

Committee: Council

Date: 8 July 2020

Wards: All

Subject: The Council's response to the Covid-19 Pandemic

Lead officer: Ged Curran, Chief Executive

Lead member: Councillor Stephen Alambritis, Leader of the Council

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Reasons for urgency: The Chair has approved the submission of this report as a matter of urgency to enable Council to be presented with the most up to date position in relation to the Councils response to the Covid-19 pandemic. The situation has been fast-changing as government moves forward with its recovery plan, with regular announcements from central government on policy, legislation and funding, as well as changes to relevant Covid-19 guidance.

Recommendations:

- A. That Council notes the steps taken by the council in response to the Covid-19 Pandemic and challenges ahead.

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. This report provides an update on the Council's response to the Covid-19 pandemic, correct at the time of drafting on 2 July. The purpose of this report is to give an overview of the wide-ranging and rapid response across all parts of the Council in responding to this crisis. The update covers the response over the months of April and May up to late June and considers planning for the future, including recovery and renewal, as the situation stands as of 2 July.

2 BACKGROUND

- 2.1. The decision by the Government to move into lockdown due to the level of virus transmission in the UK was announced on 23 March. This required the public to stay at home and avoid all but essential travel. These measures were enacted to control the spread of infection and reduce the pressure on healthcare services. London is estimated to have reached the peak of infection in mid-April and has since seen a continued drop in infections and

Covid-related deaths with a significant reduction in the R transmission rate over the course of May and June.

- 2.2. There have been a total 704 lab-confirmed cases of Covid-19 in the borough as of 22 June. The true figure of infections is likely to be higher, as this number only reflects cases where a test has been carried out and confirmed positive. As of 12 June, official figures from ONS (which are lagging by one week) show that there have been a total 197 Covid-19 related deaths in the borough. The vast majority have occurred within hospitals with 36 Covid-19 deaths occurring in care homes. The care home situation is being monitored daily by Public Health and Adult Social Care; further detail on support for Merton care homes is provided below in Section 4.8.
- 2.3. On 11 May the Government published its roadmap setting out the next stage in the Covid-19 response and phases for lifting lockdown restrictions and reopening the economy. The recovery plan put forward a timetable across a set of stages, depending on the virus transmission level. Key stages are:
 - Wider reopening of schools from 1 June
 - Reopening of non-essential retail from 15 June
 - Wider reopening of businesses and premises from 4 July, including hospitality and leisure
- 2.4. The Covid-19 Threat Level for the UK was reduced from 4 to 3 on 19 June by Chief Medical Officers, meaning that virus transmission is no longer considered “high or exponentially rising” but still in general circulation. While the level of transmission has reduced, Public Health experts have warned of the likelihood of local flare-ups and the risk of a ‘second wave’ in Autumn, which may necessitate the reintroduction of some restrictions.
- 2.5. Following the wider reopening of schools and reopening of non-essential retail, the government has confirmed that reopening of hospitality and leisure sectors will go ahead from July 4 with some exceptions (such as gyms). New guidance has been introduced to support this, alongside legislation to make it easier for businesses to be granted licenses for serving food and drink outside. The recommended distance will also be changed to ‘1m plus’ with mitigations in place to support safe opening of these sectors. Alongside the new measures for the hospitality and leisure sector, the Health Secretary has also announced that the shielding programme would be paused from the end of 31 July. Further guidance changes are expected to come in the coming weeks as reopening progresses.
- 2.6. The Government have provided councils with direct emergency funding to support the Covid-19 response to the total of £3.2 billion so far; details of allocation for Merton are outlined below in Section 11. MHCLG announced a new package of support for local authorities on 2 July, including a further £500 million funding, a new scheme for reimbursing councils for lost income and phased repayment of council tax and business rates deficits over 3 years. We will be analysing the implications for Merton as more detail becomes available. An economic update has also been announced by the Chancellor for 8 July.

3 CROSS CUTTING AREAS OF EMERGENCY COVID-19 RESPONSE

Emergency Planning Arrangements

- 3.1. Emergency Planning Arrangements have been in place in Merton since 17 March and remain in place with some recent changes outlined below. These arrangements have involved a Bronze, Silver and Gold reporting structure which was established internally. The Bronze activity refers to the operational activity being carried out by departments to meet the changing and increasing demands on the service. The Silver role carries out the co-ordinating and tactical activity, particularly where there is a need for cross departmental support or a common approach to a problem. As London moves into a transitional phase to recovery, Silver group transitions to a tactical recovery group to consider the council's arrangements for recovery, alongside the London Recovery group. Silver will now feed into the Recovery group lead by the Interim Head of Recovery and CMT. Gold takes a strategic approach both within the Council and as part of the Pan-London network.
- 3.2. From the outset of lockdown, the Council provided situation reports (known as sitreps) to the London coordinating body on a daily basis. These reports set out the current position against a range of key services - such as housing, open spaces, recycling centres, community support and shielding. These sitreps have moved to a weekly basis and no longer risk-rated, taking the form of a series of position statements with quantities where applicable.
- 3.3. A Covid-19 dashboard was set up at the outset of the pandemic to support the Council's emergency response and monitor the impact of Covid-19 and the lockdown restrictions across a range of areas. The dashboard provides figures on a weekly basis on key service areas: health, mortuary services, social care, community and voluntary sector, council capacity and finance. This includes data on lab-confirmed cases and Covid-related deaths, including deaths in care homes. These key measures allow officers and Members to get a snapshot of the current situation in the borough and identify any emerging capacity concerns or trends. Members have been provided with a weekly summary of these figures, so they can be kept informed on the situation as it stands and develops in Merton.
- 3.4. The Borough Emergency Control Centre (BECC) remains operational in response on weekdays with exception reporting weekends. As part of the move to transition, many of the functions of the BECC form a business as usual approach to day to day life. Much of the activity is now centred on information distribution and management rather than direct incident response. As part of these revised arrangements, the Tactical Silver group now meets weekly to consider exceptional operational reports from Bronze leads and reporting up to London Gold Command and Corporate Management Team on matters requiring strategic direction and key decisions.

- 3.5. The decision has been taken to formally stand down the tactical Silver group as part of the Borough Emergency Planning arrangements. Once the formulation of the Silver Recovery Group has been finalised, this group will continue with similar membership but will assume a different form as a Tactical Recovery Group as outlined above. The Silver group has proved effective in providing cross-departmental coordination support and can be stood up quickly in its original Silver role, should this be required for example, in the event of an outbreak or second wave.
- 3.6. On a regional level, Merton continues to take a lead role in the South West London Region as part of the sub-regional arrangements for strategic planning and will continue to do so. Merton's Chief Executive is the lead (Gold) chief executive for this sub-region. Additionally, Merton has continued to engage with key professional networks on a London-wide basis, such as ADASS, ALDCS, SLT and Public Health, with Merton's corporate management team members playing key roles in these networks
- 3.7. A London Transition Board has been established to oversee the transition out of lockdown and reopening of the economy. This is co-chaired by the Mayor of London and Secretary of State for Housing, Communities and Local Government with representation from London boroughs and key strategic partners. The board sits alongside a London Recovery Board which has been established to coordinate and oversee the wider recovery response and strategic planning, which is chaired by Cllr Peter John as the chair of London Councils.

Covid-19 Community Response Hub and Food Distribution

- 3.8. One of the first actions taken by the Council was to work with the Merton Voluntary Services Council (MVSC) to rapidly set up a Community Response Hub. The Hub takes inward bound calls directly from residents, or other voluntary sector organisations, requesting support across a range of needs - such as shopping, dog walking and isolation. It is staffed by a combination of council staff redeployed from elsewhere in the Council, mainly from libraries. The Hub is running in conjunction with Merton Mutual Aid, a network of local volunteers providing practical support in their respective neighbourhoods. At the time of writing 1,472 individual contacts and subsequent referrals to the voluntary sector had been made with the Hub.
- 3.9. The success of the Hub has led to a wider conversation with the voluntary sector about how residents can access support via a single point of contact. Strong partnership working with the local voluntary sector has been key to the success of the Community Response Hub and getting support to residents in need; the benefits of the Council's long-term investment in local partnerships have been evident. A pilot initiative, led by MVSC, Age UK and Wimbledon Guild, will continue to operate the Hub and look at opportunities to further diversify the offer.

- 3.10. Distribution of food packages has been essential to support residents in need whose access to food has been affected by self-isolation, shielding and the wider impacts of Covid-19, such as loss of income. As part of this effort, a food distribution hub was established by the Council and Merton College at the college's site in Morden, making use of its bulk storage facilities as well as freezers and fridges. The Merton Community Fridge network was set up to coordinate a range of local organisations to work together on distributing food packages to those in need across the borough, almost 200 parcels per week. Merton's Community Fridge was founded by Sustainable Merton and opened in May as a long-term initiative to address food poverty and food waste.

Shielding

- 3.11. As Council will be aware, the Government established a shielding process at the outset of lockdown to protect those are clinically extremely vulnerable and at high risk of getting seriously ill from Covid-19. The NHS identified and notified those who fall into this category, who were advised to remain at home for 12 weeks, which was then extended into July. Councils were given the responsibility of contacting residents in their areas who fall within this group to ascertain whether they require any assistance. Direct food deliveries were set up by the Government for any shielding resident who requires them, with any specific dietary or religious requirements for food packages being met locally through the Community Response Hub. Additional government support for shielding residents includes priority booking slots with the major supermarkets for online food orders. Practical advice for residents on getting online and making orders has been provided locally.
- 3.12. Merton has been given the names of 7,019 people living in the borough and has set up a shielding hub in order to contact all residents on the list and provide them with assistance, if required. For example, the Council has established arrangements with community pharmacists to ensure that people can have their prescription medicines delivered to their homes and a coordinated voluntary offer means that residents have access to other support, such as taking food and other items to people's homes, cooking and dog walking. All residents shielding have been now contacted by phone. Where residents have not been able to be reached by phone, home visits have been arranged. Around 6% (388) require ongoing support whilst shielding and are likely to continue to need further support when shielding comes to an end. We are reviewing all of this more potentially more vulnerable cases.
- 3.13. The government has announced the easing of shielding and the pausing of the national scheme at the end of July. At this point, national food parcels will stop, as will eligibility for sick pay, and the government expects people to return to work. It has always been part of our recovery planning to think

about what happens next, so we are planning for how we will support those who have needed most support to transition out of the shielding programme. This includes maintaining the Community Response Hub with the voluntary sector and working with the mental health trust to provide support for the mental health impact of shielding. Alongside this, we are planning for the re-start of shielding should we experience a surge in infection locally or nationally.

Staff redeployment

- 3.14. The Corporate Redeployment Group worked closely with individual directorates to ensure a supply of available staff to support cross-council projects and Covid-related activity. To date, 94 Merton staff have been redeployed into other roles across the Council, primarily to support shielding and food distribution projects. Redeployment has been effective in making best use of staffing resources to support the emergency response and delivery of critical services. Careful planning is underway as the Council moves towards the reopening of services and returning staff to their primary role to ensure that delivery of Covid-related projects remains supported.
- 3.15. There is still a need for volunteer care workers which is being partly met by external recruitment and a continued internal campaign to seek volunteers from the existing staff cohort.

Covid-19 Testing and Local Outbreak Plan

Access to testing

- 3.16. Testing is available now for everybody with symptoms, including the under 5 years, through the NHS portal. Essential workers who are symptomatic (or those people they live with who are symptomatic) will have priority testing over others and can Self-Refer through the national testing portal. Staff and workers who are not considered essential workers can book a test through the NHS portal. In Merton, Morden has been hosting the mobile testing unit for 2 consecutive days on an approximate 8-10 day cycle and on average is testing about 200 people per day. The mobile testing unit has been successful in supporting local access to tests for those living and working in Merton and work is underway to identify a more permanent site.
- 3.17. A dedicated Department of Health and Social Care (DHSC) portal for testing is available for all care homes. The Government has now expanded eligibility for this service to all remaining adults care homes, who will now be able to access whole care home testing through the digital portal from 7 June. This means specialist adult care homes - such as those catering for adults with learning disabilities or mental health issues, physical disabilities, acquired

brain injuries and other categories for younger adults under 65 years – will have the same access to testing for all staff and all residents, whether symptomatic or asymptomatic.

NHS Test and Trace Service and Local Outbreak Plan

- 3.18. The NHS Test and Trace service was launched by the Government on 27 May and requires those experiencing symptoms to self-isolate for seven days and order a test. If positive, the NHS Test and Trace service will make contact to ask about symptoms, household members and contact details of those they have been in close contact with, as well as recent visits to public settings (such as schools, GP). The service will then make contact with any named contacts and ask them to self-isolate. Support needs around self-isolation would be met via local support; in Merton, this would be the Covid-19 Community Response hub. As of 24 June, there have been a limited number of positive cases (36 cases) that have been passed to the contact tracing team which is led by Public Health England in London. Cases can also be referred to Public Health England London Coronavirus Response Centre (LCRC), if there is concern about a complex case, high risk location or possible outbreak.
- 3.19. As part of this approach, all local authorities are required by DHSC to produce and publish Local Outbreak Control Plans by the end of June, covering seven themes: care homes and schools; other high risk settings; local testing capacity; bespoke contact tracing and case finding for community clusters; data integration; supporting vulnerable people and governance.
- 3.20. The Director of Public Health and the Assistant Director of Public Protection have worked across the council with partners and the Cabinet lead to bring together the local plan for Merton. It describes how the council will work with Public Health England's London Coronavirus Resilience Cell (LCRC) and local partners to complement the NHS Contact Tracing Service and support joined-up local outbreak management. This has now been published on our website as of 30 June and will be continued to be updated and implemented in the coming months.
- 3.21. The plan focuses on the key steps and local control measures and identifies clear roles and responsibility between the Council and Public Health England who are the main lead organisations, supported by other partners such as the NHS and police. The plan incorporates learning from the national and London LA Good Practice Networks.
- 3.22. Governance will build on existing structures. The Health and Wellbeing Board and a dedicated Community Subgroup will provide oversight of local Covid-19 outbreak management, while the day-to-day operations are led by a cross council officer group and the existing Borough Resilience Forum will bring together our main partners.

- 3.23. Proactive communication and engagement with local communities and high-risk settings will be key in supporting implementation of the plan on a local level, protecting vulnerable groups and minimising virus transmission in the months ahead.

Mortality Planning

- 3.24. A council mortality planning group was established as part of the emergency Covid-19 response to ensure a joined-up response in burial and mortuary arrangements and so that an appropriate service can be given to the bereaved. The arrangements for dealing with excess deaths in Merton are complex: the hospital mortuary service is run by St George's Hospital; responsibility for the crematoria lies with Wandsworth Council; and Merton forms part of the Inner London West coronial area which also manages mortuary and storage facilities. The Council is directly responsible for the registration of deaths that occur within the borough and runs the cemeteries through a contract with Id Verde. The council mortality planning group has been coordinating all the strands of work during the course of the pandemic and liaising closely with colleagues, including with local funeral directors. The capacity of mortuary and burial services is monitored weekly via the Covid-19 dashboard.

4 COMMUNITIES AND HOUSING

Priority areas for Covid-19 response

Rough sleeping and homelessness

- 4.1. Since the onset of the pandemic, Merton has supported 52 rough sleepers to access emergency accommodation; 19 of these individuals have been placed via the GLA regional offer of accommodation. Not all of these 52 were verified rough sleepers, as some were housed on the basis of being at risk of rough sleeping. 14 of the rough sleepers have no recourse to public funds. A number of these individuals have been supported to access wrap around services for mental health, drug and alcohol issues whilst in their temporary accommodation. The outreach team continues to work with 6 individuals who have refused offers of accommodation and are known to continue rough sleeping.
- 4.2. The current number of Merton households in temporary accommodation is 207 as of 24 June, which is the highest it has been in over 10 years. This figure would likely be even greater were it not for the moratorium on evictions from the private sector. Prior to the pandemic, the biggest cause of homeless in Merton and admission into temporary accommodation was the

ending of Assured Shorthold Tenancies. The moratorium is due to end on the 23 August. Following this, we are likely to see a significant increase in the number of homeless households requiring temporary accommodation. Whilst there has been an ongoing shortage of Housing Association homes (particularly family units) there has been a further significant reduction during the period of lock-down.

- 4.3. Dame Louise Casey has been appointed by the Government to lead a Taskforce on the next phase of the Government's support for rough sleepers. The Minister for Rough Sleeping and Housing has written to local authorities, setting out the planning and next steps for accommodating and supporting move-on from emergency accommodation, following the announcement of £433m of funding for accommodation for rough sleepers. Merton's response to this letter setting out the local approach to supporting rough sleepers is attached as Appendix A. A further £105 million has been announced recently to extend provision through the summer to avoid rough sleepers ending up back on the streets.

PPE Provision

- 4.4. As has been widely reported in the media, there has been a nationwide problem in securing adequate stocks of PPE for staff working in settings where this is required, although the national supply position for most items has now improved. A prioritisation list for council staff was drawn up based on contemporaneous advice from Public Health England and, to date, it has been possible to source enough equipment to meet the high priority areas. This included the provision of PPE sets to Merton schools by the Council as part of the preparations for the phased re-opening from 1 June. This work was initially coordinated by staff in the Communities and Housing Department, supported by the Commercial Services Team, on behalf of the whole council. Since early June, a centralised approach to the ongoing procurement of PPE for Council services other than social care has been in place, managed by Commercial Services.
- 4.5. Mutual aid arrangements for PPE Provision are also in place with neighbouring boroughs and a strategic reserve has been coordinated through the London Gold arrangements. At the time of writing, officers have made use of this strategic reserve on four occasions to ensure adequate supply to meet the urgent needs of approximately 70 social care providers across the borough. Additionally, providers continue to be supported on an 'as needs' basis from Council stock; on average around ten care homes and agencies per week have received emergency supplies. Daily updates on the supply of PPE were provided to Communities and Housing through the peak phase of the pandemic but this has now moved to weekly reporting.
- 4.6. Officers have continued to explore a variety of routes to maximise supply of PPE. As well as using the sources referred to above, direct contact was made with suppliers, which has resulted in the successful procurement of a range of PPE. The Council has also explored the many offers which arrive

from a range of sources. A decision was taken in April to join other boroughs in the West London Alliance (WLA) procurement scheme, and substantial quantities of face masks, aprons and sanitisers have now been received from this source. This route, plus some direct sourcing of a large number of gloves (not initially available via the WLA route) has moved the Council to a position where it can continue to supply Council staff and the wider care system in Merton with more certainty.

- 4.7. To date, in excess of 1.6million items of PPE have been delivered by the Council to social care providers across the borough at no cost to those providers. A further order for another 1.3 million items of PPE has now been placed via the WLA and will be distributed to social care providers, again at no cost to those providers, through early July.

Support for care homes

- 4.8. The Secretary of State for Care wrote to local authorities in May setting out a package of support for the care home sector, including additional national grant funding of £600m for managing infection control arrangements. 75% of the funding has been ring-fenced specifically for care homes. Each local authority Chief Executive was required to submit a letter to Government by the 29 May 2020, setting out how the various requirements in the national support plan are being delivered at a local level. This letter is attached in Appendix B.
- 4.9. Merton's share of the national grant funding is £1.315 million. The grant is payable in two equal tranches, with the first instalment being received by the council on 27 May 2020. The first tranche of payments from this fund, totalling £493,000 have been made to the thirty-seven care homes in the borough and this funding has been used by the care homes as follows:

| Purpose | Proportion of funding used for this purpose |
|---|--|
| Reducing movement of residents around the home (reduced risk of transmission) | 32% |
| Reducing staff movement between homes and other care settings | 28% |
| Paying staff their full salary if they need to self-isolate | 16% |
| Other infection control measures | 24% |

- 4.10. The remaining 25% of the funding can be used to support infection control arrangements across the care sector more broadly. Locally, part of this money is being used to commission specialist training in infection prevention

and control for home care and housing-related support services, so that these care settings are provided with the same training as provided by the NHS to care homes. The remainder of the funding is being distributed to home care agencies to support their infection prevention and control practices.

Hospital discharge management

- 4.11. From global learning in other areas affected by the pandemic, there were early indicators that hospitals would be severely impacted with an increase of hospital admissions leading to an increase in discharges. The Government released guidance on Hospital Discharge Service Requirements on 19 March, which set out the expectations for joined up and seamless working between Hospitals, Providers and Adult Social Care. To meet the unprecedented challenge, the Guidance set out actions that were advised to be taken immediately to enhance discharge arrangements and the provision of community support.
- 4.12. Following review of the presenting London-wide data on surge modelling, we prepared teams to be able to facilitate 40 discharges each day. For Merton, this is an average daily increase of 566% or 34 people per day. The Guidance set out a new default of discharge home today for people who did not need to remain in a hospital bed.
- 4.13. Daily discharge escalation calls are held with the hospitals St Georges NHS Foundation Trust and St Helier's, in order to organise the safe and rapid discharge of people out of hospital, either to their own home or a care home, be it nursing care or residential care. Regular calls are also in place with Kingston Hospital in order to facilitate this process.
- 4.14. Merton has a dedicated Hospital Discharge Social Care team and Re-ablement Service. To meet the prospective demand, the initial response was to develop capacity within the teams by deploying staff across the service into the hospital team and recruitment into re-ablement to increase the number of staffing. As per the Guidance, the Merton discharge response model has been extended to be operational from 8am-8pm 7 days a week, with a team working over the weekend, which includes Social Care, Re-ablement and Brokerage. This ensures that we are able to facilitate a same day response and manage the increased number of discharges.
- 4.15. To facilitate the discharge model, clear patient pathways (0-3) have been established in partnership with Merton Community Health Service (CHS). People being discharged under pathway 0 are patients that can leave hospital with minimal support from our local community voluntary response services. Following a clear pathway model ensures that people being discharged are tracked so that they receive the right support at the right time and any necessary equipment is provided to support discharge.
- 4.16. The Guidance also brought with it a suspension of Continuing Health Care assessments and supersedes the current fast tracking of end-of-life support

by Palliative Care teams, who are responsible for co-ordinating and facilitating rapid discharge to home or hospice. The department is planning how social care may be required to take over some people within this cohort, as part of recovery modelling.

Adjusting core service delivery

- 4.17. As set out above, Adult Social Care enhanced cover at weekends to facilitate higher volume seven day working. Weekend working was also supported by an enhanced management rota to support these teams over the weekend. Community Teams have continued to undertake core functions, using technology wherever possible to minimise contact. Merton has not made use of any of the Care Act easements set out in emergency legislation.
- 4.18. Housing Services has changed how it delivers statutory duties to borough residents during the pandemic and lockdown period. The Housing Options Service has operated a telephone service for homelessness cases, including prevention, and continues to deal with applications on the Council's housing register. Since the outset of lockdown, the service has been remotely assessing what duties are owed under the Housing Act and providing appropriate advice, assistance and accommodation where legally required. Housing Enforcement has continued to discharge its duties in accordance with the Housing Act 2004 via telephone and email
- 4.19. Merton has four in-house day services, 3 of which closed in the middle of March in line with Government guidance. Jan Malinowski Centre in Mitcham has remained open to serve up to 15 people with a learning disability per day whose families are most in need of support with social distancing in place. During the closure period, staff have been supporting vulnerable adults through daily phone calls, online calls and group activities via Zoom and Skype, such as exercise classes and art groups with some art and learning materials being sent to people's homes. With older customers from Eastway and those who formerly attended Woodlands (contract ended at the end of March), people with extra care have been supported with calls where required and arranging food and medicine deliveries. Day centre staff have liaised closely with social work and health teams throughout this period. . Whilst guidance on social distancing and limited community openings remain in place, the re-opening of day centres is being kept under close review.
- 4.20. Westminster Drugs Project (WDP) Merton have adjusted their service model to continue to deliver support during this period and are offering assessments and support by telephone or Zoom, including groups. WDP's carers' service also provides counselling and support to people who are affected by someone else's substance misuse problems. WDP's Single Point of Contact is operational and open for self-referrals. Support is available for any Merton resident who is over 18 and wants help to make changes to their alcohol or drug use – including cutting down their alcohol use to safer levels. The increased use of alcohol or drugs can be a coping

response to boredom, worry, stress, or more severe mental health problems and a recent survey by Alcohol Change UK has estimated that one in five people who drink alcohol have been drinking more frequently since lockdown.

- 4.21. While libraries remain closed, the Council's library service has adjusted to respond to the restrictions, working on a flexible model of service which can adapted to respond to any future challenges. The service will continue to develop and enhance its online offer, which seen significant increases in use over the last few months. The redeployment of library staff to work on shielding has been key to supporting the emergency Covid-19 response. No physical adult learning classes have taken place since lockdown and are unlikely to begin again until the next academic year with online provision in the interim.

Steps towards reopening and recovery

- 4.22. The department has been thinking about recovery from early in the crisis and, as far as possible, has tried to consider what happens next when planning any changes and interventions. Planning for the recovery and reset of services is an ongoing process. With the pandemic unlikely to stop soon, the department is planning on having to operate an emergency response and a version of normal service delivery in parallel for at least a year, possibly longer.
- 4.23. Alongside NHS partners, the department is planning for surges in Covid-19 following the easing of lockdown and over the autumn and winter period. This means maintaining some of the capacity in readiness. It will also need to plan for responding to the impact of the NHS catching up on non-Covid healthcare. Examples include maintaining capacity in the hospital and re-ablement teams in adult social care, the community hub with the voluntary sector and the enhanced infection control and testing offer in Public Health.
- 4.24. The Council will also need to be ready to re-implement other interventions at short notice, such as the closing of services or operation of the shielding hub. Early evidence from other countries suggests that local outbreaks are likely as lockdown eases which may result in local lockdowns being imposed. In addition, winter poses a significant threat to the health and care system which may require re-imposing steps to focus resources on emergency responses once again. The Public Health Team in Merton is pivotal to ongoing support for infection control and the local response to Test Track and Trace, critical interventions which can support the easing of lockdown and keeping infection rates low.

Challenges ahead

- 4.25. Covid-19 has had a fundamental impact on the community and staff, not only those who have been made unwell by the virus or have lost loved ones, but also those who have been shielding and self-isolating. Returning to how things were before Covid-19 will be unlikely and the Council will need to plan how it resets services to meet changed needs and expectations.
- 4.26. This is apparent in Adult Social Care where the virus will have a long-term impact on the physical and mental health of many people and is likely to increase demand for health and care services. Although yet to be evidenced, it seems likely that the virus and our response has uncovered a degree of unmet need that we will need to continue to meet. It is also possible that level and nature of the Council's response in Merton may have generated new expectations from our community.
- 4.27. In housing, this is similarly apparent - the numbers of people temporarily accommodated has risen, as the Council sets aside usual policies on priority need and No Recourse to Public Funds on public health grounds. This presents important and urgent questions on the status of the cohort temporarily housed during the crisis. The team is working hard to identify move-on accommodation to try to prevent a return to rough sleeping. The government has not answered the question of funding the housing for those not in priority need and the legal status of housing those with no recourse to public funds. Merton will continue to lobby through London Councils on this issue.
- 4.28. The crisis has had a detrimental impact on many businesses; those in the health care and housing sectors have not been immune. They have suffered additional costs and loss of income, while needing to maintain services as far as they are able. The need to remain open has prevented many from benefiting from the furlough scheme. The Council, in line with national guidance, has provided some financial support for social care and housing support providers. However, this cannot continue without further funding from government. As part of recovery, Merton will be working across London to evaluate the state of these key markets.
- 4.29. The crisis has also exposed long standing issues in the social care system, with the need for a long-term funding settlement now critical. It has also uncovered issues with the wider social care workforce and the nature of provision and the support from the NHS, particularly nursing homes. The importance of social care in its various forms to the whole health system must be recognised and reflected in its inclusion in planning. The pandemic has also thrown the ongoing housing crisis into relief; while the impact on home ownership and private rented housing is yet unknown, the social rented sector faced difficulties prior to the crisis.

5 CHILDREN SCHOOLS AND FAMILIES

Priority areas for Covid-19 response

- 5.1. While direct impact of Covid-19 appears to increase with age and children do not personally suffer the worst consequences of the virus, the indirect impact of measures taken to combat the pandemic is significant for children and families and these effects are more significant on those who are already vulnerable for other reasons. A part of the nationwide lockdown measures, the Government announced the closure of schools and early years and childcare settings on 18 March to take effect from the end of the day on Friday 20 March. At the same time, it was announced that schools and early years providers would continue to remain open to provide childcare for the children of key/critical workers, as well as children the government defined as 'vulnerable'; those with a social worker or those with an Education, Health and Care Plan (EHCP).
- 5.2. Since 20 March, the Council has been working closely with Merton schools to ensure that the children of key/critical workers and 'vulnerable' children can continue to be provided for. School or early years places have been available for children with a child in need or child protection plan and for looked after children, as well as children with an EHCP. It has not been mandatory for parents to take up the place for their child, and – especially in the early part of the lockdown – most parents have preferred their children to be at home.
- 5.3. The Children, Schools and Families directorate has continued to promote the attendance of 'vulnerable' children at school and early years settings and encourages this where it is in a child's best interests. Where children who have been identified as 'vulnerable' are not attending their school or setting, social workers, schools and other partners are maintaining contact with their families to strengthen the safeguarding around them.
- 5.4. Pupils with an EHCP who are not attending their educational setting are being monitored by their setting to ensure that provision in the EHCP is being delivered under reasonable endeavours. The council is monitoring the Risk Assessments and providing additional support where required to pupils with complex SEND in the form of direct payments, additional support within the home and through virtual therapeutic intervention.
- 5.5. During the current period of wider opening from 1 June, schools have been asked to carry out risk assessments to secure the safe return of children with EHCPs to school. While they are not in school, professionals involved with the children, including health professionals, and the schools themselves have been contacting these pupils and their families regularly to ensure that all is well. Schools have also been providing them with remote learning opportunities. Therapists have been delivering virtual provision and where essential face to face contact. The Sensory team are providing clinics to ensure that pupils with hearing aids are checked and monitored.

- 5.6. Since the Easter holidays (during which schools remained open to the children of key/critical workers and 'vulnerable' children) there has been a steady increase in the numbers of children attending Merton schools. 290 children attended on 15 April rising to 834 by 20 May, prior to the Whitsun half-term break (during which many schools also remained open for the same priority groups). Since the wider reopening of primary schools and early years settings was permitted with effect from 1 June onwards and wider opening of secondary schools with effect from 15 June, the numbers have continued to rise. 4584 pupils were reported as attending Merton schools on Monday 22 June 2020.
- 5.7. Although secure access to PPE has been challenging during the crisis, all schools and open early years settings were provided with a modest stock of PPE to support the wider opening arrangements from 1 June 2020, in line with government guidance. The Council has also provided further PPE to Perseid and Cricket Green special schools and the Brightwell respite facility to ensure that PPE was being used in the same way as health providers within these schools.
- 5.8. DfE have made arrangements for the supply of digital devices for children in Year 10. These have to be ordered in accordance with a schedule directed by DfE so some councils have been able to secure their supply sooner than others. Ordering, delivery and support for these devices is being coordinated by the Council and schools working in collaboration.
- 5.9. The Children Schools and Families directorate has worked closely with schools to support the provision of Free School Meals for eligible children who are not in school. In the earliest days of the lockdown period, schools made a variety of their own arrangements, from voucher schemes and cash payments, to meal pick-up or drop-off. A national voucher system was introduced by DfE for eligible families; this has been administered through the schools making applications on behalf of families online. More families have become eligible for free school meals during this period and we have ensured that the information is available to help them make prompt applications to receive their entitlement. The Council has followed up on the teething problems of this scheme with the DfE and where there was a risk that families would be left without food, we have been providing information through schools to enable families to access emergency food provision in the borough; this has worked well where it is needed.

Adjusting core service delivery

- 5.10. With effect from 23 March, as an initial response to Covid -19, Children's Social Care implemented a critical operating model to enable the service to prioritise safeguarding needs in the anticipated event of significant loss of staff capacity due to the virus. After an initial drop in capacity in the first few weeks of lockdown, staffing capacity has since remained relatively stable for Children's Social Care.

- 5.11. Essential social work visits to children where there are safeguarding or family breakdown risks have continued during the lockdown period. Managers have completed risk reviews for all children with a social worker to determine the type and frequency of visits to ensure children are safeguarded appropriately. Social workers are using virtual technologies to keep in touch with children and families where a visit is not deemed to be essential.
- 5.12. PPE has been required for some workers for some visits, as child and family social work has continued to include direct, face-to-face work in families' homes. Working in collaboration with colleagues in the Communities and Housing directorate, Children's Social Care have secured sufficient PPE stocks to protect staff and foster carers in line with the Public Health England guidance.
- 5.13. Due to the impact of the various regulatory restrictions, there have been delays in the completion of specialist assessments and progression of court hearings for children in care proceedings. Children's Social Care have been working closely with local colleagues in Her Majesty's Court Service and CAF/CASS to reduce the impact of these delays on securing permanent care arrangements for these children.
- 5.14. To date, the stability and availability of placements for children has not been negatively impacted by Covid-19. Pan-London responses have been provided to large providers seeking a generalised uplift in fees to maintain consistency in placement costs.
- 5.15. While April and May 2020 saw fewer first time entrants to the Youth Justice System, there has been an unusual increase in the number of young people remanded during lockdown. For each young person, the severity of the alleged offence or pattern of offending warranted the remand, and do not appear to be related to the impact of lockdown measures. Nevertheless, the backlog of cases in the youth justice system means that children who have not been found guilty of any offence are being held in custody for considerable periods of time.
- 5.16. Merton Youth Centres were closed as group provision from the start of lockdown and a Youth Engagement Team was established in order to maintain contact with and provide support to young people, deploying the council's youth services and Catch-22. This service covered parks and public spaces across this period. At the start of lockdown, very few young people were out and about (on average 20 per evening in the whole borough) however numbers have grown with easing of lockdown (22 June = 269 young people). Numbers were much higher in Wimbledon than Mitcham.
- 5.17. Youth workers have also supported a range of community support activities, such as Adventure Playground food distribution with the Salvation Army, education and art equipment distribution from Pollards Hill, calls to parents and young people to offer advice and support throughout. Some specific issues that the service has been responding include the sad death of a member of a youth club, young people's mental health issues, Black Lives

Matter, poverty and access issues to online learning. The service has also worked with many creative young people who have made videos, volunteered and taken on keyworker jobs.

- 5.18. DfE have made arrangements for the supply of digital devices for children with a social worker and young adults leaving our care. These have to be ordered in accordance with a scheduled directed by DfE so some councils have been able to secure their supply sooner than others. Ordering, delivery and support for these devices is being coordinated by the Council.

Steps towards reopening and recovery

- 5.19. The Education Division continues to support schools and early years and childcare settings throughout the period of reopening and recovery. The government announced their intention for schools and early years settings to reopen to a wider range of pupils from 1 June as part of the recovery plan and published guidance to help local areas prepare for reopening to Reception, Year 1 and Year 6, as well as nurseries and other early years providers. The Education Division worked closely with Merton schools and early years settings to support them in their risk assessments and preparations for re-opening to some children from 1 June.
- 5.20. In week beginning 1 June, 66% Merton Year 6 classes reopened to pupils, as did 54% Year 1 classes, 41% reception classes and 34% nursery classes. From 22 June, these figures were: 93% Merton Year 6 classes reopened to pupils, as did 96% Year 1 classes, 91% reception classes and 59% nursery classes, 12 Merton schools were in a position to reopen to all priority year groups. Secondary schools are also welcoming children from Years 10 and 12 for limited face-to-face time in school with effect from 15 June. Government has since accepted that not all primary year groups will go back before the end of term, but has expressed the intention that all pupils in all year groups will return in the new school year in September. Schools are awaiting guidance from the government as to how this is expected to happen in line with the most current guidance on social distancing.
- 5.21. The Government has indicated that there are no plans currently for schools to open over the summer holiday, although, again guidance is expected to indicate what provision is permitted to be available and open to vulnerable children and the children of critical workers.
- 5.22. The Children's Social Care and Youth Inclusion division continues to modify its working practices to meet children and families' needs in line with the latest guidance. The Children's Social Care critical operating model will be stood down for the foreseeable future, as the service is well staffed. This model has demonstrated its efficacy and can be reintroduced promptly should the need arise, for example in the event of a 'second peak'.
- 5.23. In line with Public Health England guidance and current regulatory requirements, Children's Social Care and Youth Inclusion are in the process

of developing the recovery operating model, which will blend ongoing use of virtual contact and an increase in face-to-face work with children, families and partner organisations to resume the progression of children's plans.

- 5.24. The MASH has continued to operate a full service, albeit remotely. Lower numbers of contacts and referrals were received during April and May 2020 than in previous years because children's contact with schools and other organisations have been reduced by the lockdown measures. We anticipate that this will reverse as the lockdown measures ease and children come into more regular contact with schools and other organisations.
- 5.25. Social work and youth offending interventions to provide immediate safeguarding responses to children and young people have continued robustly throughout the lockdown period. Progressions of children's plans has been impacted due to the reduced level of face-to-face work with families, but children have been safeguarded, and as life returns to more familiar patterns, plans can once again progress at a faster pace.

Challenges ahead

- 5.26. Schools now need to plan for how they will reopen in some way in September to all pupils. Government guidance was published recently on 2 July, however schools have already been thinking ahead and planning their preparations. There are broadly speaking three scenarios which Merton schools have been thinking about:
- Total reopening with no social distancing; all children back all the time.
 - Some social distancing in place, potentially needing some form of rota system in place to allow part year groups back at any one time and/or relaxation of the current guidance that does not permit schools to use other venues to teach all children across more spaces. This would mean that there will be a need for some continued remote learning for most pupils.
 - Schools do not reopen, because of a second spike.
- 5.27. Schools will need to consider further developing their remote learning strategies to accommodate the last two of the three scenarios above. The Council has produced a Strategy to support schools in their thinking with this.
- 5.28. Thousands of children will have missed out on their normal education over the six months between March and September. The government announced a £1billion catch-up fund to be implemented from September onwards. This will need to be implemented quickly and carefully once details are available, alongside schools' own planning to adapt their curriculum to meet pupils' needs. The government has also suggested that GCSE and A-level exams might be pushed back by a month to enable more time for the current Year 10 and Year 12 pupils to cover the exam curriculum. The local authority is

beginning to work with schools to consider how the curriculum will need to be adapted.

- 5.29. Children's mental and physical health will have been affected in different ways by the period of lockdown. Schools are considering how children's health can best be supported, not just now as wider opening begins, but in the years ahead. In social care, we also anticipate that the suppressed contacts and referrals into CSC&YI will lead to a subsequent increase in activity, particularly as the schools open to wider groups of children.
- 5.30. The Safeguarding and Care Planning Service is starting to see a rise in the number of children supported by the service. This is because new children are entering the service, while involvement with existing children is not being concluded at the usual rate as there have been delays in providing the intervention identified in their plans. Temporary social work resources, in excess of the current budgets provision may be required to safely manage this swell in demand.
- 5.31. While placement demand has remained stable during the lockdown period, a small increase in the number of children in care is forecast as a result of the delays in care proceedings being finalised and a slowing of the rate at which children have been able to exit the care system.
- 5.32. The diversion of strategic and operational resources to respond to the Covid-19 emergency is expected to impact on plans to mitigate areas previously overspending and where savings have been identified.

6 ENVIRONMENT AND REGENERATION

Priority areas in Covid-19 response

- 6.1. The Environment and Regeneration directorate has played a central role in supporting observance of emergency lockdown measures on a local level in Merton. The Regulatory Services Partnership [RSP] have been responsible for monitoring and enforcing compliance with new regulations which required the closure of non-essential retail and premises from 26 March, other than a list of exempted premises. Environmental Health, Licensing and Trading Standards Officers have been undertaking compliance checks to ensure that businesses are trading safely and are closed where the regulations require it. By the end of May, officers had carried out 852 premises compliance checks and provided direct advice to 177 businesses. The service has taken a graduated and proportionate approach to enforcing the regulations with only four voluntary closures and one formal prohibition required.
- 6.2. The Council has engaged Kingdom to support the Police enforcement response in our parks and observance of social distancing. The borough's parks and open spaces have remained open during this period which has allowed people to take exercise and get some fresh air. Recent changes to lockdown restrictions have allowed people to spend more time outdoors and

make greater use of outdoor spaces and parks with social distancing in place, including some non-contact sports and socialising in groups. Overall compliance with the guidance has been reported as very good. Following our temporary closure of car parks in parks, we have now reopened these to allow residents to drive to our parks where appropriate and necessary.

- 6.3. The Council prepared an emergency transport plan as a response to the Covid-19 pandemic and to aid social distancing in the borough. The plan was adopted by Cabinet on 15 June and focuses on making changes to roads and pavements to improve road safety, support social distancing, reduce the impact of the motor car and provide more space for walking and cycling. Pavements have been extended into the road at some of the busiest parts of the borough, such as town centres and local shopping parades.
- 6.4. These emergency changes will be followed by longer term work to improve walking and strategic cycling routes throughout the borough. The plan looks to keep Merton moving safely as travel patterns change and restrictions ease. The plan provides a framework for funding bids to deliver social distancing and active travel projects. To date, Merton Council has bid for £1,495,680 from the Department for Transport and TfL.

Adjusting core service delivery

- 6.5. Street cleansing and refuse collection services have continued to operate during this time by adapting to ensure social distancing and a safe, secure workplace for staff. Services have seen an increase in domestic waste set against a reduction in commercial waste, as a result of people remaining at home and the closure of businesses. It remains to be seen how far this will be sustained. With more commercial waste being produced at home, there is a risk that the Council's drive towards waste minimisation and increased recycling will be affected.
- 6.6. Parking Services have been supporting the NHS, Care workers, NHS volunteers and Merton Voluntary Service Council (MVSC) volunteers, by providing free, unlimited parking in council car parks and in our on street parking bays. Virtual permits continue to be issued to all those deemed to be providing essential services so they can get about the borough and park without delay.
- 6.7. Leisure centres and pools have been closed since March in line with others across the country and Environment and Regeneration have been working closely with GLL on their recovery and reactivation plan. Merton has also followed Government guidance in providing financial support in the form of a recoverable grant. It is likely that further support will be needed to aid a transition from lockdown, and we are working closely with GLL to assess the need and to present this to Members.
- 6.8. Domestic Abuse support continued to be delivered during the lockdown, moving towards phone and online support. MARACs have continued to function during lockdown, with a virtual model being adopted to ensure that

high risk cases continue to be flagged for intervention. The One Stop Shop service and IDVA advocacy support are being provided primarily through telephone and online support for the time being. The service has also developed a plan to respond to any increases following lockdown and maximise communication about routes to access domestic abuse support, as other countries have seen increases in domestic abuse following the lifting of lockdown restrictions when victims are more able to access help. Merton figures for domestic violence have so far remained stable.

- 6.9. It is unclear yet what long term impact Covid-19 will have on regeneration plans for London and Merton. In the short-term, some construction work across the borough has been delayed and there has been a reduction in Planning applications and in Building Control work, reflecting the temporary closedown of construction and some plans. Predictions from industry experts suggest that demand for housing will return and sales values will recover from a short-term dip. If that is the case, in the longer term the economic viability of schemes such as Morden Town Centre should return but it is too early to tell, and we are unclear as to the impact on TfL London and their property ambitions in Morden.
- 6.10. Commercial and retail led town centres such as Wimbledon will inevitably be affected in the short term by the impact on the High Street and it is not yet clear what the demand for office accommodation will look like. There will still be demand for places of work, but with the increase in people working from home, it is not yet known if this will mean a contraction of office space, or a re-purposing of existing stock for new-format workspaces. The Council will be working to assess market conditions and how we can support business and the supply of housing over the coming months.
- 6.11. The department has successfully managed to progress work on Bishopsford Bridge despite the lockdown measures and demolition work is now underway. The Planning application is being prepared and work continues to prepare for procurement. Providing there are no unforeseen interruptions, it is anticipated that the bridge will be completed in Spring 2021.

Steps towards reopening and recovery

- 6.12. Government have announced a Reopening the High Street Fund to support the reopening of non-essential retail from 15 June. We will be working with business to ensure this is used to support a sustainable return for businesses. The RSP have developed a business reactivation plan which identifies the risks that will be created, regarding social distancing as businesses reopen. The Plan sets out how the Council will work with these High Street businesses to ensure this can be done as safely as possible. As responsibility for regulation and enforcement in this area is split between the Council, the Health and Safety Executive and the Police, there is potential for confusion in the eyes of the public and business; our approach will need to take this into account and manage the complexity.

- 6.13. Garth Road recycling site reopened on 13 May, following revised guidance from government. Measures have been put in place to enable the safe reopening of this facility with social distancing requirements in place for visitors and staff. A booking system has been set up to manage numbers and queuing requirements effectively. The service is operating well and has received positive feedback from users directly and on social media.
- 6.14. Subject to Government announcements, GLL expect to open leisure facilities in July, however this is expected to be a reduced leisure offer dictated by social distancing. GLL anticipate the need to have further financial support for some months to come as they work towards normal service. Members will want to consider this financial support alongside other demands as the picture becomes clearer.
- 6.15. Playgrounds and outdoor gyms remain closed but it is expected that we will be able to reopen from 6 July following Government guidance. Unfortunately we do not expect our paddling pools or water play facilities to be open this year due to the risks associated with the way in which these facilities are utilised.

Challenges ahead

- 6.16. Reopening of pubs and restaurants from 4 July will be an important opportunity for small businesses in the borough to recover and citizens to return to a sense of normality. This will be a significant challenge for our Environmental Health service as well as potentially for the Community Safety Partnership. Much work is underway to try and ensure that hospitality services can reopen safely with appropriate Covid-19 secure arrangements. However, it is expected that the early days will generate concerns from the public and business owners alike which we will seek to deal with appropriately.
- 6.17. The Governments recently announced Business and Planning Bill will change the way in which businesses can obtain permission to trade outside their premises including placing tables and chairs on the pavement. The Council is wholly supportive of business and will do what it reasonably can to sustain businesses during the challenging months ahead. This new legislation will need careful management though in order to ensure that we manage public space safely taking care not to increase the risk of virus transmission or causing obstacles particularly for those who have disabilities.

7 CORPORATE SERVICES

Priority areas for Covid-19 response

Support for local community and businesses

- 7.1. The Council has adopted a range of measures to support the local community and businesses at risk of suffering from the impact of Covid-19 and lockdown restrictions. These include:
- A commitment to ensure that, in most cases, essential service providers will continue to receive payment for services provided, despite the challenges faced in delivery.
 - Cash flow support for all service providers by the early payment of invoices (currently within 36 hours of receipt).
 - Changing from payment in arrears to payment in advance (e.g. payment of one month's supply of goods/service in advance/arrears to up a maximum of three months in advance).
 - Deferring the Council's first quarters' commercial rents and advancing the first quarter's income to the three Merton Bids.
 - Deferring council tax instalments for residents most in need
 - Deferring business rates instalments for businesses most in need.
 - Continuing the temporary suspension of Dunning and Bailiff activity. We are now about to recommence selected debt recovery measures applying a degree of sensitivity on outstanding debts.
 - Suspending Leisure membership payments.
 - Additional support to the voluntary sector
- 7.2. The Council has been successful in swiftly mobilising the payment of Business Support Grants for small and medium businesses affected by the Covid-19 crisis. Over 95% of the allocated funding has now been delivered to 95% of businesses, totalling £27.11 million. Merton has performed well on this measure compared against other local authorities across England according to official figures. Merton's £1.3m Discretionary Grant Fund application process for Phase 1 was launched on 10 June with a closing date of 24 June. At the close of the scheme deadline the Council had received 256 applications.
- 7.3. The Council set up a business help page on the Covid-19 response to signpost to Merton and government support for businesses and employees. The Council has also awarded a grant of £20,000 to Merton Chamber of Commerce to provide localised business support, since lockdown in March. The programme includes targeted webinars for businesses to connect with

officers for IAG, for example on re-opening premises safely. The Chamber will work with us to help with business recovery, providing local intelligence on business needs for forward planning and sending the message of Council support through newsletters and promotion.

- 7.4. The Council has launched a new borough-wide Covid-19 newsletter which is now the primary communications channel and has been sent to more than 76,000 email addresses across the borough. This newsletter is distributed every week and provides vital updates so that residents can be kept informed and engaged. This has seen a very strong open rate at 67% and positively feedback has been received directly from recipients with no unsubscribes. The Council has also launched a new borough-wide Covid-19 newsletter for businesses, which again has been well received.

Support for staff

- 7.5. The Council has adapted quickly to move to remote working for staff with encouraging results. From the commencement of lockdown and closure of all Council buildings, the IT team worked to successfully enable some 1,200 staff to remain safe by working from home. The transition has also brought forward improvements to IT systems. A recent wellbeing staff pulse survey has confirmed that 86% of staff who are home working stated positively that they have been able to manage the new technology and have all the resources that they require to work effectively from home. Staff have also reported that the new arrangements have supported a good home-life balance.
- 7.6. To support the health and wellbeing of staff during this period, the HR team have produced a number of guidance documents and provided additional support to staff through online learning and promoted activities to staff with a focus on supporting wellbeing. Whilst some staff have had to shield or self-isolate, a high proportion of these have been able to remain working. Overall sickness levels remain lower than normal.
- 7.7. New channels of internal communication have also been established as part of the Covid-19 response which includes daily staff bulletins, new intranet pages, live Q&A sessions by directors and the CEO, as well as weekly CEO messages to staff. These have proved successful and have seen extremely high rates of engagement with overall satisfaction with internal communications at 86% in a recent staff survey. The four All-Staff video Q&A sessions with the CEO have so far reached almost 1,000 staff with 100% approval rating from attendees.

Adjusting core service delivery

- 7.8. Since the closure of the Civic Centre, all efforts have been on supporting residents and customers through the use of access channels such as on-line

web transactions and telephone. Where absolutely necessary face-to-face interactions have been facilitated, while adhering to general health and safety and socially distancing guidelines. All services offered have adapted to ensure continuation throughout the lockdown.

- 7.9. The Revenue and Benefits department has continued to operate fully during the crisis period but has experienced a significant increase in workload. The Service has been at the heart of delivering much needed assistance to local residents and business community through the measures outlined in this report.
- 7.10. The Internal Audit Plan agreed by Standards and General Purposes Committee on the 12 March 2020 has been adjusted to reflect the additional risks to the Council. Internal Audit reviews on the Councils governance and management of Covid-19 government grants has been added, as well as audits on Care Act easements. There was a delay in starting new audits at the beginning of the year, other than Troubled Families grants, governance and advisory work. One member of staff was redeployed for 2 months to support the Learning Disability team. Recent support has been provided on the fraud checks for Business Support and Discretionary grants.
- 7.11. Commercial Services have continued to operate fully during lockdown by adapting to working from home full time. The team have also redirected efforts into assisting Community & Housing and Environment and Regeneration with sourcing and securing items such as food and much needed PPE. This has not only resulted in a positive impact across the care sector locally, but by extension, a direct positive impact on the lives of some of Merton's most vulnerable residents.
- 7.12. The Pension fund initially experienced a significant reduction (approximately 11%) in the value of its investment portfolio, primarily its equity holdings as a result of Covid-19. Our latest valuation at the end of May 2020 shows that our fund value has now been restored to its December 2019 level.

Steps towards reopening and recovery

- 7.13. The council is aiming to reopen services from 13 July 2020, however this will be dependent on the latest government guidance. It should be noted that some services may not be able to fully re-open and there may, depending on the nature of the service, be the need for a phased approach to reopening. A comprehensive risk assessment package has been prepared by HR for managers to support staff in returning to the workplace as services and buildings prepare to reopen. The assessment will allow any individual requirements to be identified and appropriate measures needed, particularly for the most vulnerable members of staff.
- 7.14. The Civic Centre remains closed to the public and the vast majority of staff continue to work remotely. Planning is underway for a phased return to the building for some staff with strict social distancing measures in place. Risk assessment suggests that maximum occupancy will be 50% on the basis of

2m social distancing, possibly around 30% when accounting for those who would need to travel on public transport. There will be no change to the planned arrangements in light of the reduction in social distancing to 1m plus. Measures being put into place include a one-way system for the stairwell, lift capacity restriction, foot markers and changes to desk arrangements.

- 7.15. Preparatory work has begun during lockdown to enable the reopening of the ground floor reception area. This has included the provision of screens, removal of furniture to enable social distancing, signage and the provision of face coverings, if necessary. The direction of travel will be one way. The front doors will be the point of entry for customers only – staff will continue to be asked to access/egress the building by the rear and exit through a side door. These will be marshalled by additional resource.
- 7.16. Adopting a similar approach to the above, the Council has successfully reopened Merton's Registration Service at Morden Park House on Wednesday 25 June. Limited services available include death and birth registrations - although legislation passed during lockdown has enabled the former to now be conducted over the telephone and we have indicated that this continues to be our preferred option – as well as notices of marriage and civil partnership. These are conducted by appointment only with no drop-in service offered. A Citizenship ceremony is planned for 01 July and the first wedding is due to take place on 07 July.
- 7.17. Striking the right balance will be critical in reopening council buildings and services, including the Civic Centre, while ensuring safety of staff and the wider public. The Directorate will continue to follow the government's guidance in doing so, carrying out robust risk assessment and applying appropriate mitigations to support safe reopening of buildings to the public and staff.

Challenges ahead

- 7.18. Responding to the changing needs of the Council's workforce in the short and longer-term will present some additional challenges, with implications for Learning and Development. With staff continuing to work remotely, there is an urgent need for training and workforce support to be delivered in online format, for example through webinars. Staff and managers have adapted quickly to the new working environment, however increased home working on a more permanent basis is likely to present some additional challenges for staff and managers. Work is underway in HR to plan how the Council can respond to new demands in supporting its workforce, including mental health and physical wellbeing of staff, especially for those at the frontline of the Covid-19 response.
- 7.19. The IT infrastructure has been central to the Council's response by enabling staff to work from home and supporting the continued delivery of services to service to residents. Looking ahead, it is expected that the Council will be

looking to further integrate digital tools and technology into service delivery, which may place additional demands on IT to support improvement.

- 7.20. The financial impact of Covid-19 presents significant challenges for the Corporate Services department in terms of balancing budgets and delivering on planned savings. It is likely that the scale of the challenge and the funding intentions of Government will become clearer in the coming months. Members will face difficult decisions in managing these financial challenges while continuing to deliver vital services to the community at a critical time. Additional uncertainties in the provider and supplier markets, for example in the care and early years sector, may further compound this.

8 LOOKING AHEAD

- 8.1. The Council is facing an unprecedented strain on its finances in light of Covid-19 which will set the context for recovery in coming months and years. This is in addition to the existing financial pressures the Council has been facing from other areas, in particular the Dedicated Schools Grant deficit in schools, which the Council has been endeavouring to mitigate. Our current estimate of our net shortfall in resources in light of Covid-19 is approximately £35m after the Government Grant. The financial impact on the Council of Covid-19 broadly arises from additional service costs (predominantly Adults), lost income (e.g. Parking fees) and savings committed in the MTFS which are now unlikely. Further detail on the Council's financial position is outlined below. The Council has also introduced a range of measures to provide financial relief to local residents and businesses to assist them in these challenging times which are detailed below.
- 8.2. Officers are continuing to monitor this situation and to mitigate the financial impacts where this is possible. We are currently conducting an urgent review of revenue and capital spending and pressures, including potential use of reserves, to mitigate this significant financial pressure and will update the outturn for 2020/21 position when the first monitoring report goes to Cabinet later in the month. Merton is also making strong representations to Government to recognise the true impact of Covid-19 on our Council's finances.
- 8.3. The impact of the pandemic has presented the Council with a further set of longer term 'change challenges'. The experience of responding to the pandemic has opened up opportunities for the Council to do things differently, such as new possibilities of engagement with residents, communities and business; embedding digital approaches; establishing more streamlined and efficient corporate frameworks. However, it has also exacerbated the financial pressures facing local government.
- 8.4. To oversee the recovery process in Merton, a single, coordinated change programme will be established. The Modernising Merton Programme brings together four main strands of activity around change and improvement alongside the recovery work: the internal review; LGA Peer Challenge;

departmental change initiatives focused on new ways of working; continuing Covid-19 activity as part of recovery. This will be led by departments and overseen by the Corporate Management Team.

- 8.5. Departments have started planning for their service areas using a recovery template as an approach to capture key learnings for the short, medium and long term: what should be kept, what should stop, what is working well and should be retained, and what should be reinvented. In addition, the Council is undertaking a piece of qualitative research with staff and partners to look at lessons learned and how we might improve how we deliver services in future.
- 8.6. Work is also underway to understand impact of Covid-19 on the wider community, especially the disproportionate impact on some groups. Evidence outlined in a recent Public Health England report on factors affecting health outcomes, published on 2 June, has shown that the pandemic has had a disproportionate impact on older people, men, those living in deprived communities and BAME groups. The report confirms that there are higher levels of diagnosis and mortality among the BAME population, as well as other vulnerable groups.
- 8.7. In Merton, the Health and Wellbeing Board is working closely with the voluntary sector in Merton to better understand the disproportionate health impact from a local perspective on vulnerable groups and what actions can be taken on a local level to reduce the risks. This will include research to capture 'lived experience' as well as detailed analysis of the local data. The initial focus will be to look at the impact on Merton's BAME communities and then rolling out to cover older people and learning disabilities/autism. Work is also underway internally, including re-establishing the council's BAME staff forum.

9 GOVERNANCE

- 9.1. At the time of writing most Member level decision making meetings have resumed via Zoom, with only the annual Council meeting remaining postponed until the Autumn. The Planning Application Committee is also taking place via Zoom and residents have been able to address the committee. A streamlined programme of scrutiny meetings had been planned and at its meeting on 24 June, the Overview and Scrutiny Commission agreed proposals for restarting the scrutiny panels virtually in September. The Cabinet Member for Adult Social Care, Health and the Environment is currently exploring options to comply with the requirement for a member-led body to provide the statutory governance for the Council's Local Outbreak Control Plan.

10 TIMETABLE

- 10.1. The Meetings Regulations allow remote participation in meetings until 7 May 2021 so as the law currently stands, if the movement restrictions are lifted, it

would be possible to resume physical meetings but still have a facility to dial in remotely for those members who are shielded or self-isolating.

11 FINANCIAL IMPLICATIONS

11.1. Government has allocated a range of funds to Councils to enable them to support their local residents and business community. A summary of the funding to date as of 2 July is shown in the table below, together with progress in allocating these funds:

| Support | National Allocation | LBM Allocation/Cost | LBM Funds Allocated 29/6/20 | Comments |
|---------------------------|---------------------|---------------------|---------------------------------------|--|
| | £bn's | £m's | £m's | |
| Support for LA's | 3.200 | 10.559 | Fully Allocated | *Current estimate of Covid costs plus lost income in excess of £46m. |
| S31 Business rates relief | 1.800 | 3.471 | | Fully received |
| Council Tax Hardship Fund | 0.500 | 1.480 | 0.650 | £200 award credited to council tax accounts beginning of May. Over £650,000 awarded. £170,000 to be awarded to claimants in receipt of tax credits in June . We are currently reviewing approximately 700 new claimants. |
| Business support grant | | 29.318 | 27.11 | <i>Over 95% of funding paid (£27.3m) – 95%</i> |

| | | | | |
|--|-------|-------------------------|-----------------|---|
| | | | | <i>of businesses paid.</i> |
| Business rates holiday | | N/K | Fully Allocated | Over £46 million in extended retail reliefs and nursery reliefs granted |
| Business Discretionary grants | | 1.3 | None | Discretionary scheme live from 10 June for applications. 256 applications received by closing date. £0.352m awards authorised to date. |
| Adult Social Care Infection Control Fund grant | 0.6 | 1.3 | None | Two tranches. First on 27 May (£657k) and second in July 20. 75% of first tranche due out W/C 8 June. |
| Track and Test Monies | 0.3 | 0.965 | None | Payable in June |
| Local Welfare Assistance Fund | 0.063 | Not known at this stage | | |
| Emergency Accommodation Support | 0.150 | Not known at this stage | | |
| Further support for LAs expenditure | 0.500 | Not known at this stage | | |

11.2. We are continuing to monitor and assess the additional costs and lost income experienced by the Council as a result of Covid -19. The Council is experiencing extra service pressures, particularly in Adult services, and is

also experiencing significant losses in income, particularly in areas like car parking and Leisure.

- 11.3. The Council have recently provided our current best estimates of extra costs and lost income to MHCLG and will continue to press for additional support to enable the Council to provide adequate support to our residents and business community. Members will note that we are still working on these figures as new issues emerge and the length of the lock down becomes clearer.

A summary of the financial impact of Covid-19 on the council's resources recently reported to MHCLG is provided below. This is adjusted for Merton's share of Council Tax and Business Rates, but not for any impact arising from the Business Rates Pool:

| | £1m |
|---|-----------|
| Additional service expenditure | 8 |
| Shortfall in savings/projects delays | 10 |
| Council Tax & Business Rates Shortfall | 14 |
| Loss of income | 14 |
| Total | 46 |
| | |
| Less Grant received from Government to date | 11 |
| Net cost to the Council | 35 |

London Councils have produced some comparative data from the returns which were sent to MHCLG which show total impact, additional spending and lost income for each of the London Boroughs. These are attached as Appendix C.

- 11.4. The Government has announced on the 2 July a new comprehensive package of support to address spending pressures and in recognition of lost income. There will be a further £500m for Councils across England to meet expenditure and a major new scheme will help to reimburse lost income during the pandemic and boost cash flow.
- 11.5. Where losses are more than 5% of a council's planned income from sales, fees and charges, the government will cover us for 75p in every pound lost. The next Spending Review will determine what support councils will get to help the Council meet the pressures of income loss from council tax and business rates.

- 11.6. To assist with this, as the Collection Fund cannot have a deficit balance, Government also announced a proposal for a phased repayment of council tax and business rates deficits over 3 years, rather than requiring complete repayment of deficits next year, which would have to be met from the General Fund in 2021/22.
- 11.7. The basis of the allocation of the £500m is awaited and officers will be working through the details when they are announced to determine the further level of support available to Merton and what the shortfall to be addressed by the Council will be.

12 LEGAL STATUTORY IMPLICATIONS

- 12.1. The legal implications relating to this report are considered in the body of the report.

13 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 13.1. The work being done with the voluntary sector to provide a coherent response to the current crisis and the strong sense of community which already exists in Merton has supported good community cohesion during this crisis. Work is ongoing with faith groups locally and nationally and attention is being paid to the need to have regard to cultural practices in funeral arrangements wherever possible while complying with the advice on infection control.
- 13.2. Public Health England analysis has shown that Covid-19 has disproportionately affected some groups, such as the BAME population, the elderly, males and those with certain health conditions. There is evidence to suggest that wards in the East of the borough have been disproportionately affected by Covid-19 and the wider impacts of the pandemic, such as food insecurity. Data from the Merton Community Fridge network shows that the majority of food packages have been received by residents in the East of the borough. These disproportionate impacts may have implications for equalities and community cohesion in the borough. The Health and Wellbeing Board has established a task group to look at addressing health inequalities in the borough and protecting vulnerable groups from Covid-19. The Council are also in process of commissioning the voluntary sector to carry out lived experience research with BAME communities to inform this work.
- 13.3. Officers are aware that introducing remote meetings could in theory mean that those people without access to information technology or who have difficulty in understanding a webcast are less able to access those meetings than others. In drawing up the guides referred to above, measures to mitigate the impact of the arrangements on people with communication difficulties will be included where possible, whilst noting that it would not

currently be lawful to allow members of the public to attend physical meetings.

- 13.4. Equality Assessments will be completed where changes to services are being considered and this will be built in to the council's approach to recovery planning.

14 CRIME AND DISORDER IMPLICATIONS

- 14.1. As always, the Council is working closely with its partners in the Metropolitan Police Force to ensure that there is a joined-up response to crime and community safety issues. While crime levels have broadly dropped, the Police and Councils have seen a spike in ASB reports during the lockdown period, with a large percentage related to Covid and concerns around breaches as well as neighbour disputes. As noted above, the Community Safety Partnership team will be working with Environment and Regeneration to manage any crime and disorder implications which arise from further easing of lockdown restrictions.
- 14.2. While some other parts of the country have reported steep rises in levels of domestic abuse, Merton has not seen an increase in reported domestic abuse, in common with most of the rest of London. As noted above, the Council is working with providers to plan for any increase as lockdown is further lifted, as other countries have seen increases in domestic abuse reports following lockdown

15 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

- 15.1. As stated in the report, the Council has been able to respond positively and at pace to the challenges presented by the Covid-19 crisis. Core and critical services are proving to be resilient. After initial challenges on PPE Provision, supplies have been secured from a range of sources and work is underway at a London level to ensure a coordinated approach to supply. Primary concerns around risk management and health and safety are outlined elsewhere in this report but at present stem from managing a phased reopening of the economy and services safely, as well as the risk of a potential second peak.

APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

CHIEF EXECUTIVE'S DEPARTMENT
Ged Curran – Chief Executive



Luke Hall MP
Minister for Rough Sleeping and Housing
Ministry of Housing, Communities & Local Government
4th Floor, Fry Building
2 Marsham Street
London
SW1P 4DF
Via email to: PSLukeHall@communities.gov.uk

Chief Executive's office
London Borough of Merton
Merton Civic Centre
London Road
Morden SM4 5DX

Direct line: 020 8545 3332

Date: 11 June 2020

Dear Minister

Moving onto the next phase of accommodating rough sleepers

I am writing in response to your letter of 28 May, which provided further detail on the Government's approach to rehousing rough sleepers going forward. In this letter, the borough is asked to set out its plan of support for all rough sleepers in Merton, accommodated in hotels and other forms of emergency accommodation during the response to the pandemic. The complete plan of support is appended to this letter. To enable review against your expectations I have structured this letter in line with the bullets points in the letter.

Your letter was very much welcomed. We share your ambitions and objectives in seeking to ensure that all rough sleepers currently have accommodation and are helped to move into sustainable accommodation. We also welcomed the Government's further extension to the moratorium on evictions. Without such an action, it is our view that vulnerable households, many with children, would be likely to be evicted and face the trauma of a homelessness episode.

The numbers of people who we have accommodated continues to grow as we continue to help those who might otherwise be homeless and be forced to resort to rough sleeping. Whilst our immediate concern has been to accommodate everyone we are unclear how long we can sustain such arrangements. Particularly in those cases normally ineligible for housing assistance owing to their immigration status or not considered vulnerable and therefore not in priority need. We want to prevent homelessness for all groups. We are committed to working with the Government and the Rough Sleepers Task Force headed by Dame Louise Casey DBE CE. Urgent confirmation of whether additional funding for NRTPF and non-priority will be made available to councils would be welcomed. Equally welcome would be a clear statement on whether there is an intention to change the Housing Act legislation.

APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

In Merton, throughout the pandemic response, we have worked to support 52 rough sleepers into emergency accommodation. 19 individuals have been supported into the centrally commissioned GLA emergency accommodation. All others have been accommodated through locally sourced solutions. A number of individuals have additional needs and they have successfully engaged with local mental health drug and alcohol services. Access to this support and treatment leads to a higher likelihood of success in ending their rough sleeping. Fortunately, none of the 52 supported have shown symptoms or received a diagnosis of COVID-19. We continue to work with 8 individuals known to still be sleeping rough. All have been offered accommodation throughout the response and we will continue to work directly with them.

Our regional response

COVID-19 has provided an unprecedented challenge to Local Government. The challenge has been significant in London due to early and rapid spread of the virus, local patterns of deprivation, high levels of air pollution and the high proportion of ethnic minority populations in most London boroughs. As more data and information becomes known, we will work to understand any disproportionate impact, including in relation to both deprivation and ethnicity.

Councils in London (as across the rest of the country) have taken unprecedented steps in the face of the COVID-19 public health emergency to find immediate emergency accommodation for rough sleepers. As of 28 May, 4,967 rough sleepers had been accommodated by London Boroughs or the GLA as a result of this mass outreach programme and in support of the 'everyone in' approach that all partners (including councils and MHCLG) are working towards.

Across the Capital, London local authorities responded to the challenge and our responsibilities under the Civil Contingencies Act by working together as London ADASS and Chief Executives, alongside NHS partners to identify issues, galvanise responses and lead several pan-London initiatives. We brought our co-ordinated response together through the Strategic Co-ordination Group and joint governance with NHS London.

In London, the Strategic Coordination Group and LA Gold arrangements commissioned the development of our regional Rough Sleepers Next Steps Strategy in mid-April, with a view to delivering an 'in for good' approach for everyone currently accommodated through the rough sleeping pathway. This was agreed in mid-May by the partners sitting on this group, which included the London Boroughs, GLA, NHS England and Public Health England, and is supported by officials in MHCLG. In our Borough therefore, we have been working on our next steps strategy for some time.

We welcome the announcements of capital and revenue funding for investment in support and homes for our Rough Sleepers. We remain concerned though about the scale of the challenge. The 3,300 homes that are planned to be delivered in the first year of £433m fund will meet the needs of approximately 20-25% of the national figure

APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

for people currently sleeping rough. London alone will need more than this, and far more quickly than these are likely to be provided. London Boroughs would like to have a role in the commissioning of the accommodation, ideally to support the highest needs groups who will require intensive wraparound support. Many of this group may need intermediate accommodation and support between the easing of lockdown and the new accommodation being ready, which will be a new burden.

We were however disappointed that the letter has not committed to providing extra funds to support borough services and activities undertaken to support rough sleepers. The money stated in the letter that has gone towards the emergency response has, in effect, already been spent on hotel and other emergency accommodation placements. On homelessness and rough sleeping, London authorities anticipate spending £50m more than budgeted this year. Work is underway with all London Boroughs to get a more specific estimate of future costs based on borough's specific move-on plans. Prior to the COVID-19 public health emergency, councils in London were already spending in excess of £200 million extra a year to support homelessness services – funding drawn from borough general fund budgets and not met by specific homelessness grant funding or other housing-related revenues. It is the case however, that significant additional funding is needed from MHCLG to support borough activities to ensure no one has to end up back on the street without an offer of accommodation and support.

Your letter identifies that authorities may have given support due to risk for life to clients with nil recourse to public funds, who otherwise would be ineligible for it and that they will have to continue making these assessments. We have signed up to the principle that rough sleepers should not go back to the streets, but the lack of any flexibility or financial support makes it increasingly difficult to meet this principle. At the least, we need a framework to prioritise settled status and other claims with the Home Office, to give clarity.

Continuing to be health-led and working with health partners

During the first phase emergency response to the pandemic, the London COVID-19 Homeless Health Delivery Group was established and reported into the Out of Hospital Cell. Merton, like all London boroughs, worked with the GLA to identify, assess and support individuals to move into emergency accommodation either commissioned centrally through the GLA or locally sourced. As part of the wider health intervention telemedicine, initial triage, primary care registration and health needs assessment and screening was put in place in GLA accommodation settings.

In the next phase we will work with SWL health partners as they develop plans to meet gaps in the health services requirements that are identified through the health needs assessment. Housing services, together with Public Health, Social Care and CCG colleagues will co-ordinate local delivery plans for mental health, alcohol and substance misuse services to ensure any accommodation offer is integrated with holistic and personalised support.

APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

Merton has successfully led its shielding programme for almost 7,000 residents. Wherever an individual is identified as requiring to shield they will be contacted by the shielding service and based on the initial conversation a range of interventions and further referrals can be identified and actioned. We expect to deliver the same level of support to any individual sleeping rough and this extends to any support required to successfully isolate where an individual is identified under the newly established test, track and trace initiative.

Assessment of people sleeping rough

Our rough sleeping staff undertake needs assessments of all clients placed into emergency accommodation immediately after their placements, and produce a move-on plan for each individual taking into account their need, including health and support need. This information was submitted to the Pan-London CHAIN database by 18 May, as requested by the MHCLG. As part of this exercise, we also completed a Support Needs Assessment and a COVID-19 Risk Assessment on CHAIN for each client.

Concerning wraparound support, we have obtained consent from 10 clients with alcohol issues (out of 12) and referred them on to WDP drug and alcohol services for support. To date, we have also referred 3 clients to the Pan-London EASL Mental Health support services, and referred 2 clients to floating support commissioned by our Housing Related Support Services. We also have multi-agency panel meetings involving St. Mungo's and other agencies to discuss move-on plans with wraparound support for clients with complex needs. We have started to action clients' move-on plans since early May, arranged 6 private rented sector viewings to date and placed one client into private rented accommodation with support provided by the Pan London Private Sector Support Service.

Approach to move on accommodation

Merton Council is a non-stock owning housing authority and will need to rely upon our housing association partners and the private rented sector to meet housing need. Over many years, we have had positive relationships with both, but we are of course concerned that the economy may impact upon these areas and create barriers to delivery and increased supply. There is particular anxiety that private landlords will not make capital investment to upgrade their properties to standards in accordance with the Housing Act 2004 and the HSSRS rating system. Some landlords may leave the market at a time when the need for housing supply could not be greater. In order for us to encourage landlords to work with us and accept our rough sleepers as tenants, a national programme for the provision of grants and loans to incentivise landlords to bring properties to the market would be hugely beneficial.

Despite these challenges, we are working closely with RSLs and private landlords to source appropriate solutions. We are currently in discussion with a number of housing providers with the aim of bringing forward supported and interim housing schemes as move-on accommodation for our clients. We have a number of options including the

APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

YMCA, RSL nominations and private lettings that we are exploring for each case. As a last resort, we have buildings not currently in use that could be converted into temporary accommodation, although the nature of such provision is such that there would be issues in maintaining social distancing.

Of Merton's 52 rough sleeping cases, 14 have no recourse to public funds and are currently accommodated by the GLA. It is our judgement at present that it is not in the interest of their health or public health for them to return to the streets. However, this cannot continue indefinitely and there is a high probability that they could return to rough sleeping in the absence of long-term solutions for a group that councils would not normally have a legal responsibility to accommodate.

To conclude, Merton has a proven record in homelessness prevention and finding housing solutions for vulnerable households and we want to build further upon these by working with the task force, Government and our partners. We are proud of our innovation and initiative with regards rough sleeping. We have successfully implemented programmes of work under the Rough Sleeping Grant, part of the MHCLG funding programme 2016 and the Rough Sleeping Initiative 2019-21, which have had a positive impact on the lives of people who have experienced sleeping rough.

We will continue to act in the best interest of people we support and work with the full range of local partners as we implement our plans under the next phase of response. The health and wellbeing of our residents is of paramount importance to us as we continue to respond to the ongoing crisis

Yours sincerely

Ged Curran
Chief Executive



APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

Appendix One:

Rough Sleeper Next Steps and Recovery: Initial Plan

This document is designed to assist with Next Steps planning for those who have been accommodated in response to the Covid-19 pandemic.

The document asks for information on;

- Cohort size and needs,
- Proposals for interim and move on accommodation
- Where existing resource can fund move-on options (e.g. Rough Sleeping Initiative (RS) Year 3)

Glossary

1. **Emergency COVID-19 accommodation (EA)** – hotels or other temporary accommodation acquired since 18 March in response to the Covid-19 pandemic and which has a time-limited availability.
2. **Temporary accommodation (TA)** –Accommodation available as Council TA or newly secured on a temporary basis (e.g. YHA, student halls etc) which you anticipate will continue to be available beyond the 'lockdown' period
3. **Short/medium term accommodation** – accommodation which is suitable for short to medium-term occupation whilst move on accommodation is procured e.g student accommodation, Council TA, supported exempt accommodation, caravans, property guardianships.
4. **Move-on accommodation** – accommodation which is suitable for longer-term residence) e.g. supported housing with move on, private rental sector (PRS), council lettings, RP lettings, return to family/friends.

| | | |
|--|--|----|
| LOCAL AUTHORITY: | London Borough of Merton | |
| Name | Angela Chu | |
| Email | angela.chu@merton.gov.uk | |
| Please state all local authorities included if responding on behalf of a joint RSI allocation | | |
| Date | 10/06/2020 | |
| 1. Current Cohort | | |
| a. | Please provide the number of single people currently in emergency accommodation in response to the Covid-19 pandemic (see glossary above). | 0 |
| b. | Where you have concerns regarding emergency accommodation that will not be available for as long as you would need it, please set this out, indicating the number of individuals affected and any end dates of concern | 0 |
| c. | Please provide the number of single people currently in Temporary Accommodation (TA) in response to the Covid-19 pandemic (see glossary above). | 39 |
| d. | Of the people in accommodation how many do you estimate will need the following types of accommodation and support to move on | |
| i. | Housing First/Supported Housing with intensive support | 8 |
| ii. | Supported housing or housing led with floating support | 20 |
| iii. | PRS/social housing tenancy with start-up floating support | 11 |

APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

| | |
|--|------------------------|
| IV. Assistance to reconnect to family and friends/return home | 0 |
| e. Of the people in accommodation how many do you estimate: | |
| I. Are EEA nationals with no access to public funds | 6 |
| II. Other Non UK Nationals with no recourse to public funds by condition of their immigration status? | 2 |
| f. Of the people accommodated how many will require self-contained accommodation because they are at increased risk of severe illness from Covid-19, some of whom will be clinically extremely vulnerable and must continue to be shielded? | 1 |
| g. Is your answer to f. above an estimate or based on completed assessments? | Assessment |
| 2. Please set out your move on plans. Please make clear options that are already in place, those that are being developed and those which you propose to develop. State types of accommodation and numbers. | |
| Short/medium-term accommodation units | NUMBER of UNITS |
| Units you have or in development, and when expected to be available | |
| ▪ In discussion with supported housing provider Crossways for units to be available in mid-June. The scheme can take on 5 clients in a 5-bed house, and provides intensive support to clients with medium mental health support need. | 5 |
| ▪ In discussion with interim housing provider for hostel units to be available in mid-June | 4 |
| ▪ In discussion with interim housing provider for hostel units to be available in July / August | 8 |
| ▪ We are proposing to use RSI Y3 underspend to cover the costs of hostel units i.e. shortfall between rent and HB and 2 hours a week floating support for clients (See proposal set out in Section 3 below). | |
| Please set out your proposals for delivering additional short/medium term accommodation units | |
| We propose to deliver the following short/medium term accommodation units for the other clients in temporary accommodation due to Covid19, but will require capital / revenue funding. Details will be set out in funding bids. | |
| ▪ Private sector leasing | 17 |
| ▪ Private sector acquisition | 5 |
| ▪ Buying in separate support | 22 |
| Move-on accommodation | NUMBER of UNITS |
| Units you have or in development and when expected to be available | 0 |
| Please set out your proposals for delivering additional move on accommodation units | |
| All 39 clients will need longer-term accommodation after a period of between 6-12 months in interim accommodation. Our aim is to assist all clients into private rented accommodation after 12 months, but supply for this client group is very restricted, therefore we will need to look to develop / acquire some new units in order to move all clients on to AST tenancies. Again, we will require capital funding in order to acquire new units. | |
| ▪ Private Rented Tenancies | 20 |
| | 20 |

APPENDIX A: LETTER TO THE MINISTER FOR ROUGH SLEEPING AND HOMELESSNESS

| | |
|---|---|
| <ul style="list-style-type: none"> Private sector acquisition or development of new modular housing whichever can be delivered sooner | |
| <p>Other accommodation options</p> <p>How many do you estimate will be reconnected to friends/family or other support networks</p> | 0 |
| <p>How many do you estimate will be reconnected to friends/family or other support networks outside the UK, through international reconnection?</p> | 1 |
| <p>What are the additional support or other services associated with the above accommodation plans (e.g. floating or on-site support, admin, any other accommodation related services)</p> | |
| <p>We will be putting together a package of support for all clients with support needs. These will include drug & alcohol), EASL & LBM Social Worker (mental health), Floating Support, registration with GP, referral to psychiatrists, and private sector support services.</p> | |
| <p>3. Existing funding that Could Assist with Next Steps</p> | |
| <p>We are aware that some RSI Y3 projects may have been delayed from starting due to the COVID-19 pandemic. Please list name and type of intervention(s) set out in your MOU that are not commenced / delayed (estimate no. months delayed)</p> | <p>With the exception of 1.5 outreach workers, all RSI Y3 interventions are a continuation from RSI Y2, therefore already in place from April 2020. The 1 x Outreach Worker started in May (one month delay) & the 0.5 Outreach Worker has yet to be recruited to. In addition, the RS Co-ordinator post has been vacant for a month following the departure of the postholder.</p> |
| <p>We are aware that some RSI Y3 projects may now be undeliverable or no longer appropriate due to the COVID-19 pandemic. List name and type of intervention(s) set out in your MOU that are now undeliverable/in appropriate</p> | <p>All interventions set out in our MOU are being delivered.</p> |
| <p>Estimate the total amount of RSI funding from April 2020 – March 2021 that could be repurposed to accommodating and supporting people who were placed in emergency COVID-19 accommodation.</p> | <p>As well as underspend to date due to vacant posts, we plan to delay filling these posts until beginning of July. We are proposing to repurpose the underspend to fund 4 interim hostel schemes at an estimated £3,500 per scheme per annum (shortfall between rent and HB plus floating support)</p> <p style="text-align: right;">RS Co-ordinator (2 months) £6,667 Outreach (1 month) £2,777.75 Outreach 0.5 (3 months) £4,166.75</p> <p style="text-align: right;">Total £13,611.50</p> |
| <p>Estimate the total amount from other funding streams which could be used to accommodate and support people who were placed in emergency COVID-19 emergency accommodation.</p> | <p>£0</p> |

APPENDIX B: CARE HOME SUPPORT PLAN - LETTER TO THE MINISTER OF STATE FOR CARE

CHIEF EXECUTIVE'S DEPARTMENT

Ged Curran – Chief Executive

London Borough of Merton
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Direct line: 020 8545 3332
Email: chief.executive@merton.gov.uk
Date: 29 May 2020



MHCLG

CareandReform2@communities.gov.uk

Dear Minister of State for Care

Support for care homes

I am writing in response to your letter of 14 May 2020 requesting a short overview of our current activity and forward plan in respect of support to care homes in Merton. The completed care home support template is appended to this letter. To enable review against your expectations I have structured this letter in line with the bullet points in the Minister's letter.

The content of this response has been agreed by James Blythe, Locality Executive Director: Merton and Wandsworth and by Julie Hesketh, Director of Quality and Governance: Merton and Wandsworth (Chief Nurse), both of NHS South West London CCG.

APPENDIX B: CARE HOME SUPPORT PLAN - LETTER TO THE MINISTER OF STATE FOR CARE

Our regional response

COVID-19 has provided an unprecedented challenge to adult social care. The challenge has been significant in London due to early and rapid spread of the virus, local patterns of deprivation, high levels of air pollution and the high proportion of ethnic minority populations in most London boroughs.

Across the Capital, London local authorities responded to the challenge and our responsibilities under the Civil Contingencies Act by working together as London ADASS and Chief Executives, alongside NHS partners, to identify issues, galvanise responses and lead several pan-London initiatives. We brought our co-ordinated response together through the Strategic Co-ordination Group and joint governance with NHS London.

Using data and evidence we developed a comprehensive understanding of the London adult social care markets (home care and care homes) during the spread of COVID-19. Our commissioners used this as a key part of their daily interaction to support providers. It has underpinned and strengthened relationships with providers locally and provided information on care homes across borough boundaries, which has streamlined the work and reduced the burden on providers. Since mid-March this has supported local operational responses: prioritising active delivery of PPE, ensuring appropriate staffing levels and providing Public Health infection control advice and support.

Being alert to emerging issues in system which led to care home challenges and our early response (we started reporting care home deaths and COVID cases from 23 March) allowed action to be taken to respond in London and provided early warning nationally via the SCG of issues that would develop across the country.

A summary of the work across London and issues for the future are captured in ***Appendix A***.

Joint work to ensure care market resilience and infection control

In Merton there are strong relationships between commissioners in the council, Merton CCG and our providers, with an established programme of work to integrate the local health and care system led by the Merton Health and Care Together Board (MHCT). As a formal sub-group of the MHCT Age-Well theme, a multi-agency Enhanced Support to

APPENDIX B: CARE HOME SUPPORT PLAN - LETTER TO THE MINISTER OF STATE FOR CARE

Care Homes (ESCH) group was established in 2018 which included senior care home representatives. This has enabled Merton to implement early the national requirements for enhanced support to care homes announced on 1 May 2020.

At the early stages of COVID-19, Merton's Enhanced Support to Care Home Group scaled up our response and capacity led by the GP clinical lead and a consultant in Public Health. The group have overseen the development of an action plan, which integrates the response of all partners across the system including care home representatives. This plan is kept under continuing review by the group to ensure that it remains fit for purpose in the context of the evolving nature of the challenges faced by our care homes as the pandemic progresses.

We are now delivering the nationally mandated IPC training across all care homes in Merton. The first phase delivered an opportunity to senior care home representatives to participate in training webinars, with most sessions already completed. Phase two will deliver safe face-to-face training sessions for all care home staff that covers key IPC areas including safe use of PPE. In South West London, we have added content on swabbing to support testing into the training programme as a direct response to feedback from care home managers. Where appropriate, these training sessions are being personalised to the needs of residents in each home.

We use data collection and intelligence through the Market Insight Tool (MIT), the daily Market Intelligence Reports populated from the MIT and a local public health dashboard to proactively monitor and anticipate care home support needs. This data is supplemented by soft intelligence captured through regular direct contact with care home managers.

In Merton, to enable us to respond to suspected outbreaks of infection across care homes, we have set up a 7-day single point of contact. The response team consists of a senior community nurse, a social worker and a Public Health specialist. We hold same-day incident management meetings with senior managers when a new outbreak occurs and share lessons learnt as part of the process. A national strategy for the implementation of test, track, trace and isolate will enhance the local work already undertaken.

At the beginning of the testing programme, we and our local providers found the approach to testing difficult to understand and access. We worked closely with our care homes to find our way through the national testing approach. Although the testing

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programme has moved forward for care homes for older people and their staff with the implementation of the national portal system, challenges remain both in the length of time from requesting to delivery of tests to care homes and the timeliness of results being reported back to the care home. A national strategy on testing and re-testing for all care homes to include our learning disability and mental health care providers is critical and must include accurate and timely data on the level of testing in care homes.

At the time of writing this letter, we are pleased to report that a very high proportion of our care home providers have adequate supplies of PPE. Since the beginning of the pandemic, London Borough of Merton have provided over 154,000 items of PPE at nil cost to providers. We recently placed an order for 2.6 million items of PPE via a London-wide commissioning approach to support our staff and local providers. Notwithstanding the proactive local work to ensure adequate supply to our providers from the beginning and throughout the pandemic, the rapid roll out of the new national supply arrangements remains critical for social care and to provide assurance to care homes that reliable and affordable supply lines can be re-established.

We continue to monitor stock levels in each home through both the MIT and our regular contact with care homes. Where there is an urgent need, supplies are ordinarily delivered to homes within 24 hours of the request being made and often on the same day.

We commend our local care workforce for their resilience and dedication in continuing to deliver good quality care despite the challenges. As part of the daily review of the 'state of the market', we review workforce capacity. We have contingency plans in place through our enhanced in-house Reablement team and a register of our registered managers in case of a sudden depletion of staff in a specific home.

We have an established set of arrangements for GP and clinical support for older people care homes, which has been enhanced during this period to include learning disability and mental health.

System's collective level of confidence

There is a high degree of confidence among partners across the local system in delivering a programme of enhanced support to care homes. As outlined previously in

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this letter, a national approach to developing strategies for both maintaining PPE supply and ongoing testing in care homes would further enhance local system confidence.

We are also fully engaged with those aspects of care home support which are co-ordinated at the Integrated Care System level (South West London). An agreement has been reached for mutual aid with the NHS across SWL for testing should the national care homes portal not be operational. Arrangements to ensure safe hospital discharge for Merton are also being co-ordinated at this level as the Merton population is served by a number of local acute hospitals. Arrangements to offer volunteers and clinical returnees to care homes also operate on this level as described below.

Senior council officers hold weekly meetings with the lead Cabinet Member for Adult Social Care, Health & Environment and Chair of the Merton Health and Wellbeing Board. At the June meeting of the Health and Wellbeing Board the care home support plan will be presented. The Chair of the Adults Safeguarding Board has been kept informed of this work. On 28 May an extraordinary meeting of the Safeguarding Adults Board was held and the plan was discussed and endorsed. Healthwatch partners are members of both the Health and Wellbeing Board and the Safeguarding Adults Board. Further community engagement on our plan will take place through the CCG Patient Engagement Group and the Local Care Home Forum organised by Dignity in Care. In due course, the plan will be considered by the Healthier Communities and Older People Overview and Scrutiny Panel.

Approach to short-term financial pressures

London Borough of Merton agreed an uplift in its fees for adult social care prior to the start of the financial year that addresses the uplift in the national minimum wage. The home care rate was increased by 5.78% and care home and other care provider fees by 3.7%.The 3.7% offered to care homes and other care providers was calculated with reference to what we would expect payroll costs to be as a proportion of overall costs in order to ensure that the increase in National Living Wage was covered.

We have worked closely with SWL NHS colleagues to ensure that the backdated Funded Nursing Care award for 2019/20 is paid to nursing care homes as quickly as possible, to further support cash flow for those homes.

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We maintain oversight of the sustainability of the local care market and again use the ADASS Market Insight Tool, close liaison with CQC and local intelligence to facilitate this.

We welcome the two tranches of funding provided to local authorities to support us during the COVID-19 crisis to help maintain all of our services including social care. However, it would be helpful if it were made consistently clear this funding was to support all council services not solely adult social care.

We agreed an approach, in line with LGA/ADASS guidance to support the local market financially. To date we have committed in excess of £1m support to providers, including having made £210k in cash payments to date, in response to requests received from providers. We have sourced and procured in excess of £800k of PPE for distribution directly to providers at nil cost. Moving forward, we will not be in a position to afford to repeat this exercise without further funding. In the absence of further funding, it is essential, as noted above, that all social care providers have direct access to the national supply and distribution line.

We have invested £335k in additional reablement capacity to support the system, and to provide assurance that we can deploy staffing resources rapidly were a care home to experience an unexpected drop in staffing capacity.

Our allocation of the national infection control fund is £1.3m. £986k in payments to care homes from the infection control funding, at a rate of £1,067 per registered care bed in Merton, is already committed. This is in line with the guidance to commit a minimum of 75% directly to care homes. Having only just received the grant conditions, further consideration is required on the most effective use of the remaining 25% to support infection control across the wider local care system.

Moving forward as a health and care system, we will need to work together to review the care market, post COVID-19, in Merton, to ensure sustainability and our shared ability to meet the changing needs of our population. A long-term solution to the future funding of adult social care is urgently required.

Alternative accommodation

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In response to demand and capacity modelling, undertaken by Carnell Farrar with the NHS, at the outset of COVID-19, we secured additional community bed capacity to manage expected demand and to support the system. We have an integrated approach to coordination of discharges to community beds and this has worked very well throughout the period of the pandemic thus far. To date, we have continued to have capacity in the borough throughout the crisis.

In our next phase of surge planning, having undertaken further demand and capacity modelling with the NHS, we will continue to work with health colleagues and providers at both local and system level to ensure continued access to community bed based care both to meet any future surges in activity and to ensure that suitable isolation arrangements can be put in place for all individuals being discharged from hospital.

Local co-ordination for returning clinical staff and volunteers

Thus far, staff absences in Merton care homes have been of a manageable level. Merton has engaged proactively with the Proud to Care initiative for the social care workforce. We have an extensive cohort of local volunteers that have been supporting those who are currently shielding and residents accessing our Community Response Hub. In addition various workforce schemes for care homes have been coordinated at a SWL system level. These include:

3. **Prince's Trust workforce project:** Provides care homes a pool of ready candidates for virtual interviews, for positions including Health Care Assistant roles, volunteer roles, manager roles, administrative roles, kitchen staff, cleaning staff and potentially any other vacancies care homes have.
4. **London Workforce Hub:** A scheme which can fast-track healthcare professional roles (e.g. nurses) into care homes where required.
5. **Allied Health Professionals (AHP) Hub:** A scheme which can fast-track AHP roles (e.g. psychologists, occupational therapists, and physiotherapists/rehabilitation staff) into care homes where required.

For all schemes, staff are available for permanent, short term or bank roles.

To conclude, we are very proud of the overall response of our local care home providers, their workforce, our partners and our staff in responding to and managing this crisis. The health and wellbeing of our residents is of paramount importance to us as we continue to respond to the ongoing crisis.

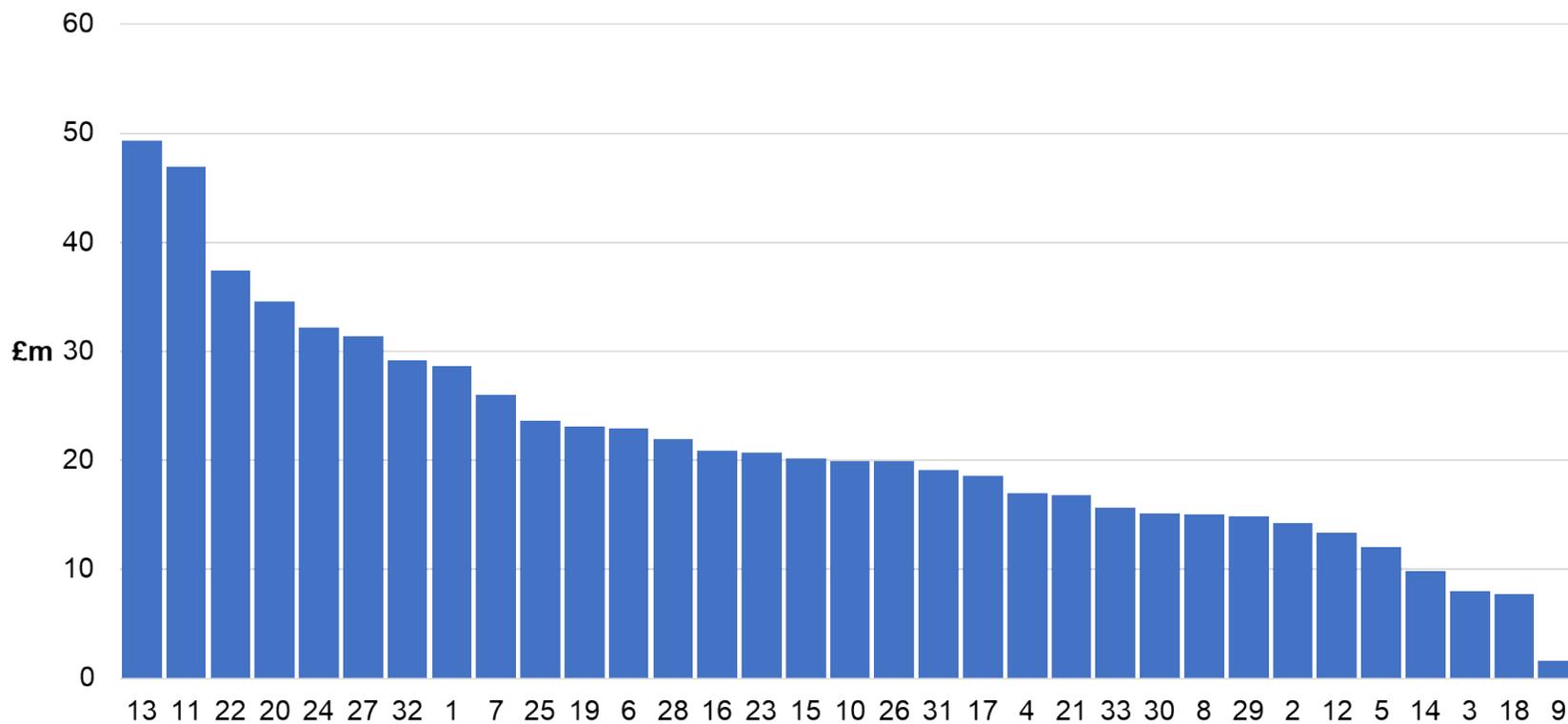
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STATE FOR CARE

Yours sincerely

Ged Curran
Chief Executive

London local government is estimating to spend an additional £709m in 2020-21 as a result of COVID-19

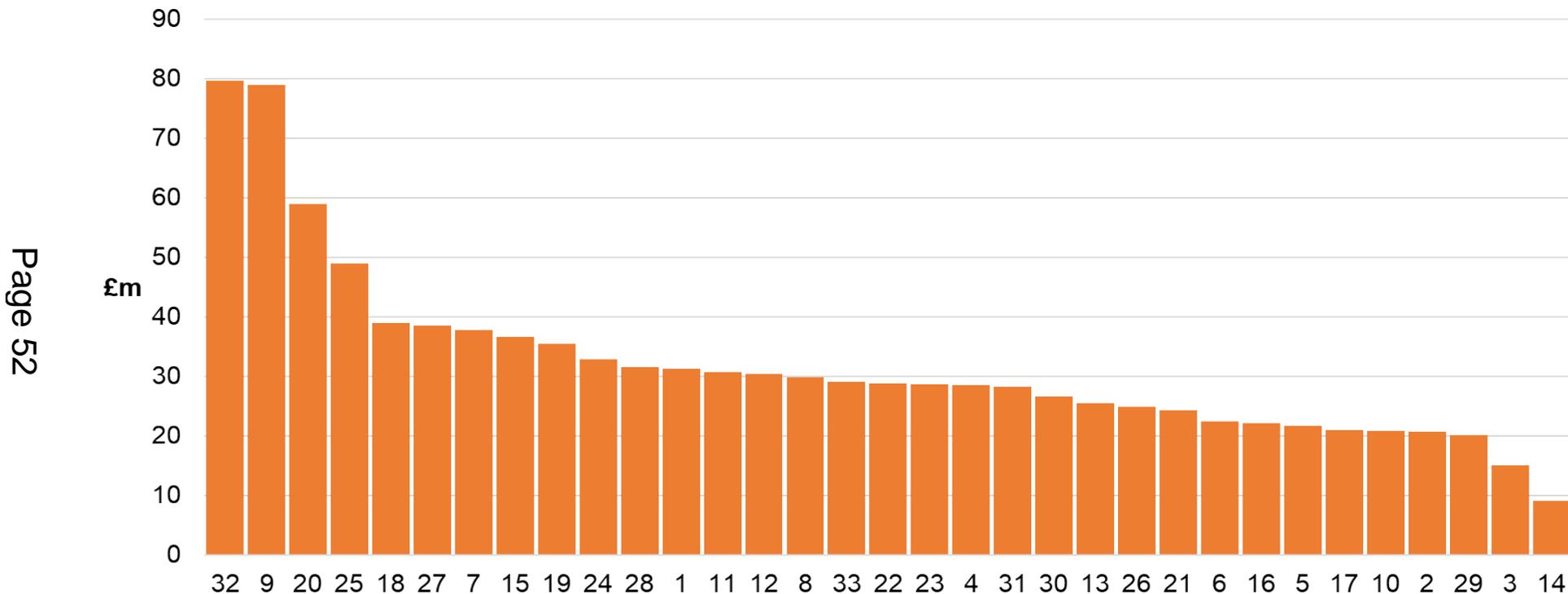
Estimated additional spending (£m) by borough - 2020-21



Source: MHCLG survey, May 2020

London local government is forecasting lost income of around £1.1bn in 2020-21 as a result of COVID-19

Estimated lost income (£m) by borough - 2020-21

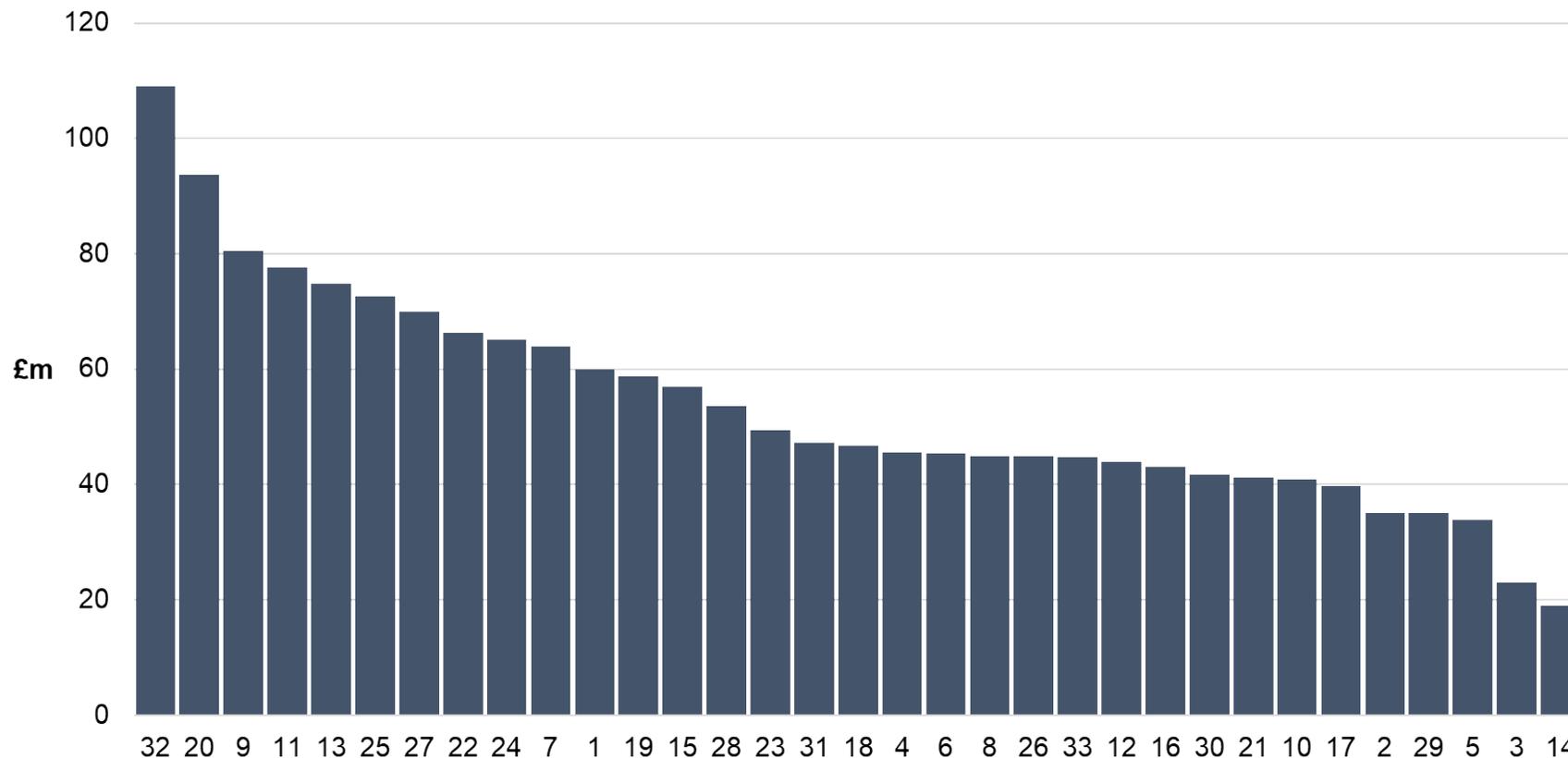


Source: MHCLG survey, May 2020

NB – this includes the local (i.e. 30%) share of estimated business rates losses not covered by C19 related reliefs. The true impact on each borough will depend on the position of the London business rates pool.

The total estimated financial impact of COVID-19 on London local government is estimated to be £1.8bn in 2020-

Estimated total financial impact (£m) by borough - 2020-21



Source: MHCLG survey, May 2020

