

#### **BARRA AND VATERSAY COMMUNITY CAMPUS**

Report by Chief Executive, Chief Officer Health & Social Care and Director for Investment

**PURPOSE OF REPORT** 

To provide the Comhairle with an update on the progress of the Community Campus project and to reaffirm the Comhairle's continuing commitment to Housing with Extra Care as the model of social care for Barra and Vatersay.

#### **COMPETENCE**

1.1 There are no legal, financial, equalities or other constraints to the recommendations being implemented.

#### **EXECUTIVE SUMMARY**

- 2.1 As reported previously, following the publication of a revised project cost plan by hubNorth Scotland Ltd (hNSL) in July 2021 which indicated a significant increase in the estimated cost of the project, hNSL committed to carrying out a 16-week Reassessment Exercise, the key outcomes of which are to be, firstly, a revised cost estimate and programme for Option 1D and, secondly, an assessment of alternative layout options and construction programming and methodology, including a more-detailed understanding of the potential role of modular construction.
- 2.2 Work associated with the reassessment exercise is now substantially complete and a consultative draft of the report was issued by hNSL on 19 November 2021. At the time of writing, the Comhairle's Director for Investment Delivery and NHS Western Isles Project Director are reviewing the outcomes.
- 2.3 A summary of the progress to-date is included in the body of the Report and a further update will be provided, in the first instance, to the Project Executive Board on 16 December 2021 and the Comhairle, the NHSWI Board and the Integration Joint Board as soon as possible thereafter.
- 2.4 To support the development of the business case for investment in the Community Campus, there is a requirement to document the proposed model of care for health and social care services on Barra and Vatersay. Consultants Buchan Associates have been appointed by NHS Western Isles to collate and prepare such a paper and, at the time of writing, this work is substantially complete. The paper is to be considered in its entirety by the NHS Western Isles Board on 17 December 2021; in the meantime, extracts relevant to the Comhairle, specifically regarding the provision of social care as part of a wider clinical model for Barra and Vatersay are included as Appendix 1 to this Report. An overview of the findings, benefits of the model, the dependencies which will impact on the implementation of the project, and the conclusions are summarised in the body of the Report.
- 2.5 The paper concludes by identifying a number of next steps associated with the implementation of the service models and, subject to the approval of the recommendations by the Comhairle, NHS Western Isles and the Integration Joint Board, the paper is to be submitted to Scottish Government to further support the business case for investment in health and social care services for the resident and visiting populations of Barra and Vatersay.

#### **RECOMMENDATIONS**

- 3.1 It is recommended that the Comhairle:
  - (a) note the Report; and
  - (b) insofar as its interests are concerned, reaffirm its commitment to Housing with Extra Care as the model of social care for Barra and Vatersay.

Contact Officer: Malcolm Burr, Chief Executive

Nick Fayers, Chief Officer Health & Social Care lain Mackinnon, Director for Investment Delivery

Background Papers: 1

Appendix: 1 Barra & Vatersay Clinical Service Model; Extract from Summary Report; Buchan Associates; Dec 2021

## **IMPLICATIONS**

4.1 The following implications are applicable in terms of the Report.

Resource Implications	Implications/None
Financial	Capital costs associated with the development and delivery of the project are being funded from and contained within the multiagency funding package and project budget.
Legal	None
Staffing	Staffing implications arising from the community campus project are being considered by the relevant service departments and reported through the respective governance arrangements.
Assets and Property	The project represents a significant investment in the public sector estate on Barra and Vatersay and comprises the replacement of the Castlebay Community School, the St Brendan's Hospital Care Home, the Barra GP Surgery and the Council Offices, all in Castlebay.
Strategic Implications	Implications/None
Risk	Project risk is managed through regular monitoring and reporting to the Project Executive Board. Further detail of this can be provided by the Director for Investment Delivery.
Equalities	None
Corporate Strategy	Activities support the delivery of the Comhairle's four main Strategic Priorities of Economy and Jobs, Communities and Housing, Education, Skills and Training and Quality of Life, Wellbeing and Health
Environmental Impact	The development of project sustainability and environmental strategies is on-going.
Consultation	Significant engagement with service user and provider groups, with representative bodies and with the wider community has been undertaken and remains ongoing through the development and delivery stages of the project.

#### **REASSESSMENT EXERCISE – PROGRESS UPDATE**

- 5.1 The general progress of the development and delivery process is regularly reported to monthly meetings of the Project Executive Board and to each meeting of the Comhairle's Investment Delivery Board and Policy & Resources Committee. Progress updates are also provided to the Integration Joint Board and the NHS Western Isles Board.
- As reported previously, following the publication of a revised project cost plan by hubNorth Scotland Ltd in July 2021 which indicated a significant increase in the estimated cost of the project, hNSL had committed to carrying out a 16-week Reassessment Programme with the outcome to be reported to, in the first instance, the Project Executive Board in November 2021. The scope of the Reassessment Programme comprised the following workstreams:
  - Detailed diligence of the current cost plan (Option 1D) and tender returns including value engineering, specification review, contractor cost (preliminaries) review, programme review and analysis of further tender returns from alternative suppliers to test that competitive and best value returns are received.
  - A further appraisal of options associated with alternative site layouts at the site with the aim to reduce programme, potentially avoid the requirement for the schools decant and minimise site abnormals, including rock removal
  - Modular Assessment. Further assessment of a modular build approach developed from a previous 15-month engagement with the modular supply chain. Specialist modular partner to be selected. Modular design proposal to be developed which is to include full logistics assessment.
- 5.3 The key outputs from the reassessment exercise will be:
  - A revised cost estimate and programme for Option 1D, following completion of the due diligence on all aspects, reflecting current market conditions
  - An assessment of the impact and opportunity of revised use of the available site including a further understanding of the potential role of modular construction in achieving the key project objectives.
- 5.4 Work associated with the reassessment exercise is now substantially complete and a Consultative Draft of the report was issued by hNSL on 19 November 2021. At the time of writing, the Comhairle's Director for Investment Delivery and NHS Western Isles Project Director are reviewing the outcomes. Support is being provided by the hubNorth Territory Partnership Programme Director with regard to process, project cost and funding.
- 5.5 The estimated cost of the preferred option, Option 1D, (including internal CnES and NHSWI costs) had increased significantly from £53.9m (February 2021) in the period to July 2021. hNSL had also indicated a longer delivery period which, along with an increased geographical uplift and construction market volatility, has made the most significant contribution to this increase.
- Arising from the work undertaken as part of the reassessment exercise, including further engagement with the construction supply chain, a review of the geographical cost uplift and delivery programme and value engineering, a revised total cost for Option 1D has been estimated. At the time of writing, this continues to be the subject of further review and challenge by the Comhairle and NHSWI Project Directors.
- 5.7 With regard to the identification, development and evaluation of alternative layout options, the design team developed a long list of ten alternative layouts; this was refined down to a short-list of four layout options considered and endorsed by the Project Executive Board in September 2021.
- 5.8 The four variant options have since each been developed in parallel consultation with SEPA and CnES Planning and Flood Risk sections. In addition, massing studies were issued to CnES Planning and Historic Environment Scotland and potential parking layouts issued to CnES Roads.

- 5.9 The reassessment exercise has also provided a further opportunity to review opportunities for an increased use of off-site manufacture and modular construction in the design and construction methodologies.
- 5.10 A full review of the design, transportation and logistics aspects of such an approach and a full feasibility study has been undertaken by Robertson Construction in collaboration with Premier Modular, Collett Transport (land transportation and logistics) and Green Marine (marine transportation and logistics).
- 5.11 Following a full review of interfaces and costs, hNSL has reported that the cost for this option is significantly greater than all of the layout options' cost plan, and it was concluded that a modular approach would not benefit the BVCC project in capital cost terms.
- 5.12 A number of significant material issues remain to be borne in mind and will require to be resolved fully in taking forward the findings from the reassessment exercise. Recommendations from the CnES and NHSWI Project Directors are subject to their further review of the consultative draft; current outstanding issues include:
  - Confirmation by the Integration Joint Board of Housing with Extra Care as model of care for Barra and Vatersay
  - Programming considerations and their collective prioritisation by Comhairle nan Eilean Siar and NHS Western Isles and associated cost and funding implications
  - Feasibility and cost and programme implications of acquisition of land outwith shareholder ownership and occupancy;
  - Feasibility of relocation of grass pitch to an alternative location outwith existing ownership boundaries;
  - Internal (relevant CnES and NHSWI departments, Health and Social Care Partnership, Police Scotland and Barra Children's Centre) stakeholder agreement of alternative layout options and value engineering proposals
  - Investigation of alternative delivery mechanism for Housing with Extra Care (HWEC) element of campus in collaboration with HHP
  - Full review of strategic and technical risk, including agreement of responsibilities and timescales for risk mitigation measures
  - Finalised position regarding revised funding package
  - Ongoing consultation and liaison with relevant Scottish Government directorates in terms of continuing support for place-based investment in context of "pathfinder" approvals process, the further development of the investment business case to suit Scottish Minsters' requirements and an increased funding shortfall
  - Ongoing engagement with island stakeholder groups and the wider community through the Community Stakeholder Advisory Group and Guth Bharraidh respectively
- 5.13 The Project Directors' review of the consultative draft of the reassessment exercise report remains ongoing and a further update will be provided, in the first instance, to the Project Executive Board on 16 December 2021 and the Comhairle, the NHSWI Board and the Integration Joint Board as soon as possible thereafter.

#### BARRA AND VATERSAY COMMUNITY CAMPUS - MODEL OF CARE

- 6.1 To support the development of the Community Campus, the proposed scope of which includes the replacement of the current St Brendan's Hospital and the provision of social care housing alongside new learning and community facilities, there is a requirement to develop and document the proposed model of care for health and social care services on Barra and Vatersay.
- 6.2 Consultants Buchan Associates have been appointed by HNS Western Isles to work with both NHS Western Isles and the Comhairle to develop a **Clinical Output Specification** outlining the proposed model of care which specifically covers the following key sections:
  - 1. An outline of existing service provision to residents of Barra and Vatersay including a description of how services are provided on and off island
  - 2. Any published change in the last twelve months in relation to current trends and best practice relating to remote and rural health and social care delivery models; and
  - 3. A description of the model of care that includes the philosophy of care, service scope, service delivery model, patient pathways and flow, workforce implications and benefits of the model of care in acute, primary and community settings delivered in a personalised, patient centred environment, fit to meet the future needs of the people of Barra and Vatersay.
- 6.3 The scope of health and social care outlined within each section would include:
  - Primary and community care;
  - Unplanned care;
  - Planned and routine care;
  - Rehabilitation;
  - Housing with extra care; and
  - End of life care.
- 6.4 The scope of the appointment set out the following key tasks and approach/assumptions:

Task	Approach/ Assumptions
Mobilisation	Review background documentation. Establish regular engagement with key individuals and diarise time over timeline. Develop a draft document structure.
Outline existing service provision	Outline the current range of services, how, where and who delivered by across each area of service provision. Established via review of existing documents and by interview with identified service providers. Outputs issued for feedback and updated via email exchange.
Trends & Best Practice	Outline trends in health and social care delivery – how and who including use of digital health and social care models. Provide an overview of examples of best practice from defined systems with similar characteristics to Barra and Vatersay. Undertaken via a review of existing material and from background research including a high-level review of best practice examples. Draft section developed and reviewed, updated on a virtual meeting.
Future Model of Care	Set out the philosophy of care, service model – who, how, impact and benefits. Outline scope of service provision on and off island and patient pathways and flows. Develop draft and share on virtual meeting with feedback. Followed up with a final meeting to agree and sign off.

- 6.5 An extract of the relevant sections of the draft, focussing on the general Introduction and on Social Care, is included as Appendix 1 to this report. An overview of the findings, benefits of the model and the dependencies which will impact on the implementation of the project, insofar as the interests of the Comhairle are concerned, are summarised below.
- 6.6 The benefits of the proposed model apply to both health and care services and will impact on citizens, workforce, the wider system and the local economy and include the following
  - Provides clinically effective and integrated health and social care services, enabling the full implementation of new models of care;
  - Ensures that services are flexible enough to respond to the changing nature of demand for health and social car services by incorporating anticipated changes in demographics and morbidity into the service requirements;
  - Model will support choice and be responsive to individuals needs and adapt to how they may change promoting independence;
  - Supports improved quality of patient care by delivering services closer to home and reflecting latest models of health and social care;
  - Will help facilitate NHS Western Isles & CnES in providing the right number of staff with the right skills in the right place at the right time;
  - Reduced need for patient travel off island thus freeing up time for other purposes and reducing the carbon footprint associated with use of transport;
  - More locally based care (particularly rehabilitation) reducing the demands on services elsewhere within NHS Western Isles and mainland Boards;
  - Single unit housing will provide ability to segregate groups of individuals where disease outbreaks occur without the need to completely close;
  - More care delivered in homely settings; and
  - Better use of resources.
- 6.7 The overarching proposed campus model with wider public sector services has a number of additional benefits including:
  - Adopting "Place" principles; co-location and sharing of public sector resources;
  - Opportunity to better integrate older population with younger residents through the co-location with the school and joint initiatives, sharing of outdoor space, supporting individuals to live independently whilst maintaining a connection with communities.
- 6.8 There are a number of key dependencies which will impact on the successful implementation of the project some relate to the wider service model and others pertain to specific elements contained within it. In terms of this part of the analysis the two key dependencies are:
  - The development of a fully integrated (physical or operational) model is dependent upon the continued collaboration between CnES and NHS Western Isles. Both organisations have competing pressures and priorities which may inhibit their ability to sustain the required level of time or investment anticipated;
  - There may be difficulty in the retention of staff if significantly different ways of working are deployed, as many of the staff have worked within existing systems for long periods of time. Equally recruitment of staff into any new or replacement roles may be difficult due to the remote location;
  - Clarity over the new National Care Service will be required to ensure alignment;
  - The need to ensure access to appropriately skilled staff to support all elements of service provision.

- 6.9 The report concludes by identifying a number of next steps associated with the implementation of the service models, these include:
  - Community & citizen engagement: establish a wider understanding of the proposed service model by the community in Barra and Vatersay. Establishing how third sector and support groups can continue to play a role within service provision.
  - Workforce Planning & Development: clear understanding of the proposed workforce changes, training, education and development required to ensure optimal delivery.
- 6.10 Subject to the approval of the recommendations by the Comhairle, NHS Western isles and the Integration Joint Board, the paper is to be submitted to further support the business case for investment in health and social care services for the resident and visiting populations of Barra and Vatersay.

Section 1: Introduction and Section 2: Social Services
Buchan Associates; December 2021

### 1 Introduction

#### 1.1 Purpose

1.1.1 The purpose of this paper is to provide a clear description of the proposed model of care for Barra & Vatersay. This will support the business case being developed jointly by NHS Western Isles (NHSWI) and Comhairle nan Eilean Siar (CnES) for investment in health and social care services for the resident and visiting populations of Barra and Vatersay.

#### 1.2 Context

- 1.2.1 The islands of Barra and Vatersay are located at the southern tip of the Outer Hebridean island chain. They are linked to each other by a manmade causeway but are not otherwise physically linked to any other part of the archipelago or to the Scottish mainland. Together they have a community of some 1200 people.
- 1.2.2 The Isle of Barra is roughly 60 km2 (23 sq mi) in area, 11 mi (18 km) long and 6 mi (10 km) wide. A single-track road, the A888, runs around the coast of the southern part of the island following the flattest land and serving the many coastal settlements. The interior of the island here is hilly and uninhabited.
- 1.2.3 Barra lies some 94 miles south of Stornoway, travel between the two requires two ferry connections and it can take just over 6 hours to complete the journey. There is no direct air link from Stornoway to Barra, the air connection is via Glasgow which entails a 4 hour layover.
- 1.2.4 There are daily flights from Glasgow airport to Barra airport on an 18seat plane. The landing strip is Barra beach and flight times are subject to the twice daily tides.
- 1.2.5 The main ferry route to Barra from mainland Scotland is by CalMac ferry from Oban. The crossing takes 4 hours 45 minute.

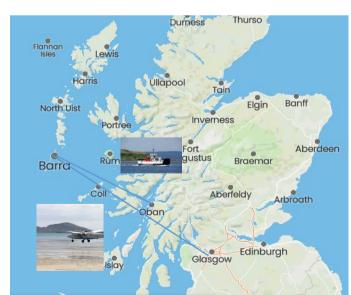


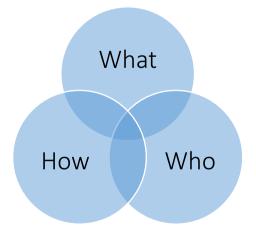
Figure 2-1: Barra & Vatersay

1.2.6 The provision of sustainable safe health and care services in Barra and Vatersay is unique and specific to the needs of a remote island community of 1,200. It needs to maximise what can safely be delivered in Barra and Vatersay ensuring skills and knowledge are maintained and what requires to be delivered in WIH Stornoway and Greater Glasgow & Clyde.

### 1.3 Scope

- 1.3.1 This paper seeks to set out the clinical service model in relation to the following services for the residents of Barra & Vatersay:
  - Social care model:
  - Primary and community-based care including child and family health and care services;
  - Planned and diagnostic care;
  - Unscheduled and emergency care;
  - Palliative and End of Life care
- 1.3.2 In describing each area of service provision, the following will be documented:
  - Current service provision: an outline of existing service provision for the residents of Barra and Vatersay including a description of how services are provided on and off island;
  - Any published change in the last twelve months in relation to current trends and best practice relating to remote and rural health and social care delivery models; and
  - Future model: a description of the model of care that includes: service scope, service delivery model patient pathways and flow, workforce implications and benefits of the model of care in a personalised, patient centred environment, fit to meet the future needs of the people of Barra and Vatersay. In summary the:

Figure 2-2: Service Model components



1.3.3 In describing each area of service provision and the proposed future model the benefits and the dependencies across service will be highlighted.

#### 1.4 Approach

- 1.4.1 The following approach has been undertaken in developing the paper:
  - Development of a template structure based on best practice and experience in supporting a range of organisations to develop future models of care;
  - Engagement with NHS Western Isles, the Comhairle and the Health and Social Care Partnership to complete the structure;
  - Review and sign off by key service providers both in Barra and wider.

## 1.5 Philosophy of Care

- 1.5.1 An overarching philosophy of care has been developed for all services. This sets out NHS Western Isles and the Comhairle 's approach to the delivery of health and care services to the residents and visitors to Barra and Vatersay.
- 1.5.2 The services collectively aim to:
  - Enable the highest standards of care to be delivered in all services. Care should be safe, efficient, compassionate and person-centred;
  - Be person-centred and adopt realistic medicine principles, involving patients and carers in assessing options and decision making about treatments to ensure clarity of understanding;
  - Ensure that patients are always cared for in the most appropriate locations by the most appropriate staff groups with the requisite skills and competencies;
  - Enable the interdependencies services;
  - Minimise non-value adding process steps through ensuring that citizens only access staff, services and process elements if there is a benefit;
  - Minimise duplication of effort and resources whilst ensuring longer-term sustainability through optimising service provision models;
  - Adopt evidence based new technologies and digital healthcare;
  - Promote collaborative working between services, with the citizen at the heart of decision making;
  - Foster a culture of continuous improvement- avoiding duplication and waste;
  - Enhance training while advancing the standard of clinically excellent, evidence-based care;
  - Deliver health and care from an agile workforce, responsive to need and specific to facilities but integrated across health and care partnership; and
  - Embed, embrace and adhere to NHS Scotland's Staff Governance Standards, ensure staff wellbeing, and offer opportunities to develop new skills.

## **2** Social Care model

## 2.1 Current service model

- 2.1.1 Current social care is provided from St Brendan's Care Home which is joined to St Brendan's Hospital, but operates as separate entity in terms of management and purpose. It provides care services for the residents of Barra and Vatersay through 8 permanent places, 2 respite places and day care.
- 2.1.2 The model of care supports home first and in addition to current residential model there is also a range of services supporting individuals to remain at home including:
  - Day services provided by Cobhair Bharraigh, 3<sup>rd</sup> sector organisation utilised modern fit for purpose facilities recently opened in 2021;
  - Care at home provided by integrated team in individuals own homes.

## 2.2 Trends & Best Practice

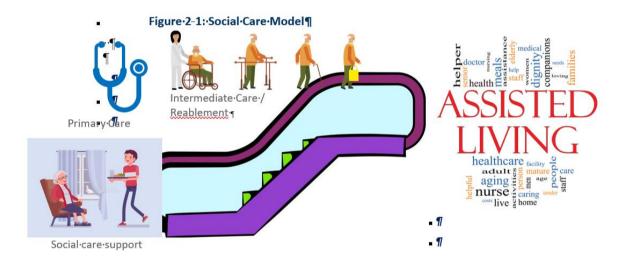
- 2.2.1 The number of care places has reduced marginally over the past 5 years from 11 places in 2015/16 to the current capacity. Respite care activity has also fallen over the same time period.
- 2.2.2 Despite the trends outlines above, demographic data indicates that the over 65 population on the island is anticipated to increase by 17% between 2020 and 2030 making up 46% of the population. Furthermore Almost half of the growth of the over 65 population is expected to relate to over 75s.
- 2.2.3 It is likely that such a significant growth in the number of older people will result in an increased prevalence in Long Term Conditions (particularly dementia) which is forecast to increase by 73% across the Western Isles) resulting in growing demand for care services.
- 2.2.4 There is a strong evidence base to support housing with extra care model of social care provision, enabling greater levels of care to be delivered in a more homely, person centred setting.
- 2.2.5 In planning how care is provided in the future practice is moving in the direction of integrated health and social care locality hubs that will enable co-located multi-disciplinary teams to deliver well-co-ordinated care that reduces duplication and minimises gaps in service provision. The trend to utilise Supported Living models as an alternative to traditional residential care homes is also increasing providing a person-centred responsive care delivery model focussed on the individuals' specific needs.

# 2.3 Future Service Model Scope of service (what)

2.3.1 The proposed service scope would re-provide services with fixed tenanted Extra Care Units with the potential to support step-up and step-down care. These will be provided within the proposed campus in a fully integrated solution incorporating all health and social care services in one purpose-built facility including 8 tenanted + 2 flexible housing with extra care units.

## Service Delivery Model (How)

- 2.3.2 Social care services would be provided within the units to residents based on their individual needs with the ability to flex services up and down dependent on specific requirements.
- 2.3.3 Service provision would be provided by shared integrated health and care teams across primary and social care.
- 2.3.4 Residents would be supported in both short-term intermediate reablement focussed and longer term care needs. Use of Anticipatory Care Plans (ACPs) would enable individuals to make informed choices about how and where you want to be treated and supported in the future. This would be supported by health and care practitioners, service users and their carers to ensure the right thing is done at the right time by the right person to achieve the best outcome. This will have greater impact and potential with the co-location of services.
- 2.3.5 Care received at any given time could be described as "escalator model; with the ability to increase or decrease the level of support received depending in the individuals needs in a truly person centred approach. The diagram below sets out these principles:



#### Workforce (Who)

- 2.3.6 To support the proposed model staff will work in fully integrated and flexible way to provide a seamless service for service users. As such staff should be able to flex between supporting the needs of health and social care. This will be overseen by a locality based single management structure. Social care services are all currently managed by a single integrated social care manager ensure flexible of resources across care at home, residential and day services. Roles are holistic in nature with a strong focus on integrated delivery. These are a significant step towards integrated health and care teams in Barra and Vatersay, with the future aspiration of full integration prior to new facilities.
- 2.3.7 There is added benefit in the co-location of services within the proposed campus to flexibly use the workforce resource. The concept of an integrated single system health and care "huddle" to direct resource to where most needed will truly integrate services within Barra.
- 2.3.8 Cobhair Bharraigh would continue to play a key role in the provision of health and care services within Barra and Vatersay.