

Resources Scrutiny Committee - 2 June 2020

Dorset Council's Response to Covid-19

Questions Councillors and Responses

From Cllr Carole Jones

1. I know many members will have heard, like me, from residents who have received the government food boxes and they had no need of them. No matter how hard I tried – I could not remove names or change an address or anything. This type of activity really needs to be left to the local community as we know where the need is. I have wasted valuable time in arranging collections of these boxes to deliver them to the food banks. I would very much like this fed back please.

We have continued to feed this back, firstly via Local Resilience Forum and Military Planners, and more recently via direct conversations with MHCLG. The difficulty has been that when people deregister from the national Food Box scheme some have experienced also losing their Priority Supermarket Delivery slots (even though this is not meant to be the case) and so we have been reluctant to advise deregistering if they are reliant on supermarket delivery. We agree that a local response coordinated by Dorset Council in partnership with our CVSE would provide the best response but to date Government have decided to continue with their national scheme.

2. With regards to those that are shielded, whilst Dorset Council will know who they are, as do the doctors locally, I would have found this information useful after setting up our Covid Action Group. This way we could have made the calls instead of Dorset Council having to make them with our local volunteers, we could have quickly identified those needing their prescriptions, we could have prioritised their shopping needs etc. Whilst there will be GDPR – as this was what can only be described as an emergency – I would think that as local members this information for our own areas could be shared, or perhaps so just as long as it was each local member having that information – could this be discussed? After all, I am taking calls for help from the Doctors and the CCG – but we would like to identify those in most need for food parcels – but are having to reach out through the Heads of both schools to identify those who need help but may not like to ask – surely we could find a better way?

We have worked with Volunteer Centre Dorset and Age UK to target support to shielded individuals in cases where a local volunteer service was the best way to respond, and in many cases, this includes access to food and medicine as well as other types of support. We have not shared the full list of Shielded Individuals with a range of community groups, and through our Community Shield group we have checked this several times with MHCLG. Their advice has consistently been that we have acted properly and that it would not have been appropriate to share the list of shielded people more widely with a range of Covid Action Groups. Dorset Council has been able to focus our efforts supporting Shielded People precisely because we could trust our wider Community Organisations supported by Elected Members to manage the wider needs of communities in Dorset.

From Councillor Gill Taylor

1. Our front-line staff have continued to visit vulnerable clients in their homes during COVID. This, I believe, has included social workers who are doing routine checks on residents. Part of their checks / support includes entering the client's property as it would not be possible in some cases to ensure the ongoing safety of this client group without being able to see them in their home environment. It is my understanding that the staff who are being asked to undertake these checks / supports are still not being provided with the necessary PPE. If this is correct, please could you comment on why these staff members were not included in staff requiring PPE to undertake their day to day work for their own safety and for the safety of the clients they are visiting?

Please see answer below (as stated in question 2)

2. My next question is about the Risk Assessments for staff visiting clients – when they were in place taking COVID into account, how they were amended and how that information was disseminated to staff.

Visiting our vulnerable clients has been by exception rather than the norm. On 18th March the Locality Managers sent out the attached PowerPoint to all of their staff advising them of the following:

Staff must call the vulnerable individual to check if they have any symptoms or if anyone in their household has symptoms. (Similarly, if any of our staff have symptoms, they were asked to self-isolate for 7 days and 14 days if family member has symptoms).

Staff are also asked to call the area Practice Manager to talk through with them alternatives to visiting in person e.g. is another professional visiting who has to go (e.g. District Nurse) who could undertake the visit/assessment or can it be done remotely or via a Carer or relative.

We have always provided PPE for any member of staff who has had to do a physical visit and when the localities have not had PPE themselves, they have obtained stocks via the hospitals or community rehab team.

No member of staff has ever been asked to do a physical visit without appropriate PPE

The localities have a stock of PPE so any member of staff needing to do a visit can arrange to pick up or have it delivered and staff member and anyone needing to do more regular visits are given a stock to keep in their car.

NB: The exceptional cases of where a member of staff has had to visit the person have been where they have fluctuating mental capacity to make decisions or possible complete lack of capacity or where there is a safeguarding issue.