

Cabinet Report – 15 July 2020

Occupancy of Hollybank House by Walsall Healthcare Trust to provide in-patient beds for Stroke rehabilitation.

Portfolio: Councillor Rose Martin, Adult Social Care

Related portfolios: Councillor Adrian Andrew

Service: Adult Social Care

Wards: All

Key decision: Yes

Forward plan: Yes

1. Aim

- 1.1 To seek Cabinet approval to grant Walsall Healthcare NHS Trust (WHT) of Manor Hospital Moat Road Walsall WS2 9PS a long-term lease of Hollybank House Coltham Road, Willenhall, WV12 5QD (edged black on the appended plan EPMS 4845/1) for the purpose of continuing the delivery of a bed-based service for Stroke Rehabilitation patients, to replace the current temporary Tenancy at Will which was urgently granted to WHT at the beginning of the COVID-19 pandemic and ahead of agreement for a long-term lease.
- 1.2 WHT wish to continue to deliver a bed-based delivery to patients recovering from stroke, and continued occupation of Hollybank House in Willenhall (see Appendix A EPMS 4845/1) will enable the service to become a far more inclusive resource that is also complimented by community resource and a package of maintenance for all patients who require more time to recover and manage their potentially long term condition.

2. Summary

- 2.1. The Council sought and obtained approval in April 2020 under the Council's COVID-19 emergency decision making powers to enter into a Tenancy at Will in order for WHT to occupy Hollybank House following the unprecedented pressures on the acute hospital services in Walsall due to the COVID-19 pandemic. From Monday 6th April following approval, Stroke Rehabilitation patients were transferred off the Walsall Manor site to Hollybank House in order to create additional capacity for the rise in demand of patients presenting at the hospital due to COVID-19.
- 2.2. The Tenancy at Will has allowed WHT to transfer the rehabilitation of patients from the Manor Hospital which has served two purposes:

- (i) It freed up space for COVID-19 patients and eased pressures on the acute site.
 - (ii) It also protected rehabilitation patients from proximity to COVID-19 patients, whilst also giving opportunity to consider how a longer-term plan to occupy the site at Hollybank House for the purpose of supporting patients who have suffered strokes, may work.
- 2.3. In that intervening period it has been possible to understand the benefits of operating the stroke rehabilitation service from Hollybank House and has also allowed the Council and WHT to prepare a Business Case (**Appendix B**) to help inform decision making in both organisations as to the costs and benefits of WHT occupying this Council property on a longer term arrangement. The proposal is that WHT will occupy Hollybank House through a 10-year lease (with a 5-year break) on internal repairing terms for an annual rent of £90,300. Lambert Smith Hampton (LSH), the Council's valuers for this property, have confirmed that this rent represents market rent for the property on internal repairing lease terms.
- 2.4. Hollybank House has, until these recent events, been part of the Adult Social Care operational portfolio of properties, however as detailed in this report, it has not been fully operational since 2018 when the decision was taken to cease the delivery of the Social Care's bed-based reablement and respite service. As such Adult Social Care have no current or planned future use of the building and due to its specific design as an inpatient facility, the Council has no other identified need to retain the property for its own purposes.
- 2.5. Research evidences the positive impact and outcomes that can be achieved with rehabilitation patients when they are supported outside of an acute hospital setting into the community. Whilst based at Manor Hospital, the Stroke Rehabilitation Service is vulnerable to risks associated with capacity pressures and infections. Whether there are further spikes of COVID-19 or other infections, being in an acute setting when there is no necessary reason to be there and immune systems are impaired, does create more problems to the patient than if being moved out of that setting as quickly as possible, in order to continue rehabilitation following stroke.
- 2.6. The associated patient safety and quality risks for people remaining in large acute settings for longer periods of time include increased falls, increased infection control incidents, reduced therapy input and increased staff sickness, thus reducing the speed of a patient's sustainable health.
- 2.7. Until March 2020 The Intermediate Care Service (ICS) who are the Council's health and care team, were based at Hollybank House. This was a temporary arrangement that was put in place two years ago whilst long-term accommodation issues could be addressed. Since the COVID-19 outbreak, ICS have moved out of Hollybank House to co-locate with colleagues as part of an integrated team approach. Alternative office-based accommodation at Blakenall Village Centre has been a longer-term aspiration and the plan to move quicker on that action was directly linked to the need to progress urgent beds to release capacity at the Manor Hospital.
- 2.8. The delivery of the bed-based stroke service from Hollybank House has been a successful use of resource and has seen an increased seamlessness of approach across Health, Social Care and the Trust partners, albeit as a result of crisis.

- 2.9. WHT are the current registered service occupying Hollybank House and if this was to be a long-term arrangement with a 10-year lease, then they would need to secure approval from clinical Senate as well as through the Care Quality Commission (CQC).
- 2.10. Whilst there is yet to be any formal arrangement between the partners, as part of the Walsall Together Partnership, it has always been the intention to align operational teams across Adult Social Care and Health more closely, in order to deliver an improved set of outcomes for local citizens, better use of collective assets and to ensure that there can be a strong visibility around place-based teams for each locality. The resulting relocation of Council staff from Hollybank House – i.e. moving the ICS team to Blakenall Village Centre alongside our WHT colleagues helps immensely with that partnership working and helps to streamline all of the functions of the integrated approach towards reablement and easy access to community support as part of that whole system.

3. Recommendations

- 3.1. That Cabinet approves the issuing of a long-term lease by Walsall Council to WHT of Hollybank House (shown edged in black on plan number **EPMS 4845/1**) to allow WHT to deliver their in-patient Stroke Rehabilitation Service.
- 3.2. That Cabinet delegates authority to the Executive Director Economy, Environment and Communities, in consultation with the Executive Director of Adult Social Care and the Portfolio Holder for Regeneration to agree the final terms of the lease.
- 3.3. That Cabinet approves that the rental income from Hollybank House can be used to fund the costs associated with Adult Social Care staff occupying community buildings alongside WHT colleagues at Blakenall Village Centre and other locality locations as well as using any balance of the income to support any costs arising from the Council's retained maintenance responsibilities of Hollybank House.

4. Report detail - Know

- 4.1. Hollybank House located in the Short Heath Ward in Willenhall forms part of the Adult Social Care operational asset portfolio. Until July 2018 Hollybank House was an important building for the delivery of services, but in June 2018, the service ceased. Prior to that it operated as a 25 bedded unit for reablement and intermediate care. Since this time, Adult Social Care teams have occupied the property mainly as a result of limited alternative locations for the delivery of community based and intermediate care services but also to act as 'guardians' of the property whilst alternative uses for the building have been considered.
- 4.2. Cabinet and respective Health Organisations Boards agreed in early 2018 to follow an Alliance model. This provides a flexible but contractual agreement between providers and commissioners. The Alliance contract for health partners sets out the budget, terms and risk sharing agreements, while master service agreements govern the delivery of different transformation schemes. Discussions have taken place between the Council and WHT, to consider the alternative uses for Hollybank House and the specific needs that WHT have relating to the capacity of their existing assets at the Manor Hospital site.

- 4.3. The longer-term relocation of Stroke Rehabilitation Services from Walsall Manor Hospital to Hollybank House has been discussed over several months between colleagues at Walsall Council and WHT. The requirement to enter into an urgent Tenancy at Will was as a result of COVID-19, however the longer term aspirations for a stroke patient service delivered from Hollybank House somewhat predated this event and the longer-term aspiration was discussed at a meeting of the 16 January 2020 Health and Social Care Overview and Scrutiny Committee.
- 4.4. Outcomes for patients are maximised when stroke rehabilitation services are moved out of an acute hospital setting into the community. Whilst based at Manor Hospital, the stroke rehabilitation service is vulnerable to risks associated with capacity pressures. The associated patient safety and quality risks are increased falls, increased infection control incidents, reduced therapy input and increased staff sickness.
- 4.5. As a result of the Covid-19 outbreak several organisations including Walsall Council, WHT and Walsall Housing Group were involved in discussions to operationalise Hollybank House as an inpatient unit and this was mobilised to take patients from the week commencing Monday 6th April 2020.
- 4.6. These actions were coordinated jointly between colleagues at Walsall Together, the Integrated Care Partnership for Walsall. The same colleagues have also jointly prepared a business case (Appendix B) that sets out in greater detail the considerations that have been given to the identification of Hollybank House as the preferred location for the Stroke Rehabilitation Service. The same business case also considers the implications arising from the relocation of Council staff from Hollybank House to the Blakenall Village Centre.
- 4.7. There are no alternative viable options to Hollybank House for the relocation of a Stroke Rehabilitation Service in a community setting in Walsall that is conducive to acute inpatient services and the wider community inclusive offers that would then sit fittingly around it. There has been investment in the property to establish the urgent bed-based resource, funded by WHT through COVID-19 monies. Consequently this is a property/asset fit for purpose so far as CQC are concerned.
- 4.8. The property sits within a community that is already familiar with it being a Health and Social care facility. There is very little risk of local residents opposing this as an ongoing local resource, but this time recognising this is a service being delivered and managed as part of a health service.
- 4.9. The solution for accommodation of both services is being considered in the context of the Walsall Together Integrated Care Partnership (ICP) principles and not in the interests of any single statutory organisation. The ICP seeks to develop “integrated ways of working to improve the health and wellbeing outcomes of their population, increase the quality of care provided and provide long term financial sustainability for the system” (Walsall Together Business Case, January 2019).
- 4.10. The business case for the occupation of Hollybank House (**Appendix B**) therefore confirms that WHT are prepared to enter into a 10 year lease (with a 5-year break) for Hollybank House following the initial period of occupation under the Tenancy at Will. The purpose of this is for WHT to register, manage and deliver a health service from within Hollybank House for the purpose of supporting patients recovering from a stroke. The resulting relocation of Council staff (the ICS team)

to the Blakenall Village Centre is also identified to have a financial implication for the Council in that the co-location of our teams into office accommodation leased by WHT from New Horizons Community Enterprise (landlord of the Blakenall Village Centre) will require the Council to make a contribution to the rent, service charge and business rates payable. Evidence has been provided to the Council by WHT that the comparable costs of occupying other third party buildings means that the Blakenall Village Centre occupation provides value for money when compared to other commercial arrangements. The service delivery benefits of co-location with health and social care teams have been presented previously to Cabinet at its meeting, April 2019 (**See Appendix C**).

- 4.11. The April 2019 report explained how the Walsall Alliance worked on the premise of the Council occupying space within WHT, through a selection of leased or freehold property across the collective assets of the Trust and the Local Authority. Under the same strategic objectives, assumed through the report approved in 2019, the Council is already occupying space within Blakenall Village Centre under similar arrangements and as part of promoting an integrated approach across Health Trust and Social care colleagues. The East Locality for Assessment and Care management (ACM) are already co-located within Blakenall Village Centre. Other teams have co-located to other premises including Pinfold Health Centre and Darlaston Broadway Health Centre. Further work will be required to establish the expected costs for the ongoing use of Darlaston, Pinfold and Blakenall Village centre, to accommodate locality based Social care teams. It is proposed that the income received from the rent of Hollybank House be used to offset some of these costs (see Financial Implications section of this report) as well as any balance being used to support future building maintenance responsibilities that remain with the Council via the terms of the lease.
- 4.12. Both health and social care staff in ICS are well located in the Blakenall Village Centre and the building is easily accessible for staff who need to touch base with colleagues to support the integrated working arrangements.
- 4.13. Moving the Stroke Service from Walsall Manor Hospital and WHT taking on the management and delivery of a stroke service from Hollybank House, means that they will need to register their service with the CQC and seek approval from the Clinical Senate.
- 4.14. A selection of local assets managed and owned by Walsall Council were explored as part of securing alternative accommodation for the locality teams, in particular for the ICS team, who for two years have remained on a temporary basis at Hollybank House, all of this in order to move front facing statutory teams closer to the community in which they serve. Unfortunately the only council owned accommodation identified for this purpose was the Civic Centre and Council House, which has accommodation demands from existing services but moreover does not lend itself fully to the whole system locality model and necessary synergies with the Health colleagues to positively add value to the model being aspired to.
- 4.15. Subject to Cabinet approval, it is the current intention of the parties to exchange all contracts associated with the proposed lease for Hollybank House by September 2020.

- 4.16. Hollybank House is currently registered with the CQC on a temporary basis and as part of an urgent Tenancy at Will. WHT are therefore in a good position to revisit the registration on a long-term basis in order to deliver an inpatient service for rehabilitation of people who have suffered a stroke.

Council Corporate Plan priorities

- 4.17. This is a good commercial option and fits with the Council's priorities.
- 4.18. This proposal supports the role the Council plays in the wider system of health and care for the people of Walsall.
- 4.19. This proposal links to the Council's corporate priority 'Communities are prospering and resilient with all housing needs met in safe and healthy places that build a strong sense of belonging and cohesion'.
- 4.20. The Services will deliver the following outcomes: The most vulnerable are protected from avoidable harm, including treating and caring for people in a safe environment through working within the local community. Enhancing quality of life for people with care and support needs and those with long term conditions; out of hospital, community based provision provides a safe and more appropriate environment for individuals recovering from ill health and/or injury or requiring long term care.

Risk management

- 4.21. Risks to patient safety and clinical effectiveness will be reduced by maximising the opportunities that the use of Hollybank House will bring. These could include:
- Reduced infection control incidents
 - Reduction in patient falls
 - Prompt therapy input for rehabilitation patients as staff are able to focus solely on the patients for purpose of rehabilitation
 - Patient care and improved outcomes as a result of acute staff focussing purely on people within the rehab setting
 - The national guidance on hospital discharges for medically stable patients will increase the pressure to ensure there is adequate bed stock within the community
- 4.22. WHT must register the Health service with the CQC as a new service outside that they were registered for prior and as part of the COVID-19 agenda. If registration was not granted then the Council would revert back to having a building not fit for purpose, the community ICS team still not being accommodated in a building conducive to need and a lost opportunity for WHT to improve the outcomes for vulnerable patients requiring support after a stroke.
- 4.23. There is a risk that WHT choose to exercise their break in relation to both Hollybank House and the occupation of the Blakenall Village Centre during the terms of the leases for the respective buildings. This would result in the Council needing to manage a vacant building and find alternative accommodation for our teams located within the Blakenall Village Centre (or taking on sole occupation of the property through our own lease arrangements). This risk is being mitigated by the wider Walsall Together Partnership governance and management structures that

will ensure consideration is given to the impacts of exercising breaks in leases well in advance of them occurring, and should give both partners the time to plan a relocation from the premises.

Financial implications

4.24. A summary of the full year costs for Hollybank House is shown below in Table 1.

Table 1 - Summary of Hollybank Costs			
	2020/21 (No rent free period)	2020/21 (Including 6 months rent free)	2021/22 onwards
Tenancy at will (April - July)	£27,664	£27,664	-
Rent (August - March)	£60,200	£15,050	£90,300
One-off costs (Funded by WHT)	£33,292	£33,292	-
Total	£121,156	£76,006	£90,300

- 4.25. Walsall Council will receive rental income for Hollybank House of £90,300 per annum. There are ongoing negotiations around a rent free period for up to 6 months for Hollybank House for 2020/21. The preferred option is not to offer a rent free period and officers will negotiate with WHT to agree the shortest possible rent free period with due consideration of the financial impact any rent free period will have on the Local Authority. The income for 2020/21 will therefore be determined once the outcome of these negotiations have been agreed by both parties. The rent payable under the Tenancy at will is a day rate calculated at £247 paid from 6 April 2020 to the date of exchange of the new lease – currently assumed to be the 1 August 2020) and the remaining rental income for 2020/21 will be on pro-rata basis dependent on the agreed rent free period.
- 4.26. The one-off costs incurred to enable Hollybank House to be a suitable location for the Stroke Rehabilitation Service were funded by WHT through COVID-19 funding, this includes the initial cleaning, caretaking and catering provision and minor works.
- 4.27. From 1 April 2020 the business rates and utility bills for Hollybank House were transferred to and paid directly by WHT for the term of the lease.
- 4.28. From 1 June 2020 WHT are sourcing their own cleaning contract and from 1 July 2020 WHT will be sourcing their own catering contract.

- 4.29. A summary of the part year and full year costs for Blakenall Village Centre is shown below in Table 2.

Table 2 - Blakenall Village Costs		
	2020/21 (part year)	2021/22 (full year)
Rent	£8,000	£12,000
Service charge	£25,938	£25,938
Business Rates	£12,500	£12,500
Total	£46,438	£50,438

- 4.30. The total cost to the Local Authority for Blakenall Village Centre is £50,438 per annum. WHT have proposed an initial 4 month rent free period from 1 April 2020 but it is expected that the Local Authority will still incur full year costs for the service charge and business rates.
- 4.31. It is proposed that the costs incurred for Intermediate Care staff moving into Blakenall Village Centre could be funded from the rental income received from Hollybank House.

Legal implications

- 4.32. The proposed continued occupation of Hollybank House on a longer term arrangement will require the Council to grant a lease to WHT. Under S123(i) of the Local Government Act 1972 (LGA 1972), Councils have a fairly wide discretion to dispose of their assets in any manner it wishes. This includes selling freehold interests, granting or assigning leases and granting easements. However, this general power is limited by the duty in LGA 1972, s123(2) to achieve the best consideration reasonably obtainable when disposing of land, unless:
1. The 2003 General Disposal Consent applies; or
 2. Secretary of State for the Department of Communities and Local Government has given his consent to the disposal;
- 4.33. In the case of Hollybank House, WHT are prepared to pay market rent for the property (the market rent having being established by the Council's valuers LSH) and so by entering into a lease on terms set out in this report, the Council is achieving best consideration for the property.
- 4.34. In accordance with Part 4 (section 22) of the Council's Constitution, Cabinet approval is required when the Council proposes to enter into a lease with a value of more than £50,000 in a complete year; in the case of Hollybank House, the Council will receive a rental income of £90,300 per annum.
- 4.35. The legalities of drafting and granting the Lease by the Council will be carried out by officers in Legal Services, under instruction from Asset Management and the Executive Director for Economy Environment and Communities. It is usual for the tenant to pay the Council's legal costs for a new lease.

Procurement Implications/Social Value

- 4.36. There are no direct procurement of social value implications arising from this report.

Property Implications

- 4.37. As set out elsewhere in this report, Hollybank House has no current beneficial operational use for the Council but is not on the surplus to requirements list for disposal. Asset Management have been consulted on the proposals and advised accordingly that if Adult Social Care have no identified need for the property, nor can an alternative service need from within the wider Council be identified, then the property can be made available to WHT on the terms considered in this report. An independent valuation has been obtained from the Council's external valuers, LSH, and this advice has determined that the rent of £90,300 per annum is considered to be equivalent to a market rent for the property.
- 4.38. The terms of WHT occupation of Hollybank House can be summarised as: 10 year term with a 5 year break option; an up to a six-month rent free period which is still to be agreed but would be from the date of lease completion; a rent review at year 5 and WHT taking responsibility for internal repairs only. The market rental value of the property reflects these terms and namely that the Council will retain maintenance responsibilities for all structural elements of the property to include, foundations, supporting structures and the roof. WHT have instructed a survey of the building and a Schedule of Condition will be appended to the lease setting out the condition of the property on occupation for the purposes of calculating future dilapidation costs. WHT will take on the payment of the business rates, utility costs and other facilities management costs at the property. The Council and WHT have produced Heads of Terms for the lease.
- 4.39. As noted, WHT have undertaken their own market assessment of comparable rents for properties providing the same accommodation benefits that can be found at the Blakenall Village Centre for the occupation of ICS (and East Locality Team) and this has been reviewed by the Walsall Together Management Team and determined to represent value for money. The Council is not at present being asked to be a party to the lease between the landlord of the Blakenall Village Centre (New Horizons Community Enterprise) and WHT so we will have no formal rights to occupy. However, a service level agreement will be undertaken by the partners to formalise the co-location arrangements. This matter will need to be determined by the Walsall Together Management Team with advice provided by the Asset Management Team.

Health and wellbeing implications

- 4.40. Outcomes for patients are maximised when stroke rehabilitation services are moved out of an acute hospital setting into the community where there would also be improved links to intermediate care and other community services. This in turn, often improves the health and wellbeing, not only for the patients but for their families, who have many more local opportunities to support their family member and without the trauma of visiting a large acute setting, whilst their family member is in an in-patient bed, or receiving community rehabilitation as part of post discharge recovery.
- 4.41. For staff there is an improvement in health and wellbeing as they are far more connected to their peers and partners as part of the locality agendas and the

accessibility to work is far easier from the Blakenall Village Centre than when travelling and parking at the large acute site. All of these attributes help to attract and retain a workforce and reduce high turnovers of staff.

Staffing implications

- 4.42. Staff engagement has taken place over several months in relation to the longer term alternative options for staff and as part of considering the options for suitable sites to accommodate the staff teams and focus on integration.

Reducing Inequalities

- 4.43. An Equality Impact Assessment (EqiA) has been completed and is appended to this report (**See Appendix D**).

Consultation

- 4.44. Through the ongoing engagement events and Walsall Together Board, local decisions have been made to maximise the use of space across WHT and Walsall Council's assets portfolios. All relevant staff have been engaged in these conversations and as a result of wider planning, are aware there were longer term aspirations to move out of Hollybank House to work alongside colleagues within an alternative suitable site. This was implemented much quicker as a result of COVID-19. This has proved very positive for the staff who have settled into working in a new way and knowing that their accommodation is within an environment that is more fitting to the need of the service.

5 Decide

- 5.1. The Civic Centre and the Council House had been considered alongside other options within the Council's office-use portfolio as possible locations for the ICS Team, but it was preferred to deploy the team to Blakenall Village Centre as this would be a great opportunity to continue the hard work started as part of the integration agenda and the building is community facing, hence far easier for front facing customer engagement and local resident/patient interface.
- 5.2. Having considered the suitable alternative properties within the WHT and Council estate it was deemed to be the case that there are no alternative Council-owned options other than Hollybank House for developing a longer-term inpatient facility for patients recovering and being rehabilitated following a stroke due to the fact that the Council does not own any property that it has not declared surplus to its requirements, suitable for the conversion or re-use without substantial costs to the public sector, and that WHT have no surplus properties capable of hosting the Stroke service.
- 5.3. Manor Hospital will benefit from having additional bed capacity during times of crisis i.e. COVID-19, winter and summer pressures etc.

6 Respond

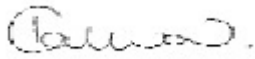
- 6.1. Subject to Cabinet resolving to grant a lease for Hollybank House, then heads of terms will be drafted and legal instructed to draft exchange and complete all legal documents, pursuant to the officer delegations granted by Cabinet.

7. Review

- 7.1. The arrangements for the management of the lease for Hollybank House will be arranged as part of the Corporate Landlord functions and fed into formal Governance arrangements/Board for WHT and the Council as and when required as part of the negotiated terms.

Background papers

Urgent decision report (April 2020) Tenancy at Will
Walsall Together/Walsall Alliance Cabinet Report, 2019



Kerrie Allward
Interim Executive Director

Date 6 July 2020

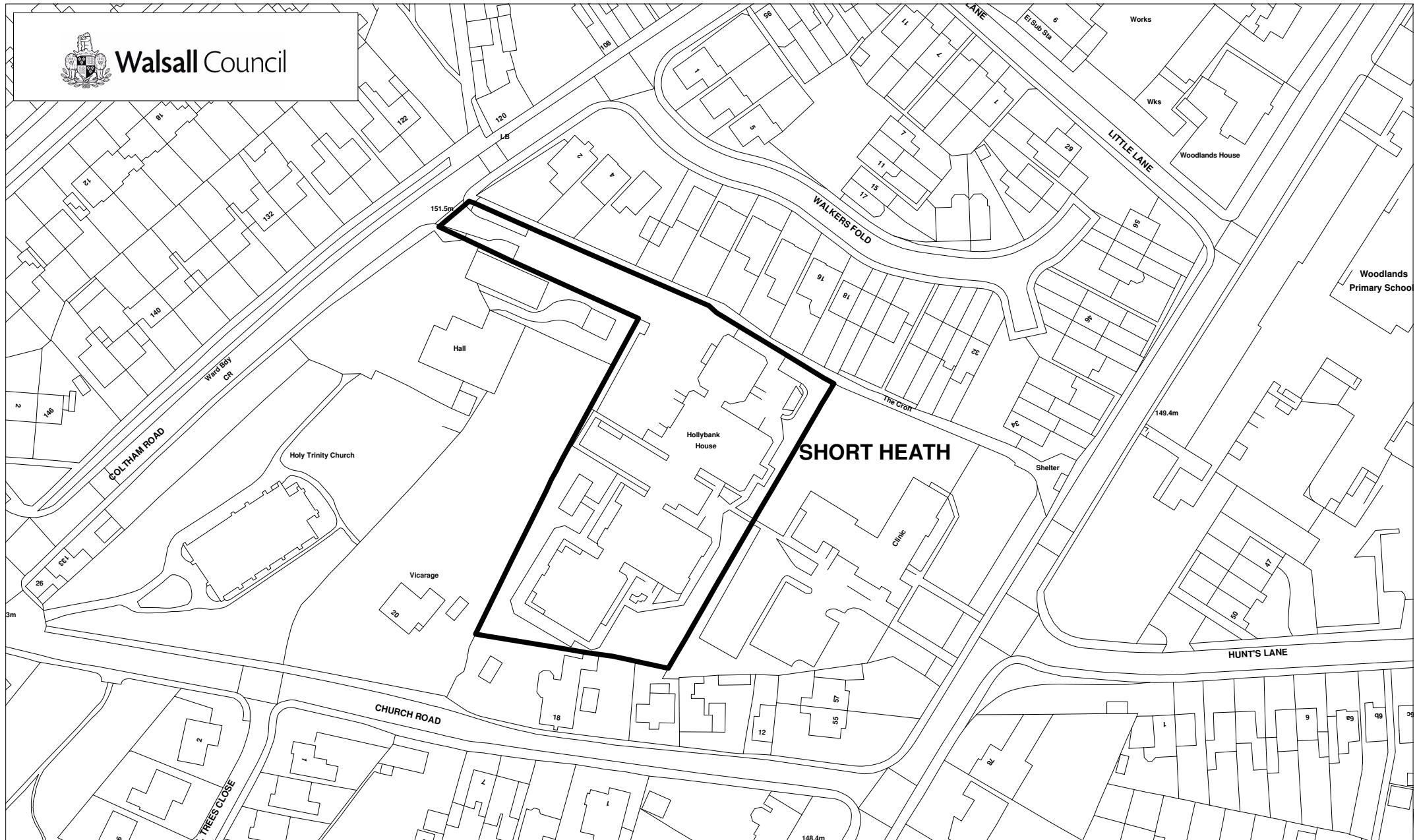


Councillor Rose Martin
Portfolio Holder

Date 6 July 2020



Walsall Council



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DRAWING NO: EPMS 4845/1
DRAWN BY : KCL
DATE: 17/06/2020



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Programme Delivery and Governance

Programme: Walsall Together

Project: Use of Holly Bank House for Community Stroke Rehabilitation Services

Author: Michelle McManus, Walsall Together Programme Manager

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Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

1. Management Summary

The document constitutes the Business Case for the use of Holly Bank House for community stroke rehabilitation services. This management summary is an overview of the business improvement benefits, costs and risks arising from the implementation of this project.

1.1 Introduction

Outcomes for patients are maximised when stroke rehabilitation services are moved out of an acute hospital setting into the community. Whilst based at Manor Hospital, the stroke rehabilitation service is vulnerable to risks associated with capacity pressures. The associated patient safety and quality risks are increased falls, increased infection control incidents, reduced therapy input and increased staff sickness.

The Intermediate Care Service (ICS) is ordinarily based at Holly Bank House. This was a temporary arrangement that was put in place two years ago whilst long-term accommodation issues could be addressed. Since the COVID-19 outbreak, the ICS team has moved out of Holly Bank House and into Blakenall Village Centre, to aid integrated working during the crisis. Alternative office-based accommodation at Blakenall was the longer-term aspiration and the plan to move quicker on that action was directly linked to the need to release capacity on the Manor Hospital site.

The COVID-19 crisis has meant that some actions were approved more promptly than would otherwise have been the case. To support Walsall Healthcare NHS Trust (WHT) to create additional community capacity, a 'tenancy at will' was approved by the Leader using the powers provided by Section 9E of the Local Government Act 2000. This granted WHT occupancy of Holly Bank House on the basis that longer-term arrangements would be subject to full cabinet approval at a later date.

It is the view of the Walsall Together Programme that there are no alternative viable options to Holly Bank House for the relocation of stroke rehabilitation services into a community setting in Walsall. Occupation of Holly Bank House for stroke rehabilitation will result in the following benefits.

Stroke patients and their families:

- Improved outcomes (SSNAP data) through improved reablement and discharge pathways
- Improved satisfaction with care and support
- Reduced length of stay in acute hospital
- Reduction in falls for stroke patients

Maintenance of premises:

- Holly Bank House will be redecorated, and ongoing internal maintenance provided by WHT

Health and Social Care staff:

- Improved satisfaction and engagement
- Improved retention and reduced staff turnover (stroke services)



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

1.2 Benefits

i) Business:

Walsall Council will receive annual rental income for Holly Bank House at **£90,300** per annum over a 10-year term. This figure was confirmed to be market value during the generation of the existing 'tenancy at will'.

As part of the case, WHT is committed to reviewing this position with the Council to maintain adherence to the Local Government Act 1979 and s123 (as amended), to ensure the Council receives best consideration from the lease arrangements.

WHT will be responsible for the internal maintenance of Holly Bank House. All responsibilities for the building will be set out in a Heads of Terms that will be jointly agreed between the two parties.

ii) Cashable / Non-cashable savings

The ICS will benefit from co-location with locality teams and the Community Services management team that are also based at Blakenall Village.

Stroke patients and their families:

- Improved outcomes (SSNAP data) through improved reablement and discharge pathways;
- Improved satisfaction with care and support;
- Reduced length of stay in acute hospital;
- Reduction in falls for stroke patients.

1.3 Costs

WHT will incur the costs for rental, utilities, business rates and internal maintenance for Holly Bank House. WHT will also incur all operational costs associated with the stroke rehabilitation service provision.

Non-recurrent revenue and capital costs have been incurred by Walsall Council and WHT during the WHT occupancy of Holly Bank House in response to the COVID-19 outbreak:

Walsall Council	£16,457
WHT	£93,822
Total	£110,279

These costs have been coded to the emergency funding budgets in the respective organisations. Costs incurred by Walsall Council can be recharged to WHT. A detailed breakdown of these costs is included in section 6.

To support the rapid operationalisation of the site, Walsall Council has supported WHT with the provision of soft FM to Holly Bank House including catering, cleaning and laundry. Walsall Council has confirmed it will not be able to support these services beyond 30th June 20. WHT will provide or outsource directly these services from 1st July under the tenancy at will and any subsequent lease. Section 6 provides a detailed overview of the costs incurred by Walsall Council.



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

Walsall Council will need to fund new accommodation for ICS at Blakenall Village (recurring costs). During the initial Covid 19 period, WHT will fund these costs and agree the final position on a recurrent basis with the relevant Council governance. The lease will be in the WHT name and Heads of Terms, with the associated governance, will be established. The annual costs for Blakenall Village are estimated to be **£50,438**.

Non-recurrent revenue and capital costs have been incurred to relocate ICS staff to Blakenall Village during the COVID-19 emergency. These costs have coded to the emergency funding budget in the respective organisations as follows:

Walsall Council	£1,300
WHT	£26,497
Total	£27,797

1.4 Project Plan

i) Overview:

Following the decision to grant occupancy of Holly Bank House under a tenancy at will under emergency measures due to the COVID-19 Level 4 NHS National Emergency, WHT is now seeking approval to occupy Holly Bank House for community stroke rehabilitation from Walsall Cabinet in July 2020.

1.5 Key Risks

The operating model for stroke rehabilitation is subject to approval at clinical senate and Health Overview & Scrutiny Committee (OSC). These Groups may make additional demands to WHT that are outside of the current financial envelope. WHT may not be able to afford the I&E position for the service located in the community and will withdraw its intention to enter into a lease agreement. At this point, the Council would follow its Corporate Asset Management Plan to decide how the building might be utilised in the future or declared surplus.

The Council will expect the Tenant to produce a Schedule of Condition as part of the lease. WMBC does not as a matter of course undertake a condition survey for buildings it is proposing to lease. The onus is on the tenant to satisfy itself of the responsibilities it is taking on through an agreed Heads of Terms. A schedule of condition enables the tenant to establish the condition of the building prior to occupation. It also aids any future negotiations regarding dilapidations at the expiry of the lease.

1.6 Opportunities and Recommendations

It is recommended that:

- the Intermediate Care Service (ICS) moves into fit-for-purpose office-based accommodation at Blakenall Village Centre;
- WHT stroke rehabilitation service remains at Holly Bank House.

For stroke rehabilitation services to be provided in a community setting in Walsall, there are no viable alternatives to Holly Bank House. Additionally, the risks associated with



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

maintaining the service at Manor Hospital are significant and will result in poorer outcomes for patients.

In terms of identifying a suitable alternative location for the ICS team, several options were initially considered within the existing partnership estate. Blakenell village is already in use by the partnership and location is considered the best interim arrangements to keep the staff and the integrated working whole.



2. Introduction

2.1 Purpose of this document

Content guidance

The purpose of this Business Case to document the justification for the undertaking of the project, based upon a balanced review of the estimated cost of development and implementation against the risks and anticipated business benefits and savings to be gained.

It is essential that the full implications of the business change model are considered and therefore the full financial implications of development and ongoing costs must be included within this document.

The Business Case is used to say why the forecast effort and time will be worth the expenditure.

When planning for any piece of work, it is recommended that you begin by asking these 'essential ten' questions:

1. *Why do we want to do this?*
2. *Is it possible to do it?*
3. *What will it deliver?*
4. *Will it add value?*
5. *Who needs it?*
6. *Does it link to other corporate or national initiatives (and how)?*
7. *Who is responsible for making it happen?*
8. *Who is paying for it?*
9. *Who can give the authority for it to proceed?*
10. *Is the environment supportive enough?*

2.2 Background

The National Stroke Strategy (2007) demonstrated that a hub and spoke approach, in which all patients displaying stroke symptoms are directed to hyper-acute stroke units (HASU), will deliver significant improvements to patient outcomes including a reduction in mortality rates and earlier discharge from hospital. Once stable, patients are discharged from an acute setting with care delivered either at a community rehabilitation centre or at home.

In Walsall, following the West Midlands Clinical Senate Stroke Review in 2014, a Stroke Services Sustainability Review was undertaken by Walsall CCG in 2017. The outcome of the review was to establish a HASU and ASU (as the tariff assumes that the HASU and ASU are provided by the same provider) at the Royal Wolverhampton NHS Trust. A further recommendation was to establish a comprehensive inpatient community rehabilitation service in Walsall, provided by Walsall Healthcare NHS Trust (WHT). At the time of the review, there was no community bed facility to support Early Supported Discharge (ESD) and no community bed stock. As such, the stroke rehabilitation service is being provided on Ward 4 at the Manor Hospital, until a community facility is secured.

Holly Bank House was a 21-bedded intermediate care rehabilitation facility from October 2012 until June 2018 when the funding for the bed-based service was withdrawn from the



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

Better Care Fund and the unit closed its beds. The CCG now commission 20 beds across 3 nursing homes in the Borough with the same health Integrated Care Service (ICS) clinicians delivering the rehabilitation element of the service.

Intermediate Care Services in Walsall have since been remodelled jointly by Health and Social Care to strengthen approaches to the provision of care closer to home, the avoidance of preventable hospital admissions and the expedition of hospital discharges. As part of this service redesign, ICS staff have relocated from Manor Hospital and are temporarily based in the empty clinical space at Hollybank House until more appropriate accommodation can be secured.

2.3 Drivers for Change

Outcomes for patients are maximised when stroke rehabilitation services are moved out of an acute hospital setting into the community where there would also be improved links to intermediate care and other community services.

Whilst based at Manor Hospital, the stroke rehabilitation service is vulnerable to risks associated with capacity pressures e.g. medical patients are co-located on the same ward and, during periods of extreme pressure, some staff can be reallocated to cover absence on other wards. The associated patient safety and quality risks are increased falls, increased infection control incidents (reduced side room capacity), reduced therapy input and increased staff sickness.

The Intermediate Care Service (ICS) is ordinarily based at Holly Bank House. This was a temporary arrangement that was put in place two years ago whilst long-term accommodation issues could be addressed. Since the COVID-19 outbreak, the ICS team has moved out of Holly Bank House and into Blakenall Village Centre, where colleagues in East Locality (Adult Social Care) are based. The reason for this was to aid integrated working during the crisis. Alternative office-based accommodation at Blakenall Village was the longer-term aspiration and the plan to move quicker on that action was directly linked to the need to create urgent community beds that would in turn release capacity on the Manor Hospital site.

It is the view of the Walsall Together Partnership that there are no alternative viable options to Holly Bank House for the relocation of stroke rehabilitation services into a community setting in Walsall.

2.4 Project Mandate

The COVID-19 crisis has meant that some actions were approved more promptly than would otherwise have been the case. To support Walsall Healthcare NHS Trust (WHT) with the flow of emergency care patients through the Manor Hospital site and equally improve the quality of care that can be provided to stroke patients through sustained rehabilitation care, a 'tenancy at will' was approved by the Leader using the powers provided by Section 9E of the Local Government Act 2000. This granted WHT occupancy of Holly Bank House on the basis that longer-term arrangements would be subject to full cabinet approval at a later date.



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

2.5 Assumptions

There are no alternative viable options to Holly Bank House for the relocation of stroke rehabilitation services into a community setting in Walsall.

The ICS team would be better located in an office-based environment; the ICS team are amenable to the proposed alternative of Blakenall Village Centre.

The solution for accommodation of both services will be considered in the context of the Walsall Together Integrated Care Partnership (ICP) principles and not in the interests of any single statutory organisation. The ICP seeks to develop “integrated ways of working to improve the health and wellbeing outcomes of their population, increase the quality of care provided and provide long term financial sustainability for the system” (Walsall Together Business Case, January 19).

3. Options Appraisal

3.1 Option 1

Summary/Description	<p>Following the COVID-19 emergency:</p> <ul style="list-style-type: none"> • WHT stroke rehabilitation services move back to Manor Hospital; • ICS moves would need to seek alternative accommodation, which could include Blakenall Village Centre.
Scope covered by option	<p>All ICS staff currently temporarily located in Blakenall Village Centre (approx. 120 individuals which are a mixture of Health and Social Care staff).</p> <p>The WHT inpatient Stroke Rehab service and associated staffing, previously located at Manor Hospital and currently based at Holly Bank House under the tenancy at will.</p> <p>The WHT community stroke rehabilitation team, previously located at Short Heath Clinic and currently based at Holly Bank House under the tenancy at will.</p> <p>The Walsall Council stroke maintenance team (3 individuals) previously located at Goscote and relocated to Holly Bank House in February 20 with a view to improving links to the WHT community stroke and neuro-rehabilitation services.</p> <p>There is a small Community Intervention Team located at Holly Bank House; the service operates from 8:00am to 9:00pm, 7 days per week. The team utilises a small office and one clinical room to see patients.</p> <p>Community Rapid Response and Single Point of Access services are based at Holly Bank House out of hours. These services are currently being expanded to operate 24/7. The services utilise part of the Nursing</p>



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

	Admin hub and one of the small offices that are not occupied out of hours.
Deliverables	<p>Walsall stroke patients are discharged from the acute pathway at New Cross Hospital, Wolverhampton, once stable and repatriated to Walsall Manor Hospital for rehabilitation.</p> <p>ICS clinicians deliver intermediate care rehabilitation across the Borough, based out of fit-for-purpose office accommodation.</p>
Resource Requirements	<p>Significant resources have been diverted to supporting the temporary move of ICS and stroke rehabilitation services from WHT and Walsall Council. In the case of the latter, resources from Adult Social Care and IFM have been critical to mobilising the new services at short notice. A similar level of resource would be required to support the reversal of the respective moves.</p> <p>Change management will be undertaken by the Walsall Together Senior Management Team (SMT) and Programme Office; a SMT lead and Programme Manager are already identified along with IT and Estates support from WHT.</p>
Investment Requirements	<p>There has been significant capital expenditure to date to enable the temporary accommodation for both ICS and stroke rehabilitation. Holly Bank House does not provide a suitable long-term option for ICS as it is not office accommodation and does not have the necessary consent to operate as such. Alternative accommodation, other than Blakenall Village, is likely to attract additional non-recurrent capital and revenue costs. As such, it is likely the most appropriate long-term solution for ICS will be to remain in the current temporary accommodation at Blakenall Village.</p> <p>It is assumed that ongoing revenue expenditure for the ICS team will not increase. Indicative per annum figures are included in the case.</p>
Outline Timetable	<p>The current COVID-19 emergency and associated funding is currently in place until 31st July 20.</p> <p>We are working to have a formal lease agreement in place for 1st August, subject to the time required by the respective legal teams; this may slip to 1st September as a result.</p> <p>The Tenancy at Will, will continue until such time as a formal lease agreement is in place.</p>
Outline Risk Assessment	<p>There are several significant risks associated with providing stroke rehabilitation services at the Manor Hospital:</p> <ul style="list-style-type: none"> • Increase in patient falls;



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

	<ul style="list-style-type: none"> • Increase in safe staffing incidents; • Increase in infection control incidents; • Reduced/delayed therapy input for stroke patients; • High staff turnover. <p>A whole-system approach is required to minimise the financial risk to any single organisation in line with the principles of an integrated care system.</p>
Assumptions	<p>There are no viable alternative community locations for the stroke rehabilitation service to move into.</p> <p>The ICS team are keen to move to a more appropriate location and are amenable to moving to Blakenall Village Centre, where they will be co-located with existing East Locality integrated teams.</p> <p>This option assumes that Stroke services will be provided at Manor Hospital; the CCG may decide to review the stroke pathway and consider alternative options for Walsall patients to receive community rehabilitation services outside of the Borough.</p> <p>If there is no other Walsall Together Integrated Care Partnership (ICP) requirement for the property (for its planning use class purpose) and no Council requirement then the Council would follow its Corporate Asset Management Plan to decide how the building might be utilised in the future or declared surplus.</p>
Advantages	<p>Under the Council's Corporate Asset Management Plan, there is scope for Holly Bank House to be utilised differently in the future or declared surplus.</p>
Disadvantages	<p>Outcomes are reduced and clinical service risks are increased for stroke patients in Walsall.</p> <p>Walsall CCG may review the stroke pathway and commission community rehabilitation services outside of the Borough, resulting in care being moved further away from where people live.</p> <p>The clinical space at Holly Bank House will have to cease and the re-location of office-based staff will either have to be undertaken or a Change of Use planning consent obtained to allow the continued use of the property for the ICS office-based staff.</p> <p>If the building is declared surplus, alternative accommodation would be required for the remaining clinical services in Holly Bank House (CIT and Rapid Response).</p>

3.2 Option 2



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

<p>Summary/Description</p>	<p>ICS remain at Blakenall Village Centre, alongside the East Locality integrated place-based teams.</p> <p>WHT stroke rehabilitation service remains at Holly Bank House.</p>
<p>Scope covered by option</p>	<p>All ICS staff currently temporarily located in Blakenall Village Centre (approx. 120 individuals which are a mixture of Health and Social Care staff).</p> <p>The WHT inpatient Stroke Rehab service and associated staffing, previously located at Manor Hospital and currently based at Holly Bank House under the tenancy at will.</p> <p>The WHT community stroke rehabilitation team, previously located at Short Heath Clinic and currently based at Holly Bank House under the tenancy at will.</p> <p>The Walsall Council stroke maintenance team (3 individuals) previously located at Goscote and relocated to Holly Bank House in February 20 with a view to improving links to the WHT community stroke and neuro-rehabilitation services.</p> <p>There is a small Community Intervention Team located at Holly Bank House; the service operates from 8:00am to 9:00pm, 7 days per week. The team utilises a small office and one clinical room to see patients.</p> <p>Community Rapid Response and Single Point of Access services are based at Holly Bank House out of hours. These services are currently being expanded to operate 24/7. The services utilise part of the Nursing Admin hub and one of the small offices that are not occupied out of hours.</p>
<p>Deliverables</p>	<p>Walsall stroke patients are discharged from the acute pathway once stable and repatriated to Walsall for rehabilitation in a community setting.</p> <p>ICS clinicians deliver intermediate care rehabilitation across the Borough, based out of fit-for-purpose office accommodation.</p>
<p>Resource Requirements</p>	<p>There are no resource requirements as this option has been implemented during the COVID-19 outbreak.</p>
<p>Investment Requirements</p>	<p>There are no investment requirements as this option has been implemented during the COVID-19 outbreak. Non-current costs incurred to date are included in the case for reference.</p>
<p>Outline Timetable</p>	<p>The current COVID-19 emergency and associated funding is in place until 31st July 20.</p> <p>This case is due to be presented to ASG in June 20 and to Cabinet for approval in July 20 with a view to having a formal lease in place by September 20.</p>



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

Outline Risk Assessment	<p>WHT carries significant financial risk in moving stroke rehabilitation to the community in terms of the ongoing I&E position.</p> <p>A whole-system approach is required to minimise the financial risk to any single organisation in line with the principles of an integrated care system.</p> <p>The risks to patient safety and clinical quality are significantly reduced by moving stroke services to Holly Bank House.</p> <p>Any potential financial risks for Adult Social Care as a result of moving ICS to Blakenall Village have been explored and mitigated as part of the development of this case.</p>
Assumptions	<p>There are no viable alternative community locations for the stroke rehabilitation service to move into.</p> <p>There is an expectation that stroke rehabilitation services will be delivered in a community location and the system will accommodate a level of additional capital and revenue expenditure if necessary.</p> <p>The ICS team are keen to move to a more appropriate location and are amenable to moving to Blakenall Village Centre.</p>
Advantages	<p>Holly Bank House has been re-purposed to accommodate an inpatient rehabilitation service, as per its original design.</p> <p>Office-based ICS staff have been relocated to a more appropriate venue with increased and more secure parking and improved links to locality teams.</p> <p>Outcomes are maximised for stroke patients in Walsall, in line with national evidence and best practice.</p> <p>Ward 4 at the Manor Hospital is returned to clinical space to accommodate other demands.</p>
Disadvantages	<p>There are additional costs (capital and revenue expenditure) to the health and care system.</p>

3.3 Preferred Option

For bed-based, stroke rehabilitation services to be provided in a community setting in Walsall, there are no viable alternatives to Holly Bank House. Additionally, the risks associated with maintaining the service at Manor Hospital are significant and will result in poorer outcomes for patients. For these reasons, option 2 is the preferred option.

In terms of identifying a suitable alternative location for the ICS team, several options were initially considered within the existing NHS estate including Jubilee House and locations owned by NHS Property Services. However, many of these locations are expensive to use for office space. A commercial opportunity has been identified at Blakenall Village Centre. This option would provide a location large enough for the ICS team and enables co-location



with other community place-based, integrated teams and Walsall Together management staff.

The annual rental costs (including service charges and excluding business rates) per m² to occupy NHS property is significantly more expensive. The following examples are for rooms approx. one-third and one-fifth respectively of the size of the space at Blakenall Village:

Pinfold Health Centre	£38,000
Darlaston Health Centre	£16,500
Blakenall Village	£37,938

ICS is currently in temporary accommodation at Blakenall Village, made available due to the reduced staffing on site as a result of COVID-19. Dedicated space for ICS has been identified within the building and can be available at short notice, subject to completion of minor renovations. This provides a cost-effective option from the estate available and retains the clinical space across the community for clinical services.

4. Benefits

4.1 Project Benefits

Quantifiable and non-quantifiable benefits for the project are set out in sections 4.2 and 4.3.

4.2 Quantifiable Benefits

Walsall Council will receive annual rental income for Holly Bank House at £90,300 per annum over a 10-year term with a break clause at 5 years. This figure was confirmed to be market value during the generation of the existing 'tenancy at will'. WHT is seeking a rent free period of 6 months following implementation of the formal lease agreement, which will be negotiated as appropriate with the Council. WHT will also pay business rates on the property.

As part of the case, WHT is committed to reviewing this position with the Council to maintain adherence to the Local Government Act 1979 and s123 (as amended), to ensure the Council receives best consideration from the lease arrangements.

WHT will be responsible for the internal maintenance of Holly Bank House. All responsibilities for the building will be set out in a Heads of Terms that will be jointly agreed between the two parties. The current estimation of the value of the internal maintenance is £75,600, as set out in the tenancy at will.

4.3 Non-Quantifiable Benefits

Stroke patients and their families:

- Improved outcomes (SSNAP data) through improved reablement and discharge pathways;
- Improved satisfaction with care and support;
- Reduced length of stay in acute hospital;



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

- Reduction in falls for stroke patients.

Maintenance of premises:

- Holly Bank House has been renovated (costs attributed to WHT) to bring the building in line with CQC clinical standards;
- Ongoing internal maintenance will be provided by WHT.

Health and Social Care staff:

- Improved satisfaction and engagement;
 - Improved retention and reduced staff turnover.
-

4.4 Threats/Dis-Benefits

The proposed lease between Blakenall Village and WHT refers to utility costs and insurance being met by the tenant. A Heads of Terms document will need to be negotiated to set how, if at all, these pass through to the Council on a pro-rotta basis.

There are terms in the proposed lease for Blakenall Village regarding dilapidations; provisions may be needed at the end of the 5-year term to pay these if WHT chose not to extend the lease (and these may be on new terms with greater cost).

There are clauses in the proposed lease for Blakenall Village to enable rent review and annual service charge increases, which will need to be budgeted for.

4.5 Critical Success Factors

The project's success is dependent on gaining approval to utilise Holly Bank House as an inpatient community stroke rehabilitation unit and gaining agreement on the rental agreements between WHT and Walsall Council for both Holly Bank House and Blakenall Village Centre.

4.6 Benefits Realisation

Many of the benefits outlines above are being realised by the project as the respective teams are based in the proposed accommodation on a temporary basis. It is expected that greater benefits will be realised as the health and care economy starts to move out of the current restrictions experienced through COVID-19. For example, integrated working across health and social care teams is currently restricted and a number of activities such as group-based rehabilitation is not current possible for the inpatients at Holly Bank House.



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

5. Risk Analysis

5.1 Risk Assessment

Likelihood: 1= Almost Impossible, 2= Very Low, 3= Low, 4= Significant, 5= High, 6= Very High

Impact: 1= Negligible, 2= Marginal, 3= Critical, 4= Catastrophic

ID	Risk	Consequence	Likelihood	Impact
HB H0 1	The operating model for stroke rehabilitation is subject to approval at clinical senate and Health Overview & Scrutiny Committee (OSC). These Groups may make additional demands to WHT that are outside of the current financial envelope	WHT may not be able to afford the I&E position for the service located in the community and will withdraw its intention to enter into a lease agreement. At this point, the Council would follow its Corporate Asset Management Plan to decide how the building might be utilised in the future or declared surplus.	4	2

The Council will expect the Tenant to produce a Schedule of Condition as part of the lease. WMBC does not as a matter of course undertake a condition survey for buildings it is proposing to lease. The onus is on the tenant to satisfy itself of the responsibilities it is taking on through an agreed Heads of Terms. A schedule of condition enables the tenant to establish the condition of the building prior to occupation. It also aids any future negotiations regarding dilapidations at the expiry of the lease.



6. Project Costs

6.1 Cost Summary

Non-recurrent revenue and capital costs to the value of £110,279 have been incurred by Walsall Council and WHT during the WHT occupancy of Holly Bank House in response to the COVID-19 outbreak. Sections 6.2 and 6.3 provide a breakdown of these costs.

Non-recurrent revenue and capital costs to the value of £27,797 have been incurred to relocate ICS staff to Blakenall Village during the COVID-19 emergency. These costs have coded to the emergency funding budget in the respective organisations as described in sections 6.2 and 6.3.

Long term, for this to work alongside the integrated working agendas, Walsall Council will need to fund new accommodation for ICS at Blakenall Village (recurring costs). This is estimated to be £50,438 (excluding utilities).

WHT will incur the costs for rental, utilities, business rates and internal maintenance for Holly Bank House. This is estimated to be £235,242 per annum. WHT will also incur all operational costs associated with the stroke rehabilitation service provision.

6.2 Capital Cost

The following table gives an overview of the capital costs incurred during the Tenancy at Will by WHT. This expenditure has been coded to the emergency funding budgets.

Expenditure	Value (incl VAT where known)	Organisation to which the costs have been attributed
General waste bins	£2,163	WHT
Danicentres	£1,543	WHT
TVs and brackets for patient rooms	£4,507	WHT
Aidapt Longfield VG08 Chairs	£2,205	WHT
Clinical waste bins	£2,163	WHT
Ceiling track hoists	£1,182	WHT
Bedroom furniture	£14,586	WHT
Beds, mattresses and installation	£20,990	WHT
Clinical wash rooms, flooring	£12,581	WHT
Decorating and interiors	£15,903	WHT
Total	£77,823	

Non-recurrent capital costs have been incurred to relocate ICS staff to Blakenall Village during the COVID-19 emergency. These costs have coded to the emergency funding budget in WHT as shown in the table below.

Expenditure	Value	Organisation to which the costs have been attributed
IT infrastructure	£6,023	WHT
Office refurbishment	£19,202	WHT
Total	£25,225	

**Business Case**

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

6.3 Revenue Cost

The following table gives an overview of the revenue costs incurred during the Tenancy at Will by Walsall Council and WHT, which have been coded to the emergency funding budgets in the respective organisations. Costs incurred by Walsall Council can be recharged to WHT.

Expenditure	Value (incl VAT where known)	Organisation to which the costs have been attributed
Gas works	£950	Walsall Council
Electrical works	£450	Walsall Council
Dolphin Lifts	£2,000	Walsall Council
Water Testing	£350	Walsall Council
Deep Clean	£1,355	Walsall Council
Nurse Buzzer System	£4,763	Walsall Council
Macerators – replacement/repair	£6,589	Walsall Council
Door passes	£114	WHT
Lockers	£184	WHT
Grounds work	£1,137	WHT
Drain inspection	£2,461	WHT
Biocide Testing	£1,717	WHT
Legionella's Risk assessment	£780	WHT
Washing machine repairs	£547	WHT
ambulance chairs x6	£390	WHT
Albac mats	£1,248	WHT
Water softener	£5,795	WHT
Locks and fitting for side gate	£328	WHT
Internal locks and fittings	£1,298	WHT
Total	£32,456	

Non-recurrent revenue costs have been incurred to relocate ICS staff to Blakenall Village during the COVID-19 emergency. These costs have coded to the emergency funding budget in the respective organisations as shown in the table below.

Expenditure	Value	Organisation to which the costs have been attributed
Door access fobs - BVC	£1,272	WHT
Removals – ICS from Holly Bank House to Blakenall Village Centre	£ 1,300	Walsall Council
Total	£2,572	

Long term, for this to work alongside the integrated working agendas, Walsall Council will need to fund new accommodation for ICS at Blakenall Village (recurring costs). During the initial COVID-19 period, WHT will fund these costs and agree the final position on a recurrent basis with the relevant Council governance. The lease will be in the WHT name and Heads of Terms, with the associated governance, will be established. WHT will pay the landlord the rent and service charge, and pay the rates to the Billing Authority (WMBC) but then recharge the Council for its contribution as follows:

Rental pa £12,000

**Business Case**

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

Estimated service charges pa	£25,938
Estimated business rates pa	£12,500
Total	£50,438

WHT will incur the costs for rental, utilities, business rates and internal maintenance for Holly Bank House. WHT will also incur all operational costs associated with the stroke rehabilitation service provision.

WHT costs for occupancy of Holly Bank House:

Annual rent (confirmed)	£90,300
Business rates (confirmed)	£26,221
Internal maintenance (estimated)	£75,600
Utilities (estimated)	£43,121
Total	£235,242

To support the rapid operationalisation of the site, Walsall Council has supported WHT with the provision of soft FM to Holly Bank House including catering, cleaning and laundry. Walsall Council has confirmed it will not be able to support these services beyond 30th June 20. WHT will provide or outsource directly these services from 1st July under the tenancy at will and any subsequent lease. The following table shows the costs incurred by Walsall Council in relation to soft FM. These costs can be re-charged to WHT.

Soft FM	Detail	Costs incurred Apr to Jun inclusive
Domestic cleaning and laundry	Cleaning of non-clinical areas including all pay costs, materials and housekeeping consumables (clinical cleaning outsourced through a contract held by WHT) Laundry including equipment on site, pay costs and consumables	£11,022.85
Catering	Staff and equipment (food provided by WHT)	£9,239.88
Caretaking	Pay costs	£8,323.42
Total		£28,586.15

6.4 Contingency

There is no contingency budget.

6.5 Assumptions

WHT will pay the rental and internal maintenance for Hollybank House on the basis that Walsall Council fund the relocation of ICS staff to Blakenall Village. **Note the interim arrangements for COVID-19.**

Walsall Council will benefit from maintenance and repairs to Holly Bank House, incurred as costs by WHT.



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

Walsall Council will continue to be responsible for the external maintenance of Holly Bank House.

7. Timescales

7.1 Summary of Project Plan

WHT is seeking approval to occupy Holly Bank House for community stroke rehabilitation from Walsall Cabinet in July 2020.

7.2 Milestones/Critical Path

Milestone	Date	Status
WHT project team and Walsall Council Place Team initial meeting to agree milestones and critical path	April 2020	Complete
Walsall Council Asset Group review of business case	June 2020	On track
Walsall Council Cabinet review of proposal and final decision point	July 2020	On track

7.3 Dependencies

Implementation is dependent on:

- Approval from Walsall Council for the continued use of Holly Bank House for community stroke rehabilitation and the associated financial model above;
- Approval from Walsall Council on the permanent relocation of ICS staff to Blakenall Village Centre;
- Agreement with the Council on the use of the equipment at Holly Bank House.

8. Investment Appraisal

Non-recurrent capital and revenue costs have been incurred to date to the value of £138,076, of which the Walsall Council share is £17,757.

Walsall Council has also incurred the costs of providing soft FM services to the value of £28,586.

All of these above costs can be re-charged to WHT.

Going forwards, Walsall Council can expect to receive annual income for the rent and rates for Holly Bank House to the estimated value of £116,521. WHT will incur costs associated with maintenance of the building and utilities, saving Walsall Council an estimated £97,591 per annum based on historic expenditure.

Walsall Council will incur costs for occupation of Blakenall Village Centre to the value of £50,438 per annum (excluding utilities).



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated



Business Case

A description and justification for the project that documents the assumptions made, the options considered, the benefits to be realised and also provides financial justification for the project to be initiated

Version History

Version	Date issued	Summary of Changes

Approvals

This document requires the following approvals.

Name	Signature	Title	Date of Issue	Version

Distribution

This document has been distributed to:

Name	Title	Date of Issue	Version

Quality Assurance

This has been reviewed for errors by:

Name	Signature	Title	Date
		Configuration Librarian	

Equality Impact Assessment (EqIA) for Policies, Procedures and Services

Proposal name	Hollybank - Long term lease between Walsall Healthcare Trust (WHT) and Walsall Council to deliver a bed based Stroke service		
Directorate	Adult Social care Directorate		
Service	Adult Social care Directorate & WHT		
Responsible Officer	Kerrie Allward		
Proposal planning start	Commenced Planning April 2020 as part of COVID-19	Proposal start date (due or actual date)	Long term proposal from September 2020 as part of full business case and lease arrangement

1	What is the purpose of the proposal?	Yes / No	New / revision
	Delivery of a 21 bedded stroke service via Hollybank as part of a Walsall Healthcare Trust health resource		
	Policy	Y	Y
	Procedure	Y	Y
	Guidance	Y	Y
	Is this a service to customers/staff/public?	Y	Y
	If yes, is it contracted or commissioned?	Y	Long term lease between Council and WHT
	Other - give details	Lease arrangement in conjunction with WHT & WMBC	To be reviewed as per business plan and Cabinet approval
2	What is the business case for this proposal? Please provide the main purpose of the service, intended outcomes and reasons for change?		
	<p>Walsall Healthcare Trust faced unprecedented pressures on hospital services in Walsall due to the Covid 19 pandemic. Hospital resources were stretched. Walsall Healthcare Trust obtained occupancy of Hollybank House under a Tenancy of Will arrangement from Monday 6th April. This runs until no later than September in order to ensure that stroke rehabilitation patients from the Manor can be accommodated there as oppose to remaining in the large acute site of the manor Hospital. In addition to this, there has been a period of evaluation as to how this arrangement works for patients. With this in mind, a full business case and request for this service model as a longer term option and for the request for approval for Walsall Health care Trust, is being progressed and approval to enter into a long term lease with the Council to continue to deliver the stroke service from Hollybank, is the intended outcome</p>		



3	Who is the proposal likely to affect?		
	People in Walsall	Yes / No	Detail
	All	N	Any person who is directly or indirectly affected by suffering a stroke and requiring ongoing care and support as part of Reablement and recovery
	Specific group/s	Y	
	Council employees	Y	
Other (identify)		Council employees currently working as part of the integrated Community Service. These staff remain at Blakenall as part of the next stages of integrated working in order to accommodate the Lease and ongoing delivery of Stroke services from Hollybank	
4	Please provide service data relating to this proposal on your customer's protected characteristics.		
	<ul style="list-style-type: none"> • The Stroke Strategy undertaken in 2007, identifies the need for local offers of alternative support around helping a person to recover and promote independence and rehabilitation following a stroke .It also identifies the types of settings that are least preferable for supporting this type of need- this includes large Acute settings that are found within the main hospital sites. • Smaller settings offer less risk to infections than a large hospital environment that slows down the recovery of patients. Community type bed based settings also offer far more proportionate opportunities for regular input and visibility from family members and networks of support throughout the patients journey through Rehabilitation • The ward size at the Manor hospital is greater than the current number of patients in this group, therefore this occupies a space within the hospital ordinarily that doesn't maximise the space utilisation for wider cohorts of people that require acute settings. • By moving the stroke service to a local community based site, means that there is also a much more relaxed feel for patients who may be struggling to come to terms with stroke and the ways it may /may not have changed their lives. • The smaller, more concise setting is conducive to improved confidence and personalised care and support during recovery and maintenance needs. • Staff who are being resettled into Blakenall as part of integrated working with health colleagues is beneficial and is already evidencing itself in the way the staff are interacting and working collaboratively across shared agendas. Blakenall is a fit for purpose venue that has good parking, easy access and is conducive to the holistic working agendas across operational Social care and Health needs • Operating the bed based stroke service is also a fit for purpose move forward as 		

the property already lends itself to a bed based resource and has been easily adapted to the needs of a patient /community setting.

- Strokes can affect people of all age, race and gender. The support to manage the overarching needs of all people who require ongoing support and rehabilitation following a stroke, does mean that by offering the community type setting in order to maximise potential of both acute inpatient and community Reablement, does also ensure that the past learning and research collected nationally can be put to very good use locally to Walsall.

5 Please provide details of all engagement and consultation undertaken for this proposal. (Please use a separate box for each engagement/consultation).

Several organisations including Walsall Council, Walsall Healthcare NHS Trust and Walsall Housing Group have been involved in discussions to operationalise Hollybank House as an inpatient unit for the past few months and the introduction of this facility as part of the emerging COVID crisis in March, meant that the Tenancy at Will was delivered and this has not got to the point where it is clear it is the most preferred option longer term as part of the business case for the Stroke service

This alongside the temporary moves of the Intermediate Care Service (ICS) to Blakenall has also given the teams the opportunities during crisis to test out the new environment and consider if this is the best option for the integrated working longer term.

Actions have been coordinated jointly between colleagues at Walsall Together, the Integrated Care Partnership for Walsall, and Adult Social Care.

Walsall Healthcare Trust, will meet the costs of the use of Hollybank by way of a long term lease (Subject to supporting business case and cabinet report and the agreement of all lease terms).

This proposal links to the Council's corporate priority 'Communities are prospering and resilient with all housing needs met in safe and healthy places that build a strong sense of belonging and cohesion'.

The Services will deliver the following outcome: The most vulnerable are protected from avoidable harm, including treating and caring for people in a safe environment through working within the local community. Enhancing quality of life for people with care and support needs and those with long term conditions; out of hospital, community based provision provides a safe and more appropriate environment for individuals recovering from ill health and/or injury or requiring long term care.

Engagement with partners and members of the public have already commenced in past months and will continue to be a theme when scoping services for the future

Consultation Activity			
Type of engagement/consultation	Internal workforce engagement and awareness raising	Date	11/6/20
Who attended/participated?	Front line staff employed as part of the existing staff members of ICS and also staff working as part of the wider cohort of colleagues currently occupying Hollybank		
Protected characteristics of participants	All staff will remain part of the wider integrated resource, but will be operating from a different base as apt of the longer- term arrangement.		
Feedback			
<ul style="list-style-type: none"> Positive feedback from front line staff as they have had experience since the temporary moves to Blakenall to test out a more fit for purpose premise. It is increasing mental health and wellbeing; relationships across professionals and easy access to resource and other professionals linked to the area of work they are committed to 			
6	Concise overview of all evidence, engagement and consultation		
<p>All relevant engagement and communications are still in place following the original temporary change that arose as result of COVID</p> <p>Some further lessons learned and new ways of improving how we do business is also in place and form part of the wider communications and engagement as apt of reset and also the synergies between the Walsall Healthcare trust responsibilities and Walsall Council re asset and building management/health and safety of staff and customers .</p> <p>Full Cabinet report and associated documentation that is linked directly to this EQIA.</p>			
7	How may the proposal affect each protected characteristic or group? The effect may be positive, negative, neutral or not known. Give reasons and if action is needed.		
	Characteristic	Affect	Reason
	Action needed Yes / No		
	Age	This is a very positive plan with regard to longer term needs and aspirations around developing a solid stroke service and a stronger integrated care service through integrated working by moving the ICS team out of Hollybank longer term to Blakenall The older population and people of all age who have experienced a stroke and have then become debilitated as a result of this, will find the support from the much smaller acute setting being far more conducive and far more discreet than that experienced by people within a large hospital environment. There will be far more opportunities to support a person with regards to their	
	Disability		
	Gender reassignment		
	Marriage and civil partnership		
	Pregnancy and maternity		
	Race		
	Religion or belief		
	Sex		

	Sexual orientation	preferred way of receiving such support, thus respecting and promoting a persons race, gender, disability and pregnancy related requirements
	Other (give detail)	
	Further information	
8	Does your proposal link with other proposals to have a cumulative effect on particular equality groups? If yes, give details.	(Delete one) Yes / No
	Longer- term aspirations and intentions to ensure that here is a place based approach across all localities with regards to integrated working practice and accommodation. This will in turn improve outcomes for local citizens of all ages and dependencies when requiring support from Walsall Healthcare Trust or Walsall Council. The Borough wide facility to support patients who have suffered a stroke and require time and an appropriate environment and proportionate resource to recover	
9	Which justifiable action does the evidence, engagement and consultation feedback suggest you take?	
	A	A change required as s a result of urgent needs around Stroke patients and creating capacity to treat people who present at the acute hospital settings ,increasing pressure as a result of COVID-19
	B	Adjustments needed to remove barriers or to better promote equality
	C	Continue despite possible adverse impact
	D	Stop and rethink your proposal

Action and monitoring plan				
Action Date	Action	Responsibility	Outcome Date	Outcome
11/6/20	Consider and accept the EQIA alongside the Cabinet report and associated documentation the	Jeanette Knapper		
	Once approved as	Asset team and Corporate		

	part of the cabinet decision in July/August cabinet the process and formal arrangements will be monitored as part of the contract	landlord and Walsall Together		

Update to EqIA	
Date	Detail

Use this section for updates following the commencement of your proposal.

Contact us

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Inside Walsall: [http://int.walsall.gov.uk/Service information/Equality and diversity](http://int.walsall.gov.uk/Service_information/Equality_and_diversity)