

Summary of Infection Control and Testing Fund 21.10.21

The government has finally [published the grant conditions](#) of the new iteration of the Infection Control and Testing Fund. The £388m grant is for funding between 1 October 2021 and 31 March 2022 and as [we pointed out](#) when it was announced, this constitutes a reduction in the amount of money available. Local Authorities will be paid in two instalments and are asked to distribute each within 20 working days upon receipt of the money. The first 60% of the whole grant instalment will be made to Local Authorities this month (DHSC is aiming for this week). The remaining 40% of the fund will be paid in January 2022. The grant is split into three parts:

- Infection Prevention and Control (£237m)
- Vaccination (£25m)
- Testing (£126.3m)

The purpose of this fund, as before, is to support adult social care providers (including those with whom the local authority does not have a contract) to:

1. reduce the rate of COVID-19 transmission within and between care settings through effective infection prevention and control practices and increase COVID-19 and flu vaccine uptake among staff
2. conduct testing of staff and visitors in care settings to identify and isolate positive cases, and in order to enable close contact visiting where possible

The way in which funding is divided is a little more complicated than previous iterations as the vaccines portion has been split out of the IPC portion. It is divided into three separate funds, with each of the funds having an element of local authority discretionary funding. Furthermore, there are **different grant conditions for each part of the fund**. Hopefully the following helps:

Direct Funding for Providers (Money allocated to LAs to give directly to providers)

Consists of 3 distinct allocations to LAs:

- IPC funding (70% of total IPC allocation)
- Vaccines' funding (we believe this is 70% of total vaccine funding)
- Testing funding (70% of the total testing allocation but may depend on LA allocation)

Local Authority Discretionary Funding (Money given to LAs to use at their discretion)

Consists of 3 distinct allocations to LAs:

- IPC funding (30% of the total IPC allocation)
- Vaccines' funding (30% of total vaccines allocation)
- Testing funding (we believe this is 30% of the total testing allocation but may depend on LA allocation)

Direct Funding for Providers

All of the funding allocated to the three funds in this part of the grant must be used for the measures outlined in the grant conditions.

IPC Allocation to Providers – LAs will allocate this 70% portion of the fund directly to providers on the following basis:

- Care homes, including residential drug and alcohol services, within the LA's geographical area on a **'per bed'** basis
- CQC-regulated community care providers within the LA's geographical area on a **'per user'** basis

As the previous grant conditions stated, LAs can make a distribution in a different way but only having spoken to DHSC, providers and by ensuring it is equitable.

[Annex C](#) gives a full break down of the grant conditions which are largely the same as the previous iteration. It is important to note that there are different grant conditions for care homes versus CQC-registered community care services.

Vaccines Funding to providers – This fund is new but the conditions were previously part of the IPC fund. LAs should pass the direct funding portion of this funding in the same way as the IPC portion:

- Care homes, including residential drug and alcohol services, within the local authority's geographical area on a **'per bed'** basis
- CQC-regulated community care providers within the LA's geographical area on a **'per user'** basis

The purpose of this fund:

- ensuring that staff who need to attend work or another location for the purposes of being vaccinated for COVID-19 or flu are paid their usual wages to do so
- any costs associated with reaching a vaccination facility
- any reasonable administrative costs associated with organising COVID-19 or flu vaccinations where these were not being supported by other government funding streams

Testing funding to providers – At a national level, this represents 70% of the testing allocation. However, this will vary by local authority, depending on how many of each type of setting there is within the local authority's geographical area.

This is to be used for measures related to testing in **care homes, including residential drug and alcohol services, within the LA's area on a 'per beds' basis**. The grant conditions appear to be the same as the previous iteration but do note the comment that DHSC expects most costs related to reduced occupancy from converting a bedroom into a testing area, or the costs in maintenance of this area, to have been covered by the previous fund. Do also note that elements of PCR testing now sits in the Testing Fund as well as the IPC fund (related to isolation). See [Annex C](#) for a full breakdown of the grant conditions.

This means that community settings have been relegated to the LA discretionary portion of the fund again – see that section below.

Local Authority Discretionary Funding

IPC LA Discretionary Funding – LAs must use 30% of this fund to support the sector put in place other COVID-19 IPC measures. This might include supporting community and day services and other settings not covered, or to help boost the resilience and supply of the adult social care workforce.

Vaccines LA Discretionary Funding – LAs must use the remaining 30% of the fund to support staff in other care settings, including non-registered settings, and to provide additional support to providers to:

- ensuring that staff who need to attend work or another location for the purposes of being vaccinated for COVID-19 or flu are paid their usual wages to do so
- any costs associated with reaching a vaccination facility
- any reasonable administrative costs associated with organising COVID-19 or flu vaccinations where these were not being supported by other government funding streams

Testing LA Discretionary Funding – LAs must use their discretionary allocation to support the sector to operationally deliver testing. This must include:

- supported living and extra care settings eligible for LFTs (for eligibility see guidance on [testing service for extra care and supported living settings](#))
- care homes or other providers that are currently experiencing an outbreak to ensure that they have the resources needed to administer the LFTs and equipment that they need to increase lateral flow testing
- smaller homes who may face relatively higher costs compared to large homes and as such who may require additional support.
- **CQC-regulated community care providers** with the costs of PCR testing; including ensuring that staff who need to attend work or another location for the purposes of being tested for COVID-19 are paid their usual wages to do so, any costs associated with reaching a testing facility, and any reasonable administrative costs associated with organising and recording outcomes of COVID-19 tests.
- other parts of the sector using lateral flow tests as part of an adult social care testing regime that can demonstrate need for funding

Requirements

Providers will be expected to:

- Have completed the Capacity Tracker at least twice over 2 consecutive weeks
- Have committed to completing the Capacity Tracker at least once per week until the conclusion of the fund
- Have committed to providing the Local Authority with three reports ([Annex E](#) gives you an idea of what the LAs will be looking for) on spending relating to:
 - Spending up to 30 November 2021
 - Spending up to 31 January 2022
 - Spending up to 31 March 2022



- Have demonstrated that previous spending on iterations of the ICF was spent in line with previous grant conditions
- If in receipt of lateral flow tests, providers must also register results on the portal.

Annex A at the bottom of [this document](#) gives some examples of how the different parts of the fund can be used.

[Annex B: grant allocations](#) outlines how the grant allocations have been calculated.

[Annex B: table of allocations](#) outlines the allocations to each LA under the different funds.