

Policy and Sustainability Committee

10:00am, Tuesday, 12 March 2024

An Older People's Pathway

Executive/routine
Wards

1. Recommendations

It is recommended that the Policy and Sustainability Committee:

- 1.1 Note the contents of this reports and that the EIJB agreed the following recommendations at its meeting on the 9 February:
 - 1.1.1 A costed proposal to open 40 – 50 new nursing and dementia care home beds in 2024 that will support people who would otherwise use hospital-based complex care.
 - 1.1.2 A feasibility study to reopen Drumbrae as a care facility to relieve pressure on the wider care home system.
 - 1.1.3 An independent study of the cost of intensive care home services.
 - 1.1.4 A service specification and framework of prices, terms and conditions for specialist and intensive care services.
 - 1.1.5 A business case for a an enhanced 'Care Bookings' care home brokerage team, to centralise purchasing of care home services.

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An Older People's Pathway

2. Executive Summary

- 2.1 The Older People's Pathway is a commissioning programme (the programme) for community hospitals and care homes in Edinburgh. It comprehends services for some people still of working age who live with conditions more common to old age, early onset dementia among them. It comprehends all the City's homes, including City of Edinburgh Council (the Council) homes and independent homes.
- 2.2 The programme seeks to:
- 2.2.1 create new care home capacity to support reconfiguration of hospital services.
 - 2.2.2 increase the supply of specialist, dementia and nursing beds and slow recent, rapid inflation in care home fees.
 - 2.2.3 centralise the Edinburgh Health and Social Care Partnership's (the Partnership) care home purchasing process.
 - 2.2.4 forecast residents' needs for care homes into the next decade.
 - 2.2.5 define longer-term options for alternatives to care homes, including specialist housing-with-support.

3. Background

- 3.1 The Older People's Pathway is a strategic commissioning exercise and the next stage in the Bed-based Review, which concluded in June 2023.
- 3.2 The Programme is the consequence of a Direction of the Edinburgh Integration Joint Board (EIJB) in June 2023 that the Partnership conduct 'a strategic commissioning exercise on older people's bed-based services by appointing an external independent commissioner.' (EIJB, 27 June 2023, item 7.3)
- 3.3 The Programme's initial findings were presented to the EIJB at its February meeting (item 6.1). The report is attached and can be found from a hyperlink in Section 10, the appendices. The EIJB discussion can be viewed from a hyperlink in Section 9.

4. Main report

- 4.1 The Older People's Pathway is a programme to reconfigure Edinburgh's community hospitals and commission care home services to meet residents' needs for affordable care home services in the medium and long term. It is also a savings programme in the Partnership's forthcoming medium-term financial strategy.
- 4.2 By comparison, Edinburgh has more hospital-based complex continuing clinical care beds (HBCCC) and fewer care home beds than similar places.
- 4.3 The scarcity of high-intensity care home services helps to explain the need for more HBCCC beds than its comparators. Scarcity also explains why people sometimes wait too long to leave the City's acute hospitals; significant spending on the most intensive care at home services; and recent inflation in care home fees.
- 4.4 NHS Lothian plans to close Liberton hospital this year. The Council has purchased the site for redevelopment. The hospital does not operate HBCCC but it does operate intermediate care (ICF) beds and day-patient services. The City needs all the ICF beds at Liberton and its day hospital. They will move to other locations in the City.
- 4.5 Maintaining services at Liberton therefore requires some reconfiguration at three community hospitals. Day patient services will move to the Astley Ainslie hospital. Intermediate care will replace some complex clinical care (HBCCC) services. By the end of the year, there will be fifty fewer HBCCC beds for older people in consequence. The programme must therefore find alternative services to support some people who use HBCCC in the current hospital configuration.
- 4.6 The Programme found that some people in Edinburgh's HBCCC can live safely and comfortably in care homes for people who need nursing and dementia care. We know that these kinds of care home service are scarce. This scarcity helps to explain the City's comparatively high use of HBCCC (3.6 above). The Programme therefore plans to commission care home services for about fifty people who would currently live in HBCCC.
- 4.7 The Council operates nine homes with a maximum capacity of 446 residents. Of those, its newer, larger homes have about fifty registered beds that are not operational but can supply more high-intensity care, with investment in refurbishment and staff. They are mostly in the Council's Castle Green and North Merchiston care homes. The Programme is designing a clinical and care model for those beds with senior clinicians. It is estimating the cost to operate that model and so provide new capacity. The estimates are nearing completion.
- 4.8 Increasing the supply of Council care home beds as alternatives to HBCCC beds does not improve underlying shortage of dementia and nursing care beds. The additional high-intensity beds will meet demand that is currently met in HBCCC wards. They will not increase supply for people whose needs do not require HBCCC but still require nursing or dementia care, or both. Reopening the

Council's Drumbrae care home can relieve that shortage more quickly than commissioning services from the independent sector, with remedial work and investment in staff.

- 4.9 Drumbrae is among the Council's newest care homes. It is no longer registered to provide care of any kind. Its peers, including Castle Green and North Merchiston, now provide nursing and dementia care. With investment, it could provide varying types and intensities of care, from standard residential care to sub-acute hospital care. What it provides should be determined by estimates of the City's most pressing care-needs until the end of this decade; the Partnership's strategic plan to operate care services; and the capital and revenue cost of operating those services in Drumbrae compared with independent provision. The feasibility study will determine answers to these questions, and report to the Board with options.
- 4.10 Fully optimised, Council homes supply 15% of the City's capacity. They supply about a third of the beds that the Partnership uses. The rest are operated by independent providers of varying size and whose motives for running care homes differ. They have in common a desire for clarity about the City's need for care and the Partnership's plans to buy it now and in the long term. They would like terms and conditions that will sustain their services; and predictable referrals that accurately describe the needs and circumstances of those we that help them admit people safely. Clarity will help the City secure affordable, appropriate care. A new Framework, based on an independent care-costing exercise and developed in collaboration with providers, will help create confidence to invest in quality, affordable services that will answer the City's needs into the next decade.

5. Next Steps

- 5.1 On 09 February 2024, the EIJB accepted the Programme's initial recommendations, which are also itemised in the first section of this report.
- 5.2 The Board also asked that the Programme:
- 5.2.1 produce a detailed explanation of the plans for, and risks due to, reconfiguration of intermediate care and hospital-based complex clinical care due to Liberton.
- 5.2.2 be extended by six months to act on the initial recommendation.
- 5.3 The Programme has so far focussed on concluding the work of the Bed-Based Review and has been preoccupied with intensive support for people whose needs are acute and complex.
- 5.4 It will now move to a wider needs-assessment for care homes in general, to include residential care for people with less acute and complex care needs. This stage should also consider the need for alternatives to care homes, including specialist housing and "Extracare" for those whose own homes make personal care troublesome but prefer not to move to a care home. The site at Liberton, for example, presents an opportunity for developments of this kind.

6. Financial impact

- 6.1 The Programme as a whole is expected to find savings of £2.5m in each of the next two years, which will be realised through a range of activities to improve supply, pathways and purchasing.
- 6.2 The introduction of a nursing model of care into the larger care homes managed by the Partnership is funded by the redesign of HBCCC and Intermediate Care.
- 6.3 Financial modelling is underway to assure the affordability of the current nursing model, against a newly developed model that could see the available capacity at both Castlegreen and North Merchiston brought into operation.
- 6.4 February's IJB agreed a recommendation to undertake a costed proposal to open 40 – 50 new nursing and dementia care home beds in 2024 that will support people who would otherwise use HBCCC, and so allow the closure of Liberton hospital.
- 6.5 These beds will be located in Castlegreen and North Merchiston. Each operates fewer than forty beds since the Council resumed control from an independent operator in August 2023. Each has maximum capacity of sixty residents. A full cost-model for this additional capacity, some of which will be of higher-intensity care than the Council currently provides, is nearing completion.
- 6.6 The costs include some capital works. These works upgrade bathrooms and repair some internal water damage. We estimate the remedial work and upgrades will cost £0.200M and take between three and five months from inception. These works are better performed before the homes take many more residents and should commence as soon as funding is agreed.

7. Equality and Poverty Impact

- 7.1 A high-level Integrated Impact Assessment relating specifically to the Programme's savings plans was conducted on 29 February 2024.
- 7.2 Impact Assessments for the programmes remaining objectives will be planned at the appropriate time.

8. Climate and Nature Emergency Implications

- 8.1 As a public body, the Council has statutory duties relating to climate emissions and biodiversity. The Council
“must, in exercising its functions, act in the way best calculated to contribute to the delivery of emissions reduction targets”
(Climate Change (Emissions Reductions Targets) (Scotland) Act 2019), and
“in exercising any functions, to further the conservation of biodiversity so far as it is consistent with the proper exercise of those functions”

(Nature Conservation (Scotland) Act 2004)

The City of Edinburgh Council declared a Climate Emergency in 2019 and committed to work towards a target of net zero emissions by 2030 for both city and corporate emissions and embedded this as a core priority of the Council Business Plan 2023-27. The Council also declared a Nature Emergency in 2023.

Environmental Impacts

- 8.2 There are so far no identified climate or nature emergency implications relating to these proposals. The integrated impact assessment will identify any climate and nature-emergency implications relating to these proposals.

9. Risk, policy, compliance, governance and community impact

- 9.1 There so far has been no formal consultation on the Programme's findings since it began in September 2023. There has however, been engagement with stakeholders in a development session including members of the EIJB, Scottish Care and Edinburgh Voluntary Organisations' Council among others. The programme routinely visits care homes, Council and independent sector to hear from staff, residents and management.
- 9.2 February's report to IJB made limited reference to the role of Liberton in the commissioning plans, while staff at Liberton were informed about plans to close it. Engagement sessions with staff about the future of the hospital concluded on 23 February. To avoid doubt, these sessions were not a legal consultation, which is not required.
- 9.3 With staff informed about the future of Liberton, the Programme may share its plan. These proposals seek to maximise the use of the Council's assets, increasing care home capacity to support more people on an older people's pathway to receive the care and support required to meet their needs.
- 9.4 The cost of care exercise will establish accurate operating costs of specialist care home services, enabling the Partnership to determine a reasonable cost for purchasing care services from the market to avoid purchasing care at inflationary rates.
- 9.5 This cost of care exercise will inform the development of a framework of prices, which will give the Council and providers clear estimates of the need for, and reasonable cost of, care home services until the end of the decade.
- 9.6 By working within this framework and creating a centralised service that co-ordinates purchasing from the independent care home market, will mitigate some growth in prices, even within the limits of current capacity. It may also benefit people who fund their own care, supporting them to find a care home that meets their needs and budget.

- 9.7 Risk registers, specific to each proposal will be developed as activities progress following approval. These will form part of the overall programme governance and will be managed accordingly.

Background reading/external references

[Proceedings of Edinburgh Integration Joint Board 09 February 2024, item 6.1, 'An Older People's Pathway'](#)

Appendices

[EIJB papers 09 February 24, item 6.1, 'An Older Peoples Pathway'](#)