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Beech Lodge Care Home – Additional Statement of Need

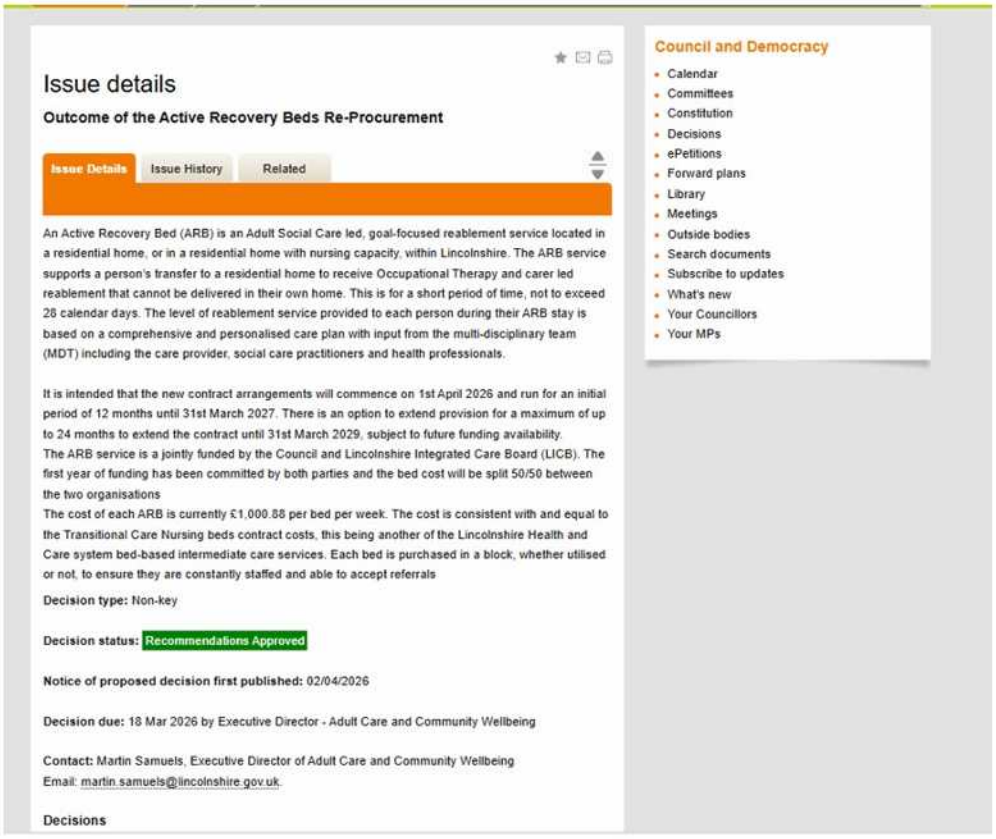
The need for nursing beds in South Holland, Lincolnshire, is driven by an aging local population and a tight regional capacity, featuring about 28 to 30 total registered care and nursing settings across the Spalding and Holbeach areas. Local infrastructure and care markets face distinct pressures.

Local Demographics and Capacity

- **Limited Nursing Specialism:** The area contains roughly 23 residential settings but only around 5 dedicated nursing homes, placing high demand on specialized nursing and nursing-dementia beds.
- **Quality and Funding Pressures:** Age UK reports that under-funding impacts staff retention, with roughly a third of regional facilities flagged or needing quality improvements in recent regulatory check-ins.
- **Weekly Costs:** Average weekly fees in the South Holland area are approximately £1,356 for standard nursing care and rise to about £1,512 for nursing-dementia care.

Regional Developments

- **Health and Wellbeing Hub:** The £26 million South Holland Health and Wellbeing Hub project at the former Castle Sports Complex site in Spalding is scheduled for completion in late summer 2026 to help address broader community health needs.
- **Ongoing Proposals:** Additional private care home developments (such as proposed 80+ bed facilities) continue to move through local planning committees to bridge the long-term gap between elderly demographic growth and physical bed availability.
- Furthermore, there is an increasing demand for Active recovery beds in Lincolnshire specifically in relation to Nursing transitional beds



Issue details

Outcome of the Active Recovery Beds Re-Procurement

Issue Details | Issue History | Related

An Active Recovery Bed (ARB) is an Adult Social Care led, goal-focused reablement service located in a residential home, or in a residential home with nursing capacity, within Lincolnshire. The ARB service supports a person's transfer to a residential home to receive Occupational Therapy and carer led reablement that cannot be delivered in their own home. This is for a short period of time, not to exceed 28 calendar days. The level of reablement service provided to each person during their ARB stay is based on a comprehensive and personalised care plan with input from the multi-disciplinary team (MDT) including the care provider, social care practitioners and health professionals.

It is intended that the new contract arrangements will commence on 1st April 2026 and run for an initial period of 12 months until 31st March 2027. There is an option to extend provision for a maximum of up to 24 months to extend the contract until 31st March 2029, subject to future funding availability.
The ARB service is a jointly funded by the Council and Lincolnshire Integrated Care Board (LICB). The first year of funding has been committed by both parties and the bed cost will be split 50/50 between the two organisations
The cost of each ARB is currently £1,000.88 per bed per week. The cost is consistent with and equal to the Transitional Care Nursing beds contract costs, this being another of the Lincolnshire Health and Care system bed-based intermediate care services. Each bed is purchased in a block, whether utilised or not, to ensure they are constantly staffed and able to accept referrals

Decision type: Non-key

Decision status: Recommendations Approved

Notice of proposed decision first published: 02/04/2026

Decision due: 18 Mar 2026 by Executive Director - Adult Care and Community Wellbeing

Contact: Martin Samuels, Executive Director of Adult Care and Community Wellbeing
Email: martin.samuels@lincolnshire.gov.uk

Decisions

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Alhziemers.co.uk report that one in three people born today will develop dementia in their lifetime.
Research commissioned by Alzheimer's Society, shows that around a million people in the UK have a form of dementia. This is projected to rise to 1.4 million people by 2040.
There are over 70,800 people living with young onset dementia – where symptoms develop before the age of 65.
It is estimated that 70 per cent of people in care homes in England have dementia or severe memory problems.
Not only will Beech Lodge provide employment growth within the community the build plan itself will have little impact on surrounding areas.
Beech Lodge is ideally placed for those people living with Dementia with green spaces appropriately placed see the funding project for the benefit of living in a 'greener environment' this really places Beech Lodge in a unique competitive position, hence why on average Beech Lodge sustains a healthy 99% occupancy rating. See Dementia UK Improving indoor & outdoor spaces for people living with dementia link.
This extract of recommendation's was taken from the report 2026- **Reducing hospital admissions which is 'country wide; concern not just South Holland.**

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People with dementia frequently experience avoidable, unwanted hospital admissions at the end of life. Hospital admissions for people with advanced dementia are often precipitated by crises such as aspiration pneumonia, dehydration or behavioural better death' Dr Hilda Hayo, Chief Admiral Nurse and Chief Executive, Dementia UK;

Dementia UK 'a **High-quality and person-centred end of life care**

Reducing hospital admissions

People with dementia frequently experience avoidable, unwanted hospital admissions at the end of life. Hospital admissions for people with advanced dementia are often precipitated by crises such as aspiration pneumonia, dehydration or behavioural better death' Dr Hilda Hayo, Chief Admiral Nurse and Chief Executive, Dementia UK;

These episodes are regularly underpinned by unmet physical or emotional needs that could have been addressed through proactive, community-based support; as such, these admissions are deemed preventable.

However, lengthy hospital stays and misalignment between care received at the end of life and individual preferences can be highly distressing for both the person living with dementia and family carers:

Hospitals are rarely set up to deliver end of life dementia care, and the environments can be busy, disorienting and often unfamiliar, which can exacerbate confusion and distress at the end of life.

In addition, over admittance into acute care during the end of life stage is extremely costly. A study in London and South-East England found that the average cost of care for people with dementia in the last three months of life was £31,225, but adjusted total costs were significantly higher among those who went into hospital than those who did not: £33,239 compared to £21,522. This cost difference is driven by in-hospital costs, intensive care, emergency room visits, ambulance services and outpatient hospital contacts.

More than **one in four** people with dementia die in hospital.

29% of people with dementia received care in hospital during the final three months of life.

People with dementia spend **around 20%** of the last six months of life in hospital.

The vast majority of people with dementia would prefer to die in their place of residence; either a care home (**59%**) or their own home (**39%**)

Produced by – Anita Rowley (Operations Area Manager)