



Full Business Case

[Business case guidance](#) (Change and Capital). Please talk to [PMO](#) if you wish to deviate from this template.

A. PROJECT SUMMARY INFORMATION

Project Name:	East Bristol Intermediate Care Centre
Project ID (if known):	
Cabinet Member:	Cllr Helen Holland
Sponsor (usually lead Director):	Stephen Beet
Project Executive (usually lead Head of Service):	Jayne Clifford
Lead Directorate:	Adults and Communities
Associated service areas:	Adult Social Care
Any 'critical services' affected (Civil Contingency webpages)	
Report lead author(s):	Emily Hewitt, Senior Project Manager

B. ORGANISATIONAL CONTEXT

Alignment to the Corporate Strategy's 5 key principles:	<input checked="" type="checkbox"/> Development and delivery <input type="checkbox"/> Environmental Sustainability <input type="checkbox"/> Equality and Inclusion <input type="checkbox"/> Resilience <input type="checkbox"/> World-class employment <input type="checkbox"/> No direct alignment																					
Alignment to the 7 the Corporate Strategy Theme(s):	<input type="checkbox"/> Children and young people <input type="checkbox"/> Economy and skills <input type="checkbox"/> Environment and sustainability <input checked="" type="checkbox"/> Health, care and wellbeing <input type="checkbox"/> Homes and communities <input type="checkbox"/> Transport and connectivity <input type="checkbox"/> Effective development organisation <input type="checkbox"/> No direct alignment																					
Primary Capital investment principle (Capital Strategy):	<input type="checkbox"/> Invest to grow <input type="checkbox"/> Invest to maintain <input type="checkbox"/> Invest to save <input checked="" type="checkbox"/> None <input type="checkbox"/> N/A – not capital																					
Project category:	<input checked="" type="checkbox"/> Saving delivery <input type="checkbox"/> Compliance / Statutory <input type="checkbox"/> Risk reduction <input type="checkbox"/> Cost avoidance <input type="checkbox"/> Improved service/ City outcomes <input type="checkbox"/> Enabling <input type="checkbox"/> Urgent																					
Contribution to Climate / environmental targets																						
Council MTFP Budget saving delivery – only if your project directly delivers/supports a committed MTFP budget savings:	<p>Saving ID: 2324-P6</p> <p>Savings description (as stated in approved budget): Following a recent review it is proposed to offer East Bristol Intermediate Care Centre to alternative providers, or close the centre. The Centre provides care and accommodation for 17 people over the age of 18 who stay for up to six weeks to help them to be independent after a hospital admission or illness. This is a discretionary service offered by the council.</p> <table border="1"> <thead> <tr> <th></th> <th>23/24</th> <th>24/25</th> <th>25/26</th> <th>26/27</th> <th>27/28</th> <th>Full Yr recurring</th> </tr> <tr> <th></th> <th>£'000s</th> <th>£'000s</th> <th>£'000s</th> <th>£'000s</th> <th>£'000s</th> <th>£'000s</th> </tr> </thead> <tbody> <tr> <td>Saving</td> <td>434</td> <td>(834)</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		23/24	24/25	25/26	26/27	27/28	Full Yr recurring		£'000s	£'000s	£'000s	£'000s	£'000s	£'000s	Saving	434	(834)				
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Full Business Case

1. Strategic Case – Overarching case for change

Strategic Case and summary of the project

East Bristol Intermediate Care Centre (EBICC) is the only site in the city where the Council currently operates a rehabilitation service, following previous closures of the north and south centres. In 2021, a review of the Council’s rehabilitation service was carried out by independent consultants (Mutual Ventures). The review concluded that the current arrangements for delivering the rehabilitation service may no longer be the most appropriate and effective way of meeting service users’ rehabilitation needs, and that Health partners across the system were more appropriately equipped to provide rehabilitation care and support. Rehabilitation services are not usually provided by local authorities and are a discretionary service for the Council, and there is agreement across the health and social care system that the Community Health provider has the skills and facilities to deliver this service in line with standard practice nationwide.

Sirona Care and Health was awarded a contract as the single community healthcare provider for Bristol, North Somerset and South Gloucestershire (BNSSG) after a tender exercise by the Clinical Commissioning Group (CCG) undertaken in 2019. Currently, the Council delivers the service at East Bristol in partnership with Sirona Care and Health (they provide all therapy and community nursing services), as the Council does not directly employ clinical staff. However, Sirona have already taken on lead delivery of rehabilitation services from other sites across the city as part of their offering to provide integrated health services to adults and children across BNSSG (including most recently service delivery at South Bristol Community Hospital following the closure of the south centre in 2022). EBICC is the only remaining Council-led rehabilitation service.

As part of the 23/24 budget setting process, Adult Social Care were asked to identify potential budget savings in line with all services across the Council. As the service provided at EBICC is a discretionary service for the Council, and there is an alternative provider in Sirona already responsible for delivering rehabilitation services across the city, a proposal to cease service delivery at EBICC was put forward for consultation. This proposal was approved by Full Council on 21st February 2023 and the service are therefore now taking the required steps to implement the proposal.

This proposal will be presented at Council Cabinet on 2nd May for final approval.

Target benefits

Description	Type <i>(financial, non-financial)</i>	Metric / KPI & Target	Benefit Owner	Assumption(s)
The proposed annual financial savings are £400k, with potential for further savings to be made in future years once any transition costs are accounted for.	Financial	Removal of service budget from 24/25; minimise transitional costs	Jayne Clifford	That all service delivery is ceased within 23/24 and costs are mitigated through use of the Council’s redeployment scheme

Maintain future service provision and outcomes achieved for citizens once the Council has ceased direct service delivery (via the service provided by Sirona Care & Health).	Non-financial	Measured by individual care outcomes and experience	Sirona Care & Health	Assumes service is delivered to a similar standard by Sirona Care & Health (thereby ensuring there are no adverse impacts for service users).
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2. Economic Case - Preferred Option Detail

Reminder of options, and confirmed preferred option

The budget consultation gave approval to progress 2 options – transferring the centre to an alternative provider (Sirona Care & Health, the city’s community health partner) or to close the service.

Following discussions with Sirona and health partners across the system, it has been agreed that the closure option will be progressed. Health partners did not wish to progress with running East Bristol Intermediate Care Centre as they already operate alternative rehabilitation provision within the city and in the future are looking to focus more on provide rehabilitation services within people’s homes rather than in bed-based facilities.

The proposal is therefore that the Council stops direct delivery of a rehabilitation service from the East Bristol Intermediate Care Centre (EBICC). This will mean that:

- In the future, rehabilitation services will no longer be provided by Bristol City Council; they will be provided by health system partners at alternative sites in the city
- Council roles at the centre will no longer be required. All council staff will be consulted on what options are available to them and our obligation to comply with the legal requirement to seek suitable alternative work for employees at risk of redundancy in order to mitigate against any compulsory redundancies.

Project scope – What will and won’t be impacted

<i>In Scope</i>		
1	The rehabilitation service provided for citizens from East Bristol Intermediate Care Centre	<ul style="list-style-type: none"> • Service delivery from the East Bristol centre will end (date to be agreed)
2	The Council will no longer require staff to provide a rehabilitation service from EBICC (including supporting non-care roles)	<ul style="list-style-type: none"> • Staff will be offered redeployment to other roles within the broader s • Staff will be consulted as part of the ‘Managing Change’ policy
3	The centre at East Bristol will no longer be used for the purpose of delivering a rehabilitations service.	<ul style="list-style-type: none"> • The centre closure will not immediately affect the office staff based on the site, but the future use of the accommodation will need further consideration. • The accommodation specifically used for the provision of rehabilitation services will require decommissioning.
4	There will be an impact on the contract / staff supplied by Sirona Care & Health (who currently supply community nursing and therapy services).	<ul style="list-style-type: none"> • It will be necessary to work in partnership with Sirona to plan the service transition.

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	<i>Out of scope</i>	<i>Any risks/consequences associated with “Out of scope” items</i>
1	Individual service provision – no individual service user will be moved during their period of care	The service closure date will be planned around current admissions and provision will be maintained for the duration of the last service users admitted (care and support duration is up to 6 weeks)

Project scope – SMART Objectives (deliverables)

	Specific	Measurable	Attainable	Relevant/Realistic	Timebound (by when?)
1	As many staff as possible are redeployed into other roles within the Council	HR to track number of individuals successfully redeployed during Managing Change process	There are a large number of appropriate roles to consider for redeployment (e.g. at Redfield Lodge)	There are a large number of appropriate roles to consider for redeployment (e.g. at Redfield Lodge)	Redeployment to be completed within 12 weeks of staff being given notice (once final closure if confirmed by Cabinet)
2	In-year financial savings are delivered to avoid additional budget pressure	The in-year spend on budget and any transitional costs	The work will be progressed in line with core Council processes.	The work will be progressed in line with core Council processes.	The closure is planned for the earliest possible date once consultation / redeployment period and service transition plans are considered
2	Staff are supported during the process to minimise any negative impact (as outlined in the EQIA)	Specific HR measures tracked (e.g. interview training); EQIA used to inform process to identify any specific support needs	Detailed planning and targeted support from service management and HR	Detailed planning and targeted support from service management and HR	Managing Change process to last up to 12 weeks following Cabinet decision, but some staff will be supported to move into other roles at an earlier date

3. Financial Case – Affordability and Fundability

Summary Financials

The costs and financial benefits associated with the proposed closure are as follows:

Costs

Delivery Costs:

Project Management – Estimated 5 days support

HR support (including strategic and operational support) – Estimated 35 days support

Service management costs (already accounted for in establishment budgets)

Estimated costs - £10,000

Transition Costs:

The redundancy and pension fund costs are estimated to be a maximum of c£0.57m, but this will be mitigated by redeployment opportunities. Final costs will be known once the Managing Change process is completed. These costs of change will be met from within existing Adult Social Care budgets.

Security Costs:

Short term costs to secure the vacant part of the building (until longer term future of the site established) – estimated costs £20 – 30k, to be funded from 23/24 service budget.

Financial Benefits

There will be a part year budget saving in 23/24 for the period once the service has stopped operating and all staffing and building running costs end, but the application of the costs outlined above will mean that the in-year savings figure is reduced. From 24/25, any financial savings will be equivalent to the full value of the service budget.

4. Management Case – How the project will be delivered and managed

Implementation Approach

There are 2 core components of progressing the service closure:

- Management of service transition / impact on service users
- Management of Council staff currently providing the service

Management of service transition / impact on service users

Although the proposal is for the Council to stop direct delivery of rehabilitation services, there is no anticipated adverse impact on the service provision and quality of outcomes for service users. As Sirona already provide rehabilitation services across the city, the same quality of service can be expected for any individual who may have previously accessed care at EBICC.

If the proposed service closure progresses, then Intermediate Care managers will work closely with Health system partners to plan for a transition period, to ensure that sufficient rehabilitation capacity is available. A service transition plan will be implemented for any individuals accessing the service and a phased closure of beds, to ensure that no individual is expected to move during their rehabilitation period.

Management of Council staff currently providing the service

For the affected staff group, it is recognised that there will be a significant impact as current roles at EBICC will no longer be part of the adult social care staffing structure. All staff will be consulted with through a Managing Change process, and the priority will be to identify appropriate redeployment opportunities to keep as many staff in employment as possible and to mitigate against any redundancies. There are a significant number of vacant posts available across the Intermediate Care & Reablement Service, which increases the chances of finding appropriate new roles for staff members. Where this is not possible, then redundancy may apply, and staff will be supported by the service managers and Council HR team through this process.

Risk management

i. Key risks and issues

Risk / Issue	Mitigation	Agreed Next Steps
There could be high transitional costs if staff cannot be redeployed and are made redundant	The number of available vacant posts and the type / location of these vacancies suggest that the majority of staff will be able to be redeployed	List of redeployment opportunities to be shared at the earliest opportunity and staff supported to consider new opportunities (e.g. work shadowing / training)
The closure of the centre could lead to reduced rehabilitation bed capacity in the city	Capacity planning with health system partners indicates that sufficient alternative capacity is available – either in bed-based centres or through care delivered at home	Capacity planning for service transition period

Communications and Engagement Approach

Prior to this proposal being approved by Full Council, it was the subject of a public consultation as part of the wider budget consultation. 4,550 people responded to the survey, of which 4,376 (96%) gave their views on one or more of the 'Section 1' proposals (EBICC was a Section 1 proposal).

The feedback on the EBICC proposal specifically is summarised below:

- When asked, '**Do you agree or disagree with proposal P6: East Bristol Intermediate Care Centre?**', the responses were:
 - o 35% of respondents agree or strongly agree
 - o 33% neither agree nor disagree
 - o 32% disagree or strongly disagree
- There was no clear trend in respondents' views between areas of high and low deprivation
- 1% of survey respondents (14 people) added comments and they were all opposed to the proposal
- Comments included concerns that the proposal was disproportionately affecting 'the more vulnerable in society', that it might be cause issues with 'bed blocking' in hospitals / adding pressure to health system, concern about the Council losing experienced staff, and also that the centre should be moved to an alternative site and the land sold.

The comments made have all been considered as part of the development of this business case and consideration has been given for any mitigations that can be applied.

The table below indicates the key stakeholder groups that have been identified and the activity that has taken place / is planned to take place.

Stakeholder	Activity	Timescales
Staff group	Briefing sessions during budget consultation and following Full Council approval	December 2022 – February 2023
Staff group	Managing Change	March – April 2023
Health system partners	Discussion on budget proposal and option of running EBICC	December 2022 – February 2023

Health system partners	Capacity and service transition planning	February – May 2023
Local Ward Councillors	Briefing on proposal for EBICC	March 2023

Project Plan & Key Milestones

Preferred Option: Key Milestones	Target Date
Full Council approve budget proposal	21/02/2023
Initiate staff and trade union consultation on proposal	13/03/2023
Cabinet decision	02/05/2023
Staff Managing Change process / redeployment exercise	May-July 2023
Agree last admission date for service users	TBC
Centre closed	TBC