

PROJECT DOCUMENTATION

OUTLINE BUSINESS CASE

Technology Enabled Communities

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1. Purpose of document

Adult and communities directorate has ambitious plans to promote wellbeing, protect vulnerable people and manage future demand for formal adult care services, through new community partnerships. Our “Talk Community” programme is an all-encompassing approach to working with Herefordshire’s communities. This Outline Business Case describes the potential role for technology to support those partnerships.

2. Project aims and objectives

Aim: Progressing to a proactive, personalised and predictive approach to technology enabled communities.

- To develop a proactive approach to technology enabled living, moving from a reactive ‘monitoring and response’ provision to the provision of technology enabled living that is personalised, proactive and predictive
- Enhance the use of existing technology within the home and within communities to support wellbeing
- Enabling self-care and wellness to enable people to take an active role in managing their wellbeing with positive lifestyle choices
- Reassurance to family, friends and carers and supporting independence for longer
- Keeping users engaged in their community, fostering social inclusion across the county

3. Background

The directorate concluded a comprehensive review and redesign of adults social care pathways in 2017 and re-launched its services based around a model of strengths based social work practice. This approach;

- Focuses around the individual and their family/carers
- Begins with people’s interests, aptitudes and what they can do for themselves.
- Explores what the person could do with the right opportunities and support to maintain or increase their independence
- Identifies the current and potential role of the carer and their support needs
- Focuses on informal support and opportunities in the person’s local community in creating a support plan.
- Is supported by signposting and information services and a rich network of informal and volunteer based support throughout the county.

The strengths based approach contrasts with a traditional model of social work practice which is more focused on “deficits”; what people cannot do and the problems they have. This traditional approach tends to lead solely to offers of formal care.

However, whilst the directorate has achieved reductions in care there still remain opportunities to develop the use of technology to support the wellbeing of individuals and their communities. Adult Social care currently relies upon a reactive call monitoring service based on an event alert and emergency response. The council needs to move away from this traditional response model to a predictive and preventative support model based on stronger data metrics and information being sent out to the client or family so they manage their own wellbeing rather than waiting for something to go wrong.

Commissioners are looking at how it aligns its services to a streamlined proactive approach and needs to invest in this area to progress. This will require movement away from a linear model that treats the service user population as a homogeneous group receiving the same benefit to a new model that treats the user population as a diverse group, intensifying care for people with risks or vulnerability and avoiding excessive protection that can create dependency.

This event sits within the Communities & Practice Model work-stream as part of the development of the Talk Community initiative. It also links with the council's Digital Strategy, Technology Enabled Living Strategy and associated technology pilots currently underway.

Premise

Care and support services have been slow to take advantage of developments in digital technology despite the wider demand for it. Given the significant capability advantages that digital offers over analogue technology, the change to digital from analogue is a key driver for these services to use technology to make a greater difference to peoples' lives.

Challenges – Social Care & Well-being

Currently in Herefordshire, Technology Enabled Living is almost exclusively provided using traditional landline in the home technology which is based on analogue rather than digital technology. These lifelines will be effectively redundant when the switch to digital telephony from analogue telephony takes place and completed by 2025. There is therefore a timescale for the council to ensure that their services will work correctly in a digital-only environment. This switch is happening now: Some areas are already installing digital telephone systems.

Challenges - Technological

Broadband coverage in Herefordshire is currently only at 85% and is unreliable for a service that needs to be always on/always ready. Mobile telephony relies on a mobile signal which is not generally available in our rural county and when available may not have a signal strong enough to carry the required data. **56% of Herefordshire's telecare users do not use the internet at home (2019 survey).**

Outcomes – Technological

Alternative solutions to expensive broadband internet connections may be available in the form of lower cost Long Range Wide Area Network (LoRaWAN) – which can provide data connections via a series of

antennae. Typically, LoRa masts transmit 10 kilometres from mast to mast until they find a broadband/internet mast. The more open the landscape the farther the signal can travel. LoRaWAN is not an alternative to broadband but could be utilised by lifeline manufacturers to send data packets via servers that could then be passed through to family/responders/clinicians etc. without the need for a broadband connection in the home.

LoRaWAN carries small data packets – 50 bytes at a time – but they can be both ‘always on’ and carry data scheduled for a particular time - so a wide range of sensors can be linked to the network. This means that the network can carry alarm/events (falls/pendant alerts), and movement sensors etc. but also can also be used to send data on a regular basis (so for example health data metrics can be carried, as can temperature/humidity and environmental controls (doors/windows/lights). Pendants can have LORA enabled GPS capability – so one alarm sensor can be worn inside and outside the house.

Outcomes – Social Care & Well being

The delivery of county wide digitally enabled information, advice and connectivity is critical to making full use of the possibilities provided through the Talk Community initiative.

Traditional analogue networks are limited to reactive protocols, which means that these networks are not capable of enabling the proactive monitoring of number of different devices, for example:

- Motion and pressure sensors to indicate functional independence
- Appliance usage to monitor nutrition and hydration
- Physical and virtual contact to monitor social isolation

The move from analogue to digital over the coming years should help Herefordshire Council to drive the direction of travel from ‘Monitor, Alert & Respond’ to ‘Connect, Predict & Prevent’. Whereas the data traffic in the current model almost exclusively comprises alerts raised in properties being sent inwards to a call handling centre, LoRaWAN has the potential to enable Herefordshire to move towards the model more prevalent in Europe; where call centres, clinicians, practitioners and the like send out targeted information, and data metrics to individuals, their families, and their sources of community support. In Spain, over 80% of the data traffic emanates outwards from the call centre in this way.

More intelligent proactive systems alongside a focus on people and process will enable Herefordshire Council to commission services that enable risks to be reduced through areas such as smart sensors, physiological measurements and lifestyle monitoring to enable proactive interventions based on more advanced data analytics.

Outcomes – other (wider)

The development will align with the Herefordshire and Worcestershire STP Digital Strategy, and both the emerging Herefordshire Council Digital Plan and the Technology Enabled Living strategy to maximise digital technologies to support physical and mental health and wellbeing among the wider population and support staff to provide efficient and joined up care. There are associated positive outcomes relating to Community Safety including ‘Safer Streets’ and support to staff and volunteers who are lone working

Project Drivers and High Level Issues

- The national move from Analogue to mobile/Digital technologies now underway with a planned completion date of 2025
- Moving from reactive support to proactive support designed to prevent and manage demand (*Predict and Prevent* not simply *React and Respond*)
- In the delivery of social care reshaping social care delivery by moving from '*Just in Case*' support to '*Just Enough*' support

High Level Metrics

- The TECS Services association (TSA) quotes an average saving of 1.5 hours per week through using technologies in the assessment of care. Herefordshire Council commissions nearly 11,000 hours of care delivery per week to over 750 customers at any one time. Additionally around 550 people receive direct payments to purchase their own care. Using technologies in the assessment of care alone and thereby reducing care costs even by the average would reduce commissioned care costs and direct payment costs by around £250k per annum.
- Over 1,600 people currently use the council's telecare service which is provided through a flat rate charge and which is treated as an eligible expenditure for the financial assessment undertaken for charging for care. Around 70% of telecare service users do not receive care from the council and surveys have shown a willingness to pay for the peace of mind that telecare brings. Talk communities is a population wide programme and the technology workstream would support the whole population through the provision of targeted information and advice, personalised data metrics and support.

4. Scope

Included in Scope

- Re-design of the 24 hour call handling/monitoring service to a more proactive model of 'Predict and Prevent'. To include:
 - Support in emergency situations including social and health emergency situations
 - Extension of the environmental and personal sensors use for domestic and personal adverse events early detection (gas leaks, water, fire, falls, movement, medication, epilepsies crisis, enuresis, etc.) Safety/security sensors
 - Continuous remote monitoring to define activity patterns and increase predictive capabilities
 - Support in loneliness situations
 - Appointment Scheduling & Reminders
 - Follow up: proactivity
 - Advice and information
 - Prevention campaigns

- Support to carers
- Active and Healthy Ageing Promotion
- Mobile Telecare with geolocation.
- User's stratification and personalisation
- New model for operations management and service delivery.
- Continuous innovation

And potentially:

- Integration between telecare platforms and Electronic Health Records.
 - Definition of processes and protocols for integrated health and care pathways, transitional services and referral processes,
 - Remote tele-diagnostics, Remote tele/video consultation
 - Physical and functional Tele-rehabilitation
 - Cognitive Tele-stimulation
 - Clinical telemonitoring programs for people with chronic diseases.
 - Special protocols:
 - End of life telecare.
 - Abuse prevention.
 - Suicide prevention.
 - Contingency and major disasters management
- Long Range Wide Area Network (LoRaWAN) – which can provide data connections via a series of antennae at a lower cost than broadband and with easier access in rural areas.
- Outcomes of current technology pilots including:
- technology enabled wellbeing hubs
 - evidenced based reablement and assessments
 - falls prevention through predicting frailty and promoting self-care
 - falls prevention through falls recognition and analysis
- Emerging Digital Technologies

Out of scope

Using the internet to communicate with the council

5. Stakeholders

Adults Capital Board

Prevention and support lead

Procurement

Finance

Herefordshire residents

Adults & Communities commissioners

Public Health

Health: WVT and CCG

Fastershire

Technology Providers (tbc)

Talk Community project lead

6. Constraints and dependencies

Initiatives which depend on this project are:

- Engagement with communities

- Outcomes of pilot technology projects

- Future design of Technology Enabled Living service

This project depends on engagement from all areas of the council as well as the identified external stakeholders and partners

7. Budget provision

The Capital budget

8. Estimated costs and assumptions

An investment of £1.5m

- £0.3m for LoRaWAN network to complement broadband access and provide data metrics
- £1.2m for technologies within the home and wearable technologies, linking family, communities and professional staff to carry personalised and targeted information, advice, and data metrics to inform wellbeing & support self -management (tbc will require further development once pilots are complete)

9. Benefits

Cashable benefits

Technology Enabled Care (Telecare) in the home is a chargeable service at flat rate under the Care Act. The rate of charge will be a matter for further debate and public consultation when the service re-design is ready for offer.

Non-cashable benefits

Increased intelligence of technologies which improve the quality and efficiency of health and social care delivery to support people to maintain their well-being, maximise their independence and reduce their need for the delivery of intrusive care and support services.

This will be demonstrated though:

- Demand management in the medium to long term. Reducing overall frailty levels will help manage demand for social care.
- Reduction in the need for care packages: Studies show that widespread deployment of technologies can achieve significant financial savings in the provision of social care to older people. The scale of savings achievable in the event of full-scale implementation is likely to be in the range of 7-20% of total budget.(Investing to Safe: Assessing the Cost-Effectiveness of Telecare |(May 2012)
- Prevention of hospital admissions: Herefordshire's technology enabled falls responder service already demonstrates significantly lower costs per head of population in ambulance call-out and admissions to A&E than a neighbouring comparator council without such a service. Studies have shown that a fall leads on average to a 37% increase in social care costs. In Herefordshire reducing falls through a technology enabled Predict and Prevent approach to augment the current React and Respond approach could avoid an anticipated rise of £500k in annual adult social care costs alone.
- People generally remaining well, active and independent, in their own home, for longer
- People feel safe without removing their autonomy
- People are engaged and consulted in their own care requirements helping to direct and feedback on how they receive the care and support services.
- Vulnerable people making less use of formal care due to support by informal carers and community.
- Improvements to joined-up operational delivery between the council and NHS partners to enable people to stay well and live independently through shared leadership, investment and co-ordination.
- A reduced risk of re-admission to hospital.
- Improved knowledge about wellbeing, vulnerability and community capacity.

- Improved client/family/community carer satisfaction with the service provided by Herefordshire Council.
- A more targeted workforce
- Reducing the carbon footprint through less staff travel across all social care (and health) service delivery streams

10. High level timeline

Phase 1: Improving the digital network

Phase 2: Redesign the support and service model

Phase 3: implementation and new offer to residents

11. Risks

The key risks of not doing the project are:

- Potential increase in demand as ageing population grows and becomes unsustainable
- Fail to meet the digital switch over, therefore even the status quo will not work from 2025 onwards
- The risk of not going ahead with this shift in the delivery model of care and support is that Herefordshire will continue to provide only basic 'reactive' telecare solutions responding only when an emergency alert is raised. Adult social care will continue to be provided in 'traditional' ways that do not take advantage of the information that can be provided through technology and data metrics to enable people to manage their own well-being, and to contribute to, and benefit from their communities.
- Opportunities for efficiency savings in the delivery of social care and cost avoidance through demand management will be missed and the difficulties that people experience in accessing support due to the gaps in broadband and mobile telephony provision will remain.
- Failure to invest in the Talk Community technology work stream will mean missing the opportunity, identified within the draft TEL strategy to support people, professionals and the wider population across all four levels of service delivery: Reactive/alerting – Proactive – Preventative – Predictive leaving only reactive, alert-based telecare being provided.

The key project risks are:

- Redesign of service and support models do not make best use of the possibilities allowed through the use of digital technologies.

12. Appendices

PROJECT DOCUMENTATION

OUTLINE BUSINESS CASE

Bringing Empty Properties back in to use

Release: Draft/Final

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Author: Strategic Housing Manager, Strategic Housing

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13. Purpose of document

To outline the business case for capital funding to assist in bringing empty properties back in to use in Herefordshire. The Empty Property Officer has limited powers unless legal action is taken, however a small amount of funding could encourage a property owner to release their property which would assist in providing temporary accommodation to meet the needs of homeless families.

14. Project aims and objectives

The links to the draft corporate plan:

- Get the right mix of houses for our communities
- Create environments that make wellbeing inevitable
- Encourage younger people to build their lives here
- Invest public money wherever possible

The specific project aims are to:

- Bring empty properties back in to use with a focus on long term empty properties
- Increase available housing for local people
- Reduced spend of the Housing Prevention fund
- Reduce reliance on Bed & Breakfast as temporary accommodation
- Community regeneration – improves community wellbeing and pride
- Reduce complaints received by the Environmental Health team
- To discourage anti-social behaviour and crime

15. Background

Following a number of complaints received about abandoned and empty properties in Herefordshire the Council Tax department have provided revenue funding to recruit a full time Empty Property and Development Officer. The officer will provide advice to owners on how to sell, rent, repair or convert the property to another use but has very limited powers unless the legal route is pursued. Capital funding could be used to upgrade a property and take ownership of it to be used as temporary accommodation for a set period of time.

Empty homes are not only a wasted resource, they can also cause nuisance and environmental problems. Empty homes can be a focus for increased levels of crime, vandalism, anti-social behaviour and drug-abuse. They can also represent a potential housing resource that may be currently underutilised. Bringing empty homes back into use can help address a number of housing and social issues by increasing supply in areas where there are housing shortages and pressures and where this is an opportunity to link suitable empty homes with housing need.

It is essential that all Local Authorities have effective measures in place to deal with these issues and comprehensive empty homes strategies which contribute towards local strategic planning.

Empty Properties can also have a damaging effect on the local community and economy and can have significant impacts on the owners.

- Loss of income from rent or a capital sum from a sale, as well as costs for Council Tax, insurance and maintenance.
- Empty properties are more at risk of vandalism or fire and therefore cost more to insure.
- They pose a threat to adjoining properties through damp or infestation.
- Empty homes in disrepair can reduce the value of surrounding properties by up to 18%

To help address the growing problem grant could be used to assist with:

- Properties that are currently empty
- Properties that need to be brought back to the repairing standard
- Properties that need Electrical Rewiring/Upgrade
- Properties that need Window Replacement
- Properties that need Heating or a Heating Upgrade from Night Storage Heaters
- Properties that need a Boiler Installation

The grant would not be available for cosmetic work including new kitchens, bathroom suites, and floor coverings.

15.1. Project Drivers and High Level Issues

Strategic Housing have a statutory duty to keep the condition of housing stock in the county under review and identify any actions that may need to be undertaken.

- 286 Long term empty property as of September 2019
- 35 properties empty in Hereford city
- The use of Bed & Breakfast use has increased

16. Scope

16.1. Included in Scope

- Opportunity to increase housing supply
- Regeneration of communities
- Reduction of prevention fund

16.2. Out of scope

- The council do not own any of the properties

Please see below stakeholder matrix:

- Property Services

- Finance
- Herefordshire residents
- Strategic Housing
- Housing Solutions
- Housing Associations
- Environmental Health

17. Constraints and dependencies

17.1. Initiatives which depend on this project are:

This project can operate independently with no dependencies on other projects.

17.2. This project depends on:

The project will depend on the co-operation of the general public

18. Budget provision

The majority of the funds to come from Herefordshire Council with some potential for match funding bids.

19. Estimated costs and assumptions

A grant level could be set per bedroom of the Empty Property, research shows that an average rate per bedroom is an acceptable level to get owners into discussions with Local Authorities.

20. Benefits

20.1. Cashable benefits

- Reduced Prevention fund spend
- Reduced need for temporary accommodation/ Bed & Breakfast

20.2. Non-cashable benefits

- Ability to reduce housing duty
- Increased housing supply
- Able to meet the needs of local residents

21. High level timeline

1. Recruit Empty Property Officer (December 2019)
2. Council Tax records accessed and owners written to (Jan 2020)
3. Empty Property Strategy drafted (March 2020)
4. Empty Property Strategy implemented (June 2020)
5. Continual discussion with property owners (ongoing)

22. Risks

22.1. The key risks of not doing the project are:

- Area regeneration could be affected
- Increased levels of anti social behaviour
- Encourage squatting

22.2. The key project risks are:

- *If the Empty Property Officer is successful then not enough budget – this will only be known once monitoring processes are put into place*

23. Appendices

Appendix 1 – Costing breakdown

Appendix 1: costs breakdown

Capital cost of project	2020/21	21/22	22/23
	£000		
Herefordshire Council Capital - EP Grants	200	300	300
TOTAL	200	300	300
Overall Total	800,000		

PROJECT DOCUMENTATION

OUTLINE BUSINESS CASE

Care home/extracare development

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Author: Head of Care Commissioning

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24. Purpose of document

This business case aims to scope the potential for the council to develop either its own care home and/or an extracare type scheme.

Many councils are now considering or are developing their own schemes and bringing services in house for a multitude of reasons but mainly due to the lack of provision or high costed placements.

Adult social care commissioners also see these potential developments as an opportunity to enter the care market and support all clients including those self-funding their care.

This business case outlines a proposal for the local authority to scope and potentially build and develop its own care home and or extracare scheme which will be purpose built and sympathetically designed for people with dementia.

The council needs to do a comprehensive analysis and options appraisal to inform a decision on a detailed return on investment proposal.

Development and project management costs are only indicative figures at this stage based on research and information gathered to date and therefore should only be used as an illustrative cost at this stage. The purpose of this document is to raise this option and for it to enhance further works and discussion on whether the council should proceed with any developments.

25. Project aims and objectives

Aim: To scope the potential development of a large 60 -70 bedded care home and or extra to meet the needs of those with the most complex need, offering choice into the market to meet longer term accommodation needs.

Objectives:

- Increased bed capacity in the market to support complex care needs
- Reduction in the need for care home bed provision through additional extracare beds
- Reduction in out of county placements
- Reduction in DTOC
- Reduction in spend on care home placements
- Return on capital investment
- Lead in the market for the use of innovative technology

26. Background

Adult social care over the previous 5 years has managed demand and along with its aim has supported and will continue to support people to remain at home for as long as possible.

The strategic focus will always be that home is best, however for many reasons this is not always possible and alternative accommodation provision maybe required.

The council has a duty to ensure it meets eligible needs and develop the market to enable it to be a strong resilient market providing choice and quality under the Care Act 2014.

Herefordshire has a high number of self-funders within the market which can create a challenge to purchase placements or find suitable accommodation in county. Self-funders will pay a higher rate for care and therefore will have more choice, this enables Providers being able to choose who they accept as within their homes.

Adult social care spend for care home placements was in the region of £24m in 2018/19. The council operates a 'usual price' for Older Persons placements. A proportion of placements are above this rate and sometimes people are placed out of county to meet need.

Increasingly other local authorities are either considering, or are now developing their own provision and taking services back in house to varying extents as it is recognised that the market is not meeting the needs of its most vulnerable clients and in particular those who need adult social care funded placements.

Commissioners would request that the council supports the concept of developing and owning either a care home and or extracare scheme. Further work is needed to consider a full cost benefit analysis and potential options for service delivery in the future. This would include a request for revenue to commission market specialists who could develop an options appraisal for potential commercial opportunities if the council were to proceed with any significant capital investment.

Current context:

- By 2039 it is estimated that counties 85 years and older will grow by 140%. There is recognition that the system is near a 'tipping point' and there is now a need to reconsider if the use of direct public sector provision for meeting the highest end of needs of older people's care would be the most viable model in the near future. The proposal is for the Council to develop additional and affordable nursing home capacity of around 60 beds and or a care home targeted to those areas of the county where supply is weakest and the rise in costs of new placements most pronounced. This could either be an external care provider or a Council owned Local Authority Trading Company (LATC). The site would be developed to offer a high-quality care environment maximising the use of advances in technology to support the needs of residents.
- Currently 85 care homes are in county registered with the CQC, of these 21 are Medium/Major regional providers. The Council/CCG hold individual contracts under the joint Agreement (Unified Contract) with 300 care homes which will include out of county homes.
- The Council currently supports 864 older people to meet their assessed eligible social care needs in a care home: 60% are in a residential home and 40% in a nursing home.

- In 2018/19 the annual spend for residential care was £17.9m and nursing care £8.1m. The council operates a 'usual price' for Older Persons placements. However, there is pressure from care homes on the bed rates.
- Getting people into a care home at a reasonable cost can be extremely difficult and takes officers a lot of time to negotiating. This can result in delays from Hospital, residents being placed in out of county homes and inevitable fee disputes with care homes.
- Whilst commissioners continue to do a lot of work with the market, the high self-funding market puts additional pressure on social care with self-funders paying much higher rates.
- At the present time 11% of placements are in homes outside of the county, this can, however, be for many reasons.
- Every month on average 30 new placements are made into care home settings and on average 30 placements end, with the number of people supported remaining broadly static. The average length of stay is 1.7 years in residential care and 1.6 years in nursing care.
- There are 85 private sector registered care homes in Herefordshire providing a total of 2,060 beds, just over a third of all care homes (36%) are located in the Hereford & surrounding area, just under a quarter (23%) are located in each of the north and south Herefordshire areas and just under a fifth were located in the east Herefordshire area.
- The CQC rates 15.5% of Herefordshire residential and nursing homes as 'requires improvement' or 'inadequate'. This is in comparison to a West Midlands figure of 20% and a national figure of 18%.
- It is expected that future demand will see an increase in the base number of people by 26% over the next 10 years, an increase of 314 people, indicating a rise in the demand for care homes, more specifically complex care nursing homes. With the increased focus of health and social care policy to support people to remain as independent as possible in their own homes, this means that care homes are now usually only utilised for those with the very highest needs, including dementia, frailty and often a complex set of co-morbidities.
- Securing placements at the usual price; securing in county complex care; workforce issues (recruitment & retention) particularly nursing staff; high number of self-funders helping to drive up placement costs and reducing negotiating opportunities. Viability and sustainability of small care homes are also a concern with a high proportion of small to medium homes which are not purpose built.
- Work continues to progress Hillside into a potential 25 bedded care home, however it is recognised that this is a small home and any scope for additional beds on the site is limited.

Extracare

- A range of accommodation is required to meet the needs of the counties ageing population

- and extracare schemes can offer an environment where people can remain independent whilst having the security of support on site and their own 'front door'.
- The council has 3 versions of extracare schemes including Rose Gardens, Leadon Bank (owned by the council and leased on long term contract to Shaw) and Henfford Gardens.
- The council has another two versions of extra schemes within planning which will increase the number of available units to 180 over the next 10 years so this will need to be taken into account in any further analysis of need.
- Current services are being utilised and capacity is generally used.
- The scheme could also support not just an ageing cohort but potentially people with a learning disability where we know they could live independently and your 'own front door' is the preferred model of delivery.

High Level Metrics

Adult social care pays a significant amount of its budget on care home placement and increasingly the market responds with increasingly costly placements. Adult social has a duty to meet eligible needs and to manage the market effectively.

- Predicted 140% increase of those aged 85 and above over the next 20 years
- Increasing number of out of county placements
- High cost or failure from market to support individuals with complex needs
- High number of self-funders in the market
- Delayed Transfer Of Care (DTC)
- Increased capacity in the care market with specific a purpose built building
- Improved value for money compared to spot purchased placements
- Increased use of technology and innovation to support people and reduce the need for workforce
- Upskilling the workforce and leading by example to ensure innovation, quality and dignity.

27. Scope

Included in Scope:

- Current care home market
- Potential demand on services
- Buildings owned by the council
- Sites currently owned by the council
- Opportunities to buy existing buildings
- Current extracare models
- Other commissioning and contractual options

Out of scope

- The council will not run the services

28. Stakeholders

- Commercial/consultants
- Adults Capital Board
- Procurement
- Finance
- Herefordshire residents
- Adult social care commissioners
- Public Health
- Health Wye Valley Trust
- Herefordshire and Worcestershire CCG
- Providers

29. Constraints and dependencies

Initiatives which depend on this project are:

- Hillside development

This project depends on:

- Commercial feasibility report
- Agreement to capital investment
- Political support to develop in house services

Does this project depend on engagement from certain areas of the Council or external stakeholders or partners?

Providers, cabinet members, property services, health, CCG and finance

30. Budget provision

Revenue will be required to commission commercial consultants to produce a fully costed options appraisal for the council before a final business case is submitted.

31. Estimated costs and assumptions

32. Please note this is just an estimated figure.

A previous extracare scheme cost in the region £14m for 91 units 10 years ago.

Commercial estimates for the development of a care home are said to be in the region of £110,000 per bed therefore a 60 bedded unit could cost in the region of £6.6m which is line with other similar scale builds in other local authority areas. However this does not include potential land purchase, site clearance, fixture and fittings and project management costs associated and any of costs associated with its development and any start-up costs.

Therefore the request, if the principle of scoping the options are supported, is to mark a potential £14m with the expected total cost to come under this figure.

33. Benefits

The anticipated benefits of the proposed project are listed below:

Cashable benefits

- Reduced placement cost
- Reduced need for care home placements
- Income from placements including those who self-fund their care

Non-cashable benefits

- Reduced delays in hospital
- Increased capacity within the market
- Able to meet the needs of residents

34. High level timeline

Detail planned stages for the project and anticipated major deliverables at each stage

Until the final options are considered it will be undertaken in 3 phases:

Phase 1: Commission specialist commercial consultants to scope options and develop a comprehensive feasibility paper with detailed costed options by December 2019 (subject to agreement on spend).

Phase 2: Develop full business case by April 2020

Phase 3: Initiate development 2020/21

35. Risks

Risks are potential threats that may occur but have not yet happened. Risk management will monitor the identified risks and take any remedial action should the risk happen.

The key risks of not doing the project are:

- *Potential increase in demand as ageing population grows and becomes unsustainable*
- *Current care homes being sold and old buildings not fit for purpose*
- *Needs not being met*
- *Reduced capacity in the market*
- *Limited choice of accommodation*

The key project risks are:

- *Resource to progress the project(s)*
- *No revenue to commission Commercial consultants to do a detailed options appraisal to inform final proposal*

36. Appendices