



MARKET SHAPING STATEMENT CARE HOMES FOR OLDER PEOPLE IN NORTH WALES

2018



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For further information about the market analysis and / or market shaping commitments, please contact:

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Key Summary

WHAT IS HAPPENING NOW

The North Wales Regional Partnership Board plans to deliver on a programme of whole (health & social care) system change in North Wales.

This will contribute to our aims to:

- ✓ Provide enhanced multi-disciplinary support closer to home.
- ✓ Manage the demand for statutory funded care home placements at existing levels over the next 10 – 15 years (despite demographic increases).

WHAT IS EXPECTED IN THE FUTURE

This is anticipated to lead to:

- A reduction in the average length of time (currently 2+ years) that older people live in care homes, as people will only move into care homes when community services (health, housing & social care support) can no longer meet their needs.
- An increase in complexity of need within care homes for older people (we consider supporting people with dementia to be a core element of care home services and not a specialism).
- An increase in demand for nursing placements within 3 – 5 years, particularly supporting people with mental health conditions and / or dementia.
- A reduction in general needs residential care placements, due to increased extra care housing availability and more care and support to live at home (where this is a person's choice).
- Proportionately more end of life care within care homes
- A requirement for service innovation and new models of care within care homes, including step up / step down and 'discharge to assess' services (minimising avoidable hospital admissions and avoiding long term care decisions whilst people are in hospital).
- A potential for higher care home vacancy levels.

WHAT WE NEED FROM CARE HOMES – AND HOW WE WILL SUPPORT DEVELOPMENT

As part of the engagement of citizens in developing the Population Needs Assessment, we asked what concerns people had in maintaining well-being and way of life in older years:

- The most common concern raised was maintaining independence, social & leisure activities (to minimise isolation & loneliness), particularly maintaining existing social & community involvement.
- Another common concern was around choice of services, particularly in rural areas.
- Quality of care was prominent in responses, and being cared for by someone who spoke your language was particularly important for people who have dementia. *Care homes (as other services in Wales) are required to meet the language needs of the population, particularly in regards to providing an active offer of Welsh language information, care and support.*

Delivery of our mission and aspirations will require:

- ✓ Investment in workforce skills development, including in additional training placements and post qualification training for nurses
- ✓ A review of fee methodologies to ensure that care homes are able to offer employment terms that attract and retain a skilled & qualified workforce

Our Mission, Principles and Aims

Our Mission

Our mission is simple:

To help improve the health and well-being of people across North Wales.

But, while our mission is simple, the road to success is complex and challenging. So working together is really important.

The North Wales Regional Partnership Board brings together statutory health and social services organisations with independent sector providers, citizen and carer representatives.

Here's what we are trying to do:

- ✓ Move services towards a preventative model that promotes good health and well-being. This includes more flexible support for (family) carers - the North Wales offer for carers.
- ✓ Deliver 'joined up' services centred on people's needs, preferences and social assets.
- ✓ Make sure people and communities are involved in shaping local services.
- ✓ Help people use their skills and confidence to live independently, backed-up by high-quality, community-based services and facilities.
- ✓ Recognise and understand the broad range of factors that influence health and well-being, including education, housing, welfare, homelessness, economic growth, regeneration, leisure and the environment.

Our Principles

Underpinning this mission and our aims are the following principles:

- **What matters to individuals is at the heart of what we all do.**
- **We offer seamless care, close to home.¹**
- **Range / choice of flexible care & support options to enhance people's own assets and what is universally available within communities.**
- **We look after the workers who look after the people.**
- **Welsh language services are provided – without having to ask.**
- **Social networks matter.**
- **We harness digital and technological developments to underpin modernised models of care and unlock efficiencies.**

Our Strategic Aims for Care Homes in North Wales

We will work with care homes to:

- ✓ Identify the range of circumstances for which we may be unable to help people to remain safely supported at home - which will be the focus for future care home commissioning activity.
- ✓ Confirm models of service in areas where we would promote new development and how we may support or incentivise this.
- ✓ Maximise opportunities for capital investment in care homes across North Wales, including supporting small services (often family-run local businesses) to remain sustainable, which may include planned moves to new premises.
- ✓ Monitor the number of people whose language needs are met / not met within care homes and the numbers of Welsh speaking staff within care homes. *Our bilingual skills strategy is a key element of our Workforce Programme.*
- ✓ Improve the healthcare of older people living in care homes.

¹ We are working towards the revolution called for in the Parliamentary Review of Health & Social Care in Wales

PREDICTING DEMAND IS COMPLEX AND DEPENDS ON A NUMBER OF FACTORS

Across Wales, by 2030 we will see significant increases in the population we consider to be most likely to move into a care home (people aged 85 and over living alone and people aged 65 and over living with dementia).

In addition to demographic factors (age and needs profile for the population), demand for care home placements in the future may be dependent upon a range of factors, including:

- Availability of services providing care and support at home; the domiciliary care sector is increasingly fragile, with significant financial and workforce challenges. The projected increases in numbers of older people with complex needs will also place additional demand on primary and community health services.
- Investment in other housing / accommodation options such as extra care and sheltered housing with support. There are a range of models for projecting demand:
 - In May 2016, just under 3.3% of the population of North Wales, aged 65 and over resided in a care home. Assuming this prevalence remains and based on the future population projections we would anticipate that this will equate to a requirement of 7,619 care home placements by 2030.
 - The Strategic Housing for Older People Analysis Tool (SHOP@) developed by the Housing Learning & Information Network & Elderly Accommodation Counsel uses a series of nationally available datasets to review potential need against current local service supply. This methodology suggests that by 2030, North Wales will require an additional 400 residential care homes places and 2,200 nursing care places.

In North Wales, we have developed a risk based methodology to identify the triggers which often lead to poor well-being outcomes and evidence based interventions to prevent dependence upon managed care and support services (such as care homes).

It was found that most people who receive care and support (either at home or in a care home) had 2 or more complex conditions ('co-morbidities') such as dementia, COPD, heart disease and stroke and continence problems. Older people with a social and family network of support were more likely to be able to remain living at home, whereas people living alone or whose family / carers were unable to continue to provide unpaid care & support were more likely to move into a care home.

Whilst there is a sound evidence base for investment in early interventions that prevent medium to long term requirements for care & support services, commissioners are also mindful of the pressures on funding to meet existing demand for care & support services.

Public Health Wales and health services across Wales will have a key role in promoting behaviour change in order to avoid or delay the incidence of chronic conditions such as heart disease, diabetes, stroke and COPD. However, it may not be possible to calculate or project whether such interventions will reduce the anticipated demand for care homes in the future.

Whilst remaining in 'own homes' is an aspiration, limiting factors will be the availability of workforce, affordability of large domiciliary care packages (to meet complex needs) and capital funding for housing adaptations, equipment and assistive technology.

The rise in demand for care and support services is not anticipated to be matched by Central Government Funding, meaning new approaches will be needed with a greater expectation for all services to evince competence in re-ablement and maximising independence.

STANDARDS OF QUALITY & SAFETY ARE A JOINT RESPONSIBILITY, INFLUENCED BY SERVICE LEADERSHIP, WORKFORCE DEVELOPMENT INITIATIVES, FEES & GOVERNANCE PROCESSES

Overall reviews of quality and safety within care homes across North Wales suggest that:

- There is some excellent person-centred and evidence-based practice; however, improvements in management and leadership, including clinical leadership and access to information & support will be required in order to deliver the required standards of quality & safety in some homes.
- The environmental (building) standards of some homes are not fit for the future. *We want to work with providers to confirm the standards of quality and safety that we intend to commission and explore with them how this affects their business plans.*
- Further work may be needed on understanding links between levels of need (complexity / acuity, including numbers of people meeting CHC funding criteria) and incidences of 'escalating concerns'. *Staffing levels and competences will also be considered within fee methodologies.*

What will we do:

- ✓ ***We are developing quality assurance frameworks linked to service specifications and fee methodologies to ensure the delivery of good quality, safe services within the care home sector.***
- ✓ ***Publish a quality management procedure for commissioned services (incorporating escalating concerns procedures).***
- ✓ ***Address required improvements in standards of quality and safety together with services, providing support for the achievement of (regulatory, contractual and/or safeguarding) action plans***

Market Sustainability

NORTH WALES COMMISSIONERS WANT TO ENSURE SUSTAINABILITY OF FUTURE PROVISION: SHORTAGE OF WORKFORCE AND HIGH LEVELS OF VACANCIES IN CARE HOMES MAY IMPACT ON THIS

Workforce Considerations

Demographic changes projected in North Wales will also have a significant impact both on demand and availability of the workforce (the number of people within the age group representing the majority of the workforce will reduce over time, the workforce is also an ageing demographic group)

Whilst there is some evidence of shortage of care & support workers in care homes, the Wales Social Care Workforce data collection for 2016 details that registered nursing staff accounted for 7% of all commissioned care vacancies in Wales - this ranged from 0% in care providers commissioned by Conwy to 18% commissioned by the Isle of Anglesey (although it is noteworthy that this is a reduction overall for Wales from 10% of all vacancies in 2015).

This report further details that 26% of registered nursing staff in post at the beginning of the year left commissioned care providers in Wales during 2016. Shortages of nursing staff within the NHS will continue to impact on recruitment & retention. However, care homes often benefit from recruiting qualified and experienced care and support staff from the domiciliary care sector.

What will we do:

- ✓ ***Our [workforce development programme](#) will support commissioned services.***

The Profile of Care Homes for Older People in North Wales

North Wales developed and piloted the care home placement census on behalf of the National Commissioning Board in May 2016 which gathered data from commissioning authorities and care homes.

The survey provided data about 90% of the available care homes places in North Wales identifying that there were over 200 care homes (including over 70 care homes with nursing and 24 local authority residential homes) registered to support older people in North Wales providing around over 6000 places:

	Residential	Residential EMI	General Nursing	EMI Nursing	Total	# Residential places / 100 people	# Nursing places / 100 people	Total # of places per 100 people
Anglesey	344	90	124	56	614	2.5	1	3.5
Gwynedd	425	116	408	138	1087	2	2	4
Conwy	516	214	375	143	1248	2.4	1.9	4.25
Denbighshire	576	208	171	149	1104	3.5	1.5	5
Flintshire	309	227	233	44	813	1.7	0.9	2.6
Wrexham	466	339	244	133	1222	3	1.4	4.7
North Wales	2636	1194	1555	663	6048	2.5	1.5	4

The North Wales commissioners spent approximately £93M on care homes placements in 2016/7. The census provided the following information about placements within care homes:

Placements by category of care								
	Number							
	Residential	Residential EMI	General Nursing	Nursing EMI	Total	Self-funder (incl. 302 FNC places)	Placements by LA/LHB outside N Wales	Totals
Anglesey	165	58	33	25	281	160	10	451
Gwynedd	290	68	112	51	521	268	35	824
Conwy	344	41	113	40	538	303	28	869
Denbighshire	177	95	50	29	351	258	17	626
Flintshire	203	149	57	35	444	193	22	659
Wrexham	242	180	40	35	497	208	16	721
Betsi Cadwallader	2	1	755	442	1200		55	1255
North Wales	1423	592	1160	657	3832	1390	183	5405

Source: May 2016 Care Home Placement census

Care Home Vacancy Levels in North Wales

In our May 2016 market census, at least 115 of the care homes had vacancies. There were 430 vacant placements (71 of which were in local authority care homes) with almost half of the vacancies were in homes providing residential care. 20 homes identified over 20% of registered places were vacant.

There may be a number of possible reasons for some of the vacancies, including homes with:

- Shared rooms, where the second 'bed' is only technically vacant but not used.
- Embargoes / controlled admissions due to quality concerns (6 nursing homes and 3 residential homes on census date).
- Ongoing refurbishment, rooms 'reserved' by people on the waiting list; or rooms reserved by people in hospital preparing for discharge. Some local authority homes may have prevented admissions due to ongoing consultation about the future of the home.

What will we do:

- ✓ ***Develop our processes for assessment of 'market' risks at the local & regional level, including working with care homes providers to understand the impact of Regulation & Inspection of Social Care (Wales) Act regulations in respect of shared rooms and environmental standards for new developments.***

Views from Engagement with Care Homes in North Wales

KEY POINTS FROM ENGAGEMENT WITH CARE HOMES (OCTOBER 2016)

- The Frank Knight 2016 Trading Performance Review of Care Homes, showed Wales as the lowest region for profitability in mainland UK (alongside the North East).
- The policy of increasing the threshold at which people have to contribute towards their own care (and thus become funded as opposed to self-funded / private) will ensure that the number of publically funded packages as a percentage of private will increase. This will reduce the amount of fees that care homes receive and may impact on sustainability.
- Care homes are over-regulated, with poor information sharing across statutory bodies.
- The pressure to discharge people from hospitals can lead to unsafe discharges.
- Inability to recruit and retain registered nurses impacts on sustainability and quality.
- Banks are not prepared to lend to homes under 35 places, as they are not considered to be commercially viable.
- Should expect a reduction in care home capacity due to a high prevalence in North Wales of smaller independent home-owners approaching retirement; unable to attract buyers due to banks' lending policy (above) therefore sites being sold to developers for alternative use.
- Having a standard 'average' fee based on assumptions of 30+ bedded homes makes no allowance for smaller homes – one size does not fit all.

We asked 'what may help / support care home providers'?

They responded as follows:

- ✓ ***Assisting providers with planning applications on the grounds of the current gaps in provision, demand and county needs for additional places. Helping providers to utilise any spare land to develop or improve services in any way necessary. Building extensions to existing care home will increase capacity and may reduce administration cost, hence improving sustainability and viability of the homes.***
- ✓ ***Avoiding new venture capitalist organisations building or taking over buildings used as nursing homes (could increase prices, create monopoly, bankrupt small providers).***
- ✓ ***Review the true (full) cost of council homes & cost of care at home in relation to value for money comparisons. Develop an urgent response procedure to react to changes in the cost of running homes or when the providers identify a financial problem.***

Requirements for Future Development in North Wales

There will need to be an increased investment in integrated health & social care & support for people within their own homes; this will include developing access to community services that promote well-being, intervene at an early stage when well-being is compromised and prevent, where possible, or delay, access to managed care & support (including domiciliary care and long term care within care homes).

Whilst these interventions may *prevent* the need for *some people* to move into a care home, it will most likely *only delay* the move for many. It is acknowledged that this results in a reduced length of stay in a care home. Consequent higher levels of complexity of need (acuity) of the population resident within care homes will require investment in workforce development and support.

Although few people have to move into care homes outside of their home area through lack of provision, commissioners are concerned about the likelihood of further home closures due to workforce shortage and sustainability of homes carrying significant vacancies. It is also clear that some homes cater mainly for self-funders and offer few placements to statutory commissioners.

There may need to be a rationalisation of provision across North Wales; for example, in some areas there is a shortage of residential care provision and in others there is an over-supply - this will require joined-up strategic development to ensure that home owners are aware of projected future demand and that commissioners and owners work together to develop the workforce to meet the anticipated needs (dementia and complex physical health conditions).

The Isle of Anglesey and Gwynedd Councils are working with the Health Board to explore how local authority care homes could work with community health staff (nurses & therapists) to meet more complex needs in the longer term.

Local commissioners would value opportunities to discuss requirements for development with any interested parties; contact details are provided for discussion with lead personnel in councils & Health Board for each county.

Local Contacts

The Isle of Anglesey: Dafydd Bulman, Business Manager: dafyddbulman@ynysmon.gov.uk

Gwynedd: Rhion Glyn, Business Manager: rhionglyn@gwynedd.llyw.cymru & Erin Jones, Category Manager: erinfonjones@gwynedd.gov.uk

Conwy: Catrin Perry, Section Manager - Independent and Third Sector Relationships: catrin.perry@conwy.gov.uk

Denbighshire: Alan Roberts, Team Manager – contract management: alan.roberts@denbighshire.gov.uk

Flintshire: Nicki Kenealy, Contracts Manager: Nicki.j.Kenealy@flintshire.gov.uk

Wrexham: Helen Bainbridge, Head of Service for Older People: Helen.Bainbridge@wrexham.gov.uk; & Jo Ward, Team Manager – commissioning & contracting: jo.ward@wrexham.gov.uk

Betsi Cadwaladr University Health Board: Will Williams, Head of Complex Need Commissioning: Will.Williams@wales.nhs.uk

Proposed Development Programme

The Regional Partnership and/or Commissioning Boards will publish a delivery plan to underpin this market shaping statement

Supporting Information

North Wales Social Care & Community Health Workforce Strategy 2018 – 2021

The North Wales Workforce Board reports to the North Wales Regional Partnership Board and provides oversight on a range of strategic workforce areas.

The overarching priorities for the North Wales Workforce Board include:

- Stabilising the workforce.
- Learning and development.
- Workforce intelligence and planning.

The Strategy sets out the collaborative strategic commitment for the social care and community health workforce and was developed with organisations across the health and social care sector. The Strategy received approval from the North Wales Regional Partnership Board in February 2018: <https://www.northwalescollaborative.wales/workforce/>

Population Assessment

In April 2017, the six North Wales councils and Betsi Cadwaladr University Health Board (BCUHB) supported by Public Health Wales published an assessment of the care and support needs of the population in North Wales, including the support needs of carers in order to meet the requirements of the Social Services and Wellbeing (Wales) Act 2014:

<https://www.northwalescollaborative.wales/north-wales-population-assessment/>. This aimed to improve understanding of how the population may change over the coming years to help provide better public services in North Wales.

Population Assessment Regional Plan (2018 – 2023)

In April 2018, the six North Wales' councils and Betsi Cadwaladr University Health Board (BCUHB) supported by Public Health Wales published the regional plan:

<https://www.northwalescollaborative.wales/north-wales-population-assessment/regional-plan/>.

This plan highlights the need for quality nursing home and care home provision and strategic commissioning of care homes.

For further information about the market analysis and / or market shaping commitments, please contact:

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