

# REPORT TO: MORAY INTEGRATION JOINT BOARD ON 28 NOVEMBER 2019

# SUBJECT: JUBILEE COTTAGES, ELGIN – PILOT PROJECT

## BY: LESLEY ATTRIDGE, SERVICE MANAGER

### 1. <u>REASON FOR REPORT</u>

1.1. To inform the Board of the evaluation of the Jubilee Cottages.

## 2. <u>RECOMMENDATION</u>

- 2.1. It is recommended that the Moray Integration Joint Board (MIJB):
  - i) consider the evaluation of the Jubilee Cottages in this report and note that the cottages are not being used for the intended use;
  - ii) consider the need that has been identified through this pilot for accommodation for those with an assessed health or care need and who do not have suitable accommodation; and
  - instruct officers' to progress in partnership with Housing Services, Moray Council, to consider suitable and cost effective options to meet the identified need outlined in this report
  - iv) the outcome of the options appraisal be brought back to the Board in March 2020

# 3. BACKGROUND

### **Original Intention**

3.1. The Jubilee Cottages were renovated to habitable residences, by March 2017, providing 6 assessment and rehabilitation units to support hospital discharge and prevent hospital admission for the elderly population of Moray. It was intended that these cottages would facilitate intensive rehabilitation for a 6-12 week period and was anticipated that this would support up to 30 people each year.





3.2. The High Intensity Rehabilitation and Assessment Units sought to serve clients who met the following criteria:

Service user's conditions:

- Elderly people
- Need rehabilitation
- Have capacity
- No ongoing medical treatment
- May need additional help during rehabilitation (home renovation, family complexities etc)

The Project vision saw the following possible benefits:

- High intensity rehabilitation
- Quick recovery (6 Weeks)
- Collaborative rehabilitation
- Controlled environment
- Low risk
- Encourages independence
- Speed up hospital discharges
- Establish baseline assessment
- 3.3. At the MIJB board meeting on 26 April 2018 (para 7 of the minute refers) it was agreed that HSCM would continue to use the Jubilee Cottages for an additional year based on the information supplied in the appendices to the report.
- 3.4. Whilst the main objective would be to support people to return or stay at home, that is not always possible. The project group established relevant admission criteria (**APPENDIX 2**), licence to occupy, and operational guidance for the operation of the cottages. The cottages were furnished and telecare provided, as required, to maximise the rehabilitation process for service users. There was also provision for care, for those that required this as part of their reablement, from the Independent living Team (ILT) now known as Short Term Assessment and Rehabilitation Team (START), and the Pitgavney Team.

### 4. KEY MATTERS RELEVANT TO RECOMMENDATION

#### <u>Actual</u>

- 4.1. The intended occupancy for the 6 cottages was identified at a total of 30 people per year, each occupancy being for a period of 6-12 weeks.
- 4.2. This has not proved to be the case:
  - Occupation rates of the 6 cottages are particularly low with less than 36% of available days occupied, however this is part due to Cottage 11 being used as a hub/assessment unit rather than a residence, including use to showcase a wider range of telecare available within a domestic setting. The occupation rate based on 5 cottages is 43% of available days, with an additional 4% of available days as "cottage reserved for potential client". The longest duration of a reservation was 11 weeks after which time the client did not take up residence.

- The average length of stay is just over 12 weeks, which is double the initial "quick recovery time" quoted for reablement/rehabilitation.
- There have been only 21 actual occupants since the cottages became available (between March 2017 and beginning of June 2019).
- 4.3. The source of referrals is approximately 50% from hospital and 50% from community. The patient referrals from hospitals are not achieving anticipated levels. Given the number of queries that were answered and not followed up by a referral, and the number of referrals that were rejected, (especially in the case of wheelchair users), there seems to be a misunderstanding on the purpose in relation to the practicality/usage of the cottages.

Status	No of Referrals	%
Approved	26	40.00%
Rejected (by Provider)	22	33.85%
N/A	13	20.00%
Rejected (by Client)	3	4.62%
Approval/Admission	1	1.54%
Grand Total	65	100.00%

 Table 1 Jubilee Cottages – Referrals by Referral Status

Source: Jubilee Occupancy Spreadsheet<sup>1</sup>

4.4. Over a third of referrals were rejected by the provider and in 32% of cases the reason for rejection was that the accommodation was not suitable for wheelchair use or did not meet the user requirements. For 4 people (18%) Jubilee was not considered appropriate for the client and a further 3 people (14%) were rejected on the grounds that "going home" would be more appropriate. A number were rejected as they did not meet the criteria for Jubilee with 22% rejected as being too young or out of area.

Table 2 Jubilee Cottages – Reason for Rejection

Reason for rejecting (main reason)	No of referrals	%
Wheelchair User / Does not meet user requirement	7	31.82%
Not appropriate?	4	18.18%
Going home more appropriate	3	13.64%
Age - too young	3	13.64%
Out of area	2	9.09%
(blank)	1	4.55%
Support not available	1	4.55%
Not Necessary	1	4.55%
Grand Total	22	100.00%

Source: Jubilee Occupancy Spreadsheet<sup>2</sup>

<sup>&</sup>lt;sup>1</sup> Jubilee Occupancy Spreadsheet – held by Carol-Anne Phimister

<sup>&</sup>lt;sup>2</sup> As above

#### **Residents**

- 4.5. Of the 21 referrals that progressed, the cottage remained reserved on average for 5.5 days prior to being occupied. The average occupation was 85 days (just over 12 weeks) with the occupation duration ranging from 5 to 288 days (over 41 weeks).
- 4.6. Of these residents 8 were discharged home, 5 have a new tenancy (as they were not able to return to their previous accommodation due to a change of needs), 4 remain in residence where alternative solutions have been identified and are awaiting implementation.
- 4.7. 62% of residents fell within the "65 and over" age bracket.
- 4.8. Referrals from the community are triaged by the Access Team. If there is an assessed need for Health and Social Care services then there is a statutory responsibility though Social Work Scotland Act to provide for their needs. Part of the assessment process may include reviewing accommodation requirements. The accommodation resource at Jubilee Cottages provides a solution for clients experiencing crisis. The accommodation is arranged via HSCM and supported financially due to the unscheduled care needs where they fit into the eligibility criteria and tier 2 crisis intervention. **APPENDIX 1** provides some examples that outline the considerations and issues experienced by those requiring the type of support available through the use of Jubilee Cottages.

Reason for Referral (main reason)	No of referrals	%
Reablement	23	35.38%
Waiting for New Tenancy	7	10.77%
Family no longer/currently able to support	7	10.77%
(blank)	7	10.77%
Homeless	6	9.23%
Social	4	6.15%
Waiting for Care Package	3	4.62%
Major Adaptation	3	4.62%
Place of Safety	2	3.08%
End of Life Care	1	1.54%
Turned down for Sheltered Housing	1	1.54%
Assessment	1	1.54%
Grand Total	65	100.00%

Table 3 Jubilee Cottages – Reason for Referral

Source: Jubilee Occupancy Spreadsheet<sup>3</sup>

- 4.9. Examination of data shows the main reason for referral was reablement / rehabilitation, which accounted for over 35% of all referrals. A total of 20% were either waiting for a new tenancy or were homeless. Almost 11% were due to family no longer or currently unable to support the client.
- 4.10. The rate of referrals have not reached the initial anticipated levels as set out in the original objectives. This is partially due to patients going directly home or

<sup>&</sup>lt;sup>3</sup> Jubilee Occupancy Spreadsheet – held by Carol-Anne Phimister

because the cottages do not meet the needs of wheelchairs users or those requiring use of certain hoists. In addition there has been a lack of referrals from acute services where the existing admission criteria is being used.

4.11. One of the cottages is used as a hub for assessment with the potential to be used as a more open plan bariatric unit if required.

#### **Emerging Demand**

- 4.12. During the pilot there was an indication of need for the cottages to be used for more than purely rehabilitation and reablement services, that the intended scope for the usage of the cottages may need to evolve to include elements of crisis intervention. The evidence of use showed 1/3 of residents being either "homeless" or "waiting for a new tenancy", in addition to those with "social" and "place of safety" as approval reasons.
- 4.13. Though not originally in scope, some clients needs were met by the cottages because there was no alternative. A gap in provision exists for some clients, whose specific Health and Social Care needs, combined with the crisis situation they are in, results in usual mainstream accommodation options not being appropriate. Home is not an option for these clients and their needs because they require:-
  - longer term rehabilitation
  - input from HSCM services to stabilise situations
  - family are no longer able to cope with them at home
  - houses require adaptation before the client can return home

The alternative accommodation would either be homeless accommodation, which is rarely suitable for this client group or placement in a care home which is expensive and utilises a bed that there is significant demand for from other client groups.

In these circumstances the utilisation of Jubilee Cottages and the support provided, has enabled these people to progress into main stream Housing Services accommodation or return home.

If the use of the cottages was to be considered as a long term provision expanding on our housing based model, a "joint licence to occupy" would be required with Housing Services, Moray Council. This means that at some point during the resident's stay it would become a chargeable service. This situation would occur when their health and social care needs were met but they still required social housing (e.g. when waiting for adaptations in their own property or alternative accommodation via normal council services) without having to present as being homeless.

4.14. Some of the clients have very complex needs. Increasing referrals for the use of Jubilee cottages has the potential to prevent expensive unplanned admissions to care homes. For this to be progressed the criteria for admission would require to be reviewed and individual risk assessments would need to be undertaken prior to consideration as the cottages are not 24 hour care (however support can be provided through the use of telecare and response teams available from 07:30 up to 22:00).

<u>Costs</u>

- 4.15. £112k was allocated for the renovations costs of the cottages. Annual operating costs are forecast to be £13,640 for 2019/20 which is a budget pressure.
- 4.16. The pilot has demonstrated that Jubilee cottages is meeting a specific need at a cost that is less than existing alternative options. The potential costs of predicted alternative destinations for this client group if Jubilee had not been available, based on a per day cost for that service/accommodation, could have equated to between £68,920 and £183,800 based on the occupation rates for the two years reviewed. If occupancy rates were to rise to the optimum occupancy rate of 80%, then the values saved on alternative costs would rise to an estimated £154k to £410k.
- 4.17. The cottages have not been utilised to their predicted occupancy. There is further potential to work in partnership with Housing Services, building on the experiences to date, to further explore other opportunities where client need could be met through this model. If the eligibility criteria for occupancy was reviewed to focus more on rehabilitation rather than reablement there is the potential for more suitable clients to be referred. If an occupancy rate of 80% was achieved then the requirement to spend on other more expensive accommodation options would be reduced. Any proposed changes to use of these properties/criteria for potential occupiers would require approval from Policy and Resources Committee (P&R), Moray Council who are the trustees for these properties which are part of a public trust.
- 4.18. The pilot has also identified another need for an emergency care facility that can be used instead of care homes for suitable clients. The costs for operation of some or all of the cottages and reducing some use of care homes is an area for further evaluation.
- 4.19. If the cottages are to be retained for the alternative purposes highlighted in this report, it would be necessary to report to P&R for their approval of the proposed use, which would need to be compliant with the terms of the Trust deed as set out in para 5 (b).

#### Meeting Individuals Needs

- 4.20. Feedback from the occupants of the cottages has demonstrated high satisfaction.
- 4.21. The cottages have enabled the service to be more responsive to individual needs which has resulted in a less stressful experience for people at a time when they feel more vulnerable.
- 4.22. The cottages offer some time to get clients back on their feet both mentally and physically, combined with the opportunity for services to assess need and ability to live independently, thereby achieving many of their clients desired outcomes.
- 4.23. If the cottages were not available it would be more difficult to deliver a holistic outcome focussed system for the individual. For those people whose original

"home" was no longer available to them it would mean they would have to be taken through the normal accommodation process via housing options team, taking into account the individual's assessed Health and Social care needs, which may result in delays in discharge from hospital or increased accommodation costs for HSCM.

# 5. SUMMARY OF IMPLICATIONS

# (a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Commissioning Plan 2016 – 2019

This report is in line with MIJB's Strategic Plan. A key policy directive within the Strategic Plan 2016-2019 is to strive to maintain independence for individuals and the ability to live at home.

### (b) Policy and Legal

These properties are held under a Trust Deed which requires that the cottages are occupied by poor elderly individuals. The trustee of the Public Trust covering the properties is the council's Policy and Resources committee on behalf of the Council as body corporate.

Any use of the subjects would need to be in compliance with the terms of the trust deed. The council's Policy and Resources decision of 30 August 2016 (para 18 of the minute refers) authorised the delivery of a rehabilitation service from these properties – any change to the service being delivered would need to be made by that Committee as Trustees.

# (c) Financial implications

Financial implications are outlined throughout this report.

### (d) Risk Implications and Mitigation

There is a risk of creating an unmet need if it is not possible to identify other suitable accommodation for clients with assessed needs. Any use of the subjects needs to be in compliance with the restictions contained within the Trust deed.

### (e) Staffing Implications

Staff who provide support and reablement or rehabilitation to occupants of jubilee cottages are part of the community teams providing support to people in their own homes in Elgin. There are no additional staff costs arising delivery of care at Jubilee as staff are already employed to work in the Elgin area with people in their own homes.

# (f) Property

There are no direct implications for property as a result of this report however if a subsequent report requires to be submitted regarding the use of the Cottages to Moray Council Policy and Resources committee, property implications would be considered at this point.

# (g) Equalities/Socio Economic Impact

An equality impact assessment has been completed for this project. The proposal assists in promoting equality of opportunity for elderly and disabled people.

# (h) Consultations

Consultation on this report has taken place with the following staff who are in agreement with the content in relation to their area of responsibility:-

- Chief Financial Officer, MIJB
- Legal Services Manager, Moray Council
- Senior Analyst, HSCM
- Head of Service, Sean Coady
- Housing Needs Manager, Moray Council

## 6. <u>CONCLUSION</u>

- 6.1. The initial intended profile of the cottages being used for 6 week (fast track) rehabilitation has not proven to be viable and would now not be in keeping with the emerging strategic priority of "Home First".
- 6.2. Although provision of accommodation is not part of the core business for HSCM or MIJB this pilot has demonstrated the value that is being added to the lives and the personal outcomes of those who have used the cottages as demonstrated in the scenarios in Appendix 1. Further work is required to refine the eligibility criteria and legal aspects surrounding the "licence to occupy" with Housing Needs services to increase occupancy.
- 6.3. The first principle is always to consider supporting people in their own homes, but where this is not an option the annual running costs of the cottages are lower than the majority of potential alternative costs for those people who have used Jubilee cottages, and there is clear evidence that people's outcomes are being met.

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