

MUNICIPAL YEAR 2015/2016 - REPORT NO.89

MEETING TITLE AND DATE:

Cabinet: 21st October 2015

REPORT OF:

Director of Health, Housing and Adult Social Care

Contact officer and telephone number:
Bindi Nagra

E mail: Bindi.Nagra@enfield.gov.uk

Agenda - Part: 1**Item: 17**

Subject: Future Options for Improvements to Enfield's Nursing and Residential Dementia Care Services.

Wards: All

Key Decision No: 4189

Cabinet Member consulted:

Cllr Cazimoglu

1. EXECUTIVE SUMMARY

- 1.1 At the Cabinet meeting of 22nd July 2015 Members received a report on the nursing and residential dementia care provision at Honeysuckle House and approved a three year contract with Care UK. It was also agreed that the definitive longer-term strategic recommendations for the future care provision of nursing and residential dementia care services in the Borough would be brought before Cabinet in October.
- 1.2 A significant amount of the Council's nursing and residential care services are approaching the end of their useful economic lifespan, due to the age of the facilities concerned. Furthermore, there are an increasing number of people with dementia who require nursing care in the Borough. The shortage of nursing dementia capacity is placing pressure on bed prices.
- 1.3 In order to manage these pressures effectively, it is proposed that the Council plans for a new nursing dementia care home to be built within the next 3 years.

2. RECOMMENDATIONS

Cabinet is asked to:

- 2.1 Note the contents of this report along with the Part 2 report to support the wider strategic aims of future nursing and residential dementia care provision in the Borough; and
- 2.2 Approve the strategic approach of building a new care home with nursing within the next 3 years; and
- 2.3 Authorise officers to commence feasibility, scoping, planning and commissioning for a new circa 70 bed care home, including the tendering of a building contractor and/ or care provider; and

- 2.4 Delegate to the Director of Health, Housing and Adult Social Care and Director of Finance, Resources and Customer Services in consultation with Cabinet Member for Health and Social Care and Cabinet Member for Finance Efficiency, responsibility for the identification and approval of the site for a new care home; and
- 2.5 Receive a further report on the procurement process of the building contractor and/ or care provider.

3. OVERVIEW OF CURRENT PROVISION.

3.1 Honeysuckle House.

- 3.1.1 Honeysuckle House consists of 32 beds for elderly people with dementia and functional mental illness. This service was traditionally provided under a block contract between the Council and Care UK, and in July 2015 a further interim 3 year contract was issued to Care UK.
- 3.1.2 The building is coming to the end of the economic period as the size of the building is not attractive to the market and there are significant costs associated with future maintenance requirements. In addition, the home was built in 1996 to good care home standards at that time but it would not now meet the modern standards required of a new home, including provision of ensuite facilities and minimum room sizes.

3.2 Parkview House.

- 3.2.1 Parkview House is a residential care home consisting of 45 beds for people with dementia. The Council is the freehold owner of Parkview House and a 150 year lease was granted to Sanctuary Housing Association in 1992. A management agreement was also entered into with Sanctuary Housing for the provision of residential care in 1993.

3.3 Reprovision Project (Coppice Wood Lodge and Bridge House)

- 3.3.1 The Reprovision Project remit has been to re-organise and improve care provision for older people through the reprovision of two Local Authority run Care Homes (Coppice Wood Lodge and Bridge House) that in the future will not be suitable to be registered by CQC and to re-provide a high quality service within a single new purpose built building, which will be completed in November 2016.
- 3.3.2 The new facility, which is situated on the former Elizabeth House site, will provide care and accommodation for 70 older people initially catering for the transferring resident population from Bridge House and Coppice Wood Lodge. The home will be registered by CQC as a Care Home with Nursing. However, this new facility will not sufficiently address the demand pressures for all residential nursing dementia care. In addition, the Reprovision facility will not have adequate surplus capacity to meet the

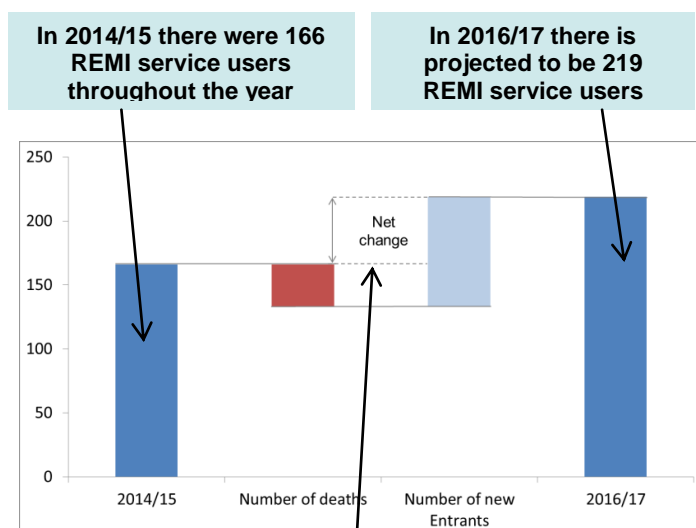
demand pressures, identified by Ernst and Young independent consultants supporting the Council.

4. NEEDS ANALYSIS.

4.1 Enfield's nursing and residential dementia care homes market is highly competitive with private funders, neighbouring authorities and health services all seeking placements at increasing rates, reducing Enfield Council's ability to access supply. Ernst and Young have identified that the demand for nursing elderly dementia care is forecast to rise in the Borough by 27% by 2016/17; an additional 47 beds over the 2014/15 occupancy rates (See Section 4.3 herein).

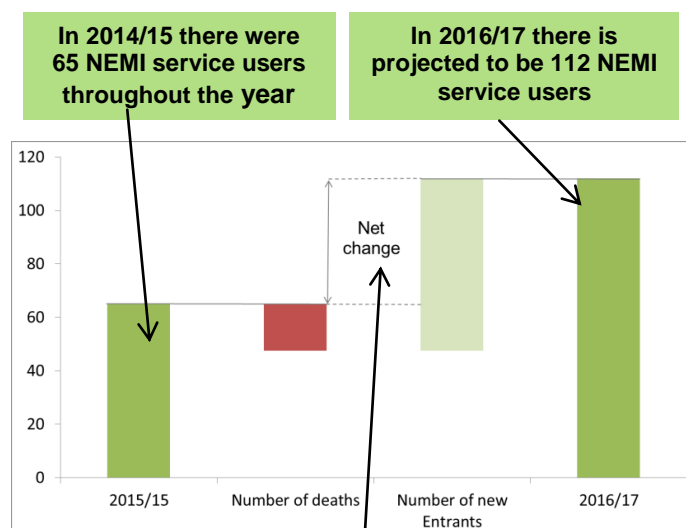
4.2 Ernst and Young's comprehensive analysis of the impending demands of nursing dementia (NEMI) and residential dementia (REMI) care services in the Borough has concluded that the Council will experience demand pressures as follows:-

4.3 Residential Dementia



As the death rate for REMI is approx. 20%, the net change between the 2 years is an additional 53 service users. LBE will therefore need to find 53 additional beds to meet this demand

Nursing Dementia



As the death rate for NEMI is approx. 27%, the net change between the 2 years is an additional 47 service users. LBE will therefore need to find 47 additional beds to meet this demand

4.4 Accordingly, with the demand pressures as noted in Section 4.3 of this Report there is an ever increasing significant shortage of affordable nursing elderly dementia care beds in Enfield. It is important to note that bed spaces fell to single figures on numerous occasions and dropping to one vacant bed during the winter periods of 2014 and 2015. This combined with competition from other parties, who often pay higher prices, makes supply even more scarce and difficult to secure. The on-going shortage of nursing care beds in the Borough has placed upward pressure on care purchasing budgets, and has also contributed towards delays in

the timely and appropriate discharge from acute hospital beds placing the Council at further financial risk from NHS charges.

5. OPTIONS.

- 5.1 The Council now has the opportunity to develop a wider strategy for residential and nursing provision in the Borough to ensure it is able to meet the current and forecast needs of the community as noted in Section 4.3 of this Report.

5.2 Do Nothing

- 5.2.1 As there is a significant shortage of affordable nursing care beds in Enfield, as noted in section 4.4, if the Council was to adopt this approach there would be significant increased costs and additional pressures placed on the market.
- 5.2.2 Furthermore, there would be a significant risk that the Local Authority would be charged by local NHS providers for delayed discharges (rate is currently set at £155 per night, per patient).

5.3 Purchase care home beds out of borough

- 5.3.1 The opportunity for the Council to purchase nursing dementia residential care from neighbouring areas does not afford the Council a cost effective solution as prices are at a higher rate than Enfield's mean market average.
- 5.3.2 In addition the Council Adult Social Care function is governed by the 'Directive on Choice' statutory guidance which requires the Council to afford individual services users choice of accommodation. This right has been further enhanced by the Care Act 2014 which requires the Council to ensure that there is sufficient and affordable supply of care services locally for users and carers.

5.4 Plan for the build of a new nursing care home

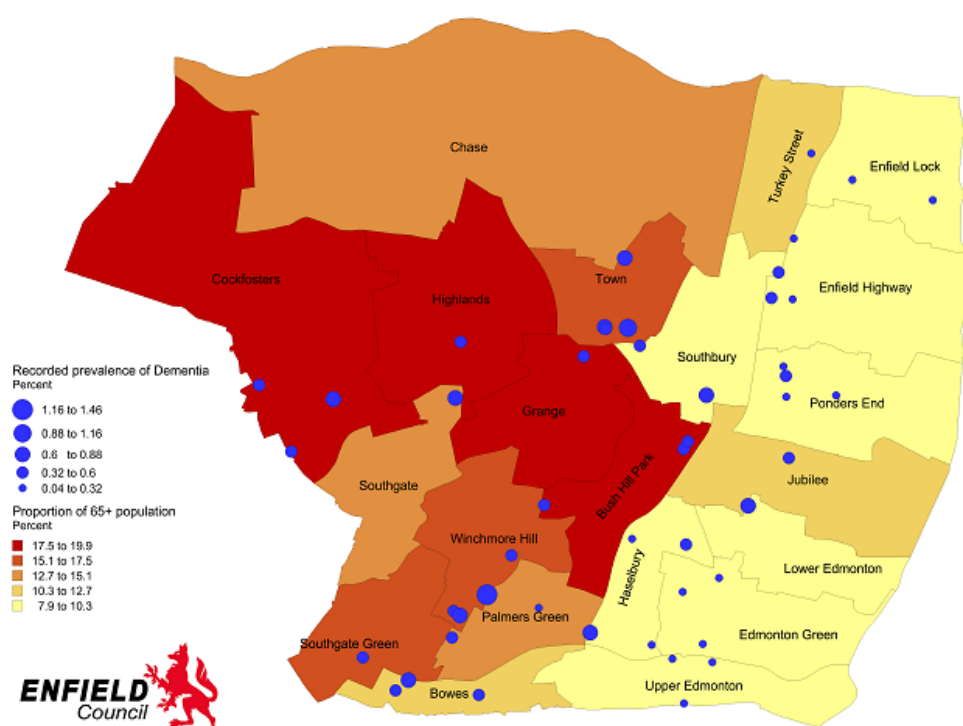
- 5.4.1 This will enable the Council to meet the demographic needs for provision of this nature through building a new 70- 80 bed care home. This will ensure that the Council is well placed to manage future cost pressures and maintain the levels of local provision needed to meet its statutory care requirements.

6. RECOMMENDATIONS

- 6.1 It is recommended that the Council considers opportunities to build a new nursing dementia residential care facility, circa 70 beds, in the Borough.
- 6.2 The opportunities allow this new build to be based on a Council owned site which would allow the Council to secure supply of nursing elderly

dementia care provision and reduce cost pressures on purchasing budgets.

- 6.3 A number of sites could be explored, including the Coppice Wood Lodge site as this is of the necessary size and is due to be vacated at the end of 2016. However, the Council may also have alternative sites which need to be considered. It is therefore recommended that officers explore the viability of the Coppice Wood Lodge site and any other sites that would meet the requirements.
- 6.4 The dementia graph outlined below provides a current understanding of the demographic distribution of dementia within the Borough and provides an indication of the possible Wards that should be considered to best meet this new provision.



7. REASONS FOR RECOMMENDATION.

- 7.1 By developing a wider strategy for residential and nursing care provision in the Borough, the Council can work across the current offering to co-ordinate the response to the issues outlined above and deliver a strategic long-term vision.
- 7.2 Through building a new facility, the Council is able to develop new capacity on an existing site, ensuring the quality of the building and the on-going flexibility of use as circumstances change, while also optimising the use of Council owned assets across the Borough.

8. COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS.

8.1 Financial Implications

As recommended (2.3) the report is proposing to commence feasibility, scoping planning and commissioning work for a new care home. The estimated cost of this work is unknown at time of writing and therefore any costs for feasibility stage of the project would need to be met from within existing HHASC resources.

8.2 Legal Implications.

8.2.1 Under the Care Act 2014 ('the Act'), the Council has a duty to meet an adult's assessed eligible needs for 'care and support' (s. 18) and a carer's eligible needs for 'support' (S. 20). This replaces various duties under earlier community care legislation. There is also a power to meet urgent non-eligible needs or eligible needs of someone not ordinarily resident in this Borough (S. 19). Needs under Sections 18-20 can be met by means of "accommodation in a care home or in premises of some other type". The Council can provide this itself, arrange for someone else to provide it, or make direct payments.

8.2.2 The Act also imposes a duty to promote diversity and quality in the provision of services (S. 5). The Council must promote an efficient and effective operation of a market for care and support services, including a variety of providers and information about them. The Council can demonstrate this duty is being met is by means of a Market Position Statement. The Council must have regard to a number of factors, including consideration of how to meet current and future needs and ensuring the sustainability of the market.

8.2.3 The Council is under a duty to be able to provide temporary, alternative provision in the event of any provider failure.

8.2.4 The Council has already complied with its duty to establish a Safeguarding Adults Board (SAB) to help and protect adults in its area in need of care and support who are at risk of abuse and neglect.

8.3 Property Implications.

8.3.1 The strategy, as set out within this Report, will lead to greater efficiencies within the Enfield's Nursing and Residential Dementia Care Services; this however will only be achieved through leaner, modern fit for purpose care facilities that conform to the CQC's highest standards for patient care.

8.3.2 More in-depth exploration is required on available sites for building a new care home.

8.3.3 Further examination is required with an accompanying in depth site search to seek land for a further care home with a minimum of 70 beds to cater

for current and future demand. A site of between 1 acre -1.5 acres will be required.

9. KEY RISKS.

- 9.1 There is great demand in the Borough for nursing dementia care but little supply. Furthermore, the remaining useful life of the Council's residential and nursing care provision is diminishing and risk factors related to the building's structures and fittings may become more apparent without timely and decisive action. A sustainable long-term strategy that ensures continuity of supply for nursing care is essential and is in the best interests of service users.

10. IMPACT ON COUNCIL PRIORITIES.

10.1 Fairness for All.

Approval of these recommendations ensures continued provision of high quality, affordable and accessible care services to all sections of Enfield's community.

10.2 Growth and Sustainability.

Approval of these recommendations gives Enfield's citizens continued access to much needed provision for some of the Borough's most vulnerable people.

10.3 Strong Communities.

Approval of these recommendations will ensure that the Council has the needs of local people at the heart of its actions, that it is open and accountable and that it works in partnership with others to ensure Enfield is a safe and healthy place to live.

11. EQUALITIES IMPACT IMPLICATIONS.

See Part 2 report.

12. PERFORMANCE MANAGEMENT IMPLICATIONS.

- 12.1 A new nursing residential dementia care unit would contain adequate contract provision to ensure that the required performance management measures are met to deliver quality provision and service user satisfaction to optimum effect.

13. HEALTH AND SAFETY IMPLICATIONS.

- 13.1 The health and safety implications will be outlined at a later stage if relevant.

14. HR IMPLICATIONS.

- 14.1 None relevant.

15. PUBLIC HEALTH IMPLICATIONS.

- 15.1 Provision of nursing care homes is a core part of maintaining the health and well-being of Enfield residents with dementia and complex needs. It is important that the Council is exploring the opportunities that are available to ensure appropriate and effective future provision.

16. Background Papers.

- 16.1 None.