered workers, care and support staff employed through direct payments</p>

Good Practice

COVID 19 Commissioning Guidance

Rationale for this recommendation

Variable responses from local authority commissioners have led to significantly different outcomes for people using social care and the people and providers supporting them. Good practice is available in key areas including: Stabilising the sector through sustainability funding and meeting extra costs; Practical support and advice – personal protective equipment (PPE), testing, infection control, recruitment; Positive communication and relationships to understand issues and to develop shared solutions – building on co-production and partnerships; Community support and mobilisation; Flexibility and responsiveness – particularly through more personalised arrangements such as direct payments, Shared Lives, micro-enterprises; Strong local decision-making – often in advance of Government guidance; Collaboration with local health partners to ensure the required health input; Personal dedication of care staff, unpaid carers and the resilience of individuals.

Recommendation: Promote COVID-19 commissioning guidance to support the sector to reduce variability in performance and outcomes, including through webinars, peer support and learning events

Using and building on the DHSC commissioned SCIE guidance *Challenges and solutions: commissioning social care during COVID-19* (July 2020), effectively promote and support the use of this guidance so that councils struggling in key areas can improve performance in subsequent phases of the pandemic and hence improve outcomes for local people and sustain support provision.

Practical application advice or barriers to overcome to support implementation

Under significant pressure and as autonomous authorities, councils need practical support and encouragement to use guidance. A short term programme undertaken in alliance with ADASS, SCIE and LGA and with significant regional focus could include supported self-assessment against the good practice guidance, peer support, mentoring in key areas

Accessing On-Line Resources

Rationale for this recommendation

The Lockdown has led to a massive increase in the number of people who use services and carers accessing care and advice online. A whole range of care and support services, networks, assessments, care planning and 'visits' now take place on line, but we need better information about what works in supporting people to connect and access care online, particularly people from disadvantaged communities or who lack access to tablets, smartphones and the internet. Linked to this, many social care staff are not provided regular access to on-line resources through their workplaces.

Recommendation: Develop and fund good practice on how people and communities and social care providers can be supported to communicate and access resources online

Practical application advice or barriers to overcome to support implementation

SCIE and NICE have existing materials on this topic, and can support the development of evidence-based good practice and recommendations

Mutual Aid & Volunteering

Rationale for this recommendation

Throughout the pandemic, one of the main positives has been the burgeoning of mutual aid and local support groups. Keeping communities which are keen to help others could become one long-lasting benefit from the crisis. Good practice is for local authorities and the NHS so that they can play a role in encouraging these groups to continue to operate and signpost nascent mutual aid organisations to sources of funding and support

Recommendation: Produce good practice resources on supporting the continued involvement of people in mutual aid, volunteering and social support

Practical proposals to support implementation

NICE, Research in Practice and NICE all have relevant expertise in exploring the role of communities in supporting local care services, and can rapidly produce evidence of what works in this area. Furthermore, The Social Care Innovation Network, which includes 16 leading local authorities which are working closely with mutual aid organisations, could be asked to test how we grow and sustain mutual aid and community networks.

Primary care support

Rationale for this recommendation

The role of primary care networks specifically and in general primary care in supporting local authorities to respond effectively to Covid 19. We know that there have been many good examples of practice, and we now need the learning to be pulled together, to include practical recommendations on how closer working relationships locally between primary care and social care can be developed locally.

Recommendation: Good practice for primary care organisations on supporting adult social care services

Practical application advice or barriers to overcome to support implementation

Coproduce new guidance with the NHS Confederation Primary Care Networks Network and the Royal College of General Practice

Support for homeless people

Rationale for this recommendation

There is a real danger that homeless people are overlooked as we develop good practice recovery from Covid-29. Good practice resources are needed on what works in providing safe environments for homeless people.

Recommendation: Develop good practice resources on move on accommodation and access to any continuing primary health care, adult social care and/or support for people who are homeless

Practical application advice or barriers to overcome to support implementation

Work in partnership with organisations such as Shelter and Crisis and homeless people to design relevant and accessible good practice.

Maintaining Wellbeing

Rationale for this recommendation

Helping maintain people's independence during Covid is more critical than ever, and good practice resources on maintaining strengths and balance, would be welcome.

Recommendation: Good practice on maintaining physical condition, strength and balance during a lockdown - both in hospital or care setting, and at home

Relevant resources:

Centre for Ageing Better has a range of **resources** on balance and strength.

- NICE has existing evidence-based recommendations and evidence reviews to support guidance in this area.

Innovation

Innovation Network
<p>Rationale for this recommendation</p> <p>We have high performing and innovative models such as Shared Lives already in place and well-evidenced, but which are not being scaled: local and national government should raise the level of ambition for scaling models proven to be more cost-effective than mainstream/ large scale models. The DHSC has funded two initial phases of the Social Care Innovation Network to explore factors which support the scaling of innovation. A further phase 3 proposal has been submitted to the Department setting out a programme to support in depth scaling work in a small number of local authority sites</p>
<p>Recommendation: Fund phase 3 of the DHSC funded Social Care Innovation Network, a programme which aims to support a pioneer local authorities to test how they can scale innovations</p>
<p>Practical application advice or barriers to overcome to support implementation</p> <p>The scaling challenge is not just one for providers of innovative models, it is also one for commissioners to move to co-commissioning with their communities (see the action plan from the Joint VCSE Review https://vcsereview.org.uk/2018-action-plan/) and for local leaders: scaling innovative models starts with a whole -area strategic approach</p>
<p><i>Relevant resources</i></p> <ul style="list-style-type: none"> • Social Care Innovation Network, Asset Based Area 2.0 and other implementation tools, 2020 • SCIE, Nesta and Shared Lives, Growing innovative models of health, care and support for adults, 2017

Scale & Embed Technology-Enabled Care Models

Rationale for this recommendation

There are a number of well-evidenced, innovative TEC services and solutions which have been highly effective at supporting people during Covid and have the potential to improve outcomes for people after Covid. The proactive TEC interventions which have shown greatest impact on health and care outcomes at scale need to be fast-tracked into clear specifications and plans for wider service delivery. Revisions to quality standards and guidance are also needed to assure an appropriate level of quality and consistency. Some other service and technology innovations, although relatively low cost and hopefully easy to scale up across services, remain small scale in nature and often are not widely adopted. During the next six months to a year, there is an opportunity to fund the rapid scaling of these innovations across the sector.

There is huge potential for community-based models and tech innovators to join together to bring the reach and data gathering and analysis capacity of TEC, together with capable and established service providers, the community roots of VCSE, user-led and community-based models and enterprises to create truly person-centred solutions.

Recommendation: Fund a joint programme with TEC Service Providers, Voluntary, Community and Social Enterprises to scale and embed technology-enabled care models which improve the quality of care and outcomes.

Practical application advice or barriers to overcome to support implementation

There are a number of organisations which can assist in delivering this programme, including TSA, NHSx, SCIE and Carers UK.

The adoption of these TEC models over the coming months will greatly enhance the capability of commissioners and providers to act proactively to manage rising demand, support people to live independently, and act quickly if there is a resurgence of a public health crisis over the winter months.

To support the rapid scaling of these models:

- Fund consultancy support from organisations which can support rapid adoption and quality assurance of new and effective TEC innovations
- Create Guidance & Standards for proactive services and their underlying technologies
- Capture benefits and outcomes of the new care models, making clear the commissioning case for proactive care models
- Ensure adoption of data and cyber protection guidelines.
- Develop standard data models and data-sharing agreements.

Relevant Resources:

TSA, From Stabilisation to Innovation: The Response and Redesign of TEC Services During Covid-19, 2020

<https://www.tsa-voice.org.uk/campaigns/download-the-tsa-sector-insight-report-2020/>

LGA/TSA/Digital Social Care, Data and Cyber Security Guidance for TEC Services, 2020 https://www.tsa-voice.org.uk/downloads/good_practice_guides/tsa_lga_cyber_security_guidance_full_doc.pdf

Global innovation

Rationale for this recommendation

As we plan the longer term recovery from Covid-29, it will be helpful to understand how other countries are supporting those who need social care through innovations, and apply this learning where appropriate to the UK.

Recommendation: Undertake a review on global good practice to support evidence for innovation in adult social care

Relevant resources:

- National School for Social Care Research, Scaling innovation in social care
- Rapid pragmatic evidence review, SCIE: <https://www.scie.org.uk/transforming-care/innovation/network/reports/scaling-innovation>

Self-funders and Unpaid Carers

Rationale for recommendation

Improved data on self-funders and unpaid carers, would enhance the capabilities of local planners, commissioners to predict demand and proactively target services at these groups.

Recommendation: Currently there are gaps in our knowledge of the experiences of people who self-fund and unpaid carers. We need to review how improvements can made to the quality with the data, leading to a plan for rapidly improving the quality of this data set.

Relevant resources:

- Relevant resources: PHE has developed the Wider Impacts of COVID-19 on Health (WICH) monitoring **tool** which will support this, and has potential to evolve in the future.