



## HEALTH, SOCIAL CARE AND WELLBEING SCRUTINY COMMITTEE - 12TH FEBRUARY 2013

**SUBJECT: RESIDENTIAL CARE FOR OLDER PEOPLE**

**REPORT BY: CORPORATE DIRECTOR SOCIAL SERVICES**

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### **1. PURPOSE OF REPORT**

- 1.1 Following a request by an elected member at a previous Scrutiny Committee this report updates Members on developments at two of the authority's in house residential care homes for older people, namely Castle View & Ty Clyd.

### **2. SUMMARY**

- 2.1 The report identifies the successful implementation of 11 residential beds for people with dementia at Castle View and the provision of six assessment beds at Ty Clyd both in terms of outcomes achieved by service users and carers as well as financial cost avoidance to the authority.

### **3. LINKS TO STRATEGY**

- 3.1 The developments support the objectives of the Health Social Care & Well-being Partnership in increasing the amount of accommodation available for meeting the assessed needs of adults who have dementia and in reducing the numbers of people delayed in hospital beds.

### **4. THE REPORT**

#### **4.1 Castle View**

- 4.1.1 Castle View residential home provided accommodation for 26 older people who were assessed as needing accommodation and support to meet their personal care needs. Two beds were also available to provide respite care.
- 4.1.2 In order to meet the changing needs of older people in the borough, it was agreed that Castle View would provide accommodation for 17 people who are elderly frail and 11 people with dementia. The unit that provides accommodation for people with dementia at Castle View, which has been called Cartref is situated on the first floor of the home. Consequently, the home is now dually registered with the Care & Social Services Inspectorate for Wales (CSSIW). As a result of this, residents who may be diagnosed in the future with dementia could move to Cartref without having to move to a different home.

- 4.1.3 Prior to registration, consultation took place with the residents, their families and staff. There was very little disruption for the residents already living within the home. Three residents at Castle View who already had a diagnosis of dementia transferred to Cartref.
- 4.1.4 In order to meet the needs of residents who have dementia, staffing levels within the home were increased. Three additional staff were needed per shift during the day and one additional member of staff per night. Staff within the home were asked to express a preference as to which residents within the home they would prefer to support i.e. elderly frail or dementia. Training was provided for staff who wished to support people with dementia.
- 4.1.5 The design of the building was carefully considered and appropriate changes made. This included additional bathing facilities, additional lounge and dining room, and refurbishment of the bedrooms etc. These alterations were discussed and confirmed with CSSIW. The Fire Service also confirmed that Fire Regulations were being met.
- 4.1.6 Cartref commenced supporting people with dementia on 17th February 2012. This was restricted to six people initially while the full staff team were being recruited and the building work completed. The home became fully operational in October 2012.
- 4.1.7 In March 2012 a new Telecare assistive technology system was installed which enhances the night time support provision enabling staff to respond to residents in a timely manner.
- 4.1.8 The feedback we have received from families to date has been very positive through letters and care plan reviews. A letter was received from a family member following the death of her mother who had moved to Cartref which contained the following:
- “A big thank you to all staff at Castle View for the wonderful care and love shown to our mother, making her stay such a pleasant and safe experience. Each and everyone has shown true dedication and are a credit to your profession. Must not forget the kitchen staff for such wonderful food...”
- 4.1.9 CSSIW have carried out two inspections at the home during 2012. The first one was an unannounced inspection carried out on 10th July 2012 and the second an unannounced inspection on the 4<sup>th</sup> October 202. At their visit inspection on the 10<sup>th</sup> July, CSSIW queried if staffing levels were sufficient. Dependency levels of residents are monitored regularly. An exercise was carried out that identified that staffing levels were meeting resident needs which was agreed with CSSIW and they confirmed when they carried out their unannounced visit in October 2012.
- 4.1.10 Within their report they made the following observation:
- “Overall people living on Cartref are treated with dignity and respect. During our visit we saw residents actively engaged in activities. People were supported to access Healthcare professionals to maintain their health and well-being. Residents were assisted by relaxed staff who demonstrated an understanding of their individual need.
- 4.1.11 CSSIW spoke to a number of residents during their visit who provided mainly positive feedback. They said:
- “I have loved it here from the first day, nothing is too much trouble for them, only have to ask”  
“I like the activities, they try to do something everyday, we have a bit of fun”  
“The staff are lovely and the food is alright and there is always choice”  
“This is a wonderful place and the girls are wonderful to me, they are kindness themselves and it’s the little things they do that makes it.”
- 4.1.12 Castle View has also developed a link with St Cenydd school, Caerphilly as part of an intergenerational project. Residents will be invited to the school on a regular basis for lunch.

## 4.2 Ty Clyd Assessment Beds

- 4.2.1 The ethos of this service is to provide individuals with an opportunity to avoid admission to long-term care by engaging in a period of assessment and reablement with the outcome of returning home.
- 4.2.2 Six assessment beds have been established as a separate unit within Ty Clyd Care Home in Bargoed. Alterations have been undertaken to the lounge area to facilitate separate kitchen and dining facilities. Toilet and bathing facilities have also been improved with a focus on rehabilitation.
- 4.2.3 This initial period has focussed on proving the concept and refining the service to achieve the objective outlined above. Ty Clyd staff that work on the unit have received training and support from the Occupational Therapist from Reablement. Reablement staff also support residents in the early stages of going home unless a long-term package of care is required.
- 4.2.4 The initial intake had been restricted to hospital discharges from Ysbyty Ystrad Fawr via the Hospital Discharge Team, Locality Social Workers and Advanced Nurse Practitioners. Following the initial review it was agreed to widen the intake to include all hospitals providing the proper rehabilitation processes had been followed and for further visits to be made to community teams. At the review on 7/11/2012, 15 people have received, or are currently in receipt of, the service with five people on a waiting list for admission (two from hospital / three from the community). A key issue in deciding on the suitability of future service users is their moving and handling needs. Of the eight individuals discharged from the assessment beds all went home with support; however, two residents subsequently went into long-term care following the withdrawal of family support. One existing resident of Ty Clyd included in the scheme is awaiting a vacancy in extra sheltered housing.
- 4.2.5 Plans for the six existing residents identify one person going to long-term care, three to be discharged home with support during the next two weeks, one with no current outcome and one person admitted from a residential care home will be discharged to an alternative care home. For the person going into long-term care better outcomes have been identified following an assessment of the individual's strengths and wishes.
- 4.2.6 The information below identifies that all 8 individuals referred to in paragraph 4.2.4 initially went home. The average length of stay was 37.63 days. The care that each individual received on discharge varied with 6 individual's having an increased domiciliary service, 1 with the same package and 1 with no on-going support. The average increase in care hours was 7.03 hours.

Name	Length of Stay (days)	Discharged Home	Care on Admission	Care on Leaving Reablement	Difference
A	46	Yes	3.5	8.75	5.25
B	53	Yes	0	7	7
C	30	Yes	0	0	0
D	51	Yes	0	10.5	10.5
E	46	Yes	0	17.75	17.75
F	22	Yes	3.5	8.75	5.25
G	44	Yes	3.5	14	10.5
H	9	Yes	5.25	5.25	0
Average length of stay	37.63				
Total increase in care hours					56.25
Ave. increase in care hours					7.03

## **5. EQUALITIES IMPLICATIONS**

5.1 There are no equality implications arising from the report.

## **6. FINANCIAL IMPLICATIONS**

### Castle View

6.1 To achieve dual registration the staffing levels at the home were increased as follows:-

- Senior care hours increased from 18½ hours per week to 37 hours per week
- Day time care hours increased from 294 hours per week to 588 hours per week
- Night care hours increased from 133 hours per week to 196 hours per week to replace 1 sleep-in per night.

6.2 The additional cost of these requirements was approximately £290,000 and was met by re-directing existing resources including the resultant reduction in the requirement for independent sector dementia care provision.

6.3 As a result of the increased occupancy, resident contributions increased from £157k in 2010/11 to £207k in 2011/12.

### Ty Clyd

6.4 The Long-Term Care Budget identified an increase of 34 (7/11/2012) people being supported when compared with 1/4/2012. Although initially discharged home two people eventually were admitted to long-term care with one having now passed away. The addition of the six individuals who have gone home would have increased this figure by 17.6% at a financial commitment of £34,680.

6.5 The long-term financial calculation will need to be balanced against the costs of support packages within the home. The six service users who remained at home received an increase in domiciliary care hours of 31.75 or an average of 5.29 hours each. At an hourly rate of £14.25 per hour this represents an increased commitment of £452.44 per week or £23,520 p.a.. Assuming no additional care costs the overall saving (full year effect) for 6 residents equates to £78,560; or when looked at individually on average each person returning home represents a long-term saving of £13,092 p.a.

## **7. PERSONNEL IMPLICATIONS**

7.1 There are no Personnel implications arising from this report but there were increased job opportunities available for staff as a result of the development at Castle View.

## **8. CONSULTATIONS**

8.1 All comments received are reflected in the main body of the report.

## **9. RECOMMENDATIONS**

9.1 Members are asked to note the developments at Castle View and Ty Clyd Residential care homes for older people and the positive outcomes achieved.

## **10. REASONS FOR THE RECOMMENDATIONS**

- 10.1 The developments referred to ensure that our In House care homes remain fit for purpose and meet the changing needs of the older people in our communities.

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Appendices: Appendix 1 – Letter of thanks