

Report of the Strategic Director of Health & Wellbeing to the meeting of the Executive to be held on 6 June 2023

Subject:

Updated business case to build a new care home facility in Saltaire

Summary statement:

This report is further to a decision taken to approve a new-build care home facility at Executive in October 2021. The report revisits the business case and requests additional resources, given the rising costs of inflation and subsequent finding of underground mine-workings on the Saltaire site, which will need ground remediation works. The report also proposes the closure of one older care home.

EQUALITY & DIVERSITY:

A full equality impact assessment was undertaken as part of the original report and has not changed since the original decision taken in October 2021.

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Portfolio: Healthy People and Places

Overview & Scrutiny Area: City of Bradford Metropolitan Area

1. SUMMARY

1.1 This report proposes to build a new care home facility in Saltaire to provide short-stay beds for older people in need of respite or leaving hospital, allowing the planned closure of two small older short-stay homes that are no longer fit for purpose. This is in line with enhancing partnerships and integrated service provision to support older people (including people living with dementia) to remain independent for as long as possible and have choice and control about how they live their lives.

2 BACKGROUND

- 2.1 The Council Executive approved the establishment of the Great Places to Grow Old Programme at the meeting held 15 January 2013. The Health and Wellbeing Department's "Home First Our Vision for Wellbeing" was approved by the Council Executive on 4 April 2017. Its aim is to reduce demand for paid for social care services by helping people early, where we will try to prevent minor issues developing into major concerns. The vision aims to build support around people so they can be more independent and will focus on what people can do rather than what they cannot do.
- 2.2 The Care Act 2014 introduced duties on local authorities to commission sufficient services to meet the needs of people with social care needs. Councils must have regard to capacity and quality in the local care market, future needs of the local population and market shaping responsibilities through new policies.
- 2.3 An outline plan for the council-owned land in Saltaire (the former Neville Grange Care Home site) was drafted and has been included in the Community Beds Strategy for Bradford. The site can accommodate a 50 bedded residential unit, made up of five, 10 bedded suites which will be built to the same specifications and standards of the recent build at Valley View, Oakworth.
- 2.4 The scheme will be specifically designed to support people who are living with dementia and their families providing short-term care in partnership with health services to rehabilitate and support people back in to the community. Evidence shows that intermediate care can deliver better outcomes for older people and reduce recovery time; helping people to remain independent and helping avoid people going into hospital or residential care unnecessarily. Bradford District is currently one of the highest performing areas in the country on assisting people to leave acute hospital in a timely way.
- 2.5 The proposal is that two older council care homes (providing 62 beds in total) which provide short-stay beds and are no longer fit for purpose buildings will be closed. The council has not been offering long-stay residential beds in council care homes for the past four years and the numbers of long-stay residents placed in council homes before that time is reducing every year. Any long-stay residents living in the two homes that will close will be offered a full care assessment and a place at the new home or an alternative home of their choice.

- 2.6 Since the last Executive report in October 2021, the fabric of the building at Woodward Court in Allerton has deteriorated further and caused concern for the safety of the residents staying there short-term. No new admissions have been made to the home since March 2023 and all other short-stay residents have moved home. Care staff have been deployed elsewhere in the council's services pending a formal decision by the council's Executive. It is proposed that no further monies are expended on Woodward Court and the building is formally closed and the asset disposed of or found an alternative use for.
- 2.7 Immediate closure of Woodward Court would reduce the overall number of short-stay beds available by 28 (from 184 to a total of 156 beds) across the District. The commissioner's analysis is that this is acceptable given more people will be seeking intermediate care services in their own home in future.
- 2.8 Recent national and local consultation exercises have confirmed that people's preference is to return home directly after a stay in hospital wherever possible, but that provision is made for people with dementia who may need longer to adjust and be assessed when they have had time to recover. Changes have taken place to the Norman Lodge short-stay home to enhance staffing and make some physical changes to the building to ensure the overall bed-base can meet these expectations. The closure of Woodward Court is therefore not expected to affect people's experience or system performance. It is assessed as low risk to protected groups in the equality impact assessment.
- 2.8 Upon closure, the two older care homes would be transferred to the council's asset management team for disposal and the Council will realise the capital receipt from those assets. There will be a revenue saving of approximately £904k per annum as a result of moving from two care homes to one and having savings through an efficient new building. The capital receipts could potentially be used the repay the funding.

3. OTHER CONSIDERATIONS

- 3.1 The proposed plans are supported by partners and are included in the Bradford Community Beds strategy. The continued provision of Council managed residential beds is required as an essential component to the out-of-hospital services which reduces unnecessary admissions to hospital and reduces delayed transfers of care from hospital. This is evidenced by Bradford's current good performance on delayed transfers of care.
- 3.2 This project delivers on the Bradford Council Plan 2021–2025 "Better Health, Better Lives" we will help people from all backgrounds to lead long, happy and productive lives by improving their health and socioeconomic wellbeing and "Creating A Sustainable District" by making it easier for individuals, households and businesses to adapt, change and innovate to address the challenges presented by climate change.
- 3.3 The project also delivers on the "Joint Health and Wellbeing Strategy for Bradford and Airedale 2018–2023", to connect people and place for better health and wellbeing", in particular contributes to the following outcomes:
 - Outcome 2 People in Bradford have good mental wellbeing.

- Outcome 3 People in all parts of the District are living well and ageing well.
- Outcome 4 Bradford District is a healthy place to live, learn and work.
- 3.4 The project also directly delivers the "Better Care Fund Plan" the Saltaire Resource Centre will ensure that we can deliver the right level of short term bed provision required to achieve the metrics outlined.

4. FINANCE AND RESOURCES

- 4.1 In the Executive report from October 2021, the estimated capital cost of building the Saltaire Care Facility was £9.346m. Since that date, underground mine-workings have been discovered under the site which require remedial action whether the care facility is built or not. The cost of these remediation works (filling with concrete) is circa £900k including a risk allowance. In addition, inflationary pressures on building materials and labour costs have added £1.5m to the original budget. A 15% risk allowance has been included at £1.5m.
- 4.2 The projected cost of the build, inclusive of risk allowance, is now £13.379m an increase of £4.033m on the October 2021 costings. The proposal is that these are to be funded through the Council's capital borrowing scheme and potentially from capital receipts from the disposal of older care homes.
- 4.3 The capital business case to repay all funds and interest during the lifetime of the building can be achieved through the closure of the two older council-run homes (one immediately), achieving a minimum £904k annual revenue saving, avoiding significant repairs and maintenance costs and achieving capital receipts for the two homes:

Repairs and maintenance

4.4 The two older homes will require additional investment due to the dilapidation of the buildings over time. There will be additional costs for repairs and maintenance. The most recent condition reports show that the cost of maintaining the buildings would be £610k for one of the homes and £367k for the other home. A total cost £977k.

Refurbishments

4.5 The buildings will need to refurbished as they are experiencing wear and tear. It is difficult to determine what the cost of the refurbishment would be without an assessment of the work that would be needed, however, such type of refurbishments would typically be very expensive and on par with a new build development (i.e. circa $\pounds 2,900/m^2$).

Reconfiguration of the layout

4.6 One of the benefits of a new build is that they are designed with a view of making them future proof. Forward-thinking design incorporates space provisions for alterations in the event that an occupant's needs change. The existing buildings are not fit for that purpose and would need larger rooms to make them suitable for the needs of the service users going forward. This will reduce the overall number of beds available and therefore require the Council to seek additional care provision from the independent sector for the shortfall in beds.

4.7 One of the homes is likely to have a reduction in 14 beds whilst the other is expected to experience a reduction in 11 beds, a total reduction of 25 beds. It is expected that the additional cost of seeking this provision from the independent sector is likely to be around £1m. If more extensive internal work was to be done on the current footprint, then more rooms could be created however the cost of doing that would be high.

Loss of income

4.8 The reduction in the number of beds available within the two homes will result in a reduction in the income that the Council receives from the service users in the form of client contributions. This is estimated at £67k a year.

Other costs

4.9 The work required to refurbish both homes and reconfigure the layout will mean that, during the period that the work is going on, the service users would need to move out of the homes and into a home provided by the independent sector. In addition to the financial cost of doing this, there will be significant impact on the wellbeing of the service users. Assuming that the work takes a year to complete, the estimated cost of this would be £3.2m.

CO² emissions

- 4.10 In addition to the financial costs of maintaining the old buildings, there is an environment cost. The government has set a target that requires the UK to bring all greenhouse gas emissions to net zero by 2050. Any public new build is required to meet certain emission standards that are not required by existing buildings. The two older Council homes are less efficient buildings and will not contribute in reducing the Council's carbon footprint (see 8.2).
- 4.11 The proposed new building in Saltaire is currently designed on this sustainability agenda where both kitchens and heating systems will all be electric supported by the latest technology based on Photo-Voltaic and Air Source Heat Pump systems.
- 4.12 The running costs of the new Saltaire Resource Centre would be approximately £904k less than the two homes combined. If the new build was to go ahead, the Council's spend on repairs and maintenance would not reach the full £977k for the two existing homes. There would not be a need for the refurbishment work nor would the Council incur the £1m costs to rehouse the service users due to the reduction in beds.
- 4.13 Furthermore, the Council would not incur the £3.2m cost of providing the care provision for service users when the home needs to close for reconfiguring the layout of the building. This would avoid also the distress caused to service users from moving them their existing homes to other residences.
- 4.14 The increased expenditure of £4.033m, as a result of inflationary pressures and remediation works has been considered by the council's internal finance process and if approved today, the additional budget would be added to the Capital Investment Programme. The business case to establish the funding of the increased expenditure; taking into consideration the additional revenue savings as a result of closing two homes earlier and the capital receipts generated will be reported back internally to the Project Appraisal Group (PAG).

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

- 5.1 In Bradford, the CCG has undertaken considerable work in developing out of hospital integrated services, including a Community Beds strategy.
- 5.2 In Airedale Wharfedale and Craven (AWC), the development of new models of care is taking place in Airedale (Keighley / Silsden) and Wharfedale. The Council is fully participating in this work which includes developing services to reduce people needing to go into hospital and enabling people to transfer home or to a short term bed for assessment once they no longer require acute medical care. These programmes of work report into the AWC Health and Care Partnership Board.
- 5.3 The Better Health Better Lives programme is managing the Council's contribution to the partnership and this includes risk management of the Council's assets and resources. Failure to deliver the Saltaire scheme would impact on the Council's ability to align and deliver our partnership strategies
- 5.4 In the Autumn 2019, the Client Services Team were tasked to project manage the construction of the new unit on the former location of Neville Grange in Saltaire. The initial business case for the development was approved at the Project Assurance Group (PAG) and revised business case was submitted on 21st June 2021.

6. LEGAL APPRAISAL

6.1 Duties of the LA under the Care Act 2014:

- 6.2 Specific to this report are the principles of
 - o promoting individual wellbeing set out in s.1 and
 - o preventing needs for care and support set out in s.2.
- 6.3 In terms of promoting diversity and quality in provision of services this is set out in Section 5 (1) and includes the market shaping duty, the duty of the LA to promote an efficient and effective market of care and support services for people in its area available to meet people's needs. In s.5 (2) the following must be considered by the LA (this list is not exhaustive): having and making available information about service providers and the types of service they provide; current and likely future demands for services and how providers might meet this demand; enabling service users and carers to participate in work, education or training, where they wish to do so; ensuring market sustainability; fostering continuous improvement in the quality, efficiency and effectiveness of services; fostering a workforce that can deliver high quality services.

It is important to note that when commissioning services consideration must be given to the effect of commissioning decisions on the wellbeing of the people using the services (this duty is explicitly set out in s.5(4).

7. OTHER IMPLICATIONS

7.1 Sustainability Implications

- 7.1.1 The Ministry of Housing Communities and Local Government requires that all new public buildings should have nearly zero energy. The Councils own targets are a year on year reduction of 10% from the 2019/20 corporate emissions.
- 7.2.2 The Saltaire scheme will meet the requirements of the new building regulations by ensuring that there will close to zero CO² emissions. This commitment will include the installation of PV panels on the roof and gas boilers being replaced by Air Source Heat Pumps.

7.3 Community Safety Implications

7.3.1 Older people with dementia and other long-term conditions are among the most vulnerable people in the community. Providing high quality care and appropriate environment for care services is consistent with the Council's statutory duty to safeguard vulnerable adults.

7.4 Human Rights Act

- 7.4.1 The Human Rights Act 1998 makes it unlawful for any public body to act in a way which is incompatible with an individual's human rights. Where an individual's human rights are endangered, Local Authorities have a duty to balance those rights with the wider public interest and act lawfully and proportionately. For this report, the most relevant rights from the 16 covered in the Human Rights Act (1998) are:
 - o the right to respect for private and family life
 - the right to peaceful enjoyment of your property (if this were interpreted broadly as enjoyment of one's home)
 - the right to freedom from inhuman and degrading treatment
 - the right not to be discriminated against in respect of these rights and freedoms.
- 7.4.2 The definition of adult abuse, in guidance issued under statute, is based on the concept of human rights: "Abuse is a violation of an individual's human or civil rights by any other person or persons". (No Secrets, Department of Health, 2000).
- 7.4.3 As with the equal rights considerations, the proposed changes are expected to have an overall positive impact on these considerations though there is a risk of adverse impact for individuals who live in the homes currently. In line with legal requirements and Council policy, vulnerable individuals and their friends, families and advocates have been and will continue to be involved in any consultation process and planning of changes, and that planning of change is fair and proportionate, and seeks to mitigate any identified adverse impacts of decisions made.

7.5 Trade Unions

7.5.1 All changes to staff employed by the Council are fully consulted with all trade unions via the Council's industrial relations agreements. No staff reductions or redundancies are anticipated by any of the developments outlined in this report.

7.6 Ward Implications

7.6.1 All ward Councillors are either currently involved or will be briefed and involved in any of the developments or changes described in this report.

7.7 Area Committee Action Plan Implications

Not applicable

7.8 Implications for Children and Young People

Not applicable

7.9 Issues Arising from Privacy Impact Assessment

Not applicable

8. NOT FOR PUBLICATION DOCUMENTS

None.

9. OPTIONS

9.1 OPTION 1 - Do Nothing

The two homes will require additional investment due to the dilapidation of the buildings. This will mean there will be additional costs both in terms of repair and maintenance and refurbishment.

Repairs and Maintenance

Condition reports show that the cost of maintaining the buildings will be as follows:

Total:	£977,266
Woodward:	<u>£367,423</u>
Beckfield :	£609,843

Refurbishment/ layout alterations

The buildings will need to refurbished and the internal layouts will need be reconfigured as the homes will require larger bedrooms. This will reduce the overall number of beds available and therefore require the LA to seek provision from the independent sector for the shortfall.

<u>Layout alterations -</u> Beckfield has 34 beds and Woodward Court has 28 beds. As a result of reconfiguring the layout it is expected that Beckfield will have 20 beds and Woodward Court will 17, a reduction of 25. It is expected that the additional cost is likely to be around **£1m**. If more extensive internal work was to be done on the current footprint, then more rooms could be created however the cost of doing that would be extremely high and disruptive.

<u>Other considerations</u> - the works required to refurbish both homes and reconfigure the layout will mean that, during the period that the work will be going on, the service users would need to move out of the homes into a home provided by the independent sector. To undertake this significant building work, it would be necessary for all service users to move out of the home and it is envisaged that this would be for a minimum duration of 12 months.

Moving residents temporarily would not be good practice as it would mean two moves for residents which would be very disruptive and could impact on their health and wellbeing. Assuming that the work takes a year to complete, the estimated cost of this would be **£3.2m**. Reduced income - the reduction in the number of beds available within the 2 homes will result in a reduction in the income that the Council receives from the service users. It is estimated that loss of income will be approximately **£67k** a year.

9.2 - OPTION 2 - Replace both older homes with the Saltaire scheme

Build the Saltaire scheme at a projected cost of £13.38m, which would be funded through capital borrowing and repaid by savings from the closure of two older homes. The running costs of the new scheme would be approximately £904k less than the two older homes combined. The Council would also not incur the costs of refurbishing and repairing existing buildings which are nearing the end of their useful lives.

Given the state of the fabric of the building in Woodward Court, Allerton, which has been running under-capacity for some time due to concerns about the building's condition, it is proposed that this home is officially closed in Spring 2023.

If we do not go ahead with Option 2 it will be necessary to consult on the future of the two homes identified and work up investment plans. It will also be necessary for the council to spend up to £900k on the remedial groundworks under the former Neville Grange care home site in Saltaire as owner of the land.

10. RECOMMENDATIONS

10.1 It is recommended that **Option 2**, to approve the increased budget (an extra £4,032,777) to build the Saltaire Care Facility having demonstrated a business case and value for money; and agreement is given to the closure of Woodward Court, Allerton in Spring 2023, given the poor fabric of the building.

11. APPENDICES

Appendix A – Equality Impact Assessment

12. BACKGROUND DOCUMENTS

Link to previous Executive Committee report in October 2023, setting out the original business case, plans and associated documents available on the council's website: Bradford Council - Agenda for Executive on Tuesday, 5th October, 2021, 10.30 am (moderngov.co.uk)

Appendix A

Equality Impact Assessment Form

Department	Adult and Community Services	Version no	0.1
Assessed by	Dean Roberts	Date created	01.10.2018
Approved by	Lyn Sowray	Date approved	19.10.2018
Updated by	Rachel Roberts	Date updated	25.10.2018
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Final approval	Lyn Sowray	Date signed off	26.10.2018

Section 1: What is being assessed?

1.1 Name of proposal to be assessed:

A report of the Strategic Director of Health and Wellbeing to the meeting of the Executive Committee to be held on 6 November 2018 on Older People's accommodation across the District as part of implementing the Happy, Healthy at Home vision.

1.2 Describe the proposal under assessment and what change it would result in if implemented:

1.2.1 BACKGROUND

The Council Executive approved the establishment of the Great Places to Grow Old Programme at the meeting held 15 January 2013. The Transformation Programme is a joint plan with the NHS and incorporates the work commenced in 2009 to develop a strategy for the Council's in-house residential and day services. It includes the implementation of some of the Better Care Fund plans which are focused on integrated health and social care service delivery - as outlined in the Yorkshire and Harrogate Integrated Care System Plan. Delayed transfers of care is a key measure, which across the Bradford District we have consistently performed well in, in relation to other areas of Yorkshire and Humber and nationally.

• The Health and Wellbeing Department's Home First – Our Vision for Wellbeing

This was approved by the Council Executive on 4 April 2017. The aim is to reduce demand for paid for social care services by helping people early, where we will try to prevent minor things developing into major concerns. It aims to build support around people so they can be more independent and will focus on what people can do rather than what they cannot do. We want a more positive approach so that people can live their lives to the full. The Bradford and Airedale & Craven Integrated Health and Care Plan have enshrined the same vision and aims of Home First within all the change programmes, developing

new ways of working together across the District.

• Market Shaping and Commissioning Guidance

The Care Act (2014) introduces duties on local authorities to facilitate a vibrant, diverse and sustainable market for high quality care and support in their area, for the benefit of their whole population regardless of how the services are funded. The statutory guidance to the Care Act states the market should include a variety of different providers and different types of services. This should include a genuine choice of service type, not simply a selection of providers offering similar services. It must include services for older people. We want to move forward with offering personalised services for older people. The guidance for Bradford Council has been refreshed in order to implement the Home First Vision. This is supporting the implementation of key benefits within the Happy, Healthy at Home programme and the integrated health and care plan, including all social care and support providers' workforce development - with the shared goal of ensuring a trained, quality workforce who have the relevant skills and appropriate working conditions.

1.2.3 DEVELOPMENT OF AN INTEGRATED LOCALITY BASED ASSET MANAGEMENT AND VULMERABLE ADULTS HOUSING PLAN.

Public Health have done a huge amount of work over the years to understand the population need for community beds and explore opportunities to support people to remain in their own homes. Modelling work suggests 168 community beds are needed in the Bradford area and 66 in Airedale. More recent work has been undertaken examining opportunities to keep people out of hospital (including A&E and acute beds), which is helping to shape the multi-agency assessment unit. Plans are continuing to be refined and informed by evidence and need. Health and wellbeing profiles have been developed for our emerging 13 communities across the District, which alongside the Joint Strategic Needs Assessment, are informing the strategic planning of services across the health and care landscape.

It has been agreed by senior officers within the Council (Place, Corporate and Health and Wellbeing departments) and the CCGs, to work together to develop an integrated plan based on localities (wards and constituencies) of current assets, health and care provision for all of the population and needs assessments as undertaken by Public Health. This will form the basis for planning housing for vulnerable people and for planning the supply of care and support. The locality plans will be used by interagency staff working in the localities as a basis for discussion with citizens living in the localities as well as informing and involving elected members.

Section 2: What the impact of the proposal is likely to be

The Public Sector Equality Duty under the Equality Act 2010, requires the Council when exercising its functions to have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it;
- Relevant protected characteristics include age, disability, gender, sexual orientation, race, religion or belief.
- 2.1 Will this proposal advance <u>equality of opportunity</u> for people who share a protected characteristic and/or <u>foster good relations</u> between people who share a protected characteristic and those that do not? If yes, please explain further.

No

2.2 Will this proposal have a positive impact and help to <u>eliminate discrimination</u> <u>and harassment</u> against, or the victimisation of people who share a protected characteristic? If yes, please explain further.

The new proposal for residential care will result in a wider range of choice to meet peoples assessed needs, and to ensure where possible no service user with a particular characteristic is disproportionately affected.

The locality plans will be used by interagency staff working in the localities as a basis for discussion with citizens living in the localities as well as informing and involving elected members. This should result in more outcome and strength based solutions being developed across the Health and Social Care system for our service users.

2.3 Will this proposal potentially have a negative or disproportionate impact on people who share a protected characteristic? If yes, please explain further.

The new proposals for residential service would be an impact on older people currently using services at the care homes which would be re-provided in the Neville Grange site. However, the department will put in place a detail transition plan, which ensures that the needs of individuals are met as part of any change process.

2.4 Please indicate the level of negative impact on each of the protected characteristics?

(Please indicate high (H), medium (M), low (L), no effect (N) for each)

Protected Characteristics:	Negative Impact (H, L, N)
Age	Η
Disability	Η

Gender reassignment	L
Race	L
Religion/Belief	L
Pregnancy and maternity	L
Sexual Orientation	L
Sex	L
Marriage and civil partnership	L
Additional Consideration:	
Low income/low wage	Н

2.5 How could the disproportionate negative impacts be mitigated or eliminated?

The new scheme would offer a wider range of choices to meet peoples assessed needs. However, as part of the consultation process, there would be extensive engagement with service user's groups, stakeholders, and independent providers to ensure seamless transitions for existing service users. Best practice in supporting and managing the transition would be used. (See section 6 below Managing Transitions Protocol.)

Section 3: Please consider which other services would need to know about your proposal and the impacts you have identified. Identify below which services you have consulted, and any consequent additional equality impacts that have been identified.

N/A

Section 4: What evidence you have used?

4.1 What evidence do you hold to back up this assessment?

- Existing vacancy factor across the District
- Outcomes from previous consultations/engagements responding to aspirations for service users to be supported at home. (see section 5 in the embedded EIA below)



Development of extra care accommodation.

 The use of best practice in managing the transition for those affected, as outlined in the Council's Transition Policy.

4.2 Do you need further evidence? No.

Section 5: Consultation Feedback

5.1 Results from any previous consultations

The department has undertaken a number of consultations around care home closures with staff, service users, relatives and key stakeholders around the implications to both staff and the people and families we support.

Summarised below are the key areas of concern previously raised as part of these consultations:

- Excellent quality of care BMDC homes concerns this will be lost
- No new homes being built
- Respite/rotational care available in independent sector
- Lack of specialist residential care in independent sector
- Lack of specialist day care in independent sector
- Support for finding future placements
- Close geography of alternative placement
- Perception of equivalent services in the independent sector

5.2 Feedback from current consultation

A further consultation will be undertaken in relation to the Neville Grange site in Saltaire proposal, subject to approval from the Executive to proceed to undertake a full Business Case.

5.3 Feedback from current consultation following the proposal development (e.g. following approval by Executive for budget consultation).