

Report of Chief Officer Access and Care

Report to Director of Adult Social Services

Date: 18 September 2014

Subject: Restructure of Care Ring and Telecare services to create a single service structure providing Installation, Maintenance and Repairs, Control Centre Telephone Response and Mobile Response.

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. Agreement was given by ASC Directorate Leadership Team in March 2013 for consultation to take place on proposals to create a single integrated service through restructuring the current Care Ring and Telecare services. These services support more than 15,000 people in Leeds including older people, adults with long term conditions and disabled children.
2. The proposed model allows the service to improve the service offer to include 24 hour 7 day a week installation and to extend the mobile response service to include physically assisting customers who have fallen but are not injured.
3. The proposed model delivers the enhanced service within the existing budget including a move from payment of car allowances to use of fleet vehicles.
4. This restructure is one of a range of changes to the delivery of assistive technology in Leeds which includes the opening in October 2014 of Assisted Living Leeds as a building where assistive technology services will be co located and coordinated. A high quality Tele Care service is key to demonstrating the ability of the health and social care partnership delivering Assistive Technology services through a pooled fund arrangement, to provide high quality and innovative services which will attract other partners into a second phase of Assisted Living Leeds.

Recommendations

5. The Director of Adult Social Services is recommended to approve the restructure of Care Ring and Telecare to create a single Tele Care service.
6. The Director of Adult Social Services is recommended to support the development of a Design and Cost Report to provide the service with fleet vehicles.
7. The decision will be implemented in October 2014 by the Head of Service Access and Care with responsibility for assistive technology services.

1 Purpose of this report

- 1.1 This report is to present a proposed restructure for Care Ring and Telecare services to create a single service "Tele Care", which will provide people in Leeds with a service that installs maintains and repairs remote monitoring equipment, and also provides a both a telephone control centre and a mobile response service for people without family or friends available to be their keyholder 24 hours a day.
- 1.2 The report explains the changes in how service budgets are currently being used to allow this restructured Tele Care service to provide a full range of service 24 hours a day, 365 days a week. This will improve outcomes for older people, adults with long term conditions and disabled children.

2 Background information

- 2.1 A report to Adult Social Care Directorate Leadership Team dated 28 March 2013 described the background to the Care Ring and Telecare services in Leeds and led to permission being granted to consult with staff and Trade Unions on a restructure to create a single integrated service.
- 2.2 Since Leeds City Council introduced the use of new technologies, known as "telecare" in 2006 there has been close working with the well established Care Ring pendant alarm service which led, in 2011/12 to the transfer of the Care Ring service from Environment and Neighbourhoods to Adult Social Care.
- 2.3 Since that transfer the two services have been jointly managed by the Care Ring Manager who reports to the Leeds Community Equipment and Telecare Service Manager. The latter is a jointly funded post across the NHS and Leeds City Council. More than 15,000 customers are now supported.
- 2.4 Much progress has been made in delivering the services in a co-ordinated way and to meet demand from the available resource, but some anomalies remain in the pay and grading of staff from the two services which this restructure will resolve.
- 2.5 There are also some elements of the service which are currently delivered by other partners which this restructure seeks to bring within the service to provide a more co-ordinated and extended service to customers.

- 2.6 The Mobile Response service, which provides a key holder and home visit response where the service user does not have a family member or friend to provide this is delivered by Community Safety in the Environment and Housing Directorate. This has been a successful partnership but the need to provide a response service which is able to physically assist people who have fallen but are uninjured, rather than call an ambulance, has led to the proposed model of bringing this role within the Tele Care service team.(para 3.7). The service anticipates averting up to 150 ambulance calls each month by this service development.
- 2.7 The maintenance and repair of equipment, including a 24 hour a day emergency call out with 4 hour response, is provided through a contract with an external provider which was put in place through a framework held by Northern Housing Consortium. The proposed restructure includes 24 hour availability of staff with the skills to install and maintain equipment (para 3.7) which means that this task can now be brought within the service for most equipment with the external contract remaining only for the hard wired equipment.
- 2.8 With staff working across 24 hours it will be more cost effective to deliver the service through fleet vehicles than to pay car allowances. This will also promote the Council, support the service identity and provide reassurance to customers.
- 2.9 This restructure is taking place alongside a range of other significant changes to assistive technology services in Leeds. From April 2014 the existing pooled fund arrangement for the purchase of community equipment has been extended to include all revenue budgets associated with LCES and Telecare to create a single pooled fund of £4.8m. Leeds City Council are the lead commissioner and the lead provider for this service. A new stock management and on line referral system (ELMS2) is currently being rolled out across Leeds Community Equipment Service (LCES) and Care Ring and Telecare. This is replacing the two separate IT systems that have been used for stock control. The standalone hardware and software that enables the remote monitoring of pendant alarms and telecare equipment is being upgraded to a system which will also allow the Tele Care service to monitor GPS systems rather than paying external suppliers to carry this out.
- 2.10 Tele Care will move in October 2014 from its current location to the newly refurbished building at Leeds Dock known as Assisted Living Leeds (ALL). LCES is relocating to this site along with the training facility currently at Greenhill in Bramley which provides training in moving and handling, community equipment and telecare to a wide range of health and social care assessors. The Blue Badge assessment team will relocate to ALL in November 2014. These services will be enhanced by a Single Point of Information for assistive technology and on site assessment facilities. A second phase of development at ALL is in its early stages with the intention to use remaining space, 500 sq m foot print, to bring external partners and external funding into ALL to create a truly innovative and universal offer.
- 2.11 The restructured Tele Care service will be a key element of delivering high quality co-ordinated assistive technology services from Assisted Living Leeds and very

important in demonstrating our abilities and innovation to potential partners and potential investors in the second phase of ALL.

3 Main issues

- 3.1 The current structures for Care Ring and Telecare are showing at appendix 1, with the proposed structure at appendix 2. There has been an overall increase in the structure from 33.84 fte to 39.3 fte. The most significant change has been in numbers of staff who install equipment. See paragraph 3.7 below. The funding has been created by bringing into this role tasks that were carried out elsewhere and bringing the funding for that back into the service. See section 4.
- 3.2 The new post of Service Delivery Manager Assisted Living Leeds (appendix 3) has been job evaluated as a JNC 45% post. This post will be created by deleting the existing PO5 Leeds Community Equipment Service Manager post. The post will be established as part of ASC's wider review of senior management arrangements with the intention that, including this post, there will be no overall increase in JNC grades in ASC and the mix will change to one of lower grades overall. The postholder of the current PO5 post has been paid an honoraria to PO6 since 2008 in respect of managing and developing the Telecare service. There has been no recognition of the transfer of Care Ring to this post holder. However, the more significant issue regarding the grading of this post is in relation to providing the leadership and strategic direction required for Assisted Living Leeds. In particular the post has the responsibility for ensuring the anticipated cost and quality benefits across the health and social care economy from the co-ordination of AT services are realised and that external partners and external funding is secured to deliver the second, highly innovative phase of ALL. The post is joint funded from the pooled budget and will be ring fenced to the current postholder, followed by job matching against eligible at risk employees in the Talent Pool before General Ring Fencing if necessary.
- 3.3 The Tele Care Operational Manager (appendix 4) has been job evaluated at PO4 which is consistent with the grade of the current Care Ring Manager. The Operational Manager will change from a Mon to Fri post to working the managers' rota (alongside the 4.0FTE team managers, which will provide management cover from 8am to 10pm to oversee all aspects of the service. The post will be ring fenced to the current postholder with a suitability meeting carried out to recognise the wider role of the post.
- 3.4 The Tele Care Team Manager post (appendix 5) has been evaluated at SO2. The 4 FTE posts are to be filled as 2x 37 hour, 2x 22 hour, and 1 x 30 hour posts. This arrangement is to meet the existing flexible working requirements of one team manager and will allow the managers' rota to be covered from 8am to 10pm. The posts will be initially ring fenced to a current SO2 and a current SO1 through a suitability interview and then job matched against eligible At Risk employees in the talent pool followed by General Ring Fencing if necessary.
- 3.5 A new role of Senior Response Centre Operator (appendix 6) has been designed to provide overnight support to Tele Care staff working between 10pm and 8am. This post has been evaluated at C3 and 2.4FTE posts will be filled by 3 people each working between 22 and 28.5 hours a week on a rota. These posts will be

recruited to through selection and will be ring fenced to all C1 staff in the existing service, which includes 2 current Care Ring Installers in addition to the current Response Centre staff. The ring fence includes staff who are on temporary contracts but employed for more than one year. This includes some staff who provide “as and when” relief cover. Any remaining posts will be then job matched against eligible At Risk employees in the talent pool followed by General Ring Fencing if necessary.

3.6 The Response Centre Operator role (appendix 7) remains at C1. There has been an overall increase of 1.5FTE posts on the structure so reduce the need for overtime and where there is an essential need to cover with overtime (eg sickness) this will be done at plain time. This staff group will continue to work either mornings or afternoon or night shifts but there have been some adjustments to shift times within that. The posts will be ring fenced to current C1s and depending on the outcome of the C3 recruitment will be filled by slotting or recruitment.

3.7 Including the new Senior Response Centre Operator roles, there has been an overall increase of 1.5FTE posts on the structure so as to reduce the need for overtime. Where there is an essential need to cover with overtime (eg sickness) this will be done at plain time.

3.8 A new role of Tele Care Installation and Response Technician (TIRT) evaluated at B3 (appendix 8). 17.7FTE posts will replace the existing structure 2.24 C1 Care Ring installers and 5 B1 Telecare installers. This increase allow most of the maintenance and repairs, and all the mobile response service to be brought in house, with this role being able to fulfil all three functions. Additionally 3 administrative posts are being deleted as the TIRT role includes the necessary appointment making and recording of data. This role has been carefully developed by listening to the requirements of other stakeholders, (eg; the ambulance service, the Leeds CCGs and those developing the model for integrated health and social care in Leeds) and also by looking at models in other local authorities and by consultation with staff and trade unions. This role will operate by linking back to managers and staff at the Response Centre at all times, particularly when working out of hours and when providing mobile response to an alert. A series of protocols to cover the types of events they may attend (eg a fall or an individual leaving their home) are being developed. The structure shows TIRT posts in 3 different rota patterns listed below. These have been developed to allow existing (and additional) staff to identify a working pattern that best fits with their personal responsibilities and lifestyle.

Monday to Friday – shift pattern to cover 8am to 6.30pm

Monday to Sunday – shift pattern 5 days out of 7 to cover 7am to 10pm

Monday to Sunday Nights – shift pattern 5 days out of 7 to cover 9.30pm to 7am

The 17.7FTE posts offer weekly hours between 15 and 37.

3.9 As these posts are replacing services provided by an external supplier and by Community Safety the arrangements for filling the posts are more complex.

- 3.10 Community Safety are undergoing their own restructure and there has been close working between the two services to maximise opportunities for staff in Community Safety who may be interested in moving to a role in the Tele Care service.
- 3.11 Recruitment to the TIRT posts will be by initial ring fencing to all eligible C1s and B1s across both teams. This includes B1 administrative staff whose posts are being reduced. Remaining vacancies will be job matched against eligible At Risk employees in the talent pool, which will include staff from Community Safety who have elected to place themselves in the Talent Pool. This will be followed by General Ring Fencing if necessary.
- 3.12 The Tele Care Stock Control Assistant post (appendix 9) will be ring fenced to all permanent B1s and recruited through suitability meeting. Any remaining posts will be then job matched against eligible At Risk employees in the talent pool followed by General Ring Fencing if necessary.
- 3.13 The Finance Assistant post (appendix 10) evaluated at B1 has a specific role to co-ordinate information on Tele Care customers starting and ending service with Financial Management. The introduction of charges for the monitoring of Tele Care is recent and involves large numbers of customers and high turnover. Ring fencing will be to all B1s and any remaining posts will be then job matched against eligible At Risk employees in the talent pool followed by General Ring Fencing if necessary.
- 3.14 The Tele Care Domestic Assistant post (appendix 11) is evaluated at A1 and as there are no eligible employees within the service the vacancy will be job matched against eligible At Risk employees in the talent pool followed by General Ring Fencing if necessary.
- 3.15 The proposal is that the service will be delivered using a fleet of 5 vans, 2 cars and 1 4x4 vehicle. This combination of vehicles allows for maximum flexibility in carrying equipment for installation, tools and lifting equipment, but also allows for mobile responders to use a car when needing to return people to their homes.
- 3.16 A Design and Cost report to purchase these vehicles is being developed for approval in September 2014. The vehicles will be purchased from within existing capital approvals and the running costs are incorporated into the existing budget. Staff will continue to use their own vehicles until fleet is delivered.

4 Corporate Considerations

4.1 Consultation and Engagement

- 4.1.1 Service managers and HR have consulted with TU representatives and staff throughout the process. Meetings specific to this restructure have been held with conveners on 13 December 2013, 15 January 2014, 24 March 2014, 7 April 2014, 19 May 2014 and 21 July 2014.

- 4.1.2 Meetings with staff have been held on 17 December 2013 and 21 January 2014. Conveners met with staff on 07 April 2014 and subsequently managers met with each staff group to discuss JDs and rota patterns in detail week beginning 16 April 2014.
- 4.1.3 Staff representatives have visited a service in the North East who operate the roles proposed in the restructure. Plans are in place to visit another service in South Yorkshire.
- 4.1.4 Community Safety have been key partners for consultation as this restructure has an impact on their staff. A concurrent restructure is taking place in Community Safety and close working has been carried out to ensure Community Safety staff can take up opportunities in the new service.
- 4.1.5 Training has been delivered for staff to help prepare for the new service particularly in relation to the new mobile responder role.
- 4.1.6 The restructure model has been informed by discussions with ASC commissioners, the CCGs, Yorkshire Ambulance Service.
- 4.1.7 The restructure model has been informed by the objectives and outcomes required from integrated health and social care services.

4.2 Equality and Diversity / Cohesion and Integration

- 4.2.1 An EDCI screening has been carried out and indicates that a full impact assessment is not required.

4.3 Council policies and City Priorities

4.3.2 The Care Ring and Telecare services contribute to the Vision for Leeds aim to make Leeds a city where people feel safe and to the priorities stated in the City Priority Plan 2011 -15 of supporting more people to live safely in their own homes and giving people choice and control over their health and social care services. The provision of a 24 hour a day 365 day a week link to a response centre allows vulnerable people to stay at home, and feel safe rather than needing to move to institutional accommodation. The merging of the two services will support the growth of the service from existing resources.

4.3.3 Adult Social Care priorities in the Council Business Plan 2011- 15 include

- Ensure more people with poor physical or mental health remain living at home or closer to home for longer
- Support adults whose circumstances make them vulnerable to live safe and independent lives
- People with social care needs receive co-ordinated and effective personalised support from local health and wellbeing agencies.

The restructure of Care Ring and Telecare service delivery into a single integrated service will support these priorities and allow delivery of service to more people from within existing resource.

4.4 Resources and value for money

4.4.1 The available staffing budget for 2014/15 is £1,265,820. This includes £284,000 which has been previously used to pay an external company to carry out maintenance and repair to non hard wired units, and £114,000 Supporting People money paid to Community Safety to provide a Mobile Response Service.

4.4.2 By changing the role of the installer to one of installation, repair, maintenance and mobile response we have been able to use this £398,000 to creating rotas to cover the 24 hour period. The most significant benefits of this are the ability to offer a response role that provides physical assistance to non injured people who have fallen and be able to offer installations 7 days a week, 24 hours a day including at short notice.

4.4.3 The new Tele Care structure costs £1,263,140 and is therefore within budget.(Appendix 12)

4.4.4 Night shift staff will primarily be available for Mobile Response and repairs and any down time will be used in tasks at the office and warehouse which is open 24 hours day as it accommodates the Response Centre.

4.4.5 The additional cost of the Service Delivery Manager post which is a joint NHS LCC post is £10,023 including on costs and this will be funded, separate to the Tele Care structure from the pooled budget.

4.4.6 Legal Implications, Access to Information and Call In

4.4.1 The restructure is a Significant Operational Decision and not subject to call in.

4.5 Risk Management

4.5.1 Risks to current staff have been managed by consultation on new rotas and working arrangements to ensure people's family responsibilities can be accommodated as far as reasonably possible.

4.5.2 Training has commenced to prepare staff for their new roles.

4.5.3 Where possible the restructure will not involve formal recruitment for existing staff in the service but there will be suitability interviews to ensure the new role is understood and that individual's competencies meet the requirement.

5 Conclusions

5.1 This restructure uses the existing budget for two associated services to create a single structure and to enhance the offer.

- 5.2 The new service, with its increased flexibility, will be able to make a significant contribution to the integrated health and social care model for Leeds.

6 Recommendations

- 6.1 The Director of Adult Social Services is recommended to approve the restructure of Care Ring and Telecare to create a single Tele Care service.
- 6.2 The Director of Adult Social Services is recommended to support the development of a Design and Cost Report to provide the service with fleet vehicles.
- 6.3 The decision will be implemented in October 2014 by the Head of Service Access and Care with responsibility for assistive technology services.

7 Background documents¹

- 7.1 Nil.

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.