

WEST SUSSEX COUNTY COUNCIL CABINET COVID-19 BRIEFING 26th MAY 2020

1. Priority issues (pages 2 – 3)

a) West Sussex approach to the reset

- **County Council services (page 2)**
- **Gatwick and the regional economy (page 3)**

b) Implementing Government's Plan to Rebuild (pages 4 – 10)

- **Highways and public realm (pages 4 - 5)**
- **Schools (pages 5 - 7)**
- **Managing our buildings (page 8)**
- **Testing and Tracing (pages 8 - 10)**

2. Data and trends (page 11 & annex B)

3. Service/Issues briefing (by exception) (pages 12 – 24)

- **Household Waste Recycling Sites (page 12)**
- **Care homes (pages 12 – 17)**
- **Hospital capacity (pages 17 - 18)**
- **Personal Protective Equipment (page 18)**
- **Children's Services (Early Help, Safeguarding and Commissioning) (pages 18 – 20)**
- **Shielded cohort/Community Hub (pages 20 - 22)**
- **Financial position (page 23)**
- **Lobbying (pages 23 - 24)**

1. Priority issues

a) West Sussex approach to the reset.

County Council Services

1. In a number of significant areas of our activity, West Sussex County Council (WSSCC) remains in a very significant response phase to the COVID-19 pandemic, but now is the right time to begin to establish how, as an organisation, the County Council will approach the reset.
2. The reset work will be:
 - Led by Cabinet, with appropriate engagement and governance
 - Focused on the future of West Sussex and West Sussex County Council's priority outcomes
 - Built on our assets and learning from the initial response
 - Grounded in and encompassing the improvement work needed and changed statutory provisions in Children's Services, Fire and Rescue, Adults and Governance and commitments to tackling Climate Change
 - Shaped and managed through a single integrated corporate plan for all our business
 - Ensure we are making the best use of resources, securing value for money and have a sustainable organisation
 - based on creating and nurturing stronger partnerships locally and regionally whilst recognising each organisation will be responsible for its own approach
3. There will be at least three phases but these will not be consistent across services and partnerships:
 - Next few weeks?: Living in lockdown and immediate release
 - Next few months?: Living with the virus and social distancing
 - A year's time?: Post vaccination being widely available

The regional economy & recovery

4. COVID-19 is having a significant impact right across the County's economy. Businesses are being hit hard, residents are losing their jobs and livelihoods, and the implications of the aviation industry crisis on Gatwick Diamond Economic Area are far-reaching and impact the local, regional and national economies.

5. Government will lead the way on the national recovery strategy and re-set of the economy, which will be phased over time, but delivery will primarily be at a local level. The County Council will seek to play its full part working with a broad range of partners, including the Coast to Capital LEP and the Districts and Boroughs. We will be guided by evidence to fully understand the impact of COVID-19 on the West Sussex economy, and to inform activities and interventions we take. We recognise the economy will not be the same as before, and that there will need to be place based (including town centres) and sector approaches (e.g. aviation, tourism and hospitality) which at times will reach beyond the county.

6. We will seek to work with partners and Government to co-design and support the economic recovery of Crawley and the wider region as one of the main areas of focus for our economic re-set plan. (Letter from Leaders to Chancellor on the Gatwick Diamond Economic Area's recovery at annex A)

b) Implementing Government's Plan to Rebuild

Highways and public realm

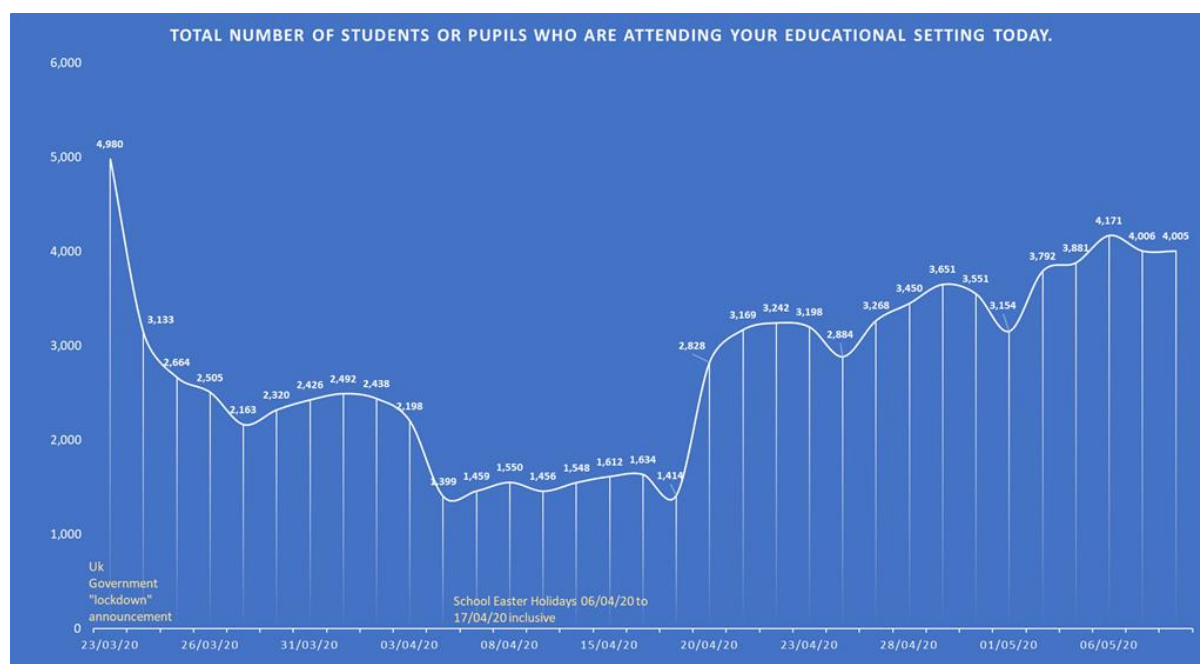
7. The Department for Transport have produced statutory guidance for Local Authorities to support the reallocation of road space to support walking and cycling and for providing safe space in urban areas to support social distancing. The Government's expectation is for local authorities to make significant changes to their road layouts to give more space to cyclists and pedestrians with the aim of embedding the changes to travel behaviour, demonstrate the positive effects of active travel and have the opportunity to travel safely.
8. We are establishing a partnership with the Borough and District Councils to work through proposals. Initially the working group will draw up a broad outline of how to approach the issue and some key criteria, in consultation with the Cabinet Member. This will help us to determine what should be done and the ability to deliver it. We will need to consider what temporary changes are needed, permanent changes, and consider how to ensure residents feel safe and key trading areas are able to reopen.
9. The Government guidance includes a large number of initiatives from the creation of pop-up cycleways, pedestrian and cycle zones, widening of pavements, cycle parking facilities, junction improvements and the introduction of 20mph speed restrictions. There will be competing priorities from different user groups and we will not be able to meet all these demands.
10. We will also consider whether it is possible to bring forward medium- and longer-term plans to address more immediate priorities. Importantly, the Government guidance points to the importance of 'whole-route' approaches to create corridors for buses, cycles and access only on key routes into town and city centres, as well as identifying and bringing forward permanent schemes already planned, for example under Local Cycling and Walking Infrastructure Plans, and that can be constructed relatively quickly.
11. In considering the Government Guidance we have to be mindful of what can be safely and practically delivered in the Government restart timescales.

12. The guidance has increased demand from residents and user groups to implement cycle lanes, road closures and other changes to the highway. The Government has announced £250m of funding nationally to support this initiative but has not yet given any detail as to how this will be distributed. The Council will incur costs in developing proposals and for the short-term initiatives these will all be revenue costs. Due to the demand to deliver something quickly we will have delay some other projects in order to enable this project to proceed.

Schools

Summary of the current position

13. Attendance in schools is generally running at 3.5% which is the highest since the lockdown was announced in March. This compares with a national average of 2%. The number of vulnerable children and young people attending school is also increasing and is currently 537.



14. Throughout the lockdown, West Sussex Schools have remained partially open in the main. A number of schools have remained open over the bank holidays to cater for the children of key workers. Schools have been providing online work for pupils in a variety of ways and our secondary schools have tried to maintain educational learning and contact with students online. However, there have been concerns over the lack of

response and engagement from some. National research is indicating that this is a widespread problem but more prevalent among disadvantaged pupils.

15. The Prime Minister's announcement of a phased return was widely anticipated, albeit the detail unknown. The Education and Skills team have been working closely throughout the lockdown period with the school staff Unions, the WSCC Executive Headteachers for primary, secondary and special schools, and the chairs of the Multi Academy Trusts on a number of issues to agree policy and protocols, for example a Hub or Clustering model and the flexible deployment of staff should there be the need to cluster children in a smaller number of schools due to staffing issues. We have maintained regular and almost daily communications directly with our schools and have provided a range of COVID-19 related advice and guidance from HR to safeguarding, financial, home based learning, school meals and IT security.

Phased School Return

16. The announcements made last weekend have been followed up with additional more detailed information on the proposed phased restart. The phased return of schools is planned as follows:

17. Should criteria be met, the intention is that the following groups of pupils will be phased back into school from the 1st June:

- Children in early years settings and nurseries, including maintained nursery schools;
- Children in Reception, Years 1 and 6 in primary schools;
- Children and young people in Reception, Years 1,6, 10 and 11 in Alternative provision;
- At some stage during the summer term, Years 10 and 12 in secondary schools should be provided with face to face tuition to complement online distanced learning (details are due to be clarified later);
- For special schools, increased attendance will not be restricted to particular year groups but is expected to increase numbers generally;
- Schools will still be expected to provide schooling for the children of key workers, the vulnerable with social workers and those on EHCPs, in line with risk assessments no matter which year group they are in.

18.Guidance also suggests that it is the ambition of the Government that all primary children will be able to return to school for a period of time in the month leading up to the summer break.

19.Detailed guidance provided by Government in supporting schools in preparing for the return raises a range of issues including social distancing, cleaning regimes, timing of school days and PPE amongst others.

Current Plans

20.An update will be provided at the meeting about the on going work with schools, which includes:

- Key working groups have been developing guidance and support planning around the key issues that schools will need support with on their phased return;
- We have established a weekly teleconference call with the unions, Trusts and Executive HTs to seek agreement on some of the key issues underpinning mitigation of the challenges and are working to develop agreed guidance that can be applied consistently within localities of schools;
- We are negotiating with the DfE for additional coaching and support for those schools with some of the greatest challenges;
- We will be working with schools to agree key principles and steps towards re-opening which may include shift patterns in schools (e.g. half day sessions for different groups morning and afternoons, staggered starts and finish times, part time attendance with additional cleaning time etc.);
- We are exploring impact on transport and also on school meals;
- We are exploring staffing issues with the DfE in light of union positions on this;
- We are working with our Executive Head Teachers on exploring practical transition arrangements for Y6-7, Y11/12 to FE, and also early years to Reception and, in the case of infant schools, from Year 2 to Year 3, and for Clapham and Patching CE Primary and Rumboldswyke, transition to new schools.

Managing our buildings

21. We are developing individual and buildings-based risk assessments to be used as we manage the return carefully and in a planned way taking account of the guidance which is being issued nationally. For the time being staff have been advised to continue with the current arrangements.

Testing and contact tracing

COVID-19 Testing for WSCC Employees

Extension of eligibility for testing

22. Following announcements on the 29th April 2020, eligibility for testing was extended nationally. This provided for testing of:

- all essential workers with symptoms
- anyone over 65 with symptoms
- anyone with symptoms whose work cannot be done from home
- anyone who has symptoms of coronavirus and lives with any of those identified above

23. As WSCC already had arrangements in place for testing symptomatic employees, the announcement made little difference to testing of WSCC employees.

24. WSCC communicated to all employees, and externally, that individuals can self-refer for a test. Some employees will have taken up this option, but as they are self-referring, we do not have a record of this. It should also be noted that test results are provided to the individual, rather than the employer. WSCC continues to encourage employees to report their test results to their line manager.

Asymptomatic Testing

25. Alongside the extended eligibility criteria, the intention to extend testing for essential workers, particularly in care homes, who are asymptomatic was announced.

26. Currently testing capacity is focussed on homes caring for older people with dementia where there has been an outbreak. In time, once the current priority list of homes with an outbreak have all received tests, it is anticipated that a rolling programme of testing will be developed for those homes without any reported cases.

27. A Care home Portal has been introduced for care homes looking after older people or people with dementia. This enables application for testing whether or not residents or staff have coronavirus symptoms. Testing capacity is currently limited, so prioritisation of testing is led by the Director of Public Health on the following basis:

- Care homes with a new outbreak.
- COVID-19 free care homes with over 50 beds due to the highest risk of outbreak.
- Care homes referred by Local Authorities based on size (over 50 beds) and local knowledge of struggling homes.

28. At this point to manage capacity and ensure all the swabs can be processed there is a limit on the number of homes that will receive their swab kits each day across England.

29. Asymptomatic social care staff can now get tested at the same time as their symptomatic household member through the system set out above.

Current challenges

30. The current challenges on testing are:

- WSCC will not always know whether an employee has self-referred
- WSCC will not always receive confirmation of the test outcome
- The plan for testing, particularly of asymptomatic staff in care homes is still in development

National Test, Track and Trace Programme

31. The national Coronavirus (COVID-19) Test and Trace Programme continues to be piloted on the Isle of Wight.

32. The Government has announced the expansion of the expert team leading on this rapid nationwide roll-out. Joining the Test and Trace Programme Chair and Head of NHS Improvement, Baroness Dido Harding, are Tom

Riordan, Chief Executive of Leeds City Council, who will be leading on tracing alongside his existing role, and Sarah-Jane Marsh, Chief Executive of Birmingham Women's and Children's Hospital, will be the lead on testing.

33. The team will work rapidly to expand test and trace nationwide, backed by the scaling up of testing capacity across the country.

34. Directors of Public Health across Sussex are engaged in supporting the national roll out of this programme at local authority level, and are communicating with key stakeholders, including district and borough Environmental Health Officer colleagues, to keep them updated as the programme progresses.

2. Data and trends

Cases, deaths

- Details attached as an annex to this paper.

3. Service/Issues briefing (by exception)

Household Waste Recycling Sites (HWRS)

35.HWRSs Re-opened on Monday 11th May 2020, on summer hours – sites are relatively quiet, but we will continue to monitor visitor numbers.

36.HWRSs Recovery Strategy Phase 2, exploring if it is appropriate to expand the streams accepted, is being considered for potential implementation after Tuesday 26th May 2020 depending on demand.

Care homes

37.This note sets out the support to the care home sector in West Sussex. It explains the make-up of that care sector, the responsibilities of statutory bodies, namely local authority, NHS, health and government agencies, and the actions taken as part of the response to COVID-19.

38.The report shows that the care sector is varied; the local authority, the health system and government agencies all have separate responsibilities in relation to supporting the sector and they are working in a co-ordinated way. All organisations have enhanced their support in relation to COVID-19. The death rate in care homes is commensurate with that in our comparator authorities. The situation is ever changing, and our response must be flexible.

Detail

39.There are 235 care homes for older people in West Sussex. The care homes provide around 8,608 beds, of these 2 are run by the County Council, with 54 beds A third of these are commissioned by the County Council with the remainder commissioned through other local authorities, health or funded directly by residents.

40.Other care settings in West Sussex include:

- Domiciliary care – 163 providers operating in West Sussex.
- Extra care - 13 commissioned Extra Care Schemes across West Sussex, 569 flats across the County.
- Learning disabilities and mental health - 277 services including, nursing, residential, supported living and supported housing. The

County Council has 95 in-house beds for those with learning disabilities or requiring lifelong services.

41. Public Health England (PHE) have confirmed in West Sussex:

- 132 care settings have confirmed or suspected clusters of COVID-19
- 28 care settings have restrictions where care homes are advised to restrict admissions and transfers for 14 days after the last case develops symptoms. PHE South East (PHESE) is advised by the setting of the onset of an outbreak.

Support for Care Homes

42. The primary focus of this briefing is on support for care homes, but similar support is also available to all care settings.

43. Under the Care Act, local authorities have a number of responsibilities to make sure people who live in care homes:

- Receive services that prevent their care needs from becoming more serious or delay the impact of their needs.
- Can get the information and advice they need to make good decisions about care and support.
- Have a range of provision of high quality, appropriate services to choose from.

44. In order to deliver this the County Council operates a framework which sets out quality expectations and monitoring requirements. The County Council has a statutory duty to ensure the sustainability of the market as a whole. Additional oversight of care homes is through the County Council as the lead contractor with statutory responsibility, the Care Quality Commission (CQC) as the regulator and Clinical Commissioning Group (CCG) as the user of the services for the care of people who are eligible for Continuing Health Care or Funded Nursing Care.

45. The roles and responsibilities of each party have continued during the COVID-19 incident, but at unprecedented levels and pace. This places even greater importance on the partnership between local systems – CCGs and local authorities in particular, and with regional and national relationships with the CQC.

46. At a local level and nationally, the following support is available to care homes:

Organisation	Support
West Sussex County Council	<ul style="list-style-type: none"> • Contracts & Commissioning Teams – proactive and regular contact with providers large and small in learning disability and mental health and older people. • Quality assurance and contractual oversight. • Reactive contact with providers facing particular challenges identified by the Contracts Team, GPs, community nursing, the CCG, another health provider or relatives. • Health protection – the County Council commissions infection control champions, along with a comprehensive infection control training and development support and guidance to make sure care homes are supported to work to quality standards and have access to the PHE and NHS support they need. • Support to care homes where there are risks to financial viability and/or risk of provider failure due to safeguarding or quality concerns. • Co-ordination and oversight of all provider concerns through the multi-agency quality and safeguarding group. • Investigations of safeguarding concerns raised through the multi-agency safeguarding hub. • Out of hours duty cover to respond to any urgent situations. • Robust and efficient emergency planning processes.
NHS (local) / CCG	<ul style="list-style-type: none"> • Ensuring reviews (albeit virtual) of directly funded customers. • Ensuring access to primary care for nursing home residents (including out of hours). • Provision of targeted clinical support to care home. • End of life care pathways. • Infection control (jointly with Public Health). • Co-ordination of testing activity. • GP support to care homes.
National / NHS	<ul style="list-style-type: none"> • CQC regulatory function.

	<ul style="list-style-type: none"> • Provision of national guidance and information.
--	-----------------------------------------------------------------------------------------------------

47. The following support has also been added in response to COVID-19:

Organisation	Support
West Sussex County Council	<ul style="list-style-type: none"> • Ensured collation of daily SITREP information on outbreaks and service restrictions including market capacity. • Market information to identify where homes are in difficulties and where we have remaining capacity. • Ensured access to up to date guidance and advice via regular communication with providers including regarding testing and access to PPE. • Awarded an additional 10% payment for 3 months to care providers recognising the pressures on them. • Awarded an additional 20% payment to domiciliary care providers to ensure they can maintain and enhance their provision. • Held virtual Provider Forums. • Provided responses to providers following hundreds of contacts per day on a range of issues. • Held urgent multi-agency meetings to respond to specific concerns raised about individual care settings and reacted with direct support, eg. ordering in meals on wheels, undertaking emergency drops of PPE supplies. • Considered alternative accommodation with care for people leaving hospital who are COVID-19 positive to reduce the risk of them returning to care homes. • Enhanced the domiciliary care rounds numbers so, wherever possible, people can go home.
NHS (local) / CCG	<ul style="list-style-type: none"> • Enhanced locally commissioned GP services to provide additional support to care homes. • Stepped up an enhanced infection prevention and control offer. • Built on the medicine management offer to ensure care homes are supported to access medicines via community pharmacies. • Testing in hospitals.

National / NHS	<ul style="list-style-type: none"> • Co-ordination and supply of PPE. • PPE guidance. • National testing strategy and delivery. • Hospital discharge guidance. • Social Care action plan.
-----------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

48. Whilst different agencies have different responsibilities and accountabilities, partnership working has been essential to ensure support is offered to care homes in a co-ordinated and systematic way.

49. There are positive local relationships across key leads within the County Council and the CCG and all parties are represented, including a West Sussex Care Homes Group which feeds into a Sussex-wide group. All parties are also represented within the incident command structure alongside key providers.

50. DPH will now be responsible for prioritising testing for care homes, this will be supported in the twice weekly meeting with CCG, PH, Ops and Commissioning representatives. The prime function of this meeting is to prioritise those homes in needs of support due to COVID-19, so an appropriate response can be provided by the health and social care system.

51. The Government has announced £600m for care homes to help manage workforce infection control, with further details expected. We will work through the detail and what this means for West Sussex.

52. We are convening a Virtual Provider Meeting on 14th May with residential and nursing home providers supporting people with dementia. The purpose of the meeting is to understand what support providers need at this time to give them the confidence to accept new placements and referrals from hospital.

53. Letters to all providers of care homes, extra care, shared lived and supported living supporting customers funded by the Council have now been issued. A single payment representing 10% of their funding on 31st March, has been calculated over a 13 week period (1 April to 30 June) and will be paid as an additional payment on payment runs between 14th May and 28th May.

54. The following areas are being actively pursued by the County Council:

- Creation of a Provider Hub for all customer groups (similar to that cited in Hertfordshire in the social care action plan).
- Review of the current emergency planning processes to ensure they are fully fit for purpose.
- Models of support for care home staff welfare and wellbeing.

Hospital capacity

55. We have adequate acute hospital capacity in West Sussex, although there has been some increase in admissions of non-COVID-19 cases from community or via A&E which will impact on the occupancy levels. There has been a reduction in the admission rate of COVID-19 patients in recent days. Our local system also has an amount of empty community bed capacity ready to respond to demand.

56. Hospital discharge hubs are still running, overseen by an 8-8pm 7-day joint placement hub. As new patients become ready for discharge, teams are working hard to ensure that they are discharged safely with minimal delay. The changes in the testing model in hospitals is helpful in ensuring that the COVID-19 status is known prior to planned discharge.

57. To support the number of people leaving hospital we are undertaking the complex task of forward planning with our capacity modelling, working with our public health team and NHS colleagues. We continue to work with the CCG to secure appropriate levels of domiciliary care, care home and nursing home beds, and voluntary services to support effective discharge and ongoing support to people in the community be that in a care setting or at home.

58. Our local NHS partners have asked us to give a continued focus also on mental health discharges and our teams are responding to ensure these can be monitored effectively and discharges continued in a safe and supported way, in the context of a reduced social care workforce. The county council commissioning and contracting teams continue to work well with the local provider market particularly the innovative Discharge to Assess pathway in partnership with a local provider and the NHS trust.

59. We have agreed and communicated an additional COVID-19 3-month uplift to the residential, supported living and nursing home market to alleviate

some of the financial impact on the market and a 3-month uplift with our domiciliary care providers.

60. We know that care homes, across the sector, are facing very challenging times managing the care and support of COVID-19 positive and symptomatic people. We recognise that there is a need to ensure care homes feel and are supported as much as possible and are developing a provider hub to proactively and reactively work with them. We are also working with our NHS partners to ensure care home support is co-ordinated and that the recent Government asks of the NHS are put in place to ensure homes are confident in their use of PPE and have support from GPs and community teams.

Personal Protective Equipment (PPE)

61. We continue to be able to source sufficient PPE to meet the needs of the county council's staff as determined by the last Government guidance. The Council's requirements is being reviewed to ensure any subsequent implications from easing lockdown arrangements are realised. We continue to place orders regularly for supplies.

62. We continue to receive national stock for distribution to other organisations in need via the SRF. We have a dedicated page on our website detailing eligible organisations for the national stock with an on-line form to enable contact with us when they are in need of stock and can't access through other routes. We have been able to meet third party requests from national supplies.

63. To date we have only distributed a minimal amount of stock to third parties therefore we have no need to review our current policy of not charging for distribution of our stocks to third parties. We will keep the policy under regular review.

Children's Services (Early Help, Safeguarding and Commissioning)

Recent changes to Government guidance and regulation

64. Changes to guidance on the use of PPE, and a move toward increasing the number of contacts staff have with vulnerable children and young people, is

creating anxiety on the ground. The SLT are working with staff and managers to address this.

65.Changes to Statutory Instrument (2020, No.445) – eases duties imposed by ten sets of regulations relating to the care and protection of vulnerable children and young people. After careful consideration and mindful of the need to prepare for a return to business as usual, SLT have agreed not to adopt these permissions, to ensure that the highest standards of care and protection remain consistently in place.

66.Included in the announcements outlined elsewhere in this report related to the reopening of schools are details relating to the re-opening of early years and childcare provision. Whilst the detail is vague and in advance of the more detailed operational guidance, we have been working with our providers to plan and have supported access to a range of business support tools. We have also asked providers to survey parents to understand potential demand as this will largely determine whether it financially viable to fully reopen given that circa 45% are currently operating to support critical worker families and vulnerable children.

Education Attendance – Vulnerable children

67.The numbers of vulnerable children attending schools is increasing slowly (537 on 12.05.20), out of a maximum of around 5,000 402 children with an EHCP (out of 5,785 0-25yr olds) are recorded as attending school. [Note - some children may be double counted, as they have a social worker and an EHCP.]

68.Attendance fluctuates daily; however, it is beginning to increase, and it is now at ~3.5%. Social workers and teachers are in communication with families about school attendance where risk has been identified.

Safeguarding vulnerable children, young people and families

69.Referrals to the Multi-Agency Safeguarding Hub have shown a sharp decrease. Prior to lockdown an average of 235 contacts a day were recorded; during the first week of lockdown this reduced to an average of 92 contacts a day (60% reduction). In the week ending 17 April contacts increased to an average of 160 per day (32% reduction). Together with colleagues across the Safeguarding Partnership we are anticipating and

planning for a surge in referrals as restrictions are lifted. In the week ending 15 May, there have been an average of 148 contacts a day, which is a 37% reduction from those prior to lockdown.

70. In the week up to 15 April, 104 visits were completed face to face, and 393 virtually. We have now seen an increase in face to face visits to children, with the week up to 13 May, 305 visits were completed face to face (65% increase) and 357 virtually (9% reduction).

71. There has been a 24% increase in domestic abuse reporting/ activity from the same period last year. As a result of the RRWG on this issue, enhancements have been made to services, supports and provisions to ensure capacity to meet this growth.

Shielded cohort/community hub

Shielded Cohort

72. There has been a further update from the NHS with a significant increase in the number of individuals included within the Shielded Cohort. This figure now stands at 34,092 for West Sussex.

73. Outbound calls have been completed by the Community Hub to 3,800 individuals who were in receipt of food parcels from the outset of the system being set up but have not made contact via the WSCC Community Hub.

74. Calls sought to ascertain whether the government food parcel is meeting their needs or requires supplementing for the ongoing duration and to establish any change in circumstances or additional/ emerging support needs (e.g. medicine delivery, care and support).

75. Welfare checks have been undertaken for those where contact was not established after 3 attempts to call. The offer of a regular 'Keeping in Touch' call from Library Service staff has been taken up by 374.

76. A second cohort of 2,000 individuals will now be contacted by the Community Hub in the same way.

77. As the new phase of support, staff from the Library Service have commenced outbound calls to individuals who have registered on the gov.uk platform but have indicated that they do not currently have access to food and supplies.
78. Following an initial trial in the Arun District these 'Keeping in Touch' calls are now being made across the whole county.
79. In the first 2 weeks we have had 2,000 conversations with vulnerable residents. Library Service staff are using their skills to signpost and find local information for people. A very small number have had a change of circumstance and have been referred back to the Community Hub to address any critical needs and ensure appropriate on-going support. Some are library users already and some have joined online since the call.
80. Staff are working from a script so they cover essential questions but also being encouraged to capture feedback so we can evidence the impact of the calls on individuals with a view to maintaining this activity.

Food and Supplies

81. The latest data indicates that 10,361 individuals on the Shielded Cohort are receiving a free government food parcel.
82. Access to food and supplies remains the primary reason for seeking the Community Hub's support. This can include quality issues, gaps or delays in the delivery of national Government food boxes such as; the absence of fresh fruit, vegetables and dairy, individual dietary requirements and provision for additional vulnerable family members.
83. In response to the issues identified WSCC has developed a new food and supplies offer of a 'one-week food parcel' packed and delivered to the resident by a local wholesaler. These are suitable for two people and can be scaled up to feed a family or adapted for specific dietary needs.
84. There continue to be an 'emergency essentials parcel' available for same-day delivery by County Council staff where there is critical need.

85. For our most vulnerable residents who are not able to prepare food themselves, there is an Emergency Breakfast Parcel to supplement the Meals on Wheels offer including fresh milk, bread, cereal and fresh fruit.

Community Hub data

86. As of 13 May we had 9,271 contacts at the WSCC Community Hub and had responded to 1,237 urgent requests for food, medicine or welfare checks.

87. The Community Hub are now using the newly developed COVID-19 information system. This online resource enables those answering calls to make immediate referrals to locality-based support and to offer information, advice and guidance on an extensive range of topics.

88. Royal Mail leaflet delivery has now been completed in Arun, Chichester, Horsham, Adur & Worthing.

Safeguarding – Domestic Abuse

89. A domestic abuse communications plan has been developed to increase service visibility to Victims/Survivors in need of support. This multi-agency partnership approach includes direct messages to our communities as well as supporting national government campaigns. Our online presence has to date reached over 68,000 people

90. Campaign developments include posters, leaflets and social media templates with #noexcuseforabuse and #youarenotalone. Additional elements include video interviews for media outlets and targeted social media advertising.

91. Operational services across West Sussex are also being advertised through the launch of signage on refuse vehicles and branded messages on pharmacy bags.

92. The WORTH service offer has been widened to include the answering of calls to the Domestic Abuse hub, where previously a 'call back' system was in operation as well as providing an additional out of hours on call service during over weekends and bank holidays.

Financial Position

93. Our modelling currently indicates that the estimated costs of a lockdown until June this financial year could cost the county **council as much as £85 million.**

94. West Sussex County Council has received an additional £15.9 million in the last round of Government funding, and a total of £36.4 million from the £3.2 billion additional COVID-19 funding.

95. A table breaking down the additional funding received by local authorities in West Sussex is below. The additional funding to support care homes, announced by the Government on 13th May 2020, amounting to £600 million nationally, is not included in the figures below, as we have yet to receive details of the allocations.

Local Authority	Funding from first round	Funding from second round	Total COVID-19 additional funding
Adur	£31,123	£635,277	£666,400
Arun	£64,612	£1,609,640	£1,674,252
Chichester	£39,660	£1,211,407	£1,251,067
Crawley	£64,158	£1,121,701	£1,185,859
Horsham	£36,142	£1,435,082	£1,471,224
Mid Sussex	£37,729	£1,499,659	£1,537,388
West Sussex	£20,528,344	£15,901,894	£36,430,238
Worthing	£47,421	£1,099,477	£1,146,898

96. Further details about the pressures and expenditure relating to Covid-19 are contained within Appendix 8 to the Total Performance Monitor report, considered elsewhere on this agenda.

Lobbying

97. We are focused on using all the levers available to us to seek to influence Government funding decisions and policy development to ensure the best outcome for West Sussex residents and businesses.

West Sussex County Council activity

98. The Leader is engaging regularly with West Sussex MPs to seek their support in raising matters of concern with Government, including the significant financial challenge the County Council is facing.
99. The Chief Executives is one of 9 regional CEOs who represent Local Government and have a direct route to Ministers and Senior Officials in the Ministry of Housing Communities and Local Government.
100. Leaders meet regularly to update on the response to COVID-19, and West Sussex local authorities are undertaking co-ordinated lobbying where appropriate (for example on planning issues).

Regional partnerships

101. As part of the South East 7, the Leader is working with other Leaders to make the case for the South East as Government develops recovery thinking.

National bodies

102. Through the County Councils Network we are seeking to make the case for additional funding for authorities who are facing particular challenges with demand-led services such as adults social care and children's social care.
103. West Sussex County Council is participating in a piece of work commissioned by the Local Government Association's Strategic Aviation Group to explore in detail the impact of COVID-19 on places where aviation is a key sector, and make recommendations for recovery, with a view to influencing Government recovery policy development.
104. Officers are working through their professional representative organisations (the Association of Directors of Adults Social Services, the Association of Directors of Children's Services, the Society of County Treasurers, etc) to lobby on service-specific issues.