



**Dorset Council**

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**Ref:**

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Minister of State for Care

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Dear Minister

**RE: Care Home Support Plan**

As requested, this letter and completed template set out the care home resilience plan for Dorset. It demonstrates how the Council, Dorset Clinical Commissioning Group (CCG), NHS Trusts and our local care sector providers are delivering the national commitments for support. The letter summarises progress to date and further action being taken at pace to embed all requirements of the national care home support package. The letter also identifies key issues which social care sector providers and the Council wish to raise for consideration and action by Government.

Before addressing the detail of our response, Dorset Council would like to use this letter to recognise publicly the professionalism, talent and dedication of the workforce and leaders in our local social care sector and to thank them all for their tireless commitment to the care of our residents each and every day.

Dorset has had fewer cases than many other areas in England but the impact of outbreaks in care homes had a big impact on local mortality, with almost as many deaths due to COVID from care homes as from hospital settings. Although the proportion of homes affected to date is lower than national, we are aware that this sector will remain an important setting for preventing future outbreaks, and that our older population means this will continue to be an important focus for our local outbreak management plan.

The Council, NHS and relevant statutory partners are working in partnership with adult social care providers to ensure that local people who use social care services, and particularly residents in our local care homes, are given the best possible care through the current Covid-19 crisis. Dorset Council has also been aligning, where possible, with Bournemouth Christchurch and Poole (BCP) Council in order to ensure a consistency of approach across the Dorset Integrated Care System footprint.

We are focussed on implementing all nationally mandated measures at pace to prevent the spread of Covid-19 into and within Care Homes. We are also working closely with our home care and supported living providers to ensure that they too have coordinated and effective support through the pandemic period.

It is essential that, when considering how nationally mandated measures and local interventions have landed, we remember that much of this work has been undertaken during a crisis. Feedback from many of our providers is that they have experienced a plethora of communication about guidance and offers of support from multiple national and local organisations, much of which was subject to rapid change. Data from the capacity tracker, local information and direct discussions with providers have highlighted several issues that the Council and our local system partners are prioritising as we seek to consolidate support for the care sector.

All residential care homes in Dorset are registered with the National Capacity tracker and have engaged within this process. Care homes have advised that:

- The questions and guidance were not clear, and the yes/no answers did not enable realistic answers to some questions.
- The request for information coincided with additional requests from the Care Quality Commission, Office for National Statistics, Public Health England and other organisations and created additional pressure.

Dorset Council acknowledges the importance and value of a care assurance process, however, would request that future consideration be given to timescales and quality checking information requirements and guidance prior to the commencement.

## **Dorset's Care Home Support Plan**

- 1. Market Resilience and Support to Care Providers** (including daily arrangements to review data and information on the state of the wider social care market, including home care, locally)

### **1.1. Market Resilience**

The care market within Dorset Council consists of a range of services, the most predominant being the care home and home care sectors. Significant work has been undertaken over the last few years to improve the quality of these sectors and now CQC ratings show that over 90% of all regulated provision is Good or Outstanding.

The definition of 'care homes' within this letter includes any CQC registered residential care setting for an individual, or individuals, aged 18 or over so this will include older people, people with physical disabilities and those with learning disabilities or mental health problems.

There are a total of 124 residential care and nursing homes within the Dorset Council area, of which 23 provide accommodation and care to people with a learning disability. Dorset Council has contractual arrangements with 96% of these homes.

The typical model for care homes in Dorset is small to medium sized organisations operating on a mix of local authority placements, Health funded placements and self-funders. Self-funders represent about 70% of Dorset's care economy.

The current capacity of beds available within the area is:

- 88 beds for people with a learning disability
- 586 beds for people requiring Nursing Care without Dementia:
- 1132 beds for people requiring Nursing Care with Dementia
- 805 beds for people requiring Residential Care
- 1257 for people requiring Residential Care with Dementia

Care home occupancy levels are currently at 88%. This in part could be due to the relatively lower levels of virus outbreaks. The current proportion of care homes in Dorset that have notified Public Health England of an outbreak is 27%, compared to a national proportion of 37%.

The Health and Care system, in adopting the Discharge to Assess model, has a 'Home First' principle so that many people being discharged from hospital go home with the necessary support, unless their needs require residential or nursing care. Other alternatives include Supported Living or Extra Care Housing.

Dorset Council has also taken the following steps in order to support the financial viability of care providers:

- Increased all fees and rates in respect of all contracted care providers (care homes and home care) by 10%, effective from the 19th March 2020. This premium for existing rates recognises the additional cost pressures on suppliers and is in line with national guidance
- Immediate payment upon invoice.
- An offer to work with providers to consider additional support where they are facing cost pressures above the 10%.
- Free provision of emergency PPE (in addition to the allocation via our local resilience Forum)
- Continued contact with home providers to support infection control, access to PPE, training and other related quality issues coordinated with the CCG.

### **Next steps**

The Council is in the final stages of conversations with partners regarding the implementation of an annual inflationary uplift for 2020/21 prior to the Covid-19 crisis. This work had not been concluded, and the Council acknowledges that this has been causing concern to care providers. The Council is also aware that any previously planned uplift would not offer the longer-term sustainability now required as the sector has seen considerable additional challenges since these initial conversations took place. It is Dorset Council's intention to

complete dialogue on this issue as a matter of urgency, ensuring that any revised offers reflect the current and ongoing pressures faced and is in place by no later than the 30th June 2020.

## **1.2. Daily Arrangements to review data and information on the state of the market locally**

Throughout the crisis a quality improvement system for care home support led by the Council has been operating, using the daily Capacity Tracker (100% of homes are registered on the portal) with regular contact with all providers.

Direct contact with care homes, and all other social care providers, has been ongoing throughout. The Council's Quality Improvement and Brokerage Teams have been operating 7 days a week to maintain this contact and to ensure that additional intelligence is available to supplement the Capacity Tracker.

Care provider representatives have membership of all key system resilience meetings (cells) including PPE and testing.

There is a dedicated email address for care homes to raise issues and concerns, to date 850 enquiries have been received via this route which is monitored 7 days a week from 8.00am – 8.00pm. Dorset Council, CQC and Dorset CCG staff work closely together to identify areas of concern and support. All contacts are recorded and collated alongside the Capacity Tracker information to provide management reports, on support needed and position in regard to capacity, staffing pressures, PPE requirements, staff and resident Covid-19 status and any issues and concerns. A reporting and escalation process is in place for individual care home issues into management oversight and a Quality Assurance risk management process is in place to ensure those homes requiring support (e.g. training) are prioritised. This is done in liaison with CQC and with information from their Emergency Support Framework process.

All email concerns received are followed up with direct contact to homes in order to provide additional assurance and guidance.

Dorset Council's Safeguarding processes have been maintained throughout the crisis and directly feed into the quality assurance process.

### **Next steps**

The Council will continue to work with partners, including the care sector, to further develop its quality assurance process, building on the good work already achieved, and use the comprehensive Capacity Tracker data to help inform the support required by individual providers.

### **1.3. Engagement and partnership with care home providers and service users**

A Social Care Group has been established as a Task and Finish Group of the Dorset Local Resilience Forum to co-ordinate partnership working to support the Care Sector across the Dorset Council and BCP areas and also feed challenges back to the System Resilience Forum.

This group includes representatives of the Dorset Care Homes Association, social care providers and officers from the two Councils, Dorset CCG, Public Health Dorset, Dorset Civil Contingencies Unit and the Care Quality Commission. This group has established a Care Home Focus sub-group which has been developing and implementing comprehensive action planning to support Care Homes with emphasis on the key issues identified by the Care Home representatives. A key example of this has been the involvement of provider representatives on developing communications and guidance for care homes in order to ensure that messaging is pitched correctly for the receiving audience.

Dorset Council established and is maintaining a social care provider web page, which can be viewed by visiting <https://www.dorsetcouncil.gov.uk/emergencies-severe-weather/emergencies/coronavirus/guidance-for-adult-social-care-providers/coronavirus-guidance-and-resources-for-adult-social-care-providers.aspx>.

The web page is provided on behalf of Dorset Council, Dorset CCG and BCP Council in order to give a single point of access for all up to date local and national Covid-19 guidance and advice. Local providers have expressed their appreciation of this approach as it has ensured a consistency of message and a significant reduction in the duplication of guidance.

Partners in Care (PIC) is a multi-stakeholder partnership with social care providers including domiciliary care and care homes which was jointly initiated by Dorset Council, Dorset CCG and BCP Council in order to enhance engagement with both local and national providers. PIC offer advice, support and guidance around workforce planning, development and training for the independent providers and a central communication point. Each day PIC sends email notifications to providers and signpost updates posted on the central website for Dorset.

Dorset CCG are also working to ensure there is one central repository of training links and guidance to complement this website to enable easy access for all providers during Covid-19. A multi-agency resource pack has been produced and distributed directly to care providers which has all the information, guidance, advice, access to training etc in one place. The impact of this will be monitored by local Quality Improvements teams and via the Capacity Tracker.

#### **Next Steps**

BCP Council, Dorset Council and Dorset CCG will work with care home providers on analysing feedback from the Capacity Tracker returns, ensuring multi-agency plans reflect concerns and issues raised and that national support issues are escalated appropriately.

## **Engagement with service users and carers**

We work closely with Health Watch and our in-house complaints and compliments teams to understand feedback from service users and public. In the last three months there have been no representations to Health Watch and only one through the Council's formal complaints and compliments system about care homes, related to the management of Covid-19. A feedback project is just being initiated to understand the experience people have had during this time around the hospital discharge process, coming out of hospital and going into a residential setting or returning home. In terms of Advocacy, impacts of the current pressures due to Covid-19 raised by Dorset Advocacy are;

- A decline in referrals at hospital discharge for advocacy support
- The difficulties of offering advocacy digitally rather than face to face
- The need to ensure emergency measures are not weakening advocacy requirements in Mental Capacity Act processes and in DNAR authorisations in care homes.
- Managing exit from interim care arrangements for individuals ensuring their views are considered

## **Next steps**

Initiate feedback project to understand the experience people have had during this time around the hospital discharge process, coming out of hospital and going into a residential setting or returning home, interim placements and including use of advocacy.

Work with Dorset Advocacy and other advocacy partners to develop alternatives to digital advocacy, keeping service users and advocates safe.

Ensure quality assurance processes are identifying and addressing where MCA or DNAR procedures have not involved advocacy within guidance.

## **2. System Management of Actions, Plans including areas of concern and support required**

### **2.1. Access to PPE**

In March 2020 at the start of the Covid-19 pandemic, supply of appropriate PPE was an issue for all health and social care providers. Dorset Council commenced direct procurement of PPE through suppliers in order to ensure that adequate emergency supplies were available for social care providers.

Council staff implemented an emergency PPE system that was available to providers 7 days a week from 8.00am – 8.00pm. To date 155,820 items of PPE has been supplied to 143 provider settings.

PPE supplies provided as part of the national response to support Local Resilience Forums has been incorporated into this approach, however Dorset Council has to date purchased circa £1.9million of PPE for local care providers. The Council does not charge and is not seeking to recharge providers for any PPE supplied to them as part of the emergency initiative.

The need for PPE is tracked through the QA process, the Capacity Tracker and through individual PPE requests to the council.

A PPE Cell was formed to resolve issues of supply and ensure that stocks were being received in care homes. Dorset Council, BCP and Dorset CCG set up single points of contact to support local health and social care providers with PPE.

The public health team, working with the regional PHE health protection team, developed guidance on use of PPE in different settings, including the care sector. Dorset CCG has also developed a clear flow chart for all providers on how to access PPE.

Mutual aid has been agreed through the PPE Cell and this has worked extremely well across the whole of the area.

As ICCs were notified by PHE of outbreaks in care homes, emergency stock of PPE was delivered on the same day to support the homes. The PPE Cell has facilitated fit testing of FFP3 masks by the Fire Service in care homes.

It should be noted that the quality and quantity of PPE has caused concern in all areas on a daily basis, but due to the commitment of teams across the area, no care home in the Dorset Council area has run out of PPE.

Dorset Council is currently working with a large group of care providers in order to establish a consolidated approach to PPE procurement.

84% of the Dorset residential care homes that responded to the corresponding question in the Capacity Tracker confirmed that they have access to the correct PPE.

### **Next steps**

Finalise the support required in order to mobilise the provider PPE consortia.  
Support providers to access the Government's 'Clipper' PPE procurement system.

## **2.2. Provision of medical equipment**

Provision of medical equipment has been led by the CCG in collaboration with Wessex AHSN, it was agreed that all Dorset care homes would receive a RESTORE2™ package of resources. This package included; manuals, a supply of the RESTORE2™ tools, online training resources and access to support from both the CCG Quality Improvement team and Wessex AHSN for support in implementing the tool. To enable all care homes to make full use of the RESTORE2™ an equipment survey was undertaken and those homes who did not have a full set including a BP monitor, non-contact thermometer and pulse oximeter were provided with this equipment.

The End of Life protocols ensure that Care Homes are supplied with hospital beds and other equipment to allow residents to die in their Care Home and not be admitted to hospital, in line with individual choice and advanced care planning.

## **Next steps**

Contact Care homes identifying an issue on the Capacity Tracker and ensure supply needs are met by no later than 26th June 2020.

### **2.3. Infection Prevention and Control and Outbreaks**

Public Health England regional health protection team provides the initial advice and guidance to care homes following notification of a suspected outbreak of COVID-19. This includes undertaking risk assessments, testing suspected cases, and providing advice on infection prevention and control (cleaning and isolation, and cohorting techniques). PHE provides a written notification to Dorset CCG, Public Health Dorset of the situation for awareness and highlights any areas for specific follow up. This has typically been around the process to access PPE and providing local support, including access to staff wellbeing resources.

The Dorset system quickly agreed and established a process to proactively follow up any formal notifications of a care home outbreak to ensure they had the appropriate information, skills and equipment as well as support to manage the situation.

An initial telephone call is made by Dorset CCG quality team and in addition to other support a system outbreak meeting is offered and convened in some cases. These meetings are a multi-agency response to support the care home manager, including Dorset CCG Quality Improvement team, local authority adult social care officers, local Primary Care Network representation, Public Health Dorset and Dorset Health Care community services. At these meetings actions are identified to support the care home and any necessary support is put in place. It is also an opportunity to discuss and identify learning from the situation which can be shared.

New admissions are temporarily suspended where outbreaks have occurred to minimise the spread of infection and enable the provider to manage staff absences and cohorting/isolation. 82% of Dorset's homes have confirmed that they have the capacity to safely isolate residents and are able to reduce the movement of staff in order to reduce the risk of infection.

## **Next steps**

Continue to learn from any outbreaks to make system changes where needed, and to support any care homes experiencing outbreaks.

The response to outbreaks in care homes will form an important part of Dorset Council's local outbreak management plan, which all upper tier authorities are required to have in place by the end of June.

We are continuing to identify and prioritise larger homes that have not had COVID for asymptomatic testing of residents. As more and better information comes back to our local system about the prevalence of COVID in care homes, including the role of asymptomatic transmission, we will review and refine our support to maximise opportunities to prevent further outbreaks from occurring.



## **2.4. Infection Control Training**

The majority of Care Homes are reporting in the Capacity Tracker that they have had access to training and support in PPE (86%) and medical equipment (77%). Dorset CCG, in conjunction with Dorset Public Health, BCP Council and Dorset Council and with proactive support from the LRF, has led on implementing the national train the trainers offer to Care Homes in May 2020. The process of engagement with Care Homes have also verified where Care Homes have already undertaken accredited training in infection control. Although there were initial delays in accessing 'Super Trainer' national training, there are now 19 trainers for the Dorset and BCP Council areas. Training is being rolled out to all Care Homes who require the training or wish to take up additional or refresher training. Feedback from Care Homes on the quality of the training is very positive.

### **Next steps**

Complete training in infection control for all care homes who require or request it.

## **2.5. Testing**

Testing is a significant tool to allow us to support care homes to understand whether they have Covid-19 amongst any of their residents or staff members. The access to testing through Public Health England regional Health Protection Team, as part of a response to a possible outbreak for symptomatic residents has been delivered reliably and effectively.

A Testing cell set up with NHS England and working in close connection with the Dorset LRF has led on establishing comprehensive arrangements for testing with a focus on ensuring access for residents and staff in care homes for those being admitted to Care Homes. Testing routes for Care Home staff and residents have been actively communicated to Care Homes as national capacity and testing pillars have been developed.

The online booking portal for Care Homes for testing of asymptomatic residents and staff is being actively promoted to all Care Homes and those Care Homes which are a priority for testing under the national criteria have been identified and requests for testing made through the Director of Public Health. Responses on the Capacity Tracker show that initial levels of registration on the portal are positive (88%). Communication resources and FAQs to support this programme of work are being developed so that all care home leaders are clear on the purpose and consequences of the testing.

Feedback from Care Home leaders is that there can be significant delays between requesting test kits and receiving them in the Care Home.

74% of residential care homes are registered on the national testing portal.

### **Testing prior to admission to a care home**

A process is in place for testing prior to the discharge of patients from the 3 Acute hospitals and 1 local community and mental health trust prior to admission back to the care home to meet the

requirement of the Adult Social care plan. This was agreed by Health and Care partners. There is also a system for residents to be tested prior to admission to a care home from the community, although so far this has been small numbers, so we are not yet clear how effectively this pathway is working. This will continue to be reviewed.

38% of care homes have given a negative response to the related capacity tracker question. In the main this is due to homes not having accepted new placements during the period and there not being a suitable response available to reflect this. It is therefore recommended that the national question is changed to allow a care home to indicate that the question is “not applicable”. There are a very small number of situations which are requiring detailed follow up to understand the situation and ensure that there is appropriate learning across the system.

### **Next steps**

Further promote registration on the Portal using Capacity Tracker to identify those homes reporting issues.

Urgently identify why a small number of care homes are reporting problems with testing prior to discharge from hospital.

Investigate and escalate issue of level of voided tests reported by care homes.

Resolve national data access issues to ensure number of tests and number of positive tests in the area is known.

Implement new pathway guidance to prevent discharge of new patients to Care Homes with Covid-19 positive cases.

Publish to Care Homes new guidance and support processes for asymptomatic testing.

## **2.6. Clinical Support for all Care Homes.**

Dorset CCG has been working with both Primary Care Networks (PCN) and Dorset Healthcare University Hospital Foundation Trust (Community and Mental Health Services provider) to ensure that each care home has a multi-disciplinary team (MDT) that will provide support in both a proactive and responsive way. This work builds on the Enhanced Health in Care Home programme.

In addition, this work also includes aligning each care home to a specific PCN, which will form part of the MDT response referenced, and meet the requirements for a clinical lead. Whilst the CCG is finalising this alignment, for those homes where a Clinical Lead was not already in place, ‘interim’ Clinical Leads were agreed with PCNs and Dorset Healthcare.

Following advice from Dorset Care Home Association, the CCG did not share the names of interim leads, due to the potential for further confusion, should there be a change at the end of May, when the alignment process has been completed.

The CCG has informed Care Homes of the work that has been undertaken and that confirmation of their Care Home Leads would be provided once the Care Home/PCN alignment had been completed and agreed with all parties as planned.

PCNs have also contacted Care Homes in their area to discuss alignment and will further define with them, the support to be provided including MDT working, as well as:

- A consistent weekly 'check-in' by a GP and/or other health professional
- Support to develop and/or update individual care and support plans, especially for those at end of life
- Pharmacy support to staff and residents, including reviewing medication

Data from the Capacity Tracker demonstrates the majority of care homes experience good support from their local primary and community health multi-disciplinary teams (92%). There is a Multi-Disciplinary Team (MDT) in place for each care home which encompasses the clinical lead functions, which are yet to be completely defined by NHS England. Dorset CCG have communicated with each care home and will continue to do so as we refine the offer and access points to MDT support.

### **Next steps**

Continue to engage with care homes as we refine the offer and access points to MDT support. PCN's are required by NHSE to let the care homes know the name of their clinical lead/s by 29/05/2020

### **3. Alternative accommodation and approach to isolation and shielding where care homes cannot cope.**

In the early stages of the pandemic alternative accommodation block commissioning arrangements were made with care homes and other system assets. However due to the resilience of the local system, 82% of providers have the ability to safely support isolation, these arrangements were not required. The Local Authority is in the process of reviewing these arrangements with a view to further commission capacity within its own block contracting arrangements.

The local authority and CCG are reviewing options, however at present there is significant capacity with local providers. Dorset Council will monitor this on an ongoing basis and has options available by utilising additional assets within the local system.

For Covid-19 positive patients being discharged from one of our acute hospitals who cannot yet be placed in a Care Home, beds have been secured in our community hospitals with appropriate clinical care arrangements in place.

### **Next steps**

The Local Authority in partnership with the CCG is in the process of reviewing available options to enable isolation. The Council will discuss with each Care Home which have reported that their care home cannot physically provide isolation or cohorting the specific business continuity options available for residents in that home if there is a Covid-19 outbreak.

## **4. Workforce Support and Development and restricting movement between Care Homes**

### **4.1. Restricting Movement of Staff**

One of the key areas to try to prevent the transmission of Covid-19 both within and between care homes has been to control the movement of staff. The system rapidly reiterated and shared the advice around limiting staff movement around different areas of care homes and the need to cohort residents. The providers with multiple homes and sites in the area also took the decision to limit staff movement between their homes. In addition, the local care agencies rapidly agreed a position to limit the deployment of agency staff to a single designated home, rather than working across multiple sites.

In the early days of the pandemic some homes were badly affected by staff absences due to self-isolation which had to be managed through agency staff. However, action by care providers and the wider system has stabilised the care home workforce and the reported current absence rate is relatively low at 6.8%.

82% of care homes have stated that they continue to be able to restrict the movement of staff in order to reduce the risk of infection.

#### **Next steps**

Monitor with care homes how the use of the Infection Control Fund (ICF) monies will enable more care homes to implement measures to restrict movement of staff

### **4.2. Workforce Support and Development**

Workforce support and development has been system wide. Progress to date includes:

- Specific action on staff well-being -in mid-May. Information, resources and tools were published and promoted to care homes, including a free counselling service.
- New online training resources to induct new staff, and for IPC.
- Rapid dissemination of changing guidance and processes. As noted above, communication is co-ordinated through a central web site and through Partners In Care daily updates (in response to provider concern at the multiple communications they were receiving).
- The Dorset Clinical Commissioning Group have also set up a dedicated website to host all the various training offers for the care sector and there is signposting between these two central websites to ensure good awareness.

#### **Next steps**

Dorset Council is in the process of rolling out a recruitment campaign utilizing the 'Care' brand which will also look to utilize funding from the apprenticeship levy to support small providers to offer care-based apprenticeship opportunities.

### **4.3. Mutual aid**

Only 36% of local home providers stated that they have been able to access additional workforce through mutual aid to date.

The system for Mutual Aid in respect of volunteers and returners requires further development in order to improve accessibility for all social care providers. Dorset Council is working with local system partners and providers in order to better understand the needs of care homes in terms of the skill mix.

It is acknowledged that the initial focus of this work was on supporting the healthcare system and our social care providers have feedback concern that this offer should have been in place for them during the initial wave of Covid-19. Local partners will be working to ensure that this is in place to support any future infection peak/s and also to look at how this approach can be maintained as part of standard business continuity planning.

A mutual aid agreement is in place between local care home, home care and supported living providers.

#### **Next Steps**

Assessment of the impact of the above will now be done with Care Homes to agree next steps, to further develop the system for Mutual Aid to meet care home workforce demands

### **5. Commissioners' approach to sector financial pressures.**

Dorset Council provided a 10% uplift to gross fee rates for care providers of LA commissioned care, including registered care homes from 19th March. The 10% uplift is paid monthly in advance to help with cash flow. To ensure providers had clarity of financial planning to meet pressures, this was agreed until the end July. In addition, providers were offered an exceptions process where they could request further funding to meet exceptional pressures above the 10% additional funding. Because the Local Authority is procuring beds from 96% most of the local market have received financial help through this route.

The CCG provided an interim support of 10% uplift to providers who were eligible and met support conditions for the period 1st April 2020 to 30th June.

Both of these arrangements are subject to review before the end of the interim period. Residential Nursing homes have also received a backdated uplift for the cost of NHS Funded Nursing Care (FNC) through the CCG from 2019/20 and a further inflationary increase for 20/21.

#### **Next Steps**

Review uplift arrangements before the end of the interim period.

Work with care home providers on arrangements for dissemination and monitoring and reporting of ICF funding following grant determination and guidance published 22<sup>nd</sup> May.

## Conclusion

The ability to work together as a whole system has developed significantly in Dorset during the pandemic. The local Integrated Care System had a strong foundation however all partners have worked tirelessly to address the challenges presented by Covid-19 with an enhanced level of mutual cooperation and shared goals. Dorset Council is committed to continuing to work this way.

I can confirm that this response has been fully agreed with Tim Goodson, Accountable Officer, of the Dorset Clinical Commissioning Group. I have informed Chief Constable James Vaughan in his role as Chair of the Dorset LRF and Cllr Rebecca Knox in her role as Chair of the Dorset Council Health and Well-Being Board on the plans in this letter.

Dorset Council welcomes the additional funding Government has provided to date to support all our care homes and all their residents. However, the costs incurred by the Council have exceeded the additional money received. Funding for adult social care was already under pressure before the Pandemic. The new challenges that have arisen will be with us for some time. The funding position will worsen unless further national action is taken, and further funding provided both to the wider adult social care sector and specifically to Councils through the pandemic period.

Dorset Council urges the Government to bring forward the national policy review work for adult social care at the earliest possible opportunity. We will continue to respond to the challenges of the Covid-19 pandemic to enabling us to sustain the ongoing work we are doing with the CCG and our care providers to keep our residents safe.

We welcome the ongoing support to adult social care from central government through the Covid-19 crisis. I am clear we could not sustain this level of support without this ongoing resource.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Matt Prosser', with a horizontal line underneath.

Matt Prosser  
Chief Executive  
Dorset Council

