Northern Health and Social Care Trust

Rural Needs Impact Assessment

Section 1: Define activity subject to Section 1(1) of Rural Needs Act (NI) 2016

1A. Short title describing activity being undertaken that is subject to Section 1(1) of the Rural Needs Act (NI) 2016:

Implementation of Dementia Enhanced Provider Rate

1B. Are you Developing, Adopting, Implementing or Revising a Policy a Strategy or a Plan? (Underline or Circle)
Or are you delivering or designing a public service? (Underline or Circle)
What is official title of this Policy, Strategy, Plan or Public service (if any)?

Dementia Enhanced Stratified Provider Rate

1C. Give details of the aims and/or objectives of the Policy, Strategy, Plan, Public Service or initiative:

The Provider Collaborative Proposal Group has been tasked by Chief Executives of 5 of the HSC Trusts with reviewing current demand for placements for those patients awaiting discharge in acute and intermediate care beds. The Proposal Group undertook analysis of demand and a snapshot review of those patients experiencing delayed discharges in September 2025. This review was to establish the placement need and to and make any recommendations which could potentially create capacity within the care home sector and aid patient flow through the system. The initial snapshot, as at September 2025 identified demand for dementia placements.

The aims of the Provider Collaborative Proposal Group are:

- To create capacity in Dementia (DE) care home sector, initially to respond to discharges from acute hospitals and from intermediate care bed based service
- To offer Care Homes block bed contracts for DE categories of care
- To offer Care Homes a Trust Provider Rate which is stratified, based on the needs of the service users and associated staffing model

A Provider Rate has been proposed which outlines bed rates for entry level beds for dementia as well as those requiring a lower level of additional support. The Trusts intend to issue a regional Expression of Interest with the aim of stimulating growth in the DE sector. The Provider Rate will apply from a specified date onwards, for all entry level and additional dementia care beds; those service users with the most complex of needs will continue to be placed on a case by case basis.

1D. What definition of 'rural' is the Trust using in respect of the Policy, Strategy, Plan or Public Service:

Population Settlements of less than 5,000

Section 2 - Understanding impact of Policy, Strategy, Plan or Public Service

2A. Is the Policy, Strategy, Plan or Public Service likely to impact on people in rural areas?

Yes ☐ **No** ☐ **If response is NO Go To Section 2E.**

2B. How is it likely to impact on people in rural areas?

The aim of this proposal is to expand current capacity for dementia placement and potentially improve the choice of location for service users who require a dementia placement and their families and carers. It is acknowledged that the Trusts will be limited in their ability to influence where any additional capacity is created and therefore there may not be an increase in the availability of dementia placements in rural areas. Any additional capacity offered through Independent Service Providers will be considered by local Trusts on a case by case basis to ensure a geographical spread of placements, including more rural areas, where reasonably practicable.

There is also a risk that as a result of care home re-registration, the availability of placements in other categories of care, such as frail / elderly may be adversely impacted. This has the potential to reduce the choice of locations for those service users requiring a frail / elderly placement in the future. This may impact people in rural areas if placements are not available in their locality; carers and families may be unable to visit their loved ones due to reduced access to public transportation or the requirement to travel further.

The Provider Collaborative has established a sub-group to monitor any additional capacity and unintended consequences; these will be closely monitored to minimise the impact on other service users as far as possible. It should be noted that service user and next of kin preferences in terms of placement location forms an essential part of each service user's individual assessment of need.

2C. If the Policy, Strategy, Plan or Public Service is likely to impact on people in rural areas *differently* from people in urban areas, please explain how it is likely to impact on people in rural areas differently?

This proposal is intended to expand capacity for dementia placements, it is recognised that there is significant demand for dementia placements and it is often challenging to meet the preferences of service users and their families in terms of placement location. It is recognised at the outset that the Trusts will be limited in their ability to influence where additional capacity is offered therefore, depending on where any additional capacity is offered, families and carers may be impacted differently in different areas. There is also a risk that care home re-registration may result in less placements for other categories of care, where care homes chose to re-register to provide dementia care.

It is noted that there is still a difference in access to transport between those living in rural and urban areas, those in rural areas may have less access to public transportation or may be more reliant on personal transportation. The location, and travelling distance, of any placements may impact the ability to access transport to visit loved ones in care.

As outlined above, the Trusts will be limited in their ability to increase the availability of placements in more rural areas however, any additional proposed activity will be considered by the local Trust to ensure a geographical spread of placements where possible. In addition, service user and next of kin preferences are a key consideration of each individuals assessment of needs and placement process undertaken by each Trust.

2D. Please indicate which of the following rural policy areas the Policy, Strategy, Plan or Public Service is likely to primarily impact on.

Jobs or Employment in Rural Areas		Community Safety or Rural Crime		Agriculture-Environment	
Education or Training in Rural Areas		Health or Social Care Services in Rural Areas	**X**	Transport	**X**
Rural Development		Broadband/Mobile Communications in Rural Areas		Other, please state below;	
Poverty or Deprivation in Rural Areas		Rural Business, Tourism or Housing			

2E. Please explain why the Policy, Strategy, Plan or Public Service is NOT likely to impact on people in rural areas.

If you completed 2E above GO TO Section 6

SECTION 3 - Identifying Social and Economic Needs of Persons in Rural Areas

3A. Has the Trust taken steps to identify the social and economic needs of people in rural areas, relevant to the Policy, Strategy, Plan or Public Service? Yes [X] **No** [ ] **if the response is NO, GO TO Section 3D**

3B. Which of following methods or information sources were used by the Trust to identify these needs?

Consultation with rural and other relevant stakeholders / Survey or Questionnaire / Research / Statistics / Publications / Other methods. Please provide details:

3C. Please provide details of the methods and other information sources used to identify the social and economic needs of people in rural areas including relevant dates, names of organisations, titles of publications, website references, details of surveys or consultations undertaken etc.

The Provider Collaborative Proposal Group undertook analysis of patients who experienced a delayed discharge from hospital across Northern Ireland which identified a need for additional dementia placements. A further snapshot of regional data, taken as at 9th September 2025, identified that dementia related delays were resulting in significant bed days post medically or intermediate care fit. An increase in dementia care placements

would allow service users to be cared for in the most appropriate setting in a more timely manner to improve outcomes for individuals. It is acknowledged that the Trusts will be limited in their ability to influence where additional capacity is offered.

The large majority of adults living in rural areas hold a full driving licence (85%, compared with 71% of urban dwellers) and less than a quarter (20%) of rural dwellers live within a 3-minute walk of the nearest bus stop, compared with 39% of those living in urban areas – with 9% of rural dwellers living a 44 minute or longer walk to their nearest stop (The Travel Survey NI 2016-18). More than half (52%) of rural households reported 'never' using bus services. (Key Rural Issues Northern Ireland 2020, DAERA). Therefore those people who reside in more rural areas may be impacted differently depending on where additional capacity is offered due to the reliance on private transport and reduced accessibility to public transport to visit their loved ones.

In summary impacts are likely to be related to:

- Limited availability of public transport.
- Cost of transportation to visit loved ones in care homes may adversely affect those already living in poverty
- Limited provision of community transport
- Social impact in relation to lack of family support network as visiting may be impacted by transport availability and cost
- Availability of home care placements in rural areas to ensure appropriate support for people being discharged from hospital

Rural Statistics on Department of Agriculture, Environment and Rural Affairs (DAERA) website including statistics on employment and income, access to transport and https://www.daera-ni.gov.uk/articles/whats-new-rural-needs

The Trusts recognise the impact the proposal will have on families and carers visiting patients, such as travel and additional costs associated with this. This proposal may have an impact on people living in rural areas who do not have access to private transport. Those living in rural locations may require more effort, time, and resources to travel to visit loved ones than those in an urban area. Mitigating measures are outlined in section 2C above and Section 5 below.

3D Please explain why no steps were taken by the Trust to identify the social and economic needs of people in rural areas?

SECTION 4 - Considering Social and Economic Needs of Persons in Rural Areas

4A. What issues were considered in relation to the social and economic needs of people in rural areas?

Availability of public transport
Economic Needs - cost of transport

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Social needs – increasing levels of poverty and ability to visit relatives

It is accepted that the HSC Trusts are limited in their ability to influence bed and placement availability across the region however an essential element of an individuals assessment includes the wishes of the service user and their next of kin in terms of placement location.

SECTION 5 - Influencing the Policy, Strategy, Plan or Public Service

5A. Has the policy, strategy, plan or public service been changed by consideration of the rural needs identified?
Yes ☐ **No** ☒ **if the response is NO, GO TO Section 5C**

5B. If yes, how have rural needs influenced the policy, strategy plan or public service?

5C. If no, why have the rural needs identified not influenced the policy, strategy, plan or public service?

This proposal is intended to expand capacity for dementia placements and increase the choice of placement location for those service users who require a dementia placement. Any additional capacity which is offered by the Independent Sector will be carefully considered by the local Trust to ensure fairness, equity of access and assess any impacts on service users. This will include an assessment on reconfigured capacity i.e. capacity which constitutes a change in registered care provision. An essential aspect of the discharge process for each individual is to take into consideration the wishes of the service user and their next of kin, includes preferences in terms of location. The Trusts will continue to take these preferences into consideration and take steps to reduce the impacts as far as reasonably practicable.

Section 6: Documentation:

6A. Please tick below to confirm that the RNIA Template will be retained by the Trust and relevant information on the Section 1 activity compiled in accordance with paragraph 6.7 of the guidance.

I confirm that the RNIA Template will be retained and relevant information compiled ☐

Rural Needs Impact Assessment undertaken by:	N Corkin OBO Provider Collaborative – Care Homes		
Job Title/Directorate	Planning		
Signature:	N Corkin	**Date:**	Jan 26
Approved by:			
Job Title/Directorate			
Signature:		**Date:**	