

REPORT

Bed base review update

Edinburgh Integration Joint Board

13 June 2023

Executive Summary

The purpose of this report is to provide the Edinburgh Integration Joint Board with an update on the status of the bed-based review and to request approval to undertake a strategic commissioning exercise on older people's bed-based services. A separate briefing paper, will be circulated to members addressing the decisions and actions that have led to this point.

Recommendations

It is recommended that the Edinburgh Integration Joint Board:

- a) approve the request to undertake a strategic commissioning exercise on older people's bed-based services to validate work completed to date and to expand the scope to all older people's bed requirements;
- b) consider the governance arrangements for the oversight group; and
- agree to pause the proposed consultation until the strategic commissioning exercise is completed and agree at that point the purpose of any consultation.

Directions

Direction to City of	No Direction required	
Edinburgh	Issue a direction to City of Edinburgh Council	
Council, NHS Lothian or	Issue a direction to NHS Lothian	
both organisations	Issue a direction to City of Edinburgh Council & NHS Lothian	✓

Report Circulation

1. This report has not been to any other committee prior to submission to the Edinburgh Integration Joint Board (EIJB) although elements have been reflected in the paper which will be presented to the Council's Finances and Resources Committee on 20th June 2023.



Main Report

Background

- 2. The bed-based review (BBR) has faced a significant challenge in implementing the agreed redesign identified in the bed-based care strategy. A key element of the BBR was to establish a 60 bed hospital based complex clinical care (HBCCC) unit in the previous Drumbrae care home. In summer 2022, due diligence identified that Drumbrae was not compliant for the delivery of clinical services, in part due to updated fire safety regulations particularly in relation to evacuation procedures. The adaptations required to make Drumbrae fully compliant with healthcare standards have significantly increased and are estimated to cost £10m with a 24-month schedule for work to be completed. Discussions have continued with all partners to try to get a resolution to the issues faced with the transition throughout 2022 to present but no agreed way forward has been identified at this stage.
- 3. A number of issues have emerged since the strategy was approved in 2021 which need consideration. The IJB is already experiencing a change in demographics and many people presenting to bed-based services are older, frailer and with more co-morbidity. There is also an increase in the number of people with dementia adding to the complexity of need. The impact of the pandemic is also emerging. People have increased vulnerability to frailty through deconditioning and isolation. More people are presenting later resulting in them being more acutely unwell with more complex conditions. The perception of hospital versus care home has also shifted, with people perceiving care homes to be unsafe and hospitals to be much safer environments to receive care and support.
- 4. The whole system remains under severe and sustained pressure. There is a lack of community care capacity to meet demand, primary care services are under enormous pressure, the unscheduled care system is extremely stressed, there are increasingly long waiting lists for scheduled care, people are in hospital who do not need to be there and there are extensive delayed discharges across acute and community hospital settings. All these factors need to be considered when designing a sustainable bed base for Edinburgh.
- 5. Considerable time has passed since the IJB set the direction to redesign bed-based services as identified in the BBR. The emerging issues outlined above need incorporated into projections to validate that the identified bed base will meet future demand.



- 6. The BBR focused on those beds which supported flow from acute hospital settings into the community (intermediate care, HBCCC and care homes). By limiting the scope in this way means we do not have system wide oversight of the bed requirements needed to meet current and future demand. It is therefore, recommended that a strategic commissioning exercise is undertaken to identify all the bed requirements for older people across hospital and community settings. This would be underpinned by a full system wide pathway review to fully assess the beds required to support people from hospital into the community and home.
- 7. This exercise would be conducted by external consultants to provide assurance to members and affected services that the outcomes of the exercise have been identified by an independent organisation with expertise in commissioning. An initial assessment would be completed within 3 months and a final report by the end of the calendar year with an implementation plan and associated timescales for delivery.
- 8. The intended scope of the commissioning exercise would cover validation of the work completed to date, expanding the bed modelling to all older people's bed-based services in both hospital and community settings and incorporate the assumptions based on the emerging trends outlined above. This approach is supported by both corporate management and leadership teams in NHS Lothian and the City of Edinburgh Council as well as the service areas prioritised in the BBR. Senior clinical teams have requested that this exercise is completed before any reconfiguration of existing beds is undertaken.
- 9. If the strategic commissioning exercise is approved, a public consultation will be required on the proposals based on the findings. As care home provision will be included in the scope of the exercise, there appears to be limited point in continuing with the planned, separate consultation on care homes. By separating these two pieces of work there is a risk of duplication and misalignment. Combining these will ensure robust engagement will take place with the citizens of Edinburgh on the strategic redesign of older people's bed-based services. It is therefore recommended that the planned public consultation is aligned to the findings of the strategic commissioning exercise (should it be approved).
- 10. All relevant organisations and stakeholders will have the opportunity to input into both the commissioning exercise and the consultation activity, relevant governance arrangements will be established to ensure robust engagement with all stakeholders throughout the process. It is proposed that an implementation group is established to oversee this work, reporting



- back to the IJB. The board is asked to consider if this should be chaired by an IJB member to formalise the relationship between the group and the IJB.
- 11. It is proposed that Drumbrae remains unoccupied during this exercise until the findings of the exercise are available. As there are limited facilities in Edinburgh to accommodate bedbased services, and it is unlikely that a suitable alternative for HBCC services would be available in similar timescales. Utilising the facility on an interim basis could lead to challenges if and when the facility is required to be returned for health and social care purposes.
- 12. It is acknowledged that the facility remaining unoccupied during this time poses an ongoing business and reputational risk, particularly when the system is under sustained pressure. As the building owners, the final decision on the future use of Drumbrae sits with the Council. This decision would be informed by the views of its partners in the IJB and NHS Lothian. A report which shares the recommendations of this paper will be submitted to the Council's Finance and Resources Committee and the Council for consideration on 20th June and 22nd June respectively. This paper also presents options for alternative use for consideration.

Implications for Edinburgh Integration Joint Board

Financial

13. The strategic commissioning review is estimated to cost £120k and anticipated to take 6 months to complete.

Legal/risk implications

14. Due to the reputational damage caused by the non-delivery of the redesign identified in the bed-based care strategy, the lack of confidence in the projected bed numbers and the challenges faced by the project on the transition of Drumbrae, it would be a greater risk to proceed regardless. This exercise would provide assurance that the projected bed numbers were accurate and reflective to meet existing and future demand.

Equality and integrated impact assessment

15. An IIA has not been completed on the proposed strategic commissioning exercise but IIAs would be completed on the findings of the exercise and any subsequent redesign proposals.



Environment and sustainability impacts

16. These would be identified through any subsequent proposals developed following the findings of the strategic commissioning exercise.

Quality of care

17. The ultimate objective of any bed-based redesign is to ensure bed-based services are able to meet current and future demand and can deliver quality care to our citizens both in hospital and community settings.

Consultation

18. As outlined above, it is recommended the consultation activity is aligned to the findings of the strategic commissioning exercise to provide assurance that the public will be fully consulted on the redesign of older people's bed-based services.

Report Author

Mike Massaro-Mallinson

Head of Service - Operations, Edinburgh Health and Social Care Partnership

Contact for further information:

Name: Hazel Stewart, Programme Manager Email: Hazel.Stewart@edinburgh.gov.uk

Background Reports

Bed Based Care Strategy – Phase 1, presented to the Edinburgh Integration Joint Board on 22nd June 2021, Item 7.1 can be accessed <u>here</u>.

Report to Edinburgh Integration Joint Board on 28th September 2021, Item 4.1 can be accessed here.



The report to the Finance and Resources Committee agreeing the lease arrangements for Drumbrae on 16th June 2022, Item 8.1 can be accessed <u>here</u>

A progress report presented to the Council on 9th February 2023, item 7.8 can be accessed <u>here</u>, this was also presented to the EIJB as an additional item at their meeting on 28th February 2023.

A progress report presented to the Governance, Risk and Best Value committee on 14th March 2023, item 8.15 can be accessed here

A status report presented to the Council on 16th March 2023 can be accessed here

Appendices

Appendix 1 Direction to the City of Edinburgh Council and NHS Lothian

DIRECTION FROM THE EDINBURGH INTEGRATION JOINT BOARD (EIJB)

Partner agencies are required to carry out this direction in accordance with statutory and regulatory obligations, ensuring adherence to relevant guidance, policies and procedures, in pursuit of the EIJB's strategic objectives.

Reference number	EIJB-13/06/2023-xxx				
Does this direction supersede, vary or revoke an existing direction? If yes, please provide reference number of existing direction	Yes EIJB-22/06/21-1				
Approval date	13/06/2023				
Services / functions covered	Older people's bed-based services.				
Full text of direction	 a. Commission a strategic commissioning exercise on older people's bed-based services by appointing an external independent commissioner. b. Stop all consultation activity pending the findings of the strategic commissioning exercise. 				
Direction to	NHS Lothian and The City of Edinburgh Council				
Link to relevant EIJB report / reports	Bed Based Care Strategy – Phase 1, presented to the Edinburgh Integration Joint Board on 22 nd June 2021, Item 7.1 can be accessed here . Report to Edinburgh Integration Joint Board on 28 th September 2021, Item 4.1 can be accessed here .				
Budget / finances allocated to carry out the direction.	State the financial resources allocated to enable NHS Lothian or the Council or both to implement the direction.	NHS Lothian	City of Edinburgh Council		

	Year one funding (delete if not year one) and specify financial year eg 2022/23	£120k in total, allocation to partners will be based on procurement approach	
	Recurring funding	n/a	n/a
Performance measures	DCAQ analysis of all older people's bed-based services. Modelling and projections to meet existing and future demand. Occupancy rates across all older people's bed-based services.		
Date direction will be reviewed	January 2024		