

Reprovisioning of the Night Support Service – Frequently asked questions.

**Question:** What will the new dawn and twilight shifts involve for Home Care staff?

**Answer:** The dawn shift will operate between 6am to 12.00noon and the twilight shift 6pm to Midnight. These teams will provide continence support and personal care to individuals who would ordinarily have received overnight visits to support with continence needs. We believe this would offer increased flexibility to both Service Users and staff. If staff are working a twilight shift, they would not be asked to work a Dawn shift the next day, ensuring they get the correct rest between shifts.

**Question:** Will staff lose their jobs?

**Answer:** No. There are no plans to reduce staff through this proposal. All existing night support staff would be offered alternative posts in a care home (days and nights) and home care (days, including option of dawn/twilight) shifts, supported by HR colleagues. We believe this will increase staff capacity across the Health & Social Care System and help to alleviate pressures.

**Question:** How have Night Support staff been kept informed?

**Answer:** Staff engagement sessions, regular sessions with HR and senior management, one to one meetings along with Trade Union involvement are some of the ways staff have been kept informed.

**Question:** How many service users currently receive a Night Support Service?

**Answer:** There are currently 34 users of the Night Support Service across The Borders.

**Question:** What is the average length of a night support visit?

**Answer:** The average planned time of visits to clients receiving a service from the night support team at this time is 10 minutes.

**Question:** What happens when technology alternatives such as bed sensors or falls alarms are not a suitable option for a current Night Support Service User, will this person continue to receive a face to face visit?

**Answer:** Every Service User is assessed based on their individual needs and suitable options are discussed with the individual and/or their family. Anyone for whom technology alternatives such as bed sensors or falls alarms are not a suitable option would continue to receive a face to face visit.

**Question:** How will this impact individuals with palliative/end of life care needs?

**Answer:** The needs of Individuals with palliative/end of life care needs will not be compromised, and will continue to receive face to face support.

**Question:** What happens if someone falls in the night?

**Answer:** With the current service, a face to face visit is planned for a set time, the visit is carried out and if the service user has a fall outside the window of this visit, there is the possibility that the service user would be lying on the floor for several hours until the next carer visited. If a bed sensor or falls alarm were in place, staff would be alerted and respond within the hour.

**Question:** Who will answer any alarm activations?

**Answer:** Alarm activations will go the Alarm Receiving Centre and onwards to Rapid Response staff, unless families choose to make alternative arrangements.

**Question:** What will the new service look like?

**Answer:** If a service user is assessed as a suitable candidate for TEC, this will be discussed with the individual and their family. If TEC is used, it will be monitored by a Rapid Response team, who will be able to respond to any TEC activations. Family could also be alerted if this is the request of the service user and family. If the assessment demonstrates that the service user is not suitable for a TEC solution, a face to face visit will still be provided.

**Question:** Will face to face visits still be provided?

**Answer:** Yes, in certain instances where TEC solutions are not an option. This would include Palliative and End of Life Care.

**Question:** Where will Rapid Response staff be based?

**Answer:** Staff would be based in two locations in the Borders. These locations will be determined based on demand across the Borders. Alarm activations will be monitored on a weekly basis and relief staff deployed to support if required. During the six week pathfinder in Peebles there was one response required for a genuine alarm activation.

**Question:** How will we ensure the safety of our lone working staff?

**Answer:** Lone working staff will be equipped with mobile devices with the PROTECT app installed. This allows them to be located and call for urgent assistance if required. During the pathfinder in Peebles staff were also offered personal alarms.

**Question:** What steps have we taken to understand the impact of the proposal on individuals that currently use the service?

**Answer:** A consultation is underway and paper copies of the survey have been issued to all 34 service users. The results of the consultation will inform the Inequalities Impact Assessment (IIA). The IIA will outline the feedback submitted by service users, staff and members of the public. If, once reviewing the consultation feedback Council decide to continue, assessments will be undertaken with each service user individually and options discussed.

**Question:** How will Service Users requiring continence and skin care be supported?

**Answer:** Every Service User is assessed based on their individual needs. Dawn & twilight shifts will be introduced to provide support with continence needs, reducing the likelihood of any potential skin breakdown. Furthermore, service users identified with continence needs overnight, will have their continence needs reviewed to ensure appropriate aids are prescribed. Anyone whose needs cannot be met in this way, or through introduction of TEC would continue to receive this support face to face.

**Question:** Why is this change to the Night Support Service being proposed, is this about saving money?

**Answer:** This approach would align Scottish Borders Council with other Local Authorities such as East Lothian. Following a successful pathfinder in Peebles where Service Users reported they benefited from no staff disturbance through the night, Scottish Borders Council are proposing to decommission its Night Support Service and replace this with Assistive technology/TEC. This will include items such as alarms, movement sensors, bed sensors and door activation monitors. The pressure on care services

nationally is already taking its toll and it is likely to increase. Continuing with current models of delivery is not going to be sustainable. New approaches and service delivery models need to be found that will deliver more efficient and effective care, whilst maintaining safe and good quality services.