



Report of the Cabinet Member for Health & Wellbeing

Cabinet - 19 April 2018

Outcome of Residential Care and Day Services for Older People Commissioning Reviews

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| Purpose: | The report provides an outline of the preferred options for the Residential Care and Day Services for Older People Commissioning Reviews, with a view to proceeding to public and staff consultation on the preferred options. |
| Policy Framework: | Social Services and Well-Being (Wales) Act 2014 |
| Consultation: | The preferred options will be subject to public and staff consultation. Legal, Finance, Access to Services. |
| Recommendation(s): | Cabinet are asked to consider the following recommendations: <ol style="list-style-type: none">1) Agree to commission complex care and residential reablement through our internal residential service and concentrate residential respite within the internal service, unless service users chose to access respite or complex care in the independent sector.2) Proceed to a 12 week public and staff consultation on the proposal to maintain a mixed delivery model of internal and external services and apply a greater degree of specialism on internal beds.3) Proceed to a 12 week public and staff consultation on the proposal to transform the day service so it focusses on higher dependency, and complex/dementia care. |
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1. Executive Summary

- 1.1 In line with the corporate process, Adult Services has conducted two Commissioning Reviews of Residential Care and Day Services for Older People, and reached the Gateway 2 stage of the process. The Gateway 2 reports are appended as Appendices 1 and 2 to this report.
- 1.2 This paper outlines the preferred options, the service specific implications and the recommendation to proceed to public and staff consultation on the options.
- 1.3 Swansea Council recognises that it needs to shape the services that it delivers internally and those that it commissions externally to meet 21st century needs.
- 1.4 In line with the principles of the Social Services and Wellbeing (Wales) Act, the Council agreed a model for Adult Services in 2017 which had the following key principles at its core:
 - Better prevention
 - Better early help
 - A new approach to assessment
 - Improved cost effectiveness
 - Working together better
 - Keeping people safe.
- 1.5 In undertaking the review of Residential Care and Day Services for Older People these principles have been central to reaching a position of a preferred direction of travel.
- 1.6 In relation to residential care, the preferred options are to shape the Council's internal provision to focus on complex care, residential reablement and respite, and commission standard residential care and nursing care in the independent sector.
- 1.7 In line with the key principle of better prevention, the Council will be able to designate more in-house beds as respite provision, which will allow carers greater certainty and planning surrounding respite arrangements helping them to keep their loved ones at home for longer by providing them with a much needed break.
- 1.8 The reablement provision will be developed to better support people when leaving hospital or when they are finding it difficult to stay at home without support. Again, in line with the key principles of better prevention and early intervention, providing people with support in this way allows them to regain skills and independence to return to their own homes in line with their desired personal outcomes.
- 1.9 By adopting the preferred options and developing its provision in relation to complex care, the Council will be able to provide better care for people with complex needs such as dementia. This is an area of need that the

independent sector struggles to meet as typically it is more expensive to deliver because of the level of staff required to meet complex needs.

- 1.10 Refocussing internal provision in this way will allow the Council to provide better services and care for its residents. It will also provide market certainty for the independent sector surrounding the commissioning of standard residential care. The independent sector already provides the majority of standard residential care placements in Swansea and to an equivalent standard to that provided by the Council.
- 1.11 The Council also recognises that to deliver this vision of an improved residential care offer will require significant capital investment and this requirement has been added to the Council's Capital programme for the next 5 years.
- 1.12 By concentrating its resources on fewer discreet specialisms, the Council will ultimately provide a better service for residents in Swansea with complex needs because we will be in a position to upskill our staff to better meet these needs and consequently provide a higher quality service. If we no longer deliver standard residential care however, we will need fewer beds to deliver a service that only caters for residential reablement, respite and complex needs based on current demand and projected future growth in demand.
- 1.13 Subject to consultation, it is therefore proposed that Parkway Residential Home may close.
- 1.14 Of paramount importance will be what happens to those remaining residents and staff at Parkway, should it close. Residents will be fully supported to find alternative accommodation which meets their needs and staff will be supported to find alternative employment in line with the Council's HR processes.
- 1.15 If it is agreed following the consultation that Parkway will close, the Council will ensure that the Parkway site is released to still support accommodation needs of older people, whether this be age-friendly accommodation to encourage independent living or use of the home itself by the independent sector.
- 1.16 In a similar way to the Residential Care review, the preferred option of the Day Services review is to refocus internal provision on complex care and no longer deliver care for non-complex needs.
- 1.17 Again, shaping the service in this way supports the key principles of prevention and early intervention by ensuring those with complex needs are supported to remain at home for longer as well as provide much needed respite for carers.
- 1.18 It will allow Swansea Council to provide a specialist service for those with complex needs, ultimately providing better care for Swansea residents because again we will be able to upskill our staff to concentrate on providing this specialist service in a way that we are currently unable to do by needing to cater for people with a range of complex and non-complex needs.

- 1.19 Again, by refocussing the service in this way, less capacity will be needed and therefore, again subject to consultation, the Hollies and Rose Cross Day Service buildings may close, although provision will be maintained on the remaining day service sites.
- 1.20 All existing attendees would be fully supported with individual move on plans to either access an alternative day service place if they have complex needs or other support in the community if they do not have complex needs. For those with complex needs, it is envisaged that the majority of attendees would attend their nearest alternative day centre; for the Hollies, this would be Llys Y Werin in Gorseinon and for Rose Cross, this would be St Johns in Manselton.
- 1.21 In the event that the proposals are agreed following the consultation, alternative uses for the Hollies Day Service would be looked at and the potential to use the building to complement the co-located home would be explored. In relation to Rose Cross, as the day service is located within the Home itself, much needed additional communal space could be provided for residents in the home itself which would add value to their stay there.
- 1.22 Whilst a key driver for this change is to remodel the service to meet the needs of those most vulnerable in the City and County of Swansea, adopting this approach will also allow Adult Services to meet considerable budgetary challenges to allow them to deliver financially sustainable, high quality services.
- 1.23 Should the preferred options be agreed in principle, the Council will proceed to public consultation on the preferred direction of travel for Residential Care and Day Services and the specific potential closure of Parkway Residential Home, the Hollies and Rose Cross Day Service buildings.
- 1.24 It should be noted that if these proposals are agreed following the public consultation, the Commissioning Reviews in relation to Residential Care and Day Services for Older People will be complete and it is not envisaged that any further review will take place during this administration.
- 1.25 Remodelling the services in this way will allow the Council to provide better services, and allow people to meet their desired outcomes whilst delivering better care and ultimately keeping people safe and secure for the reasons explained earlier in this executive summary.

2. The Preferred Options and Options Appraisal:

- 2.1 Preferred options were drafted in relation to the following reviews:
- Residential Care for older people
 - Day Services for older people.
- 2.2 Stakeholder workshops took place to ascertain feedback surrounding the advantages/disadvantages of the full range of options as follows:

- Residential Care for older people (Thursday 9th June 2016)
- Day Services for older people (Friday 10th June 2016)

Stakeholders included a range of internal and external providers, care managers, support and inter-related services, carers, representative groups and elected Members.

- 2.3 Following the stakeholder workshops, a dedicated session was also held with the Trade Unions on Tuesday 21st June 2016 to talk through their views on the options.
- 2.4 The detailed options appraisals were then held as follows:
- Residential Care for older people (Friday 24th June 2016)
 - Day Services for older people (Monday 27th June 2016)
- 2.5 The Panel for each appraisal comprised the relevant Commissioning Review Lead, the respective Principal Officer, the Head of Adult Services, Chief Social Services Officer, the Director of Place, the then Cabinet Member as well as representatives from Legal, Finance, Procurement, HR and Corporate Property. The Director of People also attended the Residential Care for older people options appraisal.
- 2.6 On carrying out the appraisal, it was concluded that the original set of options was too extensive and complex. The options for each review were therefore refined to make them more straight forward and understandable.
- 2.7 The criteria used to appraise each option focussed on the following:
- Outcomes
 - Fit with strategic priorities
 - Financial impact
 - Sustainability/viability
 - Deliverability.
- 2.8 The full criteria are contained in the Gateway 2 reports appended as Appendices 1 and 2 to this report.

Residential Care for Older People Preferred Options:

- 2.9 The detailed Gateway 2 report is included as Appendix 1 to this report.
- 2.10 The options were considered against 4 distinct categories as follows:
- 1) Strategy
 - 2) Service Model in relation to Short Term/Complex Residential and Nursing Care
 - 3) Model of Delivery
 - 4) Balance of Mixed Model

2.11 The highest scoring and therefore preferred options against each category were as follows:

1) *Strategy:*

Preferred Option: Review Strategy in relation to pattern of residential care provision balanced with alternative accommodation provision including Extra Care Housing

2) *Service Model in relation to Short Term/ Complex Residential and Nursing Care:*

Preferred Option: Commission Short Term/Complex Care on specific specialist sites

3) *Model of Delivery:*

Preferred Option: Maintain mixed delivery to deliver new model

4) *Balance of Mixed Model:*

Preferred Option: Apply greater degree of specialism on internal beds and provide no standard residential care in-house. Commission everything else.

(NB Within this preferred option, there was an assumption that the current level of internal beds would be too many to deliver this option, and it was therefore assumed that this would result in a reduction of beds. However, further work would need to be done at the point of implementation to quantify how many beds were needed before arriving at a position where the potential reduction in capacity could be quantified).

2.12 A more detailed rationale is provided within the Options Appraisal Matrix within the Gateway Report contained at Appendix 1 of this report, but in summary the preferred options scored the highest on the basis of the following.

2.13 The preferred options would allow Adult Services to remodel its internal service to focus on the specialisms of complex care, reablement and respite. In line with the Social Services and Wellbeing (Wales) Act, the focus of the service would be about aiming to achieve better outcomes for people with reablement and greater independence both for residents and carers at its core.

2.14 Individuals would be defined as having complex needs if they had needs attributable to one or more of the following features, and they required at least 2 hours of one to one care per day:

- 1) Double staffed care for people who are bed bound; have high risk of developing pressure sores; require careful repositioning.
- 2) People who have complex medication regimes.
- 3) People who require feeding or who are fed via a PEG.
- 4) People who have challenging behaviour and have packages of care that are difficult to manage.
- 5) People who have dementia or declining cognitive ability.
- 6) People with bariatric care needs.
- 7) People with learning difficulties who require increased care
- 8) People with manual handling needs requiring use of equipment and / or two person handling.

- 9) People with communication difficulties who need higher levels of care to explain or deliver care.
- 2.15 The targeted focus on respite and reablement would also help Adult Services to better manage demand, by focussing our internal service on early intervention and prevention to minimise or delay the need for more managed care.
- 2.16 Applying this degree of specialism would allow Adult Services to develop and upskill its internal workforce to focus on these needs, and therefore strive to improve quality of the service and better health and wellbeing outcomes for residents in the internal service.
- 2.17 The preferred options would also give the external market certainty surrounding future commissioning intentions, and would give them certainty of commissioning surrounding standard residential care.
- 2.18 From a financial perspective, recognising that the internal unit cost was substantially higher than the external unit cost, applying this degree of specialism would mean that less in-house beds were required and potentially release savings through an overall reduction in internal provision required.
- 2.19 Whilst there would be an assumed reduction in internal provision, a significant proportion of internal provision would be retained which would allow a certain degree of resilience in the event of external market failure.

Day Services for Older People Preferred Options:

- 2.20 The detailed Gateway 2 report is included as Appendix 2 to this report.
- 2.21 The options were considered against 3 distinct categories as follows:
- 1) Overall Day Services Model
 - 2) Delivery Model
 - 3) Income Generation
- 2.22 The preferred options for Day Services for Older People were as follows:
- 1) *Overall Day Service Model:*
Preferred Option: Develop service with reduced capacity refocussing day centres on higher dependency, complex/dementia care, but also act as community hubs to offer activities and community contribution through an expanded range of tier 2 services and local area co-ordination.
 - 2) *Delivery Model:*
Preferred Option: Mixed Delivery with clearly defined internal and external services
 - 3) *Income Generation:*
Preferred Option: Flat rate charge for access to services under community hub provision which do not meet an 'assessed for' eligible need.

- 2.23 A more detailed rationale is provided within the Options Appraisal Matrix within the Gateway Report at Appendix 2. However, in summary the preferred options scored highest on the basis of the following.
- 2.24 In a similar way to the proposals surrounding residential care, the preferred options would allow the Council to remodel the internal service to focus on more complex needs. Again, in line with the Social Services and Wellbeing (Wales) Act, the focus of the service would be about aiming to achieve better outcomes for people with reablement and greater independence both for attendees and carers at its core.
- 2.25 An individual will be defined as having complex needs and eligible to access a day service if they have needs attributable to one or more of the following features and only a day service can meet that need rather than some other means of support:
- 1) Require support to remain at home due to high levels of high levels of daily living, personal care support and health needs including dementia; failure to provide day service may lead to inability to remain at home.
 - 2) Require support to enable reablement or maintenance of daily living skills to enable the person to remain in the family home.
 - 3) Evidence to support the well-being of older people where there is a risk of loneliness, isolation and depression which could lead to significant mental ill-health.
 - 4) Respite required for family and carers where there is a risk of the family situation breaking down.
- 2.26 This approach would also allow us to better manage demand by providing better support to individuals with complex needs and their carers through having a service which focuses on complex needs.
- 2.27 Again, we would be able to upskill the workforce to focus on complex needs and therefore provide a higher quality service to those that attended, including the potential for therapy input if needed. Those with non-complex needs, and consequently no eligible social care need to be met via a day service, would still be supported if needed. However, they would be better supported through other means in their local communities, drawing on the support of Local Area Coordinators where applicable and other naturally occurring opportunities in communities.
- 2.28 From a financial perspective, refocussing the service on complex needs would mean that less places were required which would release an overall saving on the delivery of day services.

3 Implications of the preferred options:

Residential Care:

- 3.1 In order to consider the specific implications, each preferred option will be considered in turn.

3.2 *Preferred option 1: Review Strategy in relation to pattern of residential care provision balanced with alternative accommodation provision including Extra Care Housing*

Due to the time delay in moving forward with the review, this option has been adopted as business as usual. Work is progressing to develop the Strategy and there is no requirement to publicly consult on the intention to proceed with this preferred option.

3.3 *Preferred option 2: Commission Short Term/Complex Care on specific specialist sites*

It is proposed that our internal service will focus on complex care, residential reablement and residential respite, unless service users choose to access respite and complex care in the independent sector. It should be noted that nursing respite cannot be delivered in-house due to CIW registration restrictions. It is proposed that this proposal is accepted by Cabinet as business as usual. There is no requirement to publicly consult on this proposal.

3.4 *Preferred option 3: Maintain mixed delivery to deliver new model*

We will commission all standard residential and nursing care in the independent sector, but retain an in-house service to deliver residential reablement, residential respite, and complex care.

3.5 *Preferred option 4: Apply a greater degree of specialism on internal beds and provide no standard residential care in-house. Commission everything else.*

Some detailed modelling has been undertaken to determine the potential impact of the proposed options in terms of reduction of internal beds and day service places based on current and projected demand in line with the preferred options.

3.6 This modelling exercise indicated that 157 internal beds would need to be retained to deliver the preferred options in line with current and future projected demand. The Local Authority currently has 198 beds (180 of which are registered). The modelling is based on an analysis of bed usage in February 2018, combined with projected increased demand in line with population growth by 2025 as follows:

| Current bed usage | Current usage | 2020 | | 2025 | |
|---------------------------------|---------------|-----------------|-----|------------------|-----|
| | | % | No. | % | No. |
| Complex Care (not inc dementia) | 86 | 3.4 | 1.3 | 6.4 | 2.5 |
| Dementia Care | 48 | 11.2 | 5.4 | 13.2 | 7 |
| Assessment and rehab Services | 34 | 3.4 | 1.2 | 6.4 | 2.3 |
| Respite services | 23 | 3.4 | 0.8 | 6.4 | 1.5 |
| TOTAL | 143 | 8.7 beds | | 13.3 beds | |

Of the remaining 37 in-house registered beds, these were either being used by residents who either required standard residential care or were vacant.

Therefore on the basis of 157 beds being required to deliver the new model, 41 would be surplus to requirements, which would equate to the closure of one residential home leaving some surplus capacity to allow for flexibility surrounding delivery of the model.

- 3.7 Public consultation would consequently be required on Preferred Options 3 and 4 before a final decision could be made. We will need to consult on the Local Authority ceasing to deliver standard residential care, and the closure of one residential home.
- 3.8 If this proposal was agreed following public consultation, it is proposed that the Council would initially close the home identified and then gradually start to phase out standard residential care in the remaining services by no longer accepting new admissions for standard residential care. This approach would cause least disruption to current residents and only those in the home earmarked for closure would have to find an alternative home. However, this approach would mean that there would be insufficient capacity for all those currently residing in the home earmarked for closure to be relocated to an in-house bed. However, each individual would be supported to find an alternative home and it should be noted that some individuals may decide they wish to reside in an independent sector home rather than an internal Council-run one as factors such as location often play a larger part in home care choice than the provider.

Day Services

- 3.9 *Preferred option 5: Develop service with reduced capacity refocussing day centres on higher dependency, complex/dementia care, but also act as community hubs to offer activities and community contribution through an expanded range of tier 2 services and local area co-ordination.*
The modelling exercise indicated that reducing capacity of day services places from 440 to 315 (a reduction in 125 places), would allow the service to meet current and projected future demand in line with the preferred options. The reduction of the 125 places would equate to the closure of two day services. The modelling is based on an analysis of occupancy in February 2018, combined with projected increased demand in line with population growth by 2025, as well as assuming any of those on the waiting list have complex needs.
- 3.10 In terms of implementation, in a similar way to how we managed the closure of the Beeches, following the final post-consultation Cabinet decision in August 2018, we would need to undertake an individual review of each service user who currently attends day services to determine whether or not they had complex needs and consequently an eligible social care need. This review would involve a social worker, the individual themselves and any carer/family as required. If it was determined through this review that the individual did not have complex needs, an individual plan would need to be determined as to how this person would access support/social opportunities on leaving the

service. If the individual lived in an area served by a Local Area Coordinator, support would be sought through them if appropriate. This plan would then be put in place and reviewed for a period of time to make sure no safeguarding issues emerged. The individual would have a clear point of contact with the service should their needs change over time and greater support was required.

- 3.11 It should be noted that the approach taken at the Beeches delivered good outcomes for all concerned; those that were eligible accessed alternative services if they wished to do so and appropriate move on plans were agreed with the remainder. The transition arrangements proved successful and no safeguarding issues emerged. For example, some people no longer wanted to continue attending the day service, but wanted to achieve other outcomes such as meeting a family member once a week. The social worker was able to work with the individual to ensure that outcome could be achieved, and the individual felt a greater sense of wellbeing as a consequence.
- 3.12 Since completing the Commissioning Review, it has been decided to not proceed with the second part of this preferred option to create Community Hubs as this approach has been superseded by the corporate Commissioning Review of Services in the Community. Tier 2 services will be developed in line with this model, or linked to existing hubs in the community.
- 3.13 Preferred option 5 therefore to develop the service with reduced capacity refocussing day centres on higher dependency, complex/dementia care would be subject to public consultation.
- 3.14 *Preferred option 6: Mixed Delivery with clearly defined internal and external services*
Implementation of Preferred option 5 is contingent on there continuing to be a mixed delivery of internal and external services. This aspect of the review would form part of the public consultation.
- 3.15 *Preferred option 7: Flat rate charge for access to services under community hub provision which do not meet an 'assessed for' eligible need.*
Due to the hub element of the preferred options not moving forward, this preferred option is now redundant. However, it should be noted the proposals surrounding charging for day services have been moved forward as part of the budget setting process.

4 Specific impact on internal Services and mitigation

- 4.1 An evaluation exercise was undertaken to determine the services that would no longer be required as a result of implementation of the preferred options.
- 4.2 An evaluation workshop consequently took place on 31st January 2018 to evaluate each service against specific criteria.
- 4.3 The evaluation workshop comprised representation from Adult Services including the Head of Adult Services and Chief Social Services Officer, Finance, Building Services and Corporate Property.

Residential Care

- 4.4 An evaluation matrix was utilised which assessed each residential home against the following specific criteria as follows:

Building Suitability:

- Current Condition Survey
- Building Investment to date
- Estimated investment in building required
- Care Inspectorate Wales/Health and Safety recommendations outstanding
- Fitness for purpose of existing building layout to deliver proposed future model
- Fitness for purpose in terms of accessibility and security to fit future model
- Estimated value of site for redevelopment

Location:

- Availability of alternative residential provision in the vicinity

Current Level of Use:

- Current occupancy levels
- Current level of alignment with the new model

Dependencies:

- Grant funding received to invest in building/services (potential claw back if decommissioned services).

- 4.5 Each criteria attracted a score of up to 5 with a weighted maximum score of 255, with the higher the score indicating that the home was most fit for purpose to deliver the proposed model.

- 4.6 The outcome of the evaluation led to the following overall scores:

| Home | Overall Score |
|------------------|----------------------|
| Bonymaen House | 200 |
| Parkway | 132 |
| St Johns | 139 |
| Rose Cross House | 171 |
| Ty Waunarlwydd | 190 |
| The Hollies | 162 |

- 4.7 Parkway therefore attracted the lowest score, and it is therefore proposed, subject to public consultation, that Parkway would be the home to close if the preferred options emerging from the review were agreed.

- 4.8 This would mean that the residents at Parkway would have to relocate elsewhere to facilitate closure, if this outcome is agreed following the public consultation. At the time of the potential closure, there would be a maximum of 26 residents to relocate (there are currently 19 residents in Parkway).

- 4.9 In order to mitigate the impact on those residents affected, a hold would be put on any new admissions to Parkway once the consultation commenced to minimise any potential impact should the proposals be agreed following the consultation.

- 4.10 At the time of writing the report, there were 6 long-term bed vacancies internally and just over 60 vacancies in the independent sector so there would be sufficient vacancies to accommodate those affected.
- 4.11 It is anticipated that some residents in Parkway would need to relocate to independent sector homes. However, it is important to note that some people may wish to relocate to the independent sector rather than internal homes as many different factors determine care home choice such as location rather than specifically who the provider is. There are 5 independent sector homes located within the Sketty ward, with a further 7 in adjacent wards.
- 4.12 The impact of the overall implementation of the model would also be mitigated through the proposed approach to gradually phase out standard residential care in the remaining in-house homes, so we would not require people in the other homes to relocate.
- 4.13 If the proposals are agreed following the public consultation, there will be no further new admissions for standard residential care in Local Authority provision. This will mean that those individuals who wish to access standard residential care in the future will access independent sector provision only.

Day Services

- 4.14 A similar evaluation matrix was utilised which assessed each day service against the following specific criteria:

Building Suitability:

- Current Condition Survey
- Estimated investment in building required
- Fitness for purpose of existing building layout to deliver proposed future model
- Estimated value of site for redevelopment

Location:

- Availability of alternative day centre provision in the vicinity

Current Level of Use:

- Current occupancy levels
- Community links established/embedded in the community
- Flexibility of use aligned to future model
- Complexity of need of majority of attendees.

- 4.15 Each criteria attracted a score of up to 5 with a weighted maximum score of 175, with the higher the score indicating that the day service was most fit for purpose to deliver the proposed model.

4.16 The outcome of the evaluation led to the following overall scores:

| Home | Overall Score |
|----------------|----------------------|
| Norton Lodge | 145 |
| The Hollies | 75 |
| St Johns | 150 |
| Rose Cross | 90 |
| Ty Waunarlwydd | 130 |

4.17 The Hollies and Rose Cross Day Services therefore attracted the lowest score, and it is therefore proposed that the buildings would close if the preferred options emerging from the review were agreed.

4.18 At the time of writing the report, there were 14 attendees at the Hollies and 44 at Rose Cross Day Service. In order to mitigate the impact on those affected, a hold would be put on any new admissions to the Hollies and Rose Cross Day Services once the consultation commenced.

4.19 In order to inform their response to the consultation, each service user in The Hollies and Rose Cross would be reviewed during the consultation period to determine whether they had complex or non-complex needs so they could understand how the proposals might affect them. Following the final post-consultation Cabinet decision in August 2018, a further review would be undertaken to ensure that they needs had not changed. If they had complex needs they would be offered a place in the nearest accessible day service to them. For the Hollies, most would therefore attend Llys Y Werin in Gorseinon, an externally commissioned service. For Rose Cross, the majority would be relocated to St Johns in Manselton.

4.20 If they did not have complex needs, a tailor made individual move on plan would be established and they would leave the service. This move on plan might for example involve identifying other opportunities for social activities and interaction either within their local communities or network of family and friends, and the care manager would work with them to put adequate arrangements in place to facilitate this.

4.21 Again, the overall impact of the implementation of the model would be mitigated through the proposed approach to gradually phase out non-complex care in the remaining day services, so we would not review people in the other services or require them to move on at this stage.

4.22 If the proposals are agreed following the consultation, for those that might need our services in the future, only those with complex needs would be able to access them in them in the future. Those with non-complex needs would be signposted and supported to access other forms of support as part of the social work care and support planning process.

4.23 A copy of the full evaluation matrix is attached as Appendix 3 of this report.

5 Summary of recommendations

5.1 Cabinet are therefore being asked to consider the following:

- 1) Agree to commission complex care and residential reablement through our internal residential service and concentrate residential respite within the internal service, unless service users chose to access respite or complex care in the independent sector.
- 2) Proceed to public and staff consultation on the proposal to maintain a mixed delivery model of internal and external services and apply a greater degree of specialism on internal beds.
- 3) Proceed to public and staff consultation on the proposal to transform the day service so it focusses on higher dependency, and complex/dementia care.

6 Financial implications:

6.1 In line with the Council's Medium Term Financial Plan, there are significant savings targets against Adult Services.

6.2 The projected saving from closing Parkway Residential Home would be as follows:

| | £ |
|---|----------------|
| Current budget | 745,750 |
| 10 external placements | (276,342) |
| Income (based on 2/5 of last year's income based on 25 residents) | 86,200 |
| Total Saving | 555,608 |

6.3 The projected saving from closing the Hollies and Rose Cross Day Services would be as follows:

| | £ |
|---------------------------|----------------|
| Hollies current budget | 84,400 |
| Rose Cross current budget | 111,400 |
| Total Saving | 195,800 |

6.4 The total direct saving from these proposals would therefore be £751,408.

6.5 In addition to the above, there would be a full contract review of all existing externally commissioned day services in line with the proposed delivery model if agreed and it is anticipated that this would release some further savings. The current contract value of externally commissioned services is £325,952.

6.6 The above clearly does not equate to meeting the savings targets required of the current budget for Adult Services. However, it should be noted that the Commissioning Reviews are only one element of the savings strategy for Adult

Services. The Commissioning Reviews need to be implemented in line with the Adult Services Improvement Plan as a whole and particularly targeted work surrounding demand management to strive towards meeting the overall Adult Services's savings targets. In addition, transforming both Residential Care and Day Services in line with the preferred options will allow for a keener focus on prevention and early intervention and thus decrease the recourse and consequently spend on long-term Residential Care.

- 6.7 It should also be highlighted that the cost of the routine maintenance required in relation to our residential homes and day services is just over £4million. A contribution toward this is now accounted for in the Capital Programme.

7 Legal implications:

- 7.1 There is a legal requirement to publicly consult and consult with staff affected by the second two recommendations.
- 7.2 Any future provision of services will need to be considered in accordance with the Social Services and Well-being (Wales) Act.
- 7.3 The Social Services and Well-being (Wales) Act and accompanying Part 4 Code of Practice sets out that where an Authority has carried out an assessment which has revealed that the person has needs for care and support then the local authority must decide if those needs meet the eligibility criteria, and if they do, it must meet those needs.
- 7.4 Any employment issues that arise will need to be considered in conjunction with HR, and in accordance with any relevant policies and legislative provisions.

8 Equality and Engagement Implications

- 8.1 Proceeding with the preferred options of the Commissioning Reviews will clearly have an impact on existing home residents and day service users. Due to the nature of the client group, there will be a disproportionate impact on older people and people with a range of disabilities.
- 8.2 5 separate EIAs have been opened as follows to fully assess the impact of the proposals:
- One for the overarching model for residential care.
 - One relating to the potential closure of Parkway Residential Home.
 - One for the overarching model for day services.
 - One relating to the potential closure of the Hollies Day Service building.
 - One relating to the potential closure of the Rose Cross Day Service building.

In relation to both reviews, these are currently in draft and will be informed further by the public consultation. The final EIAs will inform the final decision made surrounding the proposals.

- 8.3 A consultation plan has been developed and is attached as Appendix 4 to this report.
- 8.4 5 consultations will run over the same 12 week period if Cabinet decide to proceed to public consultation. The consultation will fall into 2 categories; general consultation on the proposed delivery model and specific consultation on the services affected.

General Consultation

- 8.5 A general public consultation will be carried out on the new models of delivery for both Residential Care and Day Services. The consultation will be separate for each service model.
- 8.6 The consultation will be carried out using a questionnaire. The survey will be available online and hard copies also made available at key council venues. We will publicise the consultations within the media and via social media platforms.
- 8.7 The consultation will also be publicised to current users, either via individual letters or information packs/posters sent to each venue.
- 8.8 The consultation will be on the new models only but will also need to make reference to the impact of the proposals.

Specific Consultation

- 8.9 3 consultations will be carried out with the specific home and day services that may close if the proposals to change the delivery model are approved.
- 8.10 For Parkway Residential Home, the following will be undertaken:
- A letter will be sent to each resident and their families to explain the proposals, timescales for decision, how the closure will be undertaken if agreed and give opportunities to have their say. This would include how their individual needs would be reviewed and any individual move on plans would be agreed.
 - There will be offers of meetings/face to face opportunities at the care home.
 - During the consultation period, we will ask a social worker to work with each individual affected to review their needs to establish whether or not they have complex needs. This will allow them to make a more informed response to the consultation as they will understand better how the proposals might affect them.
 - There will be an offer of an advocate for each care home resident if they feel they are unable to take part. Some older people will not be able to express their own wishes or concerns without the help of an independent advocate. Where an older person lacks capacity and there is no relative or friend to represent them, an Independent Mental Capacity Advocate *must* be appointed since it is a legal requirement to appoint one when decisions are being made that could result in them being moved to a different care home.

- There will be a key named person available who can be contacted to answer any questions about the consultation.

8.11 For the Hollies and Rose Cross Day Services, the following would be undertaken:

- A letter would be sent to each service user and their families to explain the proposals, timescales for decision, how the closure will be undertaken if agreed and give opportunities to have their say. This would include how their individual needs would be reviewed and how any individual service provision plan would be agreed.
- There would be offers of meetings/face to face opportunities at the day service.
- During the consultation period, we will ask a social worker to work with each individual affected to review their needs to establish whether or not they have complex needs. This will allow them to make a more informed response to the consultation as they will understand better how the proposals might affect them.
- There would also be a key named person available who can be contacted to answer any questions about the consultation

8.12 Staff and Trade Unions will be briefed prior to the start of the consultation.

8.13 All Social Services staff will be briefed and given opportunities to have their say on the proposed new models for Residential Care and Day Services. Staff will also need to be made aware of the potential impact this will have in terms of future service provision.

8.14 Formal consultation will commence with staff who currently work at the services proposed for closure at the same time as the public consultation.

8.15 A Section 188 letter would be issued to the Trade Unions at the commencement of the consultation and they would be fully briefed on the proposals and the potential impact on staff.

8.16 Councillors will also need to be fully briefed surrounding the proposals and the potential impact.

8.17 Draft consultation documents have also been attached as Appendix 5 to this report.

8.18 A 12-week public and staff consultation will commence should Cabinet agree to proceed to consultation on the proposals.

9 Proposed implementation timetable

9.1 Should Cabinet decide to proceed, the proposed outline timetable for implementation would be as follows:

- 30th April 2018; 12-week public and staff consultation to commence
- 23rd July 2018; Public and staff consultation to end

- August 2018; Consideration of final proposals by Cabinet. Final proposals presented to public, staff and trade unions
- September 2018; Redeployment & Redundancy process to commence with staff (should Cabinet agree to proceed in August)
- September 2018; Commence reviews of all affected residents/service users to determine move on plans
- Early 2019; Potential closure of Parkway Residential Home and the Hollies and Rose Cross Day Service buildings.

Background Papers: None.

Appendices:

- Appendix 1: Residential Care for Older People – Commissioning Gateway Review Report Stage 4
- Appendix 2: Day Services for Older People – Commissioning Gateway Review Report Stage 4
- Appendix 3: Residential Services Evaluation Scoring Matrix
- Appendix 4: Adult Services Residential Care and Day Services Engagement Plan
- Appendix 5a-5d: Draft Consultation documents