



## Care Closer to Home. The Gateway, Middlesbrough: A New Integrated Health, Social Care & Housing Pathway

This case study sets out the economic, health and social benefits of Keiro's service model at The Gateway Centre, Middlesbrough. The Centre is a 40 bed facility with a Community Hub and 12 transitional living options providing residential nursing and both residential and non-residential rehabilitation and support services and housing for clients with long term neurological conditions and other complex needs.

It demonstrates how the service can support patients, Local Authorities and the NHS to help people to access an array of specialist transitional rehabilitation and support services and, in partnership with Thirteen Housing Group, provide move-on and long term accommodation to reduce the demand upon NHS services, reducing the time that patients have to wait for an intervention and the default use of care homes as a long-term solution.



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## Introduction

The Gateway is a Teesside based rehabilitation, care and housing service which helps people to step forward on the journey to independence. Clients can also access specialist long term care, regular short breaks & respite from The Gateway. There is also a vast array of support and information services provided by 3rd & Independent sector partners in the Community Wellbeing Hub, which help people to plan for and support their life upon discharge.

The 40 bed unit provides residential services for clients with long term neurological conditions and other complex care needs. A typical user of this service will require a period of specialist community rehabilitation, usually following a period of in-patient NHS treatment. People can also 'step up' into the service for episodes of care and rehabilitation in order to help them stay independent, with a view to avoiding hospital & long term care placements wherever possible.



The rehabilitation centre is not designed to be a 'home for life' for the majority of clients (although there are a number of long term beds for complex care patients) who would stay in the unit for a defined period before moving home or on to one of the range of transitional or permanent supported living placements.

The staff team and the services provide focus on preparation for a move to independent supported living. The service also provides specialised long term in patient care for complex cases (e.g. ventilated care), high dependency beds, short break respite services, along with an array of out-patient community services to enable sustainable discharges and ongoing social and clinical support.

## Transitional Housing

For clients not quite ready for the move home, our partnership with Erimus Housing, part of the Thirteen Housing Group, provides a range of new-build accessible housing designed in contemporary style for clients and their families as a step forward to full independent living.



When people are ready to move on from the transitional housing they can access a range of different housing options through Erimus Housing, including general, adapted and extra care housing or even support in adapting their own properties. The transitional accommodation is let on a short term basis and comprises of 2 three bedroom houses, 2 two bedroom bungalows and 8 two bedroom apartments, which include design features suitable for clients with mobility problems and come fully furnished. Whilst living in the housing clients can still access all the services within The Gateway Centre, including from the community wellbeing hub (see below).

The residential centre is located on the same site as the transitional housing and is available to clients who would benefit from the health club facilities, specialist care, physiotherapy, legal advice and other support services located within the community wellbeing hub. Once an individual is assessed as ready to move on from the transitional housing, advice and support about the range of housing options available will be provided by staff at Erimus.

Direct referrals for the transitional housing can be made by health and social care providers or any other professionals working with the client group. Self-referrals can also be made for the transitional housing by clients or their families.

## The community wellbeing hub

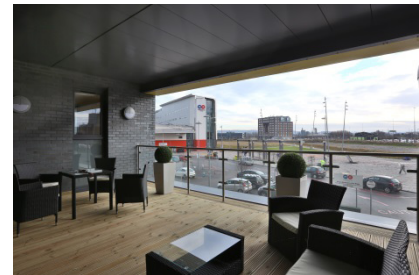


Whilst at The Gateway, clients (and their families too) can use the fully accessible services, equipment and additional services as part of their rehabilitation programs to assist them to move on towards living independently. They can also use the leisure services in the Wellbeing Hub to chill out and unwind.

As well as the range of therapy, leisure, rehabilitation and fitness opportunities in the Wellbeing Hub, Keiro and its partners provide information and other services in the Knowledge Centre. This is designed to help people to start or continue to live successfully in the community and help them to self-manage their conditions wherever possible

These facilities and services are also available to the wider community and help to build relationships and a sense of community.

The Gateway is located right next door to Middlesbrough College meaning that our clients have the opportunity to use the facilities there as part of their rehabilitation programs. The proximity to the College is unique for a rehabilitation service and will open up additional opportunities to our clients. Features include:



- World-class leisure facilities that are fully accessible to people with disabilities
- Opportunities for self-management of conditions, 3rd sector partner organisations on site with specific skills in vocational and educational rehabilitation
- Health and wellbeing facilities for the whole community.

## Why the need to develop?

The current default for the vast majority of patients is to initially low cost but 'long term' nursing home placements where they will be looked after but not given the full opportunity to explore their potential and to maximise their independence. More expensive specialist residential rehabilitation services have, until the development of the Gateway, struggled to incentivise commissioners of services to invest in rehabilitation as they cannot see a clear return on that investment.

The Gateway provides an exit strategy from initially more expensive 'short term' specialist residential rehabilitation in a seamless way, with access to the cheaper and more independent transitional and long term housing options.

For this pathway to work fully and maximise both the return investment and the independence of the individual, there also needs to be an exit strategy from the transitional properties. This could only be achieved by the public private partnership with Erimus/Thirteen as they can provide a vast array of housing options and services across the region for people to move onto.

To make the move to long term housing sustainable, providing ongoing access to the community wellbeing hub for ongoing rehab, information, peer support or even just social opportunities is vital to the project and positive outcomes. This service also seeks to support people to self-manage their own conditions where appropriate and reduce the burden on hospitals and GP's in return.

The Gateway, and most importantly the service partnerships that underpin it, have had to develop in response to the needs of the market and strategic objectives as the only way to overcome the currently fragmented and commissioned service pathways from hospital to home, in order to allow more people to live closer to home and at reduced overall cost to the state.

### **Opening doors to build effective partnerships**

Key partners were established early in order to be able to provide an array of integrated services from health, social care, housing, education, legal, peer support, advice, therapy and self-management programmes from all provider sectors. The remaining challenge has been to evidence the economic as well as the health, social and lifestyle benefits of the project.

To maximise a return on investment in rehabilitation also requires a coordinated approach from health, social care and housing commissioners with a clear incentive to 'invest to save'. The independent health economic report below seeks to provide that and confirms The Gateway's strategic fit with direction of the NHS and integrated health and social care commissioning.

Collaboration and genuine partnerships are the only way to be able to provide 'more for less' and this shared culture needs to be embraced wholly in order to deliver the win-win for all stakeholders and especially for the people living with injury or illness and their families.

### **Outcomes being delivered**

- *Rehabilitation pathways* - Clients have been admitted from acute and post-acute services and have progressed to the transitional housing and their own home, rather than requiring long term residential nursing care;
- *Early hospital discharge* - Clients have started their rehabilitation journey earlier and progressed more quickly to independent living;
- *Step up access to the transitional housing directly from the community* - Clients have accessed the transitional housing following the breakdown of home care packages and avoided care home admissions;
- *Transitional housing* has been used as an alternative to care home placements;
- *Seamless care and support* – Clients have accessed the same therapy and support services provided in the Gateway when they have moved on to transitional housing.

### **Evaluating the benefits of The Gateway Centre**

The Academic Health Science Network for the North East and North Cumbria commissioned the York Health Economics Consortium to conduct an independent health economics review to assess the costs and benefits of the Keiro service model and to assess the impact that the service could have if introduced in other parts of the country. The Final report identifying the Economic Value of the Keiro Service Pathway is now complete. It found:

- Substantial financial savings - Over the 10 year time horizon, and assuming a new cohort of 40 patients replaces each previous cohort at discharge, then it is estimated that Keiro produces savings of £156 million, with costs of £108 million compared to £267 million if patients are managed in standard care;
- Keiro's service model meets the strategic direction of the NHS Five Year 'Forward View' and other key strategic drivers;
- The model improves the patient's outcomes and their overall experience;
- The cost reductions afforded by the model are applicable beyond the neuro-rehabilitation patient cohort to a range of other patient groups with complex and varied rehabilitation needs.

## Conclusions

- The standard care pathway for complex clients who are unable to return home following discharge from acute services is long term nursing care, generally provided in a generic care home. The cost of this care is considered to be low in the short term; however, over the course of an individual's life this represents a huge cost to the NHS and social care;
- The Keiro Model, as typified by The Gateway provides a viable alternative to the standard care home pathway. The higher initial costs are quickly offset due to the reduction in client dependency and the option to move on to more appropriate and less expensive long term housing. These savings are spread across the NHS at a local and national level and social care;
- In addition to the savings made, the model provides individual clients with an opportunity to increase their independence and achieve their own personal outcomes. Future research is likely to show substantial social return on investment (SROI) and benefits are likely to arise in a number of areas including public health and a reduction in the requirement for primary care and avoidable hospital admissions;
- Transitional and long term specialist housing is pivotal to the model, both in terms of savings and client outcomes. The transition from the transitional housing to longer term specialist housing options;
- Maximum return on investment requires a coordinated approach from health, social care and housing commissioners - 'invest to save'.

## Lessons learnt so far

- Reconsider HCA grant element for the transitional houses
- Be clearer about the offer earlier to develop whole system buy in
- Employ a Dedicated Housing Project Manager
- Employ a Dedicated Pathway Manager
- Provide more flexible services for a wider range of transitional patients
- Clearer Contracts negotiated upfront and less innovation completed at risk

## Note

The views expressed are those of the author and not necessarily those of the Housing Learning and Improvement Network.

## About The Keiro Group

Keiro provides specialist services for people with long term neurological conditions and complex healthcare needs, delivering targeted access to rehabilitation and specialist treatments, a Health and Wellbeing Hub, transitional housing, and educational/vocational rehabilitation. It offers a solution for the NHS and the people of the North East region, providing an integrated package of care that is guided by the individual needs of patients through multi-disciplinary team assessment and review.

[www.keirogroup.co.uk](http://www.keirogroup.co.uk)



## About Thirteen Group

Thirteen Group is one of the North East's leading social housing organisations and prides itself on its passion for what it does, including owning and managing over 32,000 homes. Spanning an area from North Tyneside to York, it provides homes for rent and sale; creates opportunities for people to make a positive change, raising their ambitions as well as the aspirations of communities as a whole.

[www.thirteengroup.co.uk](http://www.thirteengroup.co.uk)

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## About the Housing LIN

The Housing LIN is the leading 'learning lab' for a growing network of housing, health and social care professionals in England and Wales involved in planning, commissioning, designing, funding, building and managing housing, care and support services for older people and vulnerable adults with long term conditions.

Previously responsible for managing the Department of Health's Extra Care Housing Fund, the Housing LIN is called upon by a wide range of statutory and other organisations to provide expert advice and support regarding the implementation of policy and good practice in the field of housing, care and support services.

Further information about the Housing LIN's 'health and housing intel' with its comprehensive list of online resources and on how to participate in our shared learning and service improvement networking opportunities, including 'look and learn' site visits and network meetings in your region, visit: [www.housinglin.org.uk](http://www.housinglin.org.uk)

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