

Interim IIA Report – Closure of Blossom House, Belhaven, Dunbar

Each of the numbered sections below must be completed

Please state if the IIA is interim or final - Interim

1. Title of proposal

Closure of Blossom House

2. What will change as a result of this proposal?

Blossom House operates an 11-bedded care home unit in a converted ward at Belhaven Hospital which is currently home to nine people. Blossom House is old and requires constant maintenance to keep it viable. However, it is very unlikely to continue to meet inspection standards going forward due to the lack on en-suite facilities, shared bathing and toileting areas, bedrooms being unable to accommodate hoists, and the resulting loss of privacy and dignity for residents.

The Belhaven site has ongoing problems with water quality, which led to the temporary closure of Blossom House, with residents having to be transferred to East Lothian Community Hospital last year. Residents moved back to Blossom House recently but have once again had to be moved to ELCH in early March 2024 due to concerns over safe fire evacuation routes expressed by Scottish Fire and Rescue Service. After an unannounced inspection and risks identified, they asked ELHSCP to close Blossom House with immediate effect, which we did. Otherwise a enforcement or prohibition notice would have been issued.

The fire safety issue has been amplified by people setting fires in the grounds and other acts of vandalism. Due to the isolated nature of the site, this has also led to concerns for the general safety and security of residents and staff, particularly overnight.

Blossom House is also experiencing difficulties in attracting new staff to replace those who are retiring or require long absences from work due to ill health, maternity leave etc. Distance and location often being cited as reasons why staff are not choosing to apply for posts, if not local to the area.

This being the case, we are proposing to close Blossom House and support residents to find equivalent and appropriate

accommodation/placements elsewhere, and as nearby as can be managed

Blossom House, along with the rest of the Belhaven complex, was identified as being unfit for purpose in 2009 as part of the Older People's Strategy work. Neither ELHSCP nor ELC have any capital budget to build a new equivalent facility.

3. Briefly describe public involvement in this proposal to date and planned

Over the last three years, we have carried out extensive engagement with service-users, carers, the third sector, the independent sector, staff, local communities and the general public. You can find out more about this at:

- [Planning for an Ageing Population Summer Feedback Report](#) (October 2022)
- [IJB Strategic Plan Engagement Feedback Report](#) (August 2022)
- [Planning Older People's Service Communication and Engagement Report \(December 2023\)](#)
- [East Lothian Carers Strategy](#) (feedback interpolated into report)

Our feedback revealed that:

- The overwhelming majority of people who took part in our engagement were clear that they wanted to remain living at home for as long as possible and only wanted access to a care home if their physical and mental health necessitated it.
- They wanted us to focus on intermediate care measures that could help people to live independently and safely at home
- Most people wanted to die at home with the appropriate support for themselves and their families in place,

4. Is the proposal considered strategic under the Fairer Scotland Duty?

Yes

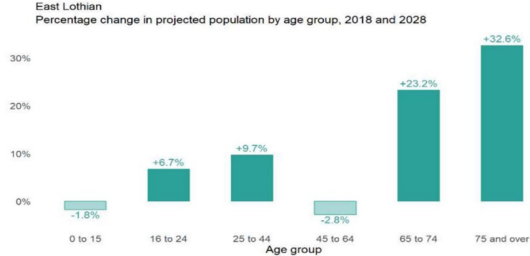
5. Date of IIA

7 March 2024 from 10am – 11.30am via Teams.

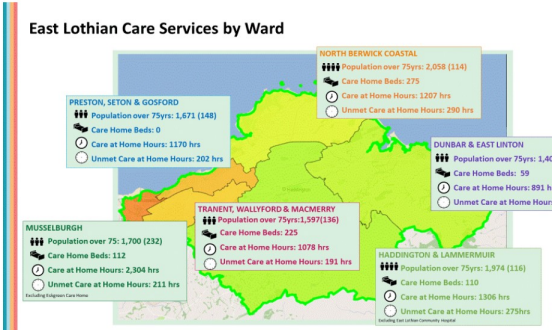
6. Who was present at the IIA? Identify facilitator, lead officer, report writer and any employee representative present and main stakeholder (e.g. Council, NHS)

Name	Job Title	Date of IIA training
Gillian Neil	General Manager, Acute and Ongoing Care, ELHSCP	
Thomas Miller	NHS Lothian Unions Representative	
Jackie Little	Senior Nurse, Blossom House/Belhaven	
Judith McNeill	Team Leader – Adult Health and Social Care	
Candice Darling	Planning Officer, ELHSCP	
Paul Currie	Interim General Manager, Strategic Integration, ELHSCP	
Jennifer Jarvis	ELHSCP Communications Lead	
Ogden-Smith, Jane (Facilitator)	Equalities and Engagement Officer, ELHSCP	Sept 2009, Dec 2021

7. Evidence available at the time of the IIA

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal														
Data on populations in need	<ul style="list-style-type: none"> • East Lothian Joint Strategic Needs Assessment • East Lothian by numbers • Planning Older People's Services Data Report (Jan 2024) 	<p>Our population is changing. People are living longer, and our previous research has informed us that many older people want to stay in their own homes for as long as possible.</p> <p>Population Over the next 10 years, population growth will rise in East Lothian, especially in the over 65 year age group. See Graph 1 below.</p>  <table border="1"> <caption>East Lothian: Percentage change in projected population by age group, 2018 and 2028</caption> <thead> <tr> <th>Age group</th> <th>Percentage change</th> </tr> </thead> <tbody> <tr> <td>0 to 15</td> <td>-1.8%</td> </tr> <tr> <td>16 to 24</td> <td>+6.7%</td> </tr> <tr> <td>25 to 44</td> <td>+9.7%</td> </tr> <tr> <td>45 to 64</td> <td>-2.8%</td> </tr> <tr> <td>65 to 74</td> <td>+23.2%</td> </tr> <tr> <td>75 and over</td> <td>+32.6%</td> </tr> </tbody> </table> <ul style="list-style-type: none"> • We can see that there will be a huge increase in the number of older people requiring services. The East Lothian population has grown by 20% since 2000 and at a higher rate than the Scottish population as a whole • Our population has grown at a higher rate in areas of higher deprivation, specifically within the 1st quintile (most deprived) to the 3rd quintile while the population has decreased in areas of lowest deprivation (4th and 5th quintiles). • From 2018 to 2043, East Lothian's population is predicted to increase by a further 12.8% reaching a peak of 121,743 and will grow at faster rate than Scotland as a whole. • East Lothian currently has a higher female than male population, although the largest percentage age group in both categories is currently in the middle aged group (aged 45-59). 	Age group	Percentage change	0 to 15	-1.8%	16 to 24	+6.7%	25 to 44	+9.7%	45 to 64	-2.8%	65 to 74	+23.2%	75 and over	+32.6%
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		<ul style="list-style-type: none"> • While life expectancy is set to increase for both males and females, women in East Lothian continue to have a longer life expectancy than men. By 2043 this projected to increase to 82 years for males and 85 years for females. • Similar to Scotland as a whole, East Lothian has higher mortality rates among the most deprived areas of the county. The leading cause of death in women in East Lothian is Dementia and Alzheimer’s (14.5% of all female deaths) and it is the second leading cause of death in men after heart disease (7.9% of all male deaths). <p>Our resources are dwindling due to the impact of national austerity measures on public services, Brexit and recovery from Covid. We no longer have the ability to make capital investments. This, together with evidence from engagement, leads to placing much greater emphasis and resource into early intervention, intermediate care and other forms of support that enable people to live at home for as long as possible.</p>
Data on service uptake/access	As above	<p>For the purposes of this IIA, it is worth emphasising that the older people that we support have come to us through statutory routes. We know that we are facing an increasing demand for care-at-home and other community support to keep people safe and independent at home.</p> <p>The graphic below outlines that:</p>

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		<ul style="list-style-type: none"> • All areas have insufficient care at home provision, notably the North Berwick and Dunbar areas • East Lothian has, as a whole area, an over provision of care home capacity • Preston Seton and Gosford Area requires additional Care Home provision.  <p>East Lothian Care Services by Ward</p> <table border="1"> <thead> <tr> <th>Ward</th> <th>Population over 75yrs</th> <th>Care Home Beds</th> <th>Care at Home Hours</th> <th>Unmet Care at Home Hours</th> </tr> </thead> <tbody> <tr> <td>NORTH BERWICK COASTAL</td> <td>2,058 (114)</td> <td>275</td> <td>1,207 hrs</td> <td>290 hrs</td> </tr> <tr> <td>PRESTON, SETON & GOSFORD</td> <td>1,671 (148)</td> <td>9</td> <td>1170 hrs</td> <td>202 hrs</td> </tr> <tr> <td>MUSSELBURGH</td> <td>1,700 (232)</td> <td>112</td> <td>2,304 hrs</td> <td>211 hrs</td> </tr> <tr> <td>TRANENT, WALLYFORD & MACMERRY</td> <td>1,597 (136)</td> <td>225</td> <td>1,078 hrs</td> <td>191 hrs</td> </tr> <tr> <td>DUNBAR & EAST LINTON</td> <td>1,405</td> <td>59</td> <td>891 hrs</td> <td>202 hrs</td> </tr> <tr> <td>HADDINGTON & LAMMERMUIR</td> <td>1,974 (116)</td> <td>110</td> <td>1,306 hrs</td> <td>275 hrs</td> </tr> </tbody> </table> <p>Social-work-funded care home places are expensive, coming in at around £890 per person per week. Shifting the focus from allocating care home places and using hospital beds to supporting people at home not only lessens the financial burden on ELHSCP but also gives it more resource to focus on meeting the older population’s wish to live independently at home with appropriate support in place.</p>	Ward	Population over 75yrs	Care Home Beds	Care at Home Hours	Unmet Care at Home Hours	NORTH BERWICK COASTAL	2,058 (114)	275	1,207 hrs	290 hrs	PRESTON, SETON & GOSFORD	1,671 (148)	9	1170 hrs	202 hrs	MUSSELBURGH	1,700 (232)	112	2,304 hrs	211 hrs	TRANENT, WALLYFORD & MACMERRY	1,597 (136)	225	1,078 hrs	191 hrs	DUNBAR & EAST LINTON	1,405	59	891 hrs	202 hrs	HADDINGTON & LAMMERMUIR	1,974 (116)	110	1,306 hrs	275 hrs
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<p>Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.</p>	<ul style="list-style-type: none"> • ONS Facts and Figures about people in East Lothian • NRS 2011 Census (out of date and awaiting information from NRS from 2022 Census) • Scottish Government Equalities 	<p>Dunbar population</p> <p>In 2018, 20% of the population were aged 65+. The projected growth of population by 2028 the 65+ population will rise to 23.8%.</p> <p>Scottish Index of Multiple Deprivation</p> <p>East Lothian consists of 6 wards and 132 data zones, of which 8 data zones</p>																																			

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	<p>Evidence Finder (by extrapolation)</p> <ul style="list-style-type: none"> • Dunbar and East Linton Ward Snapshot 2022 	<p>are in the 20% most deprived of Scotland.</p> <ul style="list-style-type: none"> • People living in the most deprived areas are statistically more likely to experience health inequalities. This means lower life expectancy, higher rates of disease, more long-term illness. • People living in the least deprived areas have a life expectancy 8 years (males) and 4.8 years (females) higher than those in the most deprived areas • The areas of highest deprivation in East Lothian are largely to the west of the county specifically in areas in Musselburgh, Tranent and Prestonpans. There are also pockets of deprivation in Haddington and Dunbar. • Around 95% of people in East Lothian living in the community live within an urban setting and 5% live in more rural settings. <p>Deprivation in Dunbar</p> <p>The Scottish Index of Multiple Deprivation (SIMD) 2020 identifies concentrations of deprivation in East Lothian.</p> <ul style="list-style-type: none"> • None of the 17 data zones in the Dunbar and East Linton ward are within the 20% most deprived across East Lothian. • The lowest ranked data zone is Harbour/Victoria St/Castle St, ranked 33rd out of 132 data zones in East Lothian, and 2,319 out of 6,976 in Scotland.

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
		<ul style="list-style-type: none"> 4 data zones in the Dunbar and East Linton ward are within the 20% least deprived across East Lothian and Scotland
Data on equality outcomes	<ul style="list-style-type: none"> ONS Facts and Figures about people in East Lothian NRS 2011 Census (out of date and awaiting information from NRS from 2022 Census) Scottish Government Equalities Evidence Finder (by extrapolation) Dunbar and East Linton Ward Snapshot 2022 	<p>Our information about BME people living in East Lothian is poor as we are still awaiting information on this from the 2022 NRS Scottish Census (these are expected in the summer of 2024). We do know that we have Ukrainian and Syrian refugees, a Polish community, a South Asian community, migrant workers and asylum seekers in East Lothian. As the council does not facilitate a local equality network, we rely on statistics about use of translation and interpretation services and ethnicity recorded in education statistic to try to understand more about these communities, how many there are and where. Our own records show little uptake of our services by people in these groups and we are reaching out to the South Asian, Polish and Ukrainian communities to understand more about potential barriers to accessing services.</p> <p>We have also been engaging with the Deaf community around their needs for support from specialist workers who sign (BSL).</p> <p>We are also monitoring the use of sponsorship schemes by our commissioned care providers and are working with partners to ensure that we are aware of issues with Modern Day Slavery for health and social care staff</p>

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
		employed through employment agencies.
Research/literature evidence	<ul style="list-style-type: none"> • Independent Review of Adult Social Care in Scotland • Analysis of Care at Home Service Provision East Lothian (awaiting publication) • Community Hospitals and Care Homes Provision Change Board Final Report 2021-22 • Health and Social Care for Older People Statement of Intent (2021) • National Care Home Standards • National Health and Wellbeing Outcomes Framework • East Lothian IJB Strategic Plan • East Lothian Dementia Strategy • East Lothian Carers Strategy 	<p>The evidence tells us that people want person-centred care that is flexible and responds to people’s changing needs. It shows us that people wish to remain part of their communities and to be involved in those communities. The vast majority of older people would like to stay at home as long as possible and a high proportion would like to die at home with appropriate support in place for them and their families. Very few wanted to die in hospital.</p> <p>To support this move to live longer at home, our own research indicates that people felt that early intervention to prolong good health was essential, as were intermediate care services including MSK, adaptations and equipment, hospital at home and care at home to provide health and social care support locally. People were also keen on a more locality-based approach and there was also a desire for the development of community hubs to provide a base for staff and a focus for health and social care support.</p>
Public/patient/client experience information	<ul style="list-style-type: none"> • Reporting from statutory complaints procedure (including comments and compliments) • Patient Experience data 	Although there are complaints, most are resolved early in the statutory complaints procedure with very few requiring oversight from the SPSO. As well as complaints, there is a significant number of compliments for the quality of care for service-users and their carers and families, mainly to do with

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
	<ul style="list-style-type: none"> • Care Opinion (East Lothian seach) 	<p>sensitivity, quality of support and commitment to person-centred care.</p> <p>Care Opinion feedback in relation to East Lothian tends to centre on health services but there are some about care homes and assessment and these are positive.</p>
Evidence of inclusive engagement of people who use the service and involvement findings	Please see section on engagement above and link to feedback reports listed above	
Evidence of unmet need	<ul style="list-style-type: none"> • East Lothian Joint Strategic Needs Assessment • Engagement reports (listed above) • Service-user and patient experience data 	See information in section on Evidence.
Good practice guidelines	<ul style="list-style-type: none"> • National Care Home Standards 	
Carbon emissions generated/reduced data		Blossom House is in an old building which is energy inefficient.
Environmental data	n/a	
Risk from cumulative impacts	n/a	
Other (please specify)	n/a	
Additional evidence required	n/a	

8. In summary, what impacts were identified and which groups will they affect?

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>Positive</p> <ul style="list-style-type: none"> • Safer living conditions for residents • Safer working conditions for staff 	<p>Age (residents and staff), Disability (residents, carers), staff, carers, people in geographical areas</p>
<p>Negative</p> <ul style="list-style-type: none"> • Loss of local facility providing specialised support. Mitigation: There are a number of care homes that may be able to support residents and each case will be assessed on individual residents' needs • Impact (physical, mental health and socio-economic on older relatives having to travel elsewhere in East Lothian to visit relatives, exacerbated by poor public transport links from Dunbar to other parts of East Lothian. Mitigation: Families will be fully involved in discussions about where their relative will live • Impact on staff who live locally having to work further afield, particularly those who don't drive and have to rely on poor public transport links. Mitigation: Encouraging ELC to provide better public transport networks that meet people's needs. • Impact on staff after having spent most of their working lives at Belhaven. • Impact on carers from loss of relationships with trusted staff. • Impact on carers and families who are able to spend the entire day with their relatives at Belhaven – loss of structure and connection, particularly impactful for married couples. Mitigation: it should be possible to work with other care home providers to replicate this. • Loss of support from Belhaven staff group to relative's group, which has contributed to relatives' mental health and wellbeing. • Imposing extra pressures in terms of travel time and expense on staff who are also unpaid carers. Mitigation: This should be offset by NHS Lothian's Organisational Change processes and learnings from the closure of Eskgreen. 	<p>Age (residents and staff), Disability (residents, carers), staff, carers, people in geographical areas, Fairer Scotland Duty</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
<ul style="list-style-type: none"> • Level of staff fitness making it difficult to work in modern hospitals with long corridors – some found the previous relocation to ELCH because of water quality issues at Belhaven very difficult for range of reasons, including transport to ELCH. Mitigation: Staff would be fully protected under NHS Lothian’s organisational change procedures – confident that this would support staff to new and positive destinations. Also, learnings from redeploying the Eskgreen staff complement • Impact on self-funders and families having to pay higher rates at other care homes. Mitigation: We hope to deal with this through planning and commissioning so that the issue of high care home rates is addressed • Impact on staff who are also unpaid carers – particularly the impact of increased travel time. Mitigation: Encouraging ELC to provide better public transport networks that meet people’s needs • Loss of local care home provision in Dunbar. Mitigation: We are addressing this through the Planning for Older People’s Services work. • Loss to the wider community – including intergenerational work with local schools • Issues around staff safety relating to the isolated position of Belhaven. Mitigation: encouraging independent care homes to make similar links. • Impact of the loss of Belhaven site on Dunbar community. • Potential lack of capacity to support people at home in years to come (based on current experience). Mitigation: We are addressing this through the Planning for Older People’s Services work. • Potential of losing experienced staff who don’t want to move and would prefer to work for a local supermarket. Mitigation: Staff would be fully protected under NHS Lothian’s organisational change procedures – confident that this would support staff to new and positive destinations. Also, learnings from redeploying the Eskgreen staff complement • Money spent on upgrading Blossom House will be lost. <p>General mitigations:</p> <ul style="list-style-type: none"> • Ensuring that if Blossom House closes and people are relocated, that this is done in line with the 	

Equality, Health and Wellbeing and Human Rights	Affected populations
commitments made in the Carers' Strategy, Dementia Strategy and Planning for Older People's service work. <ul style="list-style-type: none"> Ensuring excellent communications with residents, carers, families, staff and the wider public in Dunbar. 	

Environment and Sustainability including climate change emissions and impacts	Affected populations
Positive	Blossom House is energy inefficient and its closure would reduce the impacts that ensue from this.
Negative	The potential for increased car usage

Economic	Affected populations
Positive	n/a
Negative	n/a

9. Is any part of this policy/ service to be carried out wholly or partly by contractors and if so how will equality, human rights including children's rights, environmental and sustainability issues be addressed?

No

10. Consider how you will communicate information about this policy/ service change to children and young people and those affected by sensory impairment, speech impairment, low level literacy or numeracy, learning difficulties or English as a second language? Please provide a summary of the communications plan.

A communications plan will be developed to support people to understand other avenues of support, taking due account of the needs of people who do not have English as a first language or low literacy levels.

11. Is the plan, programme, strategy or policy likely to result in significant environmental effects, either positive or negative? If yes, it is likely that a Strategic Environmental Assessment (SEA) will be required and the impacts identified in the IIA should be included in this. See section 2.10 in the Guidance for further information.

No,

12. Additional Information and Evidence Required

None.

13. Specific to this IIA only, what recommended actions have been, or will be, undertaken and by when? (these should be drawn from 7 – 11 above) Please complete:

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
Communications plan	Jen Jarvis, Communications Lead	If decision to close Blossom House is confirmed, as soon as possible thereafter	Six months from start of communications plan
Follow-up IIA	Jane Ogden-Smith, Equalities and Engagement Officer	If decision is confirmed, 6 months from closure	n/a

14. Are there any negative impacts in section 8 for which there are no identified mitigating actions?

No

15. How will you monitor how this proposal affects different groups, including people with protected characteristics?

By Integrated Impact Assessment.

16. Sign off by Head of Service



Name – Gillian Neil, General Manager, Acute and Ongoing Care

Date – 21st March 2024

17. Publication

Completed and signed IIAs should be sent to:

jogden-smith@eastlothian.gov.uk for publication on the ELHSCP [IIA Database](#) on www.eastlothian.gov.uk