

EXECUTIVE BOARD COMMISSIONING SUB-COMMITTEE
10 SEPTEMBER 2014

Subject:	Hucknall House Decommissioning		
Corporate Director(s)/ Director(s):	Alison Michalska, Corporate Director Children and Adults, alison.michalska@nottinghamcity.gov.uk tel: 0115 8763132.		
Portfolio Holder(s):	Councillor Alex Norris, Portfolio Holder for Adults, Commissioning and Health.		
Report author and contact details:	Clare Gilbert, Commissioning Manager, 0115 8764811 Clare.gilbert@nottinghamcity.gov.uk		
Key Decision	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Subject to call-in <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Reasons: <input type="checkbox"/> Expenditure <input type="checkbox"/> Income <input type="checkbox"/> Savings of £1,000,000 or more taking account of the overall impact of the decision	<input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Capital		
Significant impact on communities living or working in two or more wards in the City	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Total value of the decision: This information is exempt. Please see exempt appendix 3.			
Wards affected: All	Date of consultation with Portfolio Holder(s): 20 August 2014		
Relevant Council Plan Strategic Priority:			
Cutting unemployment by a quarter	<input type="checkbox"/>		
Cut crime and anti-social behaviour	<input type="checkbox"/>		
Ensure more school leavers get a job, training or further education than any other City	<input type="checkbox"/>		
Your neighbourhood as clean as the City Centre	<input type="checkbox"/>		
Help keep your energy bills down	<input type="checkbox"/>		
Good access to public transport	<input type="checkbox"/>		
Nottingham has a good mix of housing	<input type="checkbox"/>		
Nottingham is a good place to do business, invest and create jobs	<input type="checkbox"/>		
Nottingham offers a wide range of leisure activities, parks and sporting events	<input type="checkbox"/>		
Support early intervention activities	<input checked="" type="checkbox"/>		
Deliver effective, value for money services to our citizens	<input checked="" type="checkbox"/>		
Summary of issues (including benefits to citizens/service users): Hucknall House Short Breaks Service is currently commissioned by Nottingham City Council from Nottinghamshire Healthcare NHS Trust (the Healthcare Trust) to provide short breaks to families caring for adults with learning disabilities who have complex needs. Due to the high cost of the service and concerns about the limitations of the service in meeting future need, it is proposed that the service is decommissioned and suitable alternative provision is identified.			
Exempt information: Appendix 3 to this report is exempt from publication under paragraph 3 of Schedule 12A to the Local Government Act 1972 because it contains information relating to financial values of existing contracts and, having regard to all the circumstances, the public interest in maintaining the exemption outweighs the public interest in disclosing the information. It is not in the public interest to disclose this information because making contract values of existing contracts, which are planned to be market tested, available to other organisations, would prejudice the open tender process.			
Recommendation(s):			
1. To decommission Hucknall House Short Breaks Service.			
2. To note that suitable alternative arrangements for respite will be found for all the current users of the Hucknall House Service as described in paragraph 5.5 below and will be the subject of a future Executive Board Commissioning Sub Committee report.			

1 REASONS FOR RECOMMENDATIONS

- 1.1 Following a review of respite provision it was identified that Hucknall House does not provide good value for money, does not meet the needs of future citizens and that alternative provision could be provided at a reduced cost. The Council are required to provide one year's notice to the Healthcare Trust of the intention to cease the contract.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 A further report will be tabled at Committee detailing future commissioning intentions.
- 2.2 In 2013 a review of overnight respite provision was undertaken. This refers to the provision of planned and emergency short breaks for carers in order to support carers in maintaining their carer role and in preventing carer breakdown. Overnight respite is usually provided within a residential service or through dedicated respite units.
- 2.3 The review included the Hucknall House Short Breaks Service. Hucknall House is a service provided by Nottinghamshire Healthcare NHS Trust. The commissioning responsibility for the service was transferred to Nottingham City Council from Nottingham PCT under the Valuing People Now transfer of social care provision in 2009 with the corresponding finances to fund this transfer. A year's notice is required to exit the service.
- 2.4 Hucknall House is a 5 bedded unit based at Highbury Hospital. It provides respite for individuals with autism and learning disability who exhibit challenging behaviour. Some individuals attending the unit have very high support needs. The key issues that emerged from the review were: the high cost of the service, the physical restrictions of the current accommodation, the staffing structure, and the perspective of carers of those utilising the service
- 2.5 Whilst the quality of the care provided is high, the physical structure of the unit is not appropriately configured to best support current users and does not have sufficient space or facilities to meet the physical and behavioural needs of young people transitioning from children's services.
- 2.6 The service is regularly used by one individual, whose behavioural needs are such that it is not deemed safe for any other residents to be supported at the same time. This means that approximately monthly, the unit is effectively closed from Friday afternoon until Monday morning in order to accommodate him. The service user does not stay overnight, so the unit is empty overnight on the days that he attends. This obviously has significant implications for the occupancy rates of the unit.
- 2.7 A recently published Care Quality Commission (CQC) Report commented; 'We saw that the environment was not comfortable, but institutional in appearance, which did not promote people's wellbeing when accessing a short stay service.' It concluded; 'The trust should consider improving the environment in Hucknall House.'
- 2.8 The unit is a nurse led service providing 24 hour nursing care. This is a very high staffing model for citizens who usually live at home without nursing care. The staffing structure only allows for three staff at anyone time which restricts the activities that can take place. This lack of activity was highlighted as an issue in the CQC report.

- 2.9 Parents and carers were consulted as part of the review and have subsequently been consulted more formerly in relation to the proposal to close the service. The response has been overwhelming; with most families attending the consultation events or making direct representation. The service is held in the highest possible regard and is seen as providing a safe haven for their loved ones as well as a service that carers have complete trust in. This is seen as crucial in providing a meaningful break. Any form of change is likely to cause severe distress to the citizens using the service. Lack of communication skills mean that they will not be able to understand why their service is changing and are likely to exhibit challenging behaviours in communicating this distress.
- 2.10 Throughout the process, discussions have been taking place with the Nottinghamshire Healthcare NHS Trust as to possible options and they jointly participated in the consultation process with parents and carers. Given the concerns in relation to quality and cost, parents and carers identified a number of proposals for consideration by the Trust. These included; increasing occupancy levels, extending the property and reducing the level of nursing staff.
- 2.11 The Nottinghamshire Healthcare NHS Trust have made it clear that any proposals involving the continued commissioning of the service including maintaining the status quo would require considerable financial investment to make the building fit for purpose. Based on previous work undertaken by the Trust, they have estimated that the cost of this work would be in excess of two million pounds. The Trust would look for some capital contribution from the City Council for this work and the rest of the cost would then be added to the price of the contract. This would significantly add to the cost per individual. Any potential economies of scale would not prevent an overall increase in cost. If the City Council required a reduction in the level of nursing staff, the Trust would seek recompense from the Council to meet redundancy costs.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

- 3.1 Do Nothing. Maintain the current service indefinitely. This would enable continued and valued provision for the citizens and families currently utilising the service. However, given the need to upgrade the building, this would involve significantly increased investment for a service that is substantially more costly than market equivalents. For this reason, this option was rejected.
- 3.2 Develop and increase the service. This would secure additional capacity and enable the service to be developed to meet future need. As above, this option is not economical as it would require very significant investment by the City Council and a large ongoing financial commitment. For this reason, this option was rejected.

4 FINANCIAL IMPLICATIONS (INCLUDING VALUE FOR MONEY/VAT)

- 4.1 See exempt appendix 3

5 RISK MANAGEMENT ISSUES (INCLUDING LEGAL IMPLICATIONS AND CRIME AND DISORDER ACT IMPLICATIONS)

- 5.1 The principle risks in relation to the proposed closure are: the impact for families caused by any change in provision, the level of disruption may lead to some families to seek permanent residential care for the person that they are caring for, the lack of suitable alternative provision, and the cost of alternative suitable provision.

- 5.2 If the decision is made to decommission Hucknall House, the Healthcare Trust will require a one year notice period. This will allow transitional arrangements to be made in a planned way. If appropriate placements can not be identified within the timescale, a short extension of the contract can be agreed with the Trust.
- 5.3 It is recognised that for many of the citizens impacted by the proposal and their families, the impact will be significant. Steps to mitigate the impact include: the allocation of a named social worker, meetings with carers, social workers and Hucknall House staff to identify suitable alternative provision, visits to new providers by family members, and access to the Carers First Service which provides carer support
- 5.4 Individualised packages of care will be developed for all service users currently attending Hucknall House. Where these can be sourced from existing provision, funding will be acquired through the relevant decision making processes.
- 5.5 Given the specific needs of those attending Hucknall House, it is likely that there will be insufficient appropriate provision in the community at the moment and that new provision will need to be procured. Discussions have already taken place with potential respite providers and there is scope for further development in the market. If the decision to decommission is agreed, then procurement recommendations can be confirmed. A future paper will be presented to the Executive Board Commissioning Sub Committee detailing procurement arrangements for additional services. Whilst one or two citizens may require more expensive provision than that provided by Hucknall House, social work and market intelligence suggest that most individuals will be accommodated at reduced costs.
- 5.6 Legal advice: The report does not raise any significant legal issues. Andrew James.

6 SOCIAL VALUE CONSIDERATIONS

- 6.1 As Hucknall House is a Nottingham based service, closing the service, may lead to some loss of local jobs. However, alternative provision will be locally sourced which will support the development of new posts elsewhere in the City.

7 REGARD TO THE NHS CONSTITUTION

- 7.1 The Nottinghamshire Healthcare NHS Trust have been involved at each stage of the process including consultation with parents and carers.

8 EQUALITY IMPACT ASSESSMENT (EIA)

- 8.1 An EIA is attached. Due regard has been given to the equality implications identified in the attached EIA.

9 LIST OF BACKGROUND PAPERS RELIED UPON IN WRITING THIS REPORT (NOT INCLUDING PUBLISHED DOCUMENTS OR CONFIDENTIAL OR EXEMPT INFORMATION)

- 9.1 Family and Carer Consultation.

10 PUBLISHED DOCUMENTS REFERRED TO IN THIS REPORT

- 10.1 Valuing People Now: transfer of the responsibility for the commissioning of social care for adults with a learning disability from the NHS to local government and transfer of the appropriate funding 2008, Department of Health

10.2 Care Quality Commission Nottinghamshire Healthcare NHS Trust Services for People with Learning Disability or Autism Quality Report July 2014

11 OTHER COLLEAGUES WHO HAVE PROVIDED INPUT

11.1 Steve Oakley Head of Quality and Efficiency
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