



Department of Health & Social Care

*From the Rt Hon Matt Hancock MP
Secretary of State for Health and Social Care*

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Chief Executives and Directors of Adults'
Social Services of Local Authorities in England

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Dear Colleague,

The coronavirus pandemic is the most serious public health emergency that this country has faced for a generation. The Government's action plan has two overriding aims: to protect the NHS by strengthening social care and community support, and to protect life by safeguarding those who are most vulnerable.

As part of this plan, the Government has announced £2.9bn funding to strengthen care for the most vulnerable. Of this, £1.6bn will go to local authorities to help respond to COVID-19 pressures across all services. The Secretary of State for Housing, Communities and Local Government is providing further detail on the funding arrangements separately.

The adult social care sector is at the front line of the response to COVID-19 and has a vital role in ensuring the safety and security of the most vulnerable in society. As the Chancellor has said, we will continue to keep funding under review and ensure that public services receive the funding they need to respond to the outbreak as the situation develops. We recognise that these are not normal times but expect local authorities will do all they can to ensure essential services continue.

The funding is unringfenced and is intended to help councils address the specific pressures they, and providers, are facing in response to the pandemic. Local authorities already have defined duties to ensure that the local adult care market is supported and functioning, and have established contingency action plans. More than ever, commissioners and providers of adult social care will need to work closely to deliver the most joined up and effective response to the pandemic.

Building on the helpful commissioning guidance note recently published by the LGA, ADASS and the Care Provider Alliance,¹ this funding could be used to help in:

- Protecting providers' cashflow by accelerating payments and paying 'on plan' where appropriate. We recognise that where the support providers are able to provide is significantly below plan, commissioners may have needed to fund support elsewhere.
- Helping providers deal with the costs of increased workforce pressures due to higher sickness absence caused by the outbreak, but also due to self-isolation

¹ <https://local.gov.uk/coronavirus-information-councils/social-care-provider-resilience-during-covid-19-guidance-commissioners>

and family caring responsibilities. Care providers will need to be able to deploy their staff flexibly. They may need to hire new staff quickly or increase use of agency staff, creating additional cost pressures. The funding could also help providers support workers on zero-hour contracts.

- Facilitating arrangements for adjusting packages as required in a timely and non-bureaucratic way, especially where providers are having to operate beyond normal services in order to respond to need.
- Ensuring councils can adjust care packages in accordance with guidance on prioritisation and social work ethics.
- Helping providers to meet costs associated with enhanced infection control and the protection of staff.
- Ensuring there is clear and effective transfer of information between commissioners and providers on the general market picture, including the picture around self-funders.
- Finding supportive and creative ways to support providers in handling wider pressures caused by COVID-19.

Clearly, this is not an exhaustive list and other pressures are likely to emerge.

We are also providing £1.3bn funding to the NHS to support enhanced discharge arrangements. This will include providing free out-of-hospital care and support to people discharged from hospital or who would otherwise be admitted into it, for a limited time. This will remove barriers to discharge and transfer between health and social care, and get people out of hospital quicker and back into their homes, community settings or care settings.

We are issuing guidance on this separately, but it is essential that 'boundary issues' do not cause delays. This funding is to cover additional costs resulting from the new measures around enhanced discharge and we expect local authorities to build on existing strong relationships with the NHS to maximise the funding. This should include placing an appropriate portion of funding into a pooled budget with the local CCG, to cover costs, including normal planned expenditure on discharge support, and ensure there is no risk of debates about which fund should pay.

We know that colleagues across local government, and the wider social care sector, are doing everything they can to ensure that people are supported to be safe and well and we thank you for all your efforts at this challenging time.

Yours ever,



MATT HANCOCK