

Date of Meeting	22 August 2023		
Report Title	Rosewell House - Evaluation		
Report Number	HSCP.23.054		
Lead Officer	Fiona Mitchelhill, Chief Nurse & Frailty Lead, ACHCSP		
Report Author Details  Calum Leask  Programme Manager  cleask@aberdeencity.gov.uk			
Directions Required	Yes		
Exempt	No		
Confidential Information	No		
Appendices	a. Rosewell Evaluation Report b. Direction – Rosewell House		
Terms of Reference	1, 5, 8		

### 1. Purpose of the Report

1.1. This report is presented to the Integration Joint Board (IJB) to present the findings of an evaluation of Rosewell House ahead of the expiration of the existing arrangements in October 2023.

#### 2. Recommendations

- 2.1. It is recommended that the Integration Joint Board
  - a) Approve an extension of the integrated facility at Rosewell House to 31 December 2025 having regard to this report and Appendix A,
  - b) Make the Direction attached (Appendix B) to NHS Grampian and Aberdeen City Council.
  - c) Instruct the Chief Officer to issue that Direction to NHS Grampian and Aberdeen City Council.







- d) Instruct the Chief Officer of the IJB to make and implement any reasonable and necessary arrangements in furtherance of (b) and (c) above and
- e) Request a further report to be brought in Summer 2025 to determine the future direction of Rosewell House with consideration given to the next iteration of the Partnership's Strategic Plan.

### 3. Strategic Plan Context

- 3.1. Aberdeen City Health & Social Care Partnership's strategic plan for 2022 2025 was approved last year. The recommendations of this report align to this and seeks to contribute to the delivery of three of the following strategic aims:
- 3.2. Caring Together: Rosewell House is an integrated facility, delivered in partnership by Bon Accord Care and ACHSCP. It is also a central part of the Frailty Pathway (which was recently redesigned in a whole pathway review to ensure services are more accessible and co-ordinated) and the Social Care Pathway.
- 3.3. Keeping People Safe at Home: Rosewell House aims to maximise independence through rehabilitation and a focused, enablement approach. It aims to reduce the impact of unscheduled care on the hospital by providing step-up care in a homely environment to prevent people escalating to an acute level of need.
- **3.4. Preventing III Health:** By providing intermediate care in a more homely setting, Rosewell House aims to reduce the risk of patients deconditioning in hospital when faced with lengthy stay.

#### 4. Summary of Key Information

4.1. Rosewell House is a 60-bedded integrated, intermediate care facility where Bon Accord Care (BAC) and Aberdeen City Health & Social Care Partnership aspire to deliver person-centred care and rehabilitation with a reablement focus. This care can be provided as a step-up from the community as an alternative to hospital admission or as a step-down from Aberdeen Royal Infirmary to help recovery. The main admission routes for Rosewell House are







from the Frailty pathway (40 beds) or from the Rehabilitation pathway (20 beds).

- 4.2. The implementation of this model has occurred during a challenging period for the health and care system at a local, regional and national level. This has been due to a variety of factors, including reacting to an accumulated health debt associated with the COVID-19 pandemic. Further context about how acute geriatric medicine services are functioning locally are helpful to consider. The most recent SCOOP (Scottish Care of Older People Project) report that compares acute geriatric medicine services across Scotland, highlighted that Aberdeen Royal Infirmary ranks highest for median length of stay (at two days), though performed poorer in comparison when assessing seven day readmission rates. This emphasises the need to prioritise additional care and support outwith acute settings to keep people at home for longer.
- **4.3.** In August 2021, the IJB agreed that all 60 beds at Rosewell House would be the responsibility of NHS Grampian, with Healthcare Improvement Scotland (HIS) functioning as regulator, for a period of two years until 23 October 2023.
- **4.4.** An evaluation report has been produced, ahead of the end of the timescales of the existing arrangements, to determine whether there is sufficient evidence to warrant the extension of these arrangements, or not.
- **4.5.** The evaluation, provided as Appendix A to this report, provides an overview of the methodology; a review of the data presented in two previous evaluations that have been conducted on the facility; a review of the data presented in the original business case; and a review of the improvement plan that has been in implementation since 2022. The report has been subject to several revisions based upon feedback from Partnership and Bon Accord Care Staff.
- 4.6. Taking all the information together, the evaluation recommends that the existing arrangements at Rosewell House should be extended. It also provides a series of operational recommendations about how the service could be further enhanced through undertaking this review which the service have accepted.







- **4.7.** Monitoring of the completion of these recommendations will be via the Rosewell Assurance Group which meets on a quarterly basis. This will ensure that continued work will make sure that resources and capacity are used most optimally and flex dependent upon the circumstances in which the facility is operating.
- 4.8. The recommendation of extending the existing arrangements (referred to in the report HSCP.21.088 of 24 August 2021) until 31 December 2025 aligns with the end of the Partnership's strategic plan. Rosewell has strong alignment against the Partnership's strategic aims, including caring together (care is delivered in partnership with Bon Accord Care); safe at home (providing step-up care in a homely environment preventing escalation to acute levels of need) and preventing ill health (reduce risk of deconditioning in hospital by providing care in a more homely setting). The alternatives to the continuation of this approach would be to revert back to the previous, hospital-based model of care (i.e step-down wards based in Aberdeen Royal Infirmary and Woodend Hospital that were environments less aligned to our strategic ambitions) or a wrap around model based in an individuals own home (that would be unsustainable given the financial and human resourcing challenges).
- 4.9. Prior to any extension of Directions beyond 2025, the IJB will be provided with an update on the progress of the recommendations set out in the report in Summer 2025. Given that the delivery of care and support in Rosewell House is a collaborative endeavour, from a financial, infrastructure and workforce perspective, across the Partnership; Aberdeen City Council; Bon Accord Care and NHS Grampian, extending these arrangements allow for all Partners to come together and agree what a 'business as usual' model for the facility could look like beyond 2025 and how it is achievable to get there.

#### 5. Implications for IJB

### 5.1. Equalities, Fairer Scotland and Health Inequality

The HIIA produced to recognise the move of the beds within Rosewell House to NHS Grampian responsibility with regulation from Healthcare Improvement Scotland (HIS) in 2021 has been reviewed as part of this evaluation process.







The listed patient cohort of older adults remains consistent with the function of the facility and the identified impacts on this patient cohort are in accordance with the original report with all listed recommendations and mitigations in place. During the period 2021 to 2023 there have been no register complaints from patients or staff regarding any protected characteristics. Patient feedback indicates high satisfaction with the care and support they receive, and staff feedback suggests general agreement in the philosophy of the service, and optimism about the benefits that could be achieved through having integrated teams.

This evaluation recognises that one of the key listed components of Rosewell delivering intermediate care in operating as a community-facing, predominantly step-up / high turnover facility has not been delivered predominantly due to system pressures. There are also changes in the medical cover for the 20 rehabilitation beds however this work is ongoing and is being taken forward as part of the Frailty Programme development across NHS Grampian. The Frailty Programme developments linked to Roswell will continue to monitor and evaluate the original Rosewell HIIA and update as required.

#### 5.2. Financial

Funding for the extension of these arrangements is included within the existing base budget and the Medium Term Financial Framework. As such, there are no new financial implications arising from the recommendations of this report.

#### 5.3. Workforce

There are no new workforce implications arising from the recommendations of this report.

#### 5.4. Legal

There are no new legal implications arising from the recommendations of this report however, it will be necessary to extend, or vary, existing agreements which are in place to continue to deliver services at Rosewell House.

### 5.5. Unpaid Carers

Extending the existing arrangements ensures that family members of unpaid carers can continue to access care and support within Rosewell when safe and appropriate to do so.







#### 5.6. Information Governance

There are no new implications for information governance arising directly from the recommendation of this report.

### 5.7. Environmental and biodiversity Impacts

There are no direct environmental implications arising from the recommendations of this report.

### 5.8. Sustainability

There are no direct sustainability implications arising from the recommendations of this report.

#### 5.9. Climate Change and Net Zero

There are no direct climate change and net zero implications arising from the recommendations of this report.

### 5.10. Other

n/a





# 6. Management of Risk

# 6.1. Identified risks(s)

The below are risks should the UB choose to not extend the existing arrangements, and the mitigations that would be put in place in such a scenario.

Dimension of Risk	Description	Likelihood of occurrence	Impact if it occurs	Mitigations
Reputational	JB does not commit to the continuing an initiative that aligns to its strategic priorities.	Medium	High	Ensure appropriate communications strategy is developed to explain rationale for cessation of arrangements and attempt to minimise reputational damage
Risk of harm to patients / clients and staff	Cessation of frailty beds within Rosewell House resulting in increased hospital admissions and reduced capacity to cope with demand	High	High	Consideration would be required to be given as to the most logical and practical placement of step down beds for Geriatrics, most probably occurring within a hospital- based setting. This would also link in with the existing bed base review that is underway at Aberdeen Royal Infirmary





# 6.2. Link to risks on strategic or operational risk register:

- Cause: Demographic & financial pressures requiring IJB to deliver transformational system change which helps to meet its strategic priorities.
- Event: Failure to deliver transformation and sustainable systems change.
- Consequence: people not receiving the best health and social care outcomes

Approvals	
Jordes Maclood	Sandra Macleod (Chief Officer)
PMACKAT	Paul Mitchell (Chief Finance Officer)



