



## Report of the Cabinet Member for Care, Health and Ageing Well

Cabinet – 20 September 2018

### Outcome of Consultation in Relation to the Residential Care Commissioning Review

<b>Purpose:</b>	The report summarises the results of the recent consultation on the preferred options emerging from the Residential Care Commissioning Review. It also provides final recommendations to Cabinet of how to proceed, taking account of these results and the associated Equality Impact Assessments.
<b>Policy Framework:</b>	Social Services and Well-Being (Wales) Act 2014
<b>Consultation:</b>	A 12-week public and staff consultation was conducted from 30 <sup>th</sup> April 2018 to 23 <sup>rd</sup> July 2018.
<b>Recommendation(s):</b>	<p>Cabinet is asked to consider the following recommendations:</p> <ul style="list-style-type: none"> <li>• Recommendation 1: Refocus the Council's in-house residential care service to focus on complex needs, residential reablement and respite only.</li> <li>• Recommendation 2: Going forward, commission all standard residential care for non-complex needs and nursing care from the independent sector.</li> <li>• Recommendation 3: As a consequence of the above, close Parkway Residential Home ensuring that all affected residents are fully supported.</li> <li>• Recommendation 4: Agree to pay up to a maximum of £105 per person per week top up fees for all residents at Parkway (including self-funders), subject to individual circumstances and social work assessments, for the duration of their residential care placement in the event that Parkway closes following the final decision taken.</li> </ul>
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## **1. Executive Summary**

- 1.1 In line with the corporate process, Adult Services has conducted a Commissioning Review of Residential Care for Older People, and publicly consulted on the preferred options emerging from the Gateway 2 stage of the process.
- 1.2 This paper provides the background to the review, the preferred options and the service specific implications, the findings from the public consultation and the associated Equality Impact Assessments, alongside final recommendations on the way forward for Cabinet.
- 1.3 Swansea Council recognises that it needs to shape the services that it delivers internally and those that it commissions externally to meet 21<sup>st</sup> 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 2016 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 for Older People these principles have been central to reaching a position of a preferred direction of travel.
- 1.6 The preferred options emerging from the review are to shape the Council's internal provision to focus on complex care, short-term 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 should be able to provide better care for people with complex needs such as dementia as staff will have the right skills and knowledge to provide this type of care and our buildings will be set up in such a way to deliver more complex needs. 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 staffing required to meet complex needs.
- 1.10 Refocussing internal provision in this way will allow the Council to strive 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 aim to 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 If the Council proceeds with its proposals to reshape in-house provision, it is estimated that 41 less beds will be needed overall. It is therefore proposed that one home will close and following an evaluation of all of the internal homes, it has been concluded that Parkway Residential Home is the home least fit for purpose to deliver the preferred future model. It would close in the event that the proposals are accepted.
- 1.14 In reaching these proposals, a wide range of options were considered and discounted. These are detailed in Section 7 of Appendix 1 to this report and included maintaining the status quo, and externalising all services including the use of alternative delivery models. Once the preferred options had been identified, the evaluation exercise considered the relative suitability of each of the internal buildings to deliver the preferred future model in order to reach the proposal that Parkway should close. The Council has recently undertaken a 12-week consultation on the proposed future model for residential care and specifically the closure of Parkway Residential Home.
- 1.15 The consultation responses are summarised in this report alongside the Council's response and mitigation where appropriate.

- 1.16 The key themes highlighted in the consultation are as follows:
- Support for the proposals.
  - Some respondents were in support of a model that enabled people to remain living independently for longer.
  - Perception that Council homes are better.
  - A view that the definition of complex care needed to be more specific.
  - A belief that more staffing would be required for residents with more complex needs and buildings would be adapted to accommodate this.
  - Concern that the proposal to only provide residential care for complex needs was discriminatory against those with non-complex needs.
  - A concern that the scoring criteria used to determine that Parkway was least fit for purpose did not take into consideration maintaining the wellbeing of residents and the evaluation exercise itself had also not involved family members/anyone independent of the Council.
  - Concerns were raised surrounding the impact on wellbeing that moves from Parkway would have on residents.
  - Impact on choice of the proposed model.
  - Availability of beds.
  - Belief that the proposal to close Parkway had not taken account of current and future demand.
  - Concern was raised surrounding the cost of independent care homes.
  - Perception that the proposal to close Parkway was being driven by the potential use of the site linked to the land surrounding the Olchfa School site.
  - A concern was raised by one respondent that the proposals may lead to the privatisation/closure of all Council owned care homes.
  - Concern that the proposals were being driven by budget pressures.
  - Family members of residents at Parkway wanted a guarantee that all residents would continue to have good quality care in the event that Parkway closed.
- 1.17 The counter proposals put forward were as follows:
- Proposal to sell off Parkway as a going concern/consider alternative delivery models to allow the residents to remain in Parkway.
  - Make savings in relation to domiciliary care rather than residential care.
  - The Council should find savings elsewhere and not make savings in relation to residential care.
  - Close St Johns and keep Parkway open instead.
  - Move all Parkway residents into other Council-run care homes and maintain Parkway itself as a respite and respite facility.
  - Close Parkway over a longer period of time.
  - Fill all the vacant beds in Parkway, with a belief that this would make it financially viable.
  - All residents in Parkway should be offered a place in a Council run home, in the event that Parkway was to close.
- 1.19 In general whilst there was not majority support for the model or the proposal to close Parkway, no viable alternatives have been put forward which allow us to deliver a model that enables people to maintain independence, remain at home for longer and meet the needs of vulnerable adults in line with the

principles of the Social Services and Wellbeing (Wales) Act whilst at the same time achieving the necessary savings required.

- 1.20 The Council has addressed each of the concerns put forward in the consultation and provided mitigation where possible. These are outlined in detail within the main body of this report.
- 1.21 There were no concerns put forward that could not be mitigated or for which there was no response which alleviated the concerns.
- 1.23 Of paramount importance if the proposals are to go ahead will be to ensure that the wellbeing of current residents at Parkway is maintained and any moves are carefully and thoughtfully planned involving residents, their families where appropriate, and a social worker. If a decision is taken to close Parkway, each resident will have an individual social work assessment to determine their unique needs and determine appropriate move on plans. This assessment will involve family members where appropriate and will ensure that all equality matters have been considered and appropriately mitigated wherever possible. In doing this, the Council will ensure as much as possible that their human rights are maintained and all equalities issues are given due regard.
- 1.24 From the outset, staff were fully engaged in the potential remodelling of service and from the start of the consultation were supported to wherever possible find alternative employment in line with the Council's HR processes. In line with the Council's HR policies, all staff who were potentially affected were given immediate access to the Council's redeployment processes at the beginning of the consultation period as this is standard process where there is an understanding that an employee might be at risk, but a final decision has not been taken. Some employees have already been successful in securing alternative employment. Some employees have already indicated that they would like to be considered for redundancy in line with the Council's Early Retirement Scheme/Voluntary Redundancy, and have been given provisional figures to allow them to consider this option further. In the event that a decision is taken to close Parkway, the staff involved will be given an extended notice period and be formally put at risk. Alternative employment for those that want it will be sought through the Council's redeployment scheme and those who would rather leave the organisation will be supported through the Council's Early Retirement/Voluntary Redundancy Scheme.
- 1.25 If the recommendations are agreed, the Parkway site will be disposed of in line with the Council's normal processes.
- 1.26 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. The proposed model also supports the principles behind the Well Being of Future Generations (Wales) Act, specifically the wellbeing goals of a resilient Wales and a healthier Wales by developing sustainable services for

the future and services which allow an ageing population to maintain their independence for as long as possible.

- 1.27 It should be noted that if these recommendations are agreed, the Commissioning Review in relation to Residential Care for Older People will be complete and it is not envisaged that any further review will take place during this administration.
- 1.28 Remodelling the services in this way should 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. Background:**

- 2.1 In line with the Council's Corporate Commissioning Review approach, a review was undertaken of residential care services for Older People in 2016. This review looked at those services both provided directly by the Council and those services that are commissioned from the independent sector.
- 2.2 The review set out a range of options for the way forward.
- 2.3 A stakeholder workshop took place to ascertain feedback surrounding the advantages/disadvantages of the full range of options on 9<sup>th</sup> June 2016.
- 2.4 Stakeholders included a range of internal and external providers, care managers, support and inter-related services, carers, representative groups and elected Members.
- 2.5 Following the stakeholder workshop, a dedicated session was also held with the Trade Unions on 21<sup>st</sup> June 2016 to talk through their views on the options.
- 2.6 The detailed option appraisal was then held on 24<sup>th</sup> June 2016.
- 2.7 The Panel for the option appraisal comprised the Commissioning Review Lead, the Principal Officer, the Head of Adult Services, Chief Social Services Officer, the then Director of People, the Director of Place, the then Cabinet Member as well as representatives from Legal, Finance, Procurement, HR and Corporate Property.
- 2.8 On carrying out the appraisal, it was concluded that the original set of options were too extensive and complex. The options for the review were therefore refined to make them more straight forward and understandable.
- 2.9 The criteria used to appraise each option focussed on the following:
  - Outcomes
  - Fit with strategic priorities
  - Financial impact
  - Sustainability/viability
  - Deliverability.

2.10 The full criteria are contained in the Gateway 2 report appended as Appendix 1 to this report.

2.11 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

2.12 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.

2.13 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.

2.14 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.

2.15 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.
- 2.16 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 by providing short-term support to allow people to regain skills and independence as well as provide carers a much needed break to ensure that family relationships do not breakdown.
- 2.17 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.
- 2.18 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.
- 2.19 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.
- 2.20 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.

### **3 Implications of the preferred options:**

- 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 was 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. Cabinet agreed to publicly consult on this option at its meeting of 19<sup>th</sup> April 2018.



- 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 was undertaken to determine the potential impact of the proposed options in terms of reduction of internal beds 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 was 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
<b>TOTAL</b>	<b>143</b>	<b>8.7 beds</b>		<b>13.3 beds</b>	

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 Cabinet consequently agreed to publicly consult on Options 2, 3 and 4 at its meeting on 19<sup>th</sup> April 2018. The public consultation centred on the Local Authority refocussing its provision on complex care, short-term residential reablement and respite. The Local Authority would consequently no longer provide standard residential care and one Local Authority run residential home would potentially close.
- 3.8 If this proposal was agreed following the public consultation, it was 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. Each individual would be supported to find an alternative home and it should be noted that some individuals may decide that 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.

#### 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 31<sup>st</sup> 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.

4.4 An evaluation matrix (attached at Appendix 2) 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. The criteria were driven by the suitability of the building itself to deliver the preferred future 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 was 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 was agreed following the public consultation. At the time of the potential closure, there would be a maximum of 17 residents to relocate as there are currently 17 long-term residents in Parkway and a hold on any new admissions.
- 4.9 In order to mitigate the impact on those residents affected, a hold was 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 this report, there were 3 long-term bed vacancies internally and 73 vacancies in the independent sector which would be immediately available so there would be sufficient vacancies to accommodate those affected. A further 42 beds would become shortly available, but were temporarily unavailable due to issues such as redecoration.
- 4.11 It was 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 were agreed following the public consultation, there would 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.
- 4.14 From a staff perspective, there were 34 employees potentially at risk who worked at Parkway Residential Home.

## **5 Consultation process:**

- 5.1 Cabinet agreed to consult on the preferred model for residential care at its meeting of 19<sup>th</sup> April 2018.

- 5.2 A 12-week public consultation consequently took place from 30<sup>th</sup> April 2018 to 23<sup>rd</sup> July 2018. It was agreed to carry out the staff consultation concurrently to ensure staff directly affected could also effectively have their say on the proposals.
- 5.3 The consultation specifically sought views on the following:
- The proposal to refocus Local Authority provision to focus on more complex needs, short-term residential reablement and respite.
  - The Local Authority consequently no longer delivering standard residential care.
  - The specific proposed closure of Parkway Residential Home.
- 5.4 The consultation was carried out using a questionnaire. The survey was available online and hard copies were also made available at key council venues.
- 5.5 We actively publicised the consultations and used appropriate media and social media platforms as follows:
- Informed all Swansea Councillors and offered face to face meetings
  - Informed all Council staff
  - Informed all local AMs and MPS and offered face to face meetings
  - Informed the Older Person's Commissioner and offered a face to face meeting
  - Informed all independent residential care providers
  - Informed Swansea CVS and offered a face to face meeting
  - Informed Swansea Carers Centre and offered a face to face meeting
  - Informed Age Concern and offered a face to face meeting
  - Face to face meeting held with the Disability Liaison Group
  - Press releases at key stages of the consultation process as well as promotion on appropriate social media
  - Informed the Carers Partnership Board and offered a face to face meeting
  - Informed the Voice Forum and offered a face to face meeting
  - Ensured copies of the consultation documents and questionnaires were available in all Libraries, the Contact Centre and sheltered housing complexes
  - Informed the 50+ Network
  - Informed the Swansea Dementia Forum and offered a face to face meeting
  - Informed the Ageing Well Steering Group and offered a face to face meeting
  - Informed the GP practices who had patients within Parkway.
- 5.6 The consultation was also publicised to current Local Authority residents, either via individual letters or information packs sent to each venue.
- 5.7 In relation to Parkway itself, the following was undertaken:
- A letter was sent to each resident and their families to explain the proposals, timescales for decision, how the closure would be undertaken if agreed and gave opportunities to have their say. This included how their individual needs would be reviewed and any individual move on plans would be agreed.

- Consultation meetings took place on site with residents and families on 8<sup>th</sup> May 2018, 21<sup>st</sup> May 2018, 5<sup>th</sup> June 2018 and 6<sup>th</sup> June 2018. Not all residents attended the meetings, as some had limited mental capacity. However, the families of all but one resident attended at least one meeting and the remaining resident not supported by family members attended all 4 meetings. The majority of families chose to attend each meeting, so discussion continued on from the last meeting.
- There were also offers of meetings/face to face opportunities at the care home.
- During the consultation period, we asked a social worker to work with each individual affected to review their needs to establish whether or not they had complex needs. This allowed them to make a more informed response to the consultation as they would understand better how the proposals might affect them. There was a mixed reaction to this offer, and some individuals/families chose to decline them; however the Council felt it was good practice to offer this.
- Through the social work reviews, there was an offer of an advocate for each care home resident if it was felt that they were unable to take part in the consultation, as it was understood that some older people would not be able to express their own wishes or concerns without the help of an independent advocate. It was also understood that 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.
- The Common Access Point was indicated as the point of contact during the consultation, but residents/families were also able to directly articulate queries to the Cabinet Member and the Head of Adult Services.

5.8 A Section 188 letter was issued to the Trade Unions and they were briefed at the beginning of the consultation and regular liaison meetings were held throughout.

5.9 3 group consultation meetings were held on site with staff and then 1 to 1s held with each member of staff affected.

5.10 All Social Services staff were briefed and given opportunities to have their say on the proposed new models for Residential Care and Day Services.

## **6 Consultation responses and counter proposals put forward:**

### *Summary of responses*

6.1 A total of 50 responses were received to the consultation. This comprised 21 online questionnaires, 21 hardcopy questionnaires, 2 letters, 5 emails and a petition with just over 1,000 signatures included. One online response was received after the consultation deadline, but was accepted on the basis of ensuring that as wide a range of views as possible was considered.

6.2 In terms of the 42 questionnaire responses received, 5 core questions were asked.

- 6.3 Question 1 asked “Do you agree or disagree with our proposed changes to residential care for older people?”. 39 out of the 42 respondents replied. Of those 39, 8 strongly agreed, 7 tended to agree, 4 tended to disagree and 20 strongly disagreed. This question related to the overall proposed model for residential care.
- 6.4 Question 2 asked respondents to expand on their answer. 35 out of the 42 respondents answered this question. The key themes emerging will be explored further below.
- 6.5 Question 3 asked “Are there any other options you feel the Council should have looked at in relation to the Residential Care Service for Older People?”. 34 of the 42 respondents replied to this question. The key counter proposals are outlined below.
- 6.6 Question 4 asked respondents “Considering the above, do you agree or disagree that the criteria used to assess each care home were the right ones?”. 36 out of 42 respondents answered this question. 3 strongly agreed, 14 tended to agree, 6 tended to disagree and 13 strongly disagreed.
- 6.7 Question 5 asked respondents “Considering the above, do you agree or disagree with the proposal to close Parkway Residential Home”. Again 36 out of 42 respondents answered this question. 3 strongly agreed, 8 tended to agree, 7 tended to disagree, 17 strongly disagreed.
- 6.8 Respondents were then asked if they disagreed with either the assessment criteria or proposal to close Parkway, to explain why and provide any alternatives. 25 out of the 42 respondents provided a response to this. An analysis of the key themes emerging will be given below.
- 6.9 In terms of the 2 letters and 5 emails received, these were not structured in terms of responses to the consultation questions. They came from family members of residents affected and elected representatives. They either sought clarification on elements of the proposals or gave a general view of not being in support of the proposals. The key themes have been collated alongside the questionnaire responses and a summary will be provided below.
- 6.10 A petition was received with just over a 1,000 signatures. The title of petition was “Say ‘NO’ to the proposed closure of Parkway Residential Care Home, Sketty”. The petition included names, addresses and signatures, but it was unclear what interest the signatories had in relation to Parkway. The petition was acknowledged in line with the Council’s procedures and is being treated as a consultation response.
- 6.11 The majority of the respondents were consequently against the proposed model to change the in-house residential care service to focus on respite, short term residential reablement and more complex needs, as well as the proposal to close Parkway as well as the criteria that had been used to reach the proposal to close Parkway.

- 6.12 Whilst staff consultation meetings took place, and specific 1 to 1 meetings with each member of the 34 staff affected, no formal response was received either from staff or the Trade Unions. Staff were inevitably concerned surrounding the future certainty of their employment; to mitigate this all staff affected were given immediate access to the Council's redeployment policies at the start of the consultation. At the time of writing the report, 3 staff had already been successful in securing alternative employment and 2 were undergoing a trial period. There were sufficient vacancies across Adult Services to give the Council confidence that all the remaining affected staff were likely to be accommodated in alternative employment if they wished to stay with the Council.
- 6.13 A detailed consultation summary document is set out as Appendix 5 report, which summarises the consultation activity that took place, the responses received and the key themes emerging.

*Summary of key themes and responses*

- 6.14 Through the consultation responses and meetings that took place at Parkway, a number of key themes and counter proposals emerged. A full summary is attached as Appendix 5 to this report.
- 6.15 The themes, and the Council's response/mitigation to each one is set out below. The themes are summarised as follows:

<b>Theme</b>	<b>Number of comments relating to theme</b>
Support for the proposals.	7
Some respondents were in support of a model that enabled people to remain living independently for longer.	2
Perception that Council homes are better.	5
The definition of complex care needed to be more specific.	1
More staffing would be required for residents with more complex needs and buildings would be adapted to accommodate this.	1
Concern that the proposal to only provide residential care for complex needs was discriminatory against those with non-complex needs.	1
A concern that the scoring criteria used to determine that Parkway was least fit for purpose did not take into consideration maintaining the wellbeing of residents and the evaluation exercise itself had also not involved family members/anyone independent of the Council.	2
Concerns were raised surrounding the impact on wellbeing that moves from Parkway would have on residents.	5
Impact on choice of the proposed model.	6
Availability of beds.	2

Belief that the proposal to close Parkway had not taken account of current and future demand.	3
Concern was raised surrounding the cost of independent care homes.	2
Perception that the proposal to close Parkway was being driven by the potential use of the site linked to the land surrounding the Olchfa School site.	1
A concern was raised by one respondent that the proposals may lead to the privatisation/closure of all Council owned care homes.	1
Concern that the proposals were being driven by budget pressures.	4
Family members of residents at Parkway wanted a guarantee that all residents would continue to have good quality care in the event that Parkway close.	Family members

- 6.16 7 respondents displayed a level of **support for the proposals**, and displayed a view that the changes were necessary to ensure that services were able to meet people's needs and be sustained into the future.
- 6.17 The next key theme suggested support for the proposed model and that 2 respondents commented that they were **in support of a model that enabled people to remain living independently for longer** and generally supportive of the principle of investing in reablement.
- 6.18 This response was very reassuring to see as an enabling approach which allows people to remain at home for longer is entirely in line with the overarching Adult Services Model which recognises that more people wish to remain in their own home. The proposed changes will help to support this by providing reablement and respite to support people to remain in their own homes for as long as possible and to support their family/carers to help them in their caring role. One respondent had raised why Parkway could not be used to deliver reablement and therefore kept open. As explained earlier in the report, the Council has assessed that less Local Authority beds are required to deliver the proposed model and Parkway is least fit for purpose to deliver the overall model. There was one comment that suggested that the Council should deliver nursing care; the Council has been previously restricted from doing this due to registration requirements and going forward it does not have the expertise or resources to provide this type of care.
- 6.19 There was a **perception that Council homes are better** than those provided by the independent sector from 5 respondents. There was therefore a concern that the Council proposed no longer providing standard residential care for non-complex needs.
- 6.20 In response, independent sector homes are required to provide care to the same legal and regulatory standards as Council homes, and are fully regulated by Care Inspectorate Wales. The Council has robust contracts in place with independent sector homes and monitors against these contractual standards to ensure that services are fit for purpose. The Council is



embedding a quality assurance programme at independent care homes which demonstrates that quality is of a sufficiently good quality. Feedback obtained from residents and families at homes in the independent sector confirms a high level of satisfaction with services. From time to time quality problems do arise. Where this occurs the Council is able use its legal and contractual powers to act quickly and make any improvements required. These arrangements should give people confidence that services received via the independent sector are safe and appropriate to meet their needs and also of a similar or on some occasions better quality than Council-run care homes.

- 6.21 One comment received suggested that ***the definition of complex care needed to be more specific.***
- 6.22 Unfortunately there are no national definitions of complex care, so the Council has had to determine its own definition as set out in paragraph 2.15 of this report. It is very difficult to go into greater detail and cover every eventuality as each individual will present differently with a significant difference in individual circumstances and needs. This definition will therefore be used by the social workers who assess the individuals, informed by discussions with the resident and family members where appropriate to determine whether the individual has complex needs. Social Workers are qualified professionals and will need to use their professional judgement to assess whether the individual does or does not have complex needs in line with the criteria specified.
- 6.23 A concern was expressed by one respondent however that ***more staffing would be required for residents with more complex needs and buildings would need to be adapted to accommodate this.***
- 6.24 The Council does not concur with the view that more staffing would be needed. The model of care will of course be designed to ensure that services can meet the needs of people accommodated. In reality, the Council is already delivering services for more complex needs. A good example is the service offered at Ty Waunarlyydd for people with dementia. Council staff are already highly trained and well equipped to deliver services for people with complex needs, and ongoing training is in place to upskill where needed. The Council is confident that it can deliver the proposed model within existing staffing levels, and will do this by ensuring that those staff continue to be trained appropriately. In relation to the physical layout of the remaining Council homes, homes such as Rose Cross and Ty Waunarlyydd are well suited already to deliver complex needs and few adaptations would be needed. £4million has been identified in the Council's capital programme to maintain our homes, so this could be utilised to carry out any adaptations to other buildings if required.
- 6.25 At one of the Parkway meetings, family members expressed ***a concern that the proposal to only provide residential care for complex needs was discriminatory against those with non-complex needs.***
- 6.26 There is no legal requirement for a Council to provide an in-house standard residential care service. The Council has a duty to ensure that those that need

standard residential care receive it, but it is legitimate to offer this provision in the independent sector.

- 6.27 2 respondents expressed **a concern that the scoring criteria used to determine that Parkway was least fit for purpose did not take into consideration maintaining the wellbeing of residents and the evaluation exercise itself had also not involved family members/anyone independent of the Council.** This view was also expressed at the Parkway meetings.
- 6.28 An objective set of evaluation criteria were used to assess the options. Careful consideration was given as to who should make up the evaluation panel and it was determined that involving family members for each home affected would have not allowed the panel to be objective. Consideration was also given to whether anyone independent of the Council should be involved in the evaluation exercise, but it was not clear how doing this would add value to the exercise and it would have been difficult to identify someone who had a good working knowledge of each care home. The preferred option was achieved by applying the same criteria to each home. Issues of maintaining the wellbeing of residents would have been pertinent to each Council run care home, so would not have altered the outcome of the evaluation exercise.
- 6.29 5 respondents raised concerns surrounding the **impact on wellbeing that moves from Parkway would have on residents.** Some of these concerns related to choice and location impacts as well as equalities and human rights impacts. These concerns were also raised in the Parkway meetings.
- 6.30 This is an entirely valid concern, and it is of paramount importance that if the changes go ahead, the wellbeing of all those affected is maintained. The welfare of people who receive care services is always our primary consideration. The proposed changes are necessary to ensure that we can continue to meet needs in the most effective and sustainable way. Arrangements to move service users to alternative homes will be planned carefully and sensitively with each resident and where appropriate their family. This will involve considering any equalities and human rights impacts and where necessary taking steps to ensure that residents' legal rights and entitlements are respected and not infringed. Specific issues relating to choice and location are addressed below.
- 6.31 A theme emerged surrounding the **impact on choice of the proposed model** if the Council proceeded with no longer offering standard residential care to people with non-complex needs; this was raised by 6 respondents. This concern related to a perception that reliance on the independent sector would restrict choice, particularly in terms of location which is key to maintaining relationships with family and friends. There was also a concern raised about choice of respite provision in the independent sector.
- 6.32 In response, there are a large number of homes in the independent sector offering residential care. The number of homes specialising in residential care for purely personal and social care has increased significantly in recent years;

in fact there is greater supply than demand. The Sketty and surrounding area, which is in close proximity to Parkway Residential Home has a particularly high concentration of beds compared to other parts of Swansea. Details of all other homes in Swansea, and those in the vicinity of Parkway have been shared with all those residents and family members who attended the Parkway meetings. In the event that Parkway were to close and residents consequently had to move, the Council would have a legal duty to carefully consider the equalities and human rights impacts that are affected by moving to another care home. This means working with residents and families to ensure that family relationships and similar factors relating to location can be maintained.

- 6.33 There are a number of providers who have informed us of their intention to develop new residential services in Swansea and the care homes market is expected to continue to grow. The proposed changes to the model for residential care are being undertaken to promote greater independence where possible and less reliance on traditional services where beneficial. This will lead to alternative options and increased choice for citizens. We acknowledge the difficulties finding respite services in the independent sector. The proposed changes will improve and increase respite opportunities for carers via Council homes; this is a key driver for the proposed changes.
- 6.34 2 respondents raised some concerns surrounding the **availability of beds** if the proposed model was adopted, with people having experienced difficulty in finding beds in the independent sector previously and a perception that bed blocking occurred in hospitals due to a lack of availability of residential care beds and the proposals would inadvertently transfer costs to the NHS. This concern was also raised by residents and family members at Parkway, who were concerned that there might not be vacancies to move to in the event that Parkway closed.
- 6.35 Independent sector vacancies average at approximately 8%. This equates to approximately 125 beds at any one time so there is more than enough capacity in the independent sector to meet demand. In addition to this, Parkway has had a high proportion of vacant beds for some time. Delayed transfers of care from hospital do occur, but the reason for this in Swansea is rarely due to availability of residential care provision. It tends to be related to delays in choices made by prospective residents and families, delays in agreement of funding and delays in securing care at home. The change to focus local authority provision on short-term reablement and respite is in part driven by helping to reduce delays from hospital. Availability of this type of provision will enable faster hospital discharge followed by a period of care to enable people to return to independent living where possible.
- 6.36 3 respondents commented that they felt that **the proposal to close Parkway had not taken account of current and future demand**.
- 6.37 As outlined earlier in this report, a detailed modelling exercise was undertaken to determine how many beds would be required to deliver the preferred model. This alongside the oversupply of standard residential care in the independent sector led to a conclusion that there was more than enough capacity in the market to cater for current and future demand.

- 6.38 2 respondents raised significant **concern surrounding the cost of independent care homes** and there were comments that third party charges could mean that residents and their families were not able to afford independent care homes. This theme was dominant in both the consultation responses and the face to face meetings that took place with residents and families at Parkway.
- 6.39 Careful consideration has been taken of this concern, and the Council recognises that this is a significant and legitimate issue for any residents and families affected in the event that Parkway were to close.
- 6.40 Private sector homes are mostly commercial enterprises and will charge what the market will bear. Consequently most independent sector care homes charge top up/third party payments. A recent survey confirmed that only 5 homes out of 41 in the independent sector do not charge top ups. As of May 2018, 724 of the 1074 beds registered to provide residential and nursing care in Swansea attracted third party charges.
- 6.41 Whilst currently most care homes charge top ups, most are also prepared to offer a small number of beds at local authority fee rates. This arrangement is fluid and will depend on factors such as vacancy levels and room type.
- 6.42 The high proportion of beds funded by the local authority which attract a third party top up suggests that meaningful choice is restricted. In practice residents transferring from Parkway are likely to be required to pay a third party charge to reside at a home of their preferred choice.
- 6.43 The median average charge is £105 per week. However the highest proportion of charges for people in residential care homes is between £10 and £20 per week, and in nursing homes is £50 and £70 per week. The median point within the most frequently occurring ranges is £40 per week.
- 6.44 Current contract provisions allow Providers to increase charges at the rate of 25% per annum and there are no contractual or statutory limits to the charges that Providers can apply.
- 6.45 The Local Authority has a legal duty to those that it funds to ensure that the person has a genuine choice and must ensure that more than one option is available within its usual commissioning rate (ie no top ups apply). It is highly likely that there may be limited or no choice for residents if they were to move from Parkway to a home that does not apply third party charges. It should be noted that the same duty does not apply to self-funders.
- 6.46 In light of the above, a recommendation is being put forward in this paper for Cabinet to agree to pay up to a maximum of £105 per person per week top up fees for all residents at Parkway (including self-funders), subject to individual circumstances and up-to-date social work assessments, for the duration of their residential care placement in the event that Parkway closes following the final decision being made. This recommendation is being put forward to mitigate the financial impact of closing on those residents and families

affected, and will allow meaningful choice of alternative homes which meet their specific needs and requirements such as preferred location and ability to maintain family relationships for those individuals affected. In proposing this, it is expected that the majority of residents affected would have adequate choice at the lower end of the third party charges applied, but all residents would have several choices of homes that meet their specific individual requirements in the location of their choice.

- 6.47 There was a **perception that the proposal to close Parkway was being driven by the potential use of the site linked to the land surrounding the Olchfa School site**. This was raised by one respondent and also a key theme emerging from the meetings at Parkway.
- 6.48 The future use or otherwise of the site adjoining the Olchfa School has had no bearing on the proposals put forward. At this stage, there are no clear proposals surrounding the future use of the Parkway site if it is released following a potential closure. If a decision is made to close Parkway, the Council will commence to look at options surrounding the disposal of the site.
- 6.49 **A concern was raised by one respondent that the proposals may lead to the privatisation/closure of all Council owned care homes.**
- 6.50 If the proposals are accepted by Cabinet, there is a commitment that there will be no further changes to Council-run care homes within this administration.
- 6.51 4 respondents were concerned that the **proposals were being driven by budget pressures**. This was also a theme highlighted at the Parkway meetings.
- 6.52 This is undoubtedly a factor. As a consequence all Councils have to make significant savings, but in doing so need to ensure that they can deliver sustainable services to meet the needs of an ageing populations with more complex needs.
- 6.53 However, the budget is not the only factor driving forward these proposals. Re-shaping services is necessary to deliver the overall new adult services model agreed in 2016, and doing so is in line with the principles behind the Well Being of Future Generations (Wales) Act specifically the wellbeing goals of a resilient Wales and a healthier Wales by developing sustainable services for the future and services which allow an ageing population to maintain their independence for as long as possible. The proposed closure and remodelling of existing services will help the Council to target resources where there is greatest demand and help people to remain living independently for longer. By changing the Council's model of residential care to focus on short-term reablement support, respite and more complex needs, people will be helped to maintain independence and remain at home for as long as possible whilst those with more complex needs will be better supported. Nobody will be left without the care they need as there is sufficient standard residential care provision in the independent sector to meet local need.

- 6.54 A concern was raised by the **family members of residents at Parkway that they wanted a guarantee that all residents would continue to have good quality care in the event that Parkway closes.**
- 6.55 In the event that Parkway does close, the Council will do everything in its power to ensure that the wellbeing of all those affected is maintained and they all receive good quality care going forward. This will be achieved through careful planning with social work support into any proposed moving on arrangements as well as ongoing good contract monitoring of all independent sector homes.

#### *Counter proposals and responses*

- 6.56 The counter proposals and the Council's response to them are set out below and can be summarised as follows:
- Proposal to sell off Parkway as a going concern/consider alternative delivery models to allow the residents to remain in Parkway.
  - Make savings in relation to domiciliary care rather than residential care.
  - The Council should find savings elsewhere and not make savings in relation to residential care.
  - Close St Johns and keep Parkway open instead.
  - Move all Parkway residents into other Council-run care homes and maintain Parkway itself as a reablement and respite facility.
  - Close Parkway over a longer period of time
  - Fill all the vacant beds in Parkway, with a belief that this would make it financially viable.
  - All residents in Parkway should be offered a place in a Council run home, in the event that Parkway was to close.
- 6.57 The first counter proposal put forward was surrounding **selling off Parkway as a going concern/consider alternative delivery models to allow the residents to remain in Parkway.** This proposal was put forward through both the consultation responses and the face to face meetings held at Parkway.
- 6.58 A range of alternative options has been considered during a detailed commissioning review process and consideration has been given to a potential sale of Parkway as a going concern and alternative delivery models. These proposals were considered either not financial viable or one that could definitely achieve the outcome of ensuring that residents could remain at Parkway. They have therefore been discounted.
- 6.59 In the event that Parkway does close however, due consideration will be made surrounding what will happen to the vacant site. One option would be to sell off the site with a view to an independent provider coming forward to deliver a residential care proposal that addressed a market gap such as dementia nursing. The Council has speculatively asked the sector whether there would be any appetite for such an option, and several providers have come forward with a positive response. Such an option could meet accommodation needs for older people and could also help meet an identified market gap.

- 6.60 The next counter proposal linked to a perception that it would be **more appropriate to make savings in relation to domiciliary care than residential care.**
- 6.61 This is a valid proposal, but ambitious savings proposals of £526,000 over the next 3 years are already in place in relation to domiciliary care. Work is ongoing to recommission domiciliary care provision and there is an overall plan to safely reduce the overall number of domiciliary care hours commissioned. It is therefore not possible to achieve further savings in this area, so this counter proposal is not feasible.
- 6.62 Several respondents commented that **the Council should find savings elsewhere and not make savings in relation to residential care.**
- 6.63 Whilst this is a legitimate view, as previously outlined the Council as a whole is experiencing unprecedented budget pressures and is forecasting a significant overspend this financial year. The Council is consequently exploring all opportunities to ensure services are sustainable in the future and can be delivered within the budget available. Significant savings are being achieved year on year but re-shaping of services is essential for the Council to continue to meet its legal duties to provide care for an aging population with increasing needs.
- 6.64 A counter proposal was put forward by the residents and family members at Parkway to **close St Johns and keep Parkway open instead.** The rationale behind this proposal was that St Johns had achieved the next lowest score following the evaluation exercise.
- 6.65 The Council has considered this proposal and does not feel that this is legitimate on the basis that Parkway scored the lowest following the evaluation exercise. There would be equal impact on residents at St Johns if it were to close, perhaps more so as there are a higher number of residents at St Johns.
- 6.66 An alternative proposal was to **move all Parkway residents into other Council-run care homes and maintain Parkway itself as a respite and respite facility.**
- 6.67 This proposal was discounted on the basis that whilst it would clearly be a good outcome for those residents affected, no savings would be achieved.
- 6.68 A suggestion was made to **close Parkway over a longer period of time,** and wait until the current residents had moved on or passed away before closing it. In the meantime, the vacant beds could be used for respite.
- 6.69 In an ideal world, the Council would want to support this proposal, but the reality is that doing this would not achieve the move to new model as well as the savings required as quickly as needed. The average length of stay of a resident in a Swansea Council care home is 2.7 years, but some residents have lived at Parkway for significantly longer than this and there is no way to predict how long residents could stay for. In addition, there is a cap of £80 per week enforced by Welsh Government on the charges that can be applied to

respite beds so the running costs of Parkway would significantly increase. It is also not considered in the best interest of residents to slowly decrease the number of residents; eventually only one to two residents would remain which would not be beneficial to their wellbeing as there would be little social interaction and stimulation for them. This counter proposal is therefore not considered feasible on the basis that the preferred future model and necessary savings would not be realised.

- 6.70 A counter proposal was put forward to **fill all the vacant beds in Parkway, with a belief that this would make it financially viable.**
- 6.71 Due to the high overheads involved in running a Council care home, even filling all the vacant beds would not make the home financially viable. The Council significantly subsidises all its internal homes, and in reality residential care is significantly cheaper to deliver in the independent sector. Filling all the beds in Parkway would therefore not be a feasible option to achieve the savings necessary.
- 6.72 The final proposal put forward was that **all residents in Parkway should be offered a place in a Council run home, in the event that Parkway was to close.**
- 6.73 This proposal would be contrary to the preferred overall model to reshape the Council service to focus on short-term residential reablement, respite and standard residential care for those with complex needs only, as it would involve moving those with non-complex needs into the other Council-run care homes. In addition to this, there are insufficient vacancies in the remaining homes to achieve this, which would lead to a potential significant delay in any proposed closure of Parkway. This in turn would impact on the savings achieved and the move to the preferred future model, and there is a risk that they could be not be achieved quickly enough. This proposal is therefore not supported by the Council as it is contrary to the preferred future model and is not financially viable.

#### *Consultation conclusions*

- 6.74 In general whilst there was not majority support for the model or the proposal to close Parkway, the Council has been unable to identify any viable alternatives which would allow us to deliver a model that enabled people to maintain independence, remain at home for longer and meet the needs of vulnerable adults in line with the principles of the Social Services and Wellbeing (Wales) Act whilst at the same time achieving the necessary savings required.
- 6.75 The Council has addressed above each of the concerns put forward in the consultation and provided mitigation where possible.
- 6.76 There were no concerns put forward that could not be mitigated or for which there was no response which alleviated the concerns.



- 6.77 Of paramount importance if the proposals are to go ahead will be to ensure that the wellbeing of current residents at Parkway is maintained and any moves are carefully and thoughtfully planned involving residents, their families where appropriate, and a social worker. If a decision is taken to close Parkway, each resident will have an individual social work assessment to determine their unique needs and determine appropriate move on plans. This assessment will involve family members where appropriate and will ensure that all equality matters have been considered and appropriately mitigated wherever possible. In doing this, the Council will ensure that their human rights are maintained and all equalities issues are given due regard.
- 6.78 It is equally important that all staff affected are supported to wherever possible find alternative employment in line with the Council's HR processes. All 34 staff who were potentially affected were given immediate access to the Council's redeployment processes at the beginning of the consultation period. Some employees have already been successful in securing alternative employment. Some employees have already indicated that they would like to be considered for redundancy in line with the Council's Early Retirement Scheme/Voluntary Redundancy, and have been given provisional figures to allow them to consider this option further. In the event that a decision is taken to close Parkway, the staff involved will be given an extended notice period and be formally put at risk. Alternative employment for those that want it will be sought through the Council's redeployment scheme and those who would rather leave the organisation will be supported through the Council's Early Retirement/Voluntary Redundancy Scheme.

**7 Financial implications:**

- 7.1 In line with the Council's Medium Term Financial Plan, there are significant savings targets against Adult Services.
- 7.2 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
<b>Total Saving</b>	<b>555,608</b>

- 7.3 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 Residential Care 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.

- 7.4 The financial implications of paying third party top up fees is estimated to be approximately £245,000, based on paying up to a maximum of £105 per week for all 17 residents (including self-funders) for 2.7 years, based on average life expectancy. It is therefore proposed that the Council makes this budget available. This will clearly have an impact on the savings achieved in the short-term with an additional revenue cost of approximately £90K per financial year over the next 2.7 years.
- 7.5 **The overall savings in the short term will consequently be £465,608 per annum.**
- 7.6 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 towards this is now accounted for in the Capital Programme.

## **8 Legal implications:**

- 8.1 There was a legal requirement to publicly consult and consult with staff affected by the preferred options.
- 8.2 Any future provision of services will need to be considered in accordance with the Social Services and Well-being (Wales) Act.
- 8.3 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.
- 8.4 The proposed model also supports the principles behind the Well Being of Future Generations (Wales) Act, specifically the wellbeing goals of a resilient Wales and a healthier Wales by developing sustainable services for the future and services which allow an ageing population to maintain their independence for as long as possible.
- 8.5 The recommendations put forward in this report will allow the Council to ensure that going forward it can meet all eligible needs.
- 8.6 Any employment issues that arise as a result of agreement of the recommendations will need to be considered in conjunction with HR, and in accordance with any relevant policies and legislative provisions.
- 8.7 In relation to the issue of third party top up fees, a local authority must ensure that the person has a genuine choice of care home accommodation and must ensure that more than one option is available within its usual commissioning rate for a care home of the type a person has been assessed as requiring. However, a person must also be able to choose alternative options, including a more expensive home. Where a home costs a local authority more than it would usually pay, a person must be able to be placed there if certain conditions are met and where a third party (or in certain circumstances the resident) is willing and able to pay the additional cost.

However, an additional cost payment must always be optional and never as a result of a shortfall in the funding a local authority is providing to a care home to meet a person's assessed care needs. Local authorities must follow the Care and Support (Choice of Accommodation) (Wales) Regulations 2015 in connection with this type of arrangement and Annex C to the Social Services and Well-being (Wales) Act Part 4 and 5 Code of Practice (Charging and Financial Assessment) on choice of accommodation and additional cost payments.

## **9 Equality and Engagement Implications:**

- 9.1 The Council is subject to the Public Sector Equality Duty (Wales) and must, in the exercise of their functions, have due regard to the need to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
  - Advance equality of opportunity between people who share a protected characteristic and those who do not.
  - Foster good relations between people who share a protected characteristic and those who do not.
- 9.2 Our Equality Impact Assessment process ensures that we have paid due regard to the above.
- 9.3 Proceeding with the preferred options of the Commissioning Reviews will clearly have an impact on existing home residents. Due to the nature of the client group, there will be a disproportionate impact on older people, people with a range of disabilities and their families/carers.
- 9.4 2 separate EIAs were opened as follows to fully assess the impact of the proposals:
- One for the overarching model for residential care (Appendix 3 to this report).
  - One relating to the potential closure of Parkway Residential Home (Appendix 4 to this report).
- 9.5 These EIAs have been updated throughout the consultation and have informed the final recommendations set out in this report.

### *Overarching model EIA*

- 9.6 The proposals were found to be relevant to older people, people with a disability, people from a range of different races, those that spoke the Welsh language, those experiencing poverty or socially excluded and carers.
- 9.7 The EIA notes that the overall aim of the proposed changes are in line with the Social Services and Wellbeing (Wales) Act, to refocus the Council's in-house residential service on complex care, reablement and respite. The Council would consequently no longer deliver standard residential care and less in-house beds would be required to deliver this aim, so there is a proposal that

Parkway would close as it is least fit for purpose to deliver the preferred future model.

- 9.8 Delivering this model would allow the Council to meet the key principle within the overall Adult Services model of better prevention. It would give 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. It would also offer short-term reablement support to allow people to regain skills and independence to return to their own homes in line with their desired outcomes. It would also allow the Council to provide care for those with more complex needs, which is currently a gap identified that the independent sector do not adequately meet.
- 9.9 The impact on the general population is set out in Section 3 of the EIA. The impact of the overarching model on the wider population is largely positive or neutral, but some further investigation is required in relation to gypsies and travellers inclusion and community cohesion. The EIA will remain open until such time as the model is implemented, and these areas will be investigated further. However, it is considered that there is unlikely to be a significant impact on these areas which is not already being addressed.
- 9.10 The key themes emerging from the consultation responses have been set out in Section 6 of this report. Alongside this, mitigation has been put forward.
- 9.11 The key potential adverse impacts of the overarching model on people with protected characteristics particularly older people and carers are set out in Section 4 of the EIA and are summarised as follows:
- Inadequate staffing and unsuitable buildings could mean that the Council was unable to meet the needs of people with more complex needs; by way of mitigation the Council will ensure that adequate staffing is in place with suitably skilled and trained staff and that buildings are fit for purpose to meet people's needs.
  - There is a risk that the proposed closure of Parkway could lead to insufficient number of beds in the market to deal with current and future demand for residential care for older people. At any given time, Swansea has an average 8% vacancy rate, which is approximately 125 beds. At the time of writing the report, there were 17 residents at Parkway, with a total of 26 beds. Closing Parkway would lead to a reduction of 9 vacant beds in the market reducing the total number of vacancies to 116. The modelling exercise undertaken outlined in section 3.5 suggests that there are sufficient beds to meet current and future demand.
  - All of the above had a potential adverse impact on carers due to the overall stress and worry of the situation, and being concerned about their loved ones. However, mitigating as set out above would also mitigate the impact on carers by alleviating some of the stress and worry involved.
- 9.12 In addition to the above, it was agreed that the overarching model would be phased in gradually. Therefore, there would be no requirement for those with

non-complex needs not resident at Parkway to move. They would be enabled to remain in their current home, until such time as they moved on for natural reasons. This decision was taken to minimise the impact on the wider population and adverse impacts consequently on older people, people with disabilities and their carers.

### *Parkway EIA*

- 9.13 The proposals were found to be relevant to older people, people with a disability, people from a range of different races, those that spoke the Welsh language, those experiencing poverty or socially excluded and carers.
- 9.14 The EIA notes that the overall aim of the proposed changes are in line with the Social Services and Wellbeing (Wales) Act, to refocus the Council's in-house residential service on complex care, reablement and respite. The Council would consequently no longer deliver standard residential care and less in-house beds would be required to deliver this aim, so there is a proposal that Parkway would close as it is least fit for purpose to deliver the preferred future model.
- 9.15 Delivering this model would allow the Council to meet the key principle within the overall Adult Services model of better prevention. It would give 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. It would also offer short-term reablement support to allow people to regain skills and independence to return to their own homes in line with their desired outcomes. It would also allow the Council to provide care for those with more complex needs, which is currently a gap identified that the independent sector do not adequately meet.
- 9.16 The impacts specifically on residents at Parkway is set out in Section 3 of the EIA. The impact of the proposed closure of Parkway clearly has a negative impact on older people, people with disabilities and their families/carers. In relation to the other protected groups, the impact is largely neutral, but further investigation is required in relation to gypsies and travellers, poverty and social inclusion and community cohesion. Again, the EIA will remain open until such time as Parkway is closed, and these areas will be investigated further. However, it is considered that there is unlikely to be a significant impact on these areas as all residents are known to us and any adverse impacts can be mitigated.
- 9.17 The key themes emerging from the consultation responses have been set out in Section 6 of this report. Alongside this, mitigation has been put forward.
- 9.18 The key potential adverse impacts of the overarching model and proposal to close Parkway on people with protected characteristics particularly older people and carers are set out in Section 4 of the EIA and are summarised as follows:
- The wellbeing of older people living at Parkway could be affected if it were to close and they had to move to alternative homes; by way of mitigation the Council will ensure that all residents and their families are properly

supported and prepared for any proposed move. This will involve an individual social work assessment to determine their unique needs and determine appropriate move on plans. This assessment will involve family members where appropriate and will ensure that all equality matters have been considered and appropriately mitigated wherever possible.

- There is potential that there could be inadequate choice of alternative care homes for the older people affected if Parkway were to close. At the time of writing the EIA, there were sufficient vacancies within the Council's own homes and the independent sector to accommodate all 17 residents affected. There were a number of homes in the Sketty and surrounding areas with vacancies available and all those affected had been given information on the other homes across the County. From these vacancies, the Council has a duty to ensure that each resident affected has adequate choice at the time of making the decision. The proposal to fund third-party top up fees will enable this choice as well as careful planning and decision making between those residents affected, their families and the social worker supporting them.
- There is a risk that the proposed closure of Parkway could lead to insufficient number of beds in the market to deal with current and future demand for residential care for older people. At any given time, Swansea has an average 8% vacancy rate, which is approximately 125 beds. At the time of writing the report, there were 17 residents at Parkway, with a total of 26 beds. Closing Parkway would lead to a reduction of 9 vacant beds in the market reducing the total number of vacancies to 116. There are therefore sufficient beds to accommodate all residents at Parkway and the modelling exercise undertaken outlined in section 3.5 suggests that there are sufficient beds to meet current and future demand.
- There was a risk that if residents from Parkway had to move, the quality of care for those older people affected could be adversely affected. In the event that Parkway does close, the Council will ensure that each resident is fully supported during any move to ensure that the wellbeing of all those affected is maintained and they all receive good quality care going forward. This will be achieved through a thorough social work assessment with all relevant parties involved, which will clearly outline move on arrangements and ensure there is appropriate support in place before, during and after any move. As currently, there will also be ongoing good contract monitoring of all independent sector homes to ensure any quality issues are identified at the earliest opportunity.
- All of the above had a potential adverse impact on carers due to the overall stress and worry of the situation, and being concerned about their loved ones. However, mitigating as set out above would also mitigate the impact on carers by alleviating some of the stress and worry involved.
- There is clearly also a potential negative impact on those staff affected, but this can be mitigated through the Council's redeployment policies, and the Council is confident that there are sufficient alternative vacancies elsewhere in Adult Services to accommodate them. There were 34 staff

potentially at risk. At the time of writing the report, 3 of these staff had already secured other employment, whilst 2 were undertaking a trial period in alternative positions. No equalities issues had been raised through the 1 to 1 meetings with each member of staff that needed to be addressed.

- 9.19 Overall, there clearly is a risk of a negative impact on residents at Parkway due to the need to move if it were to close, particularly when some residents have lived there a long time and are elderly and frail. However, the above outlines how wherever possible the Council will seek to mitigate those risks and although there is no way of knowing at this point in some cases a move could be positive as they may find they are happier in any new environment with the ability to develop new relationships which could have a positive impact on their wellbeing. As outlined previously, any move will need to be carefully planned following a thorough social work assessment and each individual supported during and following any actual move.
- 9.20 In addition to the above, the Council put a hold on new admissions to Parkway at the beginning of the consultation to minimise the impact on residents affected. This hold would continue should the proposals go ahead.

#### *EIA conclusions/amendment to proposals*

- 9.21 As stated in Section 5 of this report, a 12-week public consultation took place from 30th April 2018 to 23rd July 2018. The staff consultation was undertaken concurrently to ensure staff directly affected could also effectively have their say on the proposals.
- 9.22 As a result of the comments received, the proposal has been amended to take into account the views received by putting forward a further proposal to fund third-party top up fees.
- 9.23 If the proposals are agreed, the Council will ensure that all residents, carers and staff affected, particularly in relation to the proposed closure of Parkway are properly supported to move on to alternative accommodation of their choosing and find alternative employment wherever possible.

## **10 Summary and Conclusions:**

- 10.1 It has been possible to respond to all concerns raised during the consultation and put forward appropriate mitigation.
- 10.2 The Council has considered all possible alternative options and actively invited alternative options through the consultation, but has not been able to identify any financially sustainable alternatives that allow it to ensure certainty of care for reablement, respite and more complex needs whilst overall enabling independence, helping people to remain at home for as long as possible and ensuring the needs to all vulnerable adults are met.
- 10.3 There is clearly a risk if the proposed model is approved, that there could be a negative impact on those individuals currently resident at Parkway due to the need to move. However, this risk can be mitigated as much as possible by

ensuring robust social work assessment identifies those move on plans and all those affected are supported before, during and after any move. In addition, although there is no way of knowing at this stage, there could be a positive impact on the wellbeing of current residents at Parkway as they may be happier elsewhere and build positive relationships as part of any move.

- 10.4 On balance therefore remodelling as per the proposals in this report will allow the Council to effectively meet the requirements of both the Social Services and Wellbeing (Wales) Act and Well Being of Future Generations (Wales) Act by providing a model of care that is sustainable for the future, and effectively meets the needs of an ageing population with more complex needs. The Council is therefore confident that the recommendations put forward in this report are appropriate despite there not being majority support for the proposals.
- 10.5 Having due regard to the Equality Impact Assessments, Cabinet is therefore being asked to consider the following recommendations:
- Recommendation 1: Refocus Council in-house residential care service to focus on complex needs, residential reablement and respite only.
  - Recommendation 2: Going forward, commission all standard residential care for non-complex needs and nursing care from the independent sector.
  - Recommendation 3: As a consequence of the above, close Parkway Residential Home ensuring that all affected residents are fully supported.
  - Recommendation 4: Agree to pay up to a maximum of £105 per person per week top up fees for all residents at Parkway (including self-funders), subject to individual circumstances and social work assessments,, for the duration of their residential care placement in the event that Parkway closes following the final decision taken.

## **11 Proposed implementation timetable:**

- 11.1 Should Cabinet decide to proceed, the proposed outline timetable for implementation would be as follows:
- October 2018; Redeployment and voluntary redundancy process to commence with staff.
  - October 2018; Commence social work assessments of all affected residents to determine move on plans
  - Early 2019; Closure of Parkway Residential Home.

**Background Papers:** Outcome of Residential Care and Day Services for Older People Commissioning Reviews, Cabinet, 19<sup>th</sup> April 2018.

## **Appendices:**

- Appendix 1: Residential Care for Older People Gateway 2 Report
- Appendix 2: Evaluation Matrix
- Appendix 3: Equality Impact Assessment for overarching model
- Appendix 4: Equality Impact Assessment for proposed closure of Parkway Residential Home
- Appendix 5: Consultation summary document