

17 May 2023

TEVIOT AND LIDDESDALE DAY SERVICE BUSINESS CASE

Report by Chris Myers, Chief Officer



1. PURPOSE AND SUMMARY

- 1.1. In September 2022 the decision in 2019 to close the Teviot Day Centre was found to be unlawful. This decision was accepted by Scottish Borders Council (SBC) and the IJB, and a process commenced to identify need and agree a preferred option for day services in this area, co-producing the preferred option with staff, service users and carers.
- 1.2. This Teviot and Liddesdale Task and Finish Group have overseen the process to develop the preferred solution, in compliance with legal requirements. This document presents the work undertaken and on the advice of the Strategic Planning Group, seeks approval to direct the implementation of the preferred solution.

2. RECOMMENDATIONS

- 2.1. **The Scottish Borders Health and Social Care Integration Joint Board is asked to:**
 - a) Approve the selection of the preferred option based on the definition of the required service and the qualitative and financial options appraisal carried out.
 - b) Request that the IJB approve the Business Case and the associated Direction.
 - c) Issue the Direction to Scottish Borders Council.

3. ALIGNMENT TO STRATEGIC OBJECTIVES AND WAYS OF WORKING

3.1. It is expected that the proposal will impact on the Health and Social Care Strategic Framework Objectives and Ways of Working below:

Alignment to our strategic objectives					
Rising to the workforce challenge	Improving access	Focusing on early intervention and prevention	Supporting unpaid carers	Improving our effectiveness and thinking differently to meet need with less	Reducing poverty and inequalities
	x	x	x		

Alignment to our ways of working					
People at the heart of everything we do	Good agile teamwork and ways of working – Team Borders approach	Delivering quality, sustainable, seamless services	Dignity and respect	Care and compassion	Inclusive co-productive and fair with openness, honesty and responsibility
x	x	x	x	x	x

4. INTEGRATION JOINT BOARD DIRECTION

4.1. A Direction is required to Scottish Borders Council (enclosed as Appendix 4).

5. BACKGROUND

5.1. Through 2017 and 2018 Scottish Borders Council (SBC) and the Scottish Borders Health and Social Care Integration Joint Board (IJB) sought to consider how best the needs of Day Service users could be met within the Scottish Borders. Through that process it was considered, at that point, that service users gained more from alternative community based services rather than the traditional Day Centre model.

5.2. As part of the IJB Strategic Commissioning Plan 2018-23, there was a commitment to “reimagine day services”, by “redesigning day services with a focus on early intervention and prevention”. This included the development of older people’s Local Area Coordination services across the Scottish Borders, the promotion of Direct Payments, and community supports such as Dementia Cafes and Social Centres.

5.3. In June 2019, the Council decided that it would decommission the then existing Day Centres. One of those centres was the Teviot Day Centre in Hawick.

5.4. In late 2021 a Petition was lodged in the Court of Session seeking a Declarator that the decision to close the Teviot Day Centre was unlawful. On 20 September 2022, Lady Carmichael issued her judgement that the decision to close the Teviot Day Centre was unlawful and she “reduced” that decision. That means, in effect, that the Council has not decided to close that Centre. The Court found that SBC had failed to properly undertake an Equality Impact Assessment and, also, that it had failed to properly consult with affected parties. It was noted by Lady Carmichael that the “fresh decision-making process will inevitably be one taken in the context of circumstances that differ from those which obtained in June 2019”.

5.5. In Council on 29 September 2022, SBC accepted the Court judgement with regard to Teviot Day Centre, and considered a further report detailing the next steps in its October meeting.

5.6. At its meeting on 16 November 2022 the IJB recognised its role to issue directions to support its Strategic Commissioning Plan, and acknowledged the omission of the IJB to appropriately commission and issue a direction in relation to day service transformation in 2019. An IJB Direction was issued to develop a proposal to inform the re-commissioning of the Teviot and Liddesdale day service in line with need in the locality.

- 5.7. As the Teviot Day Centre was no longer registered with the Care Inspectorate, nor were there any staff in place, the centre could not re-open its doors immediately.
- 5.8. In line with the Lady Carmichael judgement, further review of service user and carer needs in the Teviot and Liddesdale locality was required. This allowed for comprehensive engagement, consideration of options and a full Integrated Impact Assessment (IIA).
- 5.9. As agreed in the November 2022 Integration Joint Board, once work to confirm the required service provision in Teviot and Liddesdale has been completed, work is planned to be undertaken to ascertain the levels of potential need in Eildon, followed by Tweeddale, Berwickshire and Cheviot, based on the level of responses from the IJB unpaid carers survey about their need for buildings based day services, and the services available.

6. STRATEGIC CASE

6.1. Profile of the area

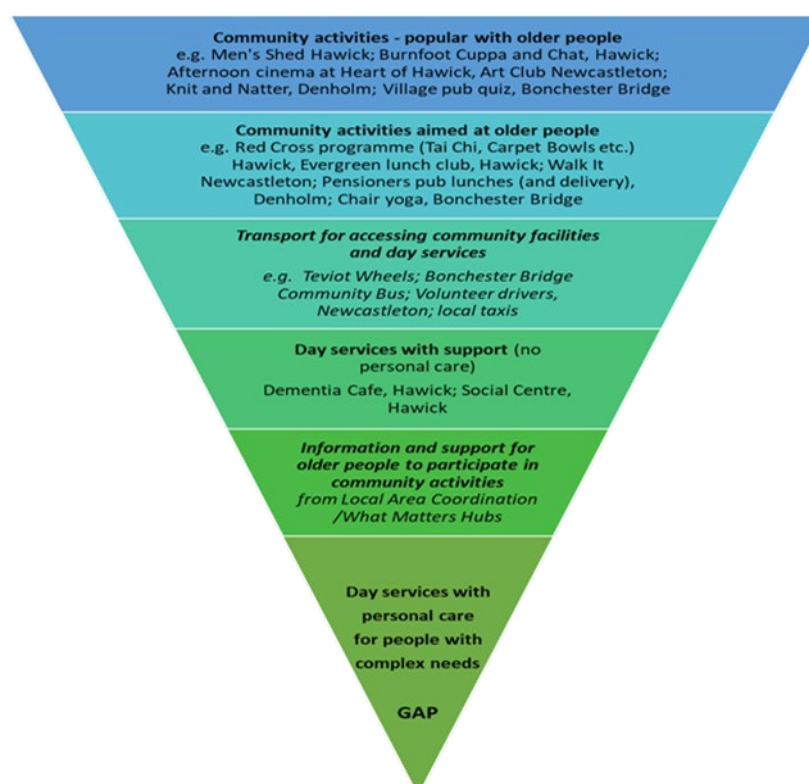
- Teviot and Liddesdale has the second-smallest land area and the smallest population of the five area partnerships in Scottish Borders. Its population in 2020 was 17,711.
- It has only one main town, Hawick, with a population of 13,653 in 2020. Over three quarters of the population of Teviot and Liddesdale lives in Hawick.
- Teviot and Liddesdale has only two other settlements of more than 500 people. These are Newcastleton (757) and Denholm (702).
- Teviot and Liddesdale has the most clustered population out of the five Localities, with only 14% (2,581 people in 2019) living outside these three main settlements.
- Teviot and Liddesdale has been slowly losing population for many years, although it has affected the locality unevenly. The biggest losses have been in Hawick, which lost 3.2% of its population between 2011 and 2019. However, Denholm bucked the trend in the same period, with an 8.6% increase in population. There was also an increase in Newcastleton of 2.6%.
- GP data shows that there are currently 120 patients awaiting post diagnostic support for dementia in the Teviot and Liddesdale Locality.

6.2. Previous service provision

A decision was made, as part of the Reimagining Day Service Review in June 2019 to move away from formal day services and move to a Local Area Coordination Model of support. Prior to this the Teviot Day Service, operated by SB Cares, provided regulated support for up to 12 people 5 days a week from 9am to 3.30pm. Transport and meals were provided at a cost to the service user. Service users were financially assessed for this charge and were referred to the service by Social Work and Health.

- ### 6.3. Communication and engagement.
- The National Development Team for Inclusion (NDTi) completed eight engagement sessions across the locality, gaining the views of 120 people on services that are currently in place and the gaps in services for older people or those with complex needs. A further survey was issued to a number of groups to gain specific information which has informed the Stage 2 IIA. 120 local people were involved in the engagement events that took place over seven weeks involving current service users, families and carers, staff, community councils and the public. Views were gained in Denholm, Bonchester Bridge, Newcastleton and Hawick. All areas, except Newcastleton, suggested that the most appropriate location for a day service is Hawick. Participants in Newcastleton highlighted the need for something within the village due to concerns relating to travelling from the area to Hawick.

- 6.4. To complement the engagement undertaken by NDTi, a short targeted survey was issued to groups which represent those with protected characteristics. The results of this survey have been added into the Stage 2 IIA along with the NDTi data, the information received from the Joint Needs Assessment and the Unpaid Carers survey to give a full picture of potential impact.
- 6.5. The Task and Finish Group worked in partnership with frontline health and social care / work professionals, and the Third Sector to:
- identify the potential number of adult service users and unpaid carers in the Teviot and Liddesdale locality and undertake a comprehensive IIA
 - contact the individuals identified to offer the opportunity to engage with a consultation to inform the service specification required for the service, noting the high-level guide offered by the IJB Carers work stream as a framework
 - ensure full engagement with staff, with service users, unpaid carers and partners (including but not exclusively review at the IJB Joint Staff Forum, Unpaid Carers work stream and Independent Care Sector Advisory Group).
- 6.6. Feedback from the engagement exercise focussed around eight questions covering current service/community group usage, gaps in service provision, accessing information, what would be most important to the individual in relation to a day care service, what support and activities they would like to see in day service provision and how they feel that a day service should interact with other services in the community.
- 6.7. The Unpaid Carers Survey demonstrated the importance of day services to enable respite for unpaid carers. Any day Service provision will take this into account and have a positive impact of unpaid carers in the Teviot and Liddesdale locality.
- 6.8. Feedback showed that there are a wide range of activities currently available to people but that transport was a barrier to access. Environmentally friendly transport options will need to be considered. Feedback also showed the lack of activities available for those who required support with personal care or those with complex needs. Dementia care and the need for day services to provide opportunities for social interaction and stimulation were highlighted as priorities.



7. OPTIONS

- 7.1. Service modelling. The engagement activity allowed the Task and Finish Group to:
- a) identify the options for providing this service
 - b) outline the scope of the service, and referral pathways.
- 7.2. The Care Inspectorate visited the Hawick Community Hospital and confirmed that with some minor adjustments it would be a suitable Day Service venue for 14 service users. The registration is for the service provider, rather than the commissioning organisation. Care Inspectorate registration can take up to six months.
- 7.3. Options identification. A market sounding exercise was completed. There were six notes of interest – one local, three national and two new providers although one national provider subsequently withdrew. There was only one formal submission. The proposal was dementia specific, which is non-negotiable. Feedback has been requested from organisations which expressed an interest in the service, but did not submit a full proposal. Adult Social Care also completed a submission.

8. APPRAISAL

- 8.1. Provider presentations (internal and external) took place on 27.04.23. The submissions resulted in the following options –
- 1) A dementia only day service provided by an external provider
 - 2) A day service provided by SBC Adult Social Care.
- 8.2. The options were appraised based on the following criteria, which were developed by the Task and Finish Group–
- Ability to offer a buildings based day care service
 - Ability to support clients with high level complex needs
 - Ability to provide support with personal care
 - Ability to support clients with mild to moderate needs
 - Ability to provide a support and advice hub / meeting centre resource for clients and carers
 - Ability to offer an enabling approach including meaningful activities and to combat isolation
 - Ability to offer respite to carers
 - Willingness to work in collaboration with another service
 - Ability to support 14 clients in any one session
 - Ability to operate a five or a seven day service
 - Ability to deliver a seven hour session
 - Ability to provide meals
 - Ability to reach to outlying rural communities
 - Provision of transport
 - Ability to work with a range of complex support needs
 - Cost.
- 8.3. During the course of the presentations we started to consider the possibility of a mixed model, with a blend of internal and external provision. This would not be a joint venture but two services working out of one facility. It was confirmed that it would be possible to gain registration for this model.

8.4. The summary of the service evaluation is noted below.

Criteria	Internal	External	Mixed
Service requirements	31.71	24.43	30.43
Operational delivery	11.43	5.43	5.71
Equalities	6.86	4.57	6.57
Subtotal	50.00	34.43	42.71

8.5. This part of the evaluation accounts for 70% of the overall score. It can be noted that the external submission scored around half the available points, this was largely due to the fact that this is a dementia only service and did not reflect the wider requirements of the day service. This could not be considered to be a viable option in its own right.

9. FINANCIAL EVALUATION

9.1. This part of the evaluation accounts for 30% of the overall score.

9.2. Prices were supplied for a five day service and a seven day service. The prices were not 100% comparable however sensitivity analysis has shown that prices would have to vary by more than £20k in order to affect the rank order of the options.

9.3. The summary of the financial evaluation is noted below. Price of the service delivery is not the only relevant factor. The number of clients per session varies significantly and will be related to the nature of the client group requiring more support. From a price perspective the internal provider performs best when taking into account value for money considerations.

9.4. The option of a mixed model was not something that was considered at the outset and despite scoring poorly on operational delivery criteria, presents a real option for consideration.

9.5. A mixed model ranks 2 and would be palatable from an affordability point of view. Whilst price of the external option appears favourable it should be noted that the number of clients is significantly less, which will reflect the nature of this service being dementia specific.

Price 30%		Internal	External	Mixed
	5 days	26.37	30.00	28.55
	7 days	26.52	30.00	28.61
Capacity / Value for money	clients x sessions	30.00	13.78	21.89

10. OVERALL EVALUATION OF OPTIONS

10.1. The summary of the evaluation is noted below.

Day Services - Teviot and Liddesdale Options Appraisal Summary

Criteria	Internal	External	Mixed
Service requirements	31.71	24.43	30.43
Operational delivery	11.43	5.43	5.71
Equality	6.86	4.57	6.57
Subtotal	50.00	34.43	42.71
Financial	26.37	30.00	28.55
Total	76.37	64.43	71.26
Rank	1	3	2

10.2. The internal option came out overall ranked 1.

11. IMPACTS

Community Health and Wellbeing Outcomes

11.1. It is expected that the proposal will impact on the National Health and Wellbeing Outcomes below:

N	Outcome description	Increase / Decrease / No impact
1	People are able to look after and improve their own health and wellbeing and live in good health for longer.	Increase
2	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	Increase
3	People who use health and social care services have positive experiences of those services, and have their dignity respected.	Increase
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Increase
5	Health and social care services contribute to reducing health inequalities.	Increase
6	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.	Increase
7	People who use health and social care services are safe from harm.	Increase
8	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	No Impact
9	Resources are used effectively and efficiently in the provision of health and social care services.	Increase

11.2. The Unpaid Carers Survey demonstrated that people from Teviot and Liddesdale expressed high value on the importance of Day Services to support service users and enable unpaid carers respite. Any Day Service provision will take this into account and have a positive impact on unpaid carers in the Teviot and Liddesdale Locality.

Financial impacts

11.3. Following the closure of the previous Day Service, budget was moved to fund other services within social care. Accordingly budget will be identified from within the funds delegated to social care services.

11.4. The total cost of this service is £173,465. Costs within this business case represent gross costs and do not take account of replacement costs, which will significantly offset the cost of the service.

Equality, Human Rights and Fairer Scotland Duty

11.5. The Stage 1 IIA was completed on 21.11.22 (Appendix 1). The Stage 2 IIA was completed on 27.04.23 (Appendix 2). The Stage 3 IIA is not completed as the work to review the provision in Newcastleton is ongoing, however this will be completed as part of the project closure and reported to the IJB Audit Committee.

Legislative considerations

11.6. The Task and Finish Group have provided explicit confirmation that appropriate engagement has taken place throughout this process, involving NDTi, service users, carers and the Third Sector in co-producing the specification and undertaking the options appraisal process. The full IIA process has been undertaken as required and assurance provided by the Equalities Lead. SPG members were satisfied of compliance with legislation in respect of consulting with communities and taking account of inequalities.

Climate Change and Sustainability

11.7. Transport has been highlighted as a requirement of a new service, so environmentally friendly transport options will need to be considered.

Risk and Mitigations

11.8. There is a risk relating to the costs of operating a Day Service - which would be mitigated by reductions in replacement care costs.

11.9. Challenges to recruitment, this will be offset by a reduction in replacement care.

12. CONSULTATION

Communities consulted

12.1. NDTi have carried out wide ranging public and targeted engagement in Denholm, Hawick, Newcastleton and Bonchester Bridge. Further engagement was also completed with specific

groups within the community including LGBT people, the Polish Community, The Hawick Stroke Club, Borders Older Peoples Partnership, Health in Mind, Dementia Best Practice Network, Mental Health Forum, See Hear Group and Ability Borders.

12.2. This work stream's approach is in line with the Integration Planning and Delivery Principles. The working group membership comprises of staff from across the Health and Social Care Partnership.

Integration Joint Board Officers consulted

12.3. The IJB Chief Officer and Director of Strategic Commissioning and Partnerships have been consulted, and all comments received have been incorporated into the final report. The IJB Chief Finance Officer has worked with colleagues to ensure the options appraisal has followed best practice and has provided advice on interpretation of the non-financial and financial evaluation.

12.4. In addition, consultation has occurred with our statutory operational partners at the:

- Strategic Planning Group
- HSCP Joint Executive
- Admin Policy Working Group

Approved by:

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Background Papers: [IJB Agenda pack 16.11.22](#), SPG Update paper 05.04.23

Previous Minute Reference: N/A

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