



Integration Joint Board

28th September 2017

This Report relates to
Item 10 on the Agenda

Progress Report on Reshaping Health and Social Care for Older Adults in Esk Valley

*(Paper presented by Gary Sheehan)
For Approval*

Approved for Submission by	Graham Abrines, General Manager Community Health and Social Care
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List of Background Papers	Health and Social Care Locality Plan for Annandale and Eskdale 2016-2019 Dumfries and Galloway Integration Joint Board Health and Social Care Strategic Plan 2016 -2019
Appendices	Reshaping Health and Social Care for Older Adults in Esk Valley (Appendix One)

SECTION 1: REPORT CONTENT

Title/Subject:	Progress Report on Reshaping Health and Social Care for Older Adults in Esk Valley
Meeting:	Integration Joint Board
Date:	28 th September 2017
Submitted By:	Gary Sheehan, Locality Manager Annandale and Eskdale
Action:	For Approval

1. Introduction

- 1.1 This Report provides an update to members on the progress made in reshaping health and social care for older adults in Esk Valley in response to the vision of services set out in Option 5 of the Esk Valley report

2. Recommendations

- 2.1 **The Integration Joint Board is asked to:**
- 2.2 **Note the progress made so far in responding to the vision of services set out in the Esk Valley report**
- 2.3 **Approve plans to proceed with further development work for the provision of a new Extra Care Scheme in Esk Valley**
- 2.4 **Note that plans to develop residential care provision for older adults in Esk Valley must be integrated into the wider development of service provision across Annandale and Eskdale to ensure that such services are robust, sustainable and meet the current and future needs of the wider community.**
- 2.5 **Note the potential to reduce the number of patients inappropriately placed in the 4 cottage hospitals across Annandale and Eskdale through the development of a new intermediate care service**

2.6 **Approve the commissioning of a progress report on the development of a new Extra Care Scheme In Esk Valley which will be submitted to the IJB in January 2018**

3. Background

3.1 In May 2016 the Esk Valley Project Team was commissioned to establish a robust evidence base to inform planning for meeting the needs of Older Adults in Esk Valley and identify a vision of how existing services could be reshaped and new models of support could be developed in the future. The Esk Valley report was submitted to the IJB in November 2016 and it proposed that a range of health and social care services be developed on a single site and that further work should be commissioned to develop a business case in respect of the proposal. This paper is to update IJB members on the current position and progress made.

4. Main Body of the Report

4.1 The Esk Valley Report proposed a single site approach for reshaping health and social care for Older Adults in Esk Valley which would include the provision of

- A bed based facility which could include residential and nursing care places
- Very Sheltered housing
- Communal areas (dining and sitting areas) to be shared by very sheltered housing tenants and care home residents
- Day Care in the communal areas for people with higher level needs
- Therapy area for use by all on site services and a base for some out-reach services
- New Health Centre

4.2 Before deciding on a single site approach, work has commenced on looking at each of the individual proposals to test out the feasibility of developing all these services on one site

Residential Care

4.3 The Esk Valley report proposed the development of a new bed based facility which could include up to 26 residential and nursing care beds in Esk Valley. Based on national care home rates (£574.42 per week for residential care and £667.09 per week for nursing home care) the overall additional cost of such a service would be between £778,707 and £904,338 per annum. In August 2016, there were 26 adults who originated from Esk Valley resident in 8 care homes outside of Esk Valley. Over the last 12 months, 10 service users from Langholm and 3 from Canonbie have been placed in residential care homes across Annandale and Eskdale. Whilst residential care is the appropriate choice for many older people, the lack of alternative supported housing services, such as Extra Care, does influence the number of residential care admissions. Currently there are no Extra Care housing services in Esk Valley

- 4.4 Dumfries and Galloway has had some success in shifting the balance of care for older people from care homes to supporting people to remain living at home. The number of older people in Dumfries and Galloway living in care homes has remained static for the last 10 years at around 1000 residents, while numbers of people age 65 years and over have increased by over 20%.
- 4.5 The availability of care home places varies significantly across each of the 4 localities within Dumfries and Galloway. Although there is no care home in Esk Valley, Annandale and Eskdale does have 31.1 care home beds per 1,000 population of people aged 65+ which is more than Nithsdale (27) and Wigtownshire (24.5) but less than Stewartry (41.9).
- 4.6 The number of care homes across Dumfries and Galloway has decreased from 37 to 30 over the last 10 years. Although Dumfries and Galloway does have a range of smaller independent homes, market intelligence from some providers state that they would only be able to achieve financing of new developments on homes of around 60 beds. A number of local homes are exploring plans to increase their size to help deliver economies of scale and this includes homes in Annandale and Eskdale.
- 4.7 If a new residential care home was to be developed in Esk Valley, current evidence suggests for it to be financially sustainable it would need to be of size (50+ beds) that would result in overprovision in meeting the needs of local people, would place further financial pressure on the social care budget and would restrict capacity to develop a new Extra care service which would enable more people to remain living within their own home. Rather than develop a new residential care service in Esk Valley, it is felt that the needs of the relatively small number of people in Esk valley who require residential care could be better met by a more locality wide approach which explores the potential of existing care home providers across Annandale and Eskdale to meet this level of need. Market intelligence suggests that new care homes are usually developed with 50+ beds to help deliver financial sustainability and this, coupled with long term difficulties in recruiting care staff in the more rural areas present a further challenge in any considerations about the appropriateness of developing a new care home in Esk Valley. In summary, current market intelligence suggests that it would not be appropriate to commission a new 26 bed residential care service in Langholm.

Extra Care

- 4.8 The Esk Valley report identified very sheltered housing (also known as Extra Care Housing) as a suitable model enabling older people to remain in their communities whilst providing them with the care they need. This would be permanent accommodation designed and fitted out with equipment, aids and adaptations and technology which along with increased care and support, offers a housing based service as an alternative to the more traditional residential care model. The greater majority of the care is provided by support staff who involve health professionals when required. Primarily, this would be for older adults who would move from their current accommodation and for the first time would offer them choice between a residential care service or an Extra Care service. In exceptional circumstances a younger adult with increased care needs may be considered as a suitable tenant.

Currently there is no Extra Care service in Esk Valley or indeed across Annandale and Eskdale.

- 4.9 Dumfries and Galloway Council's current Strategic Housing Investment Programme (SHIP) has identified 10 units of Extra Care housing to be built by Loreburn Housing Association. Work has already started on developing a business case for the "Care" elements of the proposed development but indicates financial viability requires increased number of units to deliver more economies of scale. Market intelligence on the development of Extra Care Housing in England and other parts of Scotland indicate that new Extra Care schemes usually have minimum units of 15\20 to make them sustainable. Following ongoing discussions held with Loreburn Housing Association, further work is taking place to explore the development of a larger Extra care development in Esk Valley which would need to be included in the Strategic Housing Investment programme. As set out in the Esk Valley report and subsequent discussions with Loreburn, social work colleagues and the wider community, it is evident there is a demand and wide support for a larger Extra Care Housing development in Esk Valley. Consequently further work and discussions will be held to help develop a business case for a larger Extra care scheme. It is anticipated that development work on the new Extra Care Housing scheme could commence in 2018\19.

Community Hospital

- 4.10 Thomas Hope Hospital in Langholm provides 12 in patient beds. Bed occupancy rates varies during the course of the year. Over the last 3 years bed occupancy rates have been 72% in 2015/16, 85% in 2016/17 and during the current financial year 2017\18 the bed occupancy rate has been 87%.
- 4.11 In September 2016 day of care surveys were carried out in 9 community hospitals across Dumfries and Galloway. The surveys identified that 51.5% of the 134 patients in the community hospitals did not meet the criteria for requiring admission into the hospital, including 60% of the patients in Thomas Hope Hospital in Langholm. In August 2017 another day of care survey was carried out across the 4 community hospitals across Annandale and Eskdale and identified that 36% of the patients did not meet the criteria, including 40% of the patients in Thomas Hope Hospital. There are 56 community hospital beds across Annandale and Eskdale and the latest day of care survey suggest that 20 of the beds are occupied by patients who do not meet the criteria for treatment within a community hospital. Excluding building maintenance, the current bed cost for Thomas Hope Hospital is £1,346 per week which compares to the national care home bed rate of £574.42 per week and the nursing home care rate of £667.09.
- 4.12 Step up step down service – the day of care surveys indicate that a number of patients within our community hospitals would benefit from more intermediate support to help reduce the need for admission into hospital or support them as part of the discharge process to enable them to return home with support in the community. As well as providing a traditional community hospital service, it appears that Thomas Hope and other community hospitals across Annandale and Eskdale are having to bridge a gap in the current provision of intermediate care. Subject to further intelligence gathering and a planned community engagement and consultation project in Moffat and Beatock, one option moving forward is to

commission up to 20 intermediate care beds across Annandale and Eskdale, including Langholm and Moffat, which would reduce the current reliance on this gap being bridged by the 4 community hospitals.

Health and Wellbeing Centre

- 4.13 The Esk Valley report proposed that ideally a range of community based health and social care support services (day care, therapy area, communal dining, Primary Care One Team) should be co-located on the site of a new bed based facility in Langholm. Current discussions with regard to the development of a new Extra Care project in Langholm are being guided by the vision of services set out in the Esk Valley report and will seek to develop a range of Health and Well Being services to support the proposed new development.

5. Conclusions

- 5.1 The Esk Valley report set out a vision of how health and social care for Older Adults could be reshaped. Subsequent business intelligence gathering supports the potential development of a new Extra Care Housing scheme in Esk Valley which would be developed in partnership with a housing provider through the Strategic Housing Investment Programme. The new Extra Care scheme, which could be described as a care village, would provide enhanced, long term support and accommodation for Older Adults, and potentially younger adults, and would extend the range of support options for people in Esk Valley. Developing a new Extra scheme would enable more people to remain living in their own homes and would prove a solid foundation for the provision of care at home services across Esk Valley.
- 5.2 Although the provision of a new Extra Care service in Esk Valley should help reduce the demand for more residential care provision, it is acknowledged that residential care is a suitable option for some Older Adults. However current business intelligence suggests that developing a new 26 bed residential care service in Esk Valley would not be sustainable and that a larger residential care development could lead to over provision in meeting the needs of Older adults in Esk Valley. Rather than look at the provision of residential care services exclusively in Esk Valley, market intelligence suggests that a more locality wide approach should be developed to explore the potential for existing care home providers across Annandale and Eskdale to meet the needs of people in Esk Valley who require a residential care service.
- 5.3 Thomas Hope Hospital continues to provide a valuable service for Older Adults in Esk Valley. However Day of Care surveys have consistently shown that more than 30% of the patients in Thomas Hope and all 4 community hospitals across Annandale and Eskdale do not meet the criteria for admission. The development of a new Extra Care scheme in Esk Valley, and potentially in other parts of Annandale and Eskdale, and the development of new intermediate care services should reduce the number of patients who do not meet the criteria for admission into a community hospital

SECTION 2: COMPLIANCE WITH GOVERNANCE STANDARDS

6. Resource Implications

- 6.1. Capital Funding for the proposed new Extra Care Scheme would be delivered through the Strategic Housing Investment Programme. Subject to approval of IJB, a business case for the development of the Extra Care Scheme will be prepared by January 2018

7. Impact on Integration Joint Board Outcomes, Priorities and Policy

- 7.1. The recommendations within this report are consistent with the commitments set out in the Health and Social Care Locality Plan for Annandale and Eskdale 2016-2019 and Dumfries and Galloway's Health and Social Care Strategic Plan 2016-2019. The report also contributes to the delivery of a number of the national health and well-being outcomes, namely that 1) Resources are used effectively and efficiently in the provision of health and social care services 2) People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community and 3) Health and social care services contribute to reducing health inequalities

8. Legal & Risk Implications

- 8.1. There are no legal or risk implications arising from this report

9. Consultation

- 9.1. Esk Valley Reference Group
- 9.2. Health and Social Care Senior Management Team

10. Equality and Human Rights Impact Assessment

- 10.1. Subject to approval of the IJB, an Impact Assessment will be carried out as part of proposals to develop new Extra Care Service

11. Glossary

- 11.1. IJB Integration Joint Board