

EAST AYRSHIRE COUNCIL

SOCIAL WORK COMMITTEE : 9 SEPTEMBER 2004

CAPACITY PLANNING OF SERVICES FOR OLDER PEOPLE

Report by the Executive Director of Educational and Social Services

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to seek committee endorsement of work in progress to plan future services for older people in East Ayrshire as detailed in report commissioned by Joint Future Partnership Group – “Capacity Planning of services for Older People.” (Appendix 1)
- 1.2 To raise awareness of resulting resource implications for the Council.

2. BACKGROUND

- 2.1 In order to meet the needs of older people in East Ayrshire we need require to ensure that quality services are available where and when called for. To achieve this we need to understand clearly critical factors impacting on future services.
- 2.2. We subsequently require to plan, design and develop a whole system approach to Capacity Planning of services that include a range of supports from low level home maintenance through to continuing hospital care.

3. CRITICAL FACTORS TO PLANNING / SERVICE DEVELOPMENTS

- 3.1 Critical factors to planning considered in the report are:-
 - Demographic trends - National Statistics predict that in East Ayrshire over the next 15 years there will be an increase of approximately 30.5% in the number of people over 75 years of age. This is slightly above the national average of 29%;
 - National and Local Policies – There has been a drive since the introduction of community care in 1993 to;

help people live in their own home when it is safe and practical to do so
and,
redress the balance of care from institutional settings to the community.
 - Geographical Location – there requires to be equity of provision of access to services across our communities and in particular across both rural and urban settings.
 - Quality – We require to ensure all the services we provide or purchase are of high standard and meet the requirements of Regulation of Care (Scotland) Act 2001
 - Choice – We need to consider the views and aspirations of older people and their carers in our communities.

3.2 Specific areas of service development considered in the report are

- Continuing Hospital Care – It has been recognised that for some time there is over-capacity across Ayrshire in the provision of Continuing Care Beds. Service proposals to reduce this number and transfer resources to community services are currently at public consultation
- Care Home Provision – The Council through the Review of Residential Services for Older People has committed significant resources to develop high quality public services. We need to ensure that overall services are of a high standard and aligned to the needs of communities
- Home Care Service – The Home Care Review in 2002 has developed our service to be more flexible and responsive to need. We need to continue to build partnerships with health and housing colleagues to be responsive particularly when needs are complex or at times of crisis.

3.3 Areas for future review and consideration are identified as

- Intermediate Care Services
- Social Care Assessment Facilities
- Sheltered Housing

4. FINANCIAL IMPLICATIONS

4.1 The implications of the report are that to simply meet the increase in demand for service through demographic trends investment of 1.7% per annum above inflation is required. This makes no account of improvement in quality or service development.

4.2 Redesign of services can provide some resources however this will also require additional funding to meet increased need and higher public expectations.

5. POLICY/LEGAL IMPLICATIONS

5.1 This report supports the Council in planning to meet duties under Community Care legislation.

6. PERSONNEL IMPLICATIONS

6.1 The implications of this report are that Social Work and partners are required to pro-actively plan our workforce to make sure we have the right people with the right skills in the right place.

7. RECOMMENDATIONS

7.1 It is recommended that Social Work Committee:-

- (i) endorse the planning model as detailed in “Capacity Planning Of Services For Older People”; and

(ii) otherwise note the contents of this report.

John Mulgrew
Executive Director of Educational and Social Services
20 August 2004
Enc (1)

LIST OF BACKGROUND PAPERS

Nil

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**EAST AYRSHIRE
JOINT FUTURE PARTNERSHIP**

**INTERIM REPORT ON
CAPACITY PLANNING OF
SERVICES FOR OLDER PEOPLE**

JULY 2004

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1. PURPOSE

1.1 This report aims to advise of our joint approach in the forward planning of care and support services for older people in East Ayrshire. The report details background to both planning and service development processes. This of course, is a dynamic process which will undoubtedly change as we progress and is influenced by our experiences and the external environment. This report together with our more formal partnership agreements begins to establish a framework around what we are doing and why we are doing it in respect of older people's services.

2. INTRODUCTION

2.1 In order to meet the needs of older people in East Ayrshire we must ensure that quality services are available where and when they are required. To achieve this we intend to plan, design and develop a whole system approach to Capacity Planning of services that include the full range of supports from low level home maintenance through to continuing hospital care.

2.2 Critical factors in the process are:

- Demographic Trends
- The impact of recent National and Local Policies
- Geographical Location (urban and rural mix)
- Quality
- Choice

2.3 In addition, we require to address workforce planning, redesign of services and financial resources to meet the needs identified.

SECTION 1 - BACKGROUND

3. DEMOGRAPHIC TRENDS

3.1 Population trends have for some time predicted a rise in the number of older people within our communities and in particular a significant rise in the number of people over 75.

3.2 Figures published by the Scottish Executive predict population trends over the following 15 years. The most recently published figures have been revised to include an increase in life expectancy, and therefore demonstrate a significant increase in the predicted over 75 population. (Following analysis of Census 2001 returns).

Population of East Ayrshire

Estimate Year	Population Over 75	Population in 15 Years Time Over 75	Overall % Increase	Year on Year Increase
2002	8,514	11,109	30.5%	1.7%
2000	8,173	9,968	22%	1.2%

* Source: Government Records Office - Scotland Mid Year Estimates.

The population statistics indicate that simply to maintain our current level of service we require to invest an additional 1.7% per annum above inflation. This takes no account of improvements in quality or indeed desired changes to models of care.

4. POLICY

4.1 National and local policies over recent years have been consistent in their aim to:

4.1.1 Help people live in their own home when it is safe and practical to do so.

East Ayrshire Council, NHS Ayrshire and Arran and partners have been working towards building a robust infrastructure of community care services that can deliver on these aims. This includes:

- Reviewing and redesigning Home Care services to increasingly introduce flexibility and supports which fit round the person.
- Development of Integrated Out of Hours Services.
- Development of Intermediate Care facilities.
- Development of Housing Support Services.
- Development of Community Alarm Services including use of SMART Technology.

In light of both population trends, care needs and increasing costs we have to take decisions about how we further develop, target and resource both social and health care services in East Ayrshire.

4.1.2 Redress the balance of care from institutional settings to the community.

Whilst we continue to successfully shift the balance of care, further examination of what that balance requires to be is needed alongside how our current services fit. There also needs to be greater recognition that the full range of services is required within this continuum and must include sufficient care home places and where necessary, continuing hospital beds.

Strategically, there are various strands to this exercise which includes:

NHS Ayrshire and Arran, in partnership with the 3 Local Authorities, has been undertaking a review of Continuing Care Services for Older People. The option appraisal process is nearing completion and will be followed by public consultation. This is likely to result in major redesign of the service. (See section 8)

At the same time, East Ayrshire Council has completed a review of Care Home Services for Older People and a 3 year programme has begun to develop 3 of our existing care homes, namely Cessnock, Rosebank and Ross Court into the highest quality community facilities. (See section 9)

Following a major review of our care at home services we are now delivering supports that are more comprehensive, more flexible and more responsive to

individual need. We are increasingly utilising a full range of services including SMART technologies that support people to continue to live at home.

After wide consultation the Council has developed a local housing strategy for the period 2004-2009 a principal aim of which is to “Ensure individuals requiring support to live independently in the community are enabled to do so.”

As a next step we need to bring together these review processes into a single strategic service plan for East Ayrshire which reflects the growing needs of older people.

5. GEOGRAPHICAL LOCATION

5.1 In the planning of services within East Ayrshire, the geography of the authority area needs to be a major consideration. Most older people require services provided to them within their local community. Consequently we need to, where practical, aim for equality of access to services for older people, whether they live in urban or rural areas.

5.2 To achieve this we need to:

- (i) When developing/commissioning community services give consideration to rural issues (e.g. review of Community Meals to ensure service availability 7/365).**
- (ii) When developing/commissioning other services (e.g. care homes/ continuing care) ensure services are, where practicable, located within communities that need these services.**

6. QUALITY

6.1 The Regulation of Care (Scotland) Act 2001 has introduced National Standards for the Care Sector both in terms of direct service provision and the physical environment within which services are provided.

6.2 These standards are to be welcomed and are already impacting on current services, in respect of:

- Improved training for staff.
- Improved monitoring/inspection/reporting arrangements.
- Improved standards of accommodation for people who require to be cared for away from home.
- Increased public expectation of services.

The standards also pose challenges to current service providers to develop their services to meet the regulations.

This in turn is resulting in resource issues as providers seek increased fees from statutory bodies for services provided.

7. CHOICE

- 7.1 In planning and designing the future shape of services we require to consider local and national policies and strategies and most importantly the views and aspirations of older people in East Ayrshire.
- 7.2 At a planning level this will require continual involvement of older people as full partners throughout the service development process.
- 7.3 Whilst the Better Government Framework offers a significant vehicle for consultation it is crucial that at individual level we continue to commit to involving service users in the care planning process and listening to views expressed on services provided.

SECTION 2 – SPECIFIC DEVELOPMENT

8. CONTINUING HOSPITAL CARE

- 8.1 It has been recognised for some time that there is over-capacity across Ayrshire in the provision of NHS continuing care beds. This is particularly evident in East Ayrshire where there are at present capacity for 158 people within the sector but a recent needs analysis carried out by NHS Ayrshire and Arran would indicate that fewer than half this number is required.

The Ayrshire and Arran Strategy for Older Peoples Services, 2002-2007 reflects this.

- The number of NHS continuing care beds are reduced, once appropriate care packages are in place, to release resources for investment in other locally agreed and prioritised services (this may require bridging finance).
- An option appraisal exercise be undertaken to identify the optimal reduction of NHS continuing care beds and the enhanced community supports required. This should take into consideration the impact on primary care, community care and secondary care services.

- 8.2 A multi-agency option appraisal group has reported back to the NHS Board with a preferred option.

This preferred option meets identified need and provides quality services in terms of accommodation and care within the principal communities of East Ayrshire. It also, combined with other initiatives, provides capacity to develop innovative partnerships in relation to intermediate care resources and facilities for assessment and respite care.

This option will also result in transfer of significant funds locally (over £1 million) from continuing care. Utilisation of these resources will be considered by the East Ayrshire Joint Future Partnership Group.

9. CARE HOMES

- 9.1 Overall in East Ayrshire the total number of care home beds is proportionate to current need. The location of the resources are not however aligned to the needs of local communities. The environmental standards of many current resources also fall short of future national standards. This is particularly evident in the south of the authority area which is predominately rural.

There are a number of consequences to this:

1. When people require admission to a care home to meet their needs, they often have to move many miles from their own community. This can result in feelings of isolation and also difficulties for families to visit.
2. If an older person has been admitted to hospital and subsequently assessed as requiring admission to a care home they often exercise the option to stay in hospital until a care home of their choice becomes available. The results of this are reflected in the Delayed Discharge statistics for East Ayrshire, where our reporting in this category is consistently high in relation to other Council areas. **That said, it must be made clear that it is highly likely that the person will be occupying a continuing care bed in the primary care sector and not an acute bed.**

- 9.2 We have taken targeted action to address these issues.

In 2002/03 East Ayrshire Council undertook a Best Value Member/Officer Review of our own residential services for older people. The recommendation of the review was that 3 of the existing 4 homes could, with significant investment, be upgraded to provide high quality services to the local community. In the 4th home, Affleck House, the physical environment was such that this was not a viable option.

The Council subsequently supported the outcome of the review and we are now embarking on a 3 year programme to implement the outcomes.

- 9.3 As part of this implementation plan East Ayrshire also undertook a procurement exercise to commission a care home in the Auchinleck area. The aim was to provide care and accommodation of the highest standard to meet local need. This produced significant interest from both national and local independent providers and the contract was subsequently awarded to an existing local independent provider.

This contract involves the Council in a block purchase of 30 places for a 10 year period as reprovisioning for the local Council run home (Affleck House). The remaining capacity of 24 places can make a major contribution towards facilitating discharge from hospital, and will be particularly relevant to those people exercising choice in the south of the authority.

- 9.4 The outcome developments in the care home sector, aligned to the hospital developments again provide capacity to meet identified need and scope to develop the partnership further in the above stated areas of intermediate care, assessment and respite.

That notwithstanding, the resourcing of the transfers from hospital to the care home will require to be met by a similar transfer of funds from Health to the Local Authority. This links to the previously identified issue of over-capacity in the primary care hospital sector and the current review of service. Timing of resources transferring and people transferring is crucial.

The challenge is to ensure tight co-ordination between the freeing up of resources from institutional health services, the transfer to the local partnerships and the contracting of services when the new facility opens in Spring 2005. The outcome will be better quality, more appropriate care for older people and a significant reduction in delayed discharge statistics.

10. CARE AT HOME SERVICES

10.1 Assessment and Care Management

Over recent years, in line with Joint Future principles East Ayrshire Council and LHCC have developed a model of integrated working in the delivery of services to older people.

This means that social work services to older people in the community are delivered through 6 locality teams led by a Team Manager. Each locality team is aligned with 2 or 3 GP Practices, with regular liaison and multi-disciplinary team meetings held between social work and health. The locality nature of the structure also facilitates inclusion of local housing staff as and when required.

The outcome has been better communication, clearer understanding of roles, success in implementing single shared assessment and most importantly easier access to services for local people.

10.2 Home Care

Providing quality services to people at home that are flexible and responsive to the needs of individuals is a major aspect of current and future service planning. The delivery of home care to local communities is managed through the integrated arrangements described above. In 2004/2005 this has progressed to include the full devolution of budgets to Team Managers at locality level.

10.3 In 2002 East Ayrshire Council completed a review of home care services. This involved major redesign to provide services 7 days per week, 365 days per year at times that are responsive to service user needs. Internally it has involved:

- Significant changes to working conditions with recompense reflecting the skills and importance of the role.
- Development of the role from Home Help to Personal Carer reflecting an increasing focus on the most vulnerable and the changing nature of the social care task.
- Improvements in induction and training including programmed support from a range of agencies and professionals but particularly nursing support in relation to developing personal care tasks.

- 10.4 Partnerships of local authority health and neighbouring councils have worked together to develop integrated out-of-hours and hospital discharge (rapid response) services.
- 10.5 In East Ayrshire significant joint investment in the Community Alarm Service means that, health and social care staff can call upon crisis response services 24 hours per day to support people at home and where appropriate prevent hospital admission. This is provided in partnership with local out-of-hours medical and nursing services.
- 10.6 We are also building partnerships with the independent sector. An outcome of the home care review was to improve our contracting arrangements with local independent sector agencies. In each of the locality areas we, following an open commissioning process, have established partner providers on a block contract basis to provide services alongside the local authority in that geography. This model of contracting supports the providers towards a more stable business plan and increases both continuity of employment and care.

11. WORK IN PROGRESS

11.1 Intermediate Care

Our current service which is delivered in a primary care hospital setting has proven very successful in providing supports for people being discharged from acute care: facilitating successful rehabilitation back home. We now plan to expand this service to provide intensive supports to people in the community offering where appropriate, alternatives to acute hospital admission or care home.

Through the redesign of continuing hospital care and our care home resources we are currently looking at how best to provide the intense social and clinical supports required to meet the needs of people who require either step-up or step-down facilities.

11.2 Social Care Assessment Facilities

Discharge from hospital for the majority of people is relatively straight forward. Many people return home on their own or to the care of their families. For others social care supports are required to assist with the transfer. In East Ayrshire this can be provided by either:

- Our mainline care at home services where there is an expectation that supports will require to continue.

Or

- Our multi-disciplinary rapid response service where it is considered that an intense period of supports at home will sufficiently rehabilitate a person to continue living independently without further formal care in intervention.

In both these circumstances it is our service target to have supports in place within 24 hours of the person being ready for discharge. To achieve this we have utilised dedicated Delayed Discharge Funding to target key posts at hospital discharge. This includes, for the local authority additional hospital based social workers and home care managers, and for health the introduction of discharge co-ordinators and additional pharmacy posts.

For a small number of people discharge from hospital is more complex and a full health and social care assessment is required. This assessment can take up to 6 weeks from when the doctor states the person is ready for discharge to fully build an accurate picture of the person's needs, social circumstances and appropriate resources available to meet those needs.

Often during this 6 week period allied health professionals will work with the person to improve functioning and medical supervision continues.

Through the redesign of our services we wish to consider if acute hospital is the best place for these assessments to be carried out. We will, in the near future, have both the accommodation in the community and primary care resources to support people undergoing such assessments. We require however to ensure that other services including medical cover and allied health professional input is available to fully meet the persons needs over this critical period. If we can achieve co-ordination of these various stands then it will be possible to move the bulk of community care assessments outwith the acute sector.

11.3 **Sheltered Housing**

Increasingly Care at Home services, including Community Alarm services support people to live in their own home. For various reasons, however, including choice, physical environment and individual need, some older people will request or require care in other settings. Sheltered housing can be an important part of the continuum of care but like other services it is important that this is developed to meet identified need. In the forthcoming year East Ayrshire Council will review our sheltered housing service, in line with Supporting People legislation, to ensure that supported accommodation short of care home provision remains one of a range of options for older people in the future.

12. **HUMAN RESOURCE ISSUES**

- 12.1 Whole system Capacity Planning of services to older people will inform future workforce planning and the skill mix required by statutory and independent providers.
- 12.2 Future training, recruitment and commissioning strategies for care services will be advised by the outcome of this planning process. The aim will be to have a competent and confident workforce delivering high quality services to meet identified need.

13. **FINANCE ISSUES**

- 13.1 Over future years there will clearly be resource issues if service delivery is to both expand and improve in quality. This capacity planning exercise aims to look at resources that can be redeployed through service redesign and identify future gaps that require to be met to develop appropriate services.
- 13.2 **Further work is required to increasingly cost out all elements of care packages to determine the full costs and consider affordability in light of rising care costs given the projected increase in frail older people in the community.**

SECTION 3 – NEXT STEPS

14. NEXT STEPS

- 14.1 This report highlights both the challenges and opportunities in developing services to meet the needs of older people within our community in East Ayrshire.

If we are to continue to be effective we will increasingly require to work in real partnership bringing together all individual skills and agency resources to meet the needs of service users and carers.

Whilst we have successfully established a network for consultation through the vehicle of Better Government we need to consider how best to actively engage individual service users and carers in the future shape of health and social care services in East Ayrshire.

We are at present building structures through integrated working and service redesign that puts the person at the centre of our activity. Through Joint Future and Community Health Partnerships we require to extend these developments.

This will have resource implications. In terms of workforce planning we need to have the right people, with the right skills in the right places. In terms of service developments we increasingly need to jointly plan, commission and deliver services to meet local need and avoid duplication of effort and resource.

Strategically we require to bring all of the strands of health, social work and housing activities into one service plan for older people in East Ayrshire with services and resources being delivered at locality level unless there is good reason not to.

In terms of finances we can immediately identify monies from redesign of services however this area of work will undoubtedly require additional funding to meet growing need and public expectation.

This interim report will be submitted to East Ayrshire Council Social Work Committee, East Ayrshire Joint Future Partnership Group and East Ayrshire Joint Future Implementation Group in order to agree it's contents and next steps.

If you require further information please contact Eddie Fraser, Community Care Manager, East Ayrshire Council, telephone: 01563 554825 or Maire Currie, General Manager, East Ayrshire LHCC, telephone: 01563 549680.

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14th July 2004