

## Community Network report on the impacts of COVID-19

In August we published a [report](#) on the impacts of the COVID-19 pandemic on community health services, as part of our work with the NHS Confederation to support the Community Network. This report highlights the key role community service providers played in the initial COVID-19 response, not only discharging thousands of medically fit patients to free up vital hospital capacity but also flexing their service provision and redeploying staff to maintain essential care for patients. This prevented the NHS from being overwhelmed during the initial peak of COVID-19 cases.

This expansion and transformation of community services' capacity took place in the context of severe operational challenges. These included access to COVID-19 testing – which was initially focused on the acute sector – and personal protective equipment, which was particularly challenging for community service providers outside of the trust supply chain such as social enterprises. Providers also grappled with a lack of national demand and capacity modelling or tailored guidance for the community sector.

Despite these challenges, the community sector navigated the initial COVID-19 response with flexibility, resilience and expertise. As the health and care sector now focuses on recovering and resetting services, community providers are focused on embedding innovative practice and learning from the COVID-19 response. This includes the rapid uptake of digital technology, closer partnership with social care and primary care colleagues, and embedding discharge to assess and “home first” practices which were implemented from late March onwards. Community providers also continue to provide ongoing rehabilitation for people who were most seriously ill from the virus. This requires a focus on supportive discharge, integrated care planning and rehabilitative care in the community.

In this report we argue that the effectiveness of the NHS' recovery from COVID-19 is therefore dependent on the community sector receiving additional resources to manage these competing demands. This includes investing in home-based community pathways as well as community rehabilitation beds to allow services to meet local populations' COVID and non-COVID needs, at the same time as maintaining surge capacity and supporting the restart of elective care. It also includes protecting public health funding and putting the social care system on a sustainable footing as a priority, given the strain these underfunded services place on the community sector.

In addition, COVID-19 has exacerbated financial pressures on local authorities, causing some of them to look to retender public health and mental health contracts they hold with community providers; this is a damaging distraction during a global pandemic and we are calling for local authorities to pause all retendering of NHS contracts until the end of 2021/22.

The key points from the report are also set out in a [blog](#) from Andrew Ridley, chair of the Community Network and chief executive of Central London Community Healthcare NHS Trust. Andrew explains why the COVID-19 pandemic can be a catalyst for radically reimagining how we deliver health and care services in future. This will require the right funding, workforce and support from the national bodies, and we are working with the Department of Health and Social Care and HM Treasury to secure this in the government's comprehensive spending review this autumn.

Governors will be aware of the important role that community health services play in keeping people well at home for as long as possible. You may wish to ask your non-executive directors how they are assured about the impact of investment in local community health services and the benefits this has brought to both patients and the wider health and care system. You could reference the long term plan's commitment to deliver more care closer to home and query how your trust and wider system are delivering this ambition. And, you may also ask how expanding capacity in community services supported your organisation/system to respond to the initial wave of COVID-19, as well as restart services while COVID-19 pressures continue.

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