



The case for reablement – a framework to support authorities in developing business cases for reablement services

October 2009

Contents:

1	Introduction	1
2	Preparing to develop your business case for reablement.....	1
3	Business case elements	4
4	Access to the toolkit.....	6
5	Using the online impact and simulation tool for reablement services	6

Appendices:

Appendix 1: Options Appraisal Framework.....	i
Appendix 2: Risk management framework	iii
Appendix 3: Description of underlying model logic	iv
Appendix 4: Demographic assumptions for Welsh Local Authorities	viii

1 Introduction

This document is part of an integrated toolkit for the development of reablement services sponsored by the Social Services Improvement Agency (SSIA). Access to this toolkit has been made available to named individuals in each Authority across Wales (see section 3 for access details). The toolkit contains:

1. A baseline questionnaire with the ability to interrogate this by Authority or by question posed;
2. A self-assessment tool against a gold standard with the ability to prioritise development areas and plan for change;
3. A simulation tool designed to indicate the scale and impact of an optimised reablement service.

Much of the evidence for reablement is therefore reflected in the wider set of material available within this toolkit¹. This 'business case' framework complements these tools and assists in the preparation of a business case for the development of reablement services locally. It builds on the generic advice available from the Office for Government Commerce (OGC) which has provided a number of useful templates to support the development of a business case².

As well as being able to network across Wales to identify potential partners in learning, or good practice through the toolkit for reablement services, we have identified a number of English Authorities whose business cases for development have been made available online. These are produced using a variety of templates and consist of a number of formats including presentation material and Board reports. They may, however, provide useful ideas for people developing their own business cases. The Councils and the links are:

Wirral Borough Council

[www.ripfa.org.uk/learningevents/docs/rea/Anne%20Bailey%20presentation.ppt.](http://www.ripfa.org.uk/learningevents/docs/rea/Anne%20Bailey%20presentation.ppt;);

Essex County Council

www.essexcc.gov.uk/vip8/ecc/ECCWebsite/content/binaries/documents/Reablement_policy_Final.pdf;

Devon County Council

www.devon.gov.uk;

Halton and St Helens PCT

www.haltonandsthelenspct.nhs.uk/library/documents/caseforchangefinalfinalmay092.pdf;

Isle of Wight Council

www.iwight.com/council/what_is_a_council/images/Wightcaredevelopingare-ablementserviceforolderpeople.pdf.

2 Preparing to develop your business case for reablement

The purpose of a business case is to:

- Obtain agreement from decision makers of the rationale for the service;
- Provide a framework to plan the implementation of the service;
- Check implementation progress and continued viability.

¹ The primary source of evidence can be found at www.csip.org.uk/~csed/workstreams/homecare-reablement.html which provides information on the Care Services Efficiency Delivery unit's work with De Montfort University.

² http://www.ogc.gov.uk/delivery_lifecycle_business_case_management.asp
http://www.ogc.gov.uk/documentation_and_templates_business_case.asp
<http://www.ogc.gov.uk/documents/BusinessCaseTemplate-MinimalContent.pdf>
<http://www.ogc.gov.uk/documents/BusinessCaseTemplate-DetailedContent.doc.pdf>

The framework in the next section is designed to assist the development of a business case for Reablement Services and uses the following five areas (as typically used and as suggested by OGC):

- Strategy and objectives;
- Options appraisal;
- Commercial aspects;
- Affordability;
- Achievability.

Before developing the case for reablement it is expected that you will have made use of the wider toolkit and therefore be in a position to summarise the following key issues as a basis for developing a detailed case:

1. Describe the challenges your service faces and the ambition you have set yourselves.
2. Identify the development priorities that will require redesign, different ways of working or workforce development.
3. Identify the expected resource implications that will need to feature in your development plan.

You may want to summarise these below and on the following page.

Key challenges:

Development priorities:

Resources and impact:

3 Business case elements

A.Strategy and Objectives
General Business Case Requirements <i>What is the need for the service and how does it fit strategically, i.e. national policy, organisationally, locally? What will it achieve? Why now? What are the main benefits? How will you know when these have been achieved?</i>
Reablement Service Business Case Requirements Strategic fit Reference should be made to the wider social policy framework and to local policy and practise covering service standards and expectations. Reference should also be made to the potential impact and strategic benefit on the wider community. i.e. social inclusion, and community cohesion. Need Reference should be made to national, regional and local demography, where relevant, attention should be paid to the inclusion of age profiles and the population projections along other health related information. The baseline position with respect to existing reablement services and their local impact should also be included where relevant/available. The online toolkit provides access to a simulation tool that enables need and impact to be simulated. An approach to maximising the benefit to this element of the toolkit, and the preparatory local work that would need to be undertaken, is provided in Appendix 2 to this document.
B.Options Appraisal
General Business Case Requirements <i>A cost benefit analysis that is based on both financial and other benefits (soft benefits) and that has considered more than one solution or option, but that articulates a preferred option.</i>
Reablement Service Business Case Requirements If existing related services (typically Intermediate Care, Home care Services) are to be the basis for a revised or enhanced service development to achieve the objectives of a Reablement Service then the reasons for this option should be explained. More than one option should be described and appraised to authenticate the preferred option. The Reablement Simulation tool can also be used to model several permutations of service delivery focus, with the outputs being used to support the preferred option. Scaling the impact and requirements in relation to services already in place will need to be taken into account. Appendix 1 also provides a suggested approach to undertaking an options appraisal including simple templates that can be used or modified locally.

C.Commercial aspects (as relevant to local circumstances)
<p>General Business Case Requirements <i>This is necessary where the service procurement will be external or will have to comply with competition requirements. How will the service be sourced? How has this been decided? What is the basis for the commercial arrangements, i.e. contract terms and conditions? How will the service be procured? i.e. competitive arrangements.</i></p>
<p>Reablement Service Business Case Requirements</p> <p>The commissioning authority should state clearly its intentions for the future procurement of reablement services, including current arrangements and any transfer of existing service capacity, and if these are to be changed, the type of competitive process to be used, when and how this will take place, the decision making process, the duration, and other likely terms and conditions of contract.</p>

D.Affordability
<p>General Business Case Requirements <i>A statement of the funding arrangements available, including budgets, covering whole life costs, supplementary and other-costs.</i></p>
<p>Reablement Service Business Case Requirements</p> <p>The commissioning authority should set out the overall funding arrangements, stating if this is to be a joint or partnership arrangement between two or more agencies, along with the commitment agreed and the duration of each funding source. This should be in the context of any existing investment in the service.</p> <p>A detailed budget, showing each funding source with projections over at least the expected period of any contract to be offered. The budget should use familiar and consistent headings for each aspect of the budget including complete and accurate financial information.</p> <p>Initial work across the Welsh Authorities suggests significant differences and often complex and vulnerable funding sources for these services. Special attention should therefore be paid to this part of the business case to ensure there is a robust forward plan for sustaining the service.</p>

E.Achievability
<p>General Business Case Requirements <i>A plan that sets out how the service will be implemented to achieve the strategic objectives, i.e. a timetable with the key milestones, risks, dependencies, and contingencies identified.</i></p>
<p>Reablement Service Business Case Requirements</p> <p>If an existing related service is to be revised and enhanced to provide Reablement Services, then the plan should set out in detail how the progression is to take place, including the key risk areas being identified.</p> <p>If a new service is being commissioned the plan should set out the detailed timetable with key milestones, risk identification and management, dependencies on other services or decision making arrangements, contingencies to manage risks should also be clearly stated. A framework for risk management is provided in Appendix 2.</p>

4 Access to the toolkit

The 'home' page for the toolkit can be found at:

www.wspnetsims.com/reablement

Once at this site select you can choose your authority and use the authorised e-mail address to gain access. If you do not know what the authorised e-mail address is then contact either vicky.poole@wlga.gov.uk or jackie.glew@thewholesystem.co.uk.

To access the capacity model either:

1. Click on 'view online capacity and impact model' whilst on the home page of the toolkit, which will open a new window. You will then need to either register or log-in (if you have already registered). You can choose your own log in details for this site or log in as guestA, guestB or guestC (case sensitive) as the username and 'reablement' as the password. This will take you direct to the model launch icon.
2. You can go direct to the WSP online learning network site and register or log in at www.wspnetsims.com/sd_home.asp. You can again either choose your own log in details or use the 'guest' arrangements above. If you register yourself and enter this site you will need to navigate to the 'share' models page and select an 'online model' from the list on the right hand side. The appropriate model is entitled '[ssia reablement model Oct 09](#)'.

At the model launch icon there is also the facility to download presentation material and an electronic version of this document, as well as to make comment on the model as part of a discussion thread. Appendix 3 provides a detailed summary of the assumptions and logic underpinning a systems model that has been developed by a sub-group of the action and learning set.

5 Maximising benefit from using the online impact and simulation tool for reablement services

5.1 Approach

The simulation tool has been developed using a process of engagement with a small group within the Action and Learning Set. The process entailed:

1. Undertaking an initial analysis of available information or evidence of the impact of reablement services on needs, costs and service uptake to inform the process and identify/enable discussion of key questions.
2. Taking opportunities at either the wider Action and Learning Set gatherings or at specifically convened workshops to engage participants in a confirm and challenge process to:
 - a. Define the boundaries and key questions to be addressed and developing a map of the proposed model;
 - b. Validating a prototype model;
 - c. Testing a quantified simulation model to reflect current and alternative scenarios.
3. Developing the simulation modelling tool to analyse and communicate the key issues, including the analysis of alternative futures.

It is suggested that an engagement process is entered into with local partners to ensure the model purpose and structure is clear before using it to identify 'answers'. Local partners need to appreciate the potential, but also the limitations, of the model.

5.2 Understanding your existing reablement service

Where an Authority is looking to develop and potentially optimise its service having initiated a pilot or more targeted service model it will be important to scale this element of service to gauge the extent to which further benefit, and further investment, is required. Any existing service will also help in determining some of the key assumptions that you will use to populate the model, as described in section 5.3 below.

You should seek to identify as a minimum, where relevant, from your current service:

1. The 'activity' level, referrals per week (if necessary annual/52).
2. If possible referral sources to inform service redesign.
3. Outcomes for reablement clients in terms of completion of programme, levels of long term packages of home care etc.
4. Average hourly input for clients whilst in the programme and average periods of support.

5.3 Preparation for using the online tool

It is recommended that the following questions are researched and evidenced locally before using the online tool to inform the local case for service development. There will be a variety of approaches to this evidence gathering including data analysis, financial assessment and discussions with key stakeholders.

Local judgement should be used to determine when this information is in sufficiently robust form to enable the simulation to inform the case for development. It is expected that you will not be able to answer all the following questions to similar levels of precision but this should not deter you from using the tool, which allows you to explore the sensitivity of impact to different assumptions.

You will need to determine the extent of service development envisaged, i.e. are you moving from a targeted service being in place to a full intake model or are you starting from scratch? The simulation tool will indicate the likely impact, based on your local assumptions, for an optimised service so you will need to make a judgement about 'netting off' your current service baseline. For example, this might be done by making a judgement about levels of existing activity within reablement and comparing this with the outputs from the model.

Question:	Local response/analysis:
<p>Identify your >65 population which needs to be input to the demographics sector of the model.</p> <p>Growth in population: identify whether there is an expectation that this >65 population will increase at approximately the same rate as the whole of Wales or not (the model runs for 10yrs so estimating the extent of change over this period and comparing it with the Wales total will inform your modelling input)</p>	
<p>To what extent would you consider your geographic patch to be rural? The default in the model is 'non-rural', you can increase the 'rurality factor' in proportion to the added time you expect staff to need for travel purposes (a model input of 0.9 instead of 1.0 (default) would suggest 10% additional time requirement due to rurality) – this is expected be an estimate rather than a precise figure</p>	

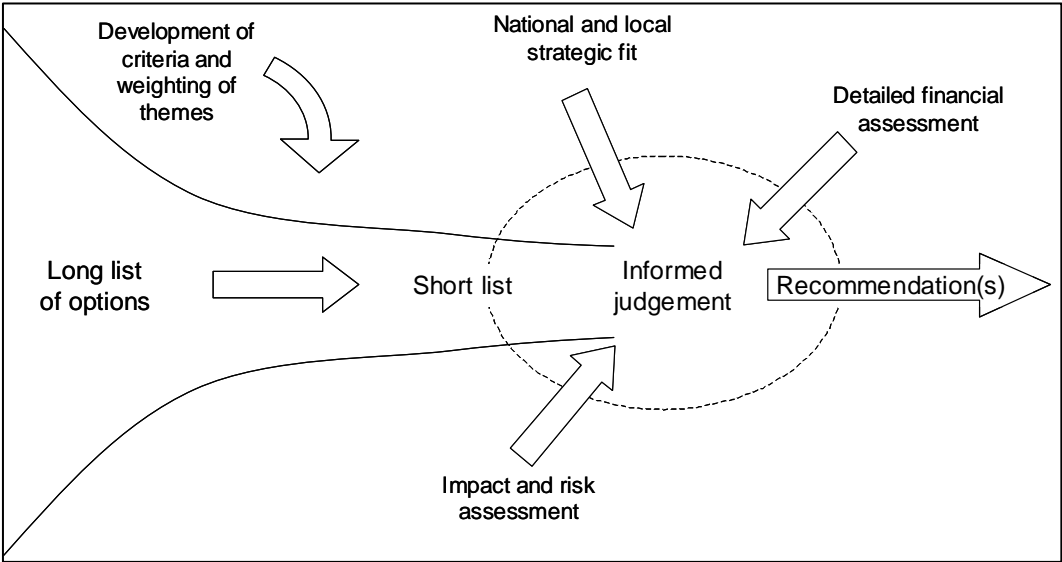
Question:	Local response/analysis:
<p>The interface with intermediate care is important as a source of referrals and to ensure continuity of homebodies pathway, particularly if leaving hospital with initial health/therapy needs:</p> <ol style="list-style-type: none"> 1. What is the current balance between step-up and step-down for the local intermediate care service? 2. For each element (step-up/step-down) what proportion of intermediate care clients would you expect to require an element of reablement (it is assumed that a higher proportion of step-down intermediate care clients would require reablement). 	
<p>Do you have local evidence or expectations that local experience will differ from the following research findings (CSED):</p> <ol style="list-style-type: none"> 1. 5% of clients will not be suitable for reablement. 2. 25% of clients entering reablement will not complete the episode of support. 3. 50% of clients completing reablement will require no ongoing support. 4. 30% will require a lower level of support. 5. 15% will require the same level of support. 6. 5% will require a higher level of support. 	
<p>Do you have local evidence or expectations that local experience will differ from these further research findings (CSED):</p> <ol style="list-style-type: none"> 1. That the average home care package without reablement for somebody entering the service for the first time is 7.5hrs pw approximately. 2. That people going on to require higher levels of support will, on average, receive 11.3hrs of home care pw approximately. 3. That people going on to require lower levels of support will, on average, receive 3.0hrs of home care pw approximately. 	
<p>What are your costs of homecare and assumed cost of reablement? Costs of homecare are normally expressed as an hourly rate and whilst reablement may be delivered differently it should be possible to translate costs per person or costs per week into an hourly rate taking account of skill mix, travel time etc</p>	
<p>What do you expect the average number of hours or reablement per week to be for each client?</p>	

Appendix 1: Options Appraisal Framework

1 Typical stages in an option appraisal process

1. Identify and define the scope of the services for which the appraisal will be undertaken.
2. Identify the 'long list' of potential models/options that could be used to deliver such a service.
3. Identify criteria to be used to reduce the long list to a short list & select 'viable' options for more detailed consideration – for example, would an option be broadly acceptable, affordable and deliverable in the timescales and local context anticipated?
4. Identify the 'domains' and the key questions in each domain that would be used to inform the judgement about the respective options & decide on the weighting to be applied across these domains/questions.
5. Score each short listed option against the questions (using a simple scale), asking the question "to what extent does option 'x' address/meet the question being posed".
6. Calculate an overall 'score' applying the weighting to each question answered and 'rank' these to reflect the strengths and weaknesses of each.
7. Judge each against the requirements of the overall project, and make recommendation(s) for wider consultation.

These stages will enable the local team to move from the long list to a small set of recommended options, evaluated in the context of key external and internal information, as shown below:



2 Template for options appraisal criteria

The following template can be used to develop criteria in line with step 4 of the process outlined above.

Domain	Domain weighting	Specific criteria	Criteria sub-weighting
A Effective delivery	40	1. Develop questions that will enable clear judgements to be made for all options, for example "To what extent does the option under consideration ensure" etc etc	
		2.	
		3.	
		4.	
		5.	
B Resilience/ sustainability	40	1.	
		2.	
		3.	
		4.	
		5.	
C Stakeholder relations	35	1.	
		2.	
		3.	
		4.	
		5.	
etc – identify further domains as necessary		1.	
		2.	
		3.	
		4.	
		5.	

3 Principles governing the process

- The process relies on there being agreement and understanding about what each option would look like, even if some of the detail may still need to be developed – but also allows for hybrid options to emerge, i.e. options are not set in stone;
- All possible options will be considered, but the process focuses in reasonably quickly on a small number to allow for more detailed consideration;
- Where detailed information is not available, pragmatic judgements about the likelihood of particular options addressing the requirements will need to be made. Sensitivity analysis can be carried out at later stages to incorporate this additional information;
- The process ensures that at all times there is a clear 'audit trail' of the decision making process, backed by evidence/judgement that is transparent.

Appendix 2: Risk management framework

Implementation of reablement services will need to be accompanied by a careful consideration of risks and management approaches to minimising these risks. The following template provides a basic structure for capturing these risks and monitoring and managing these risks during implementation.

No.	Risks Identified – What, To Who And How Affected	Risk Evaluation						Risk Management Plan (Changes In Bold & Italic)	Update on risk	
		Likelihood			Impact					Score
		1	2	3	1	2	3			

Using the above template identify risks that might, for example, be grouped as ‘strategic’ risks, operational risks, financial risks etc and set a timetable for the review of risks as a project is implemented, being ready to add or remove risks as they emerge or addressed.

The scoring of risks is typically done using this simple 3-level assessment where 1 = low and 3 = high. Multiplying the likelihood and impact scores to give a combined score will help prioritise these risks for management action.

Appendix 3: Technical reference section

1 Introduction

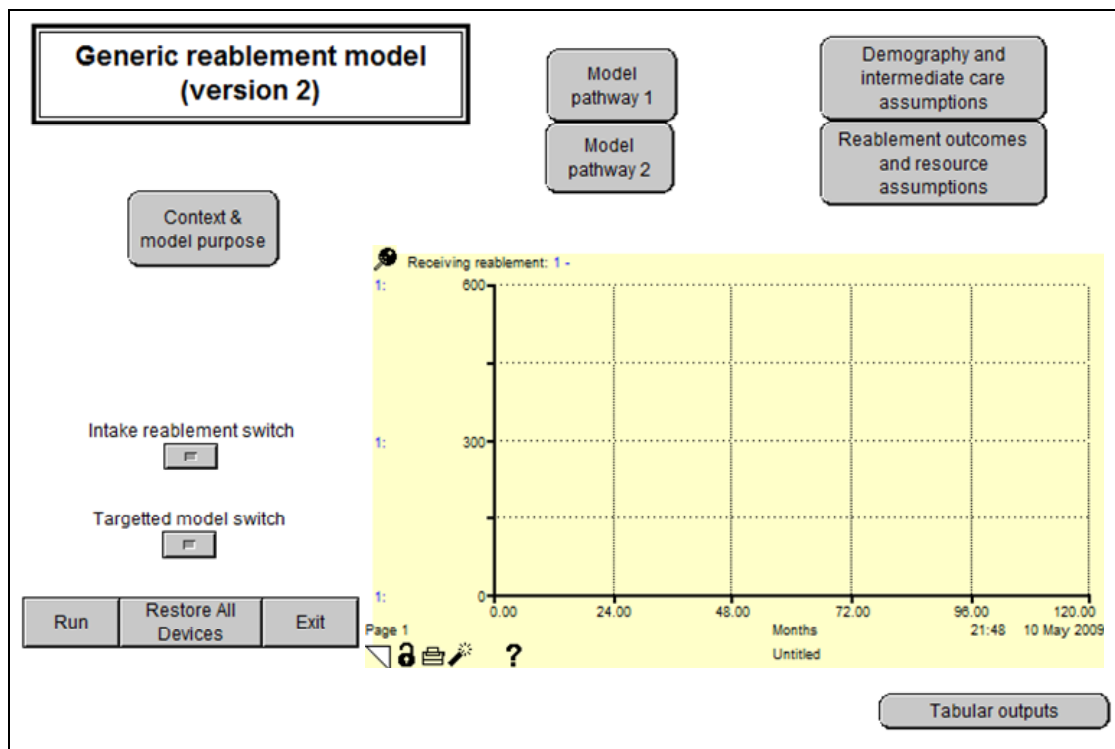
The online model is designed to maximise ease of use through the use of icons that explain or map out:

1. The purpose of the model;
2. The pathways within the model;
3. Switches that turn on policy options;
4. Navigation to further model assumptions.

This appendix maps out the purpose and function of these icons and the user interface in general.

2 User interface and default model assumptions

2.1 Home page



This interface contains the main output graph which has 6 pages which can be accessed by clicking the page-turn at the bottom left hand corner of the graph pad. The six outputs are:

- Page 1 Receiving Reablement
- Page 2 Change in annual equivalent cost
- Page 3 Change in total receiving home care
- Page 4 Additional people maintaining their independence at home
- Page 5 Number of people with telecare support at home

The graph outputs are shown as a comparative result (each shown as a different coloured line on the pad) for each Run operation of the model completed. Clicking the 'Restore all Devices' icon will clear the graph pad as well as Tabular outputs (separate icon) and changed assumptions or policy options.

Other icons on the home page are:

- The Context and model purpose icon has a brief description of the model purpose;
- The two model pathway icons allow the model user to navigate through the model in two parts;
- The intake and targeted model switches allow for alternative policies to be adopted with intake referring to all new cases being assessed for social care support being offered reablement and the targeted model being focused on hospital admission or avoidance and the interface with 'traditional' health/therapy led intermediate care services;
- Navigation icons to the two pages of assumptions (see below); and finally
- A navigation to tabular outputs that reflect the graph pad outputs.

2.2 Demography and intermediate care assumptions

Demographic assumptions and targeted referrals from Intermediate Care Home

Demographics

Population over 65: 0 to 50000 (20000)

Demographic change switch

Rurality factor: 0.80 to 1.00 (1.00)

Local demographic factor: 0.0 to 2.0 (1.0)

Intermediate Care activity and suitability for reablement

Percent of IC that are step down from hospital: 0 to 100 (50)

Percent of step down IC clients suitable for reablement: 0 to 100 (60)

Percent of step up IC clients suitable for reablement: 0 to 100 (60)

This page allows assumptions to be set as follows:

- The size of the local >65 population;
- Whether you want the model to reflect future changes in the number of >65 year olds;
- The 'Local demographic factor' which scales these changes in population in relation to the all-Wales average (see Appendix 4);
- A 'Rurality' factor which enables people to reduce the time availability for staff due to excess travel time;

- Assumptions about local Health/therapy led intermediate care services including the balance of 'step-up' to 'step-down' and the suitability of clients coming through this intermediate care pathway who could benefit from reablement services.

2.3 Reablement outcomes and resource assumptions

Reablement outcomes and resource assumptions

Home

Percent of people reabled to no support who need telecare: 50

Percent of intake clients not suitable for reablement: 5

Percent of people returning to services receiving reablement: 0

Outcomes following reablement

Percent to no support after reablement: 50

Percent to lower level support after reablement: 30

Percent to same level support after reablement: 15

Percent to high level support after reablement: 5

Allocated: 100
Unallocated: 0

Assumptions about home care input during and after reablement

Hours per wk reablement: 8

Hrly cost of reablement care: 14.0

Hours per wk higher support following reablement: 11.3

Hrs per wk initial support: 7.5

Hrs per wk lower level following reablement: 3.0

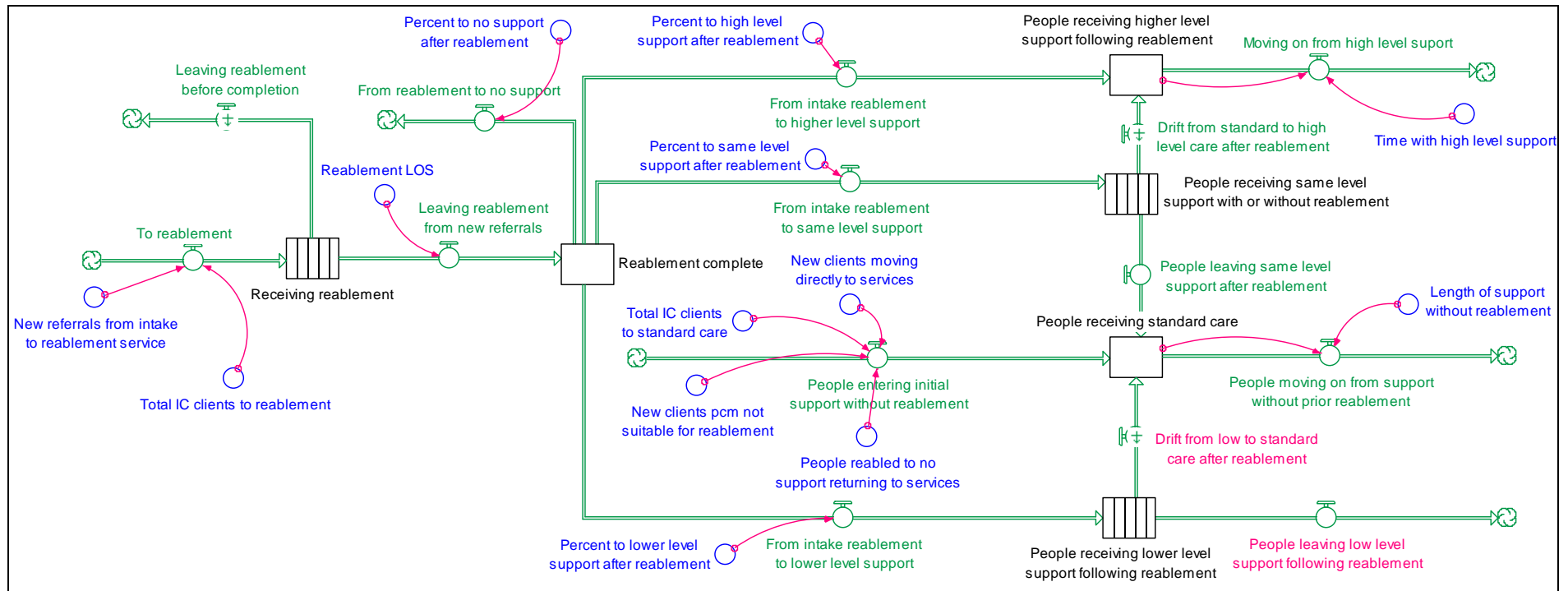
Hourly cost of care: 14.0

This page allows the model user to set the following assumptions:

- The proportion of people, following reablement, who would benefit from telecare – used as a proxy for ongoing preventative support;
- The percent of intake clients not suitable for reablement or refusing the service;
- The percent of people who are referred to reablement at the point of a planned or emergency review;
- Outcomes following reablement in terms of both proportions that go on to receive different levels of support and the average hours of support in each of these categories (all based on the English longitudinal study of reablement services);
- The average hours per week for a reablement input;
- The hourly cost of home care or of reablement.

3 Model structure

Represented below is the core model logic that underpins the scenarios, based on the assumptions outlined above (and as modified by the user). An explanation of this map can be viewed as part of the online model. In summary it represents a system where reablement capacity ('Receiving reablement') is determined by the simulated referrals from both the intake and intermediate care routes plus assumptions about length of stay in the reablement service (left hand side of the diagram). These pathways are 'switched on' by the model user on the interface as described above. Prior to the introduction of reablement the model flows people directly into 'people entering initial support without reablement' (the second flow from the bottom). The introduction of reablement 'redistributes' people across different levels of care, including people being re-enabled to no support. As a consequence, the distribution of need across the four stacked levels of need will shift and create the outcomes and potential benefits envisaged for reablement.



Appendix 4: Demographic assumptions for Welsh Local Authorities

The model accommodates changes in the >65 population between 2008 and the start of 2019. The table below is derived from data from www.statswales.wales.gov.uk and shows:

1. The starting population of >65 year olds in 2008 – column 2, in bold, is therefore a model input, the default being 25,000.
2. To simulate the impact of the expected rise in >65 year olds the demographic switch in the model has to be switched on – it then adopts the average increase in >65 population over the 10 years, i.e. 28% increase (bottom of column 5 below).
3. Each Authority, however, will experience different rates of increase (although all will indeed see a growth in the >65 population (columns 3 & 4). For example, Cardiff will see a 15% increase in >65s which is nearly half the average increase across the whole of Wales. For this reason an adjustment (column 7 below) is a required input to the model.

	>65 '08	>65 '19	Change	% change	Diff from Wales average	Model adjustment
Isle of Anglesey	14,319	18,676	4,357	30%	11%	1.11
Gwynedd	23,757	29,673	5,916	25%	-10%	0.90
Conwy	26,754	33,273	6,519	24%	-11%	0.89
Denbighshire	20,387	27,045	6,659	33%	19%	1.19
Flintshire	25,182	33,958	8,776	35%	27%	1.27
Wrexham	22,129	29,220	7,091	32%	16%	1.16
Powys	28,721	40,132	11,411	40%	44%	1.44
Ceredigion	15,679	21,300	5,621	36%	30%	1.30
Pembrokeshire	24,617	32,605	7,988	32%	18%	1.18
Carmarthenshire	36,602	48,576	11,974	33%	19%	1.19
Swansea	41,833	49,693	7,860	19%	-32%	0.68
Neath Port Talbot	25,589	32,295	6,706	26%	-5%	0.95
Bridgend	23,153	29,584	6,431	28%	1%	1.01
The Vale of Glamorgan	22,036	28,842	6,805	31%	12%	1.12
Cardiff	43,933	50,456	6,522	15%	-46%	0.54
Rhondda, Cynon, Taff	39,297	48,842	9,546	24%	-12%	0.88
Merthyr Tydfil	9,341	11,593	2,252	24%	-12%	0.88
Caerphilly	28,000	36,157	8,156	29%	6%	1.06
Blaenau Gwent	12,458	15,324	2,866	23%	-16%	0.84
Torfaen	16,447	20,862	4,415	27%	-2%	0.98
Monmouthshire	17,673	24,091	6,417	36%	32%	1.32
Newport	23,186	27,808	4,621	20%	-28%	0.72
Total:	541,096	690,005	148,910			
Average:	24,595			28%		1.00