



*Although a formal committee of Brighton & Hove City Council, the Health & Wellbeing Board has a remit which includes matters relating to the Clinical Commissioning Group (CCG), the Local Safeguarding Board for Children and Adults and Healthwatch.*

Title:	Knoll House
Date of Meeting:	28 July 2020
Report of:	Rob Persey, Executive Director for Health & Adult Social Care
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Wards Affected:	All

#### **FOR GENERAL RELEASE**

#### **Executive Summary**

On 28 January 2020 the Health and Wellbeing Board approved the future use of Knoll House as a long-term residential care facility for adults with Acquired Brain Injury and/or physical disability. HASC was required to commission minor capital works to the building and bring a paper back to HWB on the management/staffing options for this new provision with the original intention of it being operational from late 2020.

The crisis response that Covid-19 has required from HASC and all areas of the Council has delayed progression of the agreed plans at Knoll House, which remains empty at the current time. It is unlikely that the required works and planning could be mobilised for its agreed long-term use before summer/autumn 2021.

Brighton and Hove CCG have approached the Council requesting that Knoll House is used this coming winter to secure additional discharges from acute, community and mental health inpatient care for patients who need ongoing NHS provided rehabilitation to support timely discharge. Covid-19 pressures remain and this year's winter will potentially be particularly challenging with the possible risk of a second wave. Taking a precautionary, common sense approach means there is an urgent need for developing additional capacity in the system by the Autumn 2020. System modelling suggests a potential demand for up to 40 beds additional to existing capacity. The opportunity to deliver 20 beds at Knoll House would therefore make a significant contribution.

If the HWB supports this proposal, the unit will be fully operated by NHS staff. This interim use is being sought through to end of March 2021 and on this basis has a minimal impact upon the potential revised timings of the agreed long-term use and aligned finances.

However, there is a risk that need for these beds could be extended beyond the winter. Whilst neither the implications nor the likelihood for this can be quantified now, if the interim use is agreed, a further paper will be brought to HWB in January 2021 fully detailing the proposed exit strategy

### **Glossary of Terms**

ABI – Acquired Brain Injury  
CCG – Clinical Commissioning Group

## **1. Decisions, recommendations and any options**

- 1.1 That the Board agrees the short-term interim use of Knoll House to provide rehabilitation beds to support timely discharge from the hospital and support unnecessary admissions.
- 1.2 That the Board only agrees this proposal through to the end of March 2021 in support of the wider health and care system taking a precautionary approach to the risk of a second wave of Covid-19 in what projections indicate could be an already challenging winter.
- 1.3 The Board notes that all the costs of running the rehabilitation service will be met by the NHS.
- 1.4 That the Board reaffirms its commitment to its previous decision for Knoll House to be remodelled to deliver a long-term residential unit for adults with an ABI and/or physical disability and supporting this option does not further delay the implementation of this agreement.

- 1.5 The Board agrees that the work to commission the ABI and/or physical disability service continue over the next 6 months, concurrent with the rehabilitation service.
- 1.6 If in any circumstance there is a possibility of this interim use being extended beyond winter 20/21 the HWB notes this might impact upon the timing of implementing the long-term recommendation and this would risk having a negative service and financial impact upon the Council for which there would need to be system wide support.
- 1.7 The Board requires the Clinical Commissioning Group to bring a paper back in January 2021 updating upon the position in light of the circumstances at the time. If there is any risk of the interim use continuing beyond March 2021 this paper will present an options appraisal including financial mitigations recognising the Council cannot be exposed to future additional unplanned financial risk.

## **2. Relevant information**

- 2.1 On 28 January 2020 the Health and Wellbeing Board approved the future use of Knoll House as a long-term residential care facility for adults with ABI and/or physical disability. HASC was required to commission minor capital works to the building and bring a paper back to HWB on the management/staffing options for this new provision with the original intention of it being operational from late 2020.
- 2.2 The crisis response that Covid-19 has required from HASC and all areas of the Council has delayed progression of the agreed plans at Knoll House, which remains empty at the current time. It is unlikely that the required works and planning could be mobilised for its agreed long-term use before summer/autumn 2021.
- 2.3 Brighton and Hove CCG have approached the Council requesting that Knoll House is used this coming winter to secure additional discharges from acute, community and mental health inpatient care for patients who need ongoing NHS provided rehabilitation to support timely discharge. Covid-19 pressures remain and this year's winter will potentially be particularly challenging with the possible risk of a second wave. Taking a precautionary common-sense approach means there is an urgent need for developing additional capacity in the system by the Autumn 2020.
- 2.4 System modelling suggests a potential demand for up to 40 beds additional to existing capacity. The opportunity to deliver 20 beds at Knoll House would make a significant contribution therefore.
- 2.5 If the HWB supports this proposal, the unit will be fully operated by NHS staff. This interim use is being sought through to end of March 2021 and on this basis has a minimal impact upon the potential revised timings of the agreed long-term use and aligned finances.

- 2.6 However, there is a risk that need for these beds could be extended beyond the winter. Whilst neither the implications nor the likelihood for this can be quantified now, if the interim use is agreed, a further paper will be brought to the HWB in January 2021 fully detailing the proposed exit strategy.

### **3. Important considerations and implications**

#### **Legal:**

The Board has recognised a gap in the local care sector market for its resident population. This resulted in its decision on 28 January 2020 about the use of Knoll House.

The subsequent development of Covid-19 means that the Board must balance its Care Act duty to promote diversity of service provision within the City with its duty to promote integration and joint working in health and social care services across the City in order to improve the health and wellbeing of the people of Brighton and Hove.

The public health priority for everyone during the Pandemic is to reduce and control the virus. This must be a key factor in the Board's decision to determine how to best utilise its resources. The impact of the Pandemic is significant for those residents in need of services under the Care Act 2014 and therefore the need to manage the virus through the Board enabling the use of Knoll House for NHS short term purposes is also in the interests of those who would otherwise benefit from greater diversity within the care sector market.

Lawyer consulted: Nicole Mouton

Date: 15/7/20

#### **Finance:**

When the original proposal was presented to Health & Wellbeing Board in January 2020, the decision made regarding proposed use included an ongoing annual saving of £0.568m. For the reasons outlined in the body of this report, the delivery timescales for the new ABI service has slipped. Therefore, the proposal outlined in this report will have negative financial implications in this financial year but no significant negative financial impact in the longer term.

The Council will be exploring the short term financial arrangement with Brighton & Hove CCG but these have not yet been resolved.

Finance Officer consulted: Sophie Warburton

Date: 16/07/2020

#### **Equalities:**



This proposal would benefit predominately our older people population if it were required, who are at greater risk from Covid-19. If there is the demand, it will support speedier discharge from the acute hospital. All evidence supports that when people are ready to be discharged from hospital, this should happen quickly.

#### **4. Supporting documents and information:**

