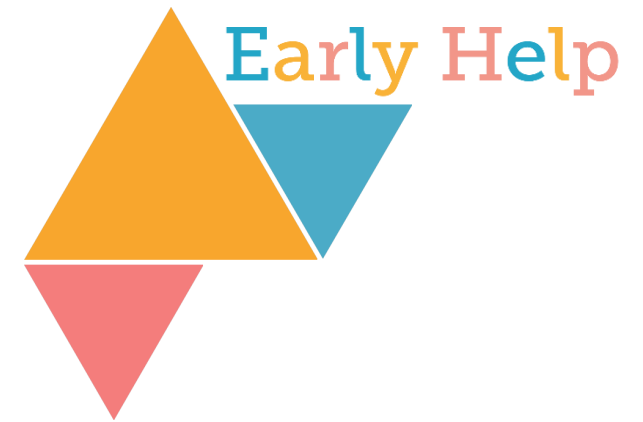


# Preparing for Shutdown Exit

**Briefing for FSCF**  
**2 June 2020**





## Will cover:

- What we know now about the lifting of shut down restrictions
- Thinking back to the assumptions and impacts from our last meeting in May
- Our Plan
- Some things we collectively need to prepare for
- Q and A

# What do we know now?

- The Government has created a 5 stage alert system
- The Government says we are now ‘transitioning’ from level 4 to level 3 on their alert system
- Some aspects of shutdown have begun to be lifted – meeting with up to 6 people outside your own household, schools begin to welcome back children in certain year groups, shielded people can go outside their homes, businesses have started to reopen
- We still await a Camden office accommodation plan so we don’t yet know how buildings like 5PS, Crowndale and other Council-used or owned venues will be run
- Transport, although expanded, is running at much lower capacity than ‘normal’
- Social distancing is likely to remain a feature of life for some months to come

## What do we know now?

- We are at least sure that the Government is still saying there are 5 tests that will determine when and how the shutdown is lifted:
  - Making sure the NHS can cope now (and in any further period)
  - A 'sustained and consistent' fall in the daily death rate
  - Rate of infection decreasing to 'manageable levels'
  - Ensuring supply of tests and PPE can meet future demand
  - Being confident any adjustments would not risk a second peak

ASSUMPTION	POTENTIAL IMPACT
<p>Schools could start to go back potentially from 1 June and that this may be:</p> <ul style="list-style-type: none"> <li>• a) primary school only</li> <li>• b) specific year groups like 5, 6, 10, 11 and/or 12</li> <li>• c) priority learners groups e.g. EHCP, SEND etc</li> <li>• d) some childcare settings may also partially reopen</li> </ul> <p>Likely to be a disrupted school timetable e.g. staggered attendance, partial timetables etc</p>	<p>Impact on capacity for on-the-ground work  Impact on workers with children  Potential increase in referrals at front door  Impact for families re transport to and from school  Impact for families who may not wish to return their child to school  Impact for families where one child is back at school and another isn't</p>
<p>Restrictions to public transport</p>	<p>Impact on capacity for on-the-ground work  Impact on workers outside the borough  Impact for families re transport to and from work or school</p>
<p>Restrictions to use of office accommodation</p>	<p>Impact on movement to, from and within office bases</p>
<p>Continued requirements for social distancing</p>	<p>Impact on operations (e.g. home visits)  Impact on attendance at normal workplace</p>



## Other things we need to think about:

Potential for second outbreak and another national shutdown

Continued protections for workers in the vulnerable or shielding groups, or workers who live with family members in the vulnerable, extremely vulnerable or shielded groups

Continued protection for families in those groups

The possibility of local shutdowns rather than national shut downs

The implications of test/track/isolate on our own movement and on the families we are helping

# FSCF Shutdown Lifting Readiness Plan

We have a 5-phase emergency management plan mapped against the Governments risk alert system.

This will allow us to move up and down the phases depending on where the national or local risk alert system is at


Government risk level 1		FSCF phase 1
Government risk level 2		FSCF phase 2
Government risk level 3		FSCF phase 3
Government risk level 4		FSCF phase 3
Government risk level 5		FSCF phase 4
		FSCF phase 5

# FSCF Shutdown Lifting Readiness Plan



The emergency management plan is a 9 page document

It sets out each of the government's risk levels and our emergency management phases mapped against those risk levels

This is an example of what it looks like 

There are some points in phase 2 of our plan where I want your input and views (which your managers are talking with you about now) so we can decide collectively how we want to approach specific things

Once I have that, I will publish the plan on the Guidebook

I will continue to tell you as soon as we move up or down the phases

FSCF COVID EMERGENCY MANAGEMENT PLAN	
<b>Government risk level 1</b> <b>Stage of outbreak and measures in place</b>	<b>FSCF Phase 1</b> <b>How we will work</b>
COVID is contained in England.  COVID-19 may be uncontrolled overseas.  Isolated household transmission could be occurring.  No behavioural restrictions are needed, and public and private sectors are able to operate normally.	<ul style="list-style-type: none"><li>• Home visits, TAFs, supervisions and team meetings are held face to face</li><li>• Workers use their normal office bases</li><li>• Community sites are open.</li><li>• Workers can travel freely.</li><li>• Social distancing measures applied in accordance with government guidance.</li><li>• Normal management oversight procedures are used</li><li>• Incoming work is accepted using usual channels, and a priority system is not required.</li><li>• Normal Council home working policies and procedures apply</li><li>• PPE is not required</li></ul>
<b>Government risk level 2</b> <b>Stage of outbreak and measures in place</b>	<b>FSCF Phase 2</b> <b>How we will work</b>
There is a low level of virus transmission. The NHS is operating normally.	<b>Home visits</b> <ul style="list-style-type: none"><li>• Home visits can take place, if national social</li></ul>





# FSCF Shutdown Lifting Readiness Plan

As the Government says we are still 'transitioning' from level 4 to level 3, we will be staying at phase 3 of our emergency management plan until 1 July 2020 at the earliest and likely 1 September 2020.

This means:

- Face-to-face visits in the home are still suspended except in exceptional circumstances
- TAFs and supervisions are still to be held remotely
- All staff work remotely with a 5PS oncall manager rota for each week day
- Community sites remain closed
- All COVID related procedures in the Guidebook still apply

However:

Now that people are able to meet with people from outside their own household, you do now have the option to do face-to-face visits with families in outdoor spaces – this is not a requirement but it does give us choice

Workers in the clinically extremely vulnerable group, or who live with someone in that group, will continue to work from home to protect themselves and their loved ones

# FSCF Shutdown Lifting Readiness Plan



When the Government says we are transitioning from level 3 to level 2, or moved into level 2, we will consider moving down to phase 2 of our emergency management plan. This will include:

- Resume face-to-face visits, and in the family home if social distancing can be safely observed. If not, a virtual visit to be done or an alternative venue for the face-to-face visit to be found. Families will have the choice of a virtual or face-to-face visit
- Work towards a 60:40 approach to the working week, for example 3 days at home and 2 in and around Camden to reduce need for travel (dependent on availability of space at 5PS, Crowndale etc)
- Stagger start and finish times to avoid rush hour
- TAFs could take place in person if 1 metre social distancing could be maintained in the venue and where the TAF is no more than 10 people – if not then TAFs would be held remotely
- Same would apply for supervision (121, peer or group).
- Workers in the clinically extremely vulnerable groups, or who live with someone in that group, continue to work from home and follow government guidelines to protect themselves and their loved ones
- Community sites to reopen if social distancing could be observed and restrictions are lifted for gatherings of at least 10 people
- PPE would be available and used in accordance with Public Health guidance

# Things we need to consider together in readiness for moving to phase 2



## **Practice**

As remote working continues, and face-to-face contact is more limited, what does helpful and purposeful remote practice look like for families and how would you know it is helpful and purposeful? What would children and families say?

## **Face-to-face visits outside the home**

At a future point, we will be able to resume face-to-face visits with social distancing measures. We used to do most of our face-to-face visits in the family home. There may be times when social distancing cannot be done adequately in the family home. What do we do in those circumstances? What would the opportunities and risks be?

## **Face-to-face visits for workers who are clinically extremely vulnerable**

At a future point, it is likely that most workers will be able to undertake face-to-face visits but some cannot because they or a member of their family is still clinically extremely vulnerable. How could we create opportunity for face-to-face visits for families when the allocated worker is clinically extremely vulnerable?

## **Community-based IAG offer**

Community venues are highly trusted in their communities during COVID. We want to make it as easy as possible for families to get the help they want. What, if any, opportunity might there be us to offer face-to-face IAG in a community venue (applying social distancing measures) in addition to the remote IAG offered at front door, and how could that work?

ONCE WE HAVE WORKED THROUGH THESE QUESTIONS TOGETHER, I WILL PUBLISH OUR EMERGENCY MANAGEMENT PLAN ON THE GUIDEBOOK

## Q and A