

Cabinet Agenda



Date: Tuesday, 7 May 2019

Time: 4.00 pm

Venue: City Hall, College Green, Bristol, BS1 5TR

Distribution:

Cabinet Members: Mayor Marvin Rees, Nicola Beech, Craig Cheney, Asher Craig, Kye Dudd, Helen Godwin, Helen Holland, Anna Keen, Paul Smith and Steve Pearce

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Date: Friday, 26 April 2019



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Agenda

PART A - Standard items of business:

1. Welcome and Safety Information

Members of the public intending to attend the meeting are asked to please note that, in the interests of health, safety and security, bags may be searched on entry to the building. Everyone attending this meeting is also asked please to behave with due courtesy and to conduct themselves in a reasonable way.

Please note: if the alarm sounds during the meeting, everyone should please exit the building via the way they came in, via the main entrance lobby area, and then the front ramp. Please then assemble on the paved area in front of the building on College Green by the flag poles.

If the front entrance cannot be used, alternative exits are available via staircases 2 and 3 to the left and right of the Conference Hall. These exit to the rear of the building. The lifts are not to be used. Then please make your way to the assembly point at the front of the building. Please do not return to the building until instructed to do so by the fire warden(s).

2. Public Forum

Up to one hour is allowed for this item

Any member of the public or Councillor may participate in Public Forum. Petitions, statements and questions received by the deadlines below will be taken at the start of the agenda item to which they relate to.

Petitions and statements (must be about matters on the agenda):

- Members of the public and members of the council, provided they give notice in writing or by e-mail (and include their name, address, and 'details of the wording of the petition, and, in the case of a statement, a copy of the submission) by no later than 12 noon on the working day before the meeting, may present a petition or submit a statement to the Cabinet.
- One statement per member of the public and one statement per member of council shall be admissible.
- A maximum of one minute shall be allowed to present each petition and statement.
- The deadline for receipt of petitions and statements for the 7 May 2019



Cabinet is 12 noon on Friday 3 May 2019 (due to bank holiday). These should be sent, in writing or by e-mail to: Democratic Services, City Hall, College Green, Bristol, BS1 5TR
e-mail: democratic.services@bristol.gov.uk

Questions (must be about matters on the agenda):

- A question may be asked by a member of the public or a member of Council, provided they give notice in writing or by e-mail (and include their name and address) no later than 3 clear working days before the day of the meeting.
- Questions must identify the member of the Cabinet to whom they are put.
- A maximum of 2 written questions per person can be asked. At the meeting, a maximum of 2 supplementary questions may be asked. A supplementary question must arise directly out of the original question or reply.
- Replies to questions will be given verbally at the meeting. If a reply cannot be given at the meeting (including due to lack of time) or if written confirmation of the verbal reply is requested by the questioner, a written reply will be provided within 10 working days of the meeting.
- The deadline for receipt of questions for the 7 May 2019 Cabinet is 5.00 pm on Tuesday 30 April 2019 (due to bank holiday). These should be sent, in writing or by e-mail to: Democratic Services, City Hall, College Green, Bristol BS1 5TR. Democratic Services e-mail: democratic.services@bristol.gov.uk

When submitting a question or statement please indicate whether you are planning to attend the meeting to present your statement or receive a verbal reply to your question

3. Apologies for Absence

4. Declarations of Interest

To note any declarations of interest from the Mayor and Councillors. They are asked to indicate the relevant agenda item, the nature of the interest and in particular whether it is a **disclosable pecuniary interest**.

Any declarations of interest made at the meeting which is not on the register of interests should be notified to the Monitoring Officer for inclusion.



5. Matters referred to the Mayor for reconsideration by a scrutiny commission or by Full Council

(subject to a maximum of three items)

6. Reports from scrutiny commission

7. Chair's Business

To note any announcements from the Chair

PART B - Key Decisions

8. Better Lives At Home: Proposals and Progress Update

(Pages 6 - 52)

9. Technology Enabled Care Service - Better Lives Programme

(Pages 53 - 114)

10. Library Technology Upgrade

(Pages 115 - 120)

11. The Environmental Offences (Fixed Penalties) (England) Regulations 2017: Changes in Fixed Penalty Rates

(Pages 121 - 132)

12. Food and Beverage Contract for Event Spaces in Council Buildings

(Pages 133 - 147)

13. Building Practice Capital Programme Budget Allocation 2019/20

(Pages 148 - 154)

14. Hengrove Park - Proposed Relocation of St Bernadette's Rugby Club and 21st (Gladstone) Scout Group

To seek approval for the relocation of St Bernadette's Ruby Club to Fulford Road and further to seek approval to enter into an agreement with 21st Bristol (Gladstone) Scout Group to lease new facilities. Full report documentation to follow.



15. Hengrove Park - Delivery of New Housing Development

To seek approval for the disposal strategy for the regeneration of Hengrove Park.
Full report documentation to follow.





Decision Pathway – Report

PURPOSE: For reference

MEETING: Cabinet

DATE: 07 May 2019

TITLE	Better Lives at Home Proposals and Progress Update		
Ward(s)	All		
Author: Carol Watson		Job title: Head of Adult Care Commissioning	
Cabinet lead: Cllr Helen Holland Cllr Paul Smith		Executive Director lead: Jacqui Jensen	
Proposal origin: BCC Staff			
Decision maker: Cabinet Member			
Decision forum: Cabinet			
Purpose of Report: To provide an update on progress with Better Lives at Home a joint project across Adult Social Care and Housing, part of the Better Lives Programme. To seek further approvals to activity to deliver new aspects of this strategy, including: <ol style="list-style-type: none">Outline Better Lives Capital spend proposals amounting to £9.475m to develop Extra Care/ Inter-generational provision focused on older people, and supported living provision focused on young adults transitioning to Adult Care Services and/ or working age adults with care and support needs.Increase supported living provision for adults of working age, including purchasing accommodation through the open market which alongside a commissioned care and support contract will be prioritised for specific cohorts of adult care service users.The development of “First Home” specific accommodation for young people transitioning into adult hood.Piloting of Individual Service Funds (ISFs) to support young adults social care needs, requiring a variation to the Community Support Services (CSS) Open Framework contract.Securing assets (properties and or land) secured for delivering specialist affordable housing to be managed by Homes and Landlord Services, in close partnership with Adult Care.			
Evidence Base: 1.Background Better Lives at Home is a project within the Better Lives Programme in Adult Care and a partnership between Adult Care Commissioning and Housing Delivery Teams to increase the provision of quality specialist affordable homes. This provision is in line with “Better Lives” principles by supporting an individual to maximise their independence, and improve their life time outcomes also supports improved effective use of adult care budgets.. The project includes provision for older people, for adults of working age, and for young people entering adult care (transition). The specialist affordable homes will provide a positive alternative to residential care which is costly and for many people is a limit on independence. Residential care placements may be outside of the BCC authority, causing people to be placed away from both family and friends in the city, and close support and oversight from Adult Care. The project carries forward and builds on the progress and Capital budget assigned from the previous Bristol Retirement Living Project, as well as introducing work relating to adults of working age. The capital allocations for each work package are:			

	2019/20 £	2020/21 £	2021/22 £
Older People (ECH, Intergenerational Living)	450,000		1,290,000
Working Age Adults/ Preparing for Adulthood	4,340,000	1,375,000	1,300,000
Staffing costs	235,000	240,000	245,000
Total	5,025,000	1,615,000	2,835,000

2. Provision for Older People

There has been progress with Older Peoples provision, as set out within the October 2018 report . From early May an additional 100 units Extra Care Housing (ECH) units are now available for nomination from Adult Social Care across 2 sites. Whilst these and existing ECH sites continue to provide an increasing amount of quality provision for older people we have identified the need to offer other options. Work is currently underway to develop a Bristol Model including provision that supports intergenerational approaches, mixed communities and ensures that ECH provision is integrated in and contributes to the wider community. Engagement is being undertaken with people who have chosen to move into ECH as well as targeted engagement of communities who have not accessed this provision in order to understand how we can improve the offer for all older people who need it. We will focus in particular on BAME communities to ensure that we have appropriate offer and understand issues about access and relevance in future development. Planning and consultation is also underway regarding the development at the former Blake Centre site in Lockleaze, to include adult care nominated ECH provision as well as opportunities to develop a more intergenerational approach.

3. Provision for Adults of Working Age

This is a wide cohort of people with a range of needs. To deliver an increase in the provision of supported living we initially plan to go to the market to purchase ready built accommodation that we can source appropriate support for , whilst undertaking further planning and analysis to design and build specialist accommodation for people with more complex needs. We have identified that we require access to up to an additional 40 units a year in total for at least the next 3 years. These may be brought into use by BCC buying and/ or building ourselves or with partners, or through encouragement of providers to deliver additional provision directly. In order to work at speed we intend to purchase up to 14 units from the open market in 2019/20 . It is anticipated these purchases from the market will be made by the Executive Director of Growth and Regeneration, (in consultation with Cabinet Member for Housing). The internal support for the purchase of the properties will be shared with colleagues in Homes and Landlord Services. This will ensure that the council are driving best value through the co-ordination of resources to secure appropriate housing units from the market. Officers propose the properties will be held in the HRA and managed by Housing & Landlord Services with appropriate care and support services delivered alongside. Other provision will be expertly designed to enable people with complex needs to live as independently as possible. Engagement with providers of care and support as well as housing developers in being undertaken to develop ideas and encourage local providers to be involved in innovation.

It should be noted that the proposed arrangements will require :

- I. Asset and housing (landlord) management functions to the new tenants at these new homes purchased as part of Better Lives at Home.
- II. Recognition of nominations in perpetuity to Adult Social Care of these transferred assets, or to similar specialist housing acquired under the BLH programme.
- III. Relevant policy and practise changes, to be approved by the Executive Director of People where relating to social care, or the Executive Director of Growth and Regeneration, as necessary.

4. "First Home" Preparing for Adulthood Provision

Specific planning and engagement is underway to develop provision for young disabled people who will transition from Children's Services to Adult Care Services, in particular, for young people who have been in residential education provision out of Bristol and are not able to live with their family. This provision will be developed so that these young people can return to the City with appropriate support to maximise their independence in both the short

and longer term.

Three specific PFA supported living schemes are being developed locally by BCC. The Council is seeking to refurbish the Former Sea Mills Children Centre to include 5 self-contained homes for people with complex needs that include both learning difficulties and physical impairment. Two of the three schemes will be made available for young people with an autistic spectrum condition and/ or behaviour that challenges. The other two schemes are located in the north of the city and are; owned, funded from their own resources and recycled NHS England grant (transforming care programme) and have been developed (one site) by a Homes West Partner for suitable nominees from the Council who have learning difficulties, and or autism

Approaches to Care and Support and Individual Service Funds

Better Lives at Home is an enabler for the wider Adult Care Better Lives Programme. The aim is to provide better outcomes for people with care and support needs through cost effective provision that maximises independence. Individual Service Funds represent a way to enable individual service users to have more control and choice in how their outcomes are delivered, accessing a range of providers who can offer different expertise and aspects of personalisation. Unlike direct payments they do not require service users to have responsibility for managing the budget directly but are delivered through a contract with a lead provider. This approach could maximise the benefits for people of supported living.

Individual Service Funds are an approach to contracting that promotes more personalisation for someone who does not wish to manage a direct payment. They are set out in the Care Act, and local authorities are encouraged to develop this offer to support personalisation. We consider this approach particularly suitable for young adults transitioning, and intend to pilot this approach through a variation to our existing CSS contracts. This will be included in coproduction, and young people will be able to opt out of this approach if they wish.

We plan to pilot this Individual Services Fund approach as part of the First Home series of provision for young people transitioning, through a tender process. To pilot this approach within the time frame for this provision (October 2019) will involve a tender for provision, using the current Community Support Services (CSS) Framework and contract (involving young people and their families in that procurement exercise) , and then agreeing a variation on that contract Individual Service Funds require a different contracting approach to those we currently use under our Community Support Services (CSS) framework, as they reflect an agreement between a personal budget holder (in this case the young person) and a lead provider (in this case the Supported Living Provider) for the lead provider to sub contract, using the personal budget to other providers/ community organisations etc. according to the young person's agreed outcomes. The Local Authority has oversight of this to ensure that this leads to the right outcomes for the young person, and contract manages this. The procurement will be open to providers on the current CSS Framework, and we will be clear with the market that the opportunity will involve being part of the first Individual Service Fund Proof of Concept pilot in Bristol. The best use of technology to support independence is a key principle for Better Lives at Home, and in both older peoples provision and in provision for working age adults.

Cabinet Member / Officer Recommendations

That Cabinet:

1. Approve Better Lives Capital spend proposals up to £9.4m (including the use of prudential borrowing) to develop Extra Care/ Inter-generational provision focused on older people and supported living provision focused either on young adults transitioning to Adult Care Services or on working age adults with care and support needs.
2. Notes that the capital budget will cover all provision in recommendations 3 to 6, other than the associated provision of adult care support services, which will continue to be purchased through existing adult care budgets,
3. Delegate authority to the Executive Director of Growth and Regeneration, in consultation with the Director of Adult Care Services, within the approved budget to take all necessary steps to acquire the properties required to deliver the BLH programme detailed in the report.
4. Delegate authority to the Executive Director of People in consultation with the Executive Director of Growth and Regeneration, to take all necessary steps to procure and deliver (a) the refurbishment of the Former Sea Mills Children Centre, and (b) operation of the Centre and the delivery of all associated services.
5. Approve a contract variation for the Bristol City Council Community Support Services and authorise the Executive

Director of People to take the necessary steps to deliver support and care services based on Individual Service Funds for young people moving into First Home provision as part of Better Lives at Home.

6. To agree that new assets (properties and / or land) secured for delivering specialist affordable housing through the Better Lives at Home Project will be held in the HRA and be managed by Homes and Landlord Services.

Corporate Strategy alignment:

1. “Empowering and Caring” Better Lives at Home provides increased access to homes with support and care for both older people, and working age adults with care and support needs. It contributes to improving the range of social care interventions that support independence, and reducing the numbers of people receiving institutional care.
2. “Fair and Inclusive”. The Project is a partnership between Adult Care and Housing Delivery, contributing also to the additional 800affordable homes.
3. “Wellbeing”: addresses the link between inappropriate housing for people with support needs and their health and wellbeing, in particular those arising from mental health needs.

City Benefits: These proposals will benefit the city by establishing: specialist provision for: young people transitioning into adulthood, working age adults and older people. This will enable individuals to have their care needs met while retaining their independence and avoiding costly and out of area residential care placements. Additionally, additional older people’s provision will help to ease pressure on local housing markets by freeing up some under-occupied properties.

Consultation Details: A range of consultation and engagement is planned for each aspect of the project, both generic in terms of provider and potential service user, and site specific. Specific consultation and engagement is already underway for developments in Lockleaze (ECH/ Intergenerational) and Sea Mills (First Home Preparing for Adulthood provision). Targeted general engagement is underway with Older People in relation to the ECH/ Intergenerational offer more generally. .

Revenue Cost		Source of Revenue Funding	
Capital Cost	£9.475m	Source of Capital Funding	P15086-1001 Better Lives at Home £9.348m and P14322-1001 Extra Care Housing £0.127m-prudential borrowing
One off cost <input checked="" type="checkbox"/> Ongoing cost <input type="checkbox"/>		Saving Proposal <input type="checkbox"/> Income generation proposal <input type="checkbox"/>	

1. Finance Advice: The details set out in this report describe the delivery of the Better Lives at Home project, a critical part of how BCC will invest in long term accommodation solutions to bring about improvements in the way adults of all ages are supported and at the same time deliver savings in the costs of meeting their support needs. In February 2019 the 2019/20 budget report approved an additional £2m to the existing £7.348m investment making a total of £9.348m available to invest in accommodation solutions. In addition there is £0.127m available from an underspend in the Extra Care Housing Capital Budget and there will be an opportunity to use available funding from the Disabled Facilities Grant to increase the amount of funding available beyond the £9.475m. The table overleaf sets out the proposed carry forward and reprofiled budget.

		Estimated profile of capital spend by year				
		2018/19 £	2019/20 £	2020/21 £	2021/22 £	TOTAL £
PE07 - Extra Care Housing	Approved Budget (held on ABW)	1,623,628				1,623,628
	Forecast Spend 2018/19 only (at time of writing report)	1,496,628				
	Budget SLIPPAGE VALUE across years	-127,000	127,000			0
	Proposed new budget profile to be approved	1,496,628	127,000			1,623,628
PE06B - Better Lives at Home	Approved Budget (held on ABW)	348,000	6,000,000	3,000,000		9,348,000
	Actual Spend Outturn 2018/19 only	0				
	Budget SLIPPAGE VALUE across years	-348,000	348,000			0
	Proposed new budget profile to be approved	0	4,898,000	1,615,000	2,835,000	9,348,000
Proposed Better Lives at Home Capital Budget			5,025,000	1,615,000	2,835,000	9,475,000

Details of savings that will accrue from this proposed investment are being developed within a broader piece of work that is examining in detail the costs of residential placements compared to placements in a community setting that will contribute to the overall savings target included in the Medium Term Financial plan as set out in the budget report agreed in February 2019.

Finance Business Partner: Neil Sinclair, 17th April 2019

2. Legal Advice:

Procurement of all works and services contracts in connection with the Sea Mills refurbishment will need to comply with the appropriate Procurement Regulations and Council Rules. Care will need to be taken to ensure any variations in the contracts(s) under the CSS framework, and/or to the framework itself, do not undermine its operation. Consideration will need to be given to the nature and extent of Consultation required as the project progresses, and care taken to ensure that consultation arrangement comply with best practice. The outcome of consultation should be taken in to consideration when taking further decisions.

The Public Sector Equality duty requires the decision maker to consider the need to promote equality for persons with “protected characteristics” and to have due regard to the need to i) eliminate discrimination, harassment, and victimisation; ii) advance equality of opportunity; and iii) foster good relations between persons who share a relevant protected characteristic and those who do not share it. The Equalities Impact Check/Assessment is designed to assess whether there are any barriers in place that may prevent people with a protected characteristic using a service or benefiting from a policy. The decision maker must take into consideration the information in the assessment before taking the decision. A decision can be made where there is a negative impact if it is clear that it is necessary, it is not possible to reduce or remove the negative impact by looking at alternatives and the means by which the aim of the decision is being implemented is both necessary and appropriate.

Legal Team Leader: Eric Andrews, Team Leader, Legal Services 4.4.19

3. Implications on IT: As an update report, there are no direct IT implications arising from this report. Any IT requirements arising from the programme are being addressed via the relevant governance processes.

IT Team Leader: Ian Gale, 08/03/19

4. HR Advice: Currently there will be no HR implications if this report is agreed as the request is just to secure a budget for staffing going forward. Once it's agreed specific proposals will be drawn up and consulted on using our usual processes and policies.

HR Partner: Lorna Laing, 8th March 2019.

Background Documents:

- Care Act 2014
- Better Lives At Home: Care and Support in new Extra Care Housing. Cabinet Paper October 2018

- Children and Families Act 2014
- Joint Strategic Needs Assessment of health and wellbeing in Bristol
- One City Plan (published 11 January 2019)
- Adult Social Care Strategic Plan 2016 – 2020
- Part II of the Housing Act 1985 – Housing Revenue Account (HRA)
- Housing Act 1988 – Tenancies
- Housing and Regeneration Act 2008 -Tenancies and HRA

EDM Sign-off	Jacqui Jensen	13 March 19
Cabinet Member sign-off	Cllr Helen Holland and Cllr Paul Smith	25 March 19
For Key Decisions - Mayor's Office sign-off	Mayor's Office	8 April 19

Appendix A – Further essential background / detail on the proposal	YES
Appendix B – Details of consultation carried out - internal and external	YES
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment	YES
Appendix E – Equalities screening / impact assessment of proposal	YES
Appendix F – Eco-impact screening/ impact assessment of proposal	YES
Appendix G – Financial Advice	NO
Appendix H – Legal Advice	NO
Appendix I – Exempt Information	NO
Appendix J – HR advice	NO
Appendix K – ICT	NO

Better Lives at Home Appendix A: Further Information Progress and Project Plans

1. Better Lives at Home

i. Aims of Project

As presented to Cabinet in October Better Lives at Home is a Project set up under the Better Lives programme in Adult Care. It aims to deliver a step change in the development, provision and effectiveness of supported accommodation within the community as a real alternative to residential care for older and/ or vulnerable working age adults with care or support needs. The Project involves an active and positive partnership within the Council between Adult Social Care and Housing Development. There is also a much wider connotation for this work. Whilst homes require buildings delivering a real change and broader outcomes for people from independent living, (whether that's about their social networks, being in employment, or being able to feel happy and content in their locality) requires more. Our vision is for people to live better lives within communities that are inclusive and supportive, and discussions are beginning relating to this aspect.

The Project focuses on:

A. Support in Specialist Housing –

- Support in / provision of a housing setting specifically designed to meet needs/ support independence.
- As part of a pathway to more generic housing, or to meet specific complex needs
 - Work will include additional Extra Care Housing and development new Supported Living provision
 - Specific design to meet care/ support models.
 - Support models to include step up/ step down, and skills development
- Includes Extra Care Housing for older people

B. Support in Generic Housing

- Support to enable people to remain in, or move to, generic housing (private ownership, private rental accommodation, general social rental housing)
- Key design features:
 - An ability to “step up” and “step down” support dependent on need
 - Must enable the person to remain in their home as long as appropriate.
- Most of this work will focus on working age adults (with learning difficulties, mental health, autism or Physical/ sensory needs.)
- Also includes options for older people to enable them to remain in generic housing (e.g. intergenerational work), and accommodation options such as Shared Lives.

ii. Financial Context

The Better Lives Programme has identified that in Bristol we are placing too many people in residential care provision, and paying too high a cost for that provision. Unless it is the right option for a person, residential care reduces independence and outcomes and is generally more costly than

supported living or ECH. Delivering Better Lives at Home will support reduced costs in adult care as well as improving independence and wellbeing.

2. Legislative Background

The Care Act 2014 provides the legal framework for adult social care and places a duty on council's to promote people's wellbeing when carrying out any of their care and support functions. The Wellbeing Principle is a broad concept but includes suitability of living accommodation in meeting care and support needs of vulnerable people. The importance of housing is recognised in the Act and referred to throughout the statutory guidance.

The Care Act 2014 also sets out that the Local Authority must develop a clear approach to prevention. The role of housing in prevention is clearly acknowledged, for example the contribution that supported housing can make to helping people develop their capacity to live independently in the community.

An information and advice duty is imparted on the local authority to establish and maintain an information and advice service which must include information on housing, including the types of housing options available. To increase the available options, Local Authorities are expected to create a vibrant, high quality, diverse and sustainable market.

A key goal of the care act is to promote integrated care and support that is person centred. In support of this, councils must aim to join up services provided by the national health services and health related services. Housing has been defined as a health related service within the Act. At the level of the individual, the council should consider housing and suitability of living accommodation when looking at a person's wellbeing and needs.

Section 25 of the Children and Families Act 2014 also places a duty on local authorities that they should ensure integration between educational provision and training provision, health and social care provision, where this would promote wellbeing and improve the quality of provision for disabled young people and those with SEN. They require local authorities to keep local provision for children and young people with SEN and disabilities under review, to co-operate with their partners to plan and commission provision for those children and young people and publish clear information on services they expect to be available.

Local authorities must set out in the Local Offer the support available to help children and young people with SEN or disabilities move into adulthood. Support should reflect evidence of what works in achieving good outcomes and must include information about preparing for and finding employment, finding somewhere to live, and participating in the community.

Finding somewhere to live should include information about:

- finding accommodation, including information about different housing options.
- how to apply for accommodation and where to get financial and other support (such as a personal assistant, assistive technology or modifications to a home).
- advice, for people eligible for social care or health support, about what support is available to help them personally.
- opportunities and support to learn the skills needed to live in supported, semi-supported or independent accommodation.

3. Update on Progress in delivering Housing solutions for Older People

Since the Better Lives at Home Cabinet Paper in October 2018, the expected two new Extra Care Housing Schemes have opened. Stoke Gifford Retirement Village (SGRV) accepted their first residents in November 2018 and Haberfield House in March 2019. These have provided 100 new ECH Flat nominations for Adult Social Care. As of 25th February 2019, we have filled 45 of the 60 nominations for SGRV. Of these, 6 older people moved directly from a residential or nursing setting with an approximate saving to the council of £150K per annum.

The development at Redhouse is making progress and contractors are on site. This will deliver an additional 60 flats to the existing Waverly Garden ECH and will alleviate some of the demand pressures for ECH in that area.

We have also made progress in completing our needs analysis and developing our vision for ECH and intergenerational living at the site in Lockleaze. We will develop a scheme which is fully integrated with the other developments on Gainsborough Square and we will consult with local people, councillors and providers to develop this model further to create a site that works well for the whole community. We expect to publish a tender opportunity later in 2019.

Similarly, we are considering the options for an intergenerational site at the old New Fosseyway School site in Hengrove to potentially include a mixture of older people housing, housing for keyworkers, housing for adults of working age who have eligible care needs and some general needs housing. We will be consulting with a range of stakeholders to inform our vision.

During March 2019 we are running a number of consultation events with older people to ask them about their experiences, views, needs and housing choices. We will have a stream of consultation events particularly focused on understanding the needs and choices of people from a Black and Minority Ethnic background. This information will influence our design and approach to Extra Care Housing going forward.

We have updated our approach to brokering extra care housing placements and identified some resource to ensure that we are placing the right people in the right place at the right time. Over the next few months we will work with our existing providers of ECH to update our commissioning model for Extra Care Housing; particularly our approach to floating support and night time care. We will ensure the ECH schemes can be places which provide a real alternative to residential care, whilst also maintaining a mixed community of care which help people maintain their independence for longer, avoiding nursing care.

4. Update on Progress in delivering Housing Solutions for Disabled Adults of Working Age

i. Needs Analysis

We are part way through our analysis of the needs of working age adults who are eligible for care and support under the Care Act., This work is linked with that undertaken by the wider Better Lives programme on Adults of Working Age and Preparing for Adulthood. We are investigating established issues and needs and developing plans to address those whilst taking more time to build up a detailed picture of the more complex needs to inform build/ purchase of property and commissioned support.

Our initial needs assessment shows we require at least 40 more Units in use a year for people aged 18-55/ 65 for the next 3 years.

Currently Adult Care experience difficulty in finding placements for service users with low to medium level care needs and it is particularly difficult for those who are assessed as being of a higher risk. Other factors being identified include managing risk in terms of safeguarding for people with complex needs (and approaches to that) and business models underpinning current approaches to Supported Living. For a number of reasons, some people are not moving into more independent

provision when they no longer need more intensive support or achieving the outcomes that were hoped for. To begin to address these issues, we are currently undertaking the following:

iii. Developing the Market

We are opening our channels of communication with the market through initiatives such as Open Doors (1:1 session with commissioners) and larger provider events to convey clearer information of:

- what units (Homes) will be needed for whom in the future
- to stimulate a market which can meet the demand
- to co-develop solutions to deliver value for money outcomes.

Furthermore, there is a perception that Bristol City Council has inflexible housing benefit rules. These rules were in place to prevent fraud or excessive housing benefit from being claimed. A protocol has been agreed whereby details of the providers (who will be in receipt of rent) the council are working with and the proposed rent structure will be sent to the housing benefit team. There is a Specified Managed rent for properties that are being offered to those with LD/ MH and other social care needs. Provided this is reasonable it is likely to be accepted. This should stimulate the supported accommodation market and allay concerns that the market has about investing in Bristol.

iv. Reinvigoration of the Community Supported Accommodation Scheme.

This scheme allows people with Learning Difficulties and/ or Mental Health issues who are either currently in or at risk of moving to residential care to be fast tracked into Bristol City Council's General Needs Housing. Our established Community Support Services framework is utilised to procure a suitable floating support provider to assist them with the process of bidding on suitable properties and provides any ongoing support required. We are looking to make more properties available for this cohort by:

- Using capital monies to purchase from the market and bring additional properties into the Housing Stock, 30 units for supported Living 2019/20 and 20/21 (see section?)
- Developing the market for and Commissioning a range of floating support mechanisms to support different cohorts of people.

v. Developing Models and Pathway to ensure Supported Living available to/ successful for people with more complex needs.

The issues we need to address relate to style, design and availability of suitable properties as well as getting the best service models for floating support that provides as personal an approach as possible.

Work is beginning including development of:

- Further needs analysis and engagement in relation to people with complex autistic spectrum conditions.
- Models for better transitional support from one living setting (e.g. residential care) to the new supported living to support the successful placement of service users and help prevent breakdown of such placement
- Developing models to improve risk management and risk sharing: supporting providers to take people with more complex needs to prevent the usage of residential or other less appropriate provision.

- Developing clear pathways to support people to move wherever possible through specialist supported housing with support into more generic housing. In particular to develop models of long term “home” for people, where the support they receive steps up and down rather than people being disrupted by moving.
- Developing short-term placements to support some people transition from one setting to another in very specific circumstances in response to a demand identified by the Immediate Response Team.
- Developing a Specification for the design, build and locations of new units for groups of people identified by the Needs Analysis as benefiting from specific design.

5. Provision for Young People transitioning into Adulthood: “First Home”

i. Background to the “First Home” Project

For young disabled people transitioning into adulthood, and their families, the run up into adulthood can be an anxious time. A small but significant group of young people with SEND (Special Education Needs and Disability) are educated outside of the city in residential school. Other young people are living at home but families are struggling to meet needs of all family members as young people go through puberty and young adulthood with significant care needs or behaviour that is sometimes challenging to support. Historically there has been insufficient supported living for young people with the right level of support to keep young people in/ return them to Bristol, leading to dependence on residential care and / or out of area placements. We are developing a strategy to enable all young people (except those few for whom there is an explicit need for specialist nursing care or for them to be away from Bristol) to be offered an option for appropriate supported living in Bristol.

Phase one of this strategy will involve the development of two purpose-built supported living schemes. A suitable site has been identified in Sea Mills scheme which will provide 5 self-contained units for people with complex needs that include both learning difficulties and physical impairment. A second scheme will be made available for young people with an autism diagnosis or a similar condition or presentations and we are currently reviewing potential models for delivery.

These schemes will be offered as one of three options to young people who are currently placed in residential schools (many of which out of area) and who imminently require a first home with commissioned care and support by the end of this year.

ii. Approaches to delivering Support and Care for young Adults in Supported Living: Piloting Individual Service Funds (ISF)

As highlighted in the Mayor’s City Plan, we want to promote more choice and control and personalisation by working differently with local service users and provider partners to offer more flexible support and a choice of location of housing. This is particularly important for young people, who may need a range of different expert inputs as well as support to become engaged in their local community, build friendships etc. Young people with complex needs may benefit from a range of inputs to address some of the challenges they face.

An Individual Service Fund (ISF) is where a provider, rather than the Council or the service user, manages the Service User's personal budget. A personal budget is an amount of money set aside to meet someone's needs as assessed under the Care Act . Personal budgets can be used flexibly to meet agreed outcomes. With an ISF, the contracted provider holds this budget and, according to the Service User's choice and agreed outcomes, uses it in so they can access other provision, or be part of community activities, or make use of specialist providers (e.g. job coaches, or a particular activity) This makes the personal budget transparent to the individual or family and helps provide flexible support by making the organisation accountable to the person. Local Authorities are being encouraged to take this approach up nationally to support the personalisation agenda.

In recent years an increasing number of people have used direct payments to manage their own support, while others have received council managed services. Direct payments, have high levels of choice and control, plus high levels of responsibility; and council managed services have low levels of choice and control, and responsibility remains with the council.

ISF is an alternative offer that may be better suited to young people entering adult services who want flexible support, but without all the responsibilities that come with managing a direct payment. ISFs are also seen as a way to encourage good value outcomes, helps manage our budgets by making best use of personalised provision so we can build in incentives to develop independence and People are encouraged to release savings by being creative and developing their skills, networks or community involvement. As part of the pilot we will be introducing a step down in care and support with a reduced budget envelope each year.

ISFs are new to Bristol so we want to carry out a targeted "Proof of Concept" pilot to test how this works and how we make this work best for people who use services, providers and social work teams.

We are in the process of identifying young people to take up places in the three housing schemes described above and we would like to pilot ISF amongst this cohort. The length of the contract is proposed to be 2+1+1 years, (so that depending on outcomes of pilot we can extend and/ or renegotiate contracts). In order to develop an approach to Individual Service Funds, we intend to build in ISF approaches to our existing Community Support Service (CSS) contract. This will enable us to use a variation on (make an agreed change to) our existing contract where we want an ISF approach. It means we can set out an agreement with the lead provider about outcomes and expectations. Young people and their families, as part of the coproduction work will be involved in plans about how ISFs will work, and will have the option to have a direct payment, an Individual Service Plan, or a standard contracted support plan. Using a variation in this way means that we can ask for bids from providers currently on our Community Support Service Framework (providers who have met various quality checks and who have agreed to our terms and conditions) and trial ISFs with the successful bidders.

We have consulted with providers on this approach at a Market Launch for Better Lives at Home in November. The outcomes of that discussion were noted as a positive idea. The fact that service users would be afforded more choice than the current system allows (often only one bid to an opportunity) was seen as beneficial. The service user can have an informed choice of what they want. The role of Capacity assessments with ISFs will need to be explored. This is to ensure that people are able to make the choices involved in this and are properly supported.

To take forward this work:

- A half day event is being set up for our care management colleagues so that our approach to support planning and reviewing compliments this approach
- We are working with young people and their families to co- design the supported living schemes and we have invited young people and their families to take part in the mini tender. We have not discussed in depth the principles of ISF , but will ensure that young people and their families are kept informed and have an option to opt out of the ISF pilot
- If the pilot is successful we will consult with a wider audience before roll out

iii. Engagement processes with Young People and their Families

Adult Social Care, and Housing, are committed to co-producing the building specifications and the care and support offer with young people and their families. To date, we have hosted an event in partnership with WECIL and as a result of this agreed individual and joint monthly meetings moving forward with young people and their families to co design and develop the housing with support on an ongoing basis. We have also initiated contact with BASS (Bristol Autism Support Service) to work alongside us to co design the offer for young people with autism.

6. Open Market Purchase and Approach to Management of Provision

If approved it is proposed that the Better Lives at Home Project Team will procure an 'Agent' to act on our behalf to secure up to 14 units from the open market in 19/20 and further 16 units in 20/21. Early discussions with colleagues in Homes and Landlord Services have indicated that there is a potential to share resources to co-ordinate the market approach and potential appointment of agent who would act on behalf of both Better Lives at Home Project and Homes and Landlord Services. This would enable both areas of work to secure the required units without directly competing and increasing the demand and cost of the market housing. A separate cabinet report is being presented by Sarah Spicer that presents this approach in more detail.

It is proposed that future assets secured by Better Lives at Home through internal declared surplus route, units purchased from the market, or from partners, are transferred to Housing & Landlord Services. The former Sea Mills Children's Centre is currently held within the General Fund and will need to be transferred to the Housing Revenue Account (HRA) which is a separate ring-fenced account and covers all activities for BCC as the landlord of circa 28,500 housing stock.

The management of the homes (assets) and tenancies (landlord function) can be provided by BCC Homes & Landlord Services, who already successfully manage housing and tenancies and are well established to manage the new assets from within the Better Lives at Home project.

Currently there are no other available alternatives within BCC, as Gorman Homes (The Housing Company) primary function is to work on joint venture basis on large developments in excess of 100 units, and is not concerned with property management and maintenance. The 'The Housing Company-2' which is in its conceptual stages is looking at a viable housing asset and management function, however this will not happen in time for the Sea Mills project or other pipeline assets currently been worked up.

There are clear benefits from Homes & Landlord Services managing these units.

1. Council has full autonomy of its asset and accountability to the tenants.

2. Specialist housing at social rent levels.
3. Secure tenancy for individuals.
4. Develop housing policies directly with Better Lives at Home project team for those individuals that will reside in this specialist housing. This will help us ensure the right support models avoid vulnerable people losing tenancies at crises points.

7. Capital Budgets and Spend on Property Purchase

Through discussions with providers and developers we are working to increase the provision of supported living available to Bristol citizens without BCC needing to provide capital assets or capital funding. However, our initial needs analysis is telling us that there are groups of people with complex needs for whom we need to plan design and build to meet specific access spatial and accommodation needs and people whose needs can be met in more generic housing of which we do not have sufficient in right places.

The Capital Budget for BLAH is currently £9.475m, and comprises of agreed funding for the Bristol Lives at Home programme of £9.348m and funding remaining from the Extra Care Home capital budget available in 19/20 of £0.127m. Staffing costs have been added in order to enable speedy use of capital in delivering project outcomes.

Planned Use of Capital budget and the point at which the outcome from that expenditure (nb people living in units) is set out in Appendix A2.

Carol Watson

Head of Adult Care Commissioning

May 2019

Better Lives at Home Project Appendix A2: Capital Budget

Planned Delivery of Units/Nominations to realise BL@H along with capital spend profile

Workstream	Scheme	Totals	Year 1 (2019/20)	Year 2 (2020/21)	Year 3 (2021/22)	Year 4 (2022/23) +		Comments	
Older People	Stoke Gifford						Timescale - utilised (estimated) - Apr 19	Joint scheme with South Glos. Investment already made.	
		40	40	0	0	0	Nominations		
		£0	£0	£0	£0	£0	Cost Profile		
	Haberfield House						Timescale - utilised (estimated) Jun 19	Scheme developed by Bristol Charities without BCC subsidy. BCC has been given full nomination rights.	
		60	60	0	0	0	Units		
		£0	£0	£0	£0	£0	Cost Profile		
	Blake Centre (Lockleaze)						Timescale - utilised (estimated) - Aug 21	Small scale Older People development within Lockleaze area. To include an Intergenerational/ ECH approach. Capital contribution to enable in return for BCC nomination rights.	
		20	0	0	20	0	Units		
		£450,000	£450,000	£0	£0	£0	Cost Profile		
	Redhouse / Extension to Waverley Gardens						Timescale - utilised (estimated) May 20	Extension to current Waverly Gardens scheme in Witherwood. Land granted in previous financial year by BCC for 100% nominations in perpetuity	
		52	0	52	0	0	Units		
		£0	£0	£0	£0	£0	Cost Profile		
	New Fosseway (Hengrove)						Timescale - utilised (estimated) Feb 22	Large development to include a range of housing options including ECH/ Intergenerational and to purchase. BCC to have minimum of 60 nominations. Early stage discussions	
		60	0	0	0	60	Units		
		£1,290,000	£0	£0	£1,290,000	£0	Cost Profile		
Working Age Adults (including PFA)	Sea Mills						Timescale - utilised (estimated) Dec 19	Refurbished building to provide "First Home" provision for young people with complex physical impairment and / or learning difficulties. Requiring substantial investment in providing a fully accessible home to support first independence.	
		5	5	0	0	0	Units		
		£1,460,000	£1,460,000	£0	£0	£0	Cost Profile		
	Monks Park	3	3				units	BCC nominations in perpetuity following Section 256 funding. For service users with LD and/ or ASC	
	Passage Road						Timescale - utilised (estimated) Jul 19	Equipment costs only to create provision for 8 service users	
		8	8	0	0	0	Units		
		£80,000	£80,000	£0	£0	£0	Cost Profile		
	Market Purchases	14	14	0	0	0	Units	Acquire and refurbish 14 one bed flats, to be supported through floating support for adults of working age who do not require more intensive support.	
		£2,800,000	£2,800,000	£0	£0	£0	Cost Profile		
	Partnership Properties with RSL's and/ or Supported Living Providers.						Timescale	Assumes that through grants and working in partnership with RSL's we will be able to access up to 80 nominations over 2020/21 and 2021/22 To include more bespoke provision for people with complexity of need in terms of environment or support approach.	
		80	0	40	40	0	Nominations		
		£2,675,000	£0	£1,375,000	£1,300,000	£0	Cost Profile		
	Project Staffing		£720,000	£235,000	£240,000	£245,000			
	Totals		342	130	92	60	60	Units	
		£9,475,000	£5,025,000	£1,615,000	£2,835,000	£0	Cost Profile		

Better Lives at Home Update: Appendix B- Details of Consultation carried out internally and externally

1. Older People

i. Lockleaze and New Fosseway developments

We are currently planning consultation activity regarding the intergenerational developments at Lockleaze and New Fosseway. This will be co-ordinated alongside the consultation activity for the wider Lockleaze developments to ensure that views of local residents regarding the adult care development are considered in the context of these other changes.

A summary of planned consultation activity is provided below:

Who are we engaging /consulting with	Frequency of Engagement/Consultation	Format of the Engagement/ Consultation
Ward Cllrs	As required	Via Public Consultation or BCC - Officers Formal briefings, emails, newsletters, flyers
Lockleaze Development Group	Bi-Monthly	Bi-Monthly meetings, emails, newsletters, flyers .
Lockleaze Community - Neighbourhood Trust	Pre- Planning Submission	Public Consultation/Meeting, flyers
	Post Planning Submission	Public Meeting, flyers, notices
Lockleaze and BME Community Groups	Pre-Planning Submission	Meetings/Focus Groups
Care and Support Providers	Pre- Planning Submission During planning submission and until Operational live date	Meetings, emails, site visits, phone calls
Local Planning Authority	As required	Meetings, Site visits, email
Local Shops/Business	Pre Planning	Public Consultation/Meeting, flyers
BLAH Steering Group	Bi-monthly	Bi-Monthly meetings, emails,
Better Lives Programme Board	Once - Prior to submission of the final planning proposals	Formal presentation to the Board

ii. Extra Care Housing Service User Engagement

In order to ensure that we are meeting the needs of the current tenants of our Extra Care Housing, and to understand what gaps we might need to address in future builds, we have scheduled a Service User Engagement exercise which will take place during the Spring of 2019. This will comprise of a series of conversations with tenants at their schemes during their regular scheduled meetings, and a wider individual questionnaire that will be circulated to all Extra Care Housing tenants at the beginning of April 2019.

Scheduled Meetings*		
Date	Venue	Provider
19 th March 2019	Ash Lea Court	Anchor-Hanover
26 th March 2019	Monica Wills House	St Monica's Trust
3 rd May 2019	Waverley Gardens	Brunel Care

**We hope to arrange additional meetings at other schemes but these are the confirmed appointments as of 5th March 2019*

The questionnaire will be sent out to all ECH Schemes at the beginning of April with a sufficient window for return.. Subsequent collation of results should be completed and a report produced by end of May 2019.

iii. Black & Minority Ethnic Extra Care Housing Service Users

In addition to the exercise described above we also want to ensure that our Extra Care Housing provision is meeting the needs of our BAME service users, both practically and culturally. We intend to work with our providers to assist us to identify tenants from minority communities and engage with them specifically around how the provision does or does not meet their needs. We also intend to work alongside organisations representing/ from communities to engage with elders not using this provision to ensure that we understand what an appropriate offer needs to look like. The results of this exercise should also be available by the end of May 2019 and will inform service redesign at current schemes and the design of future builds.

2. Preparing for Adulthood Consultation

Consultation with young people and their families has begun for the Sea Mills Development. A number of young people have been identified as a potential cohort for supported living in Sea Mills and an event was held on 19th February 2019 to introduce these young people and their families to the site. This is the beginning of an ongoing programme of co-production to ensure that the development meets the care and support and housing needs of those that chose to live at Sea Mills. Similarly, there will be ongoing engagement and true co-production between commissioners, social workers, the chosen developers and identified young people and their families regarding the developments in Passage Road and Monks Park Avenue.

3. Consultation about Provision for Adults of Working Age

There is ongoing consultation with providers of/ people using services previously funded under Supporting People consultations and we are including broader questions on housing with care and support and supported living to add to this feedback.

There will also be specific discussions with various mental health, autism and learning disability groups, including the LDPB, BIMHN. MH Market Development group, Bristol Autism Forum, Bristol Carers Voice, and service user groups associated with them, to co-produce Better Lives at Home offers for specific cohorts of adults of working age.

A series of Open Doors started last month to engage with providers of care and support and social landlords to set out BLAHs ambition and develop innovative solutions with the market place. These will continue into May.

In addition there are opportunities to consult providers through our provider Forums. Furthermore, specific meetings are being arranged with providers to discuss how complexity and risk can be better managed and the management of capacity, voids and compatibility. Discussions will also take place with providers or potential providers to explore innovative ways to spend the available capital to best meet the objectives of BL@H. Engagement is taking place with Care Management colleagues through a number of mechanisms and more extensive engagement with care managers will take place to identify service users for accommodation which is being built and identify and the develop care and support model to best meet their needs.

Better Lives at Home Risk Register as at 1st April 2019

1st April 2019

Negative Risks that offer a threat to Better Lives at Home Project and its Aims (Aim - Reduce Level of Risk)

Ref	Risk Description	Key Causes	Key Consequence	Status Open / Closed	Risk Category	Risk Owner	Key Mitigations	Direction of travel	Current Risk Level			Monetary Impact of Risk	Risk Tolerance				Actions to be undertaken			Escalation			Portfolio Flag	Audit Trail						
									Likelihood	Impact	Risk Rating		Likelihood	Impact	Risk Rating	Date	(Include dates as appropriate)	Resp. Officer	Escalated to:	Escalated by:	Date	Date risk identified		Directorate Flag	Date Risk Closed	Closed by:	Amends / Updates Completed Date:	By:		
																													£k	DRR/CRR
									R6	Delays in the development of the Sea Mills site.	Delays in delivery of this project are due to the procurement of the works in which to take this project forward, following the agreement of the specification late last year - in order to seek approvals to spend on this project . Whilst noting current delays, within an already constrained timescale to deliver a specialist refurbishment project, the project will need to go through the necessary planning planning process in order to commence any refurbishment works .	There is a risk that the delay in the development of the Sea Mills site could lead to the necessity of having to find accommodation and care settings for service users expected to move to this facility. This could lead to the Sea Mills site not being occupied in a timely fashion.	Open	E/F	Carol Watson	We now have a detailed specification and have procured and appointed a lead Architect to enable the project to progress and mointor the delivery of the Sea Mills project with the required skills and expertise. Will enage in meaningful consultation with users and operator and the community to inform the development proposals, through planning and fit out stage.	Has become an issue.	4	5	20		0		0	0	27/03/2019	To be recorded as an issue. Arrangements are now being made to accommodate the young people concerned in alternative settings until November 2019, when the Sea Mills site is expected to be opened.	Amanda Chappell		
R7	Interdependencies between workstreams	Potential failure of coordination between workstreams.	This is a complex project working across two business directorates, and including many workstreams including Working Age Adults, Older People, social care, and the provision of housing. Given this there is a potential risk in that any failure in coodination of the whole project could result in misalignment of tasks, suppliers, or interdependencies between the whole project, leading to delays, loss of service and increased cost/loss of capacity to make savings.	Open	Programme / Project Managemen t	Carol Watson	This project is being actively managed by an experienced project manager from Change Services and a Housing Development Project Manager from the Housing Delivery Team, but nevertheless there are capacity issues in holding together a large complex project. The project team working on this, Commissioning and project managers, procurement who meet every other week to discuss progress, risks and issues, and to work through any potential delays. To deliver this project at speed will require additional capacity, hence as an enabler capital funds will be used to employ additional commissioning capacity, including a lead strategic social care commissioner, and additional housing development staffing time.	Stable	2	5	10		0	0	0	29/03/2019	Active monitoring of mitigation and reporting by project manager, who in consultation with the Project Executive will take appropriate action.	Barry Scrase												

Positive Risks that offer an opportunity toXXXX and its Aims (Aim - Increase Level of Risk / Opportunity)

Ref	Risk Description	Key Causes	Key Consequence	Status Open / Closed	Risk Category	Risk Owner	Key Mitigations	Direction of travel	Current Risk Level			Monetary Impact of Risk	Risk Tolerance				Actions to be undertaken		Escalation			Portfolio Flag	Audit Trail																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
									Likelihood	Impact	Risk Rating		Likelihood	Impact	Risk Rating	Date	(Include dates as appropriate)	Resp. Officer	Escalated to:	Escalated by:	Date		Date risk identified		Date Risk Closed	Closed by:	Amends / Updates Completed Date:	By:																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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Bristol City Council Equality Impact Assessment Form

(Please refer to the Equality Impact Assessment guidance when completing this form)



Name of proposal	Better Lives at Home – Care and Support in new Extra Care Housing schemes
Directorate and Service Area	People, Adult Care, Strategic Commissioning Team.
Name of Lead Officer	Sarah Evens

Step 1: What is the proposal?

Please explain your proposal in Plain English, avoiding acronyms and jargon. This section should explain how the proposal will impact service users, staff and/or the wider community.

1.1 What is the proposal?

The development of Extra Care Housing aims to:

- Increase the supply of housing with care and free up general need social housing
- Reduce the need for more expensive residential care
- Maximise the number of people living in their own home
- Offer sector leading accommodation that provides the spatial requirements for:-
 - Care and Support to be delivered for a wide range of physical, sensory and cognitive impairment
 - Lifestyle alternatives and degree of communality that offers social engagement and active retirement as an alternative to increasing isolation in one's own home.
 - Housing that is unencumbered by maintenance and management issues, providing security at a time in life when we are most vulnerable.
 - Housing that is conveniently located for easy access to the range of facilities that we require in order to retain independence and enjoy healthy and fulfilled lives for as long as possible.

The need for Extra Care Housing in Bristol is currently being analysed by the

Adult Care Commissioning Team. The outcome of this analysis will inform the nomination process into new and existing Extra Care Housing Schemes.

Step 2: What information do we have?

Decisions must be evidence-based, and involve people with protected characteristics that could be affected. Please use this section to demonstrate understanding of who could be affected by the proposal.

2.1 What data or evidence is there which tells us who is, or could be affected?

The proposal will impact on people with protected characteristics, especially older and disabled people, in the following ways:

- Access to specialist housing for older people (Extra Care scheme)
- Access to a service (Care and Support within the Extra Care Housing setting)
- Impact on quality of life (Health, Wellbeing, Independence, Social Isolation)

Bristol City Council currently has nomination rights into 13 Extra Care Housing Schemes within Bristol; a total of 565 flats. These schemes are situated throughout the city.

A Care and Support Contract is commissioned at each scheme and the majority of ECH residents requiring care and support use these services. A small number choose another care and support provider to provide their care, usually by Direct Payment.

The following analysis provides evidence of who may be affected by the development of new Extra Care Housing:

1. People who currently live within Extra Care Housing Schemes in Bristol
2. People who are currently waiting for Extra Care Housing in Bristol
3. People who are currently receiving Homecare services (and could potentially move to an ECH scheme in the future)

1. People who currently live with Extra Care Housing Schemes in Bristol.

According to the Liquid Logic Adults System (LAS) there are 400 people receiving care and support with Extra Care Housing schemes in Bristol in August 2018.

Age

The largest majority of people currently living with ECH are between 80-89yrs old (37.3%), followed by 70-79yrs olds (21.5%) and those 90yrs and over (20.8%). Only 15.6% of people are 60-69yrs old and just 5% are under 60yrs.

Disability

The vast majority of people nominated from Bristol City Council into ECH schemes have eligible care and support needs (over 90% - the rest were nominated under a previous housing policy).

Race

The data on ethnicity within the LAS system is often incomplete, with 7.5% of people reported as their ethnicity 'Not yet Obtained'. However, over 88.7% of people currently receiving care and support within ECH schemes are reported as White (White British, White Irish and Any other White background) with just 3.75% of people reported as Black and Minority Ethnic. Given that 16% of Bristol's population are from BME groups, these people are currently under represented within Bristol's Extra Care Housing schemes.

Religion/belief

The data on religion/belief within the LAS system is also very incomplete, with 31.75% of people recorded with a religion/belief unknown. The majority of people are recorded as Christian (53.75%), followed by None (12.75%) and Other Religion (1.5%). 0.25% preferred not to say.

Sex

Within ECH, 130 people (32.5%) are reported as male and 270 people (67.5%) are reported as female. In the population of Bristol in general, 44.9% are male and 55.1% are female, therefore males are currently under represented in ECH.

Sexual Orientation

The data on sexual orientation within the LAS system is incomplete with 41% of people recorded as their sexual orientation 'Not known'. The majority of people are recorded as 'Heterosexual' (51%), with 5.25% of people recorded as 'Not disclosed' and 2.75% 'Not Certain'.

2. Analysis of Current ECH Waiting List (at May 2018)

At May 2018, Bristol City Council currently had 178 service users waiting for 11 Extra Care Housing schemes. These people may be eligible to move into the new ECH schemes which are the subject of this proposal.

Age

The average age on the waiting list is 78.

The largest proportion of service users (34%) are between the ages of 85-94 years old. This is followed by 25% in the 75-84 age bracket and 22% in the 65-74 age bracket.

The majority (85%) of people on the waiting list are over 65. 15% of people on the waiting list are under 65 and working age.

Care and Support Hours

The majority of people on the waiting list require 5-10 hours of care and support. This is followed by 35% requiring 10+ hours and 4% have unknown support requirements.

Geography

The table below indicates the number of people on the waiting list who live in each Ward of Bristol.

Wards	
Unknown	24
Avonmouth & Lawrence Weston	18
Hartcliffe & Withywood	11
Stockwood	9
Frome Vale	9
Southville	8
Southmead	7
St George West	7
Henbury and Brentry	7
Easton	6
Westbury-on-Trym & Henleaze	6
Hengrove & Whitchurch Park	6
Lawrence Hill	6
Knowle	6
Bedminster	5

Central	4
Lockleaze	4
Eastville	3
Filwood	3
Horfield	3
Stoke Bishop	3
Clifton	3
Brislington East	3
St George Central	3
Hillfields	3
Windmill Hill	3
Bishopsworth	2
Bishopston and Ashley Down	2
Cotham	2
St George Troopers Hill	1
Brislington West	1
Clifton Down	1
Ashley	0
Hotwells and Harbourside	0
Redland	0

The majority of people on the waiting list live in the South of the City (67) closely followed by the North West of the City (51). The East of the City and the West of the City contain less people who are on the waiting list for an ECH scheme (35 and 25 people respectively).

Types of Current Housing/Accommodation

Social Housing

One third of people on the waiting list are currently living in social housing. Of these, people 48 are council tenants, 10 are housing association tenants and 1 unknown.

Private Housing

One third of people on the waiting list are currently in private housing.

Sheltered Housing

22 people on the waiting list are living in some form of sheltered housing. Of sheltered housing 10 people are council tenants, 9 are housing association

tenants, 1 owner occupier and 2 unknown.

Nursing Home

13 people, (7%) are currently in a nursing home.

Residential Home

18 people (10%) are currently in a residential home.

Homecare

A larger proportion of people living in social housing receive homecare (59%) in comparison with people living in private housing (40%).

Of those in social housing 24 people (41%) did not have a package of homecare whilst 34 people do have a package of homecare.

Of those in private housing the majority of people (60%) do not have package of homecare whilst 23 people do have a package of homecare.

Sheltered Housing

Of those in sheltered housing, a 50/50 split of 11 people receiving a package of homecare and 11 not in receipt of a package of homecare.

The 9 people in 'Other' accommodation included people already living in ECH, supported living, hostel and temporary accommodation.

- Social Housing- receiving homecare package or not?
- Private Housing- receiving homecare package or not?
- Residential Home
- Nursing Home
- Other

3. People currently receiving Homecare in Bristol

The majority of homecare service users are female (62%), White British Ethnicity (81%), Christian (50%). 53% of service users are British, with 45% recorded as unknown. 47% of service users are Heterosexual, with 43% recorded as Not Known.

A slightly higher proportion of homecare service users are White British (81%)

compared with the Bristol population (78%), suggesting that BME groups are slightly unrepresented for those receiving a commissioned service. Looking at the profile of service users who receive a Direct Payment for homecare, a large majority are still White British (63%), however there is significantly more ethnic diversity.

The majority of the service users have a primary need associated with being physically frail or ill (37%), closely followed by physical disability (33%). There are also a significant number of service users with dementia (9%) and mental illness (6%) as a primary need.

Physical Disability and Physical Frailty are also prevalent when looking at secondary needs. A significant number of people have a secondary need as a Carer. Most carers are older people. The average age of a Carer in Bristol is 65.

There is a clear correlation between areas of high proportion of working age population whose day to day activities are limited (limiting long-term illness or disability) and the wards with the highest number of homecare packages.

The majority of service users are 81- 90 years of age followed by 71-80 years of age. A significant proportion (21%) of service users are between 51 and 70. The average age is 76.

The older population is growing and this will create more demand. Older people receiving homecare are more likely to have a primary need linked to physical frailty or dementia.

There are projected to be 7,700 more people 65 & over by 2024, a 13% rise (and potentially a 44% rise by 2039). The demand for homecare is thereby predicted to rise especially as we commission less residential care and more homecare to enable people to stay at home and be supported to be independent for longer.

2.2 Who is missing? Are there any gaps in the data?

There is a lack on data on Nationality and Sexual Orientation. There is no data on marriage and civil partnership, pregnancy and maternity and gender re-assignment.

2.3 How have we involved, or will we involve, communities and groups that

could be affected?

As part of the overall development of the Bristol Retirement Living Strategy we carried consultation with providers, service users, potential service users, carers, health and social care practitioners and all other interested parties, which included the need for care and support within accommodation.

Going forward we will be carrying out a full needs analysis, market testing and public consultation regarding the implementation of these schemes.

Step 3: Who might the proposal impact?

Analysis of impacts on people with protected characteristics must be rigorous. Please demonstrate your analysis of any impacts in this section, referring to all of the equalities groups as defined in the Equality Act 2010.

3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

We have not identified any potentially adverse impacts at this stage. However because of the nature of the service older people including those with Mental Health, Physical Disability and Learning Disability are particularly affected by the proposal, and some protected characteristics are over-represented within some ECH schemes. We will need to ensure that the needs of all equalities groups are met within a new service and that there is no indirect discrimination as a result of potential streamlining of provision.

We will continue to monitor the waiting lists and nominations process for people moving into ECH to ensure that all equality groups are proportionally represented and needs met in the new Extra Care Housing schemes. We will also consider how we advertise the new ECH schemes and work with providers to provide an equitable service.

3.2 Can these impacts be mitigated or justified? If so, how?

We will ensure that the service specification and tender evaluation quality questions include the requirement for providers to demonstrate their ability to deliver an inclusive service e.g. for residents who speak English as an additional language.

3.3 Does the proposal create any benefits for people with protected characteristics?

Age and Disability

The review of this service proposes the continued funding of and investment in Care and Support services within Extra Care Housing, which has clear benefits for older and disabled people, helping people to stay well and remain in their own home.

3.4 Can they be maximised? If so, how?

The commissioning process provides the opportunity to review service specifications and contracts with service providers. As per proposals in the Cabinet Report, this will include the addition of measures, or changes, to the way we ask providers to deliver services, and what measures we performance monitor.

Step 4: So what?

The Equality Impact Assessment must be able to influence the proposal and decision. This section asks how your understanding of impacts on people with protected characteristics has influenced your proposal, and how the findings of your Equality Impact Assessment can be measured going forward.

4.1 How has the equality impact assessment informed or changed the proposal?

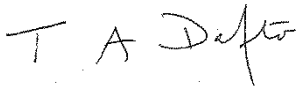

This EqIA has highlighted the need for the Better Lives at Home Project Team to:

- Ensure our service specifications specify that needs assessments take into account any needs in relation to the Protected Characteristics.
- Ensure any tender process ensure providers' employment policies, procedures and practices are not discriminatory.
- Consider whether equalities service standards and targets should be used in the contract specification or Performance Management Frameworks.
- As part of Better Lives at Home, we will carry out specific engagement to identify why there is under representation in BME groups in ECH and develop models in our spectrum of provision to best reflect the needs and aspirations of older people and their families in these communities.

4.2 What actions have been identified going forward?

- Review and implement effective equalities service standards and targets

<p>as part of the performance management framework.</p> <ul style="list-style-type: none"> • Improve equalities monitoring of service users in ECH schemes.
<p>4.3 How will the impact of your proposal and actions be measured moving forward?</p>
<p>The impact of this proposal and the actions will be measured through ongoing contract management and quality assurance of the contracts. In addition the impact of the project will be measured to ascertain whether it has achieved its benefits.</p>

<p>Service Director Sign-Off:</p> 	<p>Equalities Officer Sign Off:</p>  <p>Duncan Fleming</p>
<p>Date: 6/9/2018</p>	<p>Date: 16/8/2018</p>

Bristol City Council Equality Impact Assessment Form

Name of proposal	Better Lives At Home
Directorate and Service Area	People – Adults – Strategic Commissioning
Name of Lead Officer	Carol Watson

Step 1: What is the proposal?

Please explain your proposal in Plain English, avoiding acronyms and jargon. This section should explain how the proposal will impact service users, staff and/or the wider community.

1.1 What is the proposal?

Better Lives at Home is a Project set up under the Better Lives programme in Adult Care. It aims to deliver a step change in the development, provision and effectiveness of supported accommodation within the community as a real alternative to residential care for older and/ or vulnerable working age adults with care or support needs. The Project involves an active and positive partnership within the Council between Adult Social Care and Housing Development. There is also a much wider connotation for this work. Whilst homes require buildings delivering a real change and broader outcomes for people from independent living, (whether that's about their social networks, being in employment, or being able to feel happy and content in their locality) requires more. Our vision is for people to live better lives within communities that are inclusive and supportive, and discussions are beginning relating to this aspect.

This EQIA relates to work to increase the availability and use of supported living in the community for disabled adults of working age who require care and support, as an alternative to residential care. This includes young people returning to Bristol in early adulthood after placement in children's provision out of area or leaving children's residential care in area. Better Lives at Home as a project also includes Extra Care Housing and options for older people, for which there is a separate EQIA. Supported Living.

Better Lives at Home is based on, and helps to deliver, the Adult Care Better Lives Principles :

- More citizens will retain their independence through accessing support in the community. We are working to make it easier to connect residents with their local offer and improve access to support in their community.

Appendix E – Equality Impact Assessment Form

- Adults of working age will be able to live as independently as possible in their own homes and supported to access education or employment wherever possible.
- People can get the right help at the right time to promote independence and to prevent, reduce or delay the need for long term support

The proposal will impact on people with protected characteristics, especially working age adults and disabled people, in the following ways:

- Access to supported accommodation provision for working age adults (Supported Living)
- Access to a service (Care and Support within Supported Living)
- Impact on quality of life (Health, Wellbeing, Independence, Social Isolation)

There are currently 555 service users in supported living within the city, of these 488 are working age (18-64) (LAS Report March 2019). Our current plan is to increase that number by 20-40 individuals per year for the next 3 years. Our priority for adults of working age (other than young adults entering adult care) are people with mental health issues, autism and learning difficulties.

Current placements are situated throughout the city. There is a higher density of placements in the North of the City.

The following analysis provides evidence of who may be affected by the development of new Supported living.

1. People who currently live within Supported Living in Bristol
2. People who currently receive accommodation based services in Bristol.

Step 2: What information do we have?

Decisions must be evidence-based, and involve people with protected characteristics that could be affected. Please use this section to demonstrate understanding of who could be affected by the proposal.

2.1 What data or evidence is there which tells us who is, or could be affected?

Gender

There are a disproportionately low number of women service users of

Supported Living then male. There are 329 men and 159 female – 67% male and 33% female (LAS Report March 2019). 64% of Accommodation Based Services service users are male. This is higher than the Bristol average (50% women and 50% men) and confirms there are a disproportionate number of males in ABS services.

The following data relates to women in Bristol:

- The Bristol population is 229,300 females and 230,000 males (or 50% women and 50% men). However, there are more women than men aged 65 and over and more men than women in the 25- 49 year age group.
- Mental health disorders are up to three times more prevalent in women than men. The overall prevalence estimate for all mental health disorders is 10% in males, 28.2% in females and 18.9% overall.
- There are more women than men with a “limiting long-term illness or disability” living in Bristol – 15.6% of men and 17.8% of women. This is due to women generally living longer than men.

Both Care Management and Brokerage have stated that there are quite a few all men supported living accommodation but little all-women supported living accommodation. This needs to be on offer and is especially relevant for women of certain cultural backgrounds or those who may have experienced abuse. The lack of suitable accommodation for women with complex needs and increased vulnerability was also raised by the Women’s Commission in their meeting on 9 November 2018. It is also important to consider supported living for women with children.

Ethnicity

The BAME population of Bristol is 22% (which includes ‘white other’). An analysis of our current Supported Living service users showed that 74% are White British and 20% are BAME (including ‘white other’). Therefore BME groups are slightly less represented within this service when compared to the Bristol population.

Adult care information on current service users in a Supported Living Service

Ethnicity	Number	%	2011 Census (Bristol)
White British	361	73.98%	78.9%
Not yet obtained	30	6.15%	

Appendix E – Equality Impact Assessment Form

Indian	1	0.20%	1.5%
Dual: White & Black Carib	12	2.46%	
Dual: White & Black African	2	0.41%	
Dual: White & Asian	3	0.61%	
Caribbean	25	5.12%	1.6%
Bangladeshi	2	0.41%	
Any Other White Background	15	3.07%	
Any Other Ethnic Group	3	0.61%	
Any Other Dual Background	10	2.05%	
Any Other Black Background	6	1.23%	
Any Other Asian Background	5	1.02%	
African	13	2.66%	2.8%

- 74% of Supported Living service users are White British which is less than the Bristol average of 78.9%.
- It is hard to compare data against the 2011 census due to differences in categorisation; however there is evidence that some ethnicities may be underrepresented, such as Pakistani, African and Indian ethnicities. The Caribbean ethnicity appears to be more highly represented than the Bristol average.
-

Adult Care Information on current Service Users receiving Accommodation Based Support.

Ethnicity	Number	%	2011 Census (Bristol)
White: English/Welsh/Scottish/Northern Irish/British	216	83%	78.9%
Black/Black British: Caribbean	19	7%	1.6%
Mixed: White and Black Caribbean	5	1.9%	
White: Other White	5	1.9%	
Asian/Asian British: Bangladeshi	2	0.7%	
Asian/Asian British: Other Asian	2	0.7%	
Asian/Asian British: Pakistani	2	0.7%	1.6%

Appendix E – Equality Impact Assessment Form

Black/Black British: African	2	0.7%	2.8%
Black/Black British: Other Black	2	0.7%	
Asian/Asian British: Indian	1	0.3%	1.5%
Mixed: Other Mixed	1	0.3%	
Mixed: White and Black African	1	0.3%	
Other ethnic group: Other	1	0.3%	
White: Irish	1	0.3%	0.9%

- 83% of Accommodation Based Services service users are White: English/Welsh/Scottish/ Northern Irish/British, which is higher than the Bristol average of 78.9%.
- It is hard to compare data against the 2011 census due to differences in categorisation; however there is evidence that some ethnicities may be underrepresented, such as Pakistani, African and Indian ethnicities.

Furthermore certain BME groups are more likely to have certain types of mental ill health and learning difficulties so statistically could be expected to be making up a higher proportion of people living in supported living.

Analysis of our current service users in supported living (LAS Report September 2018) indicates that the majority of BME tenants (68% of BME service users) have a primary need related to Mental Health followed by 28% with a primary need of a Learning Disability.

Key statistics in relation to ethnicity and mental health
Mental Health Act Statistics, Annual Figures: 2017-18

- Amongst the five broad ethnic groups, known rates of detention for the 'Black or Black British' group (288 detentions per 100,000 population) were over four times those of the White group (71.8 per 100,000 population).
- Known rates of Community Treatment Orders (CTO) use for males (10.8 per 100,000 population) were almost twice the rate for females (6.4 per 100,000 population). Across age groups, those aged 18-34 had the

highest rate of CTO use (121.8 known uses per 100,000 population compared to 9.0 uses per 100,000 population for all age groups).

- Amongst broad ethnic groups, known rates of CTO use for the 'Black or Black British' group (56.0 uses per 100,000 population) were almost nine times the rate for the White group (6.5 uses per 100,000 population).
- People of African Caribbean origin living in the UK have lower reported rates of common mental illness than other ethnic groups. **However they are more likely to be diagnosed with severe mental illness and are three to five times more likely than any other group to be diagnosed and admitted to hospital for schizophrenia.**
- African Caribbean people are also prescribed higher doses of medication, even though African Caribbean, West African and Bangladeshi patients cite biological causes for their schizophrenia far less often than white patients.
- In over 50% of studies exploring the reasons for disparity between ethnic groups in relation to mental health outcomes, 'race-based' explanations (including negative stereotyping) are cited

There is an increased prevalence of Learning Disabilities in South Asian communities (JSNA).

In a consultation with Users and Providers from October 15 to January 2016, relating to floating support previously funded through "Supporting People" budgets, it was stated that 'Equality of opportunity, culturally appropriate services and an understanding and appreciation of other cultures and religions was important'

The report with a detailed analysis can be found in the following link:

<https://www.bristol.gov.uk/documents/20182/379217/Community+Support+Services+Consultation+Analysis/fde2a6b5-6be6-46be-8b0a-9d846b9194ac>

Disability

As a service for people eligible under the Care Act Supported Living Services are delivered to disabled adults with a range of impairments and conditions.

Known Primary Needs – Supported Living Services

Liquid-logic Adults System (LAS)

Appendix E – Equality Impact Assessment Form

Primary need of service users of supported living	Total number (18-64)
Aspergers	10
Autism	12
Dementia	2
Hearing Impairment	2
Learning Disability	189
Mental Illness	209
Neurological Disability	5
Other Vulnerability	6
Physical Disability	23
Physically Frail/Temporary Ill	4
Substance Misuse	7
Not known/unknown	19

Liquid-logic Adults System (LAS) data (March 2019) shows that 209 people with a primary mental health need access supported living and 189 with a primary learning disability need.

Our engagement with Brokerage, Care Management and Providers highlights that there is a greater need for provision for people with mental health needs but due to concerns around risk and business models there is a limited offer, especially when service users are of a higher risk and have lower assessed care needs. In such cases, places are not offered or providers accept service users with an significantly increased package that what they are assessed as needing.

Known Primary Needs – Accommodation Based Services

- The majority of service users have a primary need of Mental Health (51%). The second highest primary need is Learning Disability (35%). Other primary needs included 'Deaf' (3%), 'Downs Syndrome' (3%) and Autism (2%).
- There are a wide range of recorded secondary needs. Mental Health and Learning Disabilities are the highest recorded secondary needs (13%), followed by 'Alcohol' (8%), Tenancy (8%), Drug use (7%), Dementia (7%), Mobility (7%) and Epilepsy (5%). Other recorded secondary needs include 'Elderly', 'Medication,' and 'Hoarding.'

- Most service users have been in Accommodation Based Services for under 5 years (46%), with 2 to <3 years the most common (16%). However 23% of service users have been in Accommodation Based Services for between 10 and <20 years, while 6% of service users have been receiving services for longer.
- 42% of service users have received a Care Act Assessment. Some data is missing so this figure could be higher.
- 55% of service users do not receive any other Care and Support Services. 12% receive 'Social Services funded support services' but no further detail was provided. 11% of service users receive Community Support Services, 6% Home Care, 3% Community Psychiatric Nurse services and 2% Mental Health Services. 'Other Services' included 'Community Treatment Order,' and 'Care and Repair.'
- There is a lack of data on Disability. 44% of service users have a disability and this number could be higher. This is higher than the Bristol average of 16.7%.

Age

- An analysis of current Supported Living service users (March 2019) shows a range of ages. The majority of service users (26%) are between 45-54, followed by 25% aged between 25-34. The average age of service users is 41.
- There are a range of ages in Accommodation Based Services, however the majority of service users receiving services are between 51 and 55 years of age (18%) followed by those aged between 56 and 60 (14%). The average age of service users is 52.

Sexual Orientation

- An analysis of current Supported Living service users (LAS Report March 2019) provides some information on sexual orientation, but there is a lack of data. For 59% of service users, their sexual orientation is not known. 27% of service users are heterosexual, 0.6% gay men, 0.2% lesbian, 0.4% bisexual, 0.2% 'other' and 12% not disclosed.

- There is also a lack of data on Sexual Orientation for accommodation based services service users. 42% of service users are Heterosexual or Straight, 2% Gay or Lesbian and 1% Bisexual. 51% of data is not known or not recorded.
- In accommodation based services, 98% of service users identify as the same as the sex they were assigned at Birth, while 2% do not. Whilst in Supported Living services, 0.2% of service users do not identify as the same sex they were assigned at Birth.

Religion

- An analysis of our current service users in Supported Living (LAS Report March 2019) shows that for the majority of service users (43%) their religion is not known. The next highest proportion of Supported Living service users (32%) are Christian, compared with the Bristol average of 46.8%. 20% of service users have no religion, compared with the Bristol average of 37.4%. 2% of service users are muslim compared with the Bristol average of 5%. 0.2% are Hindu, compared with the Bristol average of 0.6%. 3% are recorded as 'other'.
- Most accommodation based services service users have no religion (41%), compared with the Bristol average of 37.4%. Christianity is the highest recorded religion (32%) compared with the Bristol average of 46.8%. 3% of service users are Muslim compared with the Bristol average of 5%, and 1% 'Other.' However religion is unknown for 17% of service users.

General Trends

2.2 Who is missing? Are there any gaps in the data?

There is a lack of demographic data in the areas of sexual orientation, gender reassignment and religion. This data tells us who currently uses accommodation based services. Work is ongoing to identify those people for whom lack of a supported living option is currently leading to a residential placement or meaning they can not move on from residential placement.

2.3 How have we involved, or will we involve, communities and groups that could be affected?

We have reviewed the data and undertaken research. Better Lives at Home is moving into a coproduction phase. The next step will be targeted work with community organisations that work in and with communities and/ or targeted service user groups. This will help us understand current best practise, what sits behind the relative under representation of some groups in Supported Living and how we improve the offer. Work will have a particular focus on BAME groups who are underrepresented in this provision and over represented in long term or acute provision that this might help avoid The groups we will engage with will include those involved in Voice and Influence work, community organisations and organisations representing BAME communities and women, and people (or their families/ carers) with mental health issues, learning disabilities or autistic spectrum conditions more generally.

Work relating to Support Living with People with Mental Health issues is being developed through a Market Development Group which includes Bristol Independent Mental Health Network, an organisation of people with lived experience.

We are also working with Providers, especially those that evidence successful work with diverse communities .

There is targeted work going on relating to specific groups of young people who are part of the “First Home” Workstream. This is being co-facilitated by WECIL.

Step 3: Who might the proposal impact?

Analysis of impacts on people with protected characteristics must be rigorous. Please demonstrate your analysis of any impacts in this section, referring to all of the equalities groups as defined in the Equality Act 2010.

3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

Age and Disability

The work for adults of working age in Better Lives at Home should have a positive impact on disabled adults especially those who have less access to supported living due to the nature of their primary condition, ethnicity or gender. This is based on evidence based best practise that supported living can lead to better outcomes than residential care for most people, in terms of

wider life outcomes. We are delivering some focused work on young adults as a lack of provision in Bristol has meant that a small but significant number of young people do not have a real alternative to residential care to be able to return to Bristol at 18. Whilst this is planned to be a positive move, there are real challenges for some young people, and their families in moving on from residential college placements which need to be understood.

Sex

There is disproportionate lack of usage of supported living by women and a lack of specialist provision. We are considering how we can develop/encourage more provision that is women only, including for women with children. This should have a positive impact.

Ethnicity

There is currently an overrepresentation of White: English/Welsh/Scottish/Northern Irish/British ethnicity in Supported Living and Accommodation Based Services compared with the local population. As part of the recommissioning process it will be important to ensure that services are accessible, and meet the needs of, the local population and services are monitored to ensure they are non-discriminatory. This should have a positive impact by providing more services and support. In particular better options for supported living for people from BAME communities with mental health issues, if well designed, may help to address some of the overrepresentation of BAME individuals in the acute mental health system, and deliver much better life outcomes.

Religion

There is a lack of profile data on this. We have not identified any specific adverse impacts identified. However we have a lack of data. Redesign of services will need to address issues of access to religious activity.

Gender Reassignment

There is a lack of profile data on this. We have not identified any adverse impacts. We need to consider Gender Reassignment in future design work, in particular if we design more provision which is single gender.

Sexual Orientation

There is a lack of profile data on sexual orientation. There is no evidence that

the proposals would have an adverse impact. It is important that people do not experience barriers to care and support services due to their sexual orientation. Supported Living should support improved life outcomes including friendships and relationships.

Marriage and Civil partnership

There is a lack of profile data on this. No specific adverse impacts identified. Supported Living should support improved life outcomes including friendships and relationships.

Pregnancy and Maternity

There is a lack of profile data on this. No adverse impacts identified in terms of service users. In terms of staffing groups, some kinds of supported living involve staff working out of hours. We expect providers to follow good practise and legislation in terms of pregnancy and maternity .

Other considerations

3.2 Can these impacts be mitigated or justified? If so, how?

There is an excellent opportunity to mitigate any further adverse impact of changes through the re-design process. By taking an approach of coproducing the new delivery model for these services, the impact on those with protected characteristics will continue to be considered at all stages to ensure that the impact is not disproportionate but delivers positive improvements in outcomes for people.

3.3 Does the proposal create any benefits for people with protected characteristics?

Yes. The proposal is specifically designed to deliver improved life outcomes and alternatives to residential care. These will be different for different cohorts, including improved increased independence and personal skills, access to community, friends and social networks, meaningful activity and employment.

3.4 Can they be maximised? If so, how?

The design phase for each Workstream will focus on ensuring maximum

outcomes for people involved. Work with young people and their families will focus on specific groups of young adults, and involve them in designing their “First Home” to meet their specific needs.

Step 4: So what?

The Equality Impact Assessment must be able to influence the proposal and decision. This section asks how your understanding of impacts on people with protected characteristics has influenced your proposal, and how the findings of your Equality Impact Assessment can be measured going forward.

4.1 How has the equality impact assessment informed or changed the proposal?

- Highlighted the need to co-produce specifically with groups of/ representing people who do not have equal access to supported living identified within this EQiA namely those from: mental health ; BAME; and gender-based; community groups that have an expertise or knowledge of housing with care and support. This will be carried out through meetings, events, and conversations with potential service users to inform what additional provision we need to develop, where, and the specification for support services for particular groups. This will be completed no later than 31st March 2020, with a development plan highlighting the findings, and how the Council intends to respond to these needs with SMART targets.

4.2 What actions have been identified going forward?

- A detailed focused engagement plan is being drawn up following the finalising of the needs assessment. The outcomes from this will be tracked to ensure it influences design and specification of new workstreams. As identified above it will focus in particular on groups who are not getting equal access to provision that supports and protects their independence.
- Coproduction has begun with young people and their families who may benefit from the two new developments for young adults as part of “First Home” Workstream.

Appendix E – Equality Impact Assessment Form

- This Equality Impact Assessment will be updated following the results of the consultation on the Commissioning Strategy and the finalisation of the Commissioning Plan.
- Providers contracting with Bristol City Council will be subject to an accreditation process to ensure that the service they provide is accessible and relevant to all people who have any protected characteristics and all providers have an up to date equalities policy which is reviewed on a minimum of every 3 years or more frequently where appropriate (i.e. changes to legislation).
- In identifying providers for Specific developments there will be attention to relevant experience.

4.3 How will the impact of your proposal and actions be measured moving forward?

We will measure feedback and engagement of organisations in successful coproduction of new design. The success of this will be measured through improved outcomes in terms of:

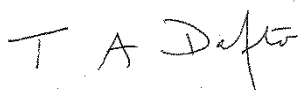
Increased numbers of people successfully accessing supported living who are:

- Under 25 year olds
- Women
- People from BAME communities.

Increase in specialist provider knowledge and offer.

Longer term impact on improved general social care outcomes for these groups.

Service Director Sign-Off:



Equalities Officer Sign Off:



Date: : 22/3/2019

Date: 11/3/2019

Eco Impact Checklist

Title of report: Better Lives at Home Proposals and Progress Update				
Report author: Carol Watson				
Anticipated date of key decision: 07/05/2019				
<p>Summary of proposals: To provide an update on progress with Better Lives at Home a joint project across Adult Social Care and Housing following the paper presented to Cabinet in October 2018. Better Lives at Home is part of the Better Lives Programme. To seek further approvals for activity to deliver new aspects of this strategy, including:</p> <ol style="list-style-type: none"> 1. To outline Better Lives Capital spend proposals amounting to £9.47mil to develop Extra Care/ Inter-generational provision focused on older people, and supported living provision focused on young adults transitioning to Adult Care Services and/ or working age adults with care and support needs. 2. Approaches to increase supported living provision for adults of working age, including purchasing accommodation through open market which alongside a commissioned care and support contract will be prioritised for specific cohorts of adult care service users. 3. The development of "First Home" specific accommodation for young people transitioning into adult hood. 4. To provide an overview of the context and rationale for piloting Individual Service Funds (ISFs) and seek approval for a Community Support Services (CSS) Open Framework contract variation to pilot and develop this approach. <p>The transfer of new assets (properties and or land) secured for delivering specialist affordable housing through the Better Lives at Home Project, to the management of Homes and Landlord Services, in close partnership with Adult Care, with relevant policy and practise changes</p>				
Will the proposal impact on...	Yes/ No	+ive or -ive	If Yes...	
			Briefly describe impact	Briefly describe Mitigation measures
Emission of Climate Changing Gases?	Yes	-ive/ +ive	<p>Purchasing accommodation through open market. We intend to purchase up to 14 units from the open market in 2019/20</p> <p>The transfer of new assets (properties and or land) secured for delivering specialist affordable housing through the Better Lives at Home Project, to the management of Homes and Landlord Services</p> <p>Refurbishment of childrens centre</p>	<p>Adding more housing to BCC stock will emit climate changing gases through areas such as energy use to run the homes. Ensure the stock purchased is energy efficient and consider areas such as efficient lighting (LED), well insulated and modern boilers. Also ensure correct change of tenancy procedures are followed so energy contracts and costs can be allocated correctly.</p> <p>Works will emit climate changing gases through travel and energy use but a more efficient building</p>

			<p>The specialist affordable homes will provide a positive alternative to residential care</p>	<p>will use less energy etc in the long run. Ensure refurbishment is done to a high standard and energy efficiency measures are considered. Consider installation of renewable energy generation (such as solar panels and heat network connections) as part of the planning process, speak with the energy service about this.</p> <p>Having less residential care buildings in operation which can be in-efficient and these replaced with more efficient, modern housing could reduce consumption in areas such as electricity and heat.</p>
Bristol's resilience to the effects of climate change?	No			
Consumption of non-renewable resources?	Yes	+ive/-ive	Refurbish the Former Sea Mills Children Centre and home building	Refurbishment and home building will consume resources through building works. Ensure sustainable building materials are used such as FSC timbre and green guide A or B standard materials where feasible. Homes built will go through planning process. Third party contractors to be made aware of the BCC environmental policy and will adhere to its aims.
Production, recycling or disposal of waste	Yes	-ive	Refurbishment and building of homes	Waste will be generated through works. Contractors to dispose of waste according to waste legislation and follow the

			Waste will be generated through operation of homes	waste hierarchy. Ensure recycling is in place and encourage building users to recycle.
The appearance of the city?	Yes	-ive/+ive	Refurbishment and building of homes	New builds will go through planning process. Refurbished stock should improve appearance.
Pollution to land, water, or air?	Yes	+ive	Some young people who have been in residential education provision out of Bristol and are not able to live with their family. This provision will be developed so that these young people can return to the City In particular to develop models of long term "home" for people, where the support they receive steps up and down rather than people being disrupted by moving.	Will see a reduction in long distance travel for family members visiting young people who have been out of the city. By developing long term accommodation will reduce travel impacts from multiple moves.
Wildlife and habitats?	Yes	+ive/-ive	New build housing	Will go through planning process and ecological surveys. A focus will be made on creating positive green spaces.

Consulted with:

Summary of impacts and Mitigation - to go into the main Cabinet/ Council Report

The significant impacts of this proposal are... through purchase, refurbishment and build of housing and refurbishment of existing homes.

The proposals include the following measures to mitigate the impacts... Energy efficiency measures will be considered at design stage. Waste hierarchy will be followed where waste is generated.

The net effects of the proposals are mixed but could be overall positive with effective

mitigation measures.	
Checklist completed by:	
Name:	Nicola Hares
Dept.:	Energy and Environmental Performance
Extension:	-
Date:	28/03/2019
Verified by Environmental Performance Team	N. Hares



Decision Pathway – Report

PURPOSE: Key decision

MEETING: Cabinet

DATE: 07 May 2019

TITLE	Technology Enabled Care Service - Better Lives Programme		
Ward(s)	All		
Author: Oliver Buell		Job title: Project Manager	
Cabinet lead: Cllr Holland		Executive Director lead: Jacqui Jensen	
Proposal origin: BCC Staff			
Decision maker: Cabinet Member			
Decision forum: Cabinet			
Purpose of Report: <ol style="list-style-type: none">1. Seek approval to implement a revised model for Technology Enabled Care (TEC) Service involving allocating £1.375m from Disabled Facilities Grant and the procurement of appropriate services and equipment.			
Evidence Base: <ol style="list-style-type: none">2. Technology Enabled Care (TEC) is a key enabler of the Better Lives programme.3. The use of TEC as part of a wider package of care has been shown to support citizens to live independently for longer within their own communities and improve their wellbeing.4. This leads to a reduction in the proportion of adults being supported by residential/nursing provision for lengthy periods of time. It has also been shown to reduce pressure of the local health economy.5. The current TEC system is fragmented. Practitioners consider the use of TEC as part of a Care Act assessment of need. However they don't always know the range of TEC on offer and don't consistently prescribe the right TEC for a citizen's situation. Rates of use of TEC are lower than for other comparable Local Authorities.6. To increase the use of TEC, initially within BCC and later potentially wider within Health and Childrens Social Care, a new service model is required.7. The TEC service model brings together all existing TEC activity within BCC into a single service or hub and combines the service with the Accessible Homes service.8. Practitioners will refer into the service when they believe TEC would be appropriate. The referrals will be outcomes-based – Practitioners specify the required outcomes and the TEC experts within the TEC Service then perform a TEC assessment to select equipment that will realise those outcomes.9. This approach aligns with TEC systems in other Local Authorities which have experienced large increases in the use of TEC and corresponding achievement of outcomes.10. The pace at which care, medical and consumer assistive technologies are advancing indicates the Council will require a dynamic, innovative and responsive TEC supplier. Detailed requirements for TEC supply will be developed to enable a full procurement process to be followed. Requirements will include delivery and maintenance of TEC equipment in an effective, just-in-time, and cost-efficient way as well as availability of new innovative TEC as it comes onto the market.11. The Better Lives Programme Board will oversee implementation of the Service. Additionally there will also be a project steering group and project team to manage delivery on a day-to-day basis. The steering group will ensure timely delivery and alignment to the strategic vision and aims while the project team will manage the			

mobilisation and transition.

Cabinet Member/Officer Recommendations:

In consultation with the Cabinet Member for Adult Social Care, that Cabinet:

1. Approve proposals for a revised model for the Technology Enabled Care Service.
2. Approve the allocation of £1.35m from Disabled Facilities Grant.
3. Authorise the Director: Adult Social Care to procure the necessary services and equipment to deliver the new service model.

Corporate Strategy alignment:

Empowering and caring:

Working with partners to empower communities and individuals, increase independence, support those who need it.

1. Provide 'help to help yourself' and 'help when you need it' through a sustainable, safe and diverse system of social care and safeguarding provision, with a focus on early help and intervention.

Well-connected:

Taking bold and innovative steps to make Bristol a joined up city.

1. Make progress towards being the UK's best digitally connected city.
2. Reduce social and economic isolation and help connect people to people.

Wellbeing:

1. Creating healthier and more resilient communities where life expectancy is not determined by wealth or background.
2. Embed health in all our policies to improve physical & mental health and wellbeing, reducing inequalities and the demand for acute services.

Better Lives Programme vision:

People can get the right help at the right time to promote independence and to prevent, reduce or delay the need for long term support.

Technology Enabled Care Service vision:

All citizens, with a support need, their carers and the Practitioners who work with them, can refer into a joined-up and innovative service which will consider their circumstances and promptly provide the right technology to enable them to stay safe, independent and in their homes for longer.

City Benefits:

1. Deliver financial benefits both to the local health economy (typically avoided ambulance call-outs, conveyances to hospital, avoided emergency admissions) and Adult Social Care budget.
2. Health practitioners are able to make TEC referrals along with BCC practitioners and citizens.
3. Quicker installation of TEC leading to reduced Delayed Transfer of Care (hospital discharge) waiting lists.
4. TEC assessments will treat all clients as individuals ensuring equipment installed is right for their own situation.
5. Increased independence of service users helping to keep people safe in their own homes for longer.

Consultation Details:

1. Better Lives Programme Board (25/02/19) – includes Health representatives/BCC leadership/Assistant Mayor.
2. Representatives from all affected areas of the business (Bristol Operations Centre/Accessible Homes/Adult Social Care) (throughout Full Business Case development).
3. Healthier Together Programme – Digital population group (includes North Somerset, South Gloucestershire, Bristol North Somerset South Gloucestershire Clinical Commissioning Group, Bristol Community Health) (08/01/19).
4. Staff Engagement Group (16/04/19) – includes representatives from all teams within Adult Social Care.

Revenue Cost	£zero	Source of Revenue Funding	Not applicable
Capital Cost	£400k one off	Source of Capital Funding	Disabled Facilities Grant

	£182-236k - ongoing		
One off cost <input checked="" type="checkbox"/>	Ongoing cost <input checked="" type="checkbox"/>	Saving Proposal <input checked="" type="checkbox"/>	Income generation proposal <input type="checkbox"/>

Required information to be completed by Financial/Legal/ICT/HR partners:

1. Finance Advice:

Adult Social Care continues to have significant challenges in delivering a balanced budget, which includes the delivery of savings of a minimum of £4.2m in 2019/20 and a further £2m in 2020/20. This business case targets an opportunity to invest in technology enabled care and at the same time reduce the amount of direct face to face support where a service user will remain safe in their own home. The plans are ambitious but are based on national work implemented in other parts of the country that have delivered cashable savings and reduced the escalation of costs. It is anticipated that the savings from this project will contribute significantly to the Adult Social Care savings target over the next 4 years. It is anticipated that net savings from the investment in TEC and increasing service users who have TEC installed to from a current base of 700 to c1500 will be in the range of £1.7m to £4.0m. The actual benefits from the increased number of service users and the operating costs will be refined and firmed up during the implementation of the new model. The assumptions made in terms of the growth in the number of service users and benefits that accrue from increased number of installations based on knowledge of other implementations suggests that there may be an opportunity to realise greater savings than suggested in the FBC.

Finance Business Partner: Neil Sinclair, 05/04/2019

2. Legal Advice:

The Procurement Regulations and the Council own Procurement Rules should be complied with in respect of all commissioning of external services and procurement of equipment etc. Where any employees are impacted by the proposals, appropriate consultation should be undertaken. Wherever there is a proposal to reduce packages of care and/or replace with or otherwise employ TEC, this should be the subject of proper and effective consultation with key stakeholders (e.g. service users), and all appropriate equalities impacts should be identified and assessed. Consideration should also be given to how procurement activities will support the Council's social value policy.

Legal Team Leader: Eric Andrews, 19/02/2019

3. Implications on IT:

There is no doubt that technology may offer the opportunity to enrich or even transform lives or citizens and IT is supportive of this initiative. There are, however, two main elements in the business case that will require further IT consideration.

Section 18.3.1 - Health care professionals are out of scope; the implications of this need to be clearly understood and acknowledged.

Section 18.3.6 – As noted, the aspirations for new IT requirements are significant and complex. This will require time and resources to design and develop and will need input from existing as well as future suppliers.

IT Team Leader: Ian Gale, 17/02/2019

4. HR Advice:

The proposal to develop a TEC Service within Bristol City Council will have an impact on our current and future workforce. Some of the TEC solutions could mean that some tasks are no longer required to be performed by our employees, and therefore could have an impact on job role/employment. There will be training implications for employees for some TEC solutions as they will be new to employees and may have significant training requirements. Longer term we may need to review our recruitment strategy for this work group and re-write job descriptions as we will be looking for different skills and experience going forward.

All changes that affect the workforce and the way they work will be fully consulted on through our Sub JCC and DJCC with our employees and their local trade union representatives.

HR Partner: Lorna Laing, 19/02/2019

Background Documents: Better Lives Programme Cabinet Report 3/4/2018

EDM Sign-off	Jacqui Jensen	7 th March 2019
Cabinet Member sign-off	Cllr Holland	25 th March 2019
For Key Decisions - Mayor's Office sign-off	Mayor's Office	8 th April 2019

Appendix A – Further essential background/detail on the proposal 1. Full Business Case	YES
Appendix B – Details of consultation carried out - internal and external	NO
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment 1. Risk Log	YES
Appendix E – Equalities screening/impact assessment of proposal 1. Equalities Impact Assessment relevance check	YES
Appendix F – Eco-impact screening/impact assessment of proposal 1. Eco-Impact Assessment	YES
Appendix G – Financial Advice See page 46 of appendix A.1	YES
Appendix H – Legal Advice See page 50 of appendix A.1	YES
Appendix I – Exempt Information	NO
Appendix J – HR advice See page 47 of appendix A.1	YES
Appendix K – ICT See page 49 of appendix A.1	YES

A. PROJECT SUMMARY INFORMATION

Project Name:	Technology Enabled Care Service Model		
Project ID (if known):	18 ST 125.6		
Cabinet Member:	Cllr Holland	Lead Officer (Sponsor):	Terry Dafter
Directorate(s):	People Growth and Regeneration	Associated service areas:	Adult Social Care Accessible Homes Bristol Operations Centre
Report lead author(s):	Mandate: Oliver Buell, Project Manager Outline Business Case: Oliver Buell, Project Manager Full Business Case: Oliver Buell, Project Manager		
Report recipients:	Terry Dafter, Stephen Beet, Pete Anderson, Tom Gilchrist, Neil Sinclair, Merlin Jones, Sarah Hooper, Amy Kedward, Alison Barnfather, Lee Ford, Lorna Laing, Sam Marsh, Ian Gale, Will Lewis, Eric Andrews, Gina Smalley		

B. ORGANISATIONAL CONTEXT

Alignment to corporate theme(s):	<p>Empowering and caring: Working with partners to empower communities and individuals, increase independence, support those who need it.</p> <ul style="list-style-type: none"> Provide 'help to help yourself' and 'help when you need it' through a sustainable, safe and diverse system of social care and safeguarding provision, with a focus on early help and intervention. <p>Well-connected: Taking bold and innovative steps to make Bristol a joined up city.</p> <ul style="list-style-type: none"> Make progress towards being the UK's best digitally connected city. Reduce social and economic isolation and help connect people to people. <p>Wellbeing: Creating healthier and more resilient communities where life expectancy is not determined by wealth or background. Embed health in all our policies to improve physical & mental health and wellbeing, reducing inequalities and the demand for acute services.</p>					
Project category:	<input checked="" type="checkbox"/> Saving delivery	<input checked="" type="checkbox"/> Compliance/Statutory	<input checked="" type="checkbox"/> Risk reduction	<input checked="" type="checkbox"/> Cost avoidance	<input checked="" type="checkbox"/> Improved outcomes	<input checked="" type="checkbox"/> Enabling
Council Budget saving delivery:	<p>This project is part of the Better Lives programme.</p> <p>Budget reference: FP33</p> <p>Savings description (as stated in approved budget): We'll be looking to deliver a transformation programme to change our adult social care services in order to ensure a more joined up and efficient service for the city. The programme will focus on ensuring people have the right level of care and ensuring residents can maximise their own independence, ensuring commissioning decisions can be better investigated to ensure good investment; and making sure our teams can work more efficiently and effectively with our partners.</p>					
		19/20	20/21	21/22	22/23	Full yr

		£'000s	£'000s	£'000s	£'000s	recurring £'000s	
	Saving	4,213	2,000	0	0	6,213	

C. DOCUMENT CONTROL

Sections complete:	<input type="checkbox"/> Mandate <input type="checkbox"/> Outline Business Case <input checked="" type="checkbox"/> Full Business Case																																														
Document status:	<input type="checkbox"/> Draft <input checked="" type="checkbox"/> Final																																														
Document owner:	Oliver Buell																																														
Version control	<table border="1"> <thead> <tr> <th>Version</th><th>Author(s)</th><th>Description</th><th>Date</th></tr> </thead> <tbody> <tr> <td>V00_01</td><td>Oliver Buell</td><td>First draft</td><td>14/03/18</td></tr> <tr> <td>V00_02</td><td>Oliver Buell</td><td>Update to new template and additional information added, incorporated comments received from Business Partners and Service Director</td><td>22/03/18</td></tr> <tr> <td>V01_00</td><td>Oliver Buell</td><td>Mandate approved by Programme Board</td><td>23/04/18</td></tr> <tr> <td>V01_01</td><td>Oliver Buell</td><td>OBC first draft</td><td>05/07/18</td></tr> <tr> <td>V01_02</td><td>Oliver Buell</td><td>Updated to include professional views</td><td>13/07/18</td></tr> <tr> <td>V02_00</td><td>Oliver Buell</td><td>OBC approved by Programme Board and outstanding professional views incorporated</td><td>23/07/18</td></tr> <tr> <td>V02_01</td><td>Oliver Buell</td><td>FBC first draft</td><td>20/01/19</td></tr> <tr> <td>V02_02</td><td>Oliver Buell</td><td>PAC comments and input</td><td>17/02/19</td></tr> <tr> <td>V02_03</td><td>Oliver Buell</td><td>Professional views incorporated</td><td>19/02/19</td></tr> <tr> <td>V02_04</td><td>Oliver Buell</td><td>Finalised financial model and added further detail for implementation plan</td><td>05/04/19</td></tr> </tbody> </table>			Version	Author(s)	Description	Date	V00_01	Oliver Buell	First draft	14/03/18	V00_02	Oliver Buell	Update to new template and additional information added, incorporated comments received from Business Partners and Service Director	22/03/18	V01_00	Oliver Buell	Mandate approved by Programme Board	23/04/18	V01_01	Oliver Buell	OBC first draft	05/07/18	V01_02	Oliver Buell	Updated to include professional views	13/07/18	V02_00	Oliver Buell	OBC approved by Programme Board and outstanding professional views incorporated	23/07/18	V02_01	Oliver Buell	FBC first draft	20/01/19	V02_02	Oliver Buell	PAC comments and input	17/02/19	V02_03	Oliver Buell	Professional views incorporated	19/02/19	V02_04	Oliver Buell	Finalised financial model and added further detail for implementation plan	05/04/19
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EXECUTIVE SUMMARY: DECISION REQUIRED

Full Business Case (FBC) stage

Project context summary:

Care Technology is a key enabler of the Better Lives programme. By increasing the use of Technology Enabled Care (TEC) it will enable citizens to live longer at home and within their own communities. In turn this will lead to a reduction in the proportion of adults being supported by more-costly residential/nursing provision for lengthy periods of time.

Working in a more joined up way also delivers benefits to the local health economy. Providing TEC before patient release from hospital to build patient confidence in its use, developing greater awareness and understanding of how consumer technology is increasingly supporting health monitoring and benefits delivery as well as using TEC as part of the primary care services can drive greater patient and user satisfaction and confidence at same or less cost.

Currently TEC rates of referral by the Council and its partners are low. In the summer 2017, PA Consulting

was commissioned to examine the scale of current service, future potential and benefit to the care and health economy by developing a more proactive and targeted use of TEC. The resultant report recommended that all aspects of the current system could be significantly improved if commitment and investment were made in development and delivery of a service model designed to maximise the value of care technology across Bristol.

The intervening time-period has seen the council assess what is available in market and what other council's do, consider and further develop its outline business case for adopting a new approach to TEC use and has resulted in the development of this Full Business Case.

The business case concludes that the drivers for change continue to be:

- Rising costs of residential and domiciliary care
- Access to sufficiently well-trained and resilient pool of care staff
- Rising demand for independence and choice amongst the care population living with complex needs
- Continued and ongoing pressure on public service budgets

The opportunities presented by a TECS hub model designed to assess for and commission TEC at the earliest point of awareness is what this business case is founded upon. It is enhanced by consideration of immediate join-up of the TEC service with the Accessible Homes Service to exploit the future design and delivery of smart and connected homes. It is also considered the best option to build the council's capability and capacity in readiness for future join up with health partners to deliver a truly person-centred service.

Any key changes since Outline Business Case approval:

There are no significant changes to the decision environment and influencing factors since the determination of the OBC and choice of Preferred Option.

This Full Business Case will set out the detail underpinning delivery of the Preferred Option, building on the information in the Outline Business Case and providing greater detail or challenge of assumptions, risks and opportunities developed in the OBC which are now better able to be addressed to assure the Council of its choice and direction in delivery.

Recommended option:

The Preferred option is to develop a TECS Hub aligned to Care Direct as a single front door, Bristol Operations Centre as a monitoring service and combined with the Accessible Homes service. Integration between existing council services that support people living at home seems a logical step in providing a simple, accessible and single platform through which users, carers, practitioners and commissioners can understand what the council has to offer and how to access it. The Hub will also draw on the council's insight and intention to develop a future predictive demand analytics capability to ensure that support is targeted at where it is most needed and delivered in the most cost-effective manner.

Designing the service around the needs of existing and future users as well as the future and emerging trends of in-home technologies will facilitate buy-in from the different services, join-up with suppliers and partners around the new approach and ultimately provide a better service for the citizens of Bristol.

By keeping procurement and installations in-house, the service will maintain greater control over the matching, deployment and de-commissioning/re-use of equipment and services. The council consequently bears the risk of getting the match of people to product right and the testing and deployment in the home environment correct as part of the end to end TEC service. The council will build a capability of its own and be better able to manage supplier relationships and track assets deployed as it builds its capabilities.

This close to the user approach makes it more capable of generating user confidence in uptake not just in ASC but moving into Children's Services in the future. Working with partners in health will also mean that the service will be able to better support a reduction in e.g. Delayed Transfers of Care (DTOC) by

prioritising installations that enable people to return home from hospital.

Anticipated cost/benefit profile for preferred option delivery:

Preferred Option: TECS Hub incorporating Accessible Homes.

Low scenario

£'000	Yr 0	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5	Total
Total	(19/20)	(20/21)	(21/22)	(22/23)	(23/24)	(24/25)	
New Costs	£300	£	£	£	£	£	£300
Opportunity Costs	£100	£	£	£	£	£	£100
Ongoing costs		£182	£198	£205	£209	£212	£1,006
Total costs	£400	£182	£198	£205	£209	£212	£1,406
Gross savings		£396	£537	£690	£725	£741	£3,088
Net savings	-£400	£214	£339	£484	£516	£529	£1,682

High scenario

£'000	Yr 0	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5	Total
Total	(19/20)	(20/21)	(21/22)	(22/23)	(23/24)	(24/25)	
New Costs	£300	£	£	£	£	£	£300
Opportunity Costs	£100	£	£	£	£	£	£100
Ongoing costs		£186	£208	£216	£229	£236	£1,075
Total costs	£400	£186	£208	£216	£229	£236	£1,475
Gross savings		£679	£958	£1,148	£1,272	£1,371	£5,428
Net savings	-£400	£493	£751	£932	£1,043	£1,135	£3,953

Full assumptions and sensitivity analysis for each scenario modelled are found in the appendix. All figures have been signed off with Neil Sinclair.

Confidence level	Supporting commentary
75%	<p>In order to increase confidence in delivery of a successful service model, an external consultancy has been appointed. They have provided:</p> <ul style="list-style-type: none"> • Evidence of good practice that builds upon the Outline Business Case position • Support to test, refine and develop this business case, introducing greater detail into the cost and benefit assumptions. • Initial service model design following agreement of Service Vision and Design Principles – clarifying what the new service model could look like - to aid both decision-making and planning for transition from the 'as is' to the 'to be' model. • High level implementation planning. <p>The Council's confidence in the strategic direction and ability to deliver the TECS Hub has increased with the support and experience of the consultancy – which has delivered end-to-end technology enabled independent living service models in other Local Authorities.</p> <p>Since approval of the Full Business Case by the Better Lives programme board, the</p>

sensitivity analysis for the figures provided has progressed from 50% to 75% as the model was further developed and the evidence base built.

Identified sources of funding (including any shortfall):

- Implementation costs of up to £300k will be funded from Disabled Facilities Grant.
- Ongoing costs of £182-236k per annum will be funded from Disabled Facilities Grant.

Other anticipated key measureable (non-financial) benefits:

Benefit type	Setting of care/cohort	Benefit
Service outcomes – financial (for the purposes of this business case)	Home/domiciliary care	<ul style="list-style-type: none"> • Current and future clients may be able to reduce purchased domiciliary hours for non-hands-on care • Current and future clients will be able to stay in their homes for longer, delaying the need for residential care
	Residential care	<ul style="list-style-type: none"> • Future clients will be able to stay in their homes for longer, avoiding the need for residential care
	LD Travel	<ul style="list-style-type: none"> • Technology support for LD/PD users will support them to travel independently without an accompaniment
	LD Supported Living	<ul style="list-style-type: none"> • A reduction in need for sleep-in services for LD people in supported living
	LD Carers	<ul style="list-style-type: none"> • Reduced respite care for LD/PD family carers
Service outcomes – non-financial (for the purposes of this business case, but could be quantified in the future)	Reablement	<ul style="list-style-type: none"> • Acceleration of return to independence
	DTOCs	<ul style="list-style-type: none"> • Faster discharge and potentially smaller packages due to provision of TEC at discharge
	LD Supported Living – carer support	<ul style="list-style-type: none"> • Reduction in paid carer support for LD people in supported living
	Carers	<ul style="list-style-type: none"> • Prevention of carer breakdown
	Users with complex needs	<ul style="list-style-type: none"> • Various outcomes dependent on the need (promoting medical adherence, safer homes, travel support, sensory support, epilepsy support)
	Mental health	<ul style="list-style-type: none"> • Support for those with dementia to increase independence
	Children and Young People	<ul style="list-style-type: none"> • Various outcomes dependent on the need. Could support improvements in attendance, increased levels of punctuality and independent travel, greater participation and engagement in lessons and beyond classroom, reduction in fixed term exclusions
Careline and service benefits – quantifiable but non-financial	Referrals	<ul style="list-style-type: none"> • Increase in referrals as a % of total cohort size
	Connections	<ul style="list-style-type: none"> • Increase in live connections • Increase in length of connections for live users
	Installation	<ul style="list-style-type: none"> • Lower time between referral and install
	Staff satisfaction with the service	<ul style="list-style-type: none"> • Increase in staff satisfaction with the service (this is not currently measured)
	Resident satisfaction with the service	<ul style="list-style-type: none"> • More widespread measurement of resident satisfaction of the service (the survey is based on a small number of clients currently)
Careline and service benefits –non-financial and non-quantifiable	Alignment with Adult Social Care strategy	<ul style="list-style-type: none"> • The Careline service meets the outcomes and agreed relevant indicators as set by the council
Developing a Centre of Excellence		
Culture change	Aligns to vision and design	<ul style="list-style-type: none"> • Support required for transformation across the council can be channelled through the Hub. Potentially developing a TEC showroom to prove and demonstrate the efficacy of

		care technology can inspire confidence amongst practitioners, users and council leadership;
Training	Aligns to vision and design	<ul style="list-style-type: none"> There will be a high and ongoing need for training. Consideration is needed of a training facility for new and existing practitioners providing valuable hands-on experience;
Testing centre for new technology	Aligns to vision and design	<ul style="list-style-type: none"> Developing (with suppliers) a rigorous test and trial service can benefit BCC profile and leading edge as new technologies come onto the market
Showcasing	Aligns to vision and design	<ul style="list-style-type: none"> In situ-assessment: for people with complex conditions, the CoE can be used to assess people in situ before installation in home where appropriate

Suggested project tolerances:

Tolerance areas	Project level tolerance	Escalation route	Control & tracking document(s)
Time +/- amounts of time on target completion	+1 month (key programme level – zero)	Better Lives programme Manager Programme Board	Project Plan Business Case Highlight Report
Cost +/- amounts of planned budget	+/- 10%	Programme Board	Project Plan Business Case Highlight Report
Quality Defining quality targets in terms of ranges	Zero	Programme Board	Requirements Document Business Case Highlight Report
Scope Permitted variation of the scope of a project solution	Zero	Programme Board	Project Plan Business Case Highlight Report
Benefits +/- amounts of planned benefit delivery	+/- 10%	Programme Board	Business Case Highlight Report
Risk Limit on aggregated value of threats and any individual threat (e.g. threat to operational service versus threat to organisation)	Risks rated as Red or greater must be escalated. Residual risks only – mitigate within project structures	Better Lives programme Manager Director: Adult Social Care Programme Board	RAID Log Highlight Report

Decisions requested for Full Business Case sign-off:

- Approve implementation of the Technology Enabled Care Service.

Total spend to date - New costs:	£23,660
Total spend to date - Opp costs:	£12,860

New costs to deliver project:	£300,000
Opportunity costs to deliver project:	£100,000
Funding required:	£300,000
Funding source(s):	Disabled Facilities Grant
Est. timescale for project delivery:	March 2020

MANDATE

See appendix B for mandate.

OUTLINE BUSINESS CASE

See appendix B for Outline Business Case.

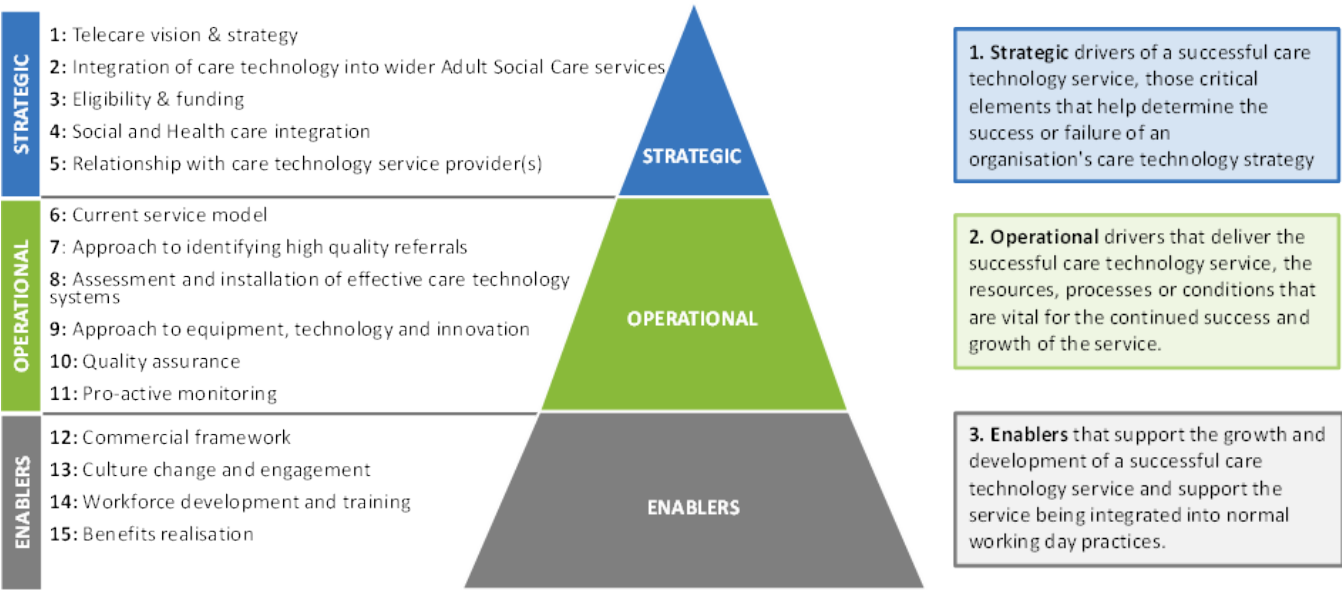
FULL BUSINESS CASE

17. Project overview

Technology Enabled Care (TEC) is a key enabler of the Better Lives programme. By increasing the use of TEC it will support citizens to live for longer within their own communities, leading to a reduction in the proportion of adults being supported by residential/nursing provision for lengthy periods of time. It has also been shown to reduce pressure on the local health economy e.g. by enabling earlier hospital discharge, shorter hospital stays for general conditions and even preventing some hospital admissions.

As rates of TEC referrals by the City Council are currently low, circa 800 each year, PA Consulting was commissioned to perform a TEC diagnostic. The diagnostic (illustrated below) examined all aspects of the current system against industry and sector good practices against three dimensions – strategic factors, operational factors and enabling factors.

Figure 1: Care Technology review of current service – framework used



The Diagnostic review concluded that the Council could maximise the value of care technology in developing a new service model and building upon the foundations already in place. To do so the new model would need to take account of the following recommendations:

- Develop a clear **vision, strategy and business case** for care technology in Bristol.
- Embed the **culture change and engagement** required to drive increased volumes of high quality referrals.
- Develop **simple and effective care technology pathways** for both health and social care.
- Define a **central hub that brings together knowledge and skills** and is visible and easily accessible to all care professionals.

- Embed a **quality assurance framework into the service model** for care technology
- Robustly **measure the financial and non-financial benefits** of care technology.
- Commission **delivery of the agreed commercial model** that aligns with the service model.

Care Technology covers a broad spectrum of technology enabled care services (TECs) including telecare, telehealth, telemedicine, tele-coaching and self-care services. All of these services share the aim of putting people in control of their own health, wellbeing and support independence, keeping people safe, whilst offering them and their families' peace of mind.

Bristol City Council currently provides an in-house TEC service relying upon its own staff to understand and refer users into care technology services; an in-house function to match commission to supply and contracted suppliers to provide and install the technology. For clarity, a TEC Service model typically embraces the following end to end stages of delivery:

Stages of delivery in a good practice model



The current service provided by Bristol City Council does not deliver the full range of available TEC (also known as Assistive Technologies) but consists of a simplistic telecare pendant service and a catalogue of products.

The current services delivered by the Council could be described as designed to meet basic to moderate needs.

The following diagram illustrates the nature of technologies within the proposed scope of the TECS Hub delivery.

Typical definitions of Assistive Technologies showing in and out of scope functionality

Assistive technology – included in this business case	Telecare	<ul style="list-style-type: none"> Typically, telecare services are provided through local authorities, housing associations, industry services and voluntary organisations. They include personal alarms, a wide range of home sensors (e.g. fire and flood detectors) and activity monitoring. Alerts are monitored by remote control centres that can respond quickly to emergencies.
	Mobile health apps	<ul style="list-style-type: none"> Fitness and health/care apps (including mental health) are available for use on smartphones and tablets and are often referred to as mobile health or mHealth.
Not included in this business case	Telehealth	<ul style="list-style-type: none"> Telehealth and telemedicine involve video and phone connections between patients and clinicians as well as remote monitoring by clinicians of long term conditions (e.g. diabetes) using medical devices in the home (e.g. blood pressure and glucose monitors).
	Digital health	<ul style="list-style-type: none"> eHealth, Health IT and digital health are broader terms that can also include web-based home health support systems as well as electronic health and care records used by practitioners. Increasingly, they cover predictive data analytics, machine learning, care robotics, virtual reality, voice operable systems and artificial intelligence.

The scope of this current project excludes any health and medical needs but will refer to the future potential of exploring a more joined up service with health colleagues.

The approved Mandate and Outline Business Case found in appendix B propose a service model that will deliver on the areas outlined above. This Business Case builds on the previous work to provide greater detail of the service model and provide increased assurance on costs, benefits and delivery of the required outcomes.

18. Preferred Option: TEC Service Hub

To re-cap from the OBC, the drivers for change to the current service are summarised as follows:

- Rising costs of residential and domiciliary care
- Access to sufficiently well-trained and resilient pool of care staff
- Rising demand for independence and choice amongst the care population living with complex needs
- Continued and ongoing pressure on public service budgets

Below is an extract from the stakeholder survey (of over 100 BCC practitioners) undertaken as part of the TEC Diagnostic and summarises why current TEC services need to be reformed.

- There is consensus that there is significant opportunity to deliver greater outcomes for patients, service users and the local health and social care economy by creating a more coherent, effective and sustainable service model.
- 92% of staff surveyed believe TEC improves outcomes for their clients. However, the opportunity to capitalise on current interest and support for improved outcomes through care technology are being missed.
- There is a fragmented approach across Health and Social Care. For example, there is no direct access to referrals for Health teams, and a potentially effective TEC trial taking place at Southmead has no reporting mechanism back into BCC.

- The current operational processes are unnecessarily complex for practitioners navigating referral pathways.
- Referring for equipment rather than outcomes relies on all practitioners having significant expertise and knowledge, and whilst there are pockets of excellent expertise and advice across BCC this capability is not widespread or easily accessible to all that need it.
- This study has identified significant confusion over eligibility and funding for care technology equipment and services. There is a lack of clarity about the role of care technology and outcomes being sought, and there are no eligibility criteria.
- Practitioners and operational staff reported there is not a clear QA framework, which is required to facilitate learning and continuous improvement. This would give confidence to both staff and service users that they are being heard. If effectively deployed, a robust QA framework will facilitate service improvements and adaptations.
- There have been a number of attempts to promote care technology through established teams, training and engagement, but these have not been sustained and embedded. The remnants of these efforts are dispersed in the organisations as pockets of excellence but are not brought together in a structured and effective way.
- The lack of an immediate replacement for TEC Lead after she left in January 2017 has left practitioners feeling unsupported and lacking confidence, despite the best efforts of the TEC Champions Network, which requires a more robust mechanism for feedback than ad-hoc reports at TMTMs.
- There is a strong desire to understand the impact of care technology and the principles of benefits realisation are understood, although the operational processes and systems have not been set up to enable this and they are inconsistently applied.

The Council must proactively and professionally respond to these issues and make good use of the opportunities presented by a TECS hub model designed to assess for and commission TEC at the earliest point of awareness.

The Preferred Option from the OBC is to design and deliver a service that brings together all TEC activity within BCC into a single service hub. Furthermore, the new service envisages an enhanced version of existing service delivery combined with the existing Accessible Homes (AH) service to deliver increased join-up for service users and tenants. It is enhanced by consideration of immediate join-up of the TEC service with the Accessible Homes Service to exploit the future design and delivery of smart and connected homes. It is also considered the best option to build the council's capability and capacity in readiness for future join up with health partners to deliver a truly person-centred service.

The need for a new TECS Hub model is founded on the belief that:

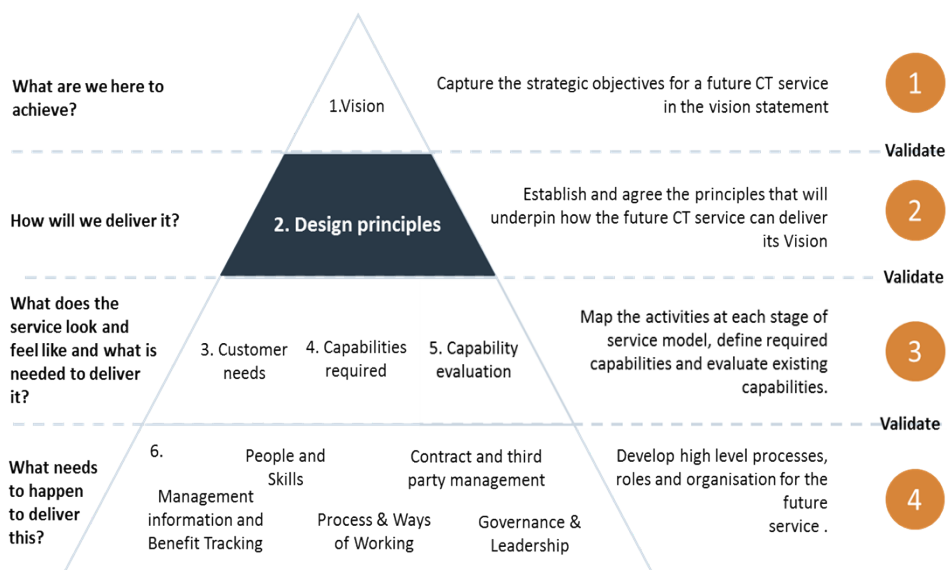
- **Care Technology has an important role to play in managing demand for care and support services.** TEC has the potential to maximise independence, improve outcomes and provide financial benefits, with 87% of 112 respondents in a recent study considering care technology to be 'important' or 'very important' for their role. Preliminary modelling indicates that BCC is forecast to be c. £800k better off in 2 years with a transformed TEC service compared to no change.
- **Leadership and management of TEC has been inconsistent.** The use of TEC has been promoted, trialled and then allowed to fade time and again. The pace and profile of TEC in market and social care use means that we cannot ignore what is available. We must commit to a service to avoid lots of different approaches are being taken with TEC provision across PSR pathways and care organisations leading to wasted cost and effort through duplication.
- **A rationalised service model supported by a central hub delivers more and better.** The hub would create a professional and connected approach amongst the service practitioners, users and community of interest. The joined-up approach will facilitate culture change towards use of TEC, facilitate consistent training, communications and provide a consistent source of trusted and authoritative information about TEC as it continues to develop.

- **The need for quality and assurance of TEC can consistently be met.** The Hub will function as a quality assurance mechanism ensuring referrals were appropriate, installed effectively and well-received by service users. The hub would serve as a clearing-house for feedback and act as a mechanism to facilitate learning and continuous improvement. A robust feedback system would give confidence to practitioners across Adult Social Care and Health at the same time as providing comfort to service users and integrating with Bristol's mission to be an authority responsive to citizens' needs. Clear feedback and accountability would provide a mechanism by which suppliers could be effectively commissioned and managed, as well as highlighting opportunities for collaboration.
- **Benefits monitoring and tracking is incorporated from the outset in the service design** and referral pathways. Although this option is currently available on the LAS form, its inconsistent application undermines confidence in the results, even when it is correctly used. There is no current BCC process to audit whether these expected savings are in fact achieved.
- **Transforming the care technology service model across the whole system in Bristol is based on strong evidence.** The use of technology supports a user centred, strengths-based approach and enables oversight and coordination between health, care and housing needs. To realise the opportunity of an integrated benefits-led model for the provision of TEC, this business case will focus on what can be done initially within the council and latterly with the support and involvement of partners.

18.1 Design Principles driving the development of the TEC Service Model

Design Principles are an essential aspect, not only of the initial design process, but also the ongoing development and performance management of the service. The Design Principles, and the approach they set out, become the yardstick against which alignment of the service against strategic goals, cultural values in delivery and behaviours of practitioners, carers and suppliers involved in the service become marked.

Illustrating the long-term importance of Design Principles



The development of the Design Principles and approach for the TECS Hub stem from the Better Lives strategy defined and adopted by the Adult Social Care function. It embraces the concept of the strengths-based approach and has the following statement of vision and intent:

Vision statement:

People can get the right help at the right time to promote independence and to prevent, reduce or delay the need for long term support.

Statement of Intent

- Maintain quality services with people at the heart of what we do.
- Make cost savings whilst holding our ambition to improve outcomes.

To drive the development of the TECS Hub model the following Design Principles have been proposed, reviewed and agreed by the Programme Board. It is requested that they are reviewed and agreed by the Cabinet as part of this Business Case.

Vision and Design Principles for the TECS Hub.

Vision <i>All citizens, with a support need, their carers and the practitioners who work with them, can refer into a joined-up and innovative service which will consider their circumstances and promptly provide the right technologies to enable them to stay safe, independent and in their homes for longer.</i>	
1. The approach should deliver...	The right help at the right time to promote independence and to prevent or delay the need for long term support
2. The service model should result in...	Improved outcomes at same or less cost for more people so that they feel supported, independent and safe
3. The service model should be...	Easy to access and understand for service users, professionals, carers and suppliers delivering seamless service from a central hub
4. The service model should be accessible to...	All adults with care and support needs, including young adults transitioning to adulthood and their carers
5. The service offer should include...	An expanding range of market solutions (consumer or care related), creatively applied to each individual and their circumstances
6. The approach to funding and eligibility should be...	Take a joined-up view of demand (appropriately using predictive analysis) for different types of care and support, prioritising cost-effective, sustainable and demonstrable benefits
7. The approach to service delivery should be...	Professional, caring, efficient and value-adding, proactive and responsive – drawing together health and care service resources around the users needs
8. The approach to practitioner support should be...	Informative, inspiring and focused on practical uses with case stories that show AT complementing practitioner strengths and rewarding their efforts

These principles have been developed from consideration of the key messages underpinning:

- The BCC Vision and Statement of Intent for ASC
- The seven areas recommended for action following the TECS Diagnostic
- Good practice principles applied by other councils deploying TEC services and
- The service requirements developed in conjunction with service teams

The Design Principles are used to sense-check and prioritise how the Service Model should be structured and operate.

18.2 Development of the TEC Service Model

The TECS Hub is designed to ensure that practitioners across social care (and subsequently health) will be able to confidently assess at first contact TEC needs and refer into the service when they believe TEC would be appropriate. The referrals will be outcomes-based i.e. practitioners will specify the required outcomes and the TEC Service perform an assessment to select appropriate equipment and support for the technology use. The TEC Service will have its performance managed in accordance with the delivery of the qualitative and quantitative benefits of delivering those outcomes for the end user, their support network, the health and care system and of course the impact on future health and care funding.

The TEC assessment currently sits outside of the Care Act assessment. The new model will address what is required to mainstream TEC assessment as part of the current assessment processes including the AH assessment for adaptations in citizen's homes. A combined assessment at the earliest point of presentation of need will enable care TEC, physical support and other adaptations to form a cohesive, cost-effective package of support suited to the user need, breaking the current cycle of multiple, independent assessments which often do not view TEC as a mainstream enabling approach to independent living needs.

The referral pathway envisaged by the new service model also expects to be made available to people external to Bristol City Council's current service user community e.g. self-funders with health and/or care needs and would be relevant to all ages from young adults transitioning into adulthood to later years. This future broadening out of the service will generate additional income for the Service as has been witnessed in other forward-thinking

authorities who have deployed such an approach. Close working between health and care commissioners, practitioners and budget holders is essential to maximise both value from delivery and potential income from individual uptake.

Consequently, the new TECS Hub model involves initial referral, assessment of the need and installing/providing training for the equipment or app, maintaining and reviewing, and then collecting or closing the service once it is no longer needed.

The service may typically be delivered in-house (e.g. Staffordshire County Council, LB Hillingdon and Blackburn with Darwen) or through a specialist care technology or managed service provider (e.g. WellBeing, NRS, Millbrook, Johnny Johnson Housing, Riverside, Tunstall, Argenti and so on). The Preferred Option for Bristol City Council is to deliver the transition to the new service model and quality and performance standards in-house with reference to external good practice where appropriate. Increasingly councils are realising the benefits that TEC services can deliver to service users, carers and the local health and social care economy when used as an enabler to transform the way in which adult social care is delivered – if benefits can be tracked, then data and information can be used to inform strategic decision-making and evidence savings.

A focus on cultural change and engagement is essential to drive increased take-up and support people to integrate more digital technology into their lives. It is often the case that the hardest and most essential need for early cultural change lies in the social care and commissioning community more than families, carers and users. Service development over time sees the integration of TEC services into wider social care and health services to ensure best value and user outcomes.

In developing a model for TEC service delivery, it is typical to include the following aspects of functionality and process in design:

- Referral
- Triage (and eligibility)
- Assessment and installation
- Monitoring
- Maintenance
- Review and respond
- Equipment management

Engagement has been carried out with stakeholders across BCC with experience of providing TEC services and who will be involved in the implementation of the future service to ascribe the desired service specifications for each stage above. i.e. *what* is required for effective service delivery.

#	Element	Activities and Characteristics
1	Referral	<ul style="list-style-type: none"> • Needs to reflect service users risks, needs and safety. Reflect the needs of carers. • Proportionate – as short as possible to get the info required • Single system and point of access that is simple for different practitioners from different organisations • Always accessible, including mobile working capabilities (offline back ups required for urgent referrals) • Feedback and assurance that referral received, and communications to enable the referral to be tracked • Referral asks questions that the referrer can answer • Checks consent, capacity and DOLs assessment
2	Home Assessment	<ul style="list-style-type: none"> • Need assessments will not always take place in advance of referrals, but could be commissioned for more complex cases e.g. supported living • Trusted assessor/trusted expert relationship • Joint visit with referrer where necessary • Speed of response should vary dependant on urgency (KPI's to be determined) • Hospital Discharge should give sufficient support to get home, then a home visit to check their needs are being met
3	Equipment Installation	<ul style="list-style-type: none"> • Installation should usually take place as part of the Home Visit • With regard to the needs identified in the referral, convey the benefits so that people understand how it can help them in their lives • Takes account of service user ability to use equipment and how /where the technology would be used so that a judgement can be taken whether it is appropriate • Achieve informed consent, on the basis of whether the service user has capacity or is supported by a family member /carer • Feedback loop to the referrer so that they are aware of the outcome of installation

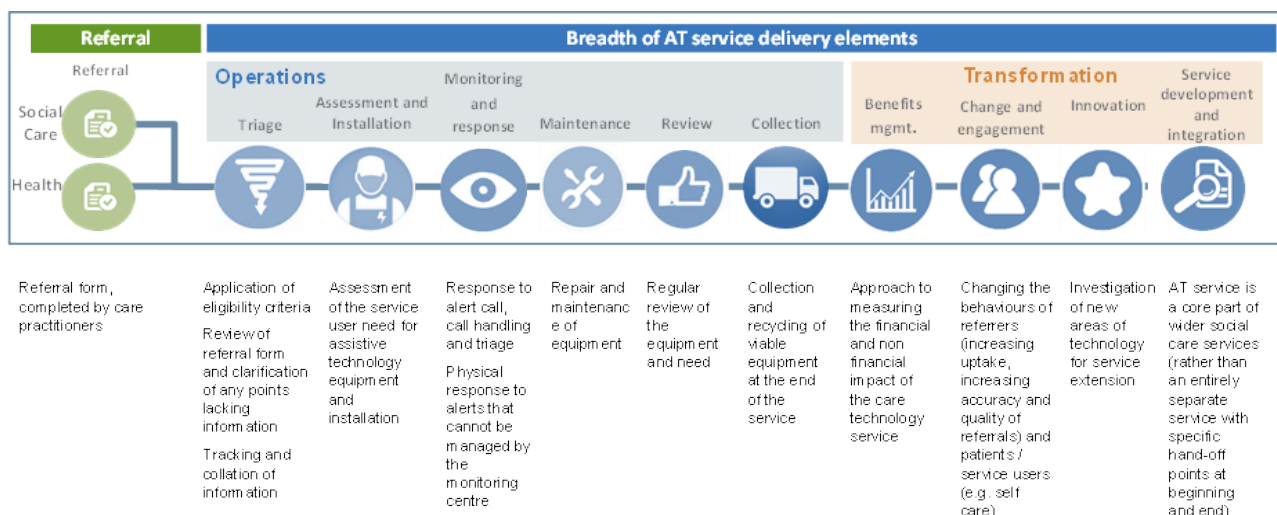
4	Maintenance	<ul style="list-style-type: none"> • Simple mechanisms for requesting maintenance – number to call and contact details provided in a way that they can't be easily lost • Maintenance should be proportionate to the needs that it is fulfilling • Social Care reviews should take the care technology provision into account. Individuals with care technology only could have telephone reviews through the care technology provider (streamlined so that individuals don't have multiple reviews).
5	Call monitoring /pro-active calling and response	<ul style="list-style-type: none"> • Mechanisms for monitoring service user needs, (particularly where care technology is the only service), how they are experiencing the service and changing needs • Link back into care manager if the call history indicates potential issues or changing needs – trigger points defined to result in alerts, with clear escalation routes • Make pro-active calling available in some cases e.g. medication reminders or service users requiring support
6	Review and respond	<ul style="list-style-type: none"> • Ideally there would be multiple response options that can be used appropriately and proportionately • Physical response would help to put many people at ease, but there is a risk that some individuals might over-use it. • Response services should help to keep people at home and provide reassurance. • Make better use of community response solutions • Costs might increase if the response is more substantial, but need to understand within the context of ambulance costs.
7	Decommissioning and recycling	<ul style="list-style-type: none"> • Timely removal of equipment • Communication with referrer / social work teams if the service user is indicating that they want to stop / opt out that would have an impact on their safety • Link to "Tell Us Once" process for when people have passed away and multiple services need to be stopped

Experience shows that the areas of differential in success for service users and commissioners comes from a dedicated focus on managing change and benefits delivery. Good practice indicates that the following functions also need to be considered for early investment and capability development:

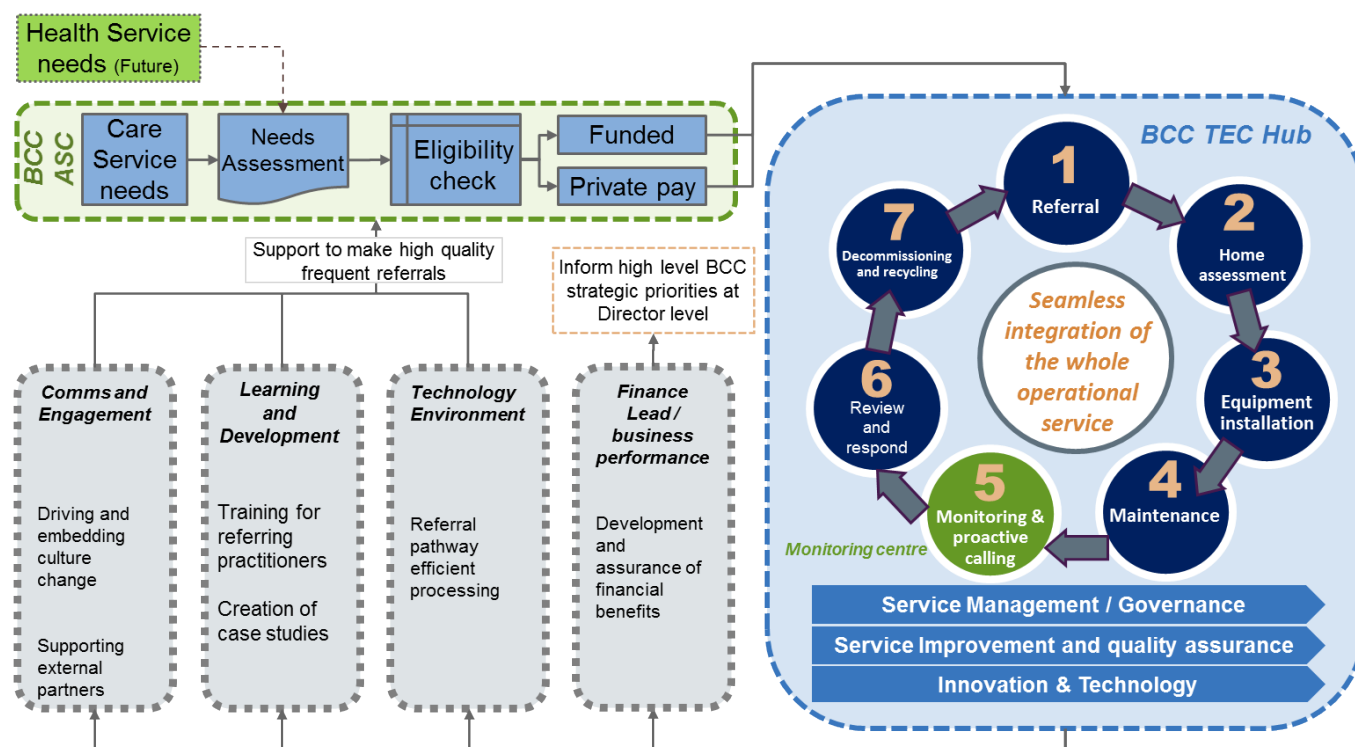
- Change Management
- Benefits realisation
- User and practitioner engagement
- Innovation
- Service development (using analytics and performance data)

This holistic approach is illustrated in the diagram below.

High level design of the future TECS Hub service model



Within a local context the proposed service model looks like this:



Note – it is intended that the Bristol Operations Centre would continue to operate Careline as the monitoring service and Care Direct as the single front door to services - Careline would be notified of new customers by the TEC Service Hub.

18.3 Scope and responsibilities

This section summarises the scope of the project to develop and deliver the Preferred Option as well as indicative scope and responsibilities for the future service model flowing from good practice design experience.

18.3.1 Scope and responsibilities of the project

In scope of the project

- Determination of the Design Principles and approach for the development of TECS Hub
- Development of the relevant structure and operating attributes for the TECS Hub including but not limited to:
 - Operating structure
 - Governance arrangements
 - Policies, procedures and processes including:
 - Eligibility criteria
 - Assessments and reviews of Service Users
 - Referral pathways including hospital discharge
 - Procurement and installation of TEC
 - Equipment storage and maintenance
 - Commercial frameworks and contract monitoring
 - Practitioner training and communication (including Occupational Therapists)
 - Benefits identification, tracking and realisation
 - Impact on and consideration of bundling of TEC budgets e.g. Disabled Facilities Grant/contribution from Health
- Development of the enabling technology environment and core systems enabling integration
- Determination of the supply for future TEC equipment
- Development of qualitative and quantitative service standards for the TEC Service managing the delivery of agreed expectations of Service Users, Referring Practitioners and Commissioning Bodies [Quality assurance framework (e.g. monitoring of TEC and referrals) with feedback and improvement mechanism]
- Developing, accessing and sharing outcomes-based studies of good practice to improve the TEC service and increase awareness of its benefits
- Development of a TEC Champions network aimed at scanning for TEC innovation, review, recommendation and adoption of new TEC when it becomes viable for use in the TEC Service such as robotics.
- Future benefits of TEC Service integration with Health – including joint funding arrangements
- Communication with local and national stakeholders
- Consideration of the impact of TEC within the future development of housing and supported facilities such as extra care and housing under the Better Lives Programme vision and principles.
- Accreditation to the Telecare Services Association Quality Standards Framework.

Out of scope	Any risks/consequences associated with “Out of scope” items
Services currently provided by health care providers – direct referrals from NHS and primary care	An obvious area of future scope of services given the level of benefits that accrue from early patient return to home and wider preventative benefits of cost avoidance
Referrals from local care suppliers – unlikely to be incentivised to make use of referral into TECS	Need to consider the offer of awareness and base training to the care supply community so that they do not dissuade service users from use of TEC in the home
Careline – 24/7 private pay service for help and support to individuals accessing TEC	Careline is managed by Bristol Operations Centre. There is a risk that BOC processes will not be aligned to the processes within Adult Social Care.
ICT hardware of professionals (Mobile Technology project)	If Professional do not have appropriate hardware they may be unable to directly make referrals which could increase the time for installation and/or reduce volume of referrals. Additionally, the hardware can be used to demonstrate TEC such as apps to Service Users. If it is not in place it may reduce uptake of TEC.

18.3.2 Potential scope and responsibilities of the TECS Hub

Responsibilities of the TECS Hub would encompass each stage of the good practice model as well as standard functions expected of any contact management environment.

The **primary responsibilities** rest within Operational Services and are described briefly as follows:

1. Receive referrals
 - Receive TEC referrals from care (and health) sources
 - Complete eligibility assessment
 - Sign-post to self-funding support
 - Accept into TECS
2. Undertake Home Assessments
 - Assess local environment and facilities
 - Ensure safe access arrangements in place for 24/7 cover
 - Attend hospital for pre-discharge visits
 - Make recommendations of suitable technologies for user circumstance
3. Install equipment
 - Manage end to end process either directly or through sub-contract
 - Manage supplier arrangements
 - Ensure seamless contact arrangements with service user e.g. setting up appointments
 - Collect and manage vital information e.g. first responders and key holders
4. Maintain equipment
 - Receive and respond to maintenance enquiries
 - Manage remote fix
 - Arrange maintenance visit/swap of equipment
 - Manage maintenance contracts with suppliers
 - Arrange replacement/alternative equipment
 - Ensure compliance with Portable Appliance Testing (PAT) regulations
5. Monitoring and user management
 - Proactive calls to users to ensure maximum value from experience
 - Monitor any poor/low use of equipment to arrange follow up
 - Manage relationships with first responders and key holders
 - Formal supplier - contract management arrangements
 - Supplier (and partners) relationship management
6. Review and response
 - Ensure 24/7 response to service user and support network needs
 - Maintain and update point of access and first responder information
 - Feed and track response issues/observations into future care needs and analytics
7. De-commissioning
 - Maintain asset lists
 - Review asset use and due dates for return
 - Arrange collection/disposal/recycling
 - Ensure change of needs review and potential re-commissioning

Secondary responsibilities within the Hub rest with the Performance and Resilience role and include:

1. Performance Management
 - Review and revision of end-to-end process performance to identify issues and efficiencies
 - Monitor and report on uptake
 - Contract management of supply arrangements

- Internal SLA management between Care Line and Response services
 - Development of relationships with commissioners, advocates, users and families
 - Accreditation to Telecare Services Association Quality Standards Framework
2. Data security
 - Manage personal record keeping
 - Manage asset record keeping
 - Ensure compliance with data regulations
 - Assure compliance through audit and review
 3. Insight and analysis
 - Undertake analysis of base-line and periodic data
 - Assess trends in uptake, type of equipment for type of needs
 - Invite supplier/user comment on inter-operability
 - Scan market for insight and reports impacting demographics and demand profiles
 - Collaborate with key partners to ensure system value delivery from TECS
 4. Awareness and training
 - Design, develop and deliver awareness programme for practitioners, commissioners and users
 - Design, develop and deliver formal training for personnel within the TECS service relevant to their role
 - Design, develop and deliver formal training for practitioners, commissioners and users relevant to need
 - Deploy regular updates and promotional materials on benefits and good practices
 5. Change management
 - Design change management strategy and approach
 - Develop and engage in cultural change awareness towards acceptance and confidence in the use of TEC within practitioner, commissioner and user communities
 - Drive delivery of success stories through TEC champions
 - Build readiness and pull for change in stakeholder communities (leading to CYP and Health)
 - Track and celebrate benefits of change; capture and review lessons learned
 6. Innovation and horizon scanning
 - Undertake periodic review of products in and coming into market
 - Collaborate with other LAs and suppliers in the identification and development of new products, trends and applied uses
 - Gather, analyse and use user feedback to define new needs for solutions building
 - Good practice promotion and dissemination of BCC TECS experiences and global trends
 - Potential TECS Hub show-room to de-mystify TECs to users and practitioners

18.4 Objectives

The table below sets out an initial view of the objectives for the TECS Hub (flowing from the strategic aims, design principles and industry good practices) together with an indication of Key Performance Indicators that can be used to ensure delivery against those objectives.

More detail of the measures, establishment of baseline positions, timeline for their introduction and achievement will be developed as part of the mobilisation to implementation project.

	Specific	Measurable	Time bounded
1	Clear understanding of BCC's vision for TEC by all stakeholders	Ability to gain FBC sign-off to move into detailed planning and implementation	May 2019
2	Baseline established against which to measure service improvements and	2017 TECS diagnostic updated in 2019	May 2019

	costs		
3	TECS hub in place with oversight of training, communications and provides a consistent source of trusted and authoritative information.	TECS hub in place.	April 2020
4	All BCC Practitioners have received appropriate TEC training and provide appropriate, outcomes-based referrals; ongoing support and training is in place.	% of Practitioners that have completed TEC training. Reduction in inappropriate referrals for TEC. Rolling training programme in place.	April 2020
5	Quality assurance framework is in place supported by systems driven management information	Clear set of performance indicators linked to DP and success measures	April 2020
6	Regular reviews of referrals and efficacy of TEC undertaken and reviewed within governance to learn lessons and improve services.	E.g. % of installations of TEC are reviewed after 3 months Feedback on quality of referrals from Practitioners is available quarterly.	June 2020
7	Financial and non-financial benefits of all installations are recorded and tracked.	TEC is represented on Trajectory Management dashboard – to include number of installations, cost of equipment and financial benefits	September 2019
8	All assessments and reviews of packages of care consider use of TEC.	100% assessments and reviews have considered using TEC.	April 2020
9	Installation of TEC within 2 days of referral to support quicker hospital discharge.	Time taken from referral to installation of TEC. Time taken from referral to discharge from hospital to home.	April 2020
10	20% assessments and reviews result in referral for TEC to TECS Hub.	% of referrals that lead to installation of TEC.	April 2020 – March 2021
11	People seeking tier 3 services (self-funded) are appropriately diverted to provide TEC for themselves.	Number of people signposted to purchase TEC for themselves.	April 2020
12	Increase connections to Careline from 850 to 1,600.	Number of connections to Careline	April 2021
13	Achieve accreditation to Telecare Services Association Quality Standards Framework	Accreditation achieved.	April 2020
FUTURE AIMS			
A	Any commercial models in place include mechanisms for payment by results (i.e. delivery of outcomes is linked to commercial reward).	Contracts in place for all commercial arrangements. All contracts contain payments by results mechanisms.	April 2020
B	Delivered benefits to the local health economy (typically avoided ambulance call-outs, conveyances to hospital, avoided emergency admissions).	Number of avoided ambulance call-outs and emergency admissions.	April 2020
C	Children's services and Health	Number of referrals received from	April 2020

practitioners are able to make TEC referrals along with self-funders.	Health	
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18.5 Quality Expectations

To ensure strategic alignment the Senior Professional Lead of the Better Lives programme will agree the prioritisation of requirements for delivery according to operational impact and budget. The lead within the Better Lives Programme will also ensure that there is a clear articulation of the outcomes expected from the new services and set in place outcome-based measures which are used to validate the extent to which the new service will and does deliver better outcomes than the current services.

Future staged reviews of qualitative delivery should be established within the governance approach during mobilisation. This process will also ensure the capture of lessons learned for future response in service improvement and communication to other organisations doing similar work.

A number of quality assurance processes will be set up during implementation that will become the remit of the TEC Hub during Business As Usual. These may include the below and will be fully defined during mobilisation.

Example approaches to Quality Assurance:

1. Sample approach deep dive – instigate period review of every x referral and conduct a deep dive examination of that referrals pathway all the way through to installation.
2. Survey service users
3. Call Service users
4. Survey practitioners referring to ensure that
5. Create and populate where necessary a complaints and positive feedback log
6. Create and populate where necessary a data security log
7. Review complaints and security incidents on a period (e.g. 6 monthly) basis

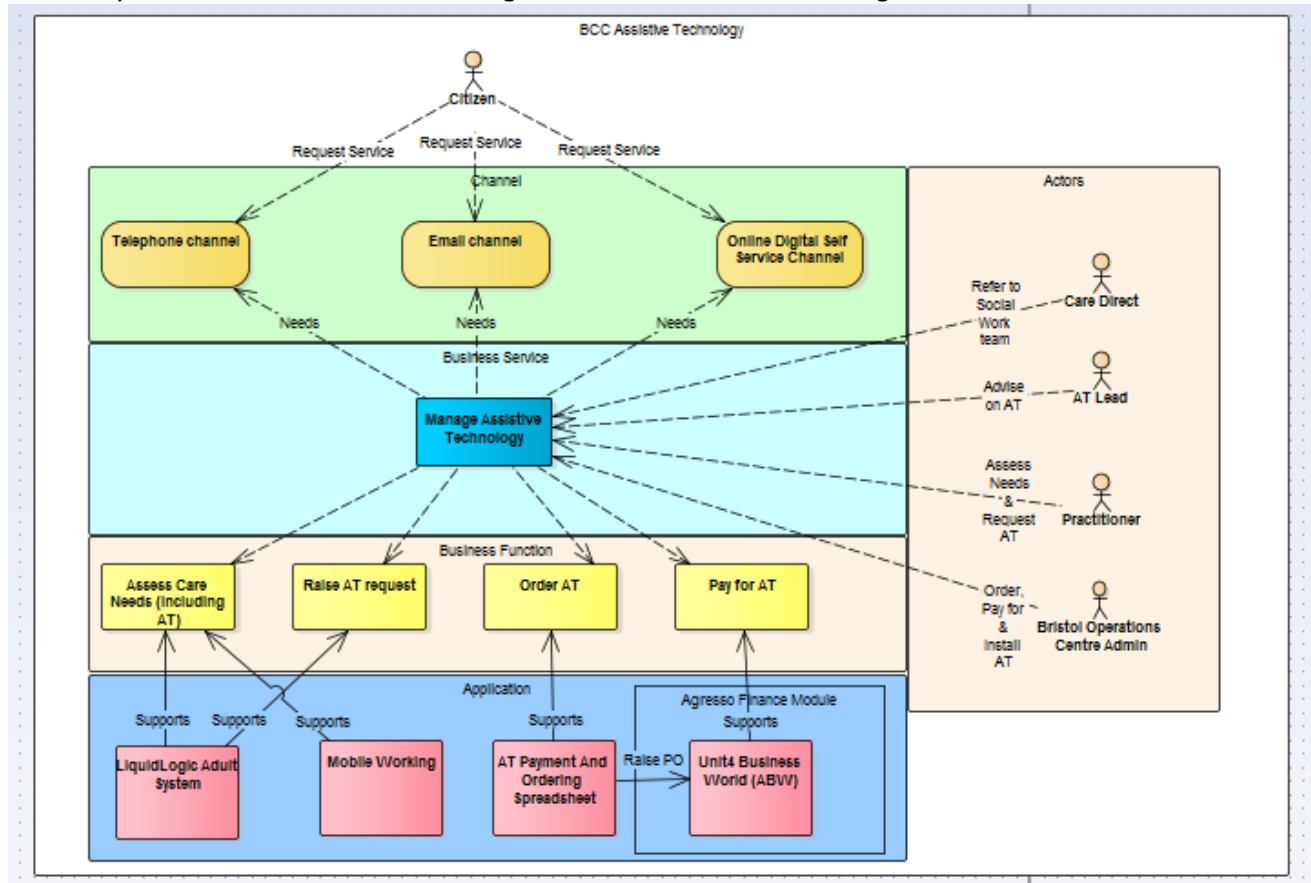
18.6 ICT requirements

As part of the implementation of the TEC Service Model it is important to take a view of the current technology environment and the future needs of the TECS Hub. Some service requirements have been gathered already and some work is already sitting within the future change programme pipeline to replace, upgrade or renew systems and platforms both within ASC and corporately.

This section illustrates the output from a recent and initial piece of work to document the current landscape and start the process of defining the future technology environment. This is a critical area of potential investment and at the very least needs to draw together work already commissioned or planned to be commissioned so that there is a holistic view of the technology needed to enable a joined up service and drive process costs down, accuracy of data capture and use up and ensure overall costs and quality of the new service model are enabled by the technology environment.

18.6.1 Current landscape

The ICT systems for the current TEC arrangements are outlined in the diagram below.



This shows there is scope to fit a new ICT offer around the service that is fit for the future and also helps to maximise the benefits of the service model.

As part of the mobilisation/pre-implementation phase, detailed Service Requirements for the service model will need to be developed against the following key groupings:

- Service Users
- Service user support network
- Suppliers
- Commissioners
- Practitioners

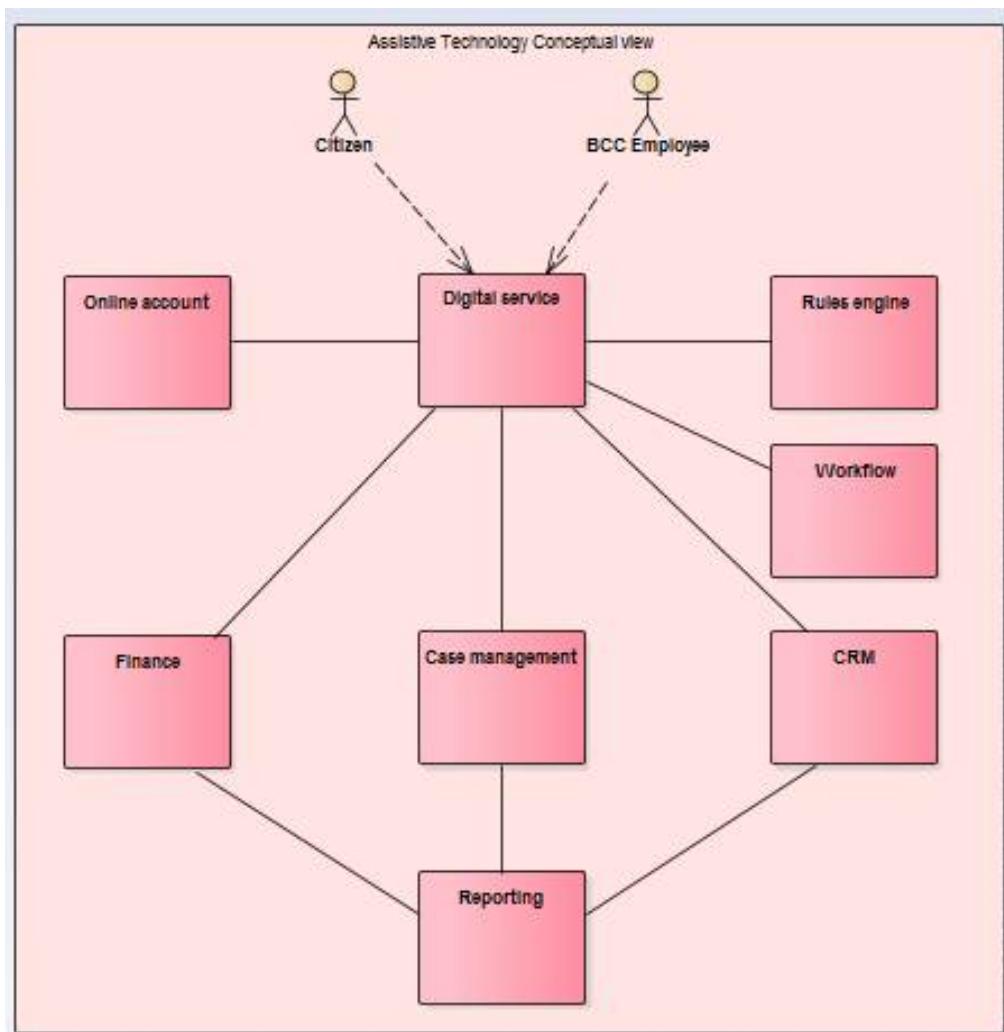
This is required to ensure the seamless flow of accountabilities, responsibilities and information through manual and systems driven processes to maximise efficiency and positive impact whilst minimising operating and data risks.

An initial requirements-gathering exercise has already been undertaken through a sequence of workshops with all internal stakeholders. This has informed the development of the service model. The requirements have been prioritised into categories where the new service must have, should have and could have positive impact from change. These requirements are available in appendix B.

To ensure robust design and delivery of the new service the same exercise needs to be undertaken with a wider group of stakeholders against the TECS Hub model to inform People, Process, Technology and Structural build of the new services.

18.6.2 Future potential landscape

The model below shows a first high-level view of each of the desired ICT elements for the service model.



The components of the future technology environment for the TECS Hub include:

- An interactive, compliance positive online requisition form - this is represented by the '**Digital Service**' above.
- Online eligibility check for paid for or self-funding – this is represented by the '**Rules Engine**'.
- Citizens/service users will have the ability to transact online through the digital form authentication using an '**Online account**'.
- It is assumed '**Workflow**' will be used for orchestration.
- Requisitions for TEC that stem from the digital service will be captured in a '**case management**' solution.
- Any and all touch points with service users and BCC employees will be captured with an intuitive '**CRM**'.
- Requisitions, tracking and payment for TEC equipment will be managed through a purchase to pay workflow (managed through a procurement partner) and is represented by the '**Finance**' element.
- All actions within the TEC process that need to be captured for future insight, trend analysis and future demand predictions and resource modelling will be recorded in the '**Reporting**' element.

As the ICT landscape of the Local Authority will be changing through the delivery of the Future State Assessment (FSA) programme, there is currently uncertainty as to how the ICT requirements of the service will integrate into the new ICT landscape. Therefore the Technology Environment workpackage within the implementation project will develop the current ICT solutions (e.g. Liquid Logic Adult System) to support the service on launch. This will ensure practitioners are easily able to make referrals into the service and also provide the basis for tracking the defined benefits of the service.

The current view of the Solution Architect is it will take between 6 to 18 months to put this environment in place. This timeline is impacted by relative priority of developing the TECS Hub over other corporate and service needs. The implementation project will initially deliver the detailed ICT requirements of the service. The delivery plan will

then be revised through a checkpoint review to reflect the FSA implementation plan. This will ensure joined up delivery.

18.7 Benefits

18.7.1 Financial benefits

The proposed service model is an enabler for the Better Lives programme. The financial savings to be delivered by this project are included in the financial savings target for the programme and are not additional.

Low scenario

£'000 Total	Yr 0 (YY/YY)	Yr 1 (YY/YY)	Yr 2 (YY/YY)	Yr 3 (YY/YY)	Yr 4 (YY/YY)	Yr 5 (YY/YY)	Total
New Costs	£300	£	£	£	£	£	£300
Opportunity Costs	£100	£	£	£	£	£	£100
Ongoing costs		£182	£198	£205	£209	£212	£1,006
Total costs	£400	£182	£198	£205	£209	£212	£1,406
Gross savings		£396	£537	£690	£725	£741	£3,088
Net savings	-£400	£214	£339	£484	£516	£529	£1,682

High scenario

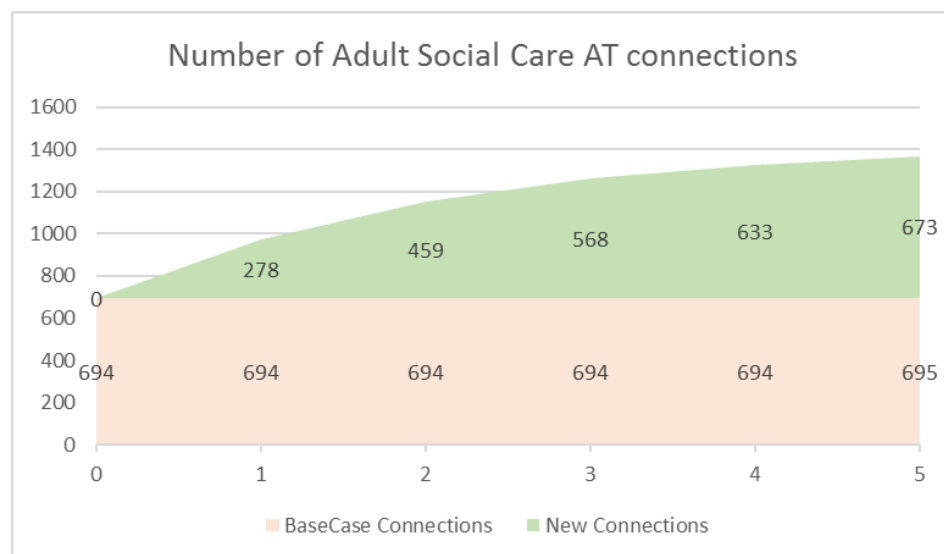
£'000 Total	Yr 0 (YY/YY)	Yr 1 (YY/YY)	Yr 2 (YY/YY)	Yr 3 (YY/YY)	Yr 4 (YY/YY)	Yr 5 (YY/YY)	Total
New Costs	£300	£	£	£	£	£	£300
Opportunity Costs	£100	£	£	£	£	£	£100
Ongoing costs		£186	£208	£216	£229	£236	£1,075
Total costs	£400	£186	£208	£216	£229	£236	£1,475
Gross savings		£679	£958	£1,148	£1,272	£1,371	£5,428
Net savings	-£400	£493	£751	£932	£1,043	£1,135	£3,953

The figures for ongoing costs and gross savings in the above table have been obtained through detailed analysis of current and historic service user data. This has enabled a high confidence in those numbers. Due to the large file size these calculations have not been included in the FBC but are available on request.

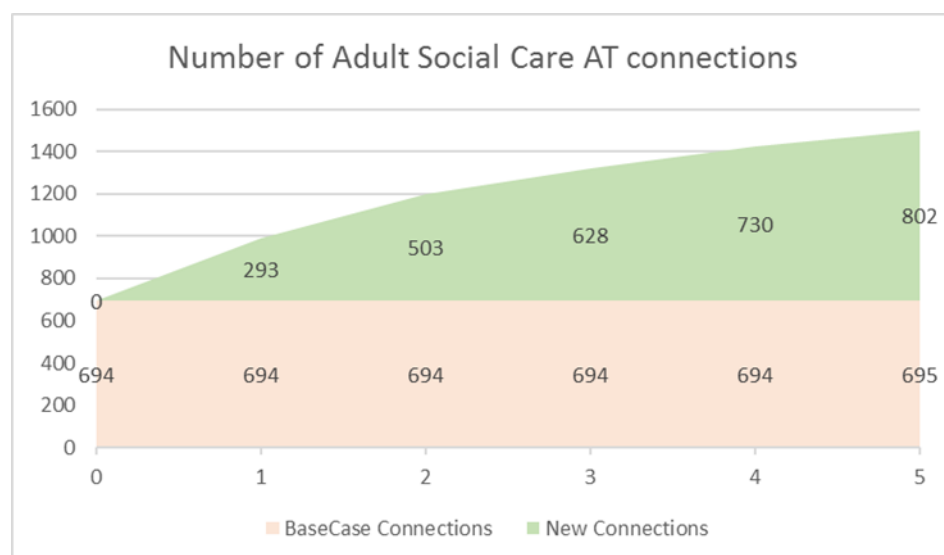
ASC TEC user number growth

- Baseline TEC connections to people on Adult Social Care packages is 694
- The Low Scenario expands to 1268 by year 5
- The High Scenario expands to 1497 by year 5
- In a meeting reviewing assumptions to the model with practitioners, the consensus in the room was that so long as all the steps are put in place to change culture and empower social workers to refer based on outcome, numbers could be “at least double”.

Low Scenario



High Scenario



18.7.2 Non-financial benefits

Benefit type	Setting of care/cohort	Benefit
Service outcomes – financial (for the purposes of this business case)	Home/domiciliary care	<ul style="list-style-type: none"> Current and future clients may be able to reduce purchased domiciliary hours for non-hands-on care Current and future clients will be able to stay in their homes for longer, delaying the need for residential care
	Residential care	<ul style="list-style-type: none"> Future clients will be able to stay in their homes for longer, avoiding the need for residential care
	LD Travel	<ul style="list-style-type: none"> Technology support for LD/PD users will support them to travel independently without an accompaniment
	LD Supported Living	<ul style="list-style-type: none"> A reduction in need for sleep-in services for LD people in supported living
	LD Carers	<ul style="list-style-type: none"> Reduced respite care for LD/PD family carers

Benefit type	Setting of care/cohort	Benefit
Service outcomes – non-financial (for the purposes of this business case, but could be quantified in the future)	Reablement	<ul style="list-style-type: none"> Acceleration of return to independence
	DTOCs	<ul style="list-style-type: none"> Faster discharge and potentially smaller packages due to provision of TEC at discharge
	LD Supported Living – carer support	<ul style="list-style-type: none"> Reduction in paid carer support for LD people in supported living
	Carers	<ul style="list-style-type: none"> Prevention of carer breakdown
	Users with complex needs	<ul style="list-style-type: none"> Various outcomes dependent on the need (promoting medical adherence, safer homes, travel support, sensory support, epilepsy support)
	Mental health	<ul style="list-style-type: none"> Support for those with dementia to increase independence
	Children and Young People	<ul style="list-style-type: none"> Various outcomes dependent on the need. Could support improvements in attendance, increased levels of punctuality and independent travel, greater participation and engagement in lessons and beyond classroom, reduction in fixed term exclusions
Careline and service benefits – quantifiable but non-financial	Referrals	<ul style="list-style-type: none"> Increase in referrals as a % of total cohort size
	Connections	<ul style="list-style-type: none"> Increase in live connections Increase in length of connections for live users
	Installation	<ul style="list-style-type: none"> Lower time between referral and install
	Staff satisfaction with the service	<ul style="list-style-type: none"> Increase in staff satisfaction with the service (this is not currently measured)
	Resident satisfaction with the service	<ul style="list-style-type: none"> More widespread measurement of resident satisfaction of the service (the survey is based on a small number of clients currently)
Careline and service benefits –non-financial and non-quantifiable	Alignment with Adult Social Care strategy	<ul style="list-style-type: none"> The Careline service meets the outcomes and agreed relevant indicators as set by the council

Developing a Centre of Excellence

Culture change	Aligns to vision and design	<ul style="list-style-type: none"> Support required for transformation across the council can be channelled through the Hub. Potentially developing a TEC showroom to prove and demonstrate the efficacy of care technology can inspire confidence amongst practitioners, users and council leadership;
Training	Aligns to vision and design	<ul style="list-style-type: none"> There will be a high and ongoing need for training. Consideration is needed of a training facility for new and existing practitioners providing valuable hands-on experience;
Testing centre for new technology	Aligns to vision and design	<ul style="list-style-type: none"> Developing (with suppliers) a rigorous test and trial service can benefit BCC profile and leading edge as new technologies come onto the market
Showcasing	Aligns to vision and design	<ul style="list-style-type: none"> In situ-assessment: for people with complex conditions, the CoE can be used to assess people in situ before installation in home where appropriate

18.8 Costs & Funding Sources

Funding source	Budget Holder	Cost-Code	Financial Year (or recurring)	Amount
Disabled Facilities Grant	Tom Gilchrist		2019/20 (transformation costs)	£300k
Disabled Facilities	Tom Gilchrist		Ongoing costs	£182-236k

Grant				
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Total funding required (ref S15.3)	£1,375,000
Total funding secured	£1,375,000
Variance	£0
Variance commentary: Not applicable.	

18.9 Key Risks and Issues

18.8.1 Risks

Ref.	Risk description	Impact (H/M/L)	Mitigation	Priority (H/M/L)
TECS Hub delivery risks				
1	Strategic alignment: the TECS Hub develops through implementation in a way that does not fully align with Better Lives programme	Organisation M	Governance of change ensures ongoing strategic review of Hub development	H
2	Technology risks: increased reliance on TEC is not accepted by practitioners and commissioners at first point of assessment in spite of positive user feedback	People H	Ensure awareness starts early and practitioners feel part of the change and confident in the technology	H
3	Technology risks: expectations of users rise to expect TEC as part of any service requirement despite eligibility not being met	People L	Managed conversations at triage/eligibility/assessment	L
4	Regulatory risk: increased use of equipment and data for monitoring may be incompatible with data regulations and information sharing	Process M	Maintain overview of process changes through governance and process owners	M
5	Commercial/financial: there are additional unknown costs associated e.g. with costs of training and culture change management, changes to existing technology contracts, rising home care or residential care costs in response to lower demand.	Resources H	Manage through detailed resource planning and cost modelling before FBC sign-off and manage through governance reviews in delivery	H
6	Benefits risk: projected financial benefits are not achieved as a result of scope creep and over-runs in implementation.	Process M	Develop and tightly manage benefits monitoring and realisation to evidence savings	M
7	Capacity and capability: there are insufficient skills and resources in place to deliver the change (either within Commissioning, across practitioner, staff or leadership)	People H	Manage through resource planning and detailed implementation management	H
8	Delivery and implementation: the TECS Hub change is not delivered to time, quality or budget.	Organisation M	Governance of change focuses on exception reporting	H
9	Supply: the potential supplier market for service delivery or equipment services is not able to fulfil demand and range of	Resources M	Market test future service requirements with existing and wider suppliers	M

	products at expected costs			
10	Affordability: budgetary constraints in next FY impact ability to fund the change as intended	Resources M	FBC sign-off secures budget commitment to change	L
11	Policy: future impact of regulatory changes may further adversely affect the TECS Hub and ASC Five Year Forward View	Resources M	FBC sign-off secures budget commitment to change	L
12	Technology risk: changes needed to Council systems to enable integrates end-to-end user centred service are unaffordable or will take too long for TECS Hub	Technology H	Scope technology requirements and ensure early review in council wide technology change plans	M
Business Case implementation risks				
A	Service takes longer to implement than planned – delay achievement of project benefits	Organisation M	Governance of change focuses on exception reporting	H
B	Financial savings indicated in section 18.4 are not delivered as planned	Process M	Develop and tightly manage benefits monitoring and realisation to evidence savings	M
C	Staff with sufficient skills and experience to work in the service are not trained/recruited resulting in fewer, less appropriate assessments completed	People H	Manage through resource planning and detailed implementation management	H
D	Business case is not approved by Cabinet in May 2019 delaying the implementation phase with a knock-on effect on delivery.	Organisation H	Ensure passage of FBC through sign-off by walking key signatories through details	M
E	Appropriate TEC is not available reducing the support for service users	Resources M	Market test future service requirements with existing and wider suppliers	M
F	Cost of IT support for the service is higher than expected.	Technology H	Scope and cost technology requirements to ensure prioritised within council-wide technology changes	M
G	As part of Accessible Homes, TEC becomes less connected with Practitioners within Adult Social Care.	People M	Develop and deliver appropriate change management plans	M
H	There are a number of other ASC projects within the Transformation Programme which are linked to the benefits outlined in this business case.	Resources M	Manage duplicated requirements and resource overlaps through integrated programme planning	M

18.9.2 Risk Impact Analysis

The Full Business Case is being developed iteratively as the key assumptions, risks, dependencies and issues are identified and tested with key stakeholders as they progress through the round of Professional View sign-off. This is a process that adheres in principle with HMT Guidance for Better Business Cases although in practice it is more usual for the Outline Business Case to be iterative whilst the Full Business Case is developed to completion before seeking sign-off.

Constraints of time and the commitment of BCC's strategic intent to make progress towards a new model for April 2020, necessitate a more rapid and dynamic development process for the Full Business Case. It is essential that the governance in place is assured of the following progress prior to Business Case sign-off in May 2019:

- detailed model development

- technology environment and enabling infrastructure
- TEC supply arrangements
- benefits modelling and realisation planning
- resource planning
- change management planning

Good progress is being made to address these issues currently and correspondingly, reduce the risks of implementation.

18.9.3 Contingency Planning

In order to increase confidence in delivery of a successful service model, an external consultancy has been appointed. They have provided:

- Evidence of good practice that builds upon the Outline Business Case position
- Support to test, refine and develop this business case, introducing greater detail into the cost and benefit assumptions.
- Initial service model design following agreement of Service Vision and Design Principles – clarifying what the new service model could look like - to aid both decision-making and planning for transition from the 'as is' to the 'to be' model.
- High level implementation planning.

The Council's confidence in the strategic direction and ability to deliver the TECS Hub has increased with the support and experience of the consultancy – which has delivered end-to-end technology enabled independent living service models in other Local Authorities.

Since approval of the Full Business Case by the Better Lives programme board, the sensitivity analysis for the figures provided has progressed from 50% to 75% as the model was further developed and the evidence base built.

19. Delivery Approach

19.1 Implementation Approach

This section describes the typical actions that will be required to ensure the successful delivery of the TECS Hub in accordance with good practice.

19.1.1 Implementation plan

The new TECS Hub service is anticipated to be ready for go-live in April 2020. With appropriate resources to the core project and support in developing the enabling technology environment, mobilising culture change and awareness in the user and practitioner community, it is expected to take nine months to fully mobilise and implement the preferred option: one-month pre-mobilisation activity; seven months mobilisation prior to go-live and one month post go-live. The plan below sets out the expected implementation plan and organises activity into seven broad workstreams:

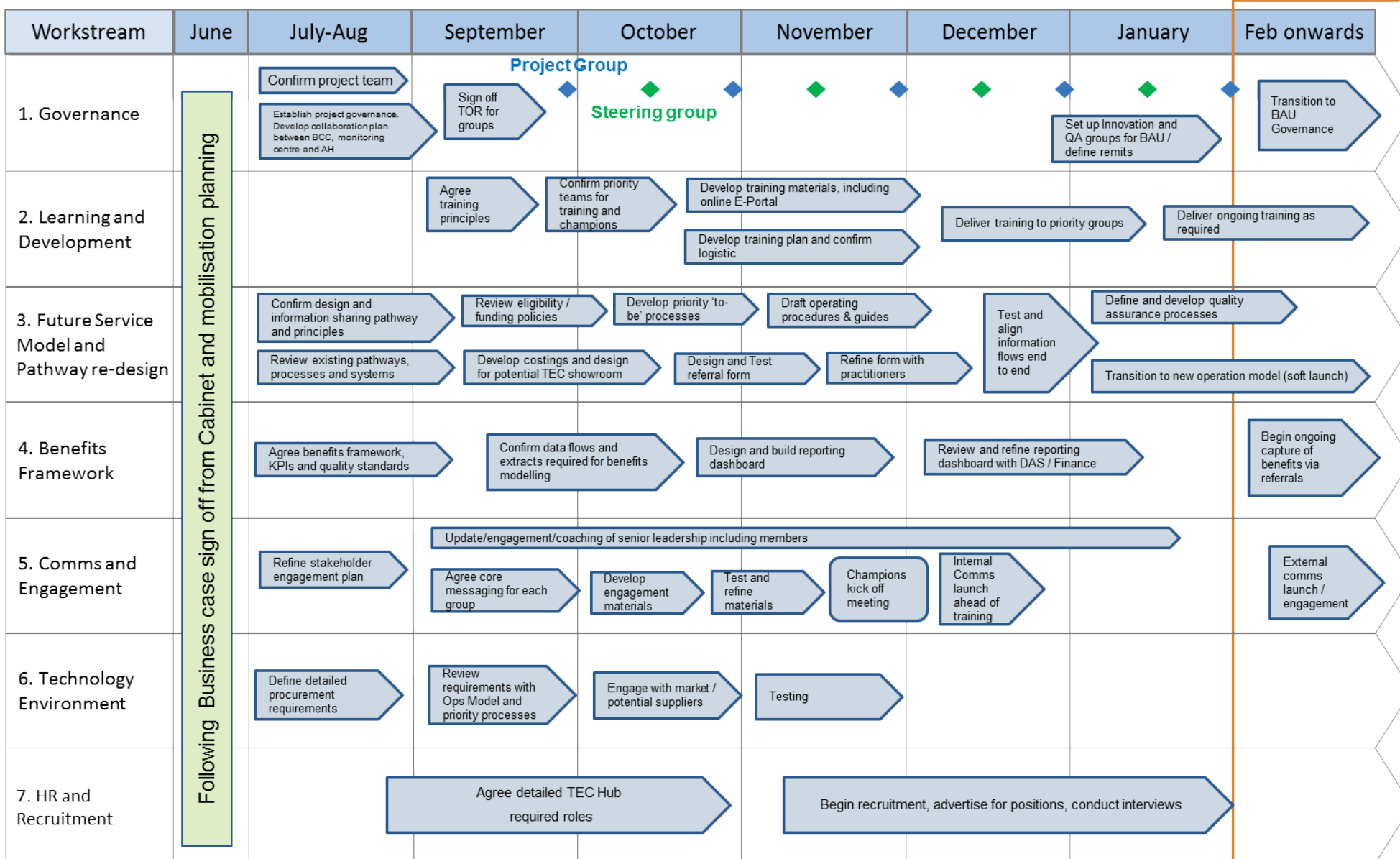
1. **Governance:** establishing strong, decisive governance structures that operate across Bristol to provide inputs at the right level throughout the transformation and development of the service .
2. **Learning and development:** supporting referrers, commissioners, providers, leadership across Bristol to have the capacity and capability to use the service and encourage higher rates of take-up.
3. **Future service model and pathway redesign:** establishing and embedding the new operational service model across Bristol. Pathway and service redesign work to co-design and co-produce new simplified referral pathways across health and social care. This includes planning for quick wins.
4. **Benefits framework:** designing and implementing a robust approach to benefits measurement and realisation that meets the needs of Bristol stakeholders.
5. **Communication and engagement:** raising the profile of the service through a programme of activity around culture change and engagement to increase understanding of the service and benefits that TEC can have for people.

6. **Technology Environment:** Ensuring procurement of appropriate technology to meet service users outcomes and removing and technical barriers to effective referrals for practitioners.
7. **HR and Recruitment:** ensuring the new TEC hub and accessible homes have the capabilities required to deliver the new target operating model.

More detailed information relating to the implementation of the service can be found in appendix B.

Bristol City TEC Implementation plan 2019-2020

Mobilise to go-live



19.1.2 Technology environment

A sixth workstream for this approach will be to ensure that the technology is available not only to deliver the TEC equipment on a cost-effective and responsive basis, but also to support end-to-end service delivery using standardised, simplified and as far as possible, automated process and data management.

As stated in section 18.6 due to potential changes to the ICT environment through delivery of the Future State Assessment (FSA), there is currently uncertainty as to how the ICT requirements of the service will integrate into the new ICT landscape.

To ensure the service is supported on launch, the Technology Environment workpackage within the implementation project will redevelop the current ICT solutions (e.g. Liquid Logic Adult System) to support the service on launch. This will ensure practitioners are easily able to make referrals into the service and also provide the basis for tracking the defined benefits of the service.

The implementation project will also deliver the wider detailed ICT requirements of the service. The delivery plan will then be revised through a checkpoint review to reflect the FSA implementation plan. This will ensure joined up delivery and that the service model is aligned to the future ICT strategy of the organisation.

Assumptions around cost of IT change are notoriously difficult to quantify with certainty given that so much cost is resource costs for configuration and implementation with existing systems and projects. As far as practicable the final costs assumptions detail the areas of likely IT cost, phased nature of the expenditure and identify the risks and mitigations to be managed through Programme and Project Governance.

19.1.3 Change and engagement

Developing 'project infrastructure' will be needed to drive a lasting change. In parallel, focus on removing 'barriers', such as a complex referral form or confusing guidance will be needed, with the aim of driving beneficial change. Achieving and sustaining successful change relies on a campaign to win hearts and minds. It will not be a one-off exercise but will need to be part of an ongoing approach, which will need to be adopted by staff, users, carers, providers, partners and senior leadership. This will mean:

- Investing in securing and maintaining senior buy-in, including senior officers and elected members;
- Building a network of TEC champions, people with experience and confidence who are or have been actively involved in service development;
- Setting the expectation that using TEC is 'the way we do things here', at all levels of the organisation and outside of the organisation;
- Supporting referrers to make high quality referrals, based on need, regardless of where they refer from;
- Managing people's expectations around the level of support provided and possible financial contribution for TEC;
- Co-designing and delivering a formal classroom training programme, compulsory for anyone able to make a referral and built into induction processes for new staff;
- Monitoring the source of TEC referrals at team and individual level and where lower than projected, investigating and supporting care practitioners;
- Linking to performance management systems, so that TEC is part of performance management of staff;
- Telling a compelling story about the successes of the service using case stories and gathering evidence on performance;
- Actively seeking, analysing and responding to practitioner feedback.

19.2 Benefits

The quality assurance function of the service model is intended to monitor delivery of the project benefits as business as usual activity. The service will initially collect data on the easily measured information e.g.:

- Number of referrals into the service (funded and self-funded)
- Number of TEC assessments completed
- Outcome of TEC assessments
- Projected benefit from value, quantity and type of TEC installed (per user and collated by cohort)
- Time taken between referral, assessment and installation of TEC
- Number of connections to Careline
- Operability of TEC in client's homes
- Cashable and non-cashable financial savings to BCC and wider health economy

This will be reported to the Better Lives programme board through the existing Trajectory Management process.

Within the development of service model and go-live, a balanced scorecard of measures will be developed to reflect the outcomes from deploying care technology to support independent living. A mix of service user, commissioner, council and wider economy impact measures will be developed to ensure the service is seen through the lens of the ASC strategic aims and intent.

The data from the TEC service will also be compared to a baseline of TEC referrals and installations (taken from the Adult Social Care database and installation figures held by Bristol Operations Centre) before implementation. This will allow a meaningful comparison to ensure the service has delivered the required benefits through a formal evaluation of the service 6 months after the service has been implemented.

The manager of the new service will be responsible for ensuring the data outline above is collated. It is anticipated that the data collection will be through accurate single point of input and data capture, supported by work-flow tracking and an automated dashboard of key reporting metrics.

The remainder of this section sets out a proposed benefits management approach, roles and metrics.

19.2.1 Benefits and benefits realisation

Measuring the financial impact of the service model and evidencing progress towards achievement of financial targets is fundamental to successful implementation of this case. An approach must be agreed that gives all stakeholders across the Council confidence in the financial benefits from transforming the service. Fundamental to this will be agreement of some principles that will guide the approach – these will need to align the need for evidence with the principles of a Strengths-based Approach – which may be a tension. Whichever approach is chosen, it must be proportionate to the need identified. This section describes some key principles, the benefits that could be measured and the key roles in tracking and measuring.

19.2.2 Benefit realisation approaches

Evidencing the benefits described in the Preferred Option will mean implementing an approach to benefits measurement that is based upon some key principles:

- **Ensuring alignment with the three tier model: the approach needs to be specific enough to meet the requirement to manage outcomes, but not add to the burden of work for practitioners;**
- **Co-designing the benefits measurement framework from the outset:** Developing a tailored approach to meet The Council needs, ensuring buy-in from stakeholders;
- **Ownership by Bristol:** It is important that the Council has assurance of the financial benefit that the service will realise. The approach to benefits realisation will involve appropriate stakeholders from the Council so that the final approach is owned;
- **Embedding benefits measurement and realisation throughout the TEC pathway:** Building and validating the robust evidence base required to measure telecare benefits, from the point of referral.

This is likely to mean focussing on reduced packages first, with tracking of avoided costs being tested over time;

- **Measuring the financial impact on a granular basis:** To track both reduced packages of care as well as avoided costs, financial benefits can be measured at a granular level and aggregated up, allowing the Council to fully reconcile, audit and realise all types of benefit;
- **Manage via a balanced scorecard:** Developing a series of simple, high-level key performance indicators in clear dashboards tailored for each stakeholder group.

19.2.3 Benefits

The high-level benefits of successful delivery are as follows, with the below table describing some outline metrics and a measurement approach. This shows metrics at a high level – through the implementation phase the project will explore metrics to be measured and tracked in a systematic way. It should be noted that home/domiciliary care prior clients and a proportion of new clients have been counted as ‘cashable’.

Benefits for the project

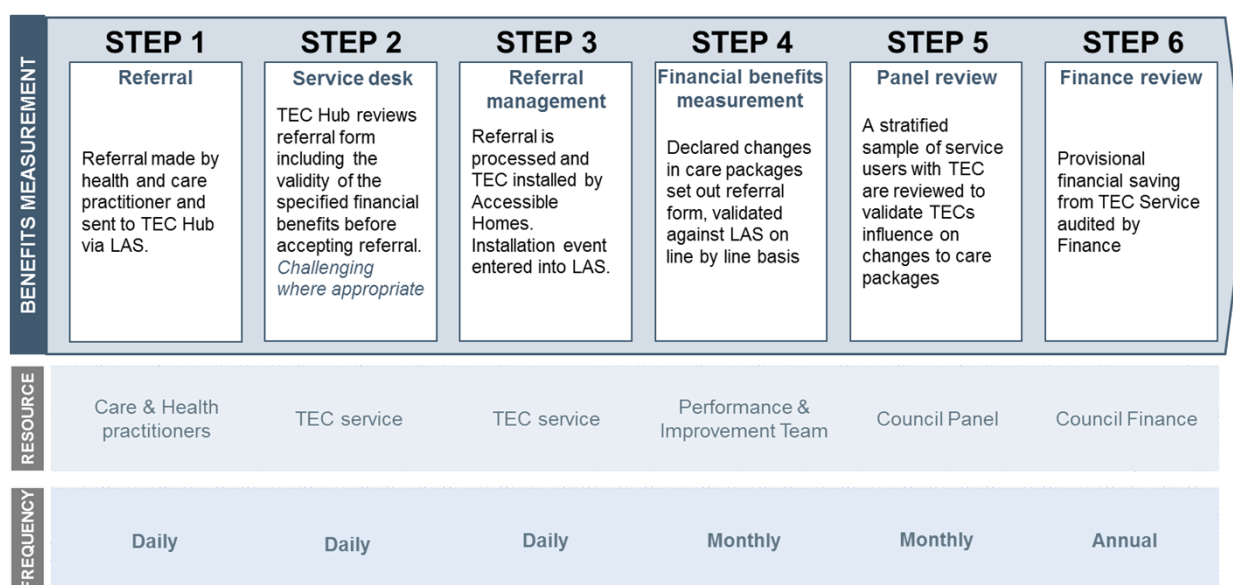
Theme	Benefit	Benefit type	Owner	Key metric ¹
Home / domiciliary care	Current and future clients may be able to reduce purchased domiciliary hours for non-hands-on care	Financial	ASC Transformation Prog.	# TEC assessments # domiciliary care placements as a % of total Average domiciliary care hours
	Current and future clients will be able to stay in their homes for longer, delaying the need for residential care	Financial		# TEC assessments # residential care placements as a % of total Length of domiciliary care placement prior to residential care entry
Residential care	Future clients will be able to stay in their homes for longer, avoiding the need for residential care	Financial		# TEC assessments # residential care placements as a % of total
LD Travel	Technology support for LD/PD users will mean they will be able to travel independently and will not need an accompaniment	Financial		# TEC assessments # accompanied LD people as a % of total
LD Supported Living	A reduction in need for sleep-in services for LD people in supported living	Financial		# TEC assessments # LD sleep-ins as a % of total
LD Carers	Reduced respite for	Financial		# TEC assessments

¹ In order to monitor the actual difference with TEC, a control group without TEC could be monitored alongside the TEC cohort – otherwise the result will be a change in trend. Alternatively, data can be monitored on a user by user basis (care package before and after the TEC installation) which is a more onerous but accurate approach.

Theme	Benefit	Benefit type	Owner	Key metric ¹
	LD/PD family carers			# LD carer respite breaks as a % of total
Reablement	Acceleration of return to independence	Non-financial		Average weeks of reablement placements (when TEC in place)
DTOCs	Faster discharge due to provision of TEC at discharge	Non-financial (financial for health, should this be part of scope in future)		# TEC assessments Length of days' delay
Carers	Prevention of carer breakdown	Non-financial		Overall cost of carer breaks and support User satisfaction survey
Mental health	Support for those with dementia to increase independence	Non-financial		# police reports of people reported missing
Health	Medicine reminders, reducing the need for face to face visits	Non-financial		# medicine reminder hours in the home as a ratio of total visit hours
Users with complex and multiple needs (learning difficulties / physical disabilities and mental health for e.g.)	Various outcomes dependent on the need on a user by user basis (promoting medical adherence, safer homes, travel support, sensory support, epilepsy support)	Non-financial		Package of care cost and length of provision by care type on a user by user basis, before and after TEC installed
Referrals	Increase in referrals as a % of total cohort size	Non-financial	Careline	# referrals, by cohort and provenance
Connections	Increase in live connections Increase in length of connections for live users	Non-financial		# live connections Length of live connection
Installation	Lower time between referral and install	Non-financial		Days/hours between referral and install
Staff satisfaction	Increase in staff satisfaction with the	Non-financial		% staff satisfaction rate in line with local standards

Theme	Benefit	Benefit type	Owner	Key metric ¹
with the service	service (this is not currently measured)			
Practitioners	Confidence in commissioning TEC at first point of assessment knowing the outcomes that can be delivered	Non-financial		Corresponding benefit of TEC being seen as complementary too not an addition to physical care
Resident satisfaction with the service	More widespread measurement of resident satisfaction of the service (the survey is based on a small number of clients currently)	Non-financial		% resident satisfaction rate in line with local standards

Example benefits measurement process during BAU – full process to be defined during implementation



19.2.4 Roles in benefit tracking

The table below sets out the key roles which are likely to be involved in benefits realisation.

Team	Role
Senior Management	Active support required to: <ul style="list-style-type: none"> Reinforce the culture change and engagement programme, including the importance of identifying potential savings at the point of referral and consistent messaging on the importance of TEC within the whole care pathway. Provide sustained and consistent leadership support to the Careline service and practitioners.

Team	Role
Performance team	Contribute to co-designing the benefits management approach. Bristol performance team will own the measurement of the financial impact of the TEC service as recorded in care management systems, so claimed savings will be separate from the Careline operational service.
Finance	Finance Business Partner will have a key role in reviewing and audit results of benefits reporting.
Practitioners	Practitioners provide a key role in the service in making a robust and accurate referral, with a professional assessment of the anticipated outcome based on the TEC intervention.
Careline	Careline has an operational role in running the service to a high standard. The service will also supply data to inform performance metrics.
Learning and Development	Managing the impact of behaviour change and practitioner confidence to put TEC in front of mind and confident in commissioning for outcomes

19.3 Procurement Approach

There are three identified areas of procurement requiring consideration as a result of proceeding with the Business Case. They are:

1. Procurement of TEC equipment
2. Procurement of the integrated technology environment

This section summarises the current position, future considerations and recommendations for next step in each of these three cases.

19.3.1 Procurement of TEC equipment

The Council's current arrangements for sourcing and supply of TEC equipment is fragmented and difficult to performance manage or assess for good value. Supply arrangements have necessarily built up over time in response to vertical service demand for specific products – primarily simple pendant, alarm or reminder response devices – required by different parts of the Council e.g. Housing, Care Services, Careline. These are however compliant as they are purchased through an ESPO framework and individual call-offs are undertaken. This is very time consuming and has not allowed for a large take up of TEC.

The Council is currently investigating whether its Integrated Community Equipment Service (ICES) contract can satisfy the Council. A benchmarking exercise is currently being undertaken. The Contract runs until September 2020 and allows for contract variation to include TEC equipment – a variation not triggered by BCC until now. Subject to provision of the current supply catalogue by Medequip, and the Council's review of it against its current requirements and cost envelope, it makes good sense to proceed with this variation to ensure continuity of existing need. It is anticipated that the new arrangement will provide a wider range of products at an overall lesser cost and an easier ordering process for OT's and equipment required by service users to be discharged from hospital will be readily available at one time. This assumption will be tested by the work undertaken by the Council's category management team.

The Council's future needs for TEC will rapidly move beyond simple product supply. The concept of the TECS Hub is that BCC develops a Centre of Excellence and innovation in sourcing, configuration assessment and deployment of TEC. The pace at which care, medical and consumer assistive technologies is advancing indicates that the Council will require more dynamic, innovative and responsive supplier management and relationship arrangements in the mid-term future.

The current work to seek a variation to the ICES contract could be used as a platform to test the Council's future supply requirements. In summary, the requirements are that the Council, in addition to continuing

to seek basic TEC equipment in an effective, Just-in-time, and cost-efficient way, the Council will also seek to understand and evaluate the supply of existing consumer and emerging TEC in market.

For the longer term, the implementation project will develop the detailed future requirements of for TEC supply to be managed through the TEC hub. Following a test of the market a full procurement exercise will be performed to seek a new market partner through open competition for outcomes.

19.3.2 Procurement of the integrated technology environment

The current end to end process for deploying care technology is currently dependent upon a series of systems that are either primarily used by ASC (i.e. not available to other BCC departments) or are used by other areas of the council without specific regard to the end to end needs of users and practitioners. For example:

- receipt of enquiry is recorded on LAS
- assessment and TEC referral is undertaken in Liquid Logic
- eligibility check is manual and
- requisition and payment is undertaken in Agresso Business World

This is a typically fragmented approach as systems have been deployed over time in response to different departmental and corporate needs. It results in sub-optimal process flows, poor user data capture and analytics re-use (information is re-keyed at different points creating error opportunity or data loss), low take up of data capture in online form functionality (often relying on manual free text rather than compliance scripting) and process inefficiency for the end user.

The Council is in the early stages of developing its enterprise wide requirements for its future IT architecture. It is in principle seeking to move to a cloud-based storage solution and a more consistent, enterprise IT operating architecture. One option open to it is use of Microsoft technology stack* – which would include contact management, data warehousing, corporate systems supply and so on.

At the same time, the forward work plan for IT includes projects to assess the future need for and replacement of the core ASC systems – LAS and Liquid Logic – within the next FY. Both of these systems could offer wider use across the Council or be subsumed into a future, more integrated suite of products e.g. integration in the end to end assessment and referrals process as well as a minimum an operating interface with purchase to pay system functionality.

*[*Note that this is an assumed scenario at this time not a pre-judgement of work being undertaken within the IT department.]*

19.4 Communications and Engagement Approach

19.4.1 TEC Service Communications and Engagement

As outlined above, a vital part of a successful TEC service is awareness and training. This is to ensure that practitioners are able to recognise opportunities for the use of TEC and make the right, high quality referrals. This will be achieved through the following:

- Design, develop and deliver awareness programme for practitioners, commissioners and users
- Design, develop and deliver formal training for personnel within the TECS service relevant to their role
- Design, develop and deliver formal training for practitioners, commissioners and users relevant to need
- Deploy regular updates and promotional materials on benefits and good practices
- Develop online e-portal material available to practitioners at all times.

Types of learning that will be available to practitioners to support them to make effective TEC referrals



19.4.2 Project Communications and Engagement

In addition to the communication relating to the service model there is a requirement for project related communication. Consultation with the various stakeholders below is ongoing.

- **Members**

Assistant Mayor for Adult Social Care has been engaged through production of the business case and also through the Better Lives programme board. As the proposal moves through the Decision Pathway to Cabinet there will be further engagement sessions scheduled.

- **Colleagues**

Engaged through Better Lives newsletter (monthly), staff engagement group (monthly), TEC Champions group (regular meetings). Once the service model is in place there will be further engagement through the structured training programme.

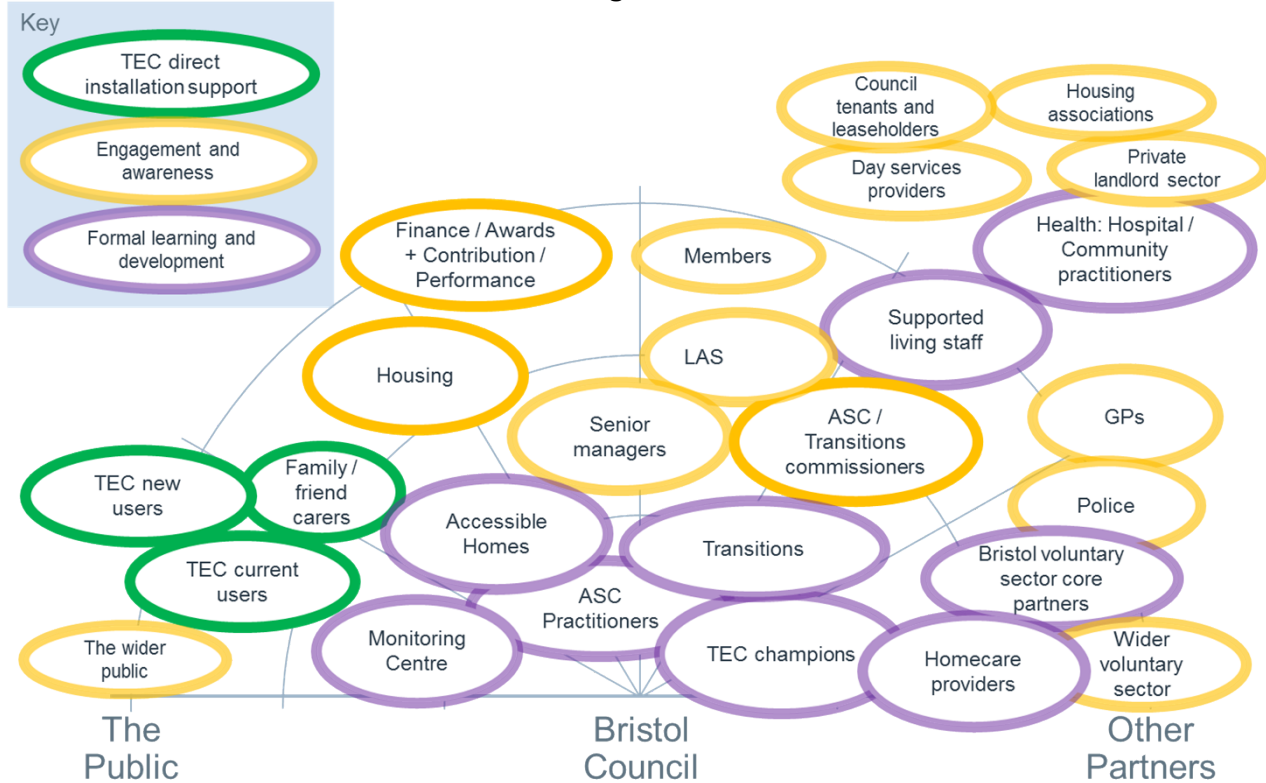
- **Health**

Engagement with Health has been through the Healthier Together programme (BNSSG change programme including representatives from other regional local authorities). The structured training programme will also apply to colleagues who work in hospitals.

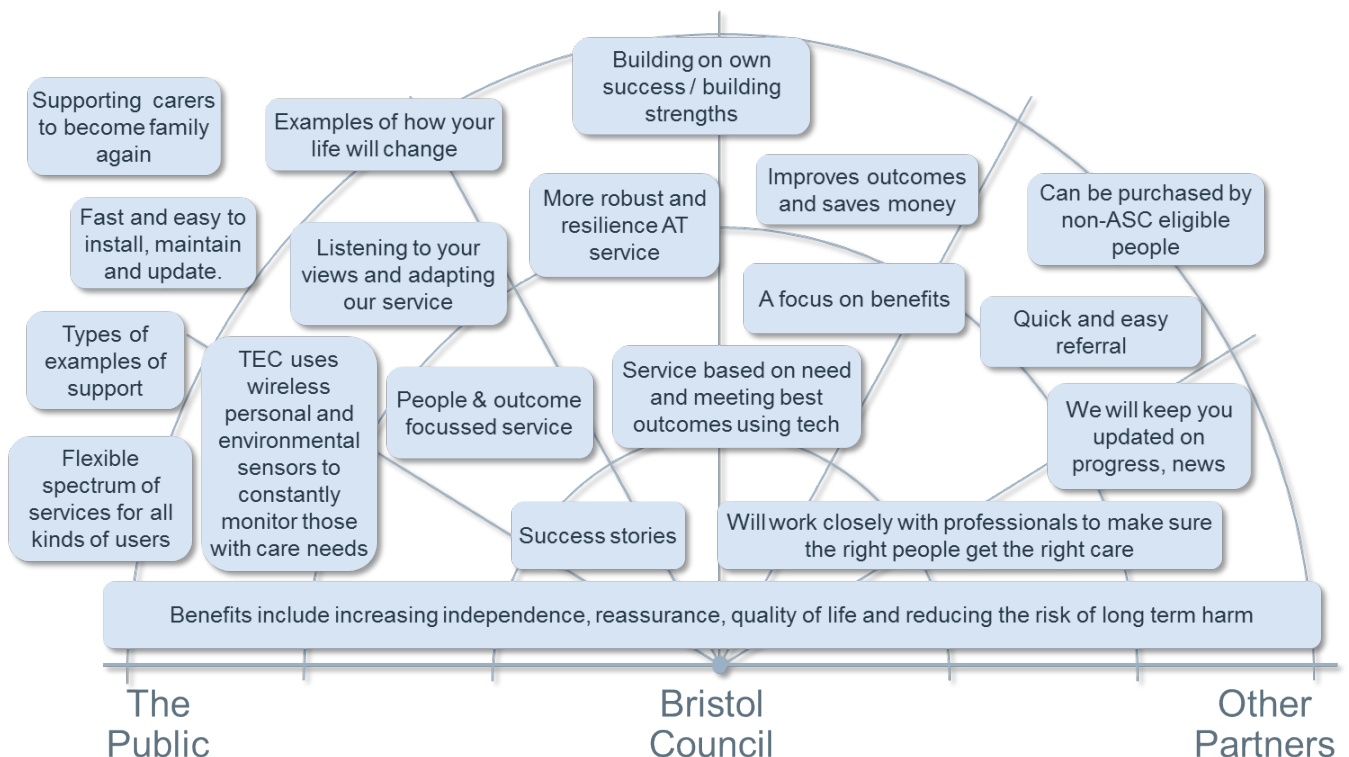
- **Public**

There can be a perception that increased use of TEC will be at the expense of face-to-face contact with carers, however, this is not the main driver for the need to increase the use of TEC. To accompany publication of the business case there will be external communications to show how TEC can assist people to be more independent and also to help them to live in their homes for longer.

Who will be affected and what will the change mean to them



Key messaging for each audience



19.5 Project timeline and Key Milestones leading to go-live

The high level plan for implementation can be found on page 31.

Preferred Option A: Key Milestones	Target Date
Full Business Case sign off	06/05/2019
Project Mobilisation for delivery	30/06/2019
Update baseline indicators against TEC Diagnostic	30/06/2019
Service model and detailed pathway design	July and August 2019
Process design and delivery	September 2019 to January 2020
TEC supply arrangements	May to September 2019
Pre-engagement	May to July 2019
Communications and engagement	July 2019 to January 2020
Awareness and training	September 2019 to January 2020
Benefits framework and tracking development	01/08/2019
IT environment requirements, sourcing delivery	May 2019 to January 2020
IT testing and implementation	January to March 2020
Service go-live	April 2020
Benefits tracking mobilised	April 2020
Project closed – demobilisation review and lessons learned	01/07/2020

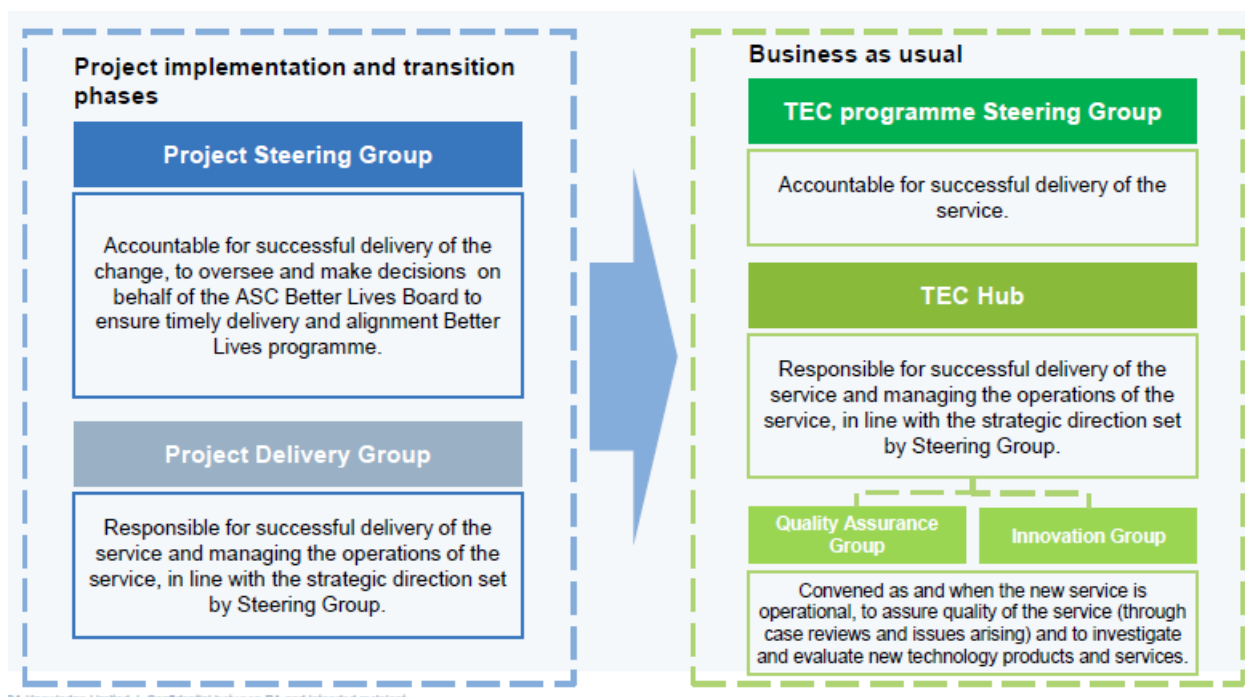
20. Project governance for implementation

The project will ultimately report into the Better Lives Programme Board. However, in order to manage the implementation of the service model on a day-to-day basis there will be two governance groups – a project steering group and a project group.

- TECS Model Project Group: manages the mobilisation and transition – this would form an operational group to manage the service once the project moves to business as usual. This group would also have a role in quality assurance and continuous improvement and innovation, once the project moves to business as usual.
- TECS Model Steering Group: oversees and make decisions on behalf of the Adult Social Care Better Lives Programme Board to ensure timely delivery and alignment to the strategic vision and aims.

The Better Lives Programme Board will in turn be responsible for feeding in to the BCC governance process to Executive and Democratic levels.

Following go-live the Project delivery structure will convert to the BAU governance structure. The Quality Assurance group activities and remit are to be defined during the transition phase whilst the innovation group is expected to be set up after go-live and the BAU service has bedded in.



The project group will be made up of the roles defined in section 20.2 while the steering group will be made up of the following:

Project Role	Name	Job Title
Sponsor	Terry Dafter	Director: Adult Social Care
Project Executive		Head of Service and Senior Professional Lead Better Lives programme
Project User(s)		TEC Lead
Project Supplier(s)		Team Manager, Accessible Homes Operation Centre Manager, Bristol Operation Centre
Project Assurance		Head of Service and Senior Professional Lead Better Lives programme
Project Manager		Project Manager
Finance		Finance Business Partner

20.1 Project Tolerances & Controls

The table below outlines the anticipated tolerances within which delivery can be pursued without seeking further delegation from the SRO and Programme Board following sign-off of the FBC. These tolerances will be tested and agreed with the Programme Board prior to presentation of the Full Business Case for approval.

Once agreed, any decisions that indicate they are likely to go outside of the tolerances set will be escalated to the SRO immediately before being presented to the next Programme Board with recovery actions for discussion and decision.

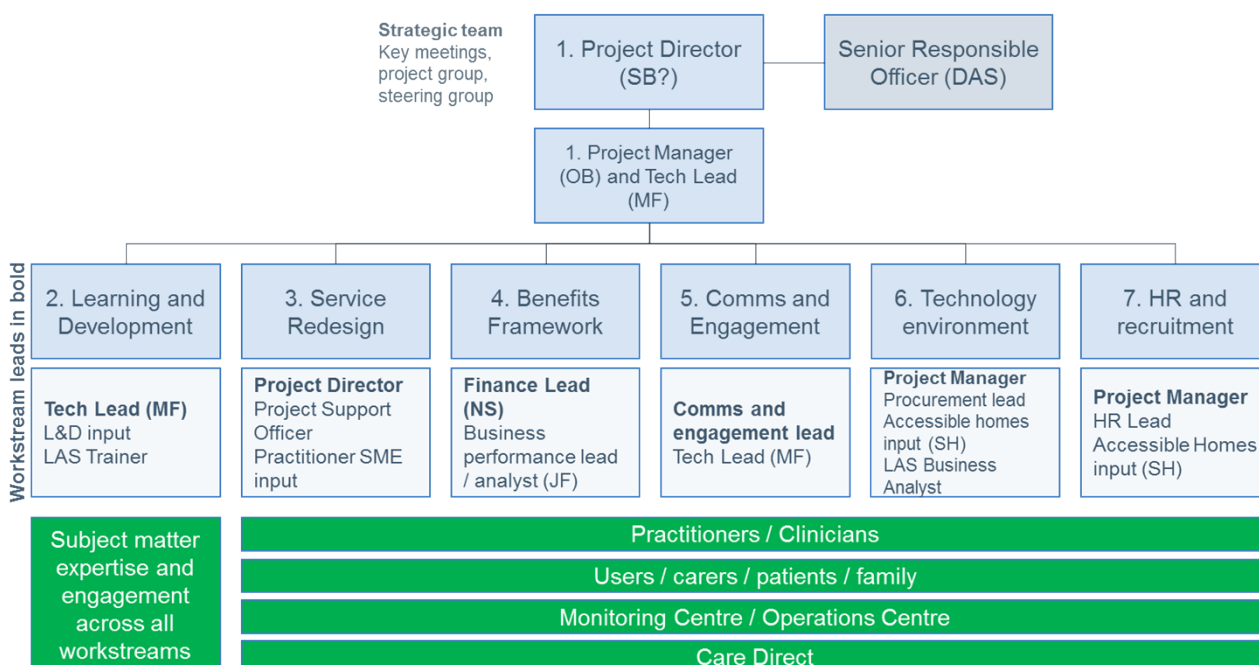
Tolerance areas	Project level tolerance	Escalation route	Control & tracking document(s)
Time +/- amounts of time on target completion	+1 month (key programme level – zero)	Better Lives programme Manager Programme Board	Project Plan Business Case Highlight Report

Cost +/- amounts of planned budget	+/- 10%	Programme Board	Project Plan Business Case Highlight Report
Quality Defining quality targets in terms of ranges	Zero	Programme Board	Requirements Document Business Case Highlight Report
Scope Permitted variation of the scope of a project solution	Zero	Programme Board	Project Plan Business Case Highlight Report
Benefits +/- amounts of planned benefit delivery	+/- 10%	Programme Board	Business Case Highlight Report
Risk Limit on aggregated value of threats and any individual threat (e.g. threat to operational service versus threat to organisation)	Risks rated as Red or greater must be escalated. Residual risks only – mitigate within project structures	Better Lives programme Manager Director: Adult Social Care Programme Board	RAID Log Highlight Report

20.2 Project Team Resource Requirements

Project resources will be required to manage the project, through the mobilisation and implementation phases. This may encompass the following roles, outlined in the figure below. The monitoring arrangements are currently managed by the Careline team – this is not expected to change and creates a dependency with the TEC project and therefore is highlighted below.

PROJECT TEAM AND ROLES



These roles are described in greater detail below. Roles will be allocated to named individuals where this has not been provisionally done below, and the roles defined fully in the more detailed implementation and resource plan, which will be developed following business case sign off.

Where a role is expected to lead a defined workstream, this is highlighted in *italics* in the table below.

Role	Description	Weekly commitment	Total Days	New/ Opp	Internal identified resource (provisional)
Senior Responsible Owner	Accountable for successful delivery of the project.	N/A	Attendance at Board	O	Terry Dafter (DAS)
Project Director <i>(Service redesign lead)</i>	Responsible for successful delivery of the project and steering the team to meet the desired objectives. Responsible for managing the team to meet the desired project outcomes. Likely to have a lead role in managing service redesign.	0.36	15	O	
Project Manager <i>(Tech Environment and HR/Recruitment lead)</i>	Responsible for delivering the project to time and to budget. Also, likely to be responsible for developing governance arrangements, supporting development of policies and procedures, project managing key workstreams.	3/4	140	O	
Project Support Officer <i>(L&D lead)</i>	Provides administrative support to the Project Manager and wider project.	5	190	N	
TEC lead	Plays critical role in developing training materials, supports development of service workstream. Provides continuity between implementation and service go-live.	5	190	O	
Monitoring Centre lead	Provides SME across workstreams. Critical engagement with service design to ensure correct information flows	0.25	9.5	O	
Accessible Homes Lead	Provides SME across workstreams. Critical engagement with service design to ensure correct information flows. Critical engagement with procurement and HR/Recruitment workstreams.	0.36	15	O	
Practitioner SME(s)	Supports service redesign workstream lead to provide expertise from a social care practitioner point of view.	0.25	9.5	O	
LAS Training and Dev Officer	Supports service redesign workstream in redesigning supporting processes and systems, including redesign of LAS form.	0.8	30	O	
Business/Performance Analyst	Supports benefits framework and tracking workstream in developing metrics, dashboard and reporting system.	N/A	15	N	

Finance Lead <i>(Benefits framework Lead)</i>	Responsible for finance inputs to the business case and to designing a benefits framework and tracking approach.	N/A	35	O
Communications and Engagement Lead	Designs a communications and engagement plan and approach and leads training and engagement sessions through transition.	0.5	18	O
HR Lead	Advises ASC on management and process of change – job roles, matching, consultation, recruitment, interviewing.	0.25	9.5	O
Procurement lead	Advises on procurement of correct technology and sourcing of kit for installations. Advises and supports Accessible homes in tendering process.	0.25	9.5	O
Solution Architect	Advises on ICT systems suitable to underpin service delivery.	N/A	15	O

Resource relating to delivering an ICT solution for the service has not been fully scoped however a contingency for this is included in the resourcing costs below.

Table: Project roles and requirements

One-off costs for transformation have been estimated as £400,000. Of this figure £100,000 will be internal opportunity costs. The remaining figure of £300,000 includes an estimation ICT transformation expenditure based on figures from other comparable Local Authorities. The figures provided are conservative and the final resource costings are not expected to exceed this.

Total opportunity costs	£100,000
Total new costs	£300,000
Total resource costs	£400,000
Total funding being sought	£300,000

21. Equalities Impact Assessment (EqIA) Summary of Impact and Key Mitigation

The use of TEC is decided on an individual basis through the application of a Care Act 2014 compliant assessment of need or review of a package of care. This ensures that all aspects of an individual's wellbeing are considered before TEC is used and that they are not disadvantaged in any way. Training of staff will be delivered in accordance with Bristol City Council policy and ensure that staff with protected characteristics are not disadvantaged.

Please see the appendix for the EqIA relevance check.

22. Eco-Impact Assessment Summary of Impact and Key Mitigation

Increased use of Care Technology will lead to increased CO2 production as the electronic devices will require electricity to function. However, the amount of electricity required is not significant.

Please see the appendix for the EcoIA.

23. Privacy-Impact Assessment Summary of Impact and Key Mitigation

Key security impacts relate to inappropriate access to data and information loss. Actions to mitigate this include:

- All staff to complete Data Protection training.
- All staff to complete Information Security training
- Business continuity plan to be developed and documented.
- Data not being shared with 3rd parties.

More information can be found in the Privacy-Impact Assessment.

It is currently envisaged there will be no data transfer to 3rd parties. If this changes in the future, the PIA will be updated to reflect this. Additionally, the Care Technology currently used within BCC does not collect personal data, however if products come to the market in future again the PIA will be updated.

Please see the appendix for the PIA.

24. Full Business Case - sign off

Name	Job Title	Date circulated
Terry Dafter	Director: Adult Social Care	19/02/2019
Stephen Beet	Head of Service and Senior Professional Lead	19/02/2019
Merlin Jones	Senior Project Manager	19/02/2019

Decision making authority	Cabinet
Date seeking endorsement	07/05/2019

APPENDIX

A. Required commentary and recommended consultation

Commentary on Mandate and Outline Business Case are available in the relevant appendices.

FULL BUSINESS CASE		
Recommended bodies/individuals for consultation ahead of submission to DWG:	Commentary (if any)	Date
Cabinet Lead	Fully supportive	25/03/2019
Executive Director Meeting (EDM)	Fully supportive	13/03/2019
Professional Views	Commentary	Date
MANDATORY – and must include confirmation of funding source(s) Finance Business Partner	<p><u>General commentary:</u></p> <p>Adult Social Care continues to have significant challenges in delivering a balanced budget, which includes the delivery of savings of a minimum of £4.2m in 2019/20 and a further £2m in 2020/20. This business case targets an opportunity to invest in technology enabled care and at the same time reduce the amount of direct face to face support where a service user will remain safe in their own home. The plans are ambitious but are based on national work implemented in other parts of the country that have delivered cashable savings and reduced the escalation of costs. It is anticipated that the savings from this project will contribute significantly to the ASC savings target over the next 4 years. It is anticipated that net savings from the investment in TEC and increasing service users who have TEC installed to from a current base of 700 to c1500 will be in the range of £1.7m to £4.0m. The actual benefits from the increased number of service users and the operating costs will be refined and firmed up during the implementation of the new model. The assumptions made in terms of the growth in the number of service users and benefits that accrue from increased number of installations based on knowledge of other implementations suggests that there may be an opportunity to realise greater savings than suggested in the FBC.</p>	05/04/2019

<p>MANDATORY FOR ALL FULL BUSINESS CASES WITH A RESOURCE REQUEST PMO Operations Manager</p>	<p>10/04/2019: I've reviewed the plan, resource estimates and costs with the project manager and am happy that the case has evolved and refined these to a good level of confidence at this point. I'm happy to endorse these and the business case as a whole.</p> <p>22/02/2019: Accepting that this business case is currently unfinished; that an understanding of resource needs will be refined before submission to cabinet and there being no immediate change to the resources already assigned to this work I'm very happy to endorse the position presented in this document and in supporting information provided to me by the project manager. I would like to have the opportunity to review the detailed plan and refined resource requirements before the business case is finalised but in the meantime see no reason at all why this important project should not proceed to the proposed next steps.</p>	<p>10/04/2019</p>
<p>HR Business Partner</p>	<p>The proposal to develop an TEC Service within Bristol City Council will have an impact on our current and future workforce. Some of the TEC solutions could mean that some tasks are no longer required to be performed by our employees, and therefore could have an impact on job role/employment. There will be training implications for employees for some TEC solutions as they will be new to employees and may have significant training requirements. Longer term we may need to review our recruitment strategy for this work group and re-write job descriptions as we will be looking for different skills and experience going forward.</p> <p>All changes that affect the workforce and the way they work will be fully consulted on through our Sub JCC and DJCC with our employees and their local trade union representatives.</p>	<p>19/02/2019</p>
<p>Change Services View</p>	<p>This iteration of the Full Business Case should be considered to be an interim</p>	<p>18/02/2019</p>

	<p>step to approve the preferred option of developing a TECS Hub aligned to Care Direct as a single front door. It is acknowledged in the business case that a further level of detailed work is needed before full sign off in May 2019.</p> <p>Prior to full sign off the following areas should be strengthened through the next iteration of the business case:</p> <p>Clarify the financial benefits associated with the new service. The service model proposed is clearly flagged as an enabler to the financial savings target of the programme. Prior to sign off of the business case a clearer indication of the financial savings associated with the work will help to establish whether the change is worth the investment. Financial and non-financial benefits are listed in section 19 but not quantified.</p> <p>Strengthen the indicative costs of the change. New costs are indicated to be £400k and these need validating through the next phase of detailed planning.</p> <p>Address changes needed in teams to improve confidence in and awareness of TEC. Evidence from stakeholders indicates that previous attempts to promote the use of care technology have not been sustained or embedded. This preferred option to build on existing pockets of excellence in a more structured and effective way is to be welcomed, and next stage of detailed planning would benefit from consideration of how these changes will enable the change to 'stick' with the referring teams.</p> <p>Confirm scope. TEC services currently provided by health care providers is specifically mentioned as being out of scope. It would be helpful to clarify whether closer work with health is a future aspiration for this service to ensure that future opportunities are not 'designed out'.</p>	
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	Addressing these areas will better enable the programme to set tolerances (section 20) and expectations on the project so that the work can be kept on track and any areas of under-delivery or drift can be quickly resolved.	
IT View	<p>There is no doubt that technology may offer the opportunity to enrich or even transform lives or citizens and IT is supportive of this initiative. There are, however, two main elements in the business case that will require further IT consideration.</p> <p>Section 18.3.1 - Health care professionals are out of scope; the implications of this need to be clearly understood and acknowledged.</p> <p>Section 18.3.6 – As noted, the aspirations for new IT requirements are significant and complex. This will require time and resources to design and develop and will need input from existing as well as future suppliers.</p>	17/02/2019
Enterprise/Solution Architecture View	<p>As requested I have read the relevant parts of the FBC you highlighted in red and have scanned the rest and have discussed required updates (ABW definition, Microsoft technology stack, inclusion of Transition team resource, etc.).</p> <p>I see you have incorporated the As Is and the Conceptual models I drafted for the FBC.</p> <p>I discussed my view with Gary Alexander and followed up on the points discussed with yourself this morning – dates clarification, TEC procurement options, PA Consulting view.</p> <p>Following these reviews my SA view remains the same as detailed below:</p> <p>Solution Architecture View - Assistive Technology</p> <p>The proposed model is an abstraction to</p>	08/02/2019

	<p>a higher level so no technologies or vendors have been mentioned.</p> <p>The initial plan for the architectural design for this work remains at a high level. It is based on the strategic objectives of a future TEC service for BCC.</p> <p>The technology will seek to support the development of the processes, roles and organisational design for the future BCC TEC service model proposed by PA Consulting.</p> <p>The proposed design would comply with the future IT strategy and EA architectural principles.</p>	
Property View	Not applicable.	
Legal View	<p>The Procurement Regulations and the Council own Procurement Rules should be complied with in respect of all commissioning of external services and procurement of equipment etc. Where any employees are impacted by the proposals, appropriate consultation should be undertaken. Wherever there is a proposal to reduce packages of care and/or replace with or otherwise employ AT, this should be the subject of proper and effective consultation with key stakeholders (eg service users) , and all appropriate equalities impacts should be identified and assessed. Consideration should also be given to how procurement activities will support the Council's social value policy.</p>	19/02/2019
Commissioning & Procurement View	<p>19.3.1 – Procurement of TEC Equipment – The approach described in this document is the current approach agreed. Any variation to the ICES contract will need to be agreed with CPG and evidenced that this will achieve best value for money for the Council. One of the options that has been explored for the future requirements of the TEC hub is to include the TEC requirement in the new ICES contract/tender process. This will be an EU compliant procurement approach, it is also anticipated that this will be a collaboration across the CCG's and the other Council's in the area. If the</p>	18/02/2019

	<p>provision of TEC is not satisfactory within the ICES contract, the Council may explore other means of purchasing this equipment.</p> <p>19.3.2. - Procurement of the integrated technology environment – ICT have provided comments for this section.</p> <p>19.3.3 - Procurement of capacity and capability – Any procurement of additional capacity and capability will need to be compliant with our own Procurement Rules as well as the Public Contracts Regulations 2015. These services maybe available from the ESPO telecare contract and a mini competition from this contract can be undertaken to ensure value for money is achieved.</p>	
Information Security View	<p>From the perspective that this is just a change to the service model, this is approved with the following points:</p> <ul style="list-style-type: none"> ○ Outside of this PIA some testing of the TEC devices is undertaken. ○ Future TEC devices will require a review under this PIA especially when the service expands to track individual's locations, behaviours, habits etc. ○ Can the data flow reflect the handover of processing to the Bristol Operations Centre. When/where/how does SU data pass over Ops Centre. ○ Can the service assure us that the Bristol Operations Centre accreditation is appropriate and compliant. <p>The service will need to make sure they record the process around securing the devices/removing factory default settings.</p>	18/02/2019

B. Mandatory Project Documents

Document Name (& links to templates)	Stage required	Document Exists? (Yes/No)	Document Owner	Hyperlink to document
EQIA Relevance Check	Mandate	Yes	Oliver Buell	
Privacy Impact Assessment Relevance check	Mandate	Yes	Oliver Buell	
Options Appraisal	OBC	Yes	Oliver Buell	
Project Financial Spreadsheet	OBC & FBC	Yes	Oliver Buell	

<i>(costs and benefits/ sources of funding/ benefits contracts)</i>				
RAID Log	OBC & FBC	Yes	Oliver Buell	
Project Plan	OBC & FBC	Yes	Oliver Buell	
EQIA	OBC & FBC	Full EqIA not required. See EqIA relevance check above.		
EcoIA	OBC & FBC	Yes	Oliver Buell	
Info: General Data Protection Regulation Privacy Impact Assessment template	OBC & FBC	Yes	Oliver Buell	
Project Board Terms Of Reference	FBC (Recommended OBC)	Yes	Merlin Jones	
Business Requirements	FBC	Yes	Oliver Buell	
Mandate	OBC & FBC	Yes	Oliver Buell	
Outline Business Case	FBC	Yes	Oliver Buell	
Implementation plan	FBC	Yes	Oliver Buell	

C. Timeline of approvals and any associated conditions

#	Meeting	Date	Action/Decision/Condition	Date for completion (If applicable)	Owner
1	Better Lives Programme Board	25/02/2019			
2	EDM	13/03/2019			
3	Cabinet Member Briefing	25/03/2019			
4	Cabinet	07/05/2019			

RISK LOG

PROJECT NAME:	Technology Enabled Care Service Model	PROJECT ID	18ST125.6
PROJECT MANAGER:	Oliver Buell	DATE LAST AMENDED	15/02/2019

KEY: Category - 'E/F' Economic/Financial; 'E' Environmental; 'L' Legal/Regulatory; 'O/M' Organisational/management; 'P' Political; 'S/C' Strategic/Commercial; 'T/O' Technical/Operational
Likelihood - 6 = Almost certain, 5 = Likely, 4 = Probable, 3 = Possible, 2 = Unlikely, 1 = Almost impossible Impact: 4 = Catastrophic, 3 = Critical, 2 = Significant, 1 = Marginal
Priority Score - Purple (18-24: Catastrophic Risk); Red (10-16: Critical Risk); Amber (9-8: Significant Risk); Green (1-6: Marginal Risk)

ID	Type	Category	Description	Likelihood	Impact	Priority	Date identified	Countermeasure or response	Residual			Owner / Actioner	Notes	Date of last update	Status	Related RAID ID
									Likelihood	Impact	Priority					
R001	Risk	S/C	Strategic alignment: the TECS Hub develops through implementation in a way that does not fully align with Better Lives programme	4	3	12	15/02/19	Governance of change ensures ongoing strategic review of Hub development	3	3	9	Oliver Buell		15/02/19	Open	
R002	Risk	T/O	Technology risks: increased reliance on TEC is not accepted by practitioners and commissioners at first point of assessment in spite of positive user feedback	3	4	12	15/02/19	Ensure awareness starts early and practitioners feel part of the change and confident in the technology	3	4	12	Oliver Buell		15/02/19	Open	
R003	Risk	T/O	Technology risks: expectations of users rise to expect TEC as part of any service requirement despite eligibility not being met	3	2	6	15/02/19	Managed conversations at triage/eligibility /assessment	3	2	6	Oliver Buell		15/02/19	Open	
R004	Risk	L/R	Regulatory risk: increased use of equipment and data for monitoring may be incompatible with data regulations and information sharing	3	3	9	15/02/19	Maintain overview of process changes through governance and process owners	3	3	9	Oliver Buell		15/02/19	Open	
R005	Risk	S/C	Commercial/financial: there are additional unknown costs associated e.g. with costs of training and culture change management, changes to existing technology contracts, rising home care or residential care costs in response to lower demand.	3	4	12	15/02/19	Manage through detailed resource planning and cost modelling before FBC sign-off and manage through governance reviews in delivery	3	4	12	Oliver Buell		15/02/19	Open	
R006	Risk	T/O	Benefits risk: projected financial benefits are not achieved as a result of scope creep and over-runs in implementation.	3	3	9	15/02/19	Develop and tightly manage benefits monitoring and realisation to evidence savings	3	3	9	Oliver Buell		15/02/19	Open	
R007	Risk	T/O	Capacity and capability: there are insufficient skills and resources in place to deliver the change (either within Commissioning, Careline, across practitioner, staff or leadership)	4	4	16	15/02/19	Manage through resource planning and detailed implementation management	4	4	16	Oliver Buell		15/02/19	Open	
R008	Risk	O/M	Delivery and implementation: the TECS Hub change is not delivered to time, quality or budget.	3	3	9	15/02/19	Governance of change focuses on exception reporting	3	3	9	Oliver Buell		15/02/19	Open	
R009	Risk	S/C	Supply: the potential supplier market for service delivery or equipment services is not able to fulfil demand and range of products at expected costs	3	3	9	15/02/19	Market test future service requirements with existing and wider suppliers	3	3	9	Oliver Buell		15/02/19	Open	
R010	Risk	E/F	Affordability: budgetary constraints in next FY impact ability to fund the change as intended	3	3	9	15/02/19	FBC sign-off secures budget commitment to change	3	3	9	Oliver Buell		15/02/19	Open	
R011	Risk	L/R	Policy: future impact of regulatory changes may further adversely affect the TECS Hub and ASC Five Year Forward View	3	3	9	15/02/19	FBC sign-off secures budget commitment to change	3	3	9	Oliver Buell		15/02/19	Open	
R012	Risk	T/O	Technology risk: changes needed to Council systems to enable integrates end-to-end user centred service are unaffordable or will take too long for TECS Hub	3	4	12	15/02/19	Scope technology requirements and ensure early review in council wide technology change plans	3	4	12	Oliver Buell		15/02/19	Open	
R013	Risk	O/M	Service takes longer to implement than planned – delay achievement of project benefits	3	3	9	15/02/19	Scope technology requirements and ensure early review in council wide technology change plans	3	3	9	Oliver Buell		15/02/19	Open	
R014	Risk	E/F	Financial savings indicated in section 18.4 of FBC are not delivered as planned	3	3	9	15/02/19	Develop and tightly manage benefits monitoring and realisation to evidence savings	3	3	9	Oliver Buell		15/02/19	Open	
R015	Risk	T/O	Staff with sufficient skills and experience to work in the service are not trained/recruited resulting in fewer, less appropriate assessments completed	3	4	12	15/02/19	Manage through resource planning and detailed implementation management	3	4	12	Oliver Buell		15/02/19	Open	
R016	Risk	P	Business case is not approved by Cabinet in May 2019 delaying the implementation phase with a knock-on effect on delivery.	3	4	12	15/02/19	Ensure passage of FBC through sign-off by walking key signatories through details	3	4	12	Oliver Buell		15/02/19	Open	
R017	Risk	S/C	Appropriate TEC is not available reducing the support for service users	3	3	9	15/02/19	Market test future service requirements with existing and wider suppliers	3	3	9	Oliver Buell		15/02/19	Open	
R018	Risk	T/O	As part of Accessible Homes, TECS becomes less connected with Practitioners within Adult Social Care.	3	3	9	15/02/19	Develop and deliver appropriate change management plans	3	3	9	Oliver Buell		15/02/19	Open	
R019	Risk	T/O	There are a number of other ASC projects within the Transformation Programme which are linked to the benefits outlined in this business case.	3	3	9	15/02/19	Manage duplicated requirements and resource overlaps through integrated programme planning	3	3	9	Oliver Buell		15/02/19	Open	

Bristol City Council Equality Impact Relevance Check



This tool will identify the equalities relevance of a proposal, and establish whether a full Equality Impact Assessment will be required. Please read the guidance prior to completing this relevance check.

What is the proposal?	
Name of proposal	Technology Enabled Care Service Model
Please outline the proposal.	<p>Create Technology Enabled Care Service – including Accessible Homes</p> <p>This option brings together all TEC activity within BCC into a single service or hub and combines the service with the existing Accessible Homes (AH) service.</p> <p>Practitioners will refer into the service when they believe TEC would be appropriate. The referrals will be outcomes-based – Practitioners specify the required outcomes and the TEC Service then performs a TEC assessment to select equipment that will realise those outcomes.</p> <p>The TEC assessment is outside of the normal Care Act assessment and could be combined with AH assessment for adaptations in citizen's homes. A combined assessment would consider which TEC and other adaptations are necessary. The referral pathway could also be used by people external to Bristol City Council such as from Health and self-funders. This would generate additional income for the Service.</p> <p>In addition to TEC assessments, responsibilities of the hub would include:</p> <ul style="list-style-type: none"> • Training for Practitioners. • Internal and external communications. • Quality assurance – the hub will review TEC that has been installed to make sure the desired outcomes are being achieved. Financial and non-financial benefits will also be tracked and reported regularly. • Procurement, installation and maintenance of TEC if required.

	<ul style="list-style-type: none"> • Explore and test and adopt new TEC as it comes into the market. • Partner with other organisations e.g. Universities to develop novel TEC. <p>Bristol Operations Centre would continue to operate Careline and would be notified of new customers by the TEC Service.</p>
What savings will this proposal achieve?	This contributes to the savings to be delivered through the Better Lives programme.
Name of Lead Officer	Terry Dafter

<p align="center">Could your proposal impact citizens with protected characteristics? (This includes service users and the wider community)</p>
<p>Please outline where there may be significant opportunities or positive impacts, and for whom.</p>
<p>The increased use of TEC has positive impacts for people with disabilities and for older people by:</p> <ul style="list-style-type: none"> • Increasing their independence by helping them to live safely in their own homes for longer. • Reducing the need for care and support. • Better safeguarding (managing risk and promoting safety). • Preventing carer breakdown. • Enabling communication thereby reducing loneliness and isolation. • Increasing wellbeing by allowing them to pursue hobbies or meaningful leisure time.
<p>Please outline where there may be significant negative impacts, and for whom.</p>
<p>For the same two groups above, there may be an impact on loneliness and isolation if face-to-face contacts are reduced when replaced by TEC (e.g. installation of TEC decreases the number of home care visits necessary to keep a service user safe). However this is counterbalanced through the availability of devices that enable communication such as tablets.</p>

<p align="center">Could your proposal impact staff with protected characteristics? (i.e. reduction in posts, changes to working hours or locations, changes in pay)</p>
<p>Please outline where there may be significant opportunities or positive impacts, and for whom.</p>
<p>There are significant positive staff impacts.</p>
<p>Please outline where there may be negative impacts, and for whom.</p>
<p>As training for staff will be necessary, staff with protected characteristics could be disadvantaged if the training is not accessible. However, all training will be delivered in</p>

line with current BCC policies minimising the risk of this occurring.

Is a full Equality Impact Assessment required?

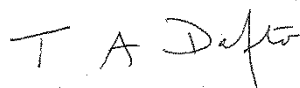
Does the proposal have the potential to impact on people with protected characteristics in the following ways:

- access to or participation in a service,
- levels of representation in our workforce, or
- reducing quality of life (i.e. health, education, standard of living)?

Please indicate yes or no. If the answer is yes then a full impact assessment must be carried out. If the answer is no, please provide a justification.

The use of TEC is decided on an individual basis through the application of a Care Act 2014 compliant assessment of need or review of a package of care. This ensures that all aspects of an individual's wellbeing are considered before TEC is used and that they are not disadvantaged in any way. Training of staff will be delivered in accordance with Bristol City Council policy and ensure that staff with protected characteristics are not disadvantaged.

Service Director sign-off and date:



Terry Dafter 16/4/2019

Equalities Officer sign-off and date:



Duncan Fleming 11/2/2019

Eco Impact Checklist

Title of report: Technology Enabled Care Service Model				
Report author: Oliver Buell				
Anticipated date of key decision: May 2019				
<p>Summary of proposals: This option brings together all TEC activity within BCC into a single service or hub and combines the service with the existing Accessible Homes (AH) service.</p> <p>Practitioners will refer into the service when they believe TEC would be appropriate. The referrals will be outcomes-based – Practitioners specify the required outcomes and the TEC Service then performs a TEC assessment to select equipment that will realise those outcomes.</p> <p>The TEC assessment is outside of the normal Care Act assessment and could be combined with AH assessment for adaptations in citizen's homes. A combined assessment would consider which TEC and other adaptations are necessary. The referral pathway could also be used by people external to Bristol City Council such as from Health and self-funders. This would generate additional income for the Service.</p> <p>In addition to TEC assessments, responsibilities of the hub would include:</p> <ul style="list-style-type: none"> • Training for Practitioners. • Internal and external communications. • Quality assurance – the hub will review TEC that has been installed to make sure the desired outcomes are being achieved. Financial and non-financial benefits will also be tracked and reported regularly. • Procurement, installation and maintenance of TEC if required. • Explore and test and adopt new TEC as it comes into the market. • Partner with other organisations e.g. Universities to develop novel TEC. <p>Bristol Operations Centre would continue to operate Careline and would be notified of new customers by the TEC Service.</p>				
Will the proposal impact on...	Yes/No	+ive or -ive	If Yes...	
			Briefly describe impact	Briefly describe Mitigation measures
Emission of Climate Changing Gases?	Yes	-ve	Increase use of assistive technology will lead to increased CO ₂ production as the electronic devices will require electricity to function. However, the amount of electricity required is not significant.	None.
Bristol's resilience to the effects of climate change?	No			
Consumption of non-	No			

renewable resources?				
Production, recycling or disposal of waste	No			
The appearance of the city?	No			
Pollution to land, water, or air?	No			
Wildlife and habitats?	No			
Consulted with:				
Summary of impacts and Mitigation - <u>to go into the main Cabinet/ Council Report</u>				
There are no significant environmental impacts.				
Checklist completed by:				
Name:		Oliver Buell		
Dept.:		Change Services		
Date:		02/07/18		
Verified by Environmental Performance Team		Nicola Hares 11/02/2019		

Decision Pathway – Report

PURPOSE: Key decision

MEETING: Cabinet

DATE: 07 May 2019

TITLE	Library technology replacement and upgrade		
Ward(s)	Bristol City Wide		
Author: Kate Murray		Job title: Head of Libraries	
Cabinet lead: Cllr Asher Craig		Executive Director lead: Colin Molton	
Proposal origin: Mayor			
Decision maker: Cabinet Member			
Decision forum: Cabinet			
Purpose of Report: This report seeks approval to: <ol style="list-style-type: none">To approve the procurement of replacement self-service kiosks (and supporting equipment) that are now considered to be ‘end of life’ and the associated support & maintenance contract at a cost of £705,000 over 7 years.			
Evidence Base: <ol style="list-style-type: none">Context<ul style="list-style-type: none">Since 2012 Bristol City Council (BCC) has significantly increased its ‘self-service’ offering across a number of Libraries, giving the public greater access to Library services via extended-access solutions, free public computers and booking systems, as well as self-service kiosks. This increase in self-service has also contributed to reduced annual running costs (approx. £220K p.a.).In October 2018 Cabinet endorsed the commencement of a library technology review to look at the Library service’s systems and technology contracts to ensure the service is supported by resilient, sustainable systems, and continues to enable communities to get the most from their local community assets.Why do we need to invest? – Following completion of the technology review, it has been identified that the self-service kiosks and supporting equipment (purchased 7 years ago) that enable Library users to self-serve (issue their own books, make renewals, pay fines, book PCs and printers etc.) are considered to be ‘end of life’ and require replacement. The implications of being ‘end of life’ are:<ul style="list-style-type: none">From January 2020 the self-service kiosks that run on Windows 7 will become ‘unsupported’ – this will increase Bristol City Council’s IT security risks.Between now and January 2020 Bristol City Council will be upgrading Library desktop computers to Windows 10 – current equipment will not be compatible, making it impossible to tag new books, therefore impacting on core library service delivery.From December 2020 the chip and pin devices within current kiosks won’t meet new financial security standards. From then on, it won’t be possible for library users to pay via card.The three libraries with Extended Access won’t work ‘out of hours’ given these are connected to the kiosks, and are dependent on them working.Some of the chip and pin modules have already begun to fail and are unrepairable. There is an increasing risk of more breaking, meaning there will be more time out of use (waiting to be fixed), more costs involved in fixing, and in some cases the inability to fix or replace parts (reducing the service offer and leading to needing more staff).The support & maintenance contract will be out of contract. We need to ensure it complies with procurement			

regulations.

3. Are there any other benefits?

- Newer self-serve kiosks models meet the technological and financial security requirements.
- They offer extended payment methods such as contactless, enabling the Library service to further modernise the service and provide library users with more payment choices, and meet customer expectations.
- The kiosks are also portable, so can adapt to changing patterns of use.

4. What's being proposed?

- It is proposed that 35 new portable kiosks are purchased and old ones removed. Where required, other supporting equipment will also be replaced with new versions to meet new technological/ financial security requirements. This will include replacing the 60 tagging stations to comply with the new Windows 10 staff computers. A project is already underway to procure these products via a compliant route to market (expected use of ESPO framework).
- The project is subject to agreed internal governance and controls via CPG (Commissioning and Procurement Group, and Corporate Leadership Board).

5. Why is a Cabinet decision needed?

- Cabinet approval is required to progress with the purchase given the cost associated and impact to more than two wards.
- The expected costs of implementing and subsequently supporting and maintaining the self-service kiosks are estimated to be £705k over 7 years (equipment is expected to last approximately 5-7 years).
- Based on current cost estimates, these can all be met within existing capital and revenue budgets.

6. What next? A higher level of confidence of the final costs and delivery plan will be achieved through the procurement exercise and via Full Business Case approvals.

Cabinet Member / Officer Recommendations:

That Cabinet: -

1. Approve the procurement of the replacement self-service kiosks and associated equipment and maintenance contract.
2. Delegate authority to the Director: Economy of Place in consultation with the Deputy Mayor for Communities to procure and award the contracts.

Corporate Strategy alignment:

This proposal contributes to the following corporate strategy themes/ principles:

1. Redesign the council to work effectively as a smaller organisation (this proposal *maintains* the current smaller workforce)
2. Empowering & Caring: Provide 'help to help yourself' and 'help when you need it' through a sustainable, safe and diverse system of social care and safeguarding provision, with a focus on early help and intervention.

City Benefits:

- Improved customer service, providing modern self-service capabilities in line with customer expectations
- Supports provision of a range of payment methods available to all citizens in order to pay fines in a convenient, efficient manner.
- Gives citizens access to a wider range of Library products across Libraries West, reducing need to travel and providing greater choice.

Consultation Details:

None

Revenue Cost	Approx. £35k p.a.	Source of Revenue Funding	Library base budget – cost centre 10659
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Capital Cost	Approx. £460k	Source of Capital Funding	PL25 Capital
One off cost <input checked="" type="checkbox"/>	Ongoing cost <input checked="" type="checkbox"/>	Saving Proposal <input type="checkbox"/>	Income generation proposal <input type="checkbox"/>

Required information to be completed by Financial/Legal/ICT/ HR partners:

1. Finance advice

This report requests approval to replace 35 self-service library kiosks the hardware and software for which are now assessed as being 'end of life'. It also requests approval to procure, according to CPG specified processes, the associated annual licences, support and maintenance.

Libraries have been of significant public interest in recent years. This request has multi-ward impact and, taking in to account both the £460k investment cost plus the £35kp.a. revenue costs for up to 7 years, this request's estimated spend meets the £500k threshold for a key decision and as such should follow the decision pathway to Mayor and Cabinet for approval.

Confirmation of funding source(s):

- Libraries monies of £557k are retained within capital programme PL25 (across years 19/20-20/21). These would be used to cover the estimated one-off capital cost of £460k.
- Libraries BAU Revenue budget would contain the annual ongoing revenue costs of £35k per annum.

Finance Business Partner: Jemma Prince (06/03/2019)

2. Legal Advice:

The procurement of the equipment and any associated maintenance contracts will need to comply with the Public Contracts Regulations 2015 and the Councils own procurement rules.

In particular, use of the ESP0 framework is subject to compliance with the Council's Procurement Rules in relation to the use of an external framework, that the Framework agreement has been procured lawfully and it demonstrates value for money.

Legal Team Leader: Eric Andrews, Team Leader, Legal Services (13/03/2019), updated Husinara Jones, 16 April 2019.

Implications on IT: The IT Services is supportive of the need to replace the obsolescent technologies used in the Self-Service facilities in the libraries; failing to update these would present a significant security and operational risk. IT Services therefore supports this business case.

IT Team Leader: Ian Gale (23/02/19)

4. HR Advice: This approach will have minimal impact on the Library workforce with no requirement for additional staffing resource. A number of key Library management staff will be retiring from the service in the coming months. To mitigate that risk the service are recruiting to replace departing staff, to ensure appropriate transition and handover arrangements are in place.

HR Partner: Celia Williams (13/03/2019)

Background Documents: 2nd October 2018 Library Strategy Cabinet report

EDM Sign-off	G&R EDM –Colin Molton	06/02/2019
Cabinet Member sign-off	CLlr Asher Craig	28/02/2019
For Key Decisions - Mayor's Office sign-off	Mayor's Office	08/04/2019

Appendix A – Further essential background / detail on the proposal	NO
Appendix B – Details of consultation carried out - internal and external	NO
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment	NO
Appendix E – Equalities screening / impact assessment of proposal	YES

Appendix F – Eco-impact screening/ impact assessment of proposal	NO
Appendix G – Financial Advice	NO
Appendix H – Legal Advice	NO
Appendix I – Exempt Information	NO
Appendix J – HR advice	NO
Appendix K – ICT	NO

Bristol City Council Equality Impact Relevance Check





This tool will identify the equalities relevance of a proposal, and establish whether a full Equality Impact Assessment will be required. Please read the guidance prior to completing this relevance check.

What is the proposal?	
Name of proposal	Libraries Technology Review
Please outline the proposal.	<p>To deliver the review, procurement and implementation of a range of library technology to future proof the digital offer.</p> <p>Our self-service kiosks are in their twilight period and we wish to replace existing equipment which has been used by all citizens over the last 7 years with over 80% of all book/material loans going through these units.</p>
What savings will this proposal achieve?	There may be some support costs savings due to best value through procurement and simplified consolidation through contractual arrangements
Name of Lead Officer	Kate Murray, Head of Libraries

Could your proposal impact citizens with protected characteristics? (This includes service users and the wider community)
Please outline where there may be significant opportunities or positive impacts, and for whom.
<p>New units will have larger screens and will be more streamline. We anticipate that replacement self-service kiosks will provide the option for contactless payment as well as chip and pin and coin. Wi-fi login offers all users with their own devices easier access to wifi provision. This will include the users who own accessible equipment. Wifi printing, as with login, will benefit all citizens wishing to print material in our libraries.</p> <p>The existing supplier explicitly complies with accessibility requirements.</p>
Please outline where there may be significant negative impacts, and for whom.
<p>We have not identified any negative impacts for citizens with protected characteristics. We are not expecting an increase the use of the replacement self-service kiosks. Library staff are always available for more complex queries or for those that don't want to use them.</p>

Could your proposal impact staff with protected characteristics? (i.e. reduction in posts, changes to working hours or locations, changes in pay)
Please outline where there may be significant opportunities or positive impacts, and for

whom.
No impact
Please outline where there may be negative impacts, and for whom.
No impact

Is a full Equality Impact Assessment required?	
<p>Does the proposal have the potential to impact on people with protected characteristics in the following ways:</p> <ul style="list-style-type: none"> • access to or participation in a service, • levels of representation in our workforce, or • reducing quality of life (i.e. health, education, standard of living) ? 	
Please indicate yes or no. If the answer is yes then a full impact assessment must be carried out. If the answer is no, please provide a justification.	No. We have not identified negative impacts for people with protected characteristics.
<p>Service Director sign-off and date:</p>  <p>Nuala Gallagher 25.2.19</p>	<p>Equalities Officer sign-off and date:</p>  <p>Duncan Fleming 18/9/2018</p>

Decision Pathway – Report

PURPOSE: Key decision

MEETING: Cabinet

DATE: 07 May 2019

TITLE	The Environmental Offences (Fixed Penalties) (England) Regulations 2017: Increase in Fixed Penalty Rates		
Ward(s)	all		
Author: Lindsay Hay		Job title: Neighbourhood Services Manager	
Cabinet lead: Cllr. Steve Pearce		Executive Director lead: Colin Molton	
Proposal origin: BCC Staff			
Decision maker: Cabinet Member			
Decision forum: Cabinet			
Purpose of Report: To seek approval for: <div><div>1.</div><div>increasing fixed penalty charges for certain environmental offences</div></div> <div><div>2.</div><div>removal of the early payment rate for certain fixed penalties</div></div> <div><div>3.</div><div>the introduction of a new fixed penalty for Domestic Duty of Care.</div></div>			
Evidence Base: <div><div>1.</div><div>The Mayor has made a pledge that Bristol will be measurably cleaner by 2020 and the Clean Streets Plan which underpins the pledge is designed to change the behaviour of people in Bristol in order to reduce litter, dog fouling, fly tipping, graffiti and other environmental crimes. This will be done through the following interventions:<div><div>○</div><div>Sending a clear message</div></div><div><div>○</div><div>Cleaning up the city, and</div></div><div><div>○</div><div>A robust, zero tolerance approach to enforcement.</div></div></div></div> <div><div>2.</div><div>Although the cleanliness of the city has improved in many parts much more work needs to be done particularly in relation to behaviour change. An independent environmental quality survey completed in November 2018 found that Bristol needed to do more to tackle litter, fly posting and graffiti.</div></div> <div><div>3.</div><div>Environmental crime has a significant, wholly detrimental, impact on the wellbeing of people of Bristol and visitors to the city.</div></div> <div><div>4.</div><div>The cost of environmental crime to the city is high. In 17/18 there were 8206 reports of fly tipping to Bristol Waste Company (BWC) – costing £392,551 to remove. Each fly tip therefore costing approximately £50 to remove and enforce. In the same year we spent £100,000 on removing graffiti.</div></div> <div><div>5.</div><div>Removing early payment rate and increasing the penalty rates for certain offences sends a clear message.</div></div> <div><div>6.</div><div>Any returns generated from fixed penalties and due to the Council will resource environmental improvements as part of the clean streets strategy and in agreement with the Executive Member</div></div>			
Changes to fixed penalty rates The Environmental Offences (Fixed Penalties) (England) Regulations 2017 came into effect on 1 April 2018 increasing rates for fixed penalties payable in respect of certain environmental offences. The change in legislation automatically increased the rates of some fixed penalty notices from 1 April 2018 to a default level set by the legislation. One year after the changes we have reviewed the penalty rates and propose a number of changes either to increase the			

penalty charge or to remove existing early payment rates. The current and proposed penalty rates are detailed in Appendix A background information.

There is no proposal to increase the penalty rate for littering or to remove the reduced rate for early payment.

Domestic Duty of Care The Domestic Duty of Care Fixed Penalty S34 (2A) Environmental Protection Act came into force from 7th January 2019. This enables local authorities to issue a FPN to a person who has failed to comply with the duty relating to the transfer of household waste. The range of the penalty is £150- £400. The default rate is £200. As this is a new measure and, in consideration that the business rate is a maximum of £300 and, in line with other core cities, it is proposed to set the fixed penalty rate at £200. The rate to be reviewed in 12-18 months once it has been more widely publicised.

More information about Domestic Duty of Care and the responsibility of householders is detailed in Appendix A.

The Clean Streets publicity and communications plan will include a campaign to highlight householders responsibilities when making private arrangements to dispose of domestic waste as well as low cost / free options for getting rid of unwanted household goods. Plans to focus messages to more deprived areas of the city are detailed in the equalities impact assessment (Appendix E)

Dog fouling

Fixed penalties relating to dog fouling and dogs off lead are governed by separate legislation and are set at the highest level currently available.

Cabinet Member / Officer Recommendations: That Cabinet:

1. Approve the increase the fixed penalty charges as set out in the table below

The following penalty schedule to take effect from 14/05/2019.

Offence	Section/Act	Early Payment	Existing Full £	Proposed Full £
Littering	S.87/88EPA'90	retain £65.00	100.00	100.00
Fly-posting	S.43ASB'03	remove	100.00	150.00
Graffiti	S.44ASB'03	remove	100.00	150.00
Distribution of printed matter	S.3AEPA'90	remove	100.00	150.00
Household duty of care	S.32(2A)EPA'90	-	n/a	200.00*
Commercial waste receptacles	S.47EPA'90	-	100.00	110.00
Fly-Tipping	S.33EPA'90	-	200.00	400.00
Fail to produce waste transfer notes	S.34(5)EPA'90	remove -	300.00	300.00
Fail to produce waste carriers licence	S.5COPA'89	remove	300.00	300.00

2. Approve the removal of the early payment rate for certain fixed penalties as set out in the table below.

Offence	Section/Act
Fly-posting	S.43ASB'03
Graffiti	S.44ASB'03
Distribution of printed matter	S.3AEPA'90

Fail to produce waste transfer notes	S.34(5)EPA'90
Fail to produce waste carriers licence	S.5COPA'89

3. Approve the introduction of a new fixed penalty for breach of Domestic Duty of Care of £200.

4. Notes that the new penalty rate in recommendation 3 will be reviewed in 12-18 months' time.

Corporate Strategy alignment:

Making the streets of Bristol cleaner is one of the key objectives of the 2017-2022 Corporate Strategy.

The strategy says that we will put Bristol on course to be run entirely on clean energy by 2050 and introduce a safe, clean streets campaign.

The Clean Streets Campaign will be a main focus to help us improve the cleanliness of the city and focus our resources on the areas of highest need.

The Clean Streets Campaign includes developing a robust approach to environmental enforcement.

City Benefits:

This proposal is part of a plan to make Bristol's streets measurably cleaner by 2020 through measures taken to encourage long term behaviour change. The measures include education and community engagement, targeted action on particular street scene hotspots in the city and increased enforcement action. The realisation of the proposals outlined in this plan would significantly reduce environmental impact across a range of areas, in particular, the appearance of the city, pollution to land and water and wildlife and habitats. Whilst it is not possible to calculate the scale of reduction, it's likely that it would be significant in the citywide context.

Improving the environment contributes to improving the mental health and wellbeing of residents reducing demand for mental health services and increase emotional wellbeing.

Evidence from the annual Quality of Life survey noted above indicates that equalities groups and people living in more deprived parts of the city currently tend to be more adversely affected by streetscene issues than the population in general. These findings are supported by more general research by groups such as Keep Britain Tidy who have also noted that deprived areas tend to suffer the most from poor local environmental quality and that those living in more deprived areas are less likely to feel satisfied with the appearance of their local area than those living in more affluent areas.

A reduction in fly tipping would reduce the incidents of obstructions to pavements and public highways which can have a negative impact on older people and disabled people.

Graffiti can be racist, homophobic or otherwise offensive. Graffiti can also have an impact on older and more vulnerable residents as it can make an area feel less safe.

Consultation Details:

Bristol Waste Company is supportive of the proposals as are representatives of parks, estate management and highways who have been consulted.

BWC fully supports taking a zero-tolerance approach to environmental crime and using the full powers available for enforcement is key in ensuring that the city is kept clean and free from litter and fly tips, as well as other environmental crimes. BWC's educational campaigns and communications plan work alongside the increases in the fines to ensure that people are encouraged to make the right choices for their waste and litter

Revenue Cost	£nil	Source of Revenue Funding	n/a
Capital Cost	£nil	Source of Capital Funding	n/a
One off cost <input type="checkbox"/> Ongoing cost <input type="checkbox"/> Saving Proposal <input type="checkbox"/> Income generation proposal <input type="checkbox"/>			

Required information to be completed by Financial/Legal/ICT/ HR partners:		
<p>1. Finance Advice: This report requests that BCC increases its fixed penalties relating to the environment from 1 June 2019. These revised penalties will be within the range set out in Environmental Offences (Fixed Penalties) (England) Regulations 2017. In addition, this report proposes the removal of some of the fixed penalty early payment rates which are currently offered.</p> <p>This environmental enforcement supports the Mayoral Clean Streets pledge and will continue to be delivered with no financial cost impact to the Council. This proposal is not linked to any listed savings initiative.</p> <p>Finance Business Partner: Jemma Prince 5/3/2019</p>		
<p>2. Legal Advice: The Environmental Offences (Fixed Penalties) (England) Regulations 2017 enable the Council to specify the amount of a fixed penalty subject to prescribed minimum and maximum amounts in respect of a number of environmental offences. It is within the discretion of the Council not to discount the penalty in the event of early repayment. Regard should be had to the Regulators Code prior to deciding on the penalties to be imposed.</p> <p>Legal Team Leader: Sarah Sharland 17/4/2019</p>		
<p>3. Implications on IT: There are no IT implications arising from this report</p> <p>IT Team Leader: Ian Gale 28/2/2019</p>		
<p>4. HR Advice: No anticipated HR implications evident</p> <p>HR Partner: Celia Williams 5/3/2019</p>		
<p>Background Documents: The Environmental Offences (Fixed Penalties) (England) Regulations 2017 The Domestic Duty of Care Fixed Penalty S34 (2A) Environmental Protection Act</p>		
EDM Sign-off	Colin Molton/Patsy Mellor	13/03/2019
Cabinet Member sign-off	CLlr Steve Pearce	19/03/2019
For Key Decisions - Mayor's Office sign-off	Mayor's Office	08/04/2019

Appendix A – Further essential background / detail on the proposal	YES
Appendix B – Details of consultation carried out - internal and external	NO
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment	NO
Appendix E – Equalities screening / impact assessment of	YES
Appendix F – Eco-impact screening/ impact assessment of proposal	YES
Appendix G – Financial Advice	NO
Appendix H – Legal Advice	NO
Appendix I – Exempt Information	NO
Appendix J – HR advice	NO

Appendix A

Background – further information

Pattern of environmental crime in Bristol

1. Bristol is experiencing a significant increase in the number of graffiti tags reported for removal:
 - a. April 15 – March 16 - 2,863
 - b. April 16 – March 17 - 2,496
 - c. April 17 – March 18 - 3,738

- Bristol has witnessed a reduction in fly tip incidents since 2013 but fly tipping remains a significant problem:

YEAR	13/14	14/15	15/16	16/17	17/18
No. of clearances	10472	9709	9456	9356	8206
% change		7.29	2.61	1.06	12.29

2474 actions were taken against the 8206 reported fly tip incidents in 2017/18. The fly tipping FPN was a significant sanction for enforcement

Investigation Actions	Warning Letter Actions	Statutory Notice Actions	Total Fixed Penalty Notice Actions	Duty of Care Inspection Actions	Stop and Search Actions	Vehicles seized	Formal Caution Actions	Prosecution Actions
1385	524	301	169	94	0	0	1	0

Summary of changes

Offence	Section/Act	Early Payment	Existing Full	Proposed Full
Littering	S.87/88EPA'90	£ 65.00	£ 100.00	£ 100.00
Fly-posting	S.43ASB'03	-	£ 100.00	£ 150.00
Graffiti	S.44ASB'03	-	£ 100.00	£ 150.00
Distribution of printed matter	S.3AEPA'90	-	£ 100.00	£ 150.00
Distribution of printed matter	S.3AEPA'90	-	£ 100.00	£ 150.00
Household duty of care	S.32(2A)EPA'90	-	n/a	£ 200.00
Commercial waste receptacles	S.47EPA'90	-	£100	£ 110.00
Fly-Tipping	S.33EPA'90	-	£200	£ 400.00
Fail to produce waste transfer notes	S.34(5)EPA'90	-	£300	£ 300.00

Fail to produce waste carriers licence	S.5COPA'89	-	£300	£ 300.00
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Domestic Duty of Care

The Domestic Duty of Care imposes a duty on an occupier of domestic property to take all available measures to make sure that any transfer of household waste is only to an authorised person or to a person for authorised transport purposes. An authorised person is one of the following:

- Someone who has a valid registration as a carrier, broker or dealer of waste issued by the Environment Agency.
- Waste management operator who has an environmental permit or registered exemption to accept such waste issued by the Environment Agency.

The duty of care requirement equates to the householder asking the person or business they transfer their waste to (or who arranges the transfer) for evidence of their authorisation, such as a copy of their waste carriers registration or proof of their exemption registration.

Householders can also use the Environment Agency public register to check any evidence of registration provided to them either online (<https://www.gov.uk/guidance/access-the-public-register-for-environmental-information>) or by telephone (03708 506 506). Unlicensed carriers are responsible, on occasion, for unlawful fly tips. The new FPN provides a useful tool to raise awareness of and to enforce this responsibility


Bristol City Council Equality Impact Relevance Check

This tool will identify the equalities relevance of a proposal, and establish whether a full Equality Impact Assessment will be required. Please read the guidance prior to completing this relevance check.





What is the proposal?	
Name of proposal	The Environmental Offences (Fixed Penalties) (England) Regulations 2017 Changes to Fixed Penalty Rates
Please outline the proposal.	<p>The Environmental Offences (Fixed Penalties) (England) Regulations 2017 came into effect on 1 April 2018 increasing rates for fixed penalties payable in respect of certain offences relating to the environment. 12 months after the changes were introduced the penalty rates have been reviewed and it is proposed to</p> <ul style="list-style-type: none"> • Remove the early fixed penalty payment rate tier for 1) distribution of printed matter; 2) graffiti and 3) flyposting and increase the full fixed penalty payment rate to the maximum allowable under the legislation to £150.00. • Increasing the full fixed penalty payment rate for Commercial Waste Receptacles to the maximum allowable under the legislation of £110.00. • Increasing the full fixed penalty payment rate for Domestic Waste Receptacles to the maximum allowable under the legislation of £80.00. • Increasing the full fixed penalty payment rate for Fly Tipping to the maximum allowable under the legislation of £400.00. • To remove the early fixed penalty payment rate tier for Fail to produce waste transfer notes. • To remove the early fixed penalty payment rate tier for Fail to produce waste carriers licence. • Introduce The Domestic Duty of Care Fixed Penalty S34 (2A) Environmental Protection Act which came into force from 7th January 2019. This enables local authorities to issue a FPN to a person who has failed to comply with the duty relating to the transfer of household waste. The range of the penalty is £150- £400. As this is a new measure and in consideration that the business rate is a maximum of £300 and in line with other core cities it is proposed to set the fixed penalty rate at £200 • FPNs for littering will remain the same at £100 with an early payment rate of £65 <p>Although the cleanliness of the city has improved in many parts much more work needs to be done particularly in relation to behaviour change. An independent environmental quality survey completed in November</p>

	2018 found that Bristol needed to do more to tackle litter, fly posting and graffiti. Removing early payment rate tiers and increasing the penalty rates for certain offences sends a clear message that Bristol is determined to tackle environmental offences and improve the cleanliness of the city.
What savings will this proposal achieve?	This proposal will be implemented as part of the Mayoral Clean Streets Plan which will continue to be delivered with no financial cost impact to the Council.
Name of Lead Officer	Lindsay Hay

<p align="center">Could your proposal impact citizens with protected characteristics? (This includes service users and the wider community)</p>
<p>Please outline where there may be significant opportunities or positive impacts, and for whom.</p>
<p>The proposal does not introduce any new impacts which have not been addressed as part of the Clean Streets Plan EqIA.</p>
<p>Please outline where there may be significant negative impacts, and for whom.</p>
<p>This proposal will be implemented as part of the Mayoral Clean Streets Plan for which a full EqIA has been undertaken to identify and mitigate any potential negative impact on people with protected characteristics.</p> <p> Appendix Clean Streets EqIA revised.</p> <p>The introduction of a FPN for Householder Duty of Care could disproportionately affect low income households who may not have a vehicle to take items to a Household Waste Recycling Centre themselves and who may seek to use the cheapest way of disposing of waste. This may well be by using an unlicensed waste carrier which are known to be more likely to fly tip the waste they have collected. In order to mitigate any negative impact for this group that may potentially be disadvantaged by this change promotional and educational campaigns and engagement with communities will be undertaken in advance and will be targeted at the more deprived parts of the city. This will include information about bulky waste collection and other charitable collection schemes such as the Sofa Project.</p> <p>People with a learning disability or sensory impairment, or people who speak English as additional language may find it more difficult to legitimately challenge an FPN and/or understand/discharge their responsibilities. Information about the appeal process will be provided in various formats and an individual's impairments would be taken into account in the process of issuing FPNs and any subsequent appeal.</p> <p>Defra guidance suggests: 'If a householder is considered to be a vulnerable person (for example due to age or disability), close consideration should be given as to whether it would be proportionate and in the public interest to issue a fixed penalty notice, on a case-by-case basis'.</p> <p>https://consult.defra.gov.uk/waste/consultation-household-waste-duty-of-care/user_uploads/guidance-for-local-authorities-on-household-waste-duty-of-care-fixed-penalty-notices.pdf</p>

<p align="center">Could your proposal impact staff with protected characteristics? (i.e. reduction in posts, changes to working hours or locations, changes in pay)</p>
Please outline where there may be significant opportunities or positive impacts, and for whom.
See Clean Streets EqIA
Please outline where there may be negative impacts, and for whom.
See Clean Streets EqIA

Is a full Equality Impact Assessment required?	
<p>Does the proposal have the potential to impact on people with protected characteristics in the following ways:</p> <ul style="list-style-type: none"> • access to or participation in a service, • levels of representation in our workforce, or • reducing quality of life (i.e. health, education, standard of living) ? 	
<p>Please indicate yes or no. If the answer is yes then a full impact assessment must be carried out. If the answer is no, please provide a justification.</p>	<p>No. The potential negative impacts of using fixed penalty fines are addressed in the Clean Streets Plan EqIA.</p>
<p>Service Director sign-off and date:</p>  <p>Patsy Mellor 02/04/2019</p>	<p>Equalities Officer sign-off and date:</p>  <p>Duncan Fleming 12/2/2019</p>

Eco Impact Checklist

Title of report: The Environmental Offences (Fixed Penalties) (England) Regulations 2017: Increase in Fixed Penalty Rates				
Report author: Lindsay Hay				
Anticipated date of key decision 7 May 2019				
Summary of proposals: To increase the fixed penalty rate for a number of environmental offences and remove the early payment rate for all but littering penalties				
Will the proposal impact on...	Yes/ No	+ive or -ive	If Yes...	
			Briefly describe impact	Briefly describe Mitigation measures
Emission of Climate Changing Gases?	Y	+ive	Less litter, flytipping etc has potential to reduce waste going to landfill and reduce emissions	See summary
Bristol's resilience to the effects of climate change?	Y	+ive	Behaviour change on issues such as littering, flytipping etc has potential to increase Bristol's resilience to climate change	
Consumption of non-renewable resources?	Y	+ive	Less litter, flytipping and more waste put into recycling will help reduce the consumption of resources	
Production, recycling or disposal of waste	Y	+ive	More education, community campaigns and enforcement on litter, flytipping etc has potential to increase materials that are recycled	
The appearance of the city?	Y	+ive	Less littering, flytipping, dog fouling and graffiti will improve the appearance of the city	

Pollution to land, water, or air?	Y	+ive	Less littering, flytipping and dog fouling will reduce pollution to land and water	
Wildlife and habitats?	Y	+ive	Less littering, flytipping and dog fouling will improve the environment for wildlife.	

Consulted with: Steve Ransom, Environmental Programme Manager (original Clean Streets Plan)

Summary of impacts and Mitigation - to go into the main Cabinet/ Council Report

This proposal is part of the Clean Streets plan to make Bristol's streets measurably cleaner by 2020 through measures taken to encourage behaviour change, The measures include education and community engagement, targeted action on particular streetscene hotspots in the city and increased enforcement action. The realisation of the proposals outlined in this plan would significantly reduce environmental impact across a range of areas, in particular, the appearance of the city, pollution to land and water and wildlife and habitats. Whilst it is not possible to calculate the scale of reduction, it's likely that it would be significant in the citywide context.

The net effects of the proposals are:
Positive

Checklist completed by:

Name:	Lindsay Hay
Dept.:	Growth and Regeneration
Extension:	36453
Date:	13/02/2019
Verified by Environmental Performance Team	Nicola Hares

Decision Pathway – Report

PURPOSE: Key decision

MEETING: Cabinet

DATE: 07 May 2019

TITLE	Food and Beverage Contract for Event Spaces in Council Buildings		
Ward(s)	Central		
Author: Zak Mensah		Job title: Head of Transformation	
Cabinet lead: Cllr Cheney		Executive Director lead: Colin Molton	
Proposal origin: BCC Staff			
Decision maker: Cabinet Member			
Decision forum: Cabinet			
<p>Purpose of Report: To seek approval to commence the procurement for a food and beverage service for core Council buildings including City Hall and non-core venues the Pavilion, Passenger Shed, Old Council House, and The Mansion House as part of the offer for our conferencing and events services. The Council operates a growing conferencing and events service for meetings, weddings, conferences, banquets and parties that generate much needed revenue to the Council. The procurement exercise will enable local SMEs to apply and broaden our food offer to the market.</p> <p><i>Please note that the food offer we seek is not for food ingredients but meals as part of an event e.g. conference or meeting.</i></p>			
<p>Evidence Base: Over the last three years collectively the venues used for meetings, conferencing and events have failed to reach budget. The majority of the venues have an existing contract for food & beverage that expired in February 2019. Current arrangements have been continuing on an ad hoc basis pending a review and re-procurement process. In order to provide a full conference and event service and to grow revenue we must provide a food & beverage offer that will service events and give the Council revenue for all food & beverage sold as a concession.</p>			
<p>Cabinet Member / Officer Recommendations:</p> <p>That cabinet</p> <ol style="list-style-type: none">1. Approve the procurement of new food and beverage / events concession(s) across both the core Council buildings (including City Hall) and non-core venues (the Pavilion, Passenger Shed, Old Council House, and The Mansion House).2. Note that concession contracts will be for initial terms 6 years with options to extend to a maximum of 10 years, and will include break clauses to provide the Council with flexibility to terminate at various points as described in appendix A1.3. Authorises the Executive Director for Growth and Regeneration in consultation with the Cabinet Member for Finance, Governance, Performance and Property to take all necessary steps to procure and award the contracts including determining the most appropriate contracting arrangements.			
<p>Corporate Strategy alignment:</p> <p>Well Connected Key commitment 4 “Provide expertise to support a range of festivals and [events] (including food, music and sport-related) in the city, such as advice, coordinating licensing and sourcing locations.”</p>			

City Benefits:

1. Provides competitively priced central locations for citizens and business to host meetings, conferences and events with food & beverage options.
2. Will ensure all food & beverage contracts align to the public health, social value commitments and/or policy and sit alongside other food procurement exercises.

Consultation Details:

1. 2018 BCC staff consultation
2. Destination Bristol Conference team Jan 2019

Revenue Cost	£-79,000 Income to Council per annum [Annual turnover £300,000+ for 5-10 years]	Source of Revenue Funding	Income funded
Capital Cost	£TBC procurement exercise. Nil to BCC	Source of Capital Funding	Third party capital through contract agreement
One off cost <input type="checkbox"/> Ongoing cost <input type="checkbox"/> Saving Proposal <input type="checkbox"/> Income generation proposal <input checked="" type="checkbox"/>			

Required information to be completed by Financial/Legal/ICT/ HR partners:

Finance Advice: The report seeks approval to procure a food and beverage contract to meet the catering needs of all the councils Event sites. The procurement terms will ensure that BCC benefits from royalties from F&B orders at its event sites, while avoiding any costs of providing such services.

It is expected based on current performance that each location will host a minimum of 2 events per week, with the exception of Mansion house, where that site is expected to host 3 events per week. The minimum revenue expected once the sites are operating at full capacity is c£200k.

As part of the procurement, the contractor will be expected to invest in the infrastructure at Mansion House to kit out the kitchen and the immediate environment at no additional costs to BCC.

The Events team have a new savings target of c£200k in 2019/20 and the additional revenue generated via these royalties are expected to help them in meeting their targets.

Finance Business Partner: Kayode Olagundoye, Interim Finance Business Partner, Growth & Regeneration, 27th February 2019

Legal Advice: Appropriate advice should be sought from procurement and legal services in relation to the nature of the proposed contracts, the most appropriate procurement approach and the subsequent contractual arrangements. It is noted that the current contractual arrangements ended or were due to end in February 2019. Those arrangements should be reviewed to ensure appropriate termination provisions have been or will be applied.

Legal Team Leader: Husinara Jones, Team Leader, 28 March 2019

Implications on IT: The main IT implications arising would seem to be the requirements for resilient IT services at public venues. This is a valid requirement, but will need to be scheduled into future IT work-plans.

IT Team Leader: Ian Gale, Head of IT, Resources (IT) 8th February 2019

HR Advice: There are no staff implications for the proposal. The procurement exercise will incorporate any council policies that have requirements regarding people employed by any third parties within the tender and contract

process.		
HR Partner: Celia Williams, HR Business Partner – Growth and Regeneration, 26 February 2019		
Background Documents:		
EDM Sign-off	Colin Molton	13-02-2019
Cabinet Member sign-off	Cllr Cheney	18-02-2019
For Key Decisions - Mayor's Office sign-off	Mayor's Office	08-04-2019

Appendix A – Further essential background / detail on the proposal	YES
Appendix B – Details of consultation carried out - internal and external	NO
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment	YES
Appendix E – Equalities screening / impact assessment of proposal	YES
Appendix F – Eco-impact screening/ impact assessment of proposal	YES
Appendix G – Financial Advice	NO
Appendix H – Legal Advice	NO
Appendix I – Exempt Information	NO
Appendix J – HR advice	NO
Appendix K – ICT	NO

Decision Pathway – Appendix A1



TITLE	Food and Beverage Contract for Event Spaces in Council Buildings		
Author: Zak Mensah		Job title: Head of Transformation	
Proposal origin: BCC Staff			
Decision maker: Cabinet Member Decision forum: Cabinet			
<p>Evidence Base: Over the last three years collectively the venues used for meetings, conferencing and events have failed to reach budget. The majority of the venues have an existing contract for food & beverage that expired in February 2019. In order to provide a full conference and event service and to grow revenue we must provide a food & beverage offer that will service events and give the Council a royalty on all sales.</p> <p>There is a demand for the venues for third party hire for Conferencing & Events as evidenced from the number of enquiries and current usage. According to Destination Bristol https://visitbristol.co.uk/conferences there are approx 147 venues of similar size and offer in central Bristol. There is use and a growing demand for the venues. In 2018 there were over 400 events at the venues many of which have food & beverage needs.</p> <p>The Bristol Market for Conferencing & Events</p> <p>The Bristol market for conferencing & events is strong with many venues across the city offering meeting rooms and conferencing. The https://www.venuedirectory.com/ directory lists 147 venues that have a capacity for 100 or more guests. Destination Bristol’s conferencing service receives over 700 enquiries annually from businesses who want to host a conference in Bristol and our venues receive a large number of referrals.</p> <p>Two of our existing Council venues feature at the top of the market, M Shed and Bristol Museum & Art Gallery which combined has revenue close to £2 million per annum. We regularly turn business away at these venues due to being at capacity.</p> <p>The demand for the offer</p> <p>The commercial demand for spaces in Bristol are for venues that can accommodate 100+ people for:</p> <ul style="list-style-type: none">• Conferences and meetings• Dinners and receptions• Events e.g. Film nights, conventions and art fairs• Proms and graduations• Summer and Christmas parties• Trade shows• Weddings <p>Three of the venues are listed buildings and their designs are unique which makes them appealing to the market as the majority of competitors are hotels, giving us a unique selling point. Internally over 400 events were hosted at City Hall alone in 2017-18.</p> <p>The expectation of clients is that the venue offers:</p> <ul style="list-style-type: none">• A Food & beverage offer• competitively priced accommodation via referral• Easy to find using public transport			

- Professional customer service and well maintained venue
- Robust Audio Visual (AV) equipment
- Several event room configurations and equipment
- Wifi
- In-house co-ordination
- Accessible
- Access to professional third party conferencing & events services e.g AV/film and furniture hire

The conferencing & events venues that are successful in Bristol have a dedicated multi-disciplinary team, investment in all aspects of managing the venue and clear standards.

Current landscape

The primary focus on venues referred to throughout the documents are listed below. Please note that any reference to core buildings are those that operate as core staff buildings the Council primary operates from which are currently City Hall and 100 Temple St.

City Hall

A unique listed building with the highest growth potential due to its location, the number of spaces available and condition. The building is also home to many Council services and staff and is heavily used for official council/public business.

City hall has a large conference hall with kitchen which can host 100-400 guests and approx. In addition to the hall, the building has meeting rooms for hosting 4-70 guests. The venue includes a staff café.

Harbourside Pavilion

The venue can host up to 100 guests and is a great location on the harbour and suitable for meetings, parties and as a private space for third parties who hire the nearby amphitheatre.

Passenger Shed

A listed building which is profitable with a unique selling point of having 800 capacity and late licensing. The food & beverage revenue per event is very lucrative due to the numbers at the venue.

Old Council House

A listed building run by the Register Office which conducts approx. 1000 ceremonies per year. The building has a number of meeting rooms and potential as a post ceremony venue for parties. The key issues are that it currently lacks any food & beverage offer, no entertainment or premises licence and the mixed use with venue hire and Register Office function makes it a difficult challenge.

The Mansion House

Run by a third partner contractor and used for weddings and parties. The large preparation and kitchen area makes it ideal for preparing food to be sent to other venues such as City Hall and third parties.

Key issues are that the building is worn down and requires capital to bring the hireable spaces back to standard.

Assertions

Our purpose is to run a successful conference & events business that is highly valued by customers, highly regarded in the Bristol market and profitable.

Recommendations

1REC [Procurement] The current contracts for providing food & beverage through third parties are due to expire in 2019 and are currently restricted to City hall/Mansion House/Passenger Shed. We seek to continue to provide a food

& beverage offer by going to the market for food & beverage contractors as a concession in exchange for a percent of revenue as a royalty at the venues listed throughout the paper.

The providers(s) would be responsible for the food offer and event management with support from our conference and events team who remain responsible for sales and venue management. Following advice from Procurement we wish to use a Dynamic Purchasing System (DPS) type of contract for core staff buildings including City Hall and non-core venues Old Council House, Harbourside Pavilion, Passenger Shed. A Dynamic Purchasing System (DPS) allows new entrants to the market to join during the lifetime of the DPS and is local supplier and SME friendly. The procurement exercise and terms and conditions for the DPS will be flexible enough to allow the council to withdraw or add venues to the list at any time.

This type of contract would enable the client to choose from a number of different contractors which would appeal to the widest client base and allow us to also offer food & beverage. This approach would enable us to offer a wider choice, scale our provision and also fully test the market demand and ensure a data-informed future decision on offering a food & beverage provision that is most favourable to the Council.

2REC [Procurement] The current contract for food & beverage in the Cash hall at City hall is due to expire in 2019 and we seek to retender as part of this wider exercise to maximise the value of officer time and resource going to the market.

3REC [Procurement] We seek a fully managed contract type for event management for conferencing and events at Mansion House. The current type of contract for the Mansion House is positive and a different approach is recommended to the other venues. Our recommendation is we seek a fully managed contract from one provider to manage sales including marketing and event delivery. The venue has a large production Kitchen and works well for a variety of functions including weddings and garden parties. The building is occupied with a small Council team and is used for some official Lord Mayor business. The kitchen type makes it unsuitable for multiple different providers to use. The building requires some repairs and maintenance and would benefit from capital expenditure which would be sought within the procurement exercise to reduce Council annual expenditure at the venue. We would seek a term of approximately ten years with additional break clauses to ensure that periodically The Council is able to exit e.g. after year 1, year 5 and year 8. The break clauses ensure the provider maintains effectiveness and will support a mutual term for any capital expenditure from the provider to be recouped – typically 3-5yrs. The Council would also seek marketing expenditure in addition to covering real costs such as utilities. Maximising social value will be an important part of the requirements.

4REC [Strategic] Continue to work in partnership with the newly formed commercialisation service within the Council to maximise the opportunity for scale, scope and speed of effective conferencing & events.

4REC [Licensing] Seek a premise and entertainment license at The Old Council House to allow the sale of alcohol and host post-ceremony events.

All contractors would need to meet council policy including Living Wage Accreditation.

The alternative to the two procurement recommendations above is:

- Do nothing and allow contracts to expire in which case the council will immediately reduce the attractiveness of each venue for customers seeking full event management. This would also eliminate a critical revenue stream.

Money

Revenue forecast for food & beverage at City hall, Old Council House, Harbourside Pavilion, City hall café and Mansion House. In addition to the food & beverage would be a room hire fee for use of Mansion House.

	Annual sum	1 day per week	2 days per week	3 days per week
Food & Beverage		£-104,100	£-143,460	£-177,363
Venue hire – mansion house only	Minimum £-60,000 annually			
Total		£-164,100	£-203,460	£-237,363
		Yr 1	Yr2	Yr 2/3+ Target

Figures quoted are F&B royalty ex VAT

See Appendix A2 for forecast growth and details of budget.

Based on our other venues and Bristol Market we would be targeting for three days per week average bookings within two years. In addition to the above revenue we receive 100% of room hire costs at all venues which will continue and is run by the Council conference and events team. The revenue is part of existing savings under NEW3.

EXEC SUMMARY

25/02/2019

Appendix A2

Food & beverage royalty forecast for DPS contract type

Yr	1	2	3	4 to 10
No. events per week	One	Two	Three	Four
City hall conference hall	£9,900	£19,800	£29,700	£39,600
City hall meeting rooms	£13,200	£26,400	£39,600	£52,800
Old Council House	£3,300	£6,600	£9,900	£13,200
Harbourside Pavilion	£3,300	£6,600	£9,900	£13,200
City hall café	£15,000	£15,750	£16,538	£17,364
Total royalty	£44,700	£75,150	£105,638	£136,164

Mansion House

Yr	1	2	3	4
Food & beverage on-site	£29,700	£34,155	£35,863	£37,656
Food & beverage off-site	£29,700	£34,155	£35,863	£37,656
Total royalty	£59,400	£68,310	£71,726	£75,312

Combined total F&B royalty	£104,100	£143,460	£177,363	£211,476
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Assumptions

Food & beverage only @ 15% royalty (min %% expected)

40 weeks of year use

There will be additional revenue from room hire and cost recovery
e.g. utilities

Historic Mansion House revenue - 12.5% royalty on food & beverage and 100% of room hire

	2018	2017	2016	2015
Food (gross)	£ 168,345	£ 205,737	£ 163,264	£ 106,177
Beverage (gross)	£ 72,592	£ 87,467	£ 72,597	£ 43,455
Food & beverage net	£ 192,750	£ 234,563	£ 188,689	£ 119,706
Food & beverage royalty	£ 24,094	£ 29,320	£ 23,586	£ 14,963
Venue hire (gross)	£ 68,660	£ 53,628	£ 54,187	£ 49,801
Venue hire (net)	£ 54,928	£ 42,902	£ 43,350	£ 39,841
Total to BCC	£ 79,021	£ 72,223	£ 66,936	£ 54,804

Risk Register for Food and Beverage Contract for Event Spaces in Council Buildings

Negative Risks that offer a threat to Events spaces in Historic buildings and its Aims (Aim - Reduce Level of Risk)

Ref	Risk Description	Key Causes	Key Consequence	Status Open / Closed	Strategic Theme	Risk Category	Risk Owner	Key Mitigations	Direction of travel	Current Risk Level			Monetary Impact of Risk £k	Risk Tolerance			
										Likelihood	Impact	Risk Rating		Likelihood	Impact	Risk Rating	Date
1	Failure to procure food & beverage providers	Unable to successful progress through the decision pathway	Will eliminate all revenue associated with Royalties from	Open	Financial	Sales	Zak Mensah	Procure food & Beverage providers or	Static	2	5	10	£100K+	2	5	10	Feb-19
1	Negative financial impact of sale of Passenger Shed	Network Rail have an option to purchase the venue as part of a wider project that is live 1 April	Will eliminate all revenue at Passenger Shed which is currently worth £300,000	Open	Financial	Property	Zak Mensah	Not selling any dates in 2020	Increasing	4	5	20	£300-400K	4	5	20	Feb-19
2	Lack of space availability	Either space is sold or internal use is free which prohibits selling	Loss of revenue	Open	Financial	Sales	Zak Mensah	Offer other venues and find arrangement for internal free use	Decreasing	2	5	10	£3000 per instance	2	5	10	Feb-19
3	Loss of internet connectivity during an event	Scheduled maintenance or connection fault	Reputation damage and loss of revenue due to refund/damage claim	Open	Reputation	Infrastructure	ICT	Instruct ICT about schedule for maintenance	Static	1	4	4	£5,000	1	4	4	Feb-19
4	Fire at venue	Failure to follow kitchen procedures	Danger to life and venue facilities	Open	Reputation	H&S	H&S	Produce Fire safetyRisk assessment and ensure all procedures are followed	Static	1	5	5	Unlimited	1	5	5	Feb-19
5	Poorly planned events	Failure to use procedures to mitigate issues	Reputation damage and loss of revenue due to refund/damage	Open	Reputation		Zak Mensah	Venue management plan	Decreasing	1	3	3	£100,000	3	3	9	Feb-19
6	Competitive risk	Poor customer service, poor pricing strategy, Bristol Market	Lower revenue potential	Open	Financial	Sales	Zak Mensah	Venue management plan	Static	2	4	8	£250,000	2	4	8	Feb-19
7	Suitability of venues	Poor management of infrastructure and/or building	Lower revenue potential	Open	Financial	Sales	Zak Mensah	Venue management plan	Decreasing	3	4	12	£250,000	1	5	5	Feb-19
8	Ensuring Health & safety in all areas	Inadequate procedures and/or failure to follow procedures	minor injury through to death	Open	Health and safety	H&S	H&S	Training, Venue management plan and contingency plans	Decreasing	2	5	10	Unlimited	2	5	10	Feb-19
9	Market forces	Reduction in marketing and CPD budgets from clients	Loss of ability to generate revenue	Open	Financial	Sales	Zak Mensah	Forecast effectively and understand the trends in the market e.g. Brexit	Increasing	3	4	12	£250,000	3	4	12	Feb-19

Bristol City Council Equality Impact Relevance Check

This tool will identify the equalities relevance of a proposal, and establish whether a full Equality Impact Assessment will be required. Please read the guidance prior to completing this relevance check.



What is the proposal?	
Name of proposal	Food and Beverage Contract for Event Spaces in Council Buildings
Please outline the proposal.	<p>To seek cabinet approval to go to the market to tender for providers of food & beverage</p> <p>Please note that the food offer we seek is not for grocery / food ingredients but meals as part of an event e.g. conference</p>
What savings will this proposal achieve?	#NEW3 £250,000 plus budget of £480,000 net
Name of Lead Officer	Zak Mensah

Could your proposal impact citizens with protected characteristics? (This includes service users and the wider community)
Please outline where there may be significant opportunities or positive impacts, and for whom.
<p>Our venues will continue to operate in their normal manner and are used by a wide variety of people who pay to host events. By continuing to invest in the facilities at each venue we will further improve accessibility to support people with disabilities. For example we will be removing the high stage at City hall and introduce flexible/removable staging. We plan to introduce new technology to improve the audio and support hearing loops via users own device in addition to the traditional hearing loop.</p> <p>At City hall by charging for a limited number of rooms this enables us to offer most of the rooms for free to staff to support Council Business which often involves citizens.</p> <p>Furthermore from March and pending approval we'll be introducing limited free room hire of our commercial spaces. This new offer will further allow the Council to use our spaces.</p> <p>The new proposed contract will continue to allow hire of the kitchen so that the widest offer of local business and world foods can be offered.</p> <p>There is also an agreement with the Mayor's office to provide free room hire in line with Mayor and corporate strategy. The agreement includes supporting a number of groups who are underrepresented. The Age protected characteristic for example through the Youth Council who use City hall without a room hire fee.</p>
Please outline where there may be significant negative impacts, and for whom.
<p>We do not believe the continued use of the venues for conferencing and events will have a negative impact on people with protected characteristics. We offer competitive rates for any commercial hires and will continue to offer free use via Council staff in accordance with our free use procedures. We have had zero complaints about our venues from any group listed with protected characteristics and have supported many events.</p> <p>The potential risk that council departments would be unwilling to hire council venues for events on behalf of equalities groups or to promote the public sector equality duty, due to being charged commercial rates has been mitigated because:</p> <ul style="list-style-type: none"> • 10 of the 15 spaces are available Monday to Fri at no cost or restriction including the Chamber. • All spaces will be free for staff use on: <ul style="list-style-type: none"> ○ Mondays from 1st March 2019 pending review

- Throughout August (which will support summer activities)
- There will be five free room hires for each directorate (We provided over 400 free hire events in the past 12 months.)

We will shortly be providing guidance on exceptions and all free use, with briefings and communication so council teams know how and when they can offer room hire for free.

Could your proposal impact staff with protected characteristics?

(i.e. reduction in posts, changes to working hours or locations, changes in pay)

Please outline where there may be significant opportunities or positive impacts, and for whom.

The service needs to scale up so we hope to offer a variety of additional posts including apprenticeships, paid internships and secondments over the next five years. Any third party procurement exercise will seek positive examples of social value within the opportunity which we hope will support ways to increase routes into the Council. Where staff have requested additional support to use our spaces we offer a free support service for example with staff with disabilities.

Our recruitment practice used in the Culture team is aimed at further diversifying our workforce which is a positive approach in addition to standard Council recruitment practice. The approach includes:

- a message on all adverts that states we actively encourage applications from candidates from under-represented groups
- we consider other methods of assessment
- we email opportunities to staff led groups BMEEG <BMEEG@bristol.gov.uk>; LGBT+Treasurer <BCCLGBT+Treasurer@bristol.gov.uk>; Young Employee Voice <yev@bristol.gov.uk>; Disabled Employees Group - Chair DEGChair@bristol.gov.uk
- All opportunities are advertised on VOSCUR
- We aim to ensure a diverse interview panel

Please outline where there may be negative impacts, and for whom.

We do not believe the continued use of the venues for conferencing and events will have a negative impact. We offer most of City hall meeting rooms for free and can be flexible on use of our commercial rooms upon request.

Is a full Equality Impact Assessment required?

Does the proposal have the potential to impact on people with protected characteristics in the following ways:

- access to or participation in a service,
- levels of representation in our workforce, or
- reducing quality of life (i.e. health, education, standard of living) ?

Please indicate yes or no. If the answer is yes then a full impact assessment must be carried out. If the answer is no, please provide a justification.

No

Service Director sign-off and date:



Nuala Gallagher 1.2.19

Equalities Officer sign-off and date:



Duncan Fleming 1/2/2019

Eco Impact Checklist

Title of report: Food and Beverage Contract for Event Spaces in Council Buildings				
Report author: Zak Mensah				
Anticipated date of key decision 07 May 2019				
Summary of proposals: To seek approval to go to the market to tender for providers of food & beverage. Please note that the food offer we seek is not for grocery / food ingredients but meals as part of an event e.g. conference				
Will the proposal impact on...	Yes/ No	+ive or -ive	If Yes...	
			Briefly describe impact	Briefly describe Mitigation measures
Emission of Climate Changing Gases?	Yes	-ive	<p>Some events will use transport for taking resources to venues by courier or lorry. Some clients and their customers will drive to the venue.</p> <p>The kitchens can use a high amount of electricity and/or gas.</p>	<p>Sites are all accessible by public transport and with only one exception do not have on-site parking (Mansion House for four cars). Each client pack includes "how to get there" information which focus on the ease of public transport. Will not offer discounts for using nearby car parking offers.</p> <p>Ensure contractors have an effective energy management plan and controls. As part of the plan the contractor will have annual targets for reducing energy consumption.</p>
Bristol's resilience to the effects of climate change?	Yes	-ive	Harbourside Pavilion is in flood risk area	The risk is logged on our business continuity plan and within the corporate approach to dealing with flooding.
Consumption of non-renewable resources?	Yes	-ive	The facilities at the venue may not be recyclable eg audio visual equipment	All equipment will be maintained to maximise life and repaired where possible. Upon retiring of equipment we will use the Council approved service for the collection of ICT/AV equipment.

		+ive	Use of plastics for drinking water	By April 2019 we will have replaced water bottle stations and plastic cups with main connected water fountain.
		+/-ive	Catering at City Hall and Cash Hall Café concession. Tender Cash Hall café concession which expires July 2019 as a lot within the other tender process to maximise public value of exercise.	Re-tendering café provision gives opportunity to encourage positive environmental aspects, such as no plastics used or no single use cups used. The tender should link into and continue the work being done by the Single Use Plastics Group (Namely taking away single use cups completely from the cash hall.) Contact Hannah Bush or Kurt James about this.
		+ive/ -ive	Tender of a catering contractor.	See above re plastics. Also during tender consider environmental areas such as locality of contractor and food miles, food for life accreditation, healthy foods etc.
		-ive	Registry office- 30CH Agree in principle to consider capital to install a kitchen if the business has potential with the aim to finance with third party contractor in the medium term.	Installation of a kitchen will consume resources in construction and will consume energy during operation. This will be considered separately when approved.
		+ive	We have pulled a lot of the utilities data and have been interrogating anomalies- for example the water usage at the pavilion is 5.54 per m2 which is extortionately high for a building of this	Monitoring and looking to improve environmental performance is good practice. For energy efficiency measures Salix funding (For example re-lamping to LED lights) could be used. Please talk to Nicola Hares to arrange access to the Salix funds.

			occur from parties	entertainment license and all venues use a combination of audio level monitoring and restrictions to type of equipment and volume as not to impact nearby business or residents.
Wildlife and habitats?	Yes	+ve	Tress and plant life at Mansion House	Regular maintenance of trees/plants as we wish to keep all current plants/trees.

Consulted with: Environmental Project Manager Nicola Hares

Summary of impacts and Mitigation - to go into the main Cabinet/ Council Report

The significant impacts of this proposal are through the operation of events and linked energy consumption and waste generation. Catering and café concession tendering provides an opportunity to look at ways to reduce food miles and waste linked to these operations.

The proposals include the following measures to mitigate the impacts...

- Ensure contractors become certified with Soil Association Food for life silver or gold award.
- Promote public transport to visit the venues
- Link in energy efficiency works where possible, utilising Salix funding.
- Work closely with the Single Use Plastics Group to ensure Café and catering contractors reduces their waste impact
- Ensure recycling facilities are available at events and are clearly labelled.

The net effects of the proposals are mixed, but there are some good opportunities to make environmental improvements linked to this report.

Checklist completed by:

Name:	Zak Mensah
Dept.:	Growth & Regeneration / Culture / Transformation
Extension:	23606
Date:	31-01-2019
Verified by Environmental Performance Team	Nicola Hares

Decision Pathway Report

PURPOSE: Key decision

MEETING: Cabinet

DATE: 07 May 2019

TITLE	Building Practice Capital Programme Budget Allocation 2019/20		
Ward(s)	Citywide		
Author: Adrian Randall	Job title: Head of Facilities		
Cabinet lead: Cllr Cheney	Executive Director lead: Mike Jackson, Executive Director Resources		
Proposal origin: BCC Staff			
Decision maker: Cabinet Member Decision forum: Cabinet			
Purpose of Report: <ol style="list-style-type: none"> To approve the 19/20 Building Practice Capital Programme Budget Allocation of a proposed capital spend of £1.65m across a number of sites and work types detailed in Appendix A. 			
Evidence Base: Appendix A is constructed using 3 streams of information: <ol style="list-style-type: none"> Condition Survey Data Surveyor Activity across BCC portfolio (on-going) Un sighted emergency Health and Safety work A contribution from the Capital Programme is made to educational operational sites and BCC Primary schools. This is because education capital is invested in new builds and major refurbishments.			
Cabinet Member/ Officer Recommendations: That Cabinet: - <ol style="list-style-type: none"> Approve the details of the proposed budget allocation for the 19/20 Building Practice Capital programme. Delegate authority to the Executive Director: Resources in consultation with the Deputy Mayor for Finance, Governance and Performance to incur the capital spend of £1.65m detailed in Appendix A. 			
Corporate Strategy alignment The project aligns to and will support the Mayoral Corporate Strategy Themes of: <ol style="list-style-type: none"> Fair and Inclusive Well Connected Wellbeing 			
City Benefits: The Corporate Strategy recognises the positive health effects of good quality and a well maintained built environment, including providing effective support for good quality learning, as well as ensuring sites are safe and fit for purpose.			
Consultation Details: None			
Background Documents: None			

Revenue Cost	£	Source of Revenue Funding	
Capital Cost	£1,700,00	Source of Capital Funding	Prudential Funding
One off cost <input checked="" type="checkbox"/>	Ongoing cost <input type="checkbox"/>	Saving Proposal <input type="checkbox"/>	Income generation proposal <input type="checkbox"/>

Required information to be completed by Financial/Legal/ICT/ HR partners:

1. Finance Advice:

This report sets out the works prioritised for expenditure against the Building Practice Service budget. This budget is identified as PL21 within the current MTFP's Capital Programme and represents 'essential Health & Safety works to maintain the structural fabric and condition of existing Council buildings to meet statutory compliance'.

For 19/20 total spend per the latest MTFP was planned to be £3.4m. This comprised £1.7m of new priorities for 19/20 which are outlined in Appendix A and, in addition, £1.7m which was originally planned for 18/19 but latterly forecast at P10 to remain unspent and therefore proposed for roll over and consolidation in to 19/20. This was approved by Full Council on 26 February 2019.

The Service now formally requests that Cabinet approves roll over from 18/19 in to 19/20 of a further £1.0m representing final underspend at year end. Approval of this will result in a 19/20 budget of £4.4m.

This is an ambitious (high volume and high value) priority list for those overseeing these works. The Service's management team recognise this but consider that familiarity with the now embedded procurement processes should enable them to accelerate delivery rates.

Finance Business Partner: Jemma Prince 25/4/19

2. Legal Advice: The Report identifies the specific individual cost relating to budget allocation for the Building Practice Capital Programme. Appropriate approval should be sought for any spending in accordance with the Council's decision pathway and the level of spend, and in compliance with the procurement rules.

Legal Team Leader: Husinara Jones, Team Leader, 26 April 2019

3. Implications on IT: There are no immediate IT implications arising from this report. During any works undertaken as identified in the report, the usual precautions regarding protection of IT services should be maintained

IT Team Leader: Ian Gale, Head of IT, Monday 25th March 2019

4. HR Advice: The work outlined in this report can be delivered within existing resources.

HR Partner: James Brereton (People & Culture Manager), 26th March 2019

EDM Sign-off	Mike Jackson	27/3/19
Cabinet Member sign-off	Cllr Cheney	1/4/19
For Key Decisions - Mayor's Office sign-off	Mayor's Office	4/4/19

Appendix A – Further essential background / detail on the proposal	YES
Appendix B – Details of consultation carried out - internal and external	NO
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment	NO
Appendix E – Equalities screening / impact assessment of proposal	YES
Appendix F – Eco-impact screening/ impact assessment of proposal	YES
Appendix G – Financial Advice	NO
Appendix H – Legal Advice	NO
Appendix I – Exempt Information	NO
Appendix J – HR advice	NO
Appendix K – ICT	NO

Site	Work Type	Justification For Work	Estimated Cost	Comments'	RAG
Asbestos management	Statutory	To ensure we meet our obligations under Control of Asbestos Regulations 2012. This budget is to cover the Capital costs of asbestos removal works highlighted from the Asbestos Management Surveys.	£ 150,000.00	Individual projects over £15,000 will require approval. Most projects will be below this threshold. This work is leading to a reduction in the number of site where asbestos is located.	R
Fire Precaution Works	Statutory	To fund remedial works identified following Fire Risk Assessments to meet the requirements of FRO regulations.	£ 150,000.00	Individual projects over £15,000 will require additional approval. It is anticipated that the majority of works will be low this threshold.	R
City Wide	Statutory	Installation of new water arrangements (taps and open troughs). The work is required to address Water Hygiene actions identified in the risk assessments.	£ 250,000.00	Statutory	R
Statutory Works at Various Sites	Statutory	To ensure we meet our obligations under The Control of Legionella Bacteria In Water Systems. This budget covers both the Risk Assessments required for each site and remedial works	£ 50,000.00	Statutory	R
Safety Glazing Statutory Works at Various Sites	H&S	To ensure we meet our obligations under the approved document N to ensure glazing in “critical locations” is designed to limit the risk of injury. To ensure this Risk Assessments need to be undertaken. Previously to achieve this and reduce costs safety film was fitted in large number of locations across the BCC Portfolio. This film is now reaching the end of its life and requires checking. We also check to ensure areas re-glazed in “critical locations” have not degraded or been installed using a lower specification.	£ 30,000.00	Statutory	R
Bristol South Intermediate Care	Fire	2nd Phase Fire Precaution Works. Works required to replace fire screens in corridors	£ 25,000.00	Phase 2 - replacement of fire screens. Phase 1 completed the work on fire doors. It was not feasible to complete all works in on phased due to the disruption it would have caused.	R
Two Mile Hill Primary, Air Balloon & Chester Park Infants	H&S	Infill underground concrete framed air raid shelters. The shelters are now 60years old, in poor condition and unsafe for any kind of use.	£ 120,000.00	We have successfully completed the same work at another Bristol Primary School and the risk removed	R
Lord Mayor Chapel	Fire	The current system is aged and needs updating	£ 75,000.00	Building is open to public and operates services and events	R
Installation of new guards to lift machinery	H&S	To complete the installation of lift guards and other safety items. We have quotes from Otis however I believe we should tender the works to possible obtain value for money.	£ 40,000.00	This work has been generated following the incident at 100ST incident and will bring the remaining assets in line with HSE requirement/guidance.	R
Easton Leisure Centre	Roof	Roof in very poor condition and needs replacing.	£ 100,000.00	The current roof is Composite Corrogated Roof Sheeting which requires full replacment.	R
Henleaze Infants school	Fabric	Replace grainwood floor to Dining Hall and Magnesite flooring in corridors. There are numerous large cracks in the floor which are a trip hazard.	£ 150,000.00	Will need to be programmed for Summer Holidays	R
Bristol Plays Music/French School	Roof	The roof is in poor condition and if not addressed will affect other parts of the property	£ 200,000.00	Numerous roof leaks. Current lease has 7 years remaining. (former Fonthill Annexe)	R
Bristol Education Centre	Roof	The roof is in poor condition and if not addressed will affect other parts of the property	£ 120,000.00	The roof is in poor condition with numerous leaks.	R
100 Temple Street	H&S	New Guardrails to North Wing Roof Balconies. Low level balconies are a H&S risk	£ 20,000.00	to provide safe working to external of building.	R
100 Temple Street	Plumbing	Alterations to internal drainage. There are problems with the internal drainage system.	£ 20,000.00	Required following staff complaints	A
Filton Ave Nursery	Heating/Venting	Replacement of Heating System. The boiler plant and pipework in need of replacement	£ 100,000.00	System now difficult to maintain.	A
Building Condition Survey Inspections	H&S	The condition data we have on our property portfolio needs continually updating and therefore we need to comission inspections and reinspections to maintain a true and accurate assessment of the operational portfolio	£ 50,000.00	Working with Procurement to set up a framework contract for this work	A
			£ 1,650,000.00		

Bristol City Council Equality Impact Relevance Check





This tool will identify the equalities relevance of a proposal, and establish whether a full Equality Impact Assessment will be required. Please read the guidance prior to completing this relevance check.

What is the proposal?	
Name of proposal	Building Practice Capital Programme Allocation 19/20
Please outline the proposal.	The capital allocation is aligned to Health and Safety work on and within BCC properties (App A)
What savings will this proposal achieve?	None listed.
Name of Lead Officer	Adrian Randall

Could your proposal impact citizens with protected characteristics? (This includes service users and the wider community)
Please outline where there may be significant opportunities or positive impacts, and for whom.
App A provides the detail of the capital spend and although there is nothing specifically that could be seen as a significant opportunity the outcome of the programme will ensure the properties remain safe, secure and warm. However, work is proposed to be completed on Easton Leisure Centre and this would have a positive impact on all users.
Please outline where there may be significant negative impacts, and for whom.
We have not identified any negative impacts from this programme of works.

Could your proposal impact staff with protected characteristics? (i.e. reduction in posts, changes to working hours or locations, changes in pay)
Please outline where there may be significant opportunities or positive impacts, and for whom.
This work will ensure sites remain compliant for all colleagues to use and operate in
Please outline where there may be negative impacts, and for whom.
We have not identified any negative impacts from this programme of works.

Is a full Equality Impact Assessment required?
Does the proposal have the potential to impact on people with protected characteristics in the following ways: <ul style="list-style-type: none"> • access to or participation in a service, • levels of representation in our workforce, or • reducing quality of life (i.e. health, education, standard of living) ?

Please indicate yes or no. If the answer is yes then a full impact assessment must be carried out. If the answer is no, please provide a justification.	No. This programme of work is planned to ensure the buildings listed are safe and fit for purpose so all colleagues can continue to use and occupy them.
<p>Service Director sign-off and date:</p>  <p>Penny Fell 4.04.2019</p>	<p>Equalities Officer sign-off and date:</p>  <p>Duncan Fleming 4/4/2019</p>

Eco Impact Checklist

Title of report: Building Practice Capital Programme Budget Allocation 2019/20				
Report author: Adrian Randall				
Anticipated date of key decision				
Summary of proposals: Following a cabinet member briefing with Cllr Cheney on the 19/20 Building Practice Capital Programme Budget Allocation, Cllr Cheney advised he wishes the paper to go through the decision pathway for reference purposes and to ensure all members have visibility. Appendix A provides a detailed listing of the proposed capital spend				
Will the proposal impact on...	Yes/ No	+ive or -ive	If Yes...	
			Briefly describe impact	Briefly describe Mitigation measures
Emission of Climate Changing Gases?	Yes	+ive/-ive	See Below	See Below
Bristol's resilience to the effects of climate change?	No			
Consumption of non-renewable resources?	Yes	-ive/+ive	General construction works/ activities	Where possible sustainable materials to be used, such as FSC timber and green guide a or b standard. Contractors will travel to site – Where possible work with local contractors to reduce distance travelled.
			Roof replacement works	Consider the opportunity to install solar PV and building insulation whilst roofing works are going ahead. Speak with the energy service regarding this.
Production, recycling or disposal of waste	Yes	-ive	Asbestos removal works	Ensure hazardous waste is disposed of according to legislation and correct legal documentation is collected and retained. And ensure all asbestos records are updated reflecting any work that has taken place.
			General construction works/ activities	Ensure all general waste is disposed of according to the waste hierarchy and waste legislation.

The appearance of the city?	No			
Pollution to land, water, or air?	Yes	+ive	Improvement to fire systems reduces risk of fire and associated air pollution Travel – See above	
Wildlife and habitats?	No			
Consulted with:				
Summary of impacts and Mitigation - <u>to go into the main Cabinet/ Council Report</u>				
<p>The significant impacts of this proposal are... through resource use and waste generation.</p> <p>The proposals include the following measures to mitigate the impacts... Opportunities linked to roof works include improve building insulation and consideration to Solar PV. All waste will be disposed of according to waste legislation and following the waste hierarchy.</p> <p>The net effects of the proposals are mixed</p>				
Checklist completed by:				
Name:		Nicola Hares		
Dept.:		Environmental Performance		
Extension:		0117 357 6643		
Date:		01/04/2019		
Verified by Environmental Performance Team		Nicola Hares – Environmental Performance		