

Appendix C - Infection Control Fund and Rapid Testing

1. The Adult Social Care Infection Control Fund was first introduced in May 2020. It was extended in October 2020 for infection prevention and control (IPC). The Rapid Testing Fund was introduced in January 2021 to support additional rapid lateral flow testing of staff in care homes, and enable indoors, close contact visiting where possible. These funding streams have been consolidated and extended until June 2021. This is a new grant, with separate conditions to the original Infection Control Fund, the extension to the Infection Control Fund and the original Rapid Testing Fund. The total Bristol allocation is £2,270,788 with the discretionary award element of £790,546.
2. This funding will be paid as a Section 31 grant ring fenced exclusively for actions which support care homes and CQC-regulated community care providers mainly to tackle the risk of COVID-19 infections and enable close-contact visiting, and is in addition to funding already received. Local authorities should pass on directly:
 - 70% of the IPC allocation to care homes on a 'per beds' basis, and CQC-regulated community care providers on a 'per user' basis; and
 - 70% of the rapid testing allocation to care homes on a 'per beds' basis within the local authority's geographical area, including to social care providers with whom the local authority does not have existing contracts.
 - The local authority has discretion to use the remaining 30% of the IPC allocation and the rapid testing allocation to provide further support to the care sector. This element is the focus of this decision paper.
3. £1.675m has been allocated to Bristol City Council for distribution as per guidance. The discretionary award element is £284,428 (Infection Control) and £232,332 (Rapid Testing) Authorisation is sought to allocate of the Discretionary Award element of the Adult Social Care Infection Control and Testing Fund Ring-Fenced Grant 2021.

Local discretionary decision

4. Guidance states IPC funding could be used for providing support on the IPC measures outlined above to a broader range of care settings. Supported Living and other community providers face similar challenges as residential care homes in terms of infection control and facilitating safe visiting but have not enjoyed the same priority in terms of DHSC funding or when new testing initiatives have been rolled out. Therefore the local decision is that this discretionary funding will be distributed on the basis of the number of people in supported living residing in Bristol for providers to utilise on continued IPC measures and awarded to Support To Access the Community (STAC) and Time for You Carers support (T4U) providers for the same purpose.

5. The IPC funding could be put in place to boost the resilience and supply of the adult social care workforce in their area. The local decision is that this discretionary funding will also be used to continue / expand current resilience.
6. Guidance states local authorities may use a small amount of this IPC funding (capped at 1% of their total IPC allocation) for reasonable administrative costs associated with distributing and reporting on this funding. We will use a small amount (under 0.5%) to pay additional hours to current staff to free time to administer this fund.
7. The Rapid Testing allocation will be divided amongst ECH, Bristol based Supported Living, STAC, T4U and Day Services providers.

IPC LA discretion	£264 947	Bristol based Supported Living and STAC/T4U providers	Allocated per user
	£9 481	Additional admin costs	
	£10 000	Workforce resilience	
RT LA discretion	£232 332	Bristol based ECH, Supported Living STAC, T4U Day Services providers	Allocated per user