

Overview of the UK's dementia bed provision

“Where’s the best place to locate a new specialist dementia care home?”

Carterwood co-founder and director, Ben Hartley, shares market insight into the UK's dementia bed provision.

Supporting a person in the later stages of dementia to live in their own home is very challenging for all involved. As a result, 283,000 people with dementia live in care homes,¹ and dementia is often one of the main reasons behind their move. As every care home operator knows, dementia is more than just memory loss. The care of people with dementia requires expertise, and in turn, specialist dementia care commands higher fees.

The opportunity to develop specialist dementia care homes is significant. As people with dementia are living longer and with more complex health conditions, their need for care is increasing. The Alzheimer's Society urges that providing care to people with dementia must be the primary concern and focus of the care home sector.²

The well-publicised study by *The Lancet* in August 2017 predicts that more than 70,000 care home places will be needed by 2025.³ Since it is estimated that in excess of 80% of residents living in care homes have significant memory problems or dementia,⁴ to meet this challenge we are going to need 56,000 more dedicated dementia beds within 8 years. The question then is, ‘where?’

Understanding dementia provision

In order to build a detailed picture of local dementia provision, Carterwood has launched a new dedicated dementia analysis. We have surveyed more than 10,000 care homes, and updated our comprehensive database through over 4,000 telephone interviews, covering private, not-for-profit and local authority homes. For any given location in England, Northern Ireland, Scotland or Wales, as part of our improved market assessment report, we can now provide a unique and comprehensive overview of the dementia competition and its quality.

Our new data shows that, today, around a quarter of older people's care home beds are dedicated to dementia, and circa 7,500 homes are registered to provide some form of dementia care. This leaves around 4,200 homes not registered for dementia. The proportion of dedicated dementia beds is, however, gradually increasing, with operators recognising there will soon be a shortfall of dementia beds. Some 61% of homes for older people built since 2010, for example, provide some form of dedicated dementia care, and 36% of all care home beds built since 2010 are dedicated to people with dementia.

¹ Alzheimer's Society. 2015. Cited by ENRICH, Understanding care homes, 2017.

² Alzheimer's Society. 2013. Low expectations: Attitudes on choice, care and community for people with dementia in care homes.

³ Kingston, Andrew et al. 2017. Is late-life dependency increasing or not? A comparison of the cognitive function and ageing studies (CFAS). *The Lancet*, Volume 390, Issue 10103.

⁴ Alzheimer's Society. 2013. Low expectations: Attitudes on choice, care and community for people with dementia in care homes.

What does dementia care look like in the UK?

Before we look at geographical differences and opportunities in dementia provision, we will first analyse in greater detail what dementia care looks like in the UK. Significantly, 37% of all older people's care homes registered for both elderly frail and dementia care offer a dedicated dementia unit.

A dedicated dementia environment not only provides a safe, therapeutic space for residents living with dementia, but gives a home the added advantage of enabling the other care home residents to have appropriate access to outside space at all times.

Just 10% of care homes are entirely dedicated to older people with dementia, and the average size of a dedicated dementia-only home built since 2010 is 47 beds. While this proportion would need to increase in order to stay in touch with the growing demand for dementia care, there will always be people who need personal and nursing care. This generally makes mixed registration homes with a dedicated unit more attractive for operators.

There is almost no difference in the availability of dementia beds in rural versus urban locations, and the level of provision is evenly split between private and not-for-profit operators. Perhaps not surprisingly, nursing homes are almost twice as likely to contain specialist dementia beds as personal care homes. Some 41% of nursing homes provide a form of dedicated dementia care.

Furthermore, the larger the home, the more likely it is to cater for dementia. The vast majority (83%) of homes with more than 60 beds registered for dementia, for example, provide a dedicated unit within the home. The average size of a dedicated unit is 27 beds, often occupying an entire floor.

Geographical differences in dementia provision

If we analyse the geographical differences, it is clear that while people with dementia live throughout the UK, the current supply of dementia beds is not evenly distributed. Notably, the South West has the lowest proportion of total registered dementia beds at 21%, with Devon's dementia beds accounting for just 12.2%. In contrast, Northamptonshire's proportion of dedicated dementia beds tops the UK at 35.8%.

Demand and supply for dementia care also varies considerably depending on the locality. In Hackney, for example, there are no homes providing any form of dedicated dementia care. Travel 11 miles down the road to Barking and Dagenham, and you'll find 60% of beds can support residents with dementia. Local differences may often partly stem from the profile of the local population, and reinforce the need for a sound market understanding when deciding where best to locate a new specialist dementia care home.

Determining the dementia opportunity

To a large extent, the local demand and dementia opportunity will also depend on the quantity and quality of existing provision. Our new dementia research, combined with mystery shopping as part of our market assessment report, means that for the first time we can build a detailed picture of the local provision by answering questions such as: Is the physical environment fit for purpose? Can

people be cared for safely and without undue restriction? Can people stay in the home for life, or will they have to move on?

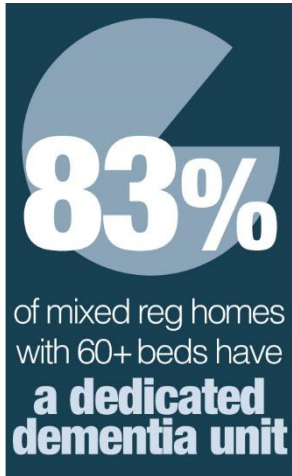
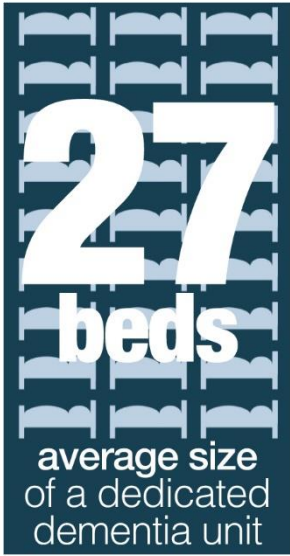
This information can be used to assist in planning a new development, or to determine what changes could be made in the category of care being provided in an existing home to meet local demand. Approximately a third of family members, for example, have reported that the person with dementia had moved since first going into care, the most common reason being an increase in needs.⁵

To conclude and answer the first question, “where’s best to locate a new specialist dementia care home?”, you’ll need to appreciate that locational differences, ranging from the age profile of a population to the existing and planned dementia bed supply, can have a very significant impact on the success of your new scheme. Obtaining market information specific to your shortlist of preferred areas is an essential prerequisite for planning and due diligence.

*Source of statistics: A-Z Care Homes Guide and Carterwood, unless otherwise stated.

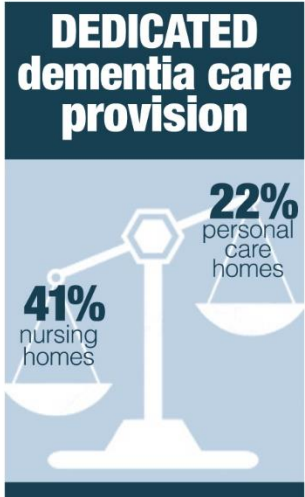
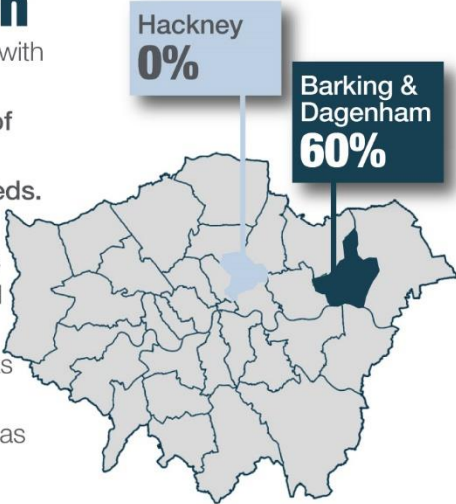
Attached infographics:

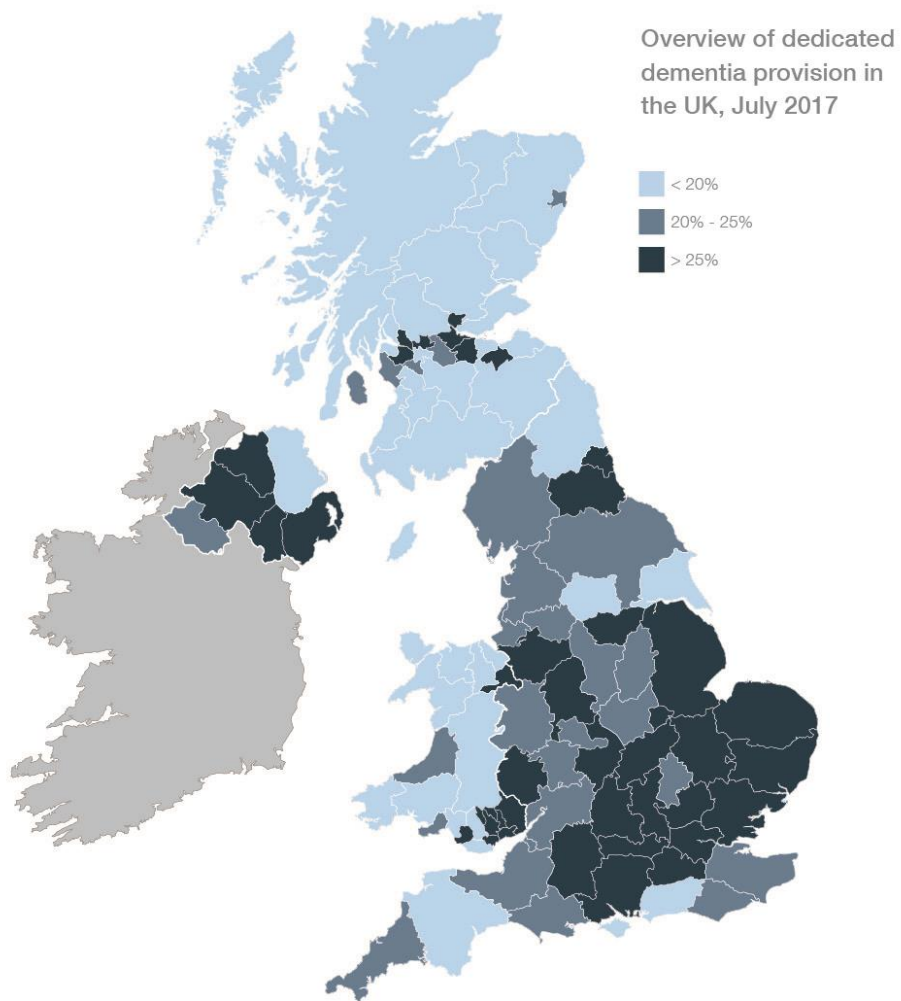
⁵ Alzheimer’s Society. 2013. Low expectations: Attitudes on choice, care and community for people with dementia in care homes.



London

is the region with the highest proportion of dedicated dementia beds. However, Hackney has no dedicated dementia beds whereas Barking & Dagenham has 60%





Source: A-Z Care Homes Guide and Carterwood