ITEM No ...11.....



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD

REPORT ON: RESHAPING CARE FOR OLDER PEOPLE: RECONFIGURATION OF CARE

**HOMES** 

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB24-2020

#### 1.0 PURPOSE OF REPORT

1.1 This report sets out proposals to reconfigure care home provision as part of the strategic direction set out in the Reshaping Non Acute Care programme previously agreed by the IJB.

#### 2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB)

- 2.1 Notes the content of this report
- Agrees to the proposal to close Craigie House and reopen the purpose built suite at Menzieshill House as set out in sections 4.5 and 4.9 of this report.
- 2.3 Notes that the Health and Social Care Partnership has assessed and supported those Craigie House residents who indicated their wish to move to alternative placements and will continue to support those currently residing within Craigie House as set out in section 4.6 of this report.
- 2.4 Notes that residents currently within Craigie House will be supported to make decisions appropriate to their needs and be supported to move safely and sensitively to other care homes in the city as they wish.
- 2.5 Remits to the Chief Officer to issue Direction to Dundee City Council to cease providing a care home service at Craigie House once the remaining residents have moved from the building.

#### 3.0 FINANCIAL IMPLICATIONS

3.1 All budgeted resources released from the closure of Craigie House will be reinvested to support budget pressures in the remaining partnership run care homes and to fund increased capacity in community based health and social care services as per of the Reshaping Non-Acute Care Programme.

### 4.0 MAIN TEXT

4.1 This report relates to previous reports submitted to the IJB, Reshaping Non Acute Care in Dundee on 31 October 2017 (Report DIJB38 2017), Reshaping Non-Acute Care in Dundee Update Reports on 27 June 2018 (Report DIJB31-2018) and 25 June 2019 (Report DIJB19-2019), also Reshaping Care for older people: A programme for change 2011-2021. These reports collectively detail the intention to support people in their own homes for longer, and use Local Authority Care Homes in specialist areas where the market does not meet the demand, specifically dementia care.

- The Partnership currently operates four care homes within the city, namely Craigie House, Turriff House, Janet Brougham House and Menzieshill House. The latter two homes are modern facilities built to dementia care standards, while Craigie and Turriff are older in design. Research has shown that the design of the environment can have a positive impact on residents, particularly where this is designed to take into account the needs of people with dementia. There are particular challenges with the design of Craigie House which has narrow corridors and communal spaces, is on two floors with a lift which is unsuitable, and is not dementia friendly. The top floor of Craigie has been closed for some time due to health and safety concerns. The bedrooms do not have ensuite shower rooms requiring residents to travel through public areas to the communal facilities. Despite these restrictions, the staff within the care homes have continued to be assessed as providing a high level of support and care and this has been valued by residents and families.
- 4.3 The majority of residents within our care homes are either very physically frail or have a high level of cognitive impairment, requiring a higher level of staffing. Due to a recent redesign to ensure safe staffing levels within budget, Craigie House reduced from 24 to 16 residents. Menzieshill House reduced from 32 to 24 residents leaving one suite with 8 rooms vacant. Turriff House reduced from 32 to 24 residents to facilitate the 8 room Intermediate Care Suite for people with mental health support needs. This suite opened on the 28th October 2019 but has been non-operational during the current Covid-19 pandemic.
- 4.4 182 employees are currently deployed across the four care homes and the service has a gross budget of £5,742k plus property costs. Income is received from service users with those who are self-funders contributing a greater amount, however the income generated from self-funders fluctuates depending on the number of self-funders cared for at any one time and this has progressively reduced in recent years. The current income budget is £877k.
- While plans for a replacement facility for Craigie House were underway as part of the wider Reshaping Non Acute Care Programme, this will not be completed for a number of years. Given the reduced number of beds in Craigie, the delay in securing a replacement building and challenges around the fabric of the building, it is recommended that arrangements are made to close the home. The Reshaping Non-Acute Care Board will be asked to consider an option to divert the funding of a replacement building to a purpose built replacement for Turriff House.
- 4.6 Consultation with residents, families and staff in Craigie house has taken place. Residents able to comment advised they are satisfied this is required and have already looked at alternatives. Most families, whilst disappointed and concerned about the moves have also confirmed their preferences for a move to either Menzieshill House or Janet Brougham House. At the time of the initial consultation, two families stated they would prefer to remain at Craigie with significant investment made, but have also identified their preferences.
- 4.7 Trade Unions and staff were consulted and are satisfied all staff will be offered a choice of alternative posts with no requirement for redundancies or changes to terms and conditions.
- 4.8 A number of families advised they did not wish to wait for the decision to be made by the IJB and sought to move their relative to alternative accommodation by the end of May. With the delay in the IJB considering the paper as a result of the standing down of normal business as a result of Covid, residents and families have now been supported to move to their choice of home. At this time only one resident remains in the care home.
- 4.9 The proposed supports for residents at Craigie has been to reopen a suite at Menzieshill House to allow the community built within Craigie to be maintained and a small group of staff from Craigie to move with the residents to ensure continuity of care. This has been actioned. Current vacancies at Janet Brougham were also available for anyone choosing to remain in the East of the city with sufficient vacancies available to ensure all residents can continue to be supported in the partnership's care homes.

#### 5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. An EQIA is attached.

### 6.0 RISK ASSESSMENT

This is a mandatory field and an explanation must be provided which covers the fields below. Please fill in and copy this table for each individual risk identified.

	Residents will be required to move care homes with a potential to cause		
Risk 1	anxiety or distress.		
Description			
Risk Category	Governance, Political		
Inherent Risk Level	Likelihood (3) x Impact (4) = Risk Scoring (12) – High Risk		
Mitigating Actions (including timescales and resources)	Opening the empty suite at Menzieshill allows the community to move together with a core group of staff to ensure continuity of care and support to adjust to the new environment. 3 staff immediately with remaining staff within 6 months. Additional staff will support in the first days of any move. Staff skills have been shown to significantly reduce the likelihood and duration of any period of distress.		
Residual Risk Level	Likelihood (2) x Impact (4) = Risk Scoring (8) – High Risk		
Planned Risk Level	Likelihood (2) x Impact (4) = Risk Scoring (8) – High Risk		
Approval recommendation	The IJB is recommended to accept the risk levels with the expectation that the mitigating actions are taken forward.		

### 7.0 CONSULTATIONS

- 7.1 Details of this proposal were shared with the following stakeholders.
  - Members of the Frailty Strategic Planning Group
  - Medical Team GP Cluster leads, Allied Health Profession and Nursing Leads
  - Union Representatives and staff
  - Residents and families
- 7.2 The Chief Finance Officer and Clerk to the Board have been consulted in the preparation of this report.

### 8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	No Direction Required	
	2. Dundee City Council	Х
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

## 9.0 BACKGROUND PAPERS

9.1 None.

Vicky Irons Chief Officer

DATE: 15<sup>th</sup> June 2020

Angela Smith Integrated Manager

### **DUNDEE IJB SIGNING DOCUMENT**

In view of the timescales involved this Report/Agenda Note was approved by the Chief Officer in consultation with the Chief Finance Officer, Clerk and Standards Officer, Chairperson, Vice Chairperson and all other voting members on the Integration Joint Board.

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# DIRECTION FROM DUNDEE CITY INTEGRATION JOINT BOARD

1	Reference	
2	Date Direction issued by Integration Joint Board	23 <sup>rd</sup> June 2020
3	Date from which direction takes effect	23 <sup>rd</sup> June 2020
4	Direction to:	Dundee City Council
5	Does this direction supersede, amend or cancel a previous direction – if yes, include the reference number(s)	No
6	Functions covered by direction	Local Authority operated Older People Care Homes
7	Full text of direction	The IJB directs Dundee City Council to withdraw the provision of care services from Craigie House once the remaining residents have vacated the building
8	Budget allocated by Integration Joint Board to carry out direction	The financial resources released through the closure of Craigie House should be reinvested to support budget pressures within council operated care homes and in models of care under as reflected in the Reshaping Non Acute Care programme
9	Performance monitoring arrangements	Financial monitoring and performance monitoring processes
10	Date direction will be reviewed	1 <sup>st</sup> April 2021



## **EQUALITY IMPACT ASSESSMENT TOOL**

## Part 1: Description/Consultation

Is this a Rapid Equality Impact Assessment (RI	IAT)? Yes 🖂 No 🗌
Is this a Full Equality Impact Assessment (EQI	A)? Yes No No
Date of Assessment: 16/06/2020 (dd/mm/yyyy)	Committee Report DIJB24-2020 Number:
Title of document being assessed:	
This is a new policy, procedure, strategy or practice being assessed	This is an existing policy, procedure, strategy or practice being assessed?
(If <b>Yes</b> please check box)	(If <b>Yes</b> please check box)
2. Please give a brief description of the policy, procedure, strategy or practice being assessed.	This is the report proposing the closure of Craigie House as part of the Reshaping Care for Older People in Dundee in accordance with previously reported plans.
3. What is the intended outcome of this policy, procedure, strategy or practice?	To ensure people receive high quality care in a suitable environment designed for people living with dementia.
4. Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment.	Report No DIJB31-2018 , DIJB19-2019, Report No DIJB38-2017 Reshaping Care for older people: A programme for change 2011-2021
5. Has any consultation, involvement or research with protected characteristic communities informed this assessment?	The Frailty action plan has been fully discussed with a range of stakeholders and at a public event
If Yes please give details.	
Please give details of council officer involvement in this assessment.	Lynne Morman, Angela Smith, Krista Reynolds, Claire Tester, Jan Laing
(e.g. names of officers consulted, dates of meetings etc)	
7. Is there a need to collect further evidence or to involve or consult protected characteristics communities on the impact of the proposed policy?	NA
(Example: if the impact on a community is not known what will you do to gather the information needed and when will you do this?)	

### **Part 2: Protected Characteristics**

Which protected characteristics communities will be positively or negatively affected by this policy, procedure or strategy?

NB Please place an X in the box which best describes the "overall" impact. It is possible for an assessment to identify that a positive policy can have some negative impacts and visa versa. When this is the case please identify both positive and negative impacts in Part 3 of this form.

If the impact on a protected characteristic communities are not known please state how you will gather evidence of any potential negative impacts in box Part 1 section 7 above.

	Positively	Negatively	No Impact	Not Known
Ethnic Minority Communities including Gypsies and Travellers				
Gender				
Gender Reassignment				
Religion or Belief				
People with a disability	$\boxtimes$			
Age				
Lesbian, Gay and Bisexual				
Socio-economic				
Pregnancy & Maternity				
Other (please state)				

# Part 3: Impacts/Monitoring

1.	Have any positive impacts been identified?  (We must ensure at this stage that we are not achieving equality for one strand of equality at the expense of another)	These developments will have a postiive impact on people who require residential support in Dundee
2.	Have any negative impacts been identified?  (Based on direct knowledge, published research, community involvement, customer feedback etc. If unsure seek advice from your departmental Equality Champion.)	A small numer of people have already chosen to move care home and one resident may be required to move.
3.	What action is proposed to overcome any negative impacts?  (e.g. involving community groups in the development or delivery of the policy or practice, providing information in community languages etc. See Good Practice on DCC equalities web page)	It is hoped to accommodate all affected in one care home with their existing staff
4.	Is there a justification for continuing with this policy even if it cannot be amended or changed to end or reduce inequality without compromising its intended outcome?  (If the policy that shows actual or potential unlawful discrimination you must stop and seek legal advice)	N/a
5.	Has a 'Full' Equality Impact Assessment been recommended?  (If the policy is a major one or is likely to have a major impact on protected characteristics communities a Full Equality Impact Assessment may be required. Seek advice from your departmental Equality lead.)	No
6.	How will the policy be monitored?  (How will you know it is doing what it is intended to do? e.g. data collection, customer survey etc.)	Via the Fraility SPG and management team

### **Part 4: Contact Information**

Name of Department or Partnership: Dundee Health And Social Care Pa	artnership			
Type of Document				
Human Resource Policy				
General Policy				
Strategy/Service				
Change Papers/Local Procedure				
Guidelines and Protocols				
Other				

Manager Responsible		Author Responsible	
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Designation:	Integrated Manager	Designation:	Locality Manager
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Email: angela.smith@dundeecity.gov.uk		Email: jen	ny.hill@dundeecity.gov.uk

Signature of author of the policy:	Jenny Hill	Date: dd/mm/yyyy)	18/06/20
Signature of Director/Head of Service:	Vicky Irons	Date: dd/mm/yyyy)	18/06/20
Name of Director/Head of Service:	Vicky Irons		
Date of Next Policy Review: (dd/mm/yyyy)	31/03/2021		