



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

IMPROVEMENT AND SCRUTINY COMMITTEE - PEOPLE

WEDNESDAY 30TH OCTOBER 2024

Report of the Executive Director – Adult Social Care & Health

Consultation and Engagement of the Older Adults Service Redesign

1. Purpose

- 1.1 A report was presented to Cabinet on 29th April 2024 which sought approval to launch a 12-week consultation on two options for the future delivery of residential homes and day care for older adults. Following Cabinet approval, the consultation took place between the 15th May and 7th August 2024.
- 1.2 The purpose of this report is to inform the Scrutiny Committee of information regarding the public consultation and provide an opportunity for the Scrutiny Committee to submit comments to Cabinet for consideration in making its decision.

2. Information and Analysis

- 2.1 Cabinet heard on 29 April, that the council has ambitious plans to support its residents to live their best life in Derbyshire, with research showing that for most people this means living independently in their own home and communities wherever possible. Like councils across the country, Derbyshire is facing increasing financial pressures that are outside its control including inflation and the national pay award. At the same time, there's been an increase in demand for services, particularly for older people. It is essential therefore that the council conducted a review to ensure that it can provide a sustainable adult social care service for the people of Derbyshire.

2.2 Cabinet agreed to consult on two proposals designed to use its directly delivered resources to meet a gap identified in the care market as set out in Derbyshire's All Age Adults' Housing, Accommodation and Support Strategy 2023-2038 (the Accommodation Strategy). The proposals were to provide specialist dementia residential care with carer support through respite breaks while continuing to work in partnership with health colleagues to provide short term residential beds for people to regain independence and return to their home.

2.3 The options for consideration within the Cabinet report were as follows;

Option One

This option was to retain seven of the residential homes directly provided by the Council to provide a countywide offer consisting of community support beds, residential care, respite and integrated day centre offer for people living with dementia.

The homes proposed to be retained under option one were Ada Belfield, Florence Shipley, Lacemaker Court, Meadow View, Oaklands Community Care Centre, Staveley Centre and Thomas Fields.

This option proposed that the Council would cease to directly operate the following nine homes: Bennerley Fields, Briar Close, Castle Court, The Grange, The Leys, New Bassett House, Rowthorne, Thomas Colledge and Whitestones.

Option Two

This option was to retain five of the residential homes directly provided by the Council to provide a countywide offer consisting of community support beds, residential care, respite and integrated day centre offer for people living with dementia.

This option proposed that the Council would cease to directly operate the following eleven residential homes: Bennerley Fields, Briar Close, Castle Court, Florence Shipley, The Grange, Lacemaker Court, The Leys, New Bassett House, Rowthorne, Thomas Colledge and Whitestones.

2.4 Both of the options consulted upon proposed that the Council cease to directly operate the following 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.

2.5 In both options the proposal was that any residential home that the Council ceased to operate would be offered to the open market for sale as a going concern for a set period, where possible. If these services were not purchased, they would be required to close, and people would be supported to find alternative placements.

2.6 Given the potential impact of any decision there was a requirement and need to consult interested stakeholders and the general public about the proposals and to analyse all the responses before any decision could be made by the Council in relation to each of the homes and day centres.

2.7 The formal public consultation ran for a 12-week period between 15th May 2024 and 7th August 2024 and included;

- Service specific sessions with people attending/living in the services and their family and carers at all sixteen residential homes and day centres.
- Public virtual sessions facilitated using Microsoft Teams held in the evenings (four sessions).
- Drop-in library sessions across the County (twelve sessions).
- Online questionnaires with paper versions on request.
- Support from the Stakeholder Engagement and Consultation Team to ensure people were supported to share their views in the easiest way possible.

2.8 The consultation used quantitative and qualitative approaches to gather people's views about the proposals. Officers enabled as many people as possible to take part, by offering a range of ways in which they could share their views;

- People who live in or access any of the services and their carers received an introductory letter detailing the arrangements for undertaking the consultation and the proposals for consideration.
- Meetings held at each individual service with a Director and/or Assistant Director leading the session with support from the Stakeholder Engagement and Consultation Team.
- Dedicated experienced Social Worker at every consultation meeting to support individuals with any questions or advice needed regarding their individual circumstances or any related Adult Social Care query.
- Signposting to further information on the Derbyshire County Council website which gave an outline of the proposals, timelines, the ways in which people could share their views and support available to do so.
- Offering the questionnaire in different formats, such as an easy read version if this was more appropriate.
- Completing the questionnaire online (both in easy read format and standard version).

- Requesting a paper copy of the questionnaire via the Stakeholder Engagement and Consultation Team and sending in comments using the standard or easy read postal questionnaire.
- Opportunity to write to the Council via a letter or a dedicated email address.
- Telephone interview for those people having difficulty completing the questionnaire.
- Media releases which were issued at the start and during the consultation encouraging people to take part and these were published on the county council's website. We also promoted the public consultation on a variety of corporate channels and social media.
- Virtual meetings (four) using Microsoft Teams took place in the evening to enable as many people as possible to share their views and ask questions about the proposals.
- Library sessions (twelve) drop in sessions across the County for people to attend and share their views, ask for information and complete questionnaires.

2.9 People lacking capacity to engage

Managers responsible for all the establishments that are subject to the proposals have verified that all the people that attend these services and were likely to lack the Mental Capacity or likely to need support to engage in the consultation had access to the support needed through either via Advocacy, family support or professional colleagues.

- 2.10 In total, 1742 people responded to the consultation either by attending and contributing to the debate during a virtual meeting or by completing a questionnaire, writing a letter or email or by contacting the Council by phone.
- 2.11 Responses received from Derby and Derbyshire's Integrated Care Board and Derbyshire Community Health Services (DCHS) who currently jointly operate the community support beds with the Council.
- 2.12 At the time of drafting this report there were 7 petitions received, ranging from 22 to 5485 signatures. The lists did not fulfil the requirements for debate of the Petition Scheme as set out within the Council's Constitution due to the number of people who lived, worked, or studied in the Council's area.

Two petitions with a total of 593 signatures were received regarding Thomas College, one petition received for The Grange with 344 signatures, one petition regarding the eight non-integrated day centres 5485 signatures, one petition

regarding Briar Close with 1888 signatures, one petition with a total of 981 regarding the overall proposals for older adult's residential care and one petition regarding the overall proposals for residential care and day opportunities with 176 signatures.

- 2.13 There were three distinct approaches to the analysis of the qualitative material from the public consultation.
- a. Information gathered during face to face and virtual meetings.
 - b. Information gathered from letters, emails, and telephone calls.
 - c. Qualitative information contained in the online and paper questionnaires, both the standard and easy read versions. This gave us an opportunity to widen our understanding of the views about the proposals and indicate some of the reasons behind those opinions. It also allowed people to expand and give examples as to the potential impact of the proposed changes.
- 2.14 The main concerns expressed were around the impact on people who may need to move home or who may not be able to attend their day centre, the availability of alternative provision both in terms of quality and quantity and the importance of the availability of respite breaks to support people and their carers in the community.
- 2.15 The Stakeholder Engagement and Consultation Team analysed the responses received from the consultation, theming them under the following categories in alphabetical order.

Alternative suggestion

Respondents took the opportunity to make suggestions to alternatives to the proposals made, the range involved, combining services, making current services financially viable, looking for savings in other areas, waiting for a change of government.

These alternative suggestions and ideas have been gratefully received and some of these have helped us to shape the recommendations in the report. Other suggestions have been noted and will influence how we shape future provision through commissioning and market development.

Disagree with the proposals

Where respondents were indicating a direct disagreement with the proposals but did not expand further.

We recognise that many people disagreed with the proposals. We are committed to working closely with people and their family/carers to explore all options available to have their needs and outcomes met (as per our Statutory Duties within the Care Act 2014).

Financial mismanagement

Respondents commented on opinions regarding DCC financial mismanagement, some comments were in relation to adult social care and others were comments on DCC over all finances.

In putting the recommendations to Cabinet, we needed to take into account of the fact that, like every Council up and down the country, Derbyshire 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, the Council needed to review how people's assessed needs are met under the Care Act 2014 and to what extent the Council provides a direct care service as a means of fulfilling those needs.

Impact on other services

Here comments were received in relation to opinions on how the proposals would impact negatively on services of other organisations and other services of adult social care and DCC.

We have taken this feedback into account when making the recommendations and planning the future for directly provided services going forward. Comments included concerns regarding hospital discharges being impacted, we have demonstrated in the report that we are committed to working with health partners to facilitate community support beds for Derbyshire residents. We also continue to work with health to facilitate hospital discharges for people returning home and into placements where appropriate. We have considered the impact across ASCH and feedback from partner organisations when putting the recommendations together.

Impact on residents, relatives, clients

Here respondents commented on the impact implementing the proposals would have on themselves as direct users of services and or their relatives. Relatives also commented on the impact of implementing the proposal would have on themselves as carers and or the person they cared for.

We recognise that any move to an alternative home or change of service will cause disruption and concern for residents, people attending and their families, as demonstrated by the number of responses to the consultation on this theme. Our commitment is to work together with people and their families to minimise the impact of any change, as much as we possibly can. We will take account of the financial, emotional and practical impact identified in feedback, through careful and detailed planning with people and their families. We recognise the importance of ensuring that families and friends can continue to maintain contact and that friendship groups remain connected. Any recommendations made will not impact on the individual's personal budget or level of formal support including carer respite. However, we recognise there may be changes to how formal support is provided going forward. We will ensure professional

support is available to people and their family, exploration of alternatives, robust transition planning and a review of the outcomes until support is stable and working well.

Lack of alternatives

Respondents commented on the lack of alternatives, some regarding a lack of other opportunities within their local community and those were analysed as concerns for the local community, however further concerns were raised for the lack of alternative provision in a wider context of Derbyshire as a whole.

In terms of PVI provision, as referenced in the Cabinet Report there are many PVI providers that the Council contract with that offer residential care and day services. We are continually working to identify areas of development and commission provision to meet demand. Specific comments included concerns around a lack of homecare. In April 2024, we introduced a new framework contract for provision of home care which has increased the available home care capacity in the county with a doubling of available providers. The impact of this, coupled with the Council's re-modelled Short-Term Assessment and Rehabilitation Team, means that more people are supported to live at home thus lessening the need for residential care in the future. We also continue to support people in Extra Care with enhanced support for long term needs. In addition to this, we have had an increase in the number of people accessing Direct Payments in the past few years in Derbyshire. We have a new Personal Assistant register for people to find and recruit PAs and also for people to register and find work as a PA. Alongside this we have a new enhanced support service to help with all aspects of managing a Direct Payment. We are also expanding our Shared Lives offer which supports people for overnight and day breaks.

Lack of confidence in the consultation

Respondents indicated a disbelief in a genuine consultation process.

The consultation included specific sessions with people who attend the services, family and carers; public virtual sessions held in the evenings; drop-in library sessions across the County; questionnaires (including easy read) online with paper versions on request and support from the Stakeholder Engagement and Consultation Team to ensure people were supported to share their views in the easiest way possible. No decision could legally be made until after the consultation had closed, feedback analysed and recommendations to Cabinet. We have listened, analysed and adapted the recommendations based on feedback in the consultation process.

Local community

Respondents commented on the lack of public transport to support relatives to visit outside of their local community in all locations but particularly in rural locations where adverse weather would have further impact, and or the distance clients would be expected to travel to alternative services. Comments were received regarding concern for the local community and the stripping of assets

that meet the needs of people in the immediate area across all areas, including the loss of employment to the local economy.

If any changes lead to travel implications for people as we would work together to reduce any negative impact. Any cost implications for families would need to be carefully considered and fully appraised. As part of a person centred review, we will explore people's individual circumstances, needs and outcomes to be achieved. Our aim is for people to be supported in their local communities with inclusive, meaningful activities. We are working to develop local opportunities, for example developing and stimulating Direct Payments, Shared Lives and Micro Providers. We are also continually working with providers to develop their appropriate, local and inclusive services in communities.

Not answering the question

Comments here were relating to other things and bore no relevance to the question asked or the consultation.

Other

Comments here were stand alone and did not fit into any other category.

We have noted this feedback and comments are included in the Consultation Report.

Political agenda

Respondents took the opportunity to comment on their thoughts relating to the democratic process and frustration with local policy makers.

We have noted this feedback and comments are included in the Consultation Report.

Private sector concerns

Respondents reported concerns for the quality of private sector provision, availability and the cost of private sector provision, further fearing that if DCC removed itself from the market then the private sector would increase prices further.

Registered services are regulated by the Care Quality Commission and those on the Council's contracted framework will be assessed to ensure they meet our standards and have regular monitoring to ensure a high-quality service is provided and maintained which includes in-person visits and auditing. People can report any concerns to the contracts department in regard to standards of care. If people wish to have a review of support provision at any time, they are able to request a review or reassessment from an Adult Social Care Practitioner.

Quality of DCC care and staff

Respondents reported their admiration and gratitude for the quality of care provided by DCC staff, this was often accompanied with a comparison to private sector provision that was not thought to be of the same quality. There was also

concern voiced for the welfare of those staff directly affected should the proposals be implemented.

Please see above response provided to private sector concerns. Praise and concern for Council colleagues has been noted and will be feedback.

Rationale for the proposals

Respondents reported a belief that background work had not been sufficient to warrant the rationale for the proposals, and that the proposals did not sit with current trends or needs.

The rationale is clear in the April Cabinet Paper in terms of the requirement to make financial efficiencies and to use limited resources to meet current and future demand. There has been a reduction in demand for standard residential care due to people being supported at home for longer resulting in more complexity of need on admission to long term care. Demand for Adult Social Care is increasing and with the budgetary pressures we are facing, we're having to look at how best we can continue to support those who need us most. Directly providing residential and day services is discretionary. We are now having to look at doing things differently and considering all areas of spending.

- 2.16 During the consultation the Council also received feedback from its partners in the NHS around the benefits of consolidation under a single operating model and the potential for further integration in the area of short-term assessment and reablement.
- 2.17 The next steps are for Cabinet to consider the responses from the public consultation and Equality Impact Analysis to decide on future delivery. This is an opportunity for Scrutiny Committee to make comments for the Cabinet to consider.

3. Alternative Options Considered

N/A

4. Implications

N/A

5. Consultation

N/A

6. Background Papers

N/A

7. Appendices

- 7.1 Appendix 1 – Cabinet Report - Proposed Redesign of Residential Care and Day Opportunities for Older People (Adult Care) 29 April 2024

8. Recommendation(s)

That the Committee:

- a) notes the responses to the public consultation
- b) notes that all such matters will be considered and included within a comprehensive and robust Equality Impact Analysis which will be incorporated within the future cabinet report, which will be presented in due course.
- c) further notes that Cabinet will consider the Equalities Impact Assessment as part of its decision making.
- d) considers responses to the public consultation and provides comments to Cabinet and the Equalities Impact Assessment for consideration when making its decision regarding the older adults direct care redesign.

9. Reasons for Recommendation(s)

- 9.1 The Equality Impact Assessment is being prepared to reflect the issues raised during the consultation process, which will incorporate comments from the Scrutiny Committee.
- 9.2 The Cabinet will need to have regard to the comments from Scrutiny thereof in any decision making.