



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

CABINET

29 April 2024

Report of the Executive Director for Adult Social Care and Health

**Proposed Redesign of Residential Care and Day Opportunities for
Older People (Adult Care)**

1. Divisions Affected

1.1 County-wide

2. Key Decision

2.1 This is a Key Decision because, if the proposed changes are made, it is likely to:

- a) result in the Council incurring expenditure which is, or making savings which are, significant having regard to the budget for the service or function concerned; and
- b) be significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

3. Purpose

3.1 Cabinet is asked to approve the undertaking of a public consultation concerning the future delivery of the Council's residential care homes and day opportunities for older people, including consultation with the current residents and people who attend these services.

4. Information and Analysis

- 4.1 This report outlines two options for public consultation on both the future delivery of residential care and day opportunities directly provided by the Council for older adults.

Background and context

- 4.2 Derbyshire County Council has ambitious plans to support its residents to live their best life. After conducting a series of engagement exercises, we know that for most people in Derbyshire wherever possible, this means living independently in their own home and communities. Supporting people to live independently in their own homes is a shared priority for health, housing and District and Borough Councils in Derbyshire.
- 4.3 The commissioning work and market analysis set out in Derbyshire's All Age Adults' Housing, Accommodation and Support Strategy 2023 – 2038, clearly demonstrates a declining need for standard residential care as more people choose to stay at home for as long as they can, and a greater need for nursing care and accommodation for people with more complex needs, including dementia, across the county.
- 4.4 Alongside a declining need for standard residential care, we know the number of older people in Derbyshire is increasing and there are increasing numbers of people with dementia. Currently 1 in 11 people in Derbyshire who are over 65 have dementia, which amounts to 15,967 people. This number is expected to increase to 22,260 by 2040 and it is important that there are the right options to support people and their carers now and in the future.
- 4.5 The Council's Carers strategy 2020 – 2025, refreshed in 2022, describes how three in five people will be carers in their lives and that in Derbyshire, collectively, carers represent the largest provider of care and support. In a survey of adult carers undertaken in 21/22, dementia was reported as being the most common reason for a person having caring responsibilities. We know that the majority of carers are over sixty and many have reported feeling stressed at times due to their caring role. In a recent national survey, carers cited the need for a break or respite as one of the top three things they needed. We know that carers are more likely to suffer from a long-term chronic condition than those without caring responsibilities and therefore ensuring there is sufficient respite opportunities across the county is essential to support carers to maintain arrangements for as long as this remains the best and most appropriate option for people.

4.6 Derbyshire, like every other Council up and down the country, is facing significant financial challenges that are outside its control. These include inflationary pressures, staff pay awards agreed nationally but paid locally and continuing increasing demand on our services, particularly in adult care and children's services. Demand for adult social care support has also risen dramatically with the cost of providing care and support accounting for 48% of the Council's overall spending. This means in order to set a balanced budget in 2024/25 as it is legally obliged to do, it is necessary for the Council to review all spending and consider how services may be provided in a different and more efficient way. In order to support the required efficiencies and support the setting of a balanced budget, Adult Social Care Services has put forward a plan to save £5.209M from the budget for the directly provided homes for older people and £1.325M from the day centre provision for older people. To achieve these efficiencies, the proposal is to consolidate the current residential and day services for older people in order to focus on specialist services for people with dementia and their carers.

4.7 The Council is required by law to promote an efficient and effective market, offering variety and high-quality services. It is not required by law to provide any in-house residential care or day centre provision. The Council must therefore review whether providing services directly is the most effective and efficient way of doing things.

4.8 **Current Offer**

Residential care homes and integrated day centres

The Council owns and runs sixteen residential care homes for older people, which makes it one of the largest local authority providers of residential care in the country. The sixteen homes provide a variety of care and support to people. The detail of the type of care and support provided on each site is set out below and a summary of the different services is provided here:

- Integrated day centres ('IDC') providing support and opportunities for people with significant care needs to socialise while providing respite for carers.
- Residential homes which are situated on the same site as Extra Care units providing continuity and flexibility for people and their loved ones should they require additional care and support as they get older.

- Residential care homes which operate community support beds which are jointly provided by health and social care. These beds are an essential part of the offer in Derbyshire, supporting people who require a short period of assessment and reablement within a residential setting, following hospital admission. These beds are also used to prevent people going into hospital.
- Long term residential care and short breaks

The Council currently operates the following residential care homes, four of which are community care centres:

- Ada Belfield (includes 20 community support beds) – (Amber Valley)
- Bennerley Fields (Erewash)
- Briar Close (Erewash)
- Castle Court (South Derbyshire)
- Florence Shipley (Amber Valley)
- The Grange (North East Derbyshire)
- Lacemaker Court (situated alongside an extra care unit) (Erewash)
- The Leys (Derbyshire Dales)
- Meadow View (includes 16 community support beds) (Derbyshire Dales)
- New Bassett House (Bolsover)
- Oaklands Community Care Centre (includes 16 community support beds and situated alongside an extra care unit) (South Derbyshire)
- Rowthorne (Amber Valley)
- Staveley Centre (includes 16 community support beds) (Chesterfield)
- Thomas Colledge (Bolsover)
- Thomas Fields (includes 10 community support beds and situated alongside an extra care unit) (High Peak)
- Whitestones (High Peak)

The residential homes which include an integrated day centre are;

- Florence Shipley
- Lacemaker Court
- Meadow View
- Oaklands Community Care Centre
- Staveley Centre

4.9 Non-integrated day centres

The Council operates eight day centres for older people which are not situated within a residential care home (referred to in this report as non-integrated).

These services do not provide specialist dementia support and there are other providers in Derbyshire that offer a range of day opportunities to older adults alongside Council operated centres.

The Council currently operates the following day centres;

- Blackwell Day Centre
- Ecclesfold Resource Centre
- Fabrick Day Services
- Hasland Resources Centre
- Jubilee Centre
- Queens Court
- Shirevale Resource Centre
- Valley View Day Centre

4.10 **Proposed redesign**

Given the major budget challenges faced by the Council and the changing needs of the growing elderly population, we are proposing to review our in-house residential and day services offer with a view to developing a revised model with a focus on short-term enablement, specialist dementia care and carer respite for the residents of Derbyshire. This is required to support the Council to meet the current and future demands of local people while ensuring sustainability for adult social care and health so we can continue to support those who need us most.

The community support beds jointly operated with partners in healthcare services support people to return home following a stay in hospital as well as prevent hospital admission. The Council will continue to work with partners to develop this service to support as many Derbyshire residents as possible to remain as independent as possible in accordance with the Best Lives Strategy.

In order to meet current and growing demand for specialist services for people living with dementia and their carers which is described above, our residential and day care offer requires modernisation and consolidation. The proposals set out below would enable us to offer long term specialist residential support and flexible, integrated carer respite within a specialist dementia residential setting. This would include day and night provision for carer short breaks.

This would require consolidation of Council operated residential and day services in order to use the resources available to meet the need

identified for Derbyshire residents as set out in Derbyshire's All Age Adults' Housing, Accommodation and Support Strategy 2023 – 2038 (the Accommodation Strategy).

4.11 **Proposed redesign - Option One**

Retain seven of the residential homes directly provided by the Council to provide a countywide offer consisting of community support beds, specialist dementia residential beds, integrated and flexible specialist dementia day opportunities, respite provision for carers of people living with dementia and integrated dementia residential beds with Extra Care.

To achieve the model set out at paragraph 4.10 we propose to cease to operate standard residential care and focus on high quality, specialist residential and respite dementia services. The non-integrated day centres do not provide for the flexible model we seek to operate in terms of carer respite, for example, day and overnight breaks on the same site is not possible. Therefore, we propose to cease operation of all non-integrated day centres. There are providers currently operating within the private and voluntary sector that are able to offer standard residential and day support.

- 4.12 This option would retain Ada Belfield, Meadow View, Oaklands Community Care Centre, Staveley Centre, Thomas Fields, Florence Shipley and Lacemaker Court. These residential settings have the right requirements to fulfil the model of enablement, specialist dementia care and flexible carer respite including location and integrated day centre facilities.
- 4.13 This option would provide an overall efficiency in the region of £6.6m.
- 4.14 This proposal would involve the Council ceasing to directly operate the following residential homes: Briar Close, Bennerley Fields, Castle Court, The Grange, The Leys, New Bassett House, Rowthorne, Thomas Colledge and Whitestones. Currently there are a total of 135 long term residents in the nine homes.
- 4.15 This option would also involve the Council ceasing to directly operate the non-integrated day centres: Blackwell Day Centre, Ecclesfold Day Centre, Fabrick Day Services, Hasland Resource Centre, Jubilee Centre, Queens Court, Shirevale Resource Centre and Valley View Day Centre. Currently, there are a total of 130 people who attend these day centres.

- 4.16 The residential homes which the Council would cease to operate, would be offered for sale to the open market as a going concern for a set period of time where possible. If these services were not purchased, they would be required to close, and people would be supported throughout to find alternative placements.
- 4.17 Option one would enable the Council to transform and consolidate resources to provide:
- A residential offer specialising in dementia care delivered by the Council across the County, providing dementia specialist care for long term residents and short-term support. These seven residential settings have the right requirements to fulfil the model of enablement through community support beds, specialist dementia care and flexible carer respite.
 - Three care homes with community support beds and dementia specialist residential care beds (Ada Belfield, Meadow View and Staveley Centre).
 - Two care homes with community support beds and dementia specialist residential care beds within Extra Care settings (Oaklands and Thomas Fields).
 - One care home with dementia specialist residential care beds within an Extra Care setting (Lacemaker Court).
 - One care home with specialist dementia residential care beds (Florence Shipley).
 - Five of the seven residential homes have an integrated day centre which would enable a flexible, consistent offer of day and overnight respite for people living at home with dementia and their carers. (Florence Shipley, Lacemaker Court, Meadow View, Oaklands Community Care Centre and Staveley Centre)
- 4.18 Should consultation be approved, and should any services cease to operate following a thorough consultation, the usual Derbyshire County Council procedures would apply to any impacted colleagues and be implemented, as appropriate. Relevant procedures and processes would also be followed as regards to any other stakeholders impacted.

4.19 **Proposed redesign - Option Two**

Retain the five residential homes that currently support the jointly provided community support beds. Alongside the community support beds, this option would allow for specialist dementia residential beds, integrated and flexible specialist dementia respite provision for carers of people living with dementia and some integrated dementia residential beds with Extra Care.

- 4.20 To achieve the model set out at paragraph 4.10 we propose to cease to operate standard residential care and focus on high quality, specialist residential and respite dementia services. The non-integrated day centres do not provide for the flexible model we seek to operate in terms of carer respite, for example, day and overnight breaks on the same site is not possible. Therefore, we propose to cease operation of all non-integrated day services. There are providers currently operating within the private and voluntary sector that are able to offer standard residential and day support.
- 4.21 This option would retain Ada Belfield, Meadow View, Oaklands Community Care Centre, Staveley Centre and Thomas Fields. These residential settings have the right requirements to fulfil the model of enablement, specialist dementia care and flexible carer respite.
- 4.22 This option allows the Council to provide the model set out in paragraph 4.10 whilst making a higher overall efficiency in the region of £7.7m.
- 4.23 This proposal would involve the Council ceasing to directly operate the following residential homes: Briar Close, Bennerley Fields, Castle Court, Florence Shipley, The Grange, Lacemaker Court, The Leys, New Bassett House, Rowthorne, Thomas Colledge and Whitestones. Currently there are a total of 162 long term residents living in the eleven homes.
- 4.24 As with option one, option two would also involve the Council ceasing to directly operate the non-integrated day centres: Blackwell Day Centre, Ecclesfold Day Centre, Fabrick Day Services, Hasland Resource Centre, Jubilee Centre, Queens Court, Shirevale Resource Centre and Valley View Day Centre. Currently there are a total of 130 people attending the day centres.
- 4.25 The residential care homes which the Council would cease to operate, would be offered for sale to the open market as a going concern for a set period of time where possible. If the services were not purchased,

they would be required to close, and people would be supported throughout to find alternative provision.

4.26 Option two would enable the Council to transform and consolidate resources to provide:

- A residential offer specialising in dementia care delivered by the Council across the County, providing dementia specialist care for long term residents and short-term support. These five residential settings have the right requirements to fulfil the model of enablement through community support beds, specialist dementia care and carer respite.
- Three care homes with community support beds and dementia specialist residential care beds (Ada Belfield, Meadow View and Staveley Centre).
- Two care homes with community support beds and dementia specialist residential care beds within Extra Care settings (Oaklands and Thomas Fields).
- Three of the five residential homes with an integrated day centre which would enable a flexible, consistent offer of respite day and overnight to people living at home with dementia and their carers (Meadow View, Oaklands Community Care Centre and Staveley Centre).

4.27 Should consultation be approved, and should any services cease to operate following a thorough consultation, the usual Derbyshire County Council procedures would apply to any impacted colleagues and be implemented, as appropriate. Relevant procedures and processes would also be followed as regards to any other stakeholders impacted.

Preferred course of action

4.28 In light of the above factors, it is proposed that approval is sought to commence consultation on the two options set out above. Both options in this report would include a commitment that everyone impacted would be thoroughly supported throughout the process if cabinet approves consultation. We would seek to communicate regularly and offer support to residents, people who use services and their families and carers. This commitment would include a pledge to carry out person-centred assessments and/or reviews under the Care Act 2014, as well as undertaking updated assessments for any carers affected and providing advocacy for people as appropriate.

- 4.29 Whilst the Council considers the two options set out above to be the most viable options at this stage, it is vital to the process that the views of the residents, people who use the day services, their families and other stakeholders are sought prior to any decision being taken with regard to the proposed redesign. The Council will keep an open mind as to whether these options remain the most viable throughout any approved consultation exercise and will need to evaluate any responses received to such a consultation in order to ascertain whether further viable alternative options have been put forward or give the Council reason to reconsider whether the other options than the two above represent a more suitable alternative. Specific questions in this regard would form part of any approved consultation exercise.
- 4.30 If approved, a full Equality Impact Analysis ('EIA') will also be prepared during the consultation process reflecting issues that are raised during the consultation process. This will be reported in full to Cabinet and a full copy of the EIA made available to Members in order that any adverse impact along with any potential mitigation can be fully assessed. Cabinet members will be reminded at that time of the need to have careful regard to the conclusions of the EIA.
- 4.31 If permission to consult on the options above is given, and if any of the proposals set out in the report, or any other proposal materialising following a thorough consultation, are approved, residents impacted and their families would be supported in accordance with the 'Pledges' at appendix 2. The Council understands how important this would be in providing people with the support needed during any period of change.

5. Consultation

- 5.1 If the recommendations in this report are approved, it is proposed that formal public consultation would commence on 15th May 2024 for 12 weeks, ending on 7th August 2024. A public consultation would be carried out seeking people's views on the two options being presented.
- 5.2 We would support current residents, people using regular respite and those attending day centres and their carers to understand and engage with the consultation process and the potential implications for them by offering support to participate in the consultation via a one-to-one interview, where requested.
- 5.3 We also propose engaging informally with colleagues working in any impacted service as part of the consultation exercise. Such engagement will encourage all colleagues to participate in the consultation and to

share their experiences and views on the proposals. We will also offer support through the process, engaging more formally with the staff of any home which may eventually cease to operate by the Council.

- 5.4 Adult Social Care's Stakeholder Engagement and Consultation Team (SECT) would arrange and coordinate a series of face-to-face consultation meetings for people using the services and their carers.
- 5.5 The SECT team would arrange and coordinate face to face and virtual sessions. Interested parties and members of the public would be invited to book a place via publicity and communications.
- 5.6 The SECT team would develop a questionnaire for participants to complete. The questionnaire would be reflective of the proposal/s and give opportunity for participants to comment and give feedback on their views. The questionnaire would be placed on DCC's Have Your Say webpage where consultees would be encouraged to visit and complete a questionnaire.
- 5.7 All stakeholders would also be given the opportunity to give their views by sending a letter, via email to: ASCH.Tell.AdultCare@derbyshire.gov.uk or via telephone contact for SECT. Stakeholders would be given the opportunity to either email a message or leave a telephone voice mail requesting a call back from a member of SECT. SECT members would then record any feedback via telephone interviews and/or assist participants to complete an online questionnaire.

6. Alternative Options Considered

- 6.1 To determine the future provision of accommodation for older people in the residential homes and day services for older people listed above without conducting a public consultation exercise. This will not be pursued as a viable option because proposals to make significant changes in service provision require consultation with the public and those directly affected, including service users, staff and carers and relevant stakeholders. This would be unlawful and would expose the council to legitimate legal challenge while at the same time undermining the quality of its decision-making.
- 6.2 To maintain the status quo and continue to operate the current sixteen homes including internal day centres and all eight non-integrated day centres. Given the current budget position and future demand this is not sustainable for the Council and is discounted on the basis that it is

not a viable option.

- 6.3 Consult on more or different potential models or changes. The Local Authority is entitled to consult over its chosen proposed model but should not limit its consideration of alternative models or changes. The consultation exercise will therefore facilitate the ability for responses to be provided in this regard.

7. Implications

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

8. Background Papers

- 8.1 Derbyshire All Age Adults' Housing, Accommodation and Support Strategy 2023 – 2038
- 8.2 Adult Social Care Strategy – Best Lives Derbyshire 2022 - 2025
- 8.3 Derbyshire County Council Carers Strategy 2020-2025
- 8.4 Market Position Statement - community and accommodation-based support for older people 2022 to 2023.
- 8.5 Previous consultation – Residential Care for Older People 5 May 2022

9. Appendices

- 9.1 Appendix 1 – Implications
- 9.2 Appendix 2 - Our Pledges to Residents

10. Recommendation(s)

- 10.1 It is recommended that Cabinet:
- a) Approves the programme of formal public consultation for a period of 12 weeks on the two proposed options concerning the future of the eleven residential homes and integrated day opportunities for older people, and all of the non-integrated day opportunities for older people.

- b) Receives a further report following the conclusion of the consultation process, including an Equality Impact Analysis.

11. Reasons for Recommendation(s)

- 11.1 Proposals to make significant changes in service provision require consultation with the public and those directly affected, including people who use the service, staff and carers and relevant stakeholders to ensure that their views can be taken into account when a final decision is made. Consultation for 12 weeks is proposed to ensure the Council complies with its legal obligations.
- 11.2 A further report following the conclusion of a consultation is recommended to ensure that Cabinet is fully informed of the outcome of the consultation and Equality Impact Analysis when it makes a decision on the future of this topic.

12. Is it necessary to waive the call-in period?

- 12.1 No

Implications

Financial

- 1.1 The 2024/25 Approved Revenue Budget includes two efficiencies relating to residential homes for older people and day centres for older people. These are £5.209M and £1.325M respectively – to be achieved over financial years 2024-25 to 2026-27. These are on-going cashable efficiencies. The current financial modelling indicates that these efficiencies will be achieved by the options set out in this paper and includes the cost of alternative services for current users with eligible care needs. The landlord cost of the building and sites has also been analysed and based on the latest condition surveys, the financial liability over the next one to five years for sites which may cease to operate, is up to £5.8M for care homes and £3M for day centres.
- 1.2 The cost of the consultation will be met from existing resources.

Legal

- 2.1 Section 1 Care Act 2014 imposes a general duty on the Council to promote an individual's well-being whenever exercising any function under Part 1 Care Act 2014.
- 2.2 'Well-being' is not defined within the Care Act 2014 and is a broad concept. Section 1(2) lists nine individual aspects of well-being as follows:
- (a) personal dignity (including treatment of the individual with respect);
 - (b) physical and mental health and emotional well-being;
 - (c) protection from abuse and neglect;
 - (d) control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided);
 - (e) participation in work, education, training or recreation;
 - (f) social and economic well-being;
 - (g) domestic, family and personal relationships;
 - (h) suitability of living accommodation;
 - (i) the individual's contribution to society.

Although the well-being principle applies specifically when the Local Authority makes a decision in relation to an individual, the Care and

Support Statutory Guidance is clear that the principle should also be considered by the Council when it undertakes broader, strategic functions.

- 2.3 The Council must also have regard to the following matters in particular, pursuant to the following subsections of s1(3) Care Act 2014
 - (a) the importance of beginning with the assumption that the individual is best-placed to judge the individual's well-being;
 - (b) the individual's views, wishes, feelings and beliefs and;
 - (e) the importance of the individual participating as fully as possible in decisions relating to the exercise of the function concerned and being provided with the information and support necessary to enable the individual to participate;
- 2.4 Whilst the Council is not required by way of statutory duty to provide any in-house residential care or day opportunity provision, s5 Care Act 2014 places a separate duty on the Council to promote an efficient and effective market, with a view to ensuring that any person in its area wishing to access services in the market:
 - a) has a variety of providers to choose from who (taken together) provide a variety of services.
 - b) has a variety of high-quality services to choose from; and
 - c) has sufficient information to make an informed decision about how to meet the needs in question.
- 2.5 A needs assessment must be carried out where it appears to the Local Authority that a person may have needs for care and support. The assessment must identify whether the adult has any eligible needs. If there are, the assessment must state what those needs are. (s 9(1), Care Act 2014.) A Local Authority must also assess any carer (current or prospective) where it appears they may have needs for support. (s 10(1) Care Act 2014.
- 2.6 Where a Local Authority is satisfied on the basis of a needs or carer's assessment that an adult or their carer has needs for care and support, it must determine whether any of the needs meet the eligibility criteria (s13 (1) Care Act 2014)
- 2.7 Section 18 Care Act 2014 provides that where an adult is assessed as having eligible needs, the Council is under a duty to meet those needs. The criteria does not specify the types of care and support that a Local Authority must provide to meet eligible needs. Needs may therefore be met in a number of different ways e.g., by attending a day centre, or

should the nature and/or extent of the care and support needed require it, the person care plan would specify a need for residential care. Should an individual be required to move accommodation, or should an individual's current day centre close, alternative arrangements to meet those eligible needs must be made.

- 2.8 Prior to any changes arising, their needs assessment and care and support plan should be reviewed. Where a care plan is to be altered, the Council must have regard to, amongst other things, the outcomes the individual wishes to achieve and the impact on a person's well-being. In offering alternative accommodation the Local Authority should have regard to the Care and Support (Choice of Accommodation) Regulations 2014. This report details steps which would be taken to support individuals who would be affected by the proposals to identify alternative options for their current care and support provision.
- 2.9 Proposals to make significant changes in service provision require consultation with the public and those directly affected, including service users, staff and carers and relevant stakeholders.
- 2.10 Case law has established minimum requirements of consultation, which are:
 - a) Consultation must be at a time when proposals are at a formative stage;
 - b) Sufficient information must be given to permit a person to "give an intelligent consideration and response";
 - c) Adequate time must be given for consideration and response; and
 - d) The results of the consultation must be conscientiously taken into account in finalising any proposal and provided to the decision maker to inform their decision.
- 2.11 The consultation process should also contain a statement setting out the relevant context for the proposals under consideration. Residents should be provided with the true reason for the closure, and for why one home was favoured to remain open rather than another.
- 2.12 Following the consultation set out in the report Members will need to take careful account of the views expressed in arriving at their decision. In addition, any final decisions must also take into account the rights of service users as set out in the Human Rights Act 1998, specifically Article 8, "Right to respect for private and family life".
- 2.13 In assessing these proposals, the Council should also have regard to the Public Sector Equality Duty (PSED) under the Equality Act 2010.

2.14 The PSED requires public authorities to have "due regard" to:

- The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010 (section 149(1) (a)).
- The need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it (section 149(1) (b)). This involves having due regard to the needs to:
 - remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
 - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it (section 149(4)); and
 - encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- The need to foster good relations between persons who share a relevant protected characteristic and those who do not share it (section 149(1)(c)).

2.15 Preliminary consideration has been given to the impact of the proposals on persons with protected characteristics in drawing up these proposals. In particular it is recognised that the methods and content of the consultation will need to be designed so as to fully reflect the needs of the relevant protected groups, in particular older people and disabled people.

2.16 In addition, due regard has been given to the requirement for an Equality Impact Analysis (EIA) which would be carried out in respect of the care pathway redesigns as is referred to in the report at the conclusion of the public consultation, if approved. A full EIA would be completed once the consultation responses have been received and considered. This will be reported in full to Cabinet and a full copy of the EIA made available to Members in order that any adverse impact along with any potential mitigation can be fully assessed. Cabinet members will be reminded at that time of the need to have careful regard and fully consider the conclusions of the EIA.

Human Resources

3.1 Any workforce implications arising from the proposals will be the

subject of further reports on the conclusion of public consultation. Staff will be included in engagement and there will be HR support as part of any consultation exercise.

Information Technology

4.1 None directly arising.

Equalities Impact

5.1 The Council has a duty to recognise and mitigate the impact of any changes it proposes upon people in protected groups. The proposals in this report affect people with accessing residential care and day services who have protected characteristics provided by Derbyshire County Council.

5.2 The Council will take account of the challenges which the people affected by the proposals in this report face, both in terms of participation in the consultation and in ensuring that the impact of any changes is mitigated if they are to be implemented. Family, and carers will be invited to participate in the consultation and advocacy services will be arranged for people who require them.

5.3 A full Equality Impact Analysis will be undertaken and this will be reported to Cabinet on the completion of the consultation on the proposals in this report, should a consultation exercise be approved by Cabinet.

Corporate objectives and priorities for change

6.1 In the Council Plan 2021 – 2025 the Council states that listening to, engaging, and involving local people to ensure services are responsive and take account of what matter most to people, as being a core value.

6.2 The Council commits to work together with its partners and communities to be an enterprising council, delivering value for money and enabling local people and places to thrive, and to spend money wisely making the best use of the resources that it has.

Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)

7.1 As set out in the report.**Report Author:** Jennifer Harper

Contact details: Jennifer.Harper@derbyshire.gov.uk