

OVERVIEW AND SCRUTINY MANAGEMENT BOARD
Tuesday 28 April 2020

Present:- Councillor Steele (in the Chair); Councillors Cusworth, R. Elliott, Jarvis, Keenan, Mallinder, Taylor, Tweed, Walsh and Wyatt.

Apologies for absence:- Apologies were received from Councillors Jepson and Napper.

The webcast of the Council Meeting can be viewed at:-
<https://rotherham.public-i.tv/core/portal/home>

170. DECLARATIONS OF INTEREST

There were no declarations of interest in respect of any of the items of business on the agenda.

171. EXCLUSION OF THE PRESS AND PUBLIC

The Chair advised that there were no items of business that would require the exclusion of the press or public from the meeting.

172. UPDATE ON THE COUNCIL RESPONSE TO THE COVID-19 EMERGENCY

The Leader commenced by saying that everyone's thoughts and prayers were with those affected by the pandemic. He also praised the excellent work from key workers across services.

A brief overview of the current situation in Rotherham was outlined:

- support for vulnerable people with a shielded list of 8,600+ people
- 1,500 in receipt of support/supplies via Government
- more than 600 positive tests for Covid-19 but with a limited testing regime there would be more
- 89 deaths in Rotherham Hospital and over 50 outside hospital
- the hospital was coping with the demand of those with acute symptoms and less acute
- over 1,200 volunteers for the Community Hub/Rotherham Heroes to help the wider community who needed help i.e. people not in the shielded group
- Disclosure and Barring Service checks undertaken and 364 volunteers were active
- 348 requests the previous week (w/c 20 April)
- Leaflets would be going out to all households where people were not known to services
- RMBC staff absence was back down to 10% as some had returned from self-isolation; at one point over a third of waste operatives had been absent

The Council was working at the national, regional and local level to respond to the COVID-19 emergency and to ensure that critical services were delivered and the most vulnerable residents supported. The Chief Executive emphasised that the Local Authority (LA) had responded to Government guidance as it emerged.

The Local Resilience Forum (LRF) coordinated the response across South Yorkshire and a critical incident had been declared. Council staff were working with the LRF in six themed cells, including one established to focus on recovery. The majority of critical services continued to be delivered and the level of overall capacity was positive. Many employees had been moved into other roles, such as the Rotherham Community Hub, with some now back working in wards.

The Chief Executive proceeded to talk through the briefing paper at length, which covered the following areas:

- Governance, management and control arrangements
- Rotherham Community Hub (RCH)
- Neighbourhood working
- Communication and engagement
- Availability and accessibility of Personal Protective Equipment (PPE)
- Managing the deceased
- Impact on services - adult care, children's, waste, domestic abuse and housing
- Access to data on cases of COVID-19 and deaths
- Supporting the workforce

The COVID-19 workstreams would continue to be delivered and reported to GOLD group and Tactical group daily. Any further changes needed in response to the crisis would continue to be reported and mitigating action taken where necessary.

A number of issues were raised and discussed by Members.

1. **Leaflets to households** – These would be delivered by the Royal Mail and contain general information rather than more specific local information. Elected Members would have small quantities of other leaflets and work with the Neighbourhood Coordinators regarding delivery. The general leaflets were only available in English as it would be a challenge to produce them quickly in other languages. Some local leaflets would be in community languages where appropriate. Accessibility and cost effectiveness were key.
2. **PPE** – It was a common access point for both health and social care, with clinical testing first, but if Members had a contact for a supplier, they could send details in and stipulate that it was to be for Adult Care use.

3. **Establishing Rotherham Community Hub** – This had been set up by reassigning staff from the Assistant Chief Executive's Directorate, with the Neighbourhoods team engaging with the community to bring in volunteers. Customer contact call handling was set up. Although there had been issues with logistics and some food banks having closed or via FareShare, overall it had gone very smoothly.
4. **Rotherham Heroes** – As this had taken a while to set up initially Members asked whether the initiative would be retained for longer beyond Covid-19, for example with a mailing list of volunteers, for any future emergencies. Potentially it could be although it was likely to be needed for several months still as some people could be in prolonged self-isolation and social distancing measures were likely to endure until the end of the year. In time it would fold back naturally into the general voluntary and community sector work through Voluntary Action Rotherham (VAR).
5. **NHS Responder Service** and if this would be used to release staff for other duties – There could be supplementary volunteers but not replacing key co-ordination. The volunteer capacity in Heroes met the level of demand. The Government had initially called for LA-led schemes then launched the NHS Responders. It was a question of how to join up all volunteer efforts, balanced against staff in their day jobs.
6. **Traffic management and Household Waste Recycling Centres (HWRC)** - Members wondered whether an appointment system might be required to manage demand. This was one possibility and the service was considering options, as demand was greater than supply and two centres had been closed by the police. Officers were working on re-opening the joint Barnsley, Doncaster and Rotherham service which needed to be done safely for the public. More information would follow.
7. **LRF** – As a multi-agency forum this would have considered various scenarios and although a debrief would follow all partners would have their own way of doing things so Members inquired about any issues that might have arisen, including in relation to data sharing. RMBC's own staff had been involved in the LRF and robust local arrangements were in place for data sharing so there were no concerns in that regard. Good, positive collaboration was reported across all organisations, although there were always lessons learned.
8. **Communications and debriefs** for the community and staff and keeping in touch with the volunteer base. There had been proactive communications and a steady click rate i.e. numbers of people reading the briefings. Feedback had been received about

what was helpful, including from staff and any ideas from Scrutiny would be welcomed.

9. **Support for wellbeing of staff/volunteers in the RCH –**
Members were reassured that debriefs took place at the end of the shift where issues could be raised. Occupational Health support and access to therapies were available and if necessary could be escalated to the NHS.
10. **Data collation and mapping** in relation to where help was needed and for whom, to inform the framework for emergency planning and target resources. Intelligence was collated across organisations, especially in relation to vulnerability, to use for the RCH and for areas or communities where there might be a need to be more active to direct resources in the right way. The intention was to draw upon the skills and expertise of the volunteers in their own localities in the next phase.
11. **Work with staff at Citizens Advice Bureau (CAB) –** The triage team and contact centre would access CAB and the third most common action was signposting people to other services. Information was also collected on signposting activity.
12. **Support for care homes and accurate local statistics on cases**
– This was recognised as a concern and mortality was monitored. It was more straight forward with data from the hospital but regular dialogue took place with care homes who were private businesses working with the Council. The Registrars Service provided a more detailed picture but there was a time lag on the data for deaths. The situation varied between care homes and decisions would be made regarding the Government duty for financial support to care homes to ensure their effective functioning. Care homes were also helped with PPE when requested.

In terms of more specific data from care homes being available to Members, confidentiality as well as the time lag were factors, but an overview could probably be provided.

In response to a question about cases of COVID-19 in Black, Asian and Minority Ethnic communities, the data available lacked that degree of granularity. Wider testing was only just starting to be rolled out but the issue of granularity would be raised with Public Health England as it would help with understanding and responding to the disease.
13. **Food referrals** – Guarantees were sought that referrals from Members would be accepted as they were not always informed and hiccoughs regarding centralisation of food supplies had been reported. This was another case of learning by experience with mechanisms for Members as for staff with the same information

requested. This should lead to food parcels going to where they were needed, which was essential with a limited stock. Members were asked to raise any examples of failures.

14. **Safeguarding children outside the Borough** – Assurances were given that regular contact took place with Looked After Children (LAC) wherever they were placed; not always through visits but also by phone, technology or virtually. Risk assessment tools were used to decide if a visit was needed and if it could be undertaken safely. Creative activity was still continuing and the commissioning team were working with providers and reviewing contracts. Attention was also drawn to the work by schools to ensure children were safe and well.
15. **Corporate Parenting Panels** – Members inquired if these would be expected to resume in light of concerns regarding relaxation of the legislation on safeguarding regarding foster panels, timescales and foster carers having a close connection. There was no reason why Corporate Parenting Panels could not be held virtually. The policy change had been unexpected and there were concerns about why that had been done.
16. **Encouragement for vulnerable children to go to school** – Looked After Children, children known to services or with other vulnerabilities and the children of key workers were encouraged to have a place as per revised Department for Education guidance. Services were reaching out if it would be in the best interest of the child to be in school and numbers going to school had increased since Easter. As most LAC were in family based settings a degree of caution was required regarding them being especially vulnerable and therefore needing to be in school. The majority of children in school were children of key workers.
17. **Voucher System** – Members reported difficulties in accessing the Edenred website, codes being a week in arrears and then delays in obtaining the vouchers. It was agreed that this would be followed up with the Interim Director of Children and young People's Services (CYPS) and with the Regional Schools Commissioner.
18. **Support for families and children** – Members compared activity in Rotherham, where Children's Centres had closed immediately, with a neighbouring LA family hub that had remained open with an appointment system and continued to run its food bank. Members asked about arrangements to keep in touch with those who used the centres and for those who used routinely used food banks. It was confirmed that most Children Centre activities were group-based and held at the centres but Early Help had direct contact with families on-line, virtually or by telephone. Names of people on the food banks registration list should have been transferred through so this would be doublechecked.

19. **Support for young carers** – Both CYPS and Adult Care were continuing to monitor and support carers if connected to services through virtual means. Members praised the speedy response from services where extra formal carer demands were needed in cases of informal carers becoming ill or self-isolating.
20. **Cases of Kawasaki Disease** – This had not emerged as an issue locally but the question would be asked at GOLD group.
21. **Resumption of street cleaning, grass cutting and weeding** - Grass cutting was still taking place in cases of health and safety concerns such as an obscured view. As staff capacity increased this would be considered, together with ensuring safe social distancing for staff.
22. **Service operational updates** – A suggestion was made about informing Members on which services were fully/partially operational and providing contact numbers, plus using Parish Council websites to prevent any misinformation. It was confirmed that only green waste and HWRC had been stood down. Other Streetpride services were continuing and without significant reductions despite fluctuations in capacity. The contact centre could be contacted if any hotspots were identified. It was agreed to check if residents were being kept informed about highway resurfacing work.
23. **Budget overspend** – It was very early to assess the full impact. Circa £8m national money had come in, with further money announced for Councils but no details regarding allocation. Potentially there would be a multi-million overspend if the crisis were to continue to the end of the financial year, possibly up to £50m. Weekly returns were made through the Ministry of Housing, Communities and Local Government. Much would depend on service demands, Council Tax returns, and support for Adult Care providers. Lost service income would be a big hit. Undoubtedly the impact would be significant, and the returns were important so that the Government was fully aware. The initial funding tranche had not come close to covering the impact.

The Chair asked whether Scrutiny could be provided with more detailed data on the budget in a future meeting. When the year-end accounts had been closed down, and the business support grants had gone out, potentially in about four weeks a discussion could take place on long-term impact. Finance staff were commended on their work to administer the grants which had been rolled out well and speedily.

The Leader sounded a cautionary note regarding financial projections due the number of variables and how long the

emergency situation would last. For Rotherham it was more difficult to project as other LAs operated a more commercialised model. For example, if traded services were via a trust it would be easier to determine the financial impact.

Business Rates and Council Tax would be dependent on what businesses re-opened post lockdown. Additionally, a concern was that the Council might not be refunded by the Government for savings due to be delivered in year, £13m in Adult Care and CYPS, with reassessments unable to be carried out in the present situation, for example, as part of the learning disability transformation.

24. Housing – Members explored whether lost rental income and higher numbers of property voids due to people not moving house would become a concern. This was acknowledged but more due to the overall economic impact of the pandemic i.e. unemployment, people being furloughed or working fewer hours, and would be one to continue to monitor due to the time lag on data.

25. Rough Sleepers – All rough sleepers now had accommodation and were in direct contact. Guidance was awaited post-pandemic to determine strategy to move out of lockdown and determine what people would need. Some people were housed in temporary accommodation so it was an opportunity to develop relationships and the right support.

The Chair asked a question that had been submitted in advance of the meeting by a member of the public who had inquired about potential refunds for people who had signed up for the garden waste collection as the collections had been suspended.

It was hoped to resume garden waste collections from early May and subscribers would be contacted regarding proposals for a refund or continuation of the service over a longer period. In terms of clearing the backlog, capacity was a consideration and re-opening the HWRC when possible formed part of the thinking.

The Chair thanked the Leader and Chief Executive for the briefing and responses to Member questions.

As this was such an important issue the response to the pandemic and its impact would feature greatly in the coming Scrutiny work programme. Concerns were highlighted regarding PPE, impact on the budget and implications for ongoing services. Further discussion would take place with Members and officers regarding the work programme but it was important for Scrutiny to continue to monitor and scrutinise developments. The level of support given by officers and services to the public was acknowledged and it was important that the degree of scrutiny did not impact negatively on this work.

Resolved:

- 1) To note the management and control arrangements in place.
- 2) To note the COVID-19 workstreams and the action being taken.
- 3) To provide feedback in relation to the workstreams and current actions.
- 4) To continue to monitor and scrutinise the response to and recovery from COVID-19 as a key element of the Scrutiny work programme in 2020-21.