

**REPORT TO:** Executive Board  
**DATE:** 14 December 2017  
**REPORTING OFFICER:** Strategic Director, People  
**PORTFOLIO:** Health and Wellbeing  
**SUBJECT:** Redesign of Night Time Support  
**WARD(S)** Borough-wide

## **1.0 PURPOSE OF THE REPORT**

1.1 To inform Executive Board of the outcome of a pilot scheme initiated to improve night time care in the Council's Supported Housing Network for people with learning disabilities.

## **2.0 RECOMMENDATION: That**

- 1) the report be noted; and**
- 2) Executive Board are requested to approve the recommendations as outlined in paragraph 3.4.**

## **3.0 SUPPORTING INFORMATION**

3.1 Executive Board agreed in November 2016 to initiate a pilot scheme to consider the feasibility of replacing Waking Night staff with Sleep-ins at Halton's Supported Housing Network. The pilot is now completed and the results of the evaluation of the data are presented here

3.2 The pilot scheme utilised a variety of methods to evaluate the feasibility of replacing Waking Night Staff with Sleep-in arrangements, including shadowing night staff, feedback from night staff and electronic sensors which focused on outcomes and the extent to which these have been achieved.

3.3 The pilot had three main intended outcomes:

3.3.1 Safety should be maintained and any risks associated with the change from Waking Nights to Sleep-ins should be anticipated and managed. This included a focus on; Incontinence and undetected discomfort, Seizures and wandering at night leading to harm. These perceived risks were addressed within the pilot utilising assistive technology with no adverse effect on safety.

3.3.2 There should be an improvement in the quality of life for service users. Less intrusive forms of night support should promote dignity and independence. Improved sleep should lead to improved health and wellbeing. It is generally accepted that Sleep-ins as opposed to waking Nights encourages normalisation, better sleep patterns and increased autonomy. It is clear from the pilot that many of the expected quality of life enhancements had occurred, including; individuals experiencing, better sleep patterns, more settled with better sleep patterns, more privacy and early indications of increased autonomy

3.3.3 There should be a reduction in costs for the night time support. The results of the pilot are clear that Waking nights are not required in the numbers currently utilised and savings can be achieved by switching some roles to Sleep-ins. Since the commencement of the pilot there has been some legislative changes in how we pay employees for sleep-in shifts, this has reduced the opportunity for efficiencies. Financially despite the complications to the contracts and rates brought about by the changes to sleep-in payments it is still more cost effective to use Sleep-ins over Waking nights

#### 3.4 **Conclusion and Recommendations**

3.4.1 At the end of the evaluation it is clear that it is safe, prudent and in the interests of the service users to make changes to the night time support elements of the service at the 4 bungalows in Ashley Green.

3.4.2 The study revealed that the number of occasions during which assistance was required during the night did not necessitate the need for two fulltime Waking Night staff.

3.4.3 However, the nature and needs of the services users can and do change over time. There is a fundamental and overriding principle that the types and levels of support should always be dictated by the assessed needs and specific requirements of the individual service users. Managers of the service must be able to tailor the support to meet the needs on assessment and agreement with Care Managers. This may mean reducing or increasing levels and types of night time support.at short notice.

3.4.4 If agreed by Executive Board, we will progress to implementation; which includes:

- Consultation with unions and staff
- Further assessment of other houses utilising a similar method.

## **4.0 POLICY IMPLICATIONS**

- 4.1 Services delivered to adults need to be both efficient and compassionate. Dignity in care means that all those supported by social care and health, are treated with respect, given the time and attention that they need and the opportunity to gain greater autonomy.

## **5.0 FINANCIAL IMPLICATIONS**

- 5.1 The current cost of a Sleep-in is £49 per night. This includes on-costs (29%), and is costed at 57 weeks a year to allow for costs of holiday cover.

The current cost of a Waking Night is £159.38. This also includes on-costs, and is costed at 57 weeks to allow for staff cover.

The study demonstrates we can replace 3 out of 6 Waking Night staff with sleep-ins, At the current rates this works out at a saving of:

£374 per night,  
£2,618 per week

**£136,172** per year based on 3 staff costed at 57 weeks.

- 5.2 However, new employment practices mean that Sleep-ins can no longer be paid as a one-off payment but must be paid for each hour of the sleep-in which is typically 8 hours this means that there is still a saving if somewhat diminished:

The new cost of a Sleep-in is £84.20 per night (£7.50 per hour min wage plus on-costs).

The current cost of a Waking Night is £159.38 (on-costs at 57 wks)

The study demonstrates we can replace 3 out of 6 Waking Night staff with sleep-ins. At the new rates this works out at a saving of:

£225 per night,  
£1,575 per week

**£81,900** per year based on 3 staff costed at 57 weeks.

- 5.3 Based on the pilot we can extend the system across the rest of the services where there is the potential to achieve further efficiencies, however, this depends on the assessed needs of individuals.

## **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

### **6.1 Children & Young People in Halton**

Will improve the quality of life for those younger people with profound and multiple disabilities living in halton and receiving services from the Network.

## 6.2 **Employment, Learning & Skills in Halton**

Will develop staffing expertise and increase their ability to provide tailored, needs led support.

## 6.3 **A Healthy Halton**

Will improve the health of those service users to whom the proposals will apply.

## 6.4 **A Safer Halton**

Not Applicable

## 6.5 **Halton's Urban Renewal**

Not Applicable

## 7.0 **RISK ANALYSIS**

7.1 The changes will result in a reduction in a number of posts, however there are alternative options within the existing structure for employment.

7.2 Sleep-ins can no longer be paid as a one-off sum. They must now be paid at the National Minimum Wage level of £7.50. This rate usually rises annually so costs will go up consistently.

7.3 In view of the change to Sleep-in payments the hours covering a Sleep-in need to be standardised across the service. Currently some Sleep-ins are 9 or 10 hours in duration. It is proposed to make them all 8 hours in length.

## 8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 This will improve levels of independence and dignity for service users.

## 9.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

Document	Place of Inspection	Contact Officer
<b>Valuing People, A New Strategy for Learning Disability for the 21<sup>st</sup> Century</b>	Runcorn Town Hall	Sue Wallace-Bonner