Covid-19 – Care Act Easements
Health Scrutiny Sub-Committee
1 December 2020
What are Care Act easements?

- Enacted March 2020
- Enabled local authorities to be temporarily released from some 2014 Care Act duties, including adult social care assessments, meeting needs, care and support planning and transition to adulthood.
- Being released from these duties is called ‘Care Act Easements’

2020 Coronavirus Act

- Describes 4 possible ‘stages’ for adult social care during the pandemic.
- Stage 1 & 2 = act in accordance with the Care Act
- Stage 3 & 4 = stop acting in accordance with the Care Act = put easements in place
- [Each] Local Authority should only take a decision to begin exercising the Care Act easements when the [social care] workforce is significantly depleted, or demand on social care increased, to an extent that it is no longer reasonably practicable for it to comply with its Care Act duties (as they stand prior to amendment by the Coronavirus Act) and where to continue to try to do so is likely to result in urgent or acute needs not being met, potentially risking life.

Care Act Easements National Guidance

- We have not used Care Act easements
- Huge amount of work done in the first pandemic wave (& ongoing) to avoid needing them
- Continue to assess the risk of needing them as v low
- Developed an approach to stage 3 & 4 ‘easements’
- Involved staff, health partners, Real, Carer Centre, Healthwatch in this

Local approach developed in Tower Hamlets
Stage 3 easements

- Stop basing eligibility on the Care Act thresholds and start basing it on an assessment of whether a lack of support with breach a person’s human rights.
- Carry out ‘light touch’ financial assessments where possible and postpone the remainder until after the easements have lifted.
- Children’s Social Care to cease transitions referrals until the emergency period is over.

Inform relevant people

Mitigate the negative impacts of stage 3

Constantly keep under review and stop as soon as emergency is over

Workforce is significantly depleted, or demand on social care increased, to an extent that it is no longer reasonably practicable for it to comply with its Care Act duties & where continue to try to do so is likely to result in urgent or acute needs not being met, potentially risking life.
Stage 4 easements

We will prioritise:
• Support to meet nutritional needs
• Support to take medicine
• Support to move safely around the home
• Critical personal hygiene
• Carer relief to avoid the breakdown of unpaid care
• Basic hygiene cleans where appropriate or necessary
...& ongoing duties, including safeguarding

We will de-prioritise:
• Support with domestic care
• Support with community access
• Support to access volunteering, work or training
• Support with food shopping where this can be supported in other ways
• Collecting prescriptions of medication where this can be supported in other ways
...unless withdrawing these will have a critical impact on an individual’s health.

• We carried out phone reviews with 211 service users with care packages of 20 hours or more per week over summer 2020.

• Proportionate approach as think biggest pressure will be in homecare & exercise has identified a significant number of care hours.

• 86 service users identified as having support that could be temporarily de-prioritised (7 stopped, 78 reduced), freeing up 1282.65 hours of care per week for reallocation.
A range of work to try and avoid getting to a stage 3 and 4 decision has been carried out and is ongoing through the pandemic. This includes:

- Establishing & running the Integrated Hospital Discharge Hub
- Changing the Adult Social Care team structure to deal with urgent and high-risk referrals during the 1st wave
- Increasing the capacity of current provision if needed, including a care worker recruitment campaign in April & May 2020
- Using redeployees when needed. We are also looking at further utilising volunteers