

Appendix 3.

Service Review Report: Care Delivery Transformation: Care Homes

Consultation Findings Report on the Proposed Closure of Home Lea House Long Stay Residential Care Home in Rothwell and Richmond House Short Stay Residential Care Home in Farsley.

June 2021

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Section One – Purpose of the report and background

Purpose

The purpose of this report is to inform Executive Board of the outcome of a process of consultation in relation to the proposed closure of two council run care homes: Home Lea House long stay residential care home in Rothwell, and Richmond House short stay residential care home in Farsley. It is also to give Executive Board sufficient information to enable it to make an informed decision about the proposed future options for these services.

This consultation report takes the opportunity to formally recognise and acknowledge the great deal of time and effort that has been put into the responses by contributors to the consultation.

All respondents offered very helpful and detailed comments which have provided a valuable insight into their opinions and wishes and helped to refine recommendations. The findings from the consultation, and the strength of feeling expressed by respondents, have enabled officers to consider the proposals whilst fully taking into account the key themes and issues regarding potential positive and negative impacts on those directly affected, and those in the wider local community, and mitigations against these.

Background

A report to the Council's Executive Board in October 2020 highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the ongoing financial impact of Covid-19. The council is legally required to set a balanced budget, therefore a number of savings proposals have been put forward, including one for the proposed closure of Home Lea House Long Stay Residential Care Home in Rothwell, and the closure of Richmond House Short Stay Residential Care Home in Farsley, making savings annually of £1.531million as a contribution to the budget gap identified.

This report follows the decision of the Executive Board in October 2020 to begin a period of statutory consultation on these proposals.

Section Two – Methodology and Process

Consultation approval process

The Better Lives strategy is the Council's strategy for people with care and support needs. A key aspect of this strategy over recent years has been a strategic review to transform the Council's in-house service for older people. The main drivers for these specific proposals are:

- The aspiration of older people to have a wider choice of appropriate accommodation and support options with, as much as possible, support being delivered in their own homes or in care environments like extra care housing.
- The challenging financial context for local authorities which has been further impacted by COVID-19, and the need for the most efficient and effective model of services to make the Leeds pound go further
- The need for significant capital investment in these two buildings.
- The impact on occupancy levels of older people exercising choice on the two care homes and therefore the unit cost of services

Previous reports to both Executive and Scrutiny Boards as part of the Better Lives Programme have documented how the aspirations of people with care and support needs have changed over time and that there is a strong and increasing desire to remain living in one's own home for as long as possible. As such a key aspect of the *Better Lives* strategy has been a continuous review of the Council's in-house services for older people with the focus being on how they meet both current expectations and crucially how they can contribute to maximising people's independence, recovery and rehabilitation in the future.

The reviews evidenced that demand for traditional forms of residential care for older people have continued to reduce with a switch to greater demand for models of care that provide housing-with-support such as extra care housing. This has meant that between 2011 and 2016 several in-house care homes closed.

As detailed above, the Council is facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic is unprecedented. All parts of the Council have had to look carefully at the cost of all our services and put forward options to support the reduction of the financial gap and to help build financial resilience over the next five years. The challenging financial context for local authorities has been further impacted by COVID-19, and we recognise the need for the most efficient and effective model of services to make the Leeds pound go further. It is therefore timely to review in-house service provision and consider future options as part of the Council's medium-term financial strategy.

Home Lea House

Home Lea House is a 29 bedded long-stay residential home situated in Rothwell. There are two in-house care homes in Rothwell and Home Lea House is the older of the two homes which is why it has been put forward for closure. Occupancy at Home Lea House is currently 18(62%). The current gross budget is £789k and the net budget is £547k. In a full year it would be possible to save the gross budget of £789k as the client income will follow the client. Closing this facility from 1st February 2022 would save £789k by the end of 2022/23. The one-off costs of alternative independent provision (for those taking up on the care guarantee) would need to be offset against these savings.

The proposal to Executive Board in October 2020 was to commence consultation on the proposal to decommission the service, based on national data which supports the view that people are being supported to live independently and safely in their own homes and communities for longer. The need for residential homes is decreasing within Leeds and where this resource is required to meet people's needs, there is a well-developed independent sector care home market. The number of residential care homes rated by the Care Quality Commission as good or outstanding is now 83%.

Richmond House

Richmond House is a 20 bedded residential service situated in Farsley. The current service offer is short term care and support to people who require a period of convalescence following a hospital admission. The service also offers support to people from the community to prevent hospital admission. Average occupancy since 2018/19 is 55%. The current gross and net budget is £742k. There is no associated income from short term residents. The part year saving from closure on 1st November 2021 would amount to £309k, with the full saving of £742k in 2022/23. The one-off costs of any potential alternative independent provision would need to be offset against these savings.

The proposal to Executive Board in October 2020 was to commence consultation on the proposal to decommission the service based on occupancy and the need for this type of service across the city. Leeds has a range of services to meet the needs of people who require some type of intervention to either support them to reach their optimum with therapeutic and recovery focused support to return home or to undertake an assessment to support their longer term needs. The Leeds CCG Community Care Beds contract is now established and provides an enhanced recovery residential and nursing offer. While Richmond House offers short term support, it does not provide any additional therapeutic input that is often required when people are discharged from hospital. As such Richmond House is continually under occupied and the current type of provision can easily be assimilated in wider system provision.

Everyone who receives a service at Richmond House either returns to their own home, is supported to bid for rehousing or moves to longer term care. Average length of stay is three and a half weeks. The Adults & Health social work teams

support and facilitate appropriate moves for people with the assessed level of care package.

Previous consultation: Home Lea House

Home Lea House was subject to consultation during Phase 2 of Residential and Day Services project, specifically about the potential development in partnership with a community group / Third sector organisation and Executive Board approved these proposals in September 2013. The November 2014 Executive Board Report gave an update on the position relating to all four homes under review during that phase. Regarding the proposals for Home Lea House, the report recommended a progress report setting out a clear and conclusive business case for a local social enterprise to be submitted and considered by Executive Board in summer 2015. If that was not possible, an alternative proposal was to be brought back to the Executive Board within that same timescale. There has been no feasible business case relating to establishing a social enterprise and no alternative proposal has been submitted to date.

While legal advice suggests there is not a formal obligation to re-consult on the proposals for each of the homes, it is felt that a further consultation period should be carried out with residents, their families and carers, staff and other key stakeholders as significant time has passed since the previous Executive Board decision on the future of the four homes considered in Phase 2 of the Residential and Day Services project.

Following the Executive Board meeting on the 21st October 2020 and the subsequent five day period in which councillors can review the decision or seek further clarification, the Council approved the recommendations for a period of consultation to take place, from 9am on Monday 4th January 2021 to 5pm on Friday 26th March 2021.

Consultation – Methodology and Process

The aim of the detailed consultation on the proposals was to consult with those directly affected and as a priority the residents, their families, and carers and with affected staff and Trade Unions.

Detailed consultation also took place within the locality, including Elected Members, and was open to the public.

The purpose was to hear people's views about the possible closure of the two care homes, what the impact of the change might be, and how we might reduce that impact as we make our plans.

Establishing clear lines of communication

Letters were sent to all those directly affected on 13th October 2020 advising them of the recommendations in the forthcoming Executive Board report, along with a fact

sheet providing background information to the proposed changes, details of the proposals, the consultation process and where to seek further help and information. A brief was also sent to all MPs and Elected Members in the affected ward areas.

Letters were then sent to all those directly affected on 3rd November 2020 advising them of the Executive Board's decision to commence consultation on the future of Home Lea House long stay residential care home and Richmond House short stay residential care home. A brief was also sent to all MPs and Elected Members in the affected ward areas.

A telephone helpline, and email address, staffed by experienced officers in the Programme Team was made available to provide residents, their family, and carers with the appropriate level of information from the beginning of the process.

On 4th January 2021, letters were sent to all those directly affected to provide further information about the consultation, including how people could participate to share their views on the proposals, and what would happen after the consultation finishes.

Throughout this period managers from Adult Social Care held regular meetings with staff members and with Trade Unions to explain plans in more detail, and to respond to any questions.

Consultation Methods

A variety of methods of communication were made available for all people to use during the consultation period. These included in writing, by email, completing an online survey, by phone, or by observing (via live stream YouTube video) or contributing (via written submission in advance of the virtual meeting) to a community committee meeting.

Two community committee meetings were held.

- Outer West Community Committee meeting (Richmond House focus) on Monday 18th January 2021 at 1 pm.
- Outer South Community Committee meeting (Home Lea House focus) on Monday 15th March 2021 at 4pm.

Links to the surveys were made available via the council website leeds.gov.uk and on council social media posts. Links were also provided in the letters and briefs that were issued as described above.

For people directly affected including residents, their family / carers, managers also offered one-to-one meetings to explain the proposal, answer any questions and gather views using the survey questions for consistency. Due to the Covid-19 pandemic the use of remote voice / video technology could be used, where appropriate and in line with safe working practices.

A relative or friend could be present at the meeting to provide support and for people who are not able to express their views for themselves, or have no relatives or friends to be present, an independent advocate was present to ensure the individual could be appropriately consulted and their views recorded.

For affected staff, drop-in sessions (where safe to do so, remote voice / video technology could be considered) took place each month during the consultation period. In addition to the consultation survey (approved by the Trade Unions) separate briefings on employee matters also took place, with Trade Union meetings to ensure employee matters were given high priority.

Detailed Survey

As described above, a detailed survey was made available and could be completed via different methods. The purpose of using a survey was to ensure consistency throughout this process.

However, submissions to the consultation could take any form and did not have to be via this method; letters, phone calls, emails and online petitions were also received and have been considered as part of the consultation process.

There were two versions of the survey, one for the public and one for those people directly affected with additional questions specific to their circumstances. These are detailed in the findings below.

The survey uses a mix of a quantitative and qualitative approach and has ratings style questions along with open comment boxes to capture concerns, impact, comments and other ideas or options.

Methodology for data collection and analysis.

Approach to the evaluation

The evaluation draws upon the following data sources:

Quantitative data – All quantitative data have been collated and analysed in spread sheets from which charts and tables have been produced and are included in this report in section 4.

Qualitative data – To capture the views, thoughts and feelings of respondents, a qualitative methodology has been chosen. This data has been gathered from the open 'comment' boxes and from consultation submissions that did not choose to use the survey format. Comments have been analysed for recurring themes and general trends and categorised under the following headings, used in section 3 of this report:

- People
- Quality
- Financial
- Locality

- Strategic
- Methodology

Further detailed comments are summarised and documented in section 4.

Equality, Diversity, Cohesion, and Integration (EDCI)

The proposals are the subject of an EDCI Assessment which has been completed as a parallel process to the consultation. The proposals are also subject to an Organisational Change EDCI Assessment which specifically focuses on the impact of organisational change on the workforce, also completed as a parallel process to the consultation.

The EDCI Assessments are submitted with this consultation report to be considered through the Council's decision-making process. It is proposed that should agreement be given to progress with the proposed options, that an implementation plan is developed in line with the Assessment and Closure Protocol which is appended to the Executive Board report. This would show how any closures would be managed over the agreed timescales and how residents, relatives, carers, and staff will be supported to safeguard human rights and equal rights, minimise distress and maximise benefits to individuals.

Section Three – overall summary

This section of the report provides summary detail of the consultation submissions.

Further and more detailed information from the feedback and responses from consultation undertaken is contained in section 4.

Summary of consultation submissions and engagement activity by stakeholder group

Overall, 141 submissions were received. This included 103 survey responses, 3 emails, 5 letters (all of which were sent as emails with letter attached), 3 phone calls, 3 petitions and 24 meetings.

Table 1: Consultation Submissions / Engagements

Care Home	Method of Consultation Submission / Engagement												
	RH	HLH	RH	HLH	RH	HLH	RH	HLH	RH	HLH	RH	HLH	
	Surveys		Emails		Letters		Phone Calls		Petitions		Meetings		
Home Lea House (HRH)													
Richmond House (RH)													
Resident	12	14											
Respite Resident	2	0											
Relative	3	9						1					
Representative	0	4											
Staff Member	3	15									2	2	
Trade Union					2				1			15	
General Public	19	22	2	1			1	1	1	1			
Voluntary, Community & Faith Group						2							
NHS Leeds													
Leeds Clinical Commissioning Group (CCG)													
Elected Member			1	1							1		
MP					1								
Full Council													
Scrutiny Board												1	
Cabinet											1		
Community Committee											1	1	
Totals by Method of Engagement	103		3		5		3		3		24		

Please note:

- Where a field is blank no method of submission / engagement was received or requested.

- Unless specified below or shown by a merged field, each submission / engagement was specific to the particular home.
- The email from the public listed against HLH related to both care homes.

Consultation with Residents, Family / Carers, Representatives

All the residents at Home Lea House during the consultation period completed a survey response, supported by family or representative where appropriate. 9 relatives and 4 representatives also submitted a survey response. 1 relative also phoned the consultation line.

12 surveys were received for residents at Richmond House during the consultation period, out of 17 people who stayed at Richmond House during that time. Richmond house provides short stay provision, with average length of stay approx. 3 and a half weeks. During the consultation period all residents during that time were informed of the consultation taking place and how they could participate. 3 relatives also submitted a survey response.

2 respite residents at Richmond House completed the survey out of the 6 people who currently use Richmond House for respite provision. All six were contacted by the Head of Service and informed of the consultation taking place and how they could participate.

Consultation with Staff

15 staff members completed the survey who work at Home Lea House. Roles include: Registered Manager, Deputy Manager, Senior Support Workers, and Support workers. There are also staff from Civic Enterprise Leeds (CEL) who work at Home Lea House: Kitchen Assistants, Cleaning Supervisors and Cleaning Operatives.

3 staff members completed the survey who work at Richmond House. Roles include: Registered Manager, Deputy Manager, Senior Support workers and Support Workers. There are also staff from CEL who work at Richmond House: Catering Team Leader, Kitchen Assistants and Cleaning Operatives.

Meetings were held with all affected staff to advise them of the recommendation to start the period of consultation on the proposed closures, and to advise them of the decision. Regular staff meetings along with Trade Union meetings have taken place throughout this process and will continue to do so.

Staff raised issues related to the following key themes:

- Do not want the home to close
- Staff feel they deliver a good high-quality service
- Staff feel that the decision will be made to close the services
- Concern about the health and wellbeing of residents
- Concern about their own future work opportunities (employment, pensions, personal finances)

- Perceived lack of alternative services in the area
- Felt that money should be saved elsewhere
- Perceived lower quality of care in the private sector care homes in comparison to the Council provided care.
- Don't want to break up their staff team.

Staff have been involved throughout the consultation process and will continue to be supported throughout the implementation of any proposals agreed by Executive Board.

Consultation with Trade Unions

As above, regular meeting with Trade Unions have taken place throughout the process to date and will continue to do so.

Trade Union GMB submitted a letter on behalf of their members and a petition, with 390 signatures.

Leeds Unison Retired Members Group submitted a letter on behalf of their members.

Consultation with General Public

19 surveys were submitted by members of the public in relation to Richmond House, 22 surveys in relation to Home Lea House.

2 members of the public called the consultation phone line, one had read an article about the proposals in the Rothwell Record and wished to add her support to the petition against the proposed closure of the home. The other was a care home provider interested in potential purchase of Richmond House.

3 emails were received from the public.

- One on behalf of Liberal Democrats in Calverley and Farsley opposing the proposals in relation to Richmond House.
- One from a retired senior mental health social worker suggesting that Richmond House could become a specialist assessment centre for people over 65 years with mental health issues.
- One from a care home provider interested in the purchase of either site.

A petition was created on change.org called "prevent the closure of Home Lea House, Rothwell". It has 1248 signatures and 139 comments. Full details are in Section 4.

Although not formally submitted to the consultation, a petition was also created on change.org called "proposed closure of Richmond House in Farsley". It has 1178 signatures and 90 comments. Whilst this petition was not formally submitted to the consultation, it has been considered as part of this consultation findings report and full details are in Section 4.

There were two community committee meetings held during the consultation, Outer West Community Committee meeting (Richmond House focus) on Monday 18th January 2021 at 1 pm, and Outer South Community Committee meeting (Home Lea House focus) on Monday 15th March 2021 at 4pm. Whilst these had to be held virtually due to national lockdown during the pandemic, they were live streamed on YouTube.

The Outer West Community Committee held on 18 January 2021 has had 180 and 43 views as per the links below. This meeting has two separate links.

https://www.youtube.com/watch?v=clThxpa_xtw
https://www.youtube.com/watch?v=Q57_c0fcY-Q

The Outer South Community Committee held on 15 March 2021 has had 79 views as per the link below.

https://www.youtube.com/watch?v=iP04h_9gWIk

Members of the public could make submissions in advance to be discussed during the meetings. There were 2 submissions made to the Community Committee Meeting on 18th January 2021: one on behalf of campaign group Leeds Hospital Alert, and one on behalf of Trade Union UNISON. No submissions were made to the Community Committee Meeting on 15th March 2021.

Consultation with Voluntary, Community and Faith Groups

In addition to the submission to the community committee meeting from Leeds Hospital Alert referenced above, two letters were received via email opposing the proposals: one on behalf of Rothwell Neighbourhood Forum and one on behalf of Carlton Village Neighbourhood Forum, both relating to Home Lea House.

Consultation with NHS Leeds and NHS Leeds CCG

No formal engagement / consultation submissions received.

Consultation with Elected Members and MPs

As described above Elected Members in the affected ward areas received briefing notes ahead of October Executive Board advising of the proposals, after Executive Board to notify them of the decision to consult and next steps, and in January to provide full details of the consultation and how people could participate.

Two emails were received from Elected Members as follows.

- Queries raised about Richmond House ahead of the October Executive Board meeting from Councillor Andrew Carter, Councillor Amanda Carter, and Councillor Caroline Anderson.
- Queries raised about Home Lea House ahead of October Executive Board meeting from Councillor Stewart Golton.

A meeting was held with Councillor Neil Dawson to discuss queries raised in relation to Richmond House, including how many local residents use Richmond House, how many people access Richmond House for respite, and how people attending have a dementia diagnosis.

Elected Members also participated in various Council Forums that discussed the proposals as outlined below:

Consultation at Council Forums including Full Council, Scrutiny Board, Cabinet and Community Committee

The proposals were discussed at the Council's Adults, Health and Active Lifestyles Scrutiny Board meeting on 20th October, at Executive Board on 23rd October at which the recommendation to start consultation was approved, and at the two Community Committee meetings described above.

In addition, a special meeting of Cabinet was held on 25th January 2021 to discuss Richmond House and potential future use of the building should a decision be made to decommission the service.

Themes arising from all consultation and engagement activity

The responses to the consultation via the methods and stakeholder groups described above were detailed and diverse.

The range of engagement methods allowed people to express their views on the proposals and as such responses were gathered, as well as specific questions about the proposals.

Key themes have emerged and key issues and messages relating to each theme are captured in the following sections below. A response from Adult Social Care is also included.

Unless specified as specific to Richmond House or Home Lea House the narrative below relates to both care homes.

Overall findings relating to the proposals

Overall, the vast majority of respondents to the consultations are strongly against the proposed closures of both care homes. A few people stated they understood or agreed with the proposals, also highlighting the importance of supporting the move of residents to alternative suitable, high quality, local provision and of ensuring staff could be redeployed into other roles and not lose their jobs.

Residential care is described by many as 'their home' and the staff are 'their family'. There is clearly a feeling of anger, sadness, and distress by the proposals to decommission the homes. Many people have said the proposals are unfair and that

the council does not have the interests of older people at heart, that the financial savings should be found elsewhere, and the homes should be retained as well respected high quality care provision in their local communities.

- The satisfaction with the current service appeared to be high. It was stated that the council provides a high-quality service and that the homes should not close.
- It was felt that the private sector could not match the quality of service provided by the council and that the council had a duty to provide services for elderly people and people with dementia.
- The staff were viewed as being highly trained, skilled, caring, and professional.
- Respite was crucial to help carers continue in their caring role and keep people living at home rather than in permanent care.

Residents and their families / carers at Home Lea House were asked additional questions about what would be important to them in any future residential care home setting. Details of these responses are in Section 4.

A place that could meet their needs, well trained and friendly staff, quality of care, not losing staff/carers, having choice over the type of accommodation lived in, and who provides and runs the home, were all considered very important by most respondents. This was closely followed by not changing routine, not having to pay more, moving with friends, a good-sized room with en-suite, close to where they live and near to family and friends.

Most of the respondents stated all the different factors listed were either very important or quite important.

People's health and wellbeing

Key issues and messages

- Residents are happy and feel the quality of care they receive is high.
- Residents mostly don't want to move, leave their home and their friends. One resident said they hoped to move to their own house if wheelchair friendly and with some help with their care.
- Residents and their family / carers raised concerns about how long it could take to settle in at another long stay residential care home,
- Residents and their family / carers raised concerns about the impact of moving residents on their mental and physical wellbeing, the distress it could cause, that it could lead to early deaths or that it could progress an individual's dementia.
- Residents and their family / carers would miss the staff and were worried about whether the quality of care would be as good somewhere else.

- Residents and their family / carers said this would create additional stress on top of the impact of the Covid-19 pandemic.
- There was a view that this decision was taking away resident's choice; that they had chosen Home Lea House as their home.
- Significant impact on unpaid carers by closing respite services.
- Some staff have applied for the Council Early Leavers Initiative as they do not want to be deployed elsewhere, travel further, or start a whole new role elsewhere.
- Worry about alternative work even when given assurances that alternative work will be sought.
- Upheaval placed upon front-line workers who have been at the forefront of a pandemic whilst worrying about contracting the virus and taking it home to their loved ones.
- Some staff feel they have been given up on or that the decision is a "done deal".

Our response

Full Equality, diversity, cohesion, and integration (EDCI) impact assessments have been carried out as part of the consultation process. One focuses on the potential impacts to people using the service and their families/carers and one will be specific to organisational change impacting on the workforce for the staff affected. These impact assessments are included along with the report to June's Executive Board.

If a decision is made to close Home Lea House or Richmond House, the transfer of residents will be carefully planned and carried out professionally, sensitively, and safely. This will be done within a timescale which will minimise the disruption and discomfort for those affected.

As per the Care Guarantee which was an established process that has been used in previous transfers of care a team of qualified social workers will carry out the assessment and transition of people, and they will follow the assessment and transfer protocol, which ensures they are fully conversant with the needs of residents, including people with dementia. General Practitioners from the local practices will provide advice and support to the assessment and transfer team and will ensure a person only moves when deemed fit by GP/consultant. The Team would be experienced, knowledgeable and sensitive in carrying out the assessment and transfer of residents in line with the resident's needs.

Family members would be involved in the transfer process including the choice of an alternative care home. Where a resident cannot make an informed choice or has no family an independent advocate would be made available. No resident would transfer if, in the opinion of their doctor or specialist, they were considered too ill to

be moved. Service users will also be supplied with the Care Guarantee clearly stating the service user's and carer's rights.

The continued wellbeing of people who had moved into new services would be monitored by reviews after three, six- and 12-months following transfer.

Should the proposals be agreed, current staff will support residents in the assessment and transfer process. Any move to a new service will be supported by the assessment and transfer team, who will continue this support before, during and after the move to ensure the resident settles into their new service and becomes familiar with their new surroundings and the staff team.

The transfer process would follow government guidelines to ensure any move is Covid safe. This would include timely testing of residents and ensuring a negative result prior to any move. In addition, the Council will ensure that the receiving home has all infection prevention control measures in place and are adhering to the relevant guidance including testing of staff and residents and the correct use of personal protective equipment.

The social work teams who currently support people to access respite at Richmond House would be informed of the decision and would undertake a review of anyone who has been affected so that planned respite can be continued in a new location suitable to meet the individual's needs.

Both Dolphin Manor in Rothwell, Knowle Manor in Morley, and Spring Gardens in Otley, all of which are Local Authority homes, have availability within their respite provision. This is in addition to the available capacity in the independent sector homes.

Staff at Home Lea House and Richmond House

The commitment and quality of care provided by staff at both homes is recognised and acknowledged. It is also fully acknowledged that hearing that your workplace is being consulted on for closure can create uncertainty and worry.

It is important that staff are made aware of any recommendations affecting the future of their workplace directly and at the earliest opportunity. Keeping staff informed and involved is expected as a good employer. It is also integral in helping to provide a greater sense of security on the part of customers.

Staff have used their experience and expertise in helping to coordinate the consultation process by assisting service users and their relatives to understand, consider and take-in the information. Managers have arranged one to one sessions with the residents and their relatives, and with staff, using the consultation survey to identify any impact the proposed future changes may have on individuals. This is much appreciated. It will help us to manage and reduce these impacts where possible.

The programme will work closely with Trade Unions to ensure employee matters are given high priority and regular meetings with trade unions have and will continue to

take place. Nothing will happen suddenly or unexpectedly, either for staff or for residents and we will continue to work with Trade Unions to support affected staff through this process.

Moving care home residents cause of early deaths

The Assessment and Transfer protocol was informed by the paper “The Impact of Relocation on care home residents: a review of evidence for Leeds City Council” produced by Public Health, which summarises as follows: “Mortality - The overall message from this body of work is of no significant difference in mortality rate between relocates and comparison groups, with a lower mortality rate reported in some cases. Morbidity - Most studies found (perhaps surprisingly) a higher level of general health or no clear change following relocation. This was true for both inter-institutional and intra-institutional movement of residents.”

Consultation Outcomes and Recommendations

In previous years, consultation on proposals to close council-run care home provision has changed the original proposal and has seen services retained or developed under a different operating model. Consultation is a vital part of the process of shaping the future of services and allows the council to understand the issues people would like to raise.

Quality

Key issues and messages

- The homes are considered to deliver high quality care and are well respected in the community.
- The high quality of care provided by staff was highlighted, and concern at the loss of a good staff team.
- Concern as to the quality of alternative provision, with experiences referenced of other places that were not as good or didn't feel as safe.

Our response

Quality of Care

The high quality of care and support provided at Home Lea House and Richmond House is recognised and acknowledged. It is the staff group that has helped the homes gain their good ratings and we hope to retain the staff and redeploy them into other council services, so their good practice is retained.

Quality of alternative long stay residential care provision

The need for residential homes is decreasing within Leeds and where this resource is required to meet people's needs, there is a well-developed independent sector

care home market. Following concerted work by the Council's Care Quality and Commissioning Teams from 2017 the number of residential care homes rated good or outstanding is now 83%.

There are 14 care homes within five miles of Home Lea House, including a Council-run home, that are CQC registered as Outstanding (1), Good (9), and Requires Improvement (4). Of the 10 homes that are rated as Good or Outstanding, six offer residential care, four offer both residential and nursing care. Eight of the homes are listed by the CQC as offering specialist Dementia provision.

If a recommendation for closing Home Lea House was made and approved, no-one will have their care taken away or their level of support reduced.

Quality of alternative short stay residential care home provision

The current service offer at Richmond House is short term care and support to people who require a period of convalescence following a hospital admission. The service also offers support to people from the community to prevent hospital admission.

Leeds has a range of services to meet the needs of people who require some type of intervention to either support them to reach their optimum with therapeutic and recovery focused support to return home or to undertake an assessment to support their longer term needs. The CCG Community Care Beds contract is now established and provides an enhanced recovery residential and nursing offer. While Richmond House offers short term support, it is not commissioned to nor does it provide any additional therapeutic input that is often required when people are discharged from hospital. As such Richmond House is continually under occupied and the current type of provision can easily be assimilated in good quality wider system provision.

There are 35 care homes within 5 miles of Richmond House, 24 have a CQC rating of Good and two have a rating of Outstanding.

Quality of the care home market

As detailed in the *Leeds Integrated Market Position Statement 2019-22* the Adults and Health Care Quality Team delivers proactive, targeted support around providing care to regulated care providers in the city. The purpose of the team is to improve quality of care for those citizens of Leeds receiving care in the city as measured against success criteria, such as the percentage of CQC Good rated care homes, improved feedback from residents and families etc. Initially working with Care Home sector the team gives care home providers in Leeds access to a responsive support and specialist advice and guidance network committed to improving quality of life for older people receiving care through regulated services in the city and thence improved CQC ratings and feedback.

In addition, the Leeds CCG Quality team is an established team within Leeds CCG that supports the maintenance and improvement of quality in care homes with

nursing beds, using targeted support (in collaboration with LCC or independently through contract processes).

Quality improvements are also further supported through Commissioning for Quality and improvement (CQUINs) built into contracts and monitored as part of that process, which helps to further incentivise defined improvements.

Quality of the building at alternative council run care home Dolphin Manor

Dolphin Manor is a single-story building with small kitchenettes and lounges leading from each corridor giving a homely feel. People can live and dine in smaller groups as opposed having meals in a large dining area with 29 other people. By comparison, Home Lea House is a two-storey building with three large communal living spaces and a large dining room away from the bedrooms. It is more difficult for people to live in small friendship groups because of the layout of the building.

There are en-suite facilities (a toilet and sink) to most bedrooms at Home Lea House (Dolphin Manor does not have en-suite facilities), however, they are small and not fully accessible (not large enough to accommodate a wheelchair). The environment at Dolphin Manor lends itself to supporting people with dementia and additionally has an exit from the living area on the garden space. It is the larger of the two homes and is more suitable for dementia provision, which is why it attracted investment from Leeds Clinical Commissioning Group (CCG) for a “proof of concept” short term dementia care pilot. Home Lea House by contrast is not suitable for dementia provision.

Home Lea House (built 1964) is a substantially older building than Dolphin Manor (built 1987) with a shorter remaining asset life which will require significant capital investment in the near future in order to bring the building and facilities up to an acceptable standard that complies with current legislation. Dolphin Manor is currently performing as intended and requires only minor improvements. The property condition report for Home Lea House and projected component life expectancy and renewal costs indicate more substantial investment would be required which may be uneconomical given the remaining asset life.

Finance

Key issues and messages

- Other homes may cost more and impact on families / carers financially.
- The cost of respite services is increasingly expensive.
- In the wider financial context, the money to be saved was a “drop in the ocean”.
- If the Council must make savings and it has to be done, then so be it.
- Economic sense but that needs to be balanced with people’s needs and closing services for vulnerable people is not a good choice by the Council.

- Concern that money had been recently invested into the building at Richmond House which would be wasted.
- The impact on staff's jobs, and concern about finding alternative employment.
- Successful recovery for older people coming out of hospital is extremely cost-effective for both the NHS and Social Care so why close.

Our Response

Cost of alternative provision

The Council is committed to ensure that no individual is disadvantaged because of the recommendations contained in this report. The Care Guarantee would be used to give assurance that where the Council is currently contributing towards a resident's care home fee there will be no financial detriment to the resident or carer/family in choosing a new care home from the Council's quality framework list. Any proposed transfer to a care home not on the Council's quality framework list will be considered on an individual basis and may incur a top-up fee. The Council will not pay any non-care supplement relating to enhancements that a care home may offer (such as a larger room).

Respite beds are means tested so there is no cost difference between LCC and independent placements. Only respite stays that are commissioned and used are funded unlike Richmond House.

Closure proposals

As outlined in the report to Leeds City Council's Executive Board in October 2020, the key driver for the proposal to close Home Lea House long stay residential care home and Richmond House short stay residential care home is due to the Council facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic which is unprecedented.

The Executive Board report in October report highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the ongoing financial impact of Covid-19. The council is legally required to set a balanced budget therefore, a number of savings proposals have been put forward, including one for the proposed closure of Home Lea House Long Stay Residential Care Home in Rothwell, and the closure of Richmond House Short Stay Residential Care Home in Farsley, making savings annually of £1.531million as a contribution to the budget gap identified.

Building Maintenance Work

Since 2018, there has been in the region of £200k capital and revenue spend on each of the care homes in question, in order to carry out essential maintenance works to ensure the building remains "wind and watertight" and suitable for the people residing there. This has included some larger works such as a new lift and

replacement windows at Richmond House and lift refurbishment, new Stannah Lift and roofing works at Home Lea House.

Both buildings are over 50 years old and fall within the Grade B category which indicates stock condition is satisfactory and performing as intended but exhibiting some deterioration. Further long-term capital investment in the region of £300k to £500k will be required to bring each building and facilities up to a good standard to comply with current legislation and support continued use. Additionally, the cost for full refurbishment is estimated to be £1.7m which far outweighs the expenditure in recent years.

Impact on staff jobs

As outlined above, the high quality of care and support provided at Home Lea House and Richmond House is recognised and acknowledged. It is the staff group that has helped the homes gain their good ratings and we hope to retain the staff and redeploy them into other council services, so their good practice is retained.

There is currently a total of 47 Adult Social Care (ASC) and 11 Civic Enterprise Leeds (CEL) staff employed affected by the proposals at time of writing. Ongoing engagement is taking place with staff and HR regarding potential opportunities for all staff, if they are affected by any of the proposals. There are staffing vacancies within the Care Delivery Service and more recent recruitments into vacant posts have been on a temporary basis minimise the likelihood of staff being put at risk. The Directorate will also work with all affected staff to identify development and training opportunities which could assist staff to move into new or alternative roles within the Authority.

Continued formal consultation will take place under Employment Legislation with Trade Unions and staff and support would be provided for staff throughout the decommissioning process including identifying any opportunities for employment within the Council. It is hoped that this work will significantly minimise the risks to staff in terms of compulsory redundancy.

The programme will work closely with Trade Unions to ensure employee matters are given high priority and regular meetings with trade unions have and will continue to take place. Nothing will happen suddenly or unexpectedly, either for staff or for residents and we will continue to work with Trade Unions to support affected staff through this process.

Cost effectiveness of recovery services

As outlined above, Leeds has a range of services to meet the needs of people who require some type of intervention to either support them to reach their optimum with therapeutic and recovery focused support to return home or to undertake an assessment to support their longer term needs. The CCG Community Care Beds contract is now established and provides a greater recovery residential and nursing offer.

Locality

Key issues and messages

- Concern about where residents and staff will go instead and the importance of finding alternative suitable, quality, local provision.
- Concern that residents at Home Lea House won't be able to go to Dolphin Manor if they wish.
- The importance of resident's families and friends being able to visit easily and that this may be more difficult if must travel somewhere else that is further away, not a walkable distance, or not on a bus route.
- There is demand for this type of service in the local community.
- There is an ongoing need for respite outside of hospital to free up beds, especially in a pandemic.
- Concern that Richmond House is not being used effectively which is why the numbers of people attending are low.
- Reason for low occupancy at Richmond House due to the residents changing from older people to higher-dependency younger people.
- Limited accommodation opportunity for people to stay in their own homes in the area.
- Alternative care home/respite/recovery provision in independent sector is unstable and homes may not survive the pandemic.
- Concern about the buildings sitting empty if the services are closed.

Our Response

As detailed in the Better Lives Strategy we know from our discussions that many older people want a wider choice of accommodation and support options with, as much as possible, support being delivered in their own homes or in care environments like extra care housing.

It is equally important that we make sure our services can still meet the city's changing requirements for care, with more people living independently for longer and a rising number of people needing specialist care, such as those who develop dementia.

Adult Social Care is therefore continuing to invest in the development of extra care accommodation and, as outlined above, to work with NHS partners to model service developments to support people with dementia and complex needs.

Capacity of alternative provision for Home Lea House residents

The 10 care homes rated as Outstanding or Good within five miles of Home Lea House total 501 beds. Occupancy at care homes can vary from week to week. As of 10th May 2021, occupancy rates at those homes ranged from 42% to 95% with an average occupancy of 78%. The council has two residential care homes situated in Rothwell, Dolphin Manor has 35 beds and on average achieved 67% occupancy during 2020-21. Current occupancy at Dolphin Manor is 60%.

The Rothwell ward area has an oversupply of residential care provision by 119 beds. The Council's Extra Care Supply & Demand Model calculates anticipated future demand for residential, nursing, and extra care provision in the city, considering proposed population changes to 2028 at a ward level, and suggests there is sufficient capacity of alternative good quality provision.

Delivering new housing-with-care provision in line with the current and future demand is one of the key drivers of the Better Lives Strategy (which is the Council's strategy for people with care and support needs) and Adults & Health continue to work alongside the Housing Growth Team to identify suitable sites for extra care housing.

In January 2019 Leeds City Council appointed a delivery group made up of Ashley House Ltd, Morgan Ashley LLP and Home Group to deliver four Extra Care schemes on Council owned sites in Leeds including Windlesford Green in Rothwell, which will deliver 64 units of Extra Care housing.

Capacity of alternative provision for Richmond House residents

Richmond House provides short stay residential care and respite provision. It has not provided rehabilitation services since 2017 when the service was de-commissioned by Leeds Clinical Commissioning Group (CCG). The CCG commission citywide Community Care Beds for rehabilitation. Adults & Health previously reviewed whether Richmond House could offer CCB provision, however the size of the home made the unit cost per head prohibitive. The CCG has a duty to seek best value in its commissioning decisions.

The CCG commission community care beds providing short term care and support, in addition to the at home services and are satisfied that sufficient community care bed provision is available across the city. The closest commissioned Community Care Bed service is Green Lane Intermediate Care Centre in Armley, with 49 beds, which is 5.5 miles away.

Over the last three years monthly occupancy rates in community care beds across the city ranged from 47% % to 100%, with average monthly occupancy over that time ranging between 72% and 82%.

Care Home/Respite Alternative provision

There are currently 6 people who access the respite service at Richmond House (21 people over the last 3 years), to arrange a short break or an extended short day depending on the need of the individual and their family / carer.

Respite beds are not commissioned as dedicated beds, instead a social worker will approach care homes at the time required, and if there is capacity, will spot commission a short break or extended short stay depending on need.

There are 21 care homes with a total of 932 beds in the Leeds Boundary within 5 miles of Richmond House. 16 are rated as good, one as outstanding and 4 are awaiting an inspection outcome. 14 are CQC dementia registered. 15 are residential, 2 are nursing and 4 offer both.

There are a further 14 homes with a total of 723 beds within 5 miles of Richmond House but outside the Leeds boundary. 8 are rated as good, one as outstanding, 3 require improvement and 2 are awaiting inspection. 11 are CQC dementia registered. 7 are residential and 7 offer both residential and nursing care.

Occupancy Rates at Richmond House

Over the last 3 years 196 individuals were admitted to Richmond House, on average 65 people per year, staying an average of 30 days. The current market for older people's residential care has capacity to absorb this demand.

11 of the individuals were from the Farsley area (with postcode LS28 5). For the wider LS28 postcode area over the same time 37 individuals attended (including the 11 above). Average occupancy since 2018/19 is 55%.

Staff were fully informed that the service was being reconfigured following the withdrawal of funding from the CCG and have been supported, developed, and offered training in relation to the needs of people with mental health needs and other dependencies. The staffing levels at the service are based on customer need and where new admissions have been facilitated staffing levels have been reviewed.

Stability of the care home market

The 14 care homes within 5 miles of Home Lea House are owned by 11 different providers. The 35 care homes within 5 miles of Richmond House are owned by 30 different providers. These range from individual owners, small to medium enterprises through to large national providers. Adults and Health work closely with Leeds Care Association and care home providers to understand any pressures affecting the market and have continued to do so throughout the pandemic to understand impact of Covid on cost pressures for care homes.

Option to move to Dolphin Manor

As the closest alternative in-house provision, Dolphin Manor has 35 beds and on average achieved 67% occupancy during 2020-21. Home Lea House has 29 beds and at time of writing has 18 residents.

The service has received two enquires to date from relatives of residents at Home Lea House about availability at Dolphin Manor. Those relatives are happy to wait until the Executive Board decision in June, and should the decision to close go ahead, they understand the need for a social work re-assessment at that time.

The Leeds CCG commissioned 10 beds at Dolphin Manor to trial discharge to assess short term care for people with dementia as a proof of concept. This will have concluded by the time any Home Lea House residents may be looking to transition there.

In addition, we know from previous closures that some residents choose to move closer to their family, also that upon assessment some residents' needs have changed and they require a move to nursing care provision.

Should the recommendations to Executive Board in June post consultation be for the closure of Home Lea House, residents and their families / carers would be fully supported by the assessment and transition social work team, in accordance with the Care Guarantee, to ensure they choose an alternative home that meets their individual needs.

Management of Buildings

Should the decision be taken to close the current provision at Richmond House and Home Lea House, the sites would be transferred into void management with responsibility for safety, security and maintenance being managed by LCC Facilities Management until brought forward for any re-development. Asset Management under the delegations in place to the Director of City Development are already in the process of considering alternative uses for the sites considering Council's priority programmes and requirements in particular from Adults and Health and the Council Housing Growth Programme; and there is a commitment in principle for the sites to be used for the development of supported housing; general needs housing at the Home Lea House site in Rothwell, and supported housing for older people at the Richmond House site in Farsley. This may involve direct delivery by the Council, delivery in partnership with external organisations or disposal to third parties. Early demolition of the buildings at to limit the costs of maintaining security will also be explored. Asset Management will lead discussions about the future use of the sites with elected members and key partners.

Strategic

Key issues and messages

- The Council had its priorities wrong; if money could be found for things such as road schemes, cycle superhighways, City of Culture 2023, it should be found for the care of vulnerable people.

- LCC needs a long-term strategy to survive the continuing cuts to funding being made by the government, not knee-jerk reactions that will only save money in the short term.
- Rather than shrinking the public sector we would like to see the Council doing exactly the opposite, seeking to take private providers of social care and support into public ownership.
- The future is uncertain so people may need such provision in the future either for themselves or for their family members.
- Demand for respite is high and likely to increase.
- The council should not be relying on the for-profit private sector for the care of the elderly.
- Concern about the future of other council-run care home provision and if those will be closed in the future too.
- Closure of council-run provision creates additional pressure on the NHS, with people stuck in care homes awaiting re-assessment before they can go home.
- The closure of Richmond House is premature before a full study is done into the acknowledged gap in the need for places for people with complex needs, including dementia and nursing care.
- Richmond House is under-used over the last 12 months due to Covid.
- Belief that numbers within Richmond House have been kept low to justify any potential closure.
- Concern that NHS appear to be “calling the shots”.

Our Response

Leeds City Council's Financial Position

As outlined in the report to Leeds City Council's Executive Board in October 2020, the key driver for the proposals to close Home Lea House long stay residential care home and Richmond House short stay residential care home are due to the Council facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic which is unprecedented.

The Executive Board report in October report highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the ongoing financial impact of Covid-19. The council is legally required to set a balanced budget therefore, several savings proposals have been put forward including a number relating to services across the Adults and Health Directorate. The proposed closures of the two care

homes in question would make savings annually of £1.531million as a contribution to the budget gap identified.

The Council has a duty under the Care Act 2014 to meet needs for care and support, subject to meeting the statutory eligibility criteria. However, needs can be met in a variety of different ways. As set out elsewhere in this report, there has been a move in recent years away from traditional residential care models toward more housing-with-care provision, for example Extra Care Housing. The Council also has a duty under the Care Act to promote diversity and quality in the provision of services. It is submitted that there is sufficient diversity and quality provision within the local Leeds market to continue to meet the needs of those currently accessing services from Home Lea House and Richmond House.

The proposals will not reduce or remove the care of our most vulnerable people now or in the future; the proposals are principally based on under-occupancy of Council provision against demand for our residential beds and therefore providing the same service at a reduced overall cost which in turn helps the Council deliver more of its citizens' needs.

Future supply, demand, and market stability

As detailed in the *Better Lives* strategy, the Council's strategy for people with care and support needs, we know from our discussions that many older people want a wider choice of accommodation and support options with, as much as possible, support being delivered in their own homes or in care environments like extra care housing.

Wherever possible, people should be supported to return to their home as the first option. Adults & Health provide the SkiLs Reablement Service which offers short term intensive care and support for people in their home, supporting hospital discharge and hospital avoidance. Leeds Community Healthcare Neighbourhood Teams provide at home therapy services, such as Occupational Therapy, Physiotherapy and District Nursing. In addition, Adults and Health are not experiencing long wait times for independent home care packages.

It is equally important that we make sure our services can still meet the city's changing requirements for care, with more people living independently for longer and a rising number of people needing specialist care, such as those who develop dementia.

Adults and Health is therefore continuing to invest in the development of extra care accommodation and, as outlined above, to work with NHS partners to model service developments to support people with dementia and complex needs.

Residential Long Stay Care Services

Based on supply and demand analysis, Rothwell has an oversupply of 119 residential care home beds. As detailed above, there is sufficient alternative good quality local supply if Home Lea House were to close.

Residential Short Stay Care Services

Richmond House did operate very successfully as an intermediate care resource (known at the time as Community Intermediate Care, CIC). However, when the Clinical Commissioning Group (CCG) reviewed the Community Intermediate Care (CIC) service, they identified a different set of priorities for the Community Care Bed service. Leeds Adults & Health were successful in bidding to the new specification and secured, in partnership with Leeds Community Healthcare, two new nursing services and one residential service, in buildings owned by LCC across Leeds. The CCG will be reviewing their commissioned service in the next 18 months but at present are content that they have sufficient resource available to them.

In addition, the NHS have provided temporary funding to the CCG to support hospital discharge during the pandemic. The CCG have used this funding to commission a number of community beds (nursing and residential) across the city as part of this Discharge to Assess process, although this is reviewed on a regular basis and it is intended to reduce reliance on these beds as the impact of the pandemic decreases. People are supported to stay there while their needs are assessed, and their care arranged at home or in another residential care or nursing home. Their needs are assessed very quickly and a sizeable proportion of the people who are discharged in this way, return home within a week to ten days.

Respite / Short Breaks Services

There are currently 6 people who access the respite service at Richmond House, to arrange a short break or an extended short stay depending on the need of the individual and their family / carer. All local authority in-house homes offer respite bed places as well as Richmond House.

Respite beds are not commissioned as dedicated beds, instead a social worker will approach care homes at the time required, and if there is capacity, will spot commission a short break or extended short stay depending on need. As outlined above, there is sufficient alternative good quality care home provision.

Other options are also available such as community based short breaks, or a personal budget to arrange a short break that suits the carer and the cared-for person. This could be through various organisations such as private home care agencies, charities, or community interest companies. The council also provides a Shared Lives Service which provides a more homely approach to the provision of respite services.

Nursing Care / Specialist Provision for people living with dementia

There is greater demand for and an undersupply of extra care accommodation and specialist provision for people with the most complex needs, including people living with dementia in Leeds.

The pilot service at South Leeds Recovery Hub offers nursing provision for people with the most complex needs including people with dementia. Adults & Health previously reviewed different models of care and support that could be offered at Richmond House, however the size of the home made the unit cost per head prohibitive for investment by the CCG, which would be a requirement for the provision of this type of service.

The Integrated Commissioning Executive has taken a number of reports which have attempted to model the needs of people with complex dementia and as a result the following service developments have been put in place, as detailed in the *Leeds Integrated Market Position Statement 2019-22*; NHS development of intensive and responsive specialist support to care homes, an individualised approach to funding of care, including transitional support to leave hospital as well as long-term funding; and the development of training in 'leadership in dementia care.'

Market stability

As detailed above, Adult Social Care works closely with Leeds Care Association and care home providers to understand any pressures affecting the market and have continued to do so throughout the pandemic to understand impact of Covid on cost pressures for care homes.

Future of other Council-run care home provision

The professional recommendation of the Council's Director of Adults and Health is that should Home Lea House and Richmond House care homes be approved for closure, that no further council run care homes should be put forward for decommissioning. This would enable the council to retain flexibility in the face of any potential future challenges and retain expertise.

This would mean Dolphin Manor, along with Knowle Manor (Morley South) and Spring Gardens (Otley and Yeadon) would be retained in the city as council-run care home provision.

Occupancy rates at Richmond House.

Richmond House supports a citywide short-term care and support offer along with but distinct from Community Care Beds as there is no associated therapeutic input to Richmond House. People are referred to a suitable short-term provision based on their individual needs and preferences. As detailed above occupancy rates since 2018/19 have averaged 55%.

Health and Social Care

As noted above, the size of Richmond House made the cost per head prohibitive for investment by the CCG for CCB provision. It does have a responsibility to ensure value for money in what it commissions.

The Department for Health and Social Care White Paper: *Integration and Innovation: Working together to improve health and social care for all, Feb 2021*, provides a basis for further consultation and discussion with interested or affected groups; and Leeds Adults and Health, the different political parties in Leeds, and other organisations, will contribute as appropriate to shape the Health and Care Bill that will be presented to Parliament.

Methodology

Key issues and messages

- Staff need to know a decision as soon as possible in the process so they can plan ahead.
- Poor timing during the pandemic, at a time when can't visit residents to find out how they are and to ask them what they want.
- Poor timing as respite services have been closed during the pandemic and people need this support.
- No social worker has provided information about alternative respite provision.

Our Response

The key driver for the proposal to close Home Lea House long stay residential care home and Richmond House short stay residential care home is due to the Council facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic which is unprecedented.

As detailed above, it is important that staff are made aware of any recommendations affecting the future of their workplace directly and at the earliest opportunity. Keeping staff informed and involved is expected as a good employer. It is also integral in helping to provide a greater sense of security on the part of customers.

The programme will work closely with Trade Unions to ensure employee matters are given high priority and regular meetings with trade unions have and will continue to take place. Nothing will happen suddenly or unexpectedly, either for staff or for residents and we will continue to work with Trade Unions to support affected staff through this process.

If a decision is made to close Home Lea House or Richmond House the transfer of residents will be carefully planned and carried out professionally, sensitively, and

safely. This will be done within a timescale which will minimise the disruption and discomfort for those affected.

Communicating with residents

We are keen to ensure that we hear the voices of people who use the services being consulted on, and the consultation provided different options for participating, including; online, over the phone, via email, by posting a paper copy to us, or through a face to face discussion. The consultation survey was also open to the public via leeds.gov.uk.

People only stay at Richmond House for only a short period of time and so current residents won't be affected by the proposed closure, however throughout the consultation period all residents were informed about the consultation taking place and encouraged to participate if they wished to do so.

The services also proactively engage customers in the use of technology (such as iPad, tablets, mobile phones, Alexa's) where appropriate, to keep in touch with loved ones during their stay. In addition, window visits, garden visits and use of in-door pods have enabled choices to suit customers in being able to communicate with one another.

Respite Services

Should the decision be made to close the homes in question a review would be carried out by social work teams who currently support people to access respite, of anyone who has been affected, so that planned respite can be continued in a new location suitable to meet the individual's needs.

Suggested Mitigations

- Most respondents don't want the homes to be closed and would want the council to find the financial savings elsewhere.
- Negotiate with the NHS to have therapeutic input at Richmond House again.
- Instead of people being stuck in hospital wards or paying private care homes while people are waiting there for re-assessment, use that money on having professionals at Richmond House.
- Turn Richmond House into a residential dementia care unit to address the lack of specialist provision for people with dementia.
- Turn Richmond House into a specialist assessment centre for people over 65 years with mental health issues as there is a need for this type of resource in the area.
- Turn Richmond House into respite provision.

- Sell the homes to private providers.
- Richmond House needs more promotion and then it would be used more.
- Reduce the number of high paid senior managers in services who cost a lot but don't provide a direct service.
- Elected Members used to be more involved, the research to put suggestions forward are made by unaccountable officers.
- Use social care reserves to keep Home Lea House open for another year and work with the community to keep it open.

Our Response

To contribute to the budget gap identified Adults and Health Directorate have reviewed all its services and financial spend and has put forward a number of savings proposals. The proposed closures of the two care homes in question would make savings annually of £1.531million as a contribution to the budget gap identified.

As outlined above the council has many priorities to meet the needs of its citizens, but unfortunately has insufficient funding to meet all of these. The proposals will not reduce or remove the care of our most vulnerable people now or in the future; this proposal is principally based upon under-occupancy of our residential beds and therefore providing the same service at a reduced overall cost which in turn helps the Council deliver more of its citizens' needs.

Therapeutic input at Richmond House

As described above, Richmond House did operate very successfully as an intermediate care resource (known at the time as Community Intermediate Care, CIC). However, when the Clinical Commissioning Group (CCG) reviewed the Community Intermediate Care (CIC) service, they identified a different set of priorities for the Community Care Bed service. Leeds Adults & Health were successful in bidding to the new specification and secured, in partnership with Leeds Community Healthcare, two new nursing services and one residential service, in buildings owned by LCC across Leeds. Richmond House could not be used for this purpose as it had too few beds which made the unit cost prohibitive. The CCG has a duty to seek best value and is satisfied that they have sufficient resource available to them.

The service provided in the wards at LTHT is nursing care, whereas Richmond House provides residential care. Also, some of the people are only resident in the wards at LTHT for a few days whilst home care services are arranged. It wouldn't be appropriate to discharge from the hospital, admit to Richmond House, and then go home, all within a few days. There are significantly more beds in SJUH and Wharfedale than we could provide in Richmond House.

Continuing Health Care (CHC) nurses were not able to undertake assessments from March to August last year, therefore, a number of individuals who were thought to need Continuing Health Care funding in a nursing care setting were awaiting reassessment. However, once the service was able to recommence, social workers worked with the CHC team to review/reassess everyone who was in that position., These assessments were concluded by 31st December 2020.

Residential dementia care provision at Richmond House

There is already a range of good quality residential care provision in the city, 25 of the 35 homes within 5 miles of Richmond House are CQC dementia registered. However, there is an undersupply of nursing provision for people with the most complex needs.

Given the age of the building it may be uneconomical to remodel. Consultant Norfolk Property Services has stressed that refurbishment alone will not meet current statutory requirements and nationally described space standards due to some corridor widths being too narrow and a number of bedroom sizes being too small. To meet this standard major structural and internal alteration will need to be carried out.

High level refurbishment budget costings indicate that a capital spend of IRO £1.7m would be required to bring the property up to current required standard including nationally described space standards and to meet the minimum requirements set out in the Leeds Model for housing with care.

Given the Gross Internal Area of Richmond House this would equate to approximately £1150 per sqm to refurbish against a cost of IRO £2000 per sqm for new build so on this basis the most cost effective approach would be new purpose built accommodation that will meet modern building standards and is more conducive to health and wellbeing of residents.

Leeds City Council is part of the local Transforming Care Partnership with Leeds Clinical Commissioning Group which is NHS England's specialist commissioner and we are working jointly to deliver the Transforming Care Programme which will allow service users with learning disabilities/autism/mental health needs to transition from long stay inpatient settings to residential community based accommodation. As part of this work we continue to explore development opportunities utilising Council owned land assets to bring forward schemes which can meet the long-term accommodation needs of individuals within the Transforming Care cohort.

We are currently developing a residential facility for people with learning disabilities and autism and mapping the accommodation needs for adults with care and support needs as part of our wider strategic review. Adults & Health are also working closely with colleagues in LCC Asset Management to determine if operational needs can be identified to justify the retention of any sites that may become available through estate rationalisation.

Capacity and constraints studies have been undertaken by LCC design officers for several sites which explore potential options for future use. These confirm that both sites could support some form of new build re-provisioning for people with care and

support needs whether this is bungalows or apartments. The site at Richmond House could potentially support up to 30 x 1-bedroom apartments or 13 standard 2-bedroom bungalows, while the site at Home Lea House could potentially support up to 26 x 1-bedroom apartments or 10 'courtyard' style bungalows. The sites are too small to support Extra Care housing as we work on a minimum capacity of 60 units for a viable extra care development.

Should the decision be taken to close to current provision at Richmond House and Home Lea House, detailed ground investigations and a PSA (preliminary site appraisal) would be required before proceeding with a full feasibility study and any ensuing development. The site would be managed by the LCC Corporate Property Management team until it is brought forward for any re-development. As detailed above, discussions around the future use of the building would take place with local elected members and key partners, and there is a commitment in principle that both sites will be used for supported housing in the future.

Use Richmond House as a specialist assessment centre for people over 65 years with mental health issues

Moving someone from home to a residential setting for such an assessment would increase the likelihood of confusion. People are assessed either at home, in outpatient or other settings, or while in hospital if they are really unwell. Any such 'specialist assessment centre' would be NHS funded and provided as it would be clinically led. Also as outlined above, it would be unlikely that it would be economical to re-model the building for such a type of alternative provision.

Use Richmond House just for respite provision.

Mixed models of long stay and respite / short stay provision offer greater economic viability; there is no independent sector provision that offers only respite bed accommodation. People like to choose where they go on respite and still want to maintain links to family and local services, so Adult Social Care couldn't mandate that people used Richmond House for respite, and as a result it would likely be under occupied.

Purchase by private providers.

Purchase by another provider could be an option should the decision be taken to close the sites and should the sites ultimately be deemed surplus to requirements, following the agreed Council process for open market disposals. However, as outlined above there is a commitment in principle that should the decision to close be made, that both sites are used for supported housing.

Increase occupancy at Richmond House

Health and social care professionals are aware of the services provided at Richmond House and will refer people there from across the city based on the individual needs of the person requiring short terms care and support.

Leeds has a range of services to meet the needs of people who require some type of intervention to either support them to reach their optimum with therapeutic and recovery focused support to return home or to undertake an assessment to support their longer term needs. The CCG Community Care Beds contract is now established and provides a greater recovery residential and nursing offer. As such Richmond House is continually under occupied and the current type of provision can easily be assimilated in wider system provision.

Use of social care reserves

As previously been stated, the Council is looking to have less of a reliance on residential provision, preferring a move to other services including Extra Care Housing which we believe has better outcomes for our citizens. As an authority we have, over recent years, seen a reduction in the numbers of people we place in residential care and Commissioners have, over that same period, recorded an excess of provision over demand, and this is noted whilst in a period of an ageing population. In this context it is difficult to see how a business case could be made by a community consortium to make this a going concern.

Reasonably recent experience of this type of proposal failed. It is also considered highly unlikely that this could be actioned within a twelve-month period, which could therefore necessitate the further use of scarce resources. As such, for the reasons above, this option is not one that would be recommended.

Section Four – detailed consultation findings relating to the proposal for each care home

The following information represents feedback and responses from consultation undertaken with those people currently living in the care homes and their relatives and carers as well as staff working in the homes and the local community. The questions highlighted are taken directly from the survey questionnaire.

As an 'open comments' section was used in the questionnaire, some respondents made multiple comments in these sections which is why the number of comments is generally greater than the number of people responding to the questionnaire.

All questions were optional, so some people chose not to complete every question.

There were also some people who did not complete the questionnaire, with a variety of reasons for non-completion (e.g. declined or relative completed questionnaire on their behalf).

Measures were taken to ensure that people with dementia who may not be able to complete a questionnaire by themselves were supported to do so.

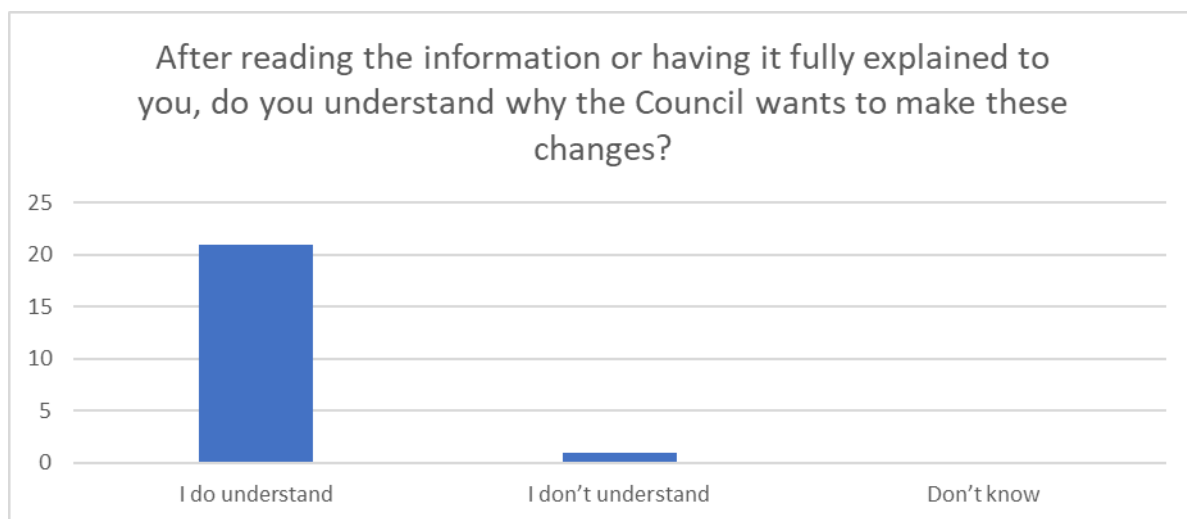
Where names, ages or relationships were used in the comments these have been redacted to comply with data protection requirements.

4a) Consultation Survey Questionnaire Detailed Responses

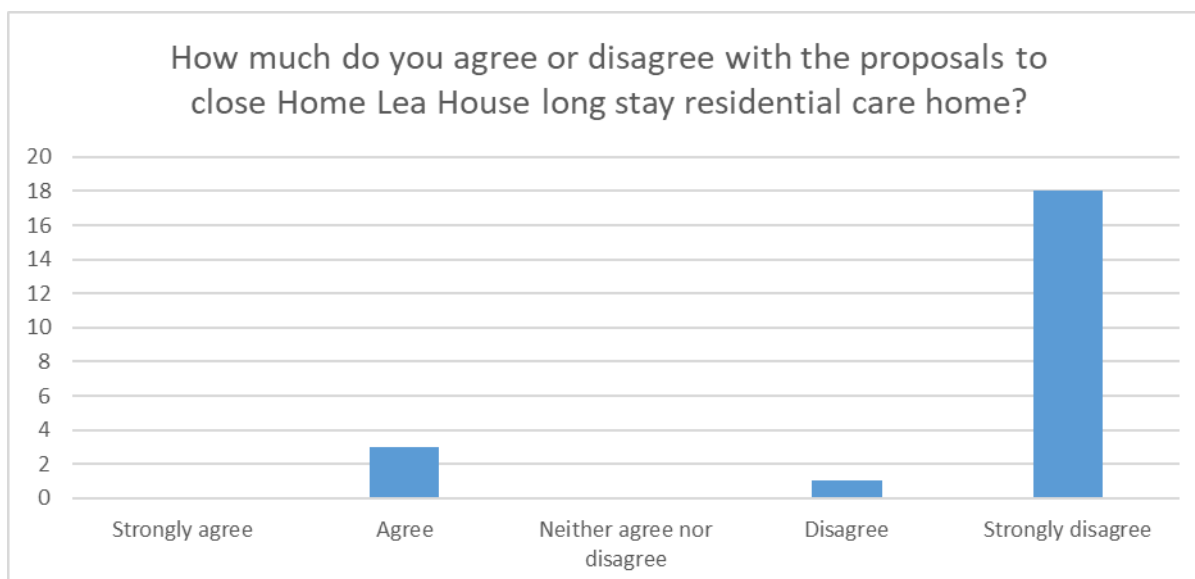
Please note any personally identifiable information such as names, relationships and ages have been redacted.

Home Lea House General Public Consultation, January to March 2021 - Survey Results (22 Responses)

After reading the information or having it fully explained to you, do you understand why the Council wants to make these changes?		
I do understand	I don't understand	Don't know
21	1	0



How much do you agree or disagree with the proposals to close Home Lea House long stay residential care home? Please tick one box.				
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
0	3	0	1	18



Please tell us the reason for your answer

My [redacted] resides in the care home. As a family, we placed her in several care homes, in which she didn't feel comfortable, until settling on Home Lea. Closing the home would result in great distress and anxiety for her, which has been magnified after a year not understanding why her family have hardly been able to see her, and would potentially ruin the peace we expected for her in what are likely her final years with us. While I understand long stay is not for everyone and others will want to stay at home for as long as possible, this is simply not possible for her. Instead she has somewhere she feels at home and where she is superbly cared for.

Rothwell is a large community that requires local services for its people. It is not well served by public transport to enable friends and relatives to visit care homes in other areas especially elderly people. Where people have lived together at home and one is now in care easy access is required. Dolphin Manor is described as being Council run but it's not too long since you wanted to close that. It was saved through local action and now you are suggesting that is all that will be left! Please do not close Home Lea. It is a lovely friendly caring home that we need.

The residents living in Home Lea House have made a carefully considered decision to move in here after looking around to find the most suitable home for them. They have then moved in and settled into their new home and become comfortable in their new home. They are now facing the possibility of having the trauma and upheaval of having to be moved. A number of residents within the home, including [redacted] have dementia, along with other health conditions. The thought of [redacted] having to move [redacted] is just unthinkable. The fact that the proposed closure is solely based on saving money is absolutely disgusting and totally wrong. These people have lived in the local area all of their lives and should, therefore, be able to stay living within the area, surrounded by their families and friends, and not have the worry of having to find a new home. This could then potentially mean they will have to move out of the area to somewhere they have no family or friends around to visit them.

The Council should not put the onus on the private sector to look after our elderly.

I am Rothwell born and bred. Home Lea is an amazing home, the residents are settled and really happy there. It would be a real shame to see it close. Rothwell and surrounding

areas are forever growing in size, houses are been thrown up everywhere you look. People are living longer and leaving the area with only one care home will not be enough. Local people will not be able to stay in the area they love, it's just wrong. I am a tax payer and I'm sure the Council can cut back elsewhere to save this wonderful home.

It is a much needed well run residential home which gives an opportunity for local residential care.

Why are the Council still wasting our (tax payers) money on stupid Leeds 2023? No one wants this or any other of Judith Blake's money wasting schemes in Leeds. Why not invest in making these 2 homes more modern, viable and attract some private paying customers to help up keep. These facilities once gone will never be replaced and means Council social spending increases on private homes lining the pockets of greedy owners of elderly care facilities. Keep the homes and not a bean more to be spent on Leeds 2023.

Because better care can be provided to people in a non-profit setting. I strongly disagree with the state paying profit making organisations for care. There is still a shortage of care beds - there a huge amount of 'super stranded' patients awaiting care packages in NHS beds

The care residents receive at Home Lea is excellent. As a Council run home, residents family feel secure knowing their loved ones are being cared for at a high level. A lot of private care homes seem to think it is more important to have pianos and chandeliers rather than good quality care.

These care homes are essential for the elderly in our community. [REDACTED] has been here for 12 months. She is [REDACTED] This was a stressful time after living independently [REDACTED] The home made her feel at ease and she has adjusted well. Moving these residents further a field where family may not be able to visit will isolate families and cause unnecessary stress. [REDACTED] pays for her own care and sold her house to fund this.

Care homes are needed for old people to be cared for in the community. It's on a bus route for family members to be able to travel to see them.

I completely disagree with this decision as there are many residents in Home Lea including [REDACTED] that have dementia. [REDACTED] always been very unsettled, that was until she moved into Home Lea. [REDACTED] now sees Home Lea as her home and I believe it would be too upsetting and unsettling to move any of the residents that live there. The staff are very professional and always make visitors welcome. It would be such a shame if the home were to close as it makes so many people happy, both residents and the people that visit, as we can see how happy and settled our family members are.

[REDACTED] are living in Home Lea House and they are both happy and settled. [REDACTED] have dementia and they don't need the worry of getting kicked out of their homes on top of having that! All their family live in the Rothwell area and there's only one other care home in Rothwell and that has no room for any new residents, so if they got kicked out of Home Lea they would have to move out of the area and that would be very upsetting for them and also detrimental to their health and also their families.

Home Lea House is a much loved local facility. Rothwell is very much a family community and older people here value their local links. If I were ever to need care, I would be much happier in my own area where family and older friends can visit.

This provides a lovely home for local residents and surrounding areas. I understand that Dolphin is also in the area but in these times with care needs for the elderly in great

demand I feel it will be a great loss to the area, and in the grand scheme of things what the Council will save by closing Home Lea it's a drop in the ocean.

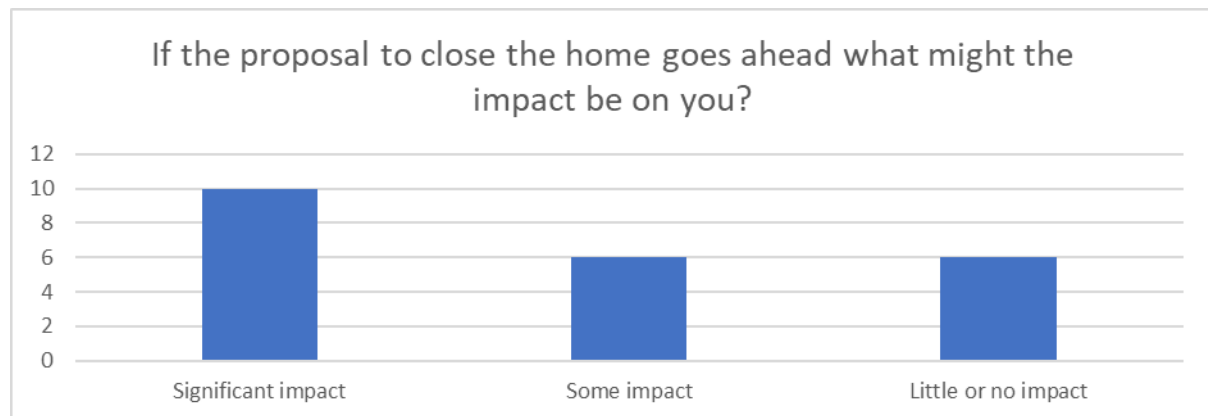
██████████ is a resident at this care home. For ██████████ a very proud lady, it was a huge decision to leave her home, her independence to move into a care home. She was frightened that she would be neglected and not looked after in the way she deserved. It was important to her to pick the right care that she was going to spend her remaining years at. The staff at Home Lea House have not only been kind, friendly and attentive to her every needs, they have also been a great source of comfort, when we as family have been unable to visit during the pandemic. Home Lea have become a surrogate family to the residents.

██████████ moved to Home Lea House in February 2020, just before lockdown. We had suffered a horrible year, where my mum's mobility deteriorated to a point where as a family we couldn't cope with her living by herself. We fell in love with Home Lea straight away and the staff have supported ██████████ and us throughout a traumatic year with the extra trauma of Covid. It is her home where she feels secure, well cared for and loved. Where her 'family' of friends and staff live and work to help our elderly relatives live happily and thrive. I don't think the proposal to close Home Lea takes this into consideration. Who wants to move house in your 80's? For people like ██████████ the Council home was, and is the best option to keep her safe and stable and for families to relax in the knowledge that the standard of care is high.

I think the private sector have got their act together and, as the report says, this is currently a declining market. The land is also prime development land and the income could boost the Council coffers. Dolphin Manor is the more modern of the two and should be retained.

If the proposal to close the home goes ahead what might the impact be on you?

Significant impact	Some impact	Little or no impact
10	6	6



Please tell us the reason for your answer

It would cause stress and anxiety for all the family as we seek to find somewhere that will suit [REDACTED], but most of all, it will worsen her final years.
As above.
There would be a significant impact on me and my family. I have [REDACTED] currently living in Home Lea House and they are both very settled and happy. I visit [REDACTED] every couple of days (before Covid 19), with my [REDACTED] children. We all enjoy walking to Home Lea House and seeing just how happy they are living in there, and being able to spend time with them. If the proposed closure goes ahead, this would impact us significantly as we would not be able to visit them as often which would consequently affect [REDACTED] mental health. As [REDACTED] suffer with dementia, the visits they receive from family living in the local area is critical for their overall wellbeing. We have lots of family living in the local area that frequently visit Home Lea House, however if they are forced to move, these family members would not be able to get to other areas to visit them.
I don't have anyone in there but may need it in the future.
I don't have family at the home, however, I know its fabulous reputation within the area. When I grow old who will take care of me? Like the residents in the home who have paid Council Tax/National Insurance all their lives, why should the older people be affected. Why can't the Council cut back in other areas? This money saving exercise will be a massive loss to the community of Rothwell should the home close. I am strongly against this.
I have a mother who is in her nineties who receives care at home by a care firm but I think she would be better looked after in a local residential home as between care visits it is a very lonely existence. There is a great chance this would not be available for her locally without Home Lea House.
I might need these facilities one day.
I work in adult social care and there is already a shortage of good care homes.
We have no idea what will happen and how this change could affect [REDACTED] health.
If [REDACTED] needed to go into a home I would choose this one.
At the moment me and my [REDACTED] children are able to visit [REDACTED] as we live in Rothwell so can walk there. I have [REDACTED] who also visit with their children and my parents. None of us want to see any of the residents upset. Home Lea is their home and they shouldn't be in a way evicted from it.
If they closed Home Lea House it would have a big impact on me because I would be constantly worrying about [REDACTED] mental health and well-being. It would also impact me because before Covid hit I was able to walk up to the care home to visit [REDACTED] at least once a week. If they were moved out of area I'd hardly be able to see them due to my wife working and needing the car. I wouldn't be able to walk to see them if they weren't living in the area.
Sadly I have terminal cancer so the thought I have had about eventually going into Home Lea is no longer relevant, but I have many older friends who could be impacted if this place was lost.
I am [REDACTED] within Leeds City Council so I feel it could impact on my job. I also really feel sad for the residents as I feel this will unsettle them.
The impact on us as a family is significant as we now have the stress and the anxiety of

trying to find another care home that will be able to care for [REDACTED] the way Home Lea has.

I am worried about the impact on [REDACTED] physical, mental and emotional well-being if she has to move home, especially during the times of Covid and the worry and uncertainty this brings. She is easily upset and anxious about everything and will not cope with any change.

I'm early 60s so hopefully a care home is a few years off but I would not be looking at Home Lea as my first choice for myself or my family.

What could the Council do to reduce the potential impact?

If the Council is to move residence, it should do so in a phased approach, where residents are slowly introduced to their new home to see if it suits them and to lessen the distress on them.

It should also consider a longer time line than the one proposed so that families can make arrangements and so that residents can be prepared.

As Rothwell is quite isolated I don't think there is anything that could lessen the impact.

Do not close the care home.

Keep it open.

Don't close the home, look at other areas that can cope with a cut in funding.

Nothing, once it's gone it will never be replaced and will be a great loss.

Keep them open and invest in them.

Keep the beds open.

Not close the home - investment in the building.

Not close the home.

Keep it open.

Keep Home Lea open.

Build another care home in Rothwell!

Sorry, no ideas.

Don't close the home.

Not close. I believe choosing to close ANY care home under the current circumstances is insensitive.

Obviously the best outcome would be to keep Home Lea open. To reduce impact we would be hopeful for [REDACTED] to move to another Council run home (e.g. Dolphin Manor) as we appreciate the standards of care she has received and [REDACTED] seems to feel happier about a possible move to Dolphin Manor. It would be good if some of her friends could move together, and even staff if this was possible.

N/A.

Please state if there is another viable approach which you believe should be considered?

I'm sure the Council has done as much as it can (and I sympathise with them over the financial position the government has put them in) but other services should be cut and infrastructure projects should be scaled back. Importantly, I believe this should be done in Leeds City Centre where it often seems the wealth of the city is pumped back into.

Keep it open, allow continued choice, look at budget cuts in other areas.
Look to save money in other areas, instead of the elderly and vulnerable. They do not deserve this at this time in their life.
No.
Keep it open and save money elsewhere.
Yes, try changing the law to stop greedy selfish people playing the social care system. Sick of hearing about wealthy families who get parents to sign over property to children so they don't have to pay a penny of elderly care bills - people who know how to play the system. No wonder council social care costs are out of control when not everyone is paying their way. Council run homes must be there for those who genuinely can't afford to pay for care, to create/keep jobs running homes and to ensure capacity for care is always available. Too many horror stories about privately run home care so that's not always the right approach either.
Council care homes provide a better level of care.
N/A.
Stop wasting money like on park and rides that don't get used.
Keep Home Lea open.
It is hard to believe that a community of 22,000 cannot fully use 2 homes. I think there are many in their own homes who put up with isolation and risk unnecessarily because funding demands the cheapest minimum provision.
I think that care homes for the elderly should be last on the list for closures because of the negative impact this has on the residents. It is after all their HOME. I think that although important, things like clubs and day centres should be looked at first. I feel that leisure and the arts should be looked at, e.g proposals to close Lotherton Hall for part of the week. I strongly believe that the Council run home is still needed in our community to provide for elderly people like my mum. Private care homes do not have the trust with older people and the high fees can be a problem.
None.

Finally, do you have any other comments?
Yes, Rothwell in my view has been targeted. We have lost our Council offices, nursery and day centre and the other support services for elderly people and families with children at home have been massively cut, leading to much more need for emergency response and loneliness. Keep Home Lea open, add some day care facilities or short term respite facilities, work with live at home scheme to identify who is vulnerable and needs help.
It's wrong how the Council are off loading everything. What exactly are they running?
Please re-think, saving such a small amount of money in the grand scheme of things isn't worth closing an amazing home. The area can't cope with only one home.
Saving money by closing a good quality well run well staffed residential home for old frail people cannot be the way forwards. Look to saving money in areas of less impact.
As above.
The biggest issue with residential care homes that are privately run is that they can charge what they like. It's time there was a charging cap on residential care.
Please do not close this brilliant care home.
It would be a huge mistake to close Home Lea House. So many people call it home and a

lot of staff have a stable job. Please reconsider the decision and stop the uncertainty to the poor residents and staff.

If Home Lea House were made to close, it would have a massive negative impact on a lot of people! All the people living in Home Lea and all the residents' family and friends. Most of the residents that live there have grown up and lived in Rothwell all their lives and are very old and have health issues, the last thing they need in their condition is to be kicked out of their homes. They have made strong relationships with each other in there and become good friends so they would be devastated if they got dragged apart from each other and stuck in another care home god knows where!

Just that it is a home with a great reputation.

I just feel sad that this may close and have a huge impact on the elderly residents.

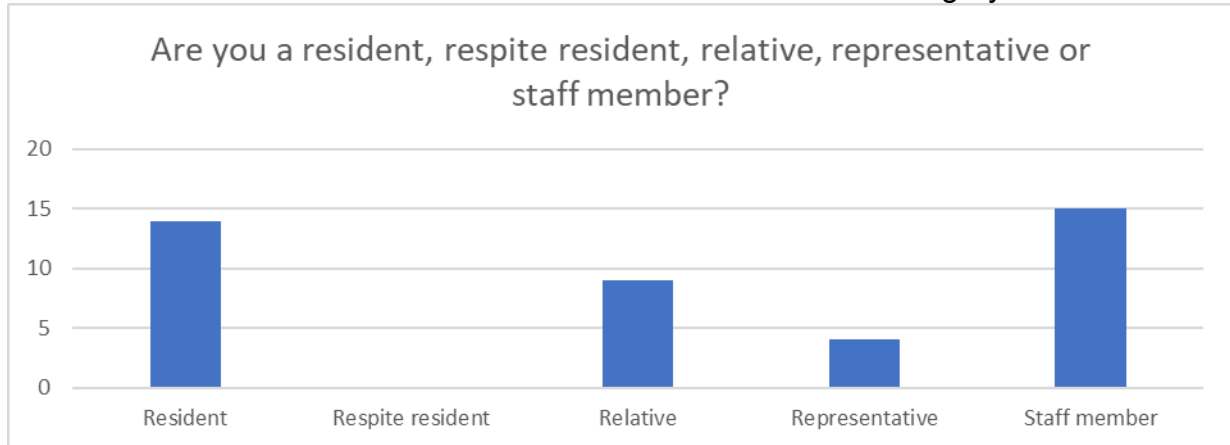
I would like to thank everyone working at Home Lea for their constant hard work during the last year. I couldn't have asked for a better home for [REDACTED] and wish and hope that the Council decide to keep such a crucial facility open.

No.

Home Lea House Consultation, January to March 2021 - Survey Results (39 Responses)

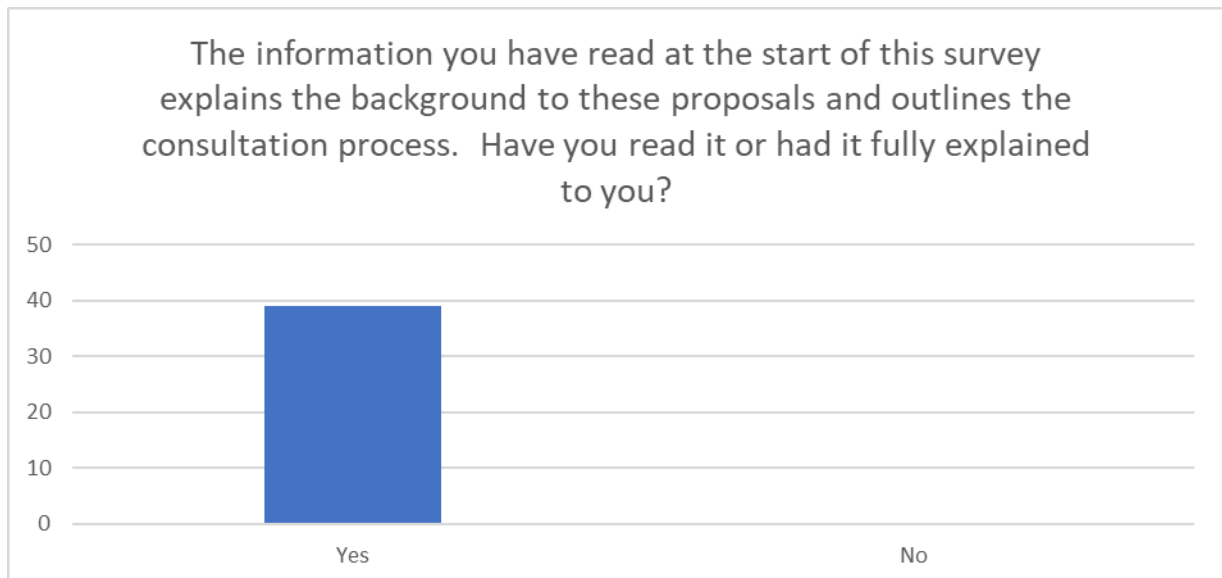
Are you a?				
Resident	Respite resident	Relative	Representative	Staff member
14	0	9	4	15

Please note the answer to the above could be more than one category.



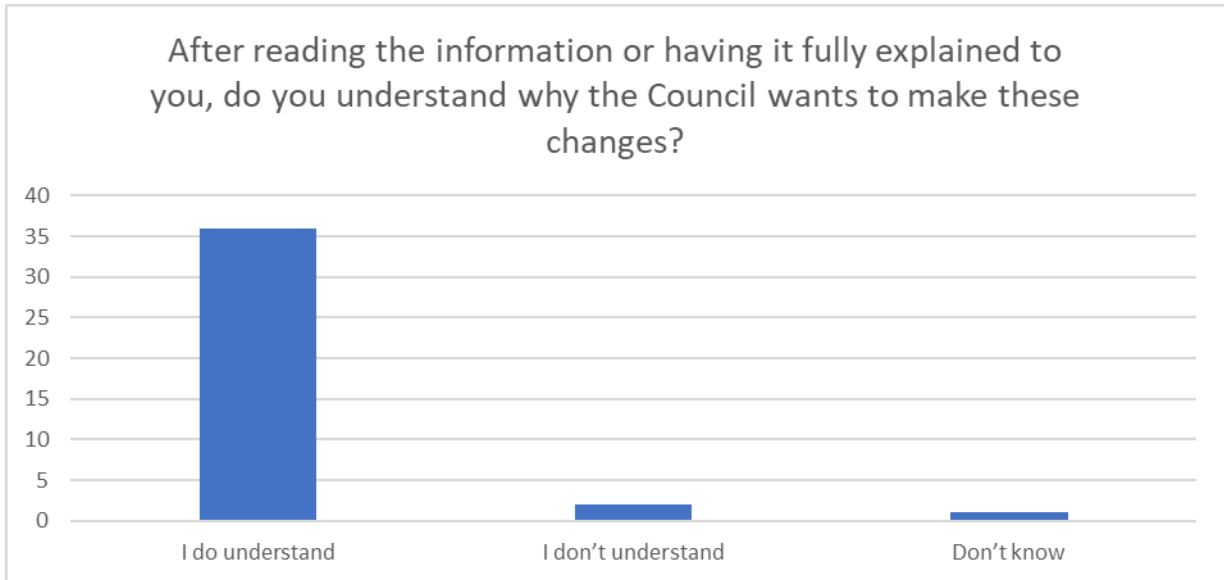
The information you have read at the start of this survey explains the background to these proposals and outlines the consultation process. Have you read it or had it fully explained to you?

Yes	No
39	0



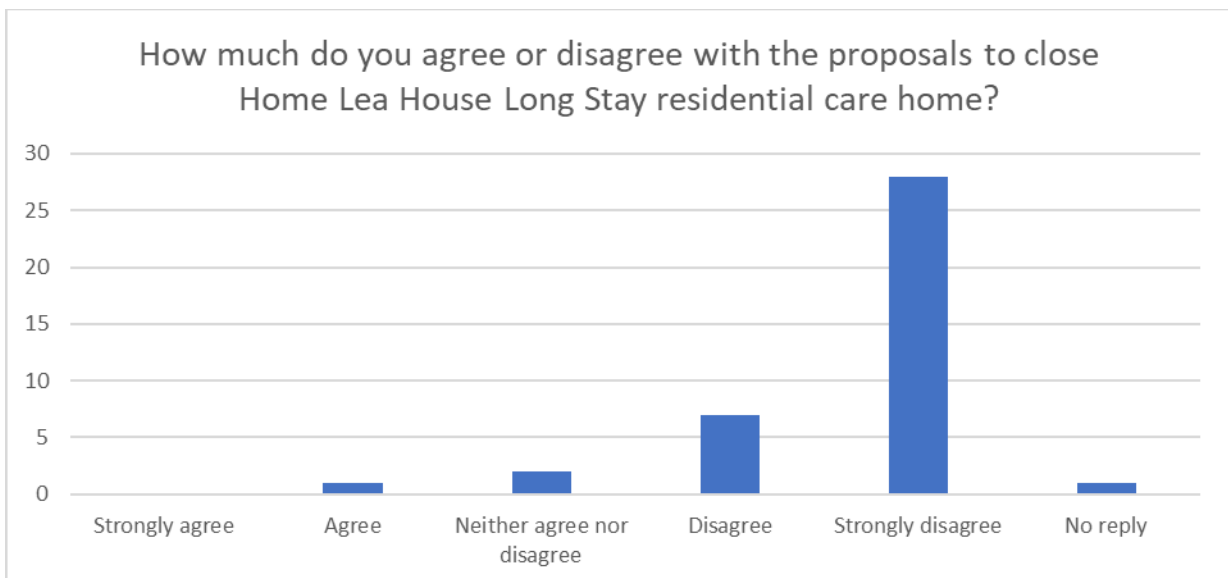
After reading the information or having it fully explained to you, do you understand why the Council wants to make these changes?

I do understand	I don't understand	Don't know
36	2	1



How much do you agree or disagree with the proposals to close Home Lea House Long Stay residential care home? Please tick one box.

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No reply
0	1	2	7	28	1



Please tell us the reason for your answer

I am local, lived here [redacted] and Home Lea House has always been a part of the community. [redacted] has recently become a resident here. The staff have done fantastically well to help [redacted] settle into her new home and are definitely meeting her needs. [redacted] is happy here, however she has started worrying about where she will be moved to, if the closure of Home Lea House goes ahead! It is a really poor decision to suggest the closure of Home Lea House. Surely there has to be another way to recoup some of the deficit. There are less necessary projects than care homes I would imagine! Shame on the Council for even thinking we need less care Homes for the elderly!

I am Chair of Rothwell Tenants and Residents Association. I therefore consider the residents in Home Lea House are part of our wider community. After a recent annual report and receiving a glowing reference from CQC for "Excellent caring" and 4 other services as "Good," I strongly disagree with the proposed closure of Home Lea. Several years ago, LCC invested money to upgrade the building and install en-suite facilities etc. which was a real boost for morale for the residents and staff alike. On the other hand, Dolphin Manor was also earmarked for closure and did not have the benefit of en-suite facilities, but our community fought a successful campaign to keep it open. We have an ageing population in Rothwell with limited accommodation for the elderly to be able to remain in their own homes and also requiring 24 hour specialist care that can be provided in a care home setting. I strongly object to any closure of care homes in the city, and more so in my community. We, and LCC have a duty of care to provide a safe and secure environment for our elderly residents who need to be protected in their twilight years. [redacted] (Chair, Rothwell Tara).

Because this is someone's home. I [redacted] have worked at Home Lea for 30 years. I have looked after some of these residents who have been there years and it's the only home they know. It will be very distressing for them when the home closes.

The home is part of the community not only providing outstanding care but supporting people who still live in the community, giving them a place to go and socialise and have contact with others which they may not otherwise have. The people who work there don't see it as a job, they put a lot more into it. Those who live at Home Lea are going to have their lives turned upside down at such an age where they should feel secure and settled. If the Council had a better sense of business and how to best control finance this probably wouldn't be happening.

The need for residential care homes is expected to rise in the future, not decrease, therefore the argument put forward by LCC does not make sense. Moving the residents to another care home is likely to be catastrophic on their mental and physical well-being and could lead to early deaths. Moving them to Dolphin Manor has been suggested but it wasn't that long ago that LCC proposed closing that care home, how long will it be before that is on the table again? LCC needs a long term strategy to survive the continuing cuts to funding being made by the government, not knee jerk reactions that will only save money in the short term.

We need to keep care homes local so that residents in them can easily be visited by friends and family, and also so that they stay in a familiar place.

There appears to be no long-term planning. We have an ageing population so demand for this sort of facility will only increase. However, the Council seem to be looking only as far as 2021-22.

Not all elderly people requiring care have the funds available to pay for private care. It is vital that people requiring care should have the option of staying local, to enable continuing contact with friends and relatives. This is an important aspect of maintaining their wellbeing. Hospital beds are still being blocked by elderly people requiring care so, therefore, there is an actual need for more beds. Leeds City Council could surely look at other options of saving money,

why is it that elderly care is the first choice?

Under the question 'do you understand why the Council wants to make these changes', [REDACTED] also says 'Would understand if she had to move'. [REDACTED] wouldn't want to move, she has been here nearly 2 years. She lived in [REDACTED] for over 50 years and when she needed to move, all the family was in Rothwell. She needed to be encouraged and is happily settled and sees [REDACTED] who are all nearby. When [REDACTED] first came to Home Lea, she had been reluctant, but loved it so much, she stayed and didn't want to go home at all. She likes to be independent but needs the care from people who know her well.

I don't think it's a good idea. I don't want to move. I like living here. [REDACTED] says she is still where she's always lived - in the same area. She likes the care she gets. She is settled which is very important for her wellbeing.

It's a very good home with an excellent CQC report. Money has been spent on the home. We don't understand why they have selected. [REDACTED] has lived here over 2 years - with Covid we haven't been able to visit and it's her home and her second family. Very traumatic and detrimental to her health. It took her a long time to settle in and now she has. It's worrying the cuts made to essential services. People do need 24 hour care - if [REDACTED] could be at home, she would be.

[REDACTED] supported the resident [REDACTED] to represent her and her family's views: [REDACTED]: 'I would be sad and would like it to stay open. I like it there. I've always liked it'. [REDACTED]: 'We know that [REDACTED] has settled really well and is very well looked after. The reason she is there is because of her dementia and because she lived alone and was lonely. She has settled and got used to company. She has never had a sad day there'.

If it's got to be done, it's got to be done. There's money involved - they need to make savings.

It's a good home. It's my home - it's lovely. I've been here nearly 2 years. It's all about money. If we had the money, we'd buy the home to keep it. We've got a great staff team. You can have your say and they help with any problems.

Home Lea House is one of the better homes in Leeds and the staff are good. The care is good and it would be a shame to move vulnerable people at their stage in life. It's exploiting people at their age. People are in the area they want to be. 'My family knows what's best for me and they think the home shouldn't be closing'. They should close other places that have lower CQC ratings. We chose this home as the best of the homes offered. 'I can't fault Home Lea'.

I like it just as it is here. I've been here a year and it's my home. I couldn't cope at home before I came here. I kept falling. I could enjoy life again and I was happy again. My own home has gone. I get on with everybody and I've made friends with residents and staff. I feel safe here. None of us want to leave our homes. I was often in hospital. I needed somewhere to live where there was someone all the time to make sure I was safe.

I wouldn't want it to close. It's a lovely place - they take care of us. I never thought I'd end up like this. [REDACTED] couldn't look after me. I don't want to move to a different home because I'd worry too much. The place I was at before wasn't like here - it wasn't as good. I didn't feel safe.

This is my home and I want it to stay open. I like mixing with people and I like being with people I know. Family say that it helps to be very close (in walking distance). It's been here a long time because it's a good home.

1 - In November 2019 we were informed by social services at St James Hospital that the

Council homes are all full and we would have to find a private home for [REDACTED]. We checked all private care homes in Rothwell and they were all full. A neighbour told us about Home Lea House. We contacted them and they said that two rooms were vacant (after we had been told the Council homes were all full) that could be the reason for low occupancy.

- 2 - Some people cannot live in their home for a variety of reasons and need 24 hour care.
- 3 - [REDACTED] tried home care package and she was being left for 12 hours some days in a soiled incontinence pad, some days she only had tea and a slice of toast for breakfast at 8am then was left till 6pm one day. We had to go feed her. Her health was deteriorating until she went into Home Lea House. Now she is a different person, they have turned her life around.
- 4 - The need for Home Lea House is very important to the Rothwell community.
- 5 - If nobody needed a care home place, they would not be still building them around Rothwell.

Because it is people's home. They are happy and settled at Home Lea and don't want to move somewhere else. Moving to Home Lea due to needing 24 hour care was a big move for most of the residents and it just seems unfair that they may have to move again and build relationships with another staff team and with other residents.

I understand why financially but at the end of the day we are dealing with people who depend on staff and also people think it's their home. They feel safe knowing that there's someone 24/7 to support not just with personal care tasks, with support of people's mental health and due to Covid, people need support even more.

Because I'm settled and happy with the home and the surroundings for [REDACTED] to visit regularly. Due to his illness, he can't travel long distances. He has frequent hospital visits and needs to be able to visit whenever he can (for peace of mind about my wellbeing). He doesn't drive. We have lived in Rothwell ([REDACTED]) for twenty-odd years. [REDACTED] family is nearby. My friends are nearby and would like to visit when it's possible and maintain contacts. My parents came from [REDACTED] and I have [REDACTED] locally. I know all the local shops and facilities. I would like to stay in the area due to this reason.

I'd cry if they had to close it. I love it here. I love it all - my room, the lounge, the dining room. We get lovely meals to eat and we get looked after ever so well here. I like it here best. I was in a privately run care home at Roundhay Park and I didn't like it there. (When [REDACTED] was in private home it was all about money, not care). (We wouldn't want that experience again).

I don't want it to close because it's in a good place. The people who live here fit very well with each other. I was a bit hurt to hear they wanted to close the home. People get on here. There's a good atmosphere. I like to be with people. The staff help you mix. The staff are very helpful and always consider you before they consider themselves. I like everything about this home, they want us to be happy here. This place has got something about it that's there all the time. There's a lovely garden you can sit out in.

The home is well-run. There is a need for it. It is very unsettling for someone with dementia needs and won't understand the changes. For her to be plucked up and put in somewhere new, we don't know what that will do to her. She knows everyone and is comfortable. The staff understand [REDACTED] and she is confident at Home Lea. The staff have been fabulous with her. If she was somewhere else, I'm not sure that wouldn't "tip [REDACTED] over".

I disagree because I have concerns about the welfare of our residents. They get very anxious about where they are going to live. I also have concerns as regards my job.

Home Lea is a great place for our residents. It's like home from home for them. It feels part of my life. I feel it's like looking after my own family and to close Home Lea, I myself will be devastated and so will our residents as this is their home and should stay this way. You could

cut back in other areas.

I disagree with the proposal to close Home Lea. I believe the Council waste a load of money in other areas i.e. bonfire night fireworks displays, lighting up buildings for occasions which all costs money and manpower. Home Lea is a happy home, residents are very happy here and good care is given. I have worked for the Council [REDACTED] years and for all the homes that have been closed, no replacement has been built and land has been sold off. Where does this money go?

Home Lea House is a council run home with a good CQC report with caring 'outstanding'. The building has recently undergone extensive re-refurbishment including a new lift, flooring and furniture and most rooms are en-suite. Dolphin Manor which is due to be kept open does not have en-suite bedrooms, and a separate wing only has 2 television rooms and no lounge. The residents on this wing have to be taken down a long corridor to the main lounge. Although the staff and care are second to none in both homes, [REDACTED] has stayed in both buildings and Home Lea is definitely better and the bedrooms appear to be larger. Due to the Council wanting to save money, to me it would appear that the Home Lea site has more commercial value and a larger footprint than Dolphin Manor to be sold off for housing/profit.

I disagree to Home Lea House closing as [REDACTED] lives here and I believe this would have a detrimental impact on her emotional well-being. It is not just a temporary accommodation, it is her home and she has settled well there, making friends with residents and carers. [REDACTED] is already emotional and upset after a Covid outbreak at the home during which residents unexpectedly died and she had to stay isolated in her room for over a month. She needs stability and security, not the additional threat and worry of her home being taken away.

Home Lea is the best residential home in Rothwell. When we were first looking at homes in our area, so many people recommended Home Lea mainly because they had previously or currently had relatives in there. The staff are so lovely and the home in general feels warm and safe.

Because this is the resses home.

I understand why the proposal has been made due to the financial difficulties but at the same time feel that over the last 10 years the older people have had a lot of closures of services leaving them with only the private sector to choose from.

The closure of Home Lea House would have a significant impact on various people. Residents, staff and family members, Home Lea House is one big family. Closing Home Lea House is taking people's homes away from them when they are all happy and settled. I personally think it's disgusting. Leeds City Council can surely find other ways of saving money without it causing upset and disruption to the most vulnerable of people.

I strongly disagree as this is people's homes. There is a lot of money spent on things that are not needed within the Council and this home is not one of them. I think there are more things that could be done to save money within the Council instead of taking people's homes away from them (disgrace).

I understand that the Council needs to save money but I like my job very much and don't want to lose it. It's not easy for the residents - we are so close with them. When you move from your house, it's hard and sad at any age and now at their age it's even worse.

I feel divided. I recognise that there are gaps in funding to run a service like ours. However, it's not nice for our residents that love our home and feel safe and cared for by the team. We as a staff team work well with each other to ensure our residents are cared for in the best possible way and we don't want to be split up just like our residents don't want their home

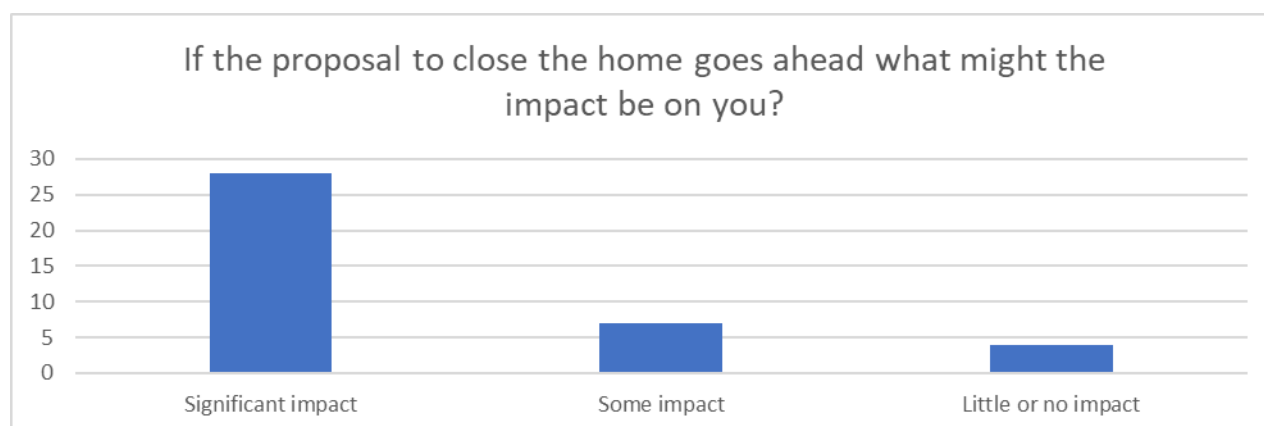
shut and have to relocate.

I feel insecure and don't know if I'm going to have a job. I feel like this is 'family'. The staff team has been the residents' family for the last year. We've been through Covid together and it feels unfair and terrible to close the home now. This is their home. I leave here and go home. I feel like I might be in the same position. If I don't have a job, I could lose my home. I'd be devastated if I had to leave my home. The residents are coming to the end of their lives and thought this would be their forever home, but might have to start again.

It is very distressing for all residents and staff, as everybody treats Home Lea as their second home. Residents are worried where they will end up living and staff are afraid there are going to be no jobs for them.

If the proposal to close the home goes ahead what might the impact be on you?

Significant impact	Some impact	Little or no impact
28	7	4



Please tell us the reason for your answer

Because the idea of closing any care home let alone one that has provided care and protection for generations has to be wrong.

Having being retired for 6 years myself, I too may need support in the near future!!

I have worked at Home Lea [redacted] years. It's like my second home. I will be [redacted] when or if it closes. I have been there half of my life. To start working somewhere else at my age is not good.

I work there, it's my main source of income. I live nearby, have a great relationship with the clients, their families and the staff team. I feel we should be told now what is the plan for employees so we can plan best for us when the closure comes.

I will not be impacted by the closure currently, however, my mother has Alzheimer's disease. When the time comes that my father no longer can care for her, the choice of care homes will be reduced if Home Lea is closed.

I am an elderly client solicitor and have seen the negative impact being moved far from home can have on vulnerable people needing care.

Living locally, I do expect that family or friends will in the future have a need for these services.

No particular impact as I have property which would fund care, but there are significant others who don't have funds. My relatives are no longer local so Rothwell would not be my choice, but again there are many many families who have been local residents throughout

generations.

We don't want her to have to move again and move from the area where her only family are. She is here with [REDACTED] so both are looked after and visited together. Family are worried that it would make her dementia progress more. She wouldn't understand where she is and the changes would affect her. She wouldn't understand the reason why she had to move and her routine and familiar surroundings would change. Family might not visit as often if she had to go further away.

I would be unhappy. I like it here. I feel unsettled sometimes anyway (not liking change and getting easily confused). [REDACTED] says it would have a massive impact on her mental health. She has long-term mental health problems and has anxiety and depression which would potentially get worse. She can get very distressed and needs the support of the care team who knows her best and who she feels safe with.

At this age and in this state of health, it would be shocking for her to have to move. She has lived in Rothwell all her life. We are nearby and would find it difficult to travel to see her. Her closest friend is nearby. Home Lea House is her second family. It took a long time to find the right home and [REDACTED] is now settled. It would be awful at this stage to have to start again. This is [REDACTED] home now. We think this will be the end for her if she has to move.

'Where would I go? Because I feel safe where I go now. I like to have a laugh'. [REDACTED] said she feels the change and move are not good for someone with dementia. It's worrying for all the family. Some days she is a bit confused and because the team knows her well, we can all work together.

They'd have to find me somewhere. I'm hoping I could be moved into my own house. It would have to be somewhere where I could get about with my own wheelchair. I might need a bit of help with my care.

I have been feeling very low in mood and this will just make me feel worse. I don't want to leave here. I will miss all the staff who help me. I have a nice group of friends and I will miss them. It's been a hard year and I lost my closest friend. I feel I wouldn't want to live if I had to move.

Moving and disruption at a time when things are hard anyway with Covid 'I get very anxious and worried about things anyway'. [REDACTED] stated 'Staff at Home Lea know [REDACTED] well and help her with family - in another home, they might not understand her as well, not give her the right support and that could affect the care she receives. We feel [REDACTED] is safe, well cared for and takes pressure off. We feel guilty that we can't look after [REDACTED] all the time but we know she is well cared for'.

I can get very upset. I worry about lots of things - anything out of my normal routine affects me. Any changes upset me. At the moment, with Covid, it's a hard time to move and the logistics will be hard. Losing the level of care. It would affect my health and wellbeing. It's a big change at my age.

I'd be worried about the home closing. I've got family but I couldn't go to them. I'm a born worrier - I worry over everything. I don't want anything to change and I don't want to go to another home. When I came here I felt really poorly and now I'm getting right again. I used to have carers at home but I still kept falling. I've been depressed and worried before and made myself poorly.

It's my home and I'd be upset if it closed. [REDACTED] says it's taking the freedom and choice away. Family say it would be devastating for [REDACTED]. It would cause a lot of stress and affect [REDACTED] health. [REDACTED] gets very upset anyway. It has been hard for everyone and

residents have been affected by Covid so it's adding another stress.

1 - Because [REDACTED] is double incontinent she requires the same facilities and care she has now.

2 - [REDACTED] needs a W.C in her room and help to get to it also in the night time. We are concerned that staff may not be available in a different home.

3 - We care for [REDACTED] all week which includes school drop off and pick up. If [REDACTED] is moved out of Rothwell the family may not be able to visit the same.

4 - We need the same level of contact as we have now mobile and facetime.

5 - We would be concerned about her health as she hates change.

It will mean starting again in another setting, building new relationships with colleagues and customers. It also causes a certain level of anxiety wondering where I may end up working and how far I may have to travel. I currently travel from [REDACTED] to Home Lea but this is quite an easy commute as it is mainly all motorway, whereas previously I have travelled to Yeadon which is mainly A roads and took much longer. I have been very happy and settled while at Home Lea and believe I have very good relationships with both customers and colleagues.

Having to move somewhere else means I have to start again, with the thought of am I going to move again which the residents will probably think that too, so I may feel a bit unsettled.

Because I need to feel content with my surroundings and feel happy with the staff team and the staffing levels. I'd be worried about being somewhere where there were lower standards. I am happy with the support I receive at the moment. I have been at Home Lea before for respite on several occasions before deciding to stay here. It was my first choice. I have a range of health issues. I wanted to stay with my own GPs who are as kind and considerate as the staff who look after me here. My family are happy with me being here. I don't want to change my support network. The environment is exceptional and the food, cleaning and garden.

I hope they never close this place down. I love it here. I don't know how I'd go on if I had to move somewhere else. I'm worried about where I'd go. All the staff that work here would have to find other jobs. [REDACTED] states, they're wanting to make these savings but at a cost to the weakest, elderly, infirm and vulnerable members of society. It could kill some people early in the last years of their life.

I'd be most upset. I'd worry about where I was going to end up. I get on with everybody and that might not be the case somewhere else. It took a while to find out where things were here and fit in and get routines - it would be hard to go to a new place and not know where everything is.

It takes a while to get to know somebody. She has deteriorated mentally, but is doing well physically and is happy because of how she is supported with her care there. She would definitely need care in a home and she would find a move quite terrifying. She struggled to move initially and would feel even more isolated and lost with another move. Continuity is a massive thing for someone like [REDACTED] she won't know where she is.

Because I am concerned whether I will have a job.

Because as long as I have worked in Home Lea, I feel that I belong and I love all residents and staff. It is very homely and should stay this way.

Very few homes left, the impact will be my job, income.

The impact on [REDACTED] would be catastrophic. She has resided in Home Lea for two and a half years and it is her home. During the Covid 19 pandemic, the staff have become her family as we have been unable to visit for the majority of the time and to move her could make lost the will to live.

I think closing Home Lea House would have a big impact on [REDACTED] emotional well-being. She needs security of the people she knows and trusts at this time. Also I am currently in the process of selling [REDACTED] home. Losing her house where she has lived for almost sixty years, as well as most of her possessions, has been very upsetting for her to have to deal with. Losing two homes at the same time is awful for [REDACTED].
[REDACTED] is currently living in Home Lea due to her dementia and living alone was not working in her best interests mentally. Our biggest fear as a family is the huge impact moving would have on [REDACTED] mental health. She has suffered with her nerves all her life and to see her so relaxed and feeling safe and surrounded by familiar faces is a huge importance to us.
Just will.
I am currently doing a 12 month temporary post and will be returning to my substantive post after the 12 months has finished.
Change of job. It will affect me financially. It is a job I enjoy.
Home Lea is a lovely home to work in. We have 'outstanding' in care delivery and it's a kick in the teeth to shut our home when we are good at what we do. Covid has impacted everything, however, given when the world can return to normal we could recover and become a fully occupied home again if we were given a chance instead of closing us. I suffer with anxiety and it can be difficult being placed in a new team and environment. I love my job and my team at Home Lea.
Because I wouldn't have a job here anymore. I have worked for the Council for [REDACTED] years and I have been through this before. It wasn't nice wondering if I would have a job and what would happen. I can get quite down and feel this will make things worse. We are a good, supportive team and I rely on my colleagues who have helped me through some challenging times.
I am afraid for my job. I have mortgage to pay and I worry I could possibly lose my job.

What could the Council do to reduce the potential impact?
They could do the right thing for the residents of Home Lea House and their families and cancel the proposed closure!
The families of the residents are understandably very worried for their elderly relatives and can have a devastating effect on their health and well-being.
Ensure that whatever the plan is for residents and staff that we are informed immediately, not at the last minute so we can plan and the residents can get used to knowing they will be moving. It's going to close so the hope that just maybe it might not has to be completely dispelled.
Don't close the home, simple as that. Reconsider where long term savings could be made. I work in the public sector and am familiar with responding to funding cuts. Work more efficiently, do not fill staff vacancies and reviewing how much you are charging for services are longer term viable options for saving money.
Keep the home open.
Increase provision.
One option would be provision of local, modern assisted living accommodation, to facilitate independence for longer. Professional, well trained carers should be a priority available at a local level. Full time care should always be a last option.
Don't close the home. Leave the residents in a place where they are happy and settled and let them see the rest of their days out where they want to be.

Keep the home open. That's the only thing that's going to make any difference. Look to save money in other areas.
Keep it open or make sure mum is kept locally with all the same support as she has now.
Not close the home. The family understand the financial side but 'people like [REDACTED] and the other residents shouldn't suffer from financial issues'. We strongly need somewhere close to family. We have always seen her every day. We moved her to be near to us.
Make sure I still have the same level of care and support.
Keep the home open. Try and raise money to keep it open. How can the Council save the money somewhere else?
Not to close Home Lea.
Help to know the options. Need for similar care and support. The best result would be that they don't close this home but that, if they do, I go to Dolphin Manor. Make it more local for family to access.
Help me to stop worrying. I'd feel better if they told me the home isn't going to close. I've made myself poorly in the past with worry. I've been on anti-depressants and I don't want to go that way again.
Not close the home. [REDACTED] says they, the Council, have to look elsewhere - the small amount saved won't make a big difference - rather than affect the elderly residents). They should be getting better treatment.
1 - Do not close Home Lea House. 2 - Find a Council home in Rothwell with the same facilities. 3 - With the same dedicated staff.
Don't close the home!! Other than keeping the home open, I don't really know.
Cut back elsewhere where possible.
Not close it. Feel sympathetic towards residents. Give the same quality of care in the same area. I'd want to be able to move around in my wheelchair and still feel as independent and be able to do things with the right level of support.
Aside from not closing it down, I don't know, because I don't know what the options are.
If the home closed I'd have to be helped to go somewhere very similar.
If the home is closed, it would impact her anyway. Help with the changes.
Ensure staff have good redeployment.
Stay open please, update the building, look after our elders. Let's keep them safe and happy.
Keep Home Lea open and update the building.
The Council could look again at the closure and move funds from other less important areas to keep the home open. If closure occurs, current residents should be kept local so that they are near to their relatives, as good quality affordable care is rare in the area.
I think if the closure goes ahead [REDACTED] would benefit from moving to Dolphin Manor as it is similar to Home Lea House.
KEEP HOMELEA OPEN!!! I truly don't see how a closure wouldn't impact on [REDACTED]. Due to Covid 19, I also think the impact would be even more destructive to [REDACTED] mental health.
Keep the home open, as it's friendly and a homely place to live.
Possibly look at a partnership with NHS or LYPFT to use the space as it has in other services.
Leeds City Council could surely find other ways of saving money. The impact that it will have on all involved is unfair. This home provides a safe and happy environment. All the residents are happy, content and settled. To take all that away is disgusting.

For a start, just as an example, send one man and a van out to fix car part runners, it does not take 3 work men and 2 vans to do a simple task/job, just think what that costs to send all the workmen out to do a one man 5 minute job. The list could go on.

Help me to get another job. Help the residents to find somewhere suitable.

There's a lot of MPs/Councillors that get paid a high wage/salary. May be they should have a pay cut to help reduce Council spending. Also there are a lot of managers - their roles could be condensed to save money. Look at other services instead of our elderly.

Not close the home. Make savings elsewhere. Find suitable accommodation for the residents if the home does have to close. Find alternative employment for the staff (with the residents). Help with job interviews and training.

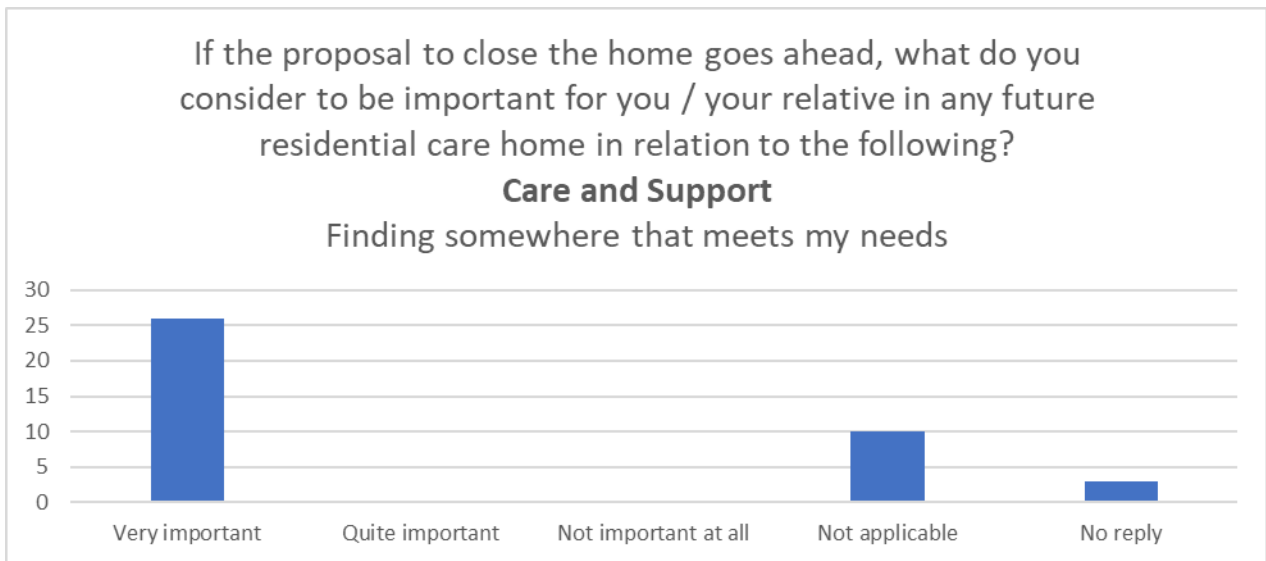
Not close the home. Make sure our jobs are safe.

If the proposal to close the home goes ahead, what do you consider to be important for you / your relative in any future residential care home in relation to the following?

Care and Support

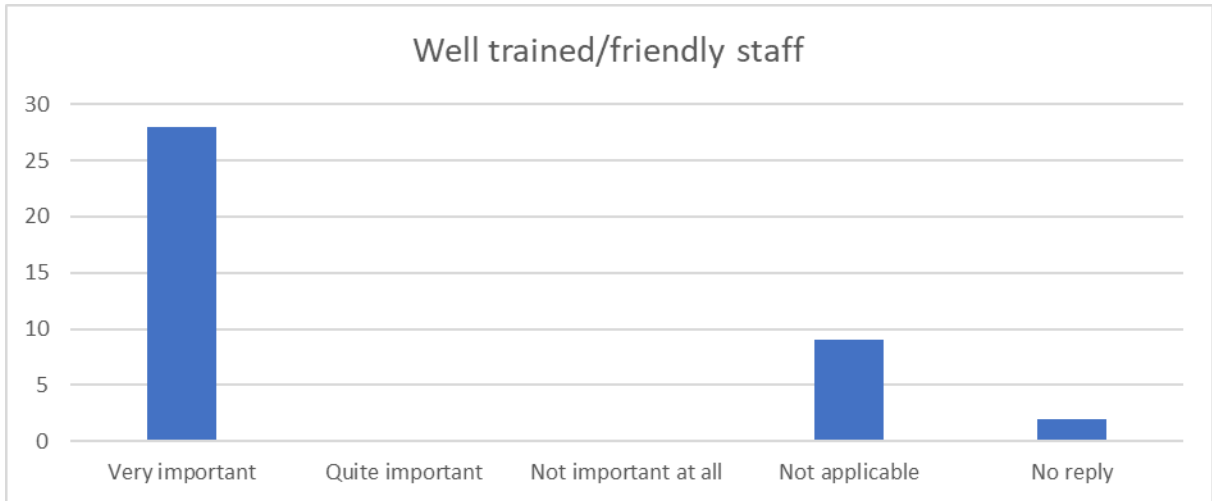
Q9.1 Finding somewhere that meets my needs

Very important	Quite important	Not important at all	Not applicable	No reply
26	0	0	10	3

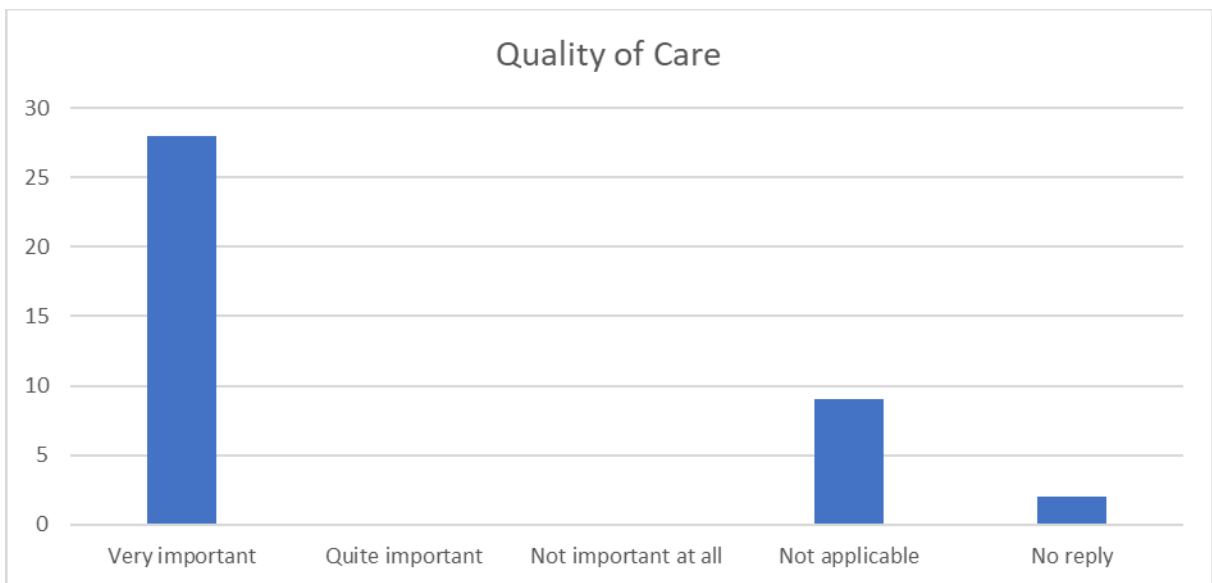


Well trained/friendly staff

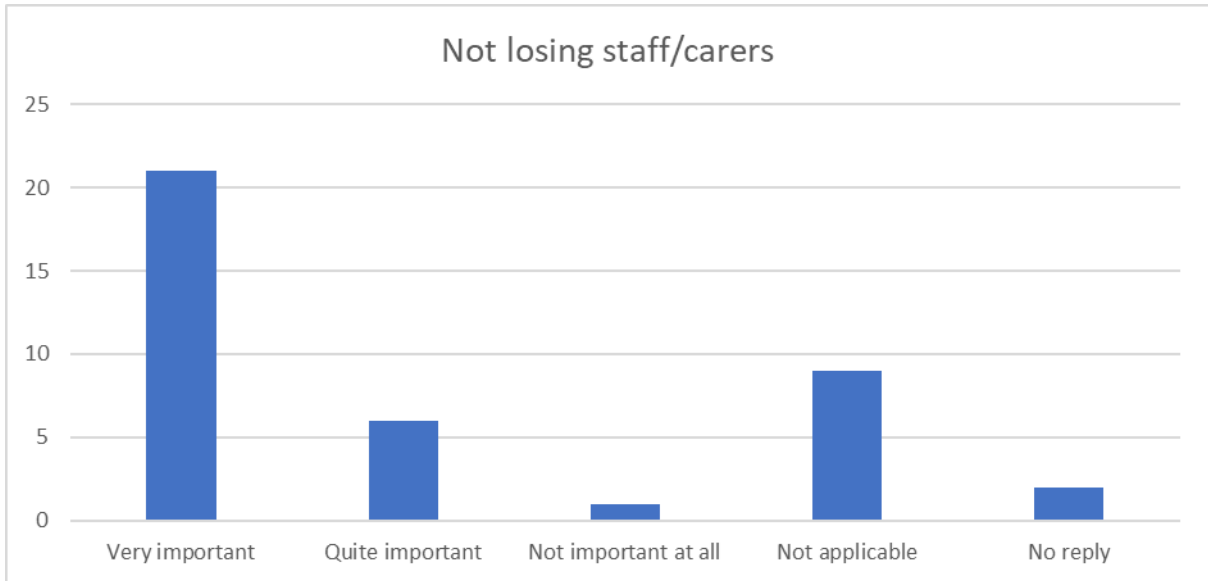
Very important	Quite important	Not important at all	Not applicable	No reply
28	0	0	9	2



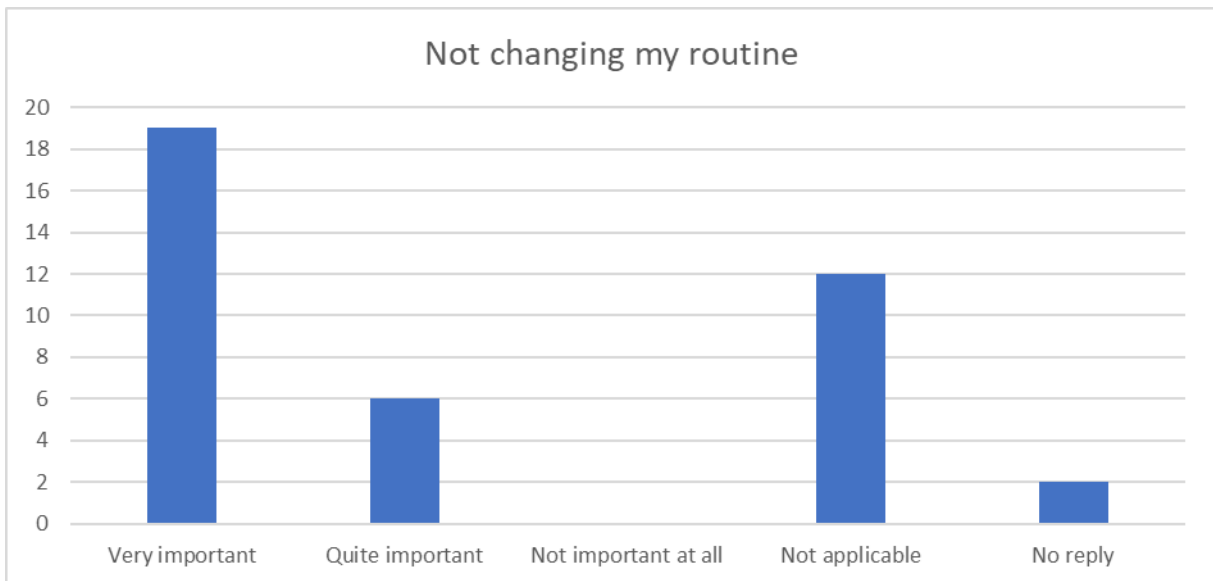
Quality of care				
Very important	Quite important	Not important at all	Not applicable	No reply
28	0	0	9	2



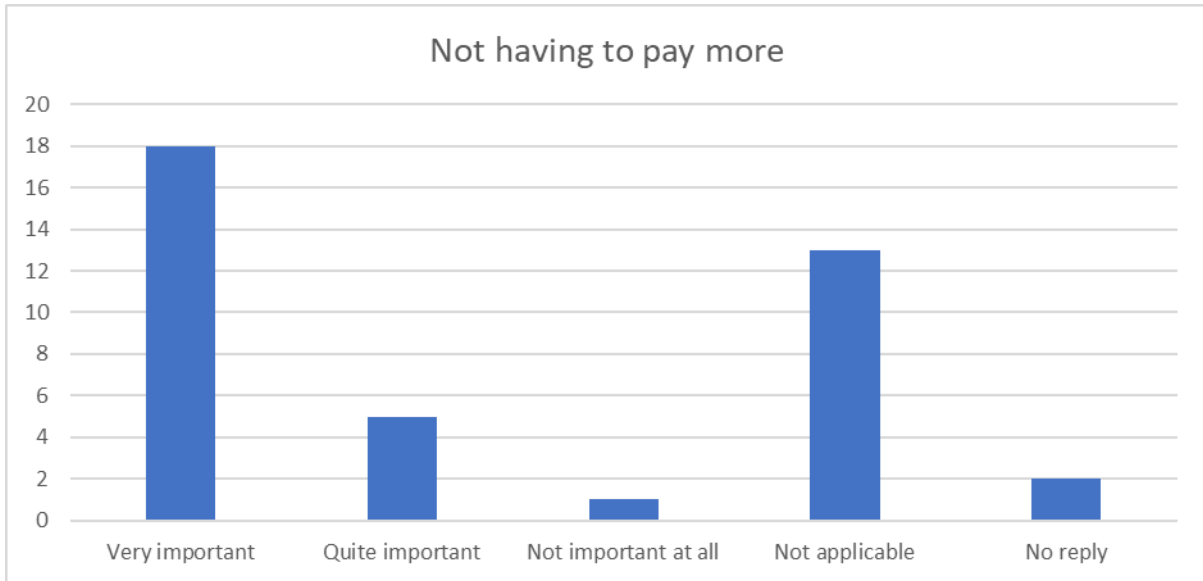
Not losing staff/carers				
Very important	Quite important	Not important at all	Not applicable	No reply
21	6	1	9	2



Not changing my routine				
Very important	Quite important	Not important at all	Not applicable	No reply
19	6	0	12	2

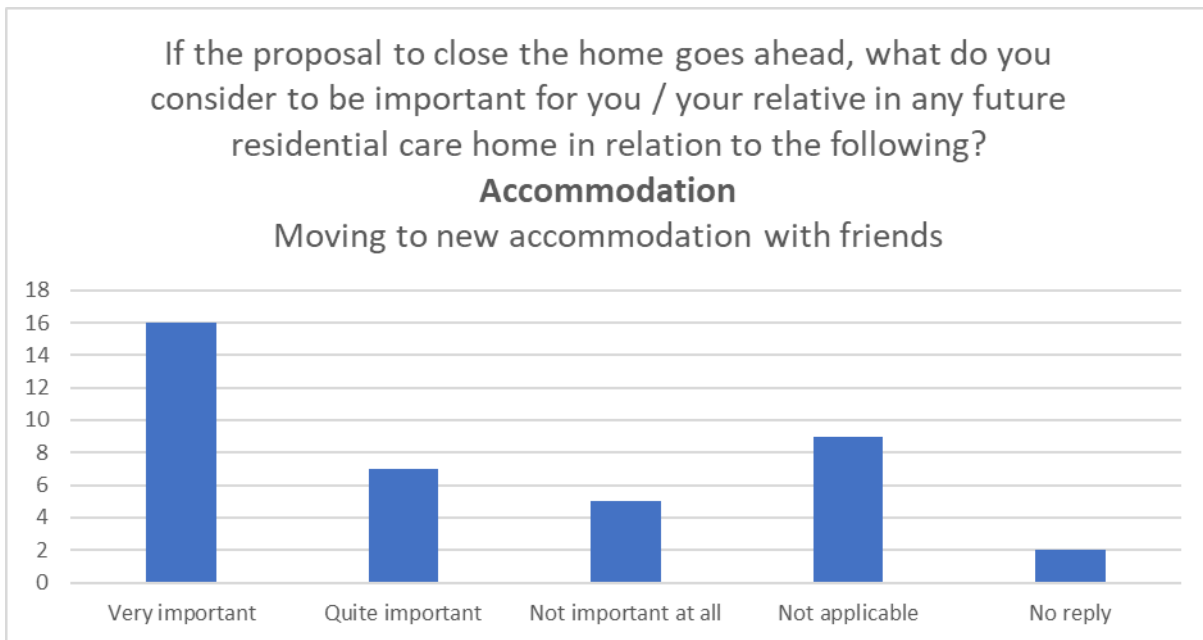


Not having to pay more				
Very important	Quite important	Not important at all	Not applicable	No reply
18	5	1	13	2

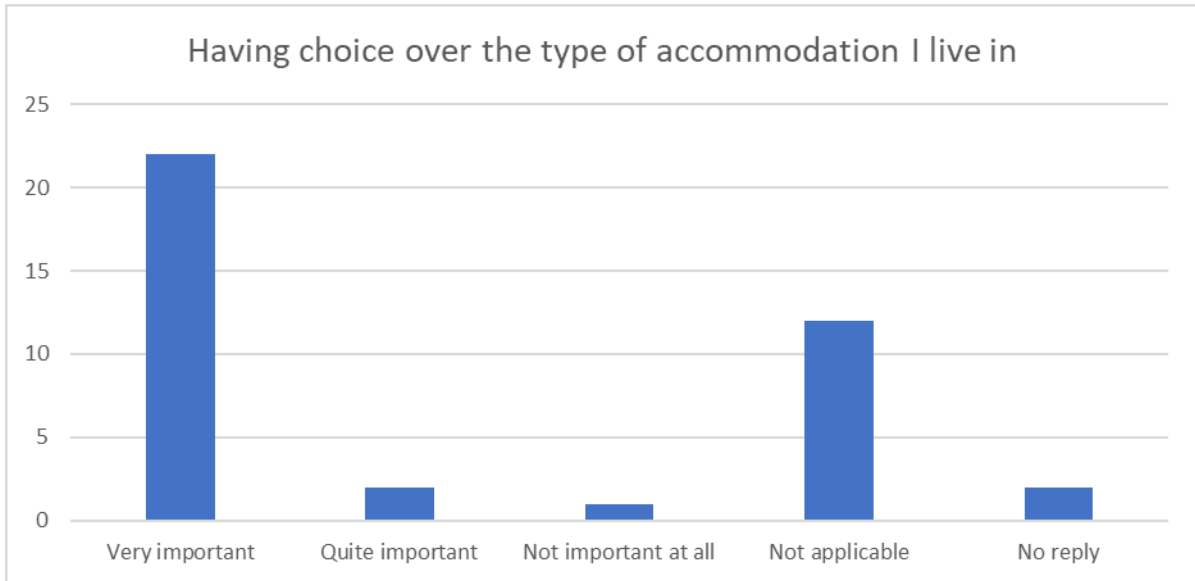


Accommodation

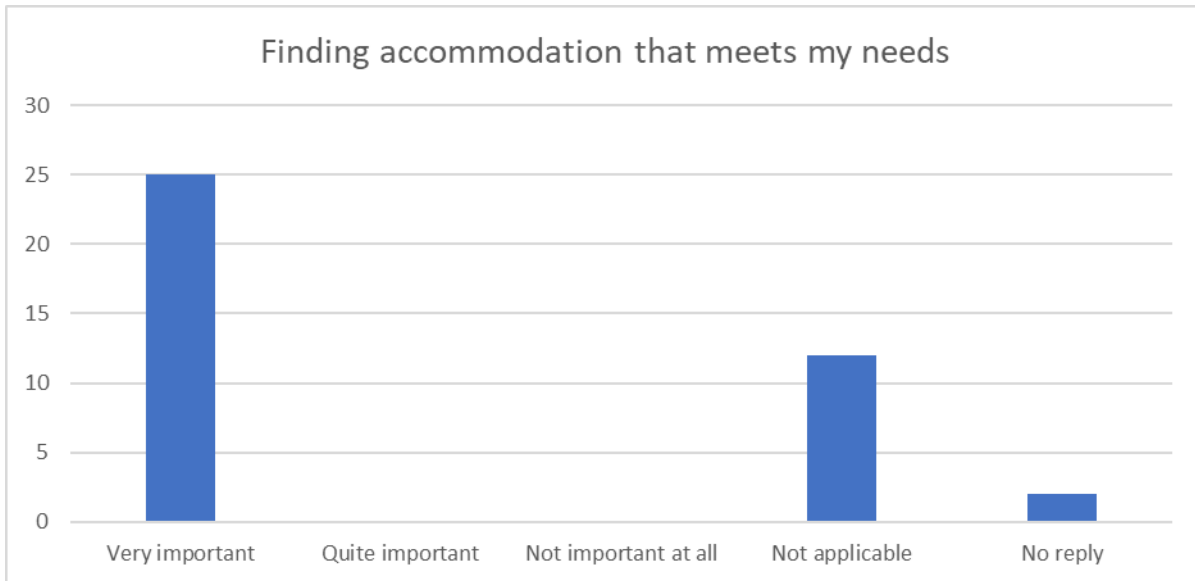
Moving to new accommodation with friends				
Very important	Quite important	Not important at all	Not applicable	No reply
16	7	5	9	2



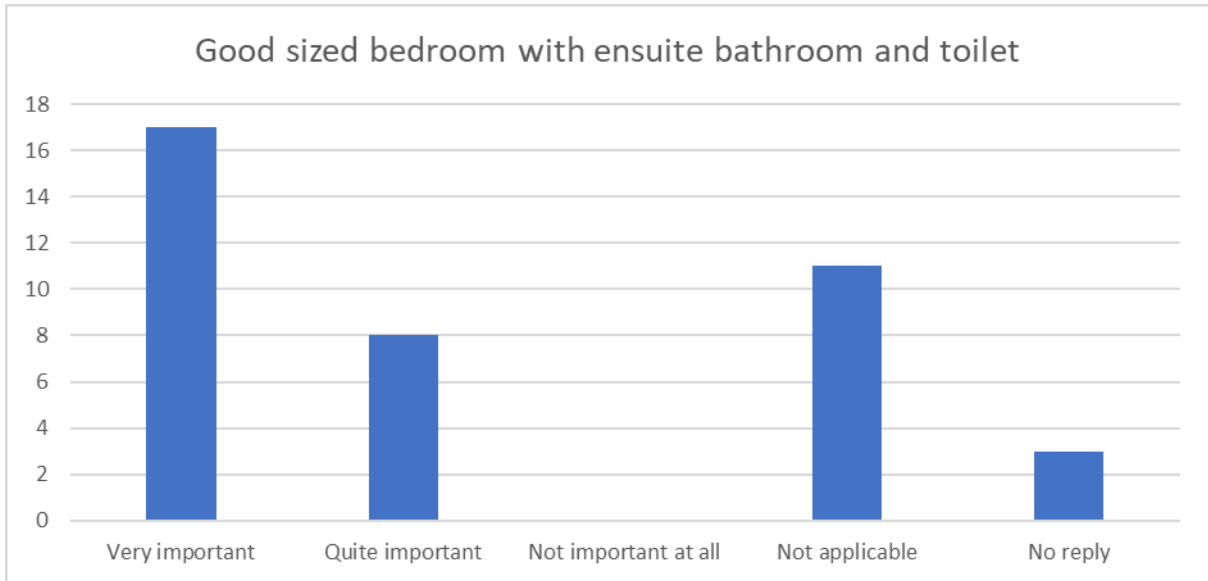
Having choice over the type of accommodation I live in				
Very important	Quite important	Not important at all	Not applicable	No reply
22	2	1	12	2



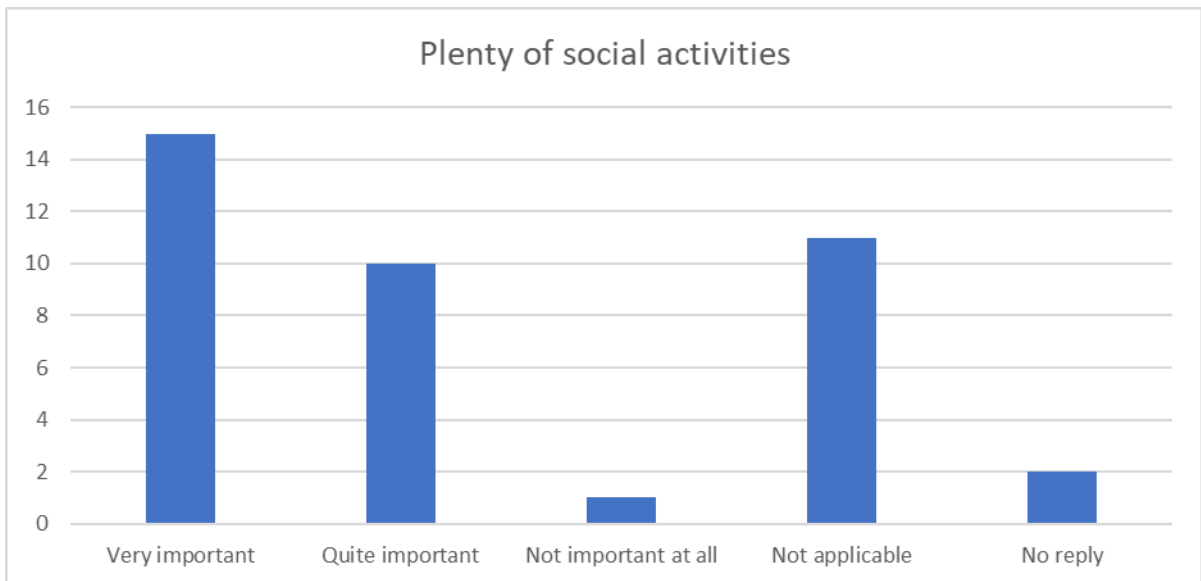
Finding accommodation that meets my needs				
Very important	Quite important	Not important at all	Not applicable	No reply
25	0	0	12	2



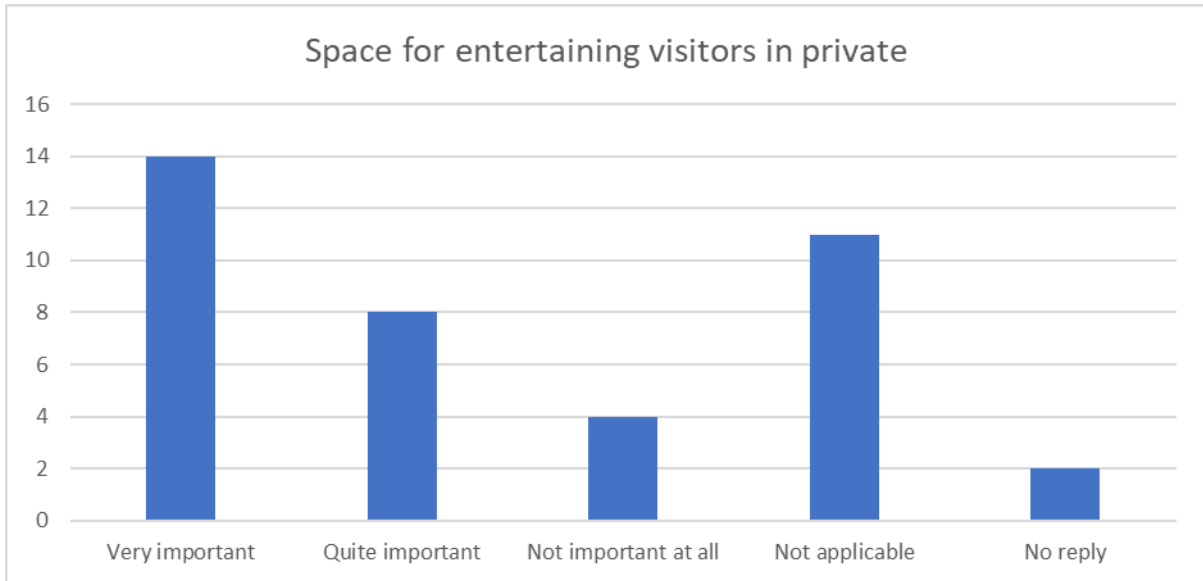
Good sized bedroom with ensuite bathroom and toilet				
Very important	Quite important	Not important at all	Not applicable	No reply
17	8	0	11	3



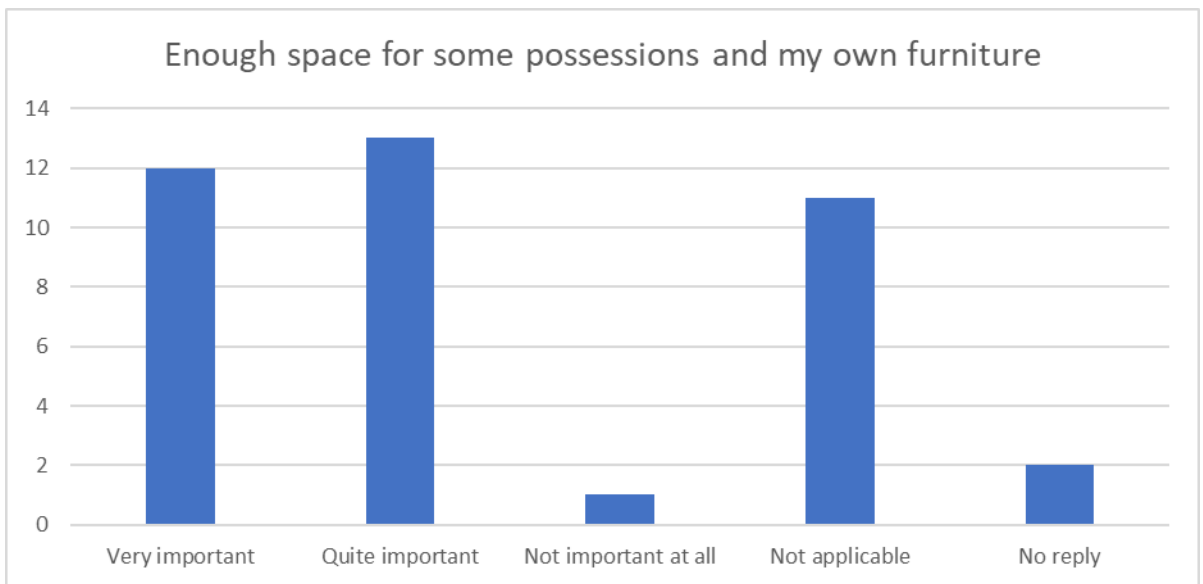
Plenty of social activities				
Very important	Quite important	Not important at all	Not applicable	No reply
15	10	1	11	2



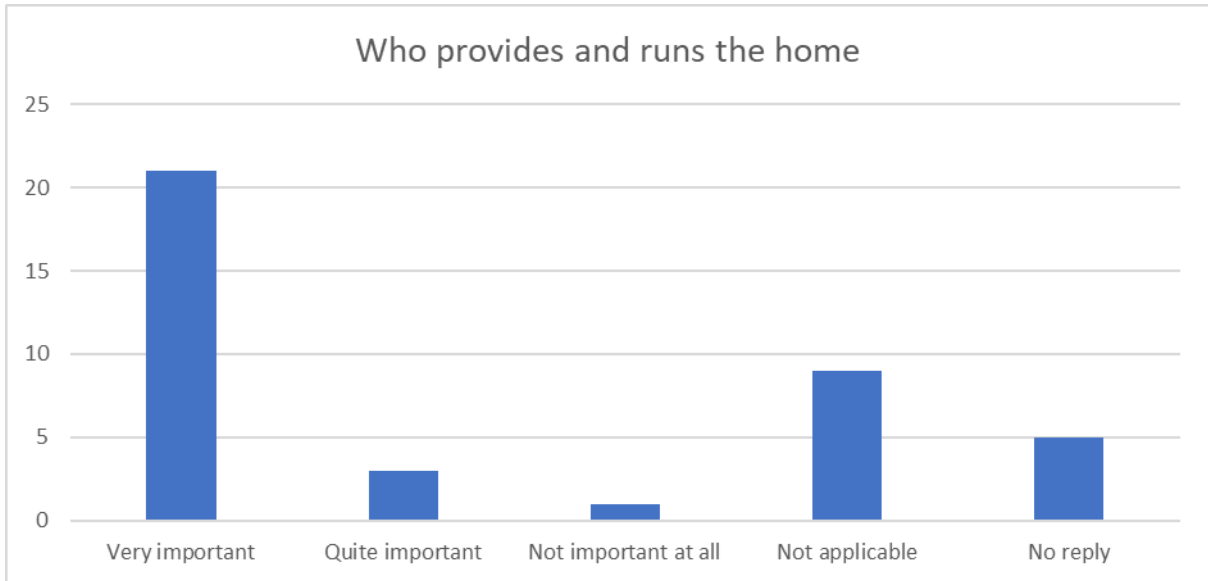
Space for entertaining visitors in private				
Very important	Quite important	Not important at all	Not applicable	No reply
14	8	4	11	2



Enough space for some possessions and my own furniture				
Very important	Quite important	Not important at all	Not applicable	No reply
12	13	1	11	2

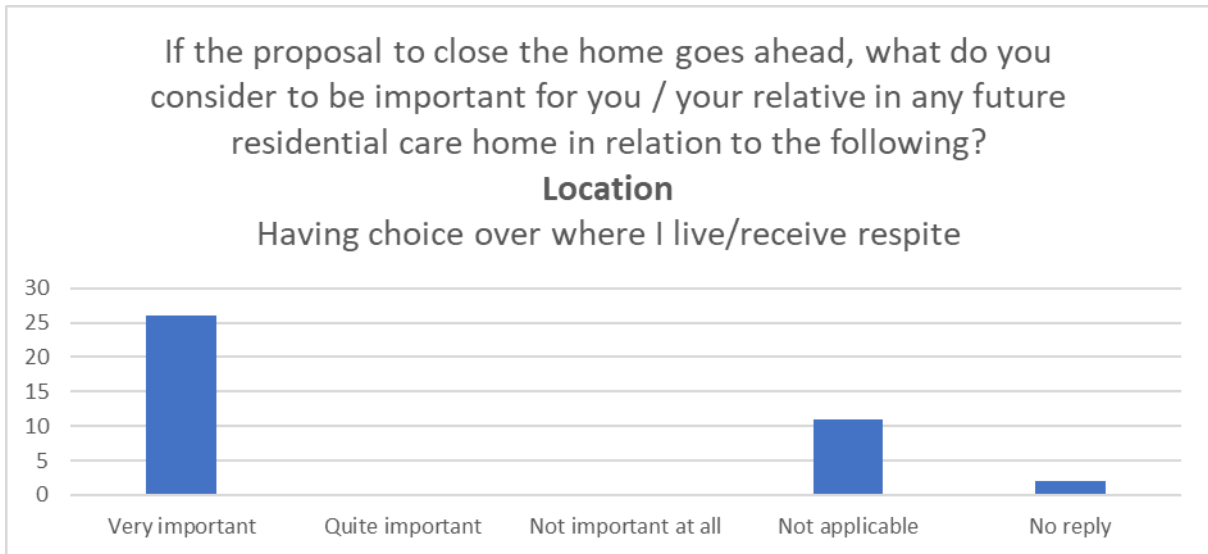


Who provides and runs the home				
Very important	Quite important	Not important at all	Not applicable	No reply
21	3	1	9	5



Location

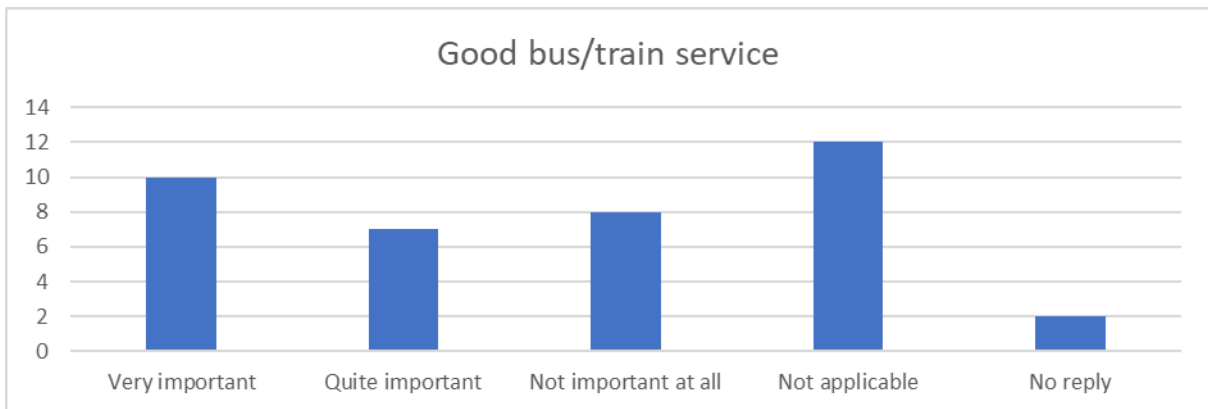
Having choice over where I live/receive respite				
Very important	Quite important	Not important at all	Not applicable	No reply
26	0	0	11	2



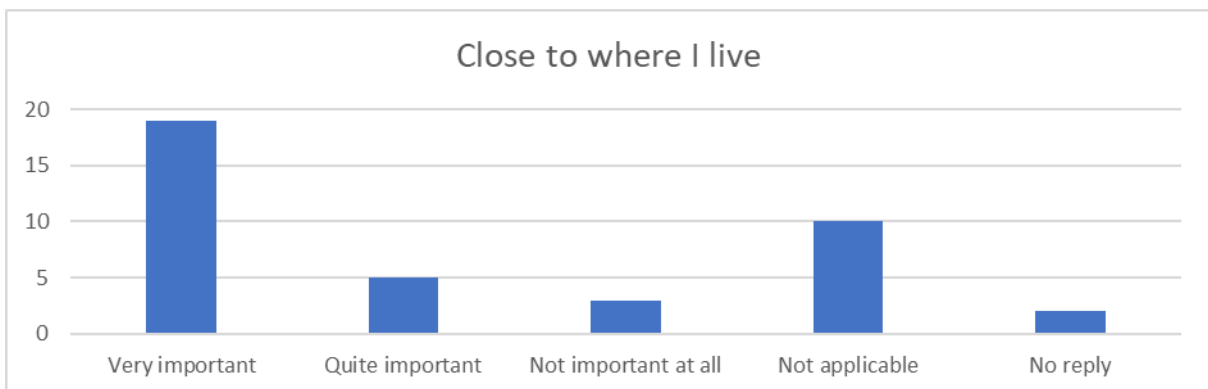
Close to shops/other facilities				
Very important	Quite important	Not important at all	Not applicable	No reply
7	8	11	11	2



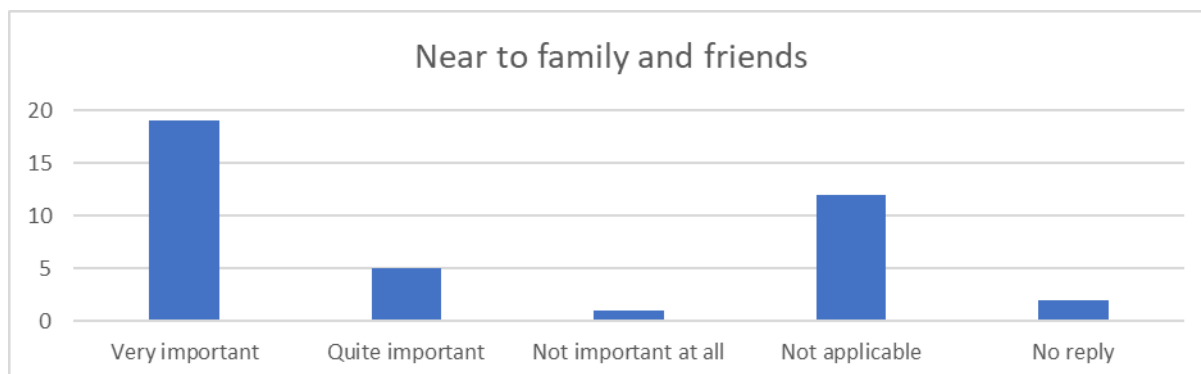
Good bus/train service				
Very important	Quite important	Not important at all	Not applicable	No reply
10	7	8	12	2



Close to where I live				
Very important	Quite important	Not important at all	Not applicable	No reply
19	5	3	10	2



Near to family and friends				
Very important	Quite important	Not important at all	Not applicable	No reply
19	5	1	12	2



Other (please state)
All family members live locally and visit regularly. She gets a lot of pleasure from this.
It's important for the home to be well-run and staff to be familiar and know [redacted] well. At the minute, the family are all within walking distance.
You know that council care homes stick to the rules - the quality of care is better, there's less staff turnover and the staff are better trained. Must be near family.
For stability and because of dementia, it needs a secure manager and regular team - familiar faces who know nan well.
I don't mind who runs the home as long as it's run well. I want to be in [redacted] if possible. I lived there all my life.
I'm not keen to move on. I suppose it would have to be Dolphin Manor.
The home has to be run well. It's been excellent. Needs to be very close to family.
Would like to be local because it makes it easier for family to visit (as they all use public transport).
I need help with everything because I've got health problems and I can't see.
The most important thing is to be near my family in Rothwell.
Live locally with the same level of support.
I'd prefer it to be Leeds City Council after my experience with the private sector.
It's important to me to be near and with friends.
It has to be a good home. Activity is important but has to be tailored to [redacted] needs and interests.
N/A
I would like to work in a similar job not too far from where I live.
I need to be able to get to work on public transport.
If the home closed, I would like to be reassured that I have job to go to.

Q12. Please state if there is another viable approach which you believe should be considered?
Reconsider the decision for closure, and invest in people, jobs and livelihoods.
Look at other areas within the Council where money is wasted and streamline the

business as a whole to be more efficient.
Office staff could work from home, save money on buildings. Try and save money in other areas rather than affect the elderly.
Save money in different areas e.g. cut down on staff offices, cut down on office overheads and do more home based working.
The older people at the moment are more important than the young ones - they're more vulnerable - they don't have time left and need to be cared for properly. They have been through enough not seeing family. Leisure services can be put on hold and come to later for example.
We don't want to talk about her going anywhere else because we think it would have to be a last resort.
Not really - if the home's losing money. Unless you can get the home full.
Don't close the home.
Better links with NHS to fill beds and reduce hospital bed blocking.
Any other options would be better than taking someone's home away (e.g. non-vital services - there are important places and groups e.g. youth groups and Lotherton Hall) that aren't someone's home.
I'd like the home to be kept open.
Family feel the Council should try and find the funds elsewhere - don't take things away from old folk. Especially for the small amount they will save through closure - it can surely be found elsewhere.
Leeds City Council should get together with other local councils to lobby Government for extra funding for Covid 19 safety measures in care homes and other services. Old people are already selling their homes to pay for care. They cannot pay more.
Look at other options to save money.
Keep it open with same staffing levels. Get rid of some of the top bosses. Don't know. Make some other cuts.
Look at other cost saving measures rather than closing my care home.
It is a problem. No matter what you do, you're going to cause upset. Get more people to fill the homes.
N/A.
I think the Council should close other things instead of old people's homes. This is not a luxury for [REDACTED], this is her home. It is not fair for the people who live there.
Covid has impacted so many elderly people with loneliness. Mainly that I feel we need all the homes we can for the future.
The amount of vans and workers that come to do the same job, too many bosses.
They could put more people in the home instead of closing it down.
Explore other services that can be condensed to save our home from closure. Explore new directions for our home to go to help save it e.g. end of life care.
Find cuts elsewhere - don't waste money on projects that aren't needed. Cut managers where they aren't needed.

Q13. Finally, do you have any other comments?
As above.
As a staff member I would like to see the residents have time to get used to the idea that

the home is definitely closing. It's not fair that the words "may close" are used as it is closing, we know that for sure. Giving them that bit of hope is cruel. Also the staff who work there need to know what will happen to them so we can all make plans necessary for our best interests too.

It is very disappointing that elderly care is undervalued still in 2021. Lack of investment, such as modernisation of existing premises, allowance of big private companies to run social care for profit is morally wrong. Every elderly person irrespective of their financial means should receive care appropriate to their needs, in a local suitable environment. These people have over the years contributed to society in a variety of ways, which unfortunately is often unacknowledged by society in general. Staff in care homes and care services should be well trained and monitored, they should also be paid a salary which reflects the importance of their job. This would help in long term retainment of staff and in time save some of the training costs which are incurred with high turnover of staff.

From [REDACTED]: It's wrong to close people's homes, they are vulnerable. Currently, the situation is affected by Covid. We're worried that there aren't as many people in because places have become vacant and potential residents and their families might be reluctant to move in because of the threat of closure.

[REDACTED] has lived in Rothwell since [REDACTED]. She has been a Leeds City Council resident. She should still have some say as to where she lives and that shouldn't be taken from her at her age. We considered other homes and Home Lea was our choice. The Council shouldn't be taking that choice away from her.

We desperately want the home to stay open and let [REDACTED] live in a nice secure place where she's well looked after. (We would like to know if existing residents would have priority over the home they want), aware of transitions social work team.

[REDACTED]: We need her to feel safe. We know now that she feels secure and happy. It's been a tough year and this has made it even tougher. We hope Home Lea House can stay open. We are so worried about the upheaval and disruption and how it would affect [REDACTED] mental health and wellbeing.

I like Home Lea House. I feel great for being here. I like to be independent and get the help I need.

I'm very happy here. We're very well looked after.

Family need more ongoing support from social work team for future care and support.

The ideal scenario would be to keep the home open. If the Council can't then the most support to me and my family. 'They should keep the home open because that's what we all want'.

I was so fed up and poorly before I came here. It's helped me feel better living here.

[REDACTED] seems to be a lot happier than she was before coming to the home. She is more talkative and outgoing. She's happy so the home is really good for her and us and we don't want that to change. That must be due to how the home is run and the staff.

I think it would be a shame for the home to close and feel it will cause a lot of anxieties for the customers and staff team.

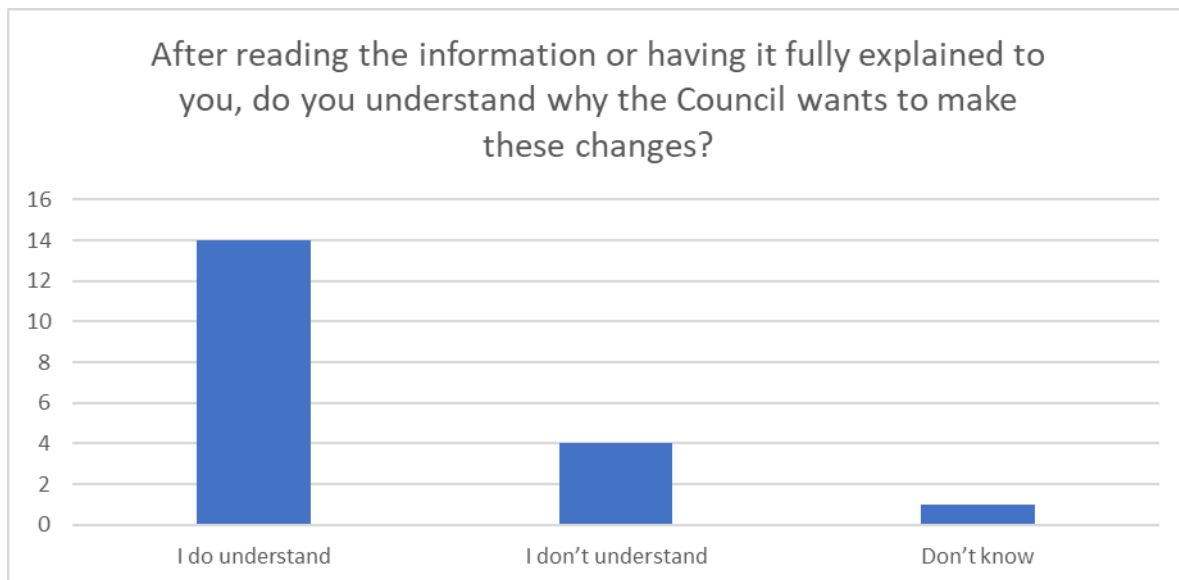
Why do they want to close a home when it's detrimental to people's lives?

It's devastating news for the people living here. At any age being told that you're losing your house is the worst thing that can happen to you. To lose your home, your friends, your routine when you're happy, to cost cut - there must be other ways of doing this. 'It's our home'.

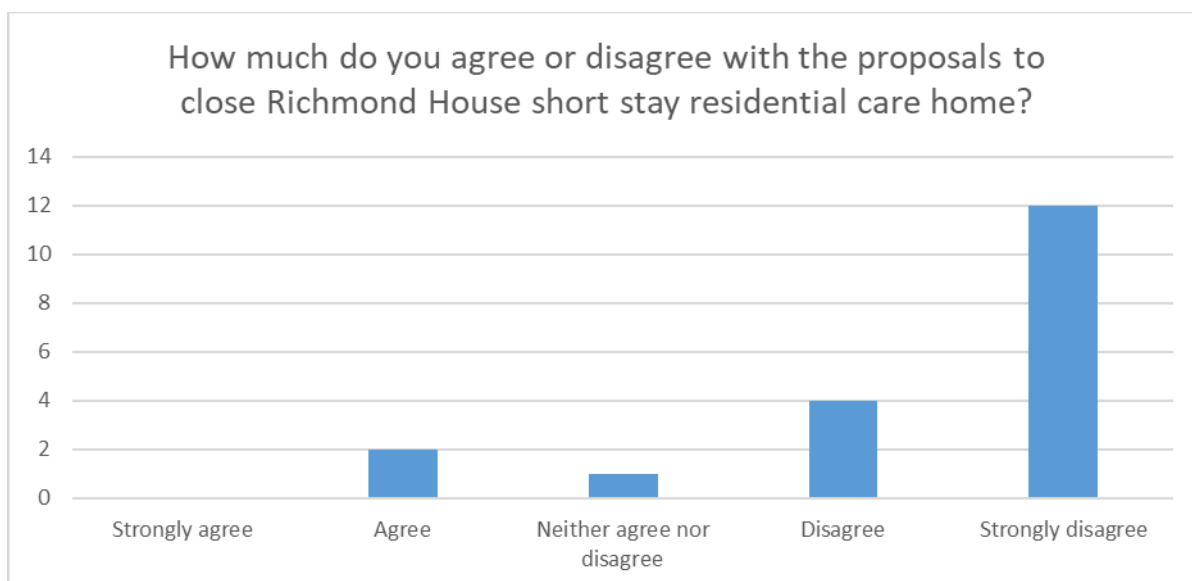
<p>If you close this home, there will be all the upheaval and upset. We're all elderly people.</p>
<p>I'm so impressed with the staff and home. It's one of the nicest homes I've been in. Everyone is so accommodating and welcoming. It's an incredible place. She thrives there. I sleep well knowing she's there. It's peace of mind for the family.</p>
<p>None.</p>
<p>Save Home Lea.</p>
<p>Leeds City Council have tried to close both care homes in Rothwell. Due to the lack of success in closing Dolphin Manor, they have changed their plans to close Home Lea instead. The statement saying that more people wish to have care in their own homes on the report is misleading. Many of the residents in Home Lea have slight dementia and have only been placed in a care home because they can no longer stay at home with carers. [REDACTED] has Parkinson's Disease and Parkinson's related dementia and needs 24 hour care. Having a warden in a flat would not fulfil her needs. She has experienced 3 local independent care homes where she has suffered falls, and in one of them neglect to the extent that she almost died of de-hydration due to the lack of care and constant use of agency staff who were not even aware of her situation.</p>
<p>I understand Council has budgets and cuts to make but through Covid 19 we have protected the elderly and vulnerable massively and now closure of ANY homes is devastating. I believe cuts for budgets could definitely be made in other ways. Let's not let our elderly and vulnerable down!</p>
<p>We want the residents to be alright because Home Lea House is such a lovely home. If the decision is made, we hope to be able to keep a job.</p>
<p>Home Lea is a happy home. Our residents love living here. They shouldn't have to face the stress and anxiety/worry that comes from this process. It will be so much upheaval if they have to move somewhere else, as they are vulnerable and should be living life stress and worry free.</p>
<p>I am very committed to my work and hard working. I am worried for the residents and for myself and my colleagues. I am worried about having to go for interviews at my age.</p>
<p>Home Lea House is a really good place to work. Staff are friendly and hard working. Residents are lovely and very supportive families. Also Rothwell community is amazing.</p>

Richmond House General Public Consultation, January to March 2021 - Survey Results
(19 Responses)

After reading the information or having it fully explained to you, do you understand why the Council wants to make these changes?		
I do understand	I don't understand	Don't know
14	4	1



How much do you agree or disagree with the proposals to close Richmond House short stay residential care home? Please tick one box.				
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
0	2	1	4	12

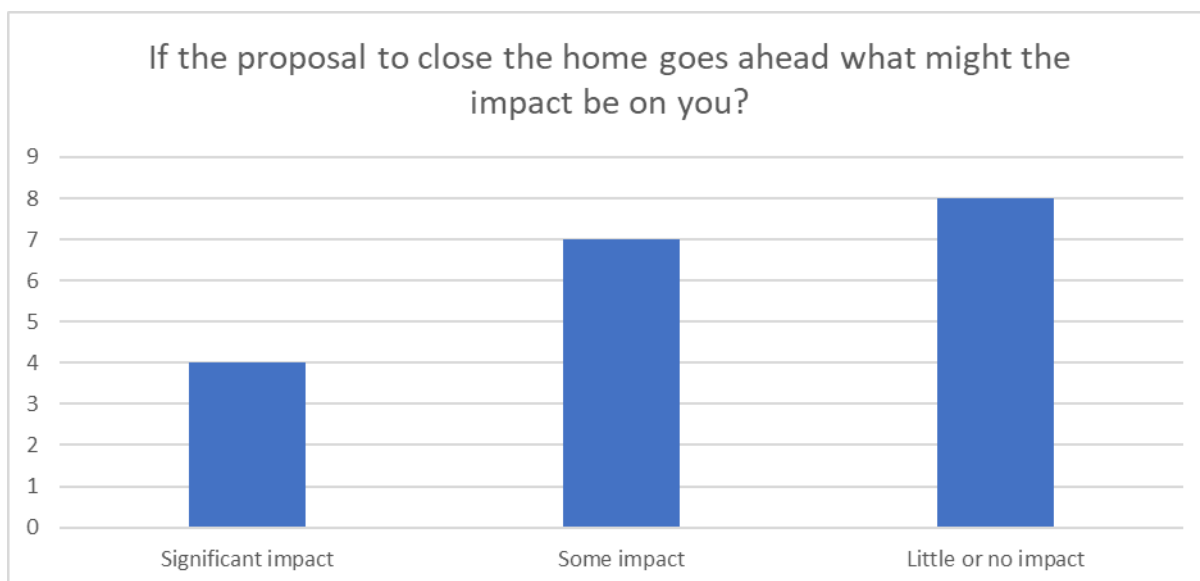


Please tell us the reason for your answer

<p>If the occupancy has been low for the past year, it's not being used and I agree could be closed to make savings, as long as existing occupants are moved or supported within home care. If it does close then I agree with what is being proposed.</p>
<p>The beds are needed. What would happen to those people who don't have the funds constantly required for care.</p>
<p>Whilst it initially sounds an extreme measure to save money, after reading the paper and levels of occupancy being below, 100% it does make economic sense. However, this must be balanced with the needs of the people requiring care.</p>
<p>I don't think closing a service to vulnerable people is a good move but I understand the reasons why the Council need to make budgetary cuts.</p>
<p>Short term care is essential to support carers.</p>
<p>There is no other facility like this in the west of the city. Family members of the residents may not be able to travel across the city to visit their loved ones meaning the resident may feel abandoned. This is not a good way to save cash! This will only put hardship on residents, future residents and all of their relatives.</p>
<p>Again LCC has priorities all wrong. Why should we care for the elderly when you want another silly cycle path? Why provide care for the elderly when you can raise Council Tax 3.99-4% year on year and blame the government for "cuts" when you get paid £100k annually salary wise? I strongly disagree with the closure of Richmond House. You have no idea what the people of the real world have to endure. No idea at all and you certainly have no idea about cost saving, given your silly road schemes/cycle super highway rubbish.</p>
<p>Where else in the area provides the same provision?</p>
<p>You don't explain how many people went through Richmond House during a year. If average occupancy is 62% presumably this is not unexpected for some term return to own home accommodation. If closed where do these people go? No doubt they will become more institutionalised in a home forever. This will increase council costs paying for long term care.</p>
<p>I put up a change.uk poll on the local Farsley Community What's On Facebook page and over 1200 signatures were obtained from members of the public objecting to the closure. It is a very much required facility in West Leeds and I am afraid to say that LCC have deliberately run the numbers down to try and show that it is not required. Richmond House is a far better facility than the one in Beeston and it is easier for relatives to access. LCC have tried this tactic before as they see this is valuable land for building on. From figures I have seen on savings it is very short sighted.</p>
<p>It has a wonderful track record of caring for people. Well respected in the community. We need to keep this home. Please rethink.</p>
<p>There are no similar facilities in this area but for some reason, it isn't being used in appropriate circumstances. ██████ was sent to Middleton, from Pudsey, for 10 weeks, ██████ drove there and back, 3 times each day, they have been married for over 60 years, they need each other, they have a big family but it isn't the same. Fortunately, he was physically and financially able to do this, I don't wish for others to be in this position. Look at why it isn't being used. Look at where our residents are currently being sent further afield, why and what this costs. Put energies into promotion and alignment to current, local needs. Work with ALL people, professional and public to find a way forward to keep Richmond House for its current demographic. The community respect this facility and will rally to support it.</p>

There is an ongoing need for respite facilities like Richmond House to allow people to recover outside of a hospital setting, to free those beds up especially in times of a pandemic.
A service that needs promoting and being allowed to be used to its full potential.
Short-term care helps recovering people to prepare for the next step without making them too reliant on others. It gives them a positive experience.
When our elected people make decisions re. savings, the research to put suggestions forward is made by unaccountable officers regardless of the impact on local services. Surely one cannot justify the employment of people higher up. Adult services who cost the tax payer yet provide no direct service, that's where I would begin. Councillors of any persuasion in times past were more involved and defended the vulnerable.
Over the years I have had several friends and relatives who have been grateful for the care and respite that Richmond House provides, both for patients and their relatives. Respite is the description of the facilities and that is what is provided. We are all getting older and these council care homes are getting fewer and fewer. The thought of a few weeks in there to get back on one's feet, is surely better than facing longer spells in hospital or a permanent care home. Try saving money in other ways. Stopping cycle lanes would be my choice for saving vast amounts of money. Care facilities are used significantly more than the cycle lanes and are much more in use than cycle lanes.
█ went to Richmond House about five years ago after I had broken my hip. I had two stays there and had physio and rehab before I returned to my own home. I was dealt with kindness, caring good humour from all there and because of their support I was able to return home. After that I have returned regularly for respite care so █ who looks after me can go on holiday. The care team have remained the same and treat me like an old friend. I feel comfortable there and enjoy going. It is a lovely place and from catering staff, cleaners and care staff, all are lovely. It is clean, a well-appointed home from home. Why would you want to close somewhere like that?

If the proposal to close the home goes ahead what might the impact be on you?		
Significant impact	Some impact	Little or no impact
4	7	8



Please tell us the reason for your answer
I live in Farsley, however have never had to visit the centre in question.
I do not have relatives with a need as yet.
I live in the locality but have no direct involvement with the care home.
I am not a user of the service.
The older population is increasing and we need services to meet need, especially in times of family breakdown/crisis.
At this stage I have not used the facility nor would potentially have use for it in the short-term - however I feel it is a very necessary facility for the west of the city.
My father is 90 years old, he is currently in hospital and has been admitted on two other occasions since July. He is at the stage where this provision would help him adjust from being in hospital and getting on his feet for going home.
We are all getting older and will need this service in the future.
Many of the people who use this facility are from Pudsey, Farsley, Calverley, Rodley, Bramley and Stanningley and it has easy access for friends and relatives to visit.
I may need this facility at some point but as treasurer of an elderly person lunch club, I know how important this local facility is.
To me at this time, none, although it has in the past affected my immediate family (see first response). It's not about me, it's about my community, which includes old as well as young. I know many older people and many people who have older family members. Richmond House would be ideal for many who find themselves in need of services, but they are sent elsewhere much further away. Many can't travel far so absence is enforced. This impacts others' health and is totally avoidable and a hidden cost.
I currently don't have anyone in my family that are in need of their services.
I live in the area and I have friends who live local and work in Richmond House.
I live round the corner from Richmond House. It would be an ideal venue if I had to recover from hospitalisation.
No service locally for the area, pressure on NHS, more deaths, increased pressure on families. As an older person, just imagine the Council's hands when they cannot fulfil a need!

My husband and I are in reasonable health and may not need to have care. We have a family unit that is strong but there are lots of elderly people that have no other means of care. For people to have to come out of hospital to an empty house must be terrible. I know that there can be care packages put in place but that is not the same as having someone around all the time.

It is one of the very few places that is affordable. A lot of other places charge a lot more money, have fancy features but the care is not as good. We cannot afford to go to some of these places anyway so [REDACTED] will not be able to have a holiday which she needs.

What could the Council do to reduce the potential impact?

Plan in advance!!! Ensure residents have a place to go before closure. Tell local residents plans for the building when it's closed. People do not like to see run down derelict buildings in this village and a lot of people will want to know what's happening to the site once it closes.

A phased approach to closing the care home must be done, taking into account the needs of all the residents, the staff and families affected.

Keep Richmond house open and consider alternative cuts elsewhere in the Council's services.

Look at other areas where they waste budgets.

Leave the facility alone, it is needed and fulfils a need to residents in the west of the city.

Don't close the care home!!!

Sell some of their empty premises and unused equipment.

Charge for the cost of the accommodation on a means tested basis. Alternatively offer the property as a community asset and get someone else to run the property as a need for this type of accommodation exists.

Keep it open for future generations of old people.

Keep this facility open and save money elsewhere.

Keep it open by understanding why it is low occupancy when the local need is so great then fix that problem.

Maintain funding and recognise its value.

Leave it open.

Make savings in other sections of their remit or raise Council Tax.

Use money it has in other areas to support this local service. Keep the service.

Keep places like Richmond House open and cut back on things like the previously mentioned cycle lanes. You can drive miles down the road between Leeds and Bradford without seeing a single cyclist. They cause more disruption for other road users and pedestrians.

Not close the place or offer places of a standard the same as Richmond House for the same money.

Please state if there is another viable approach which you believe should be considered?

Keep it open, develop it to have day services as well providing respite for carers.

As above.

Less spent on external services.

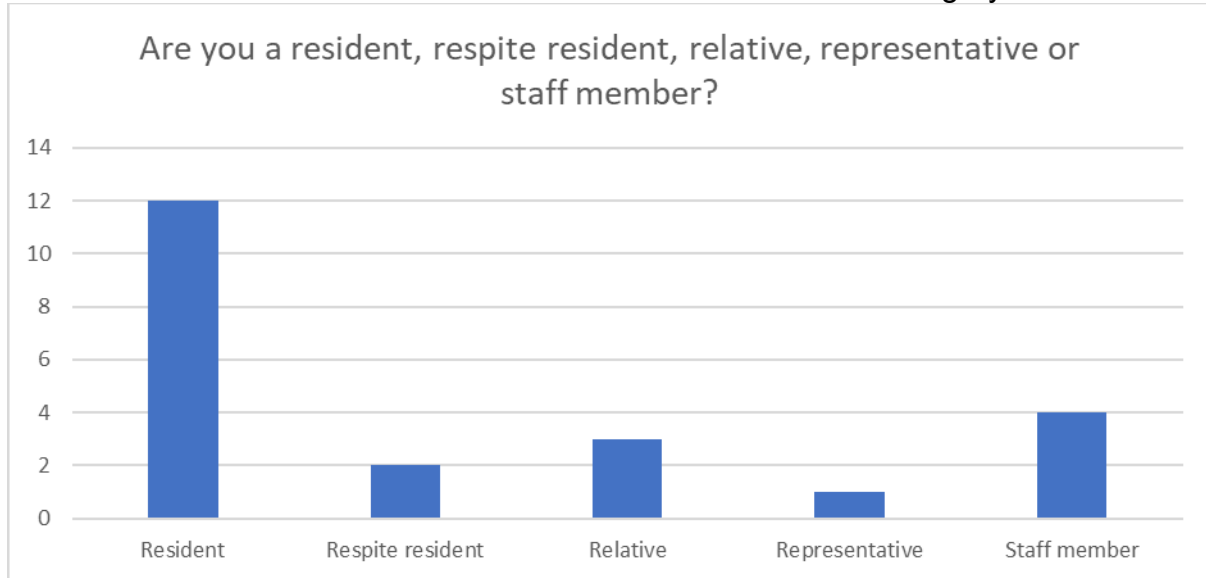
Stop wasteful spending on car parks, hotels and city of culture 2023 among other things! Look after your residents properly.....
You should look to scrap the pointless bus lane schemes, aimed at increasing car congestion for your precious bus contracts with First. Would save how many millions???
Transfer to another party to run it as a business.
From the amount of money they are saving, no. They could stop some of the other hair brain schemes they come up with, which quite frankly do not work but the Leader and other members think they look good.
Understanding what the issues are rather than killing the problem.
None.
As above.
As above.
How about not seeing it as a foregone conclusion in the first place. Look at a cost benefit analysis and determine how you can take a hard look at people's salaries in relation to a diminished service.
There is no other alternative. Neither [REDACTED] or [REDACTED] who is my carer can afford to pay more.

Finally, do you have any other comments?
Times have changed and people live at home longer. If the Council can close this home and offer people better care in home or a more equipped centre then I see no reason why it shouldn't be closed. Staff MUST be reassigned locally, however, I feel this is only fair if you decide to close the site. You must have alternative employment for those care staff.
No.
Look at wage costs for top posts - is it right that a fairly junior post in the administration pays a larger salary than those who run the country??
I think I've said all I need to.
Please think about our community and the care needed, especially for the older citizens.
If this property does close what is proposed for the site?
No.
Only to say a facility like this cannot and should not be replaced elsewhere.
How local needs will be met both to the patients and the needs of their families.
I hope the campaign to keep Richmond House and similar facilities open is a success.
If it closes, as you are planning, local people will draw attention to who it is across our city who are making these decisions and involve the press and MPs.
I think I have covered all my concerns.
Yes, I understand the Council has money problems but why close a well-run, well-staffed place. I am sure savings could be made in other ways. If the place isn't full all the time why not do something to ensure it is. Once people go there they want to go again. Where can people go to give carers a break that doesn't cost the earth? I suspect this is not a real consultation and that the decision has already been made, but I think you are wrong. You talk a lot about carers and looking after them but provide nothing for carers if they have no money, it's all talk. In addition, I got this form on 23rd March, closing date for consultation is 26th March. How on earth could I fill it in and post it back! I have had to get someone to type it for me, as I say you have already made the decision and are just pretending to go through the motions.

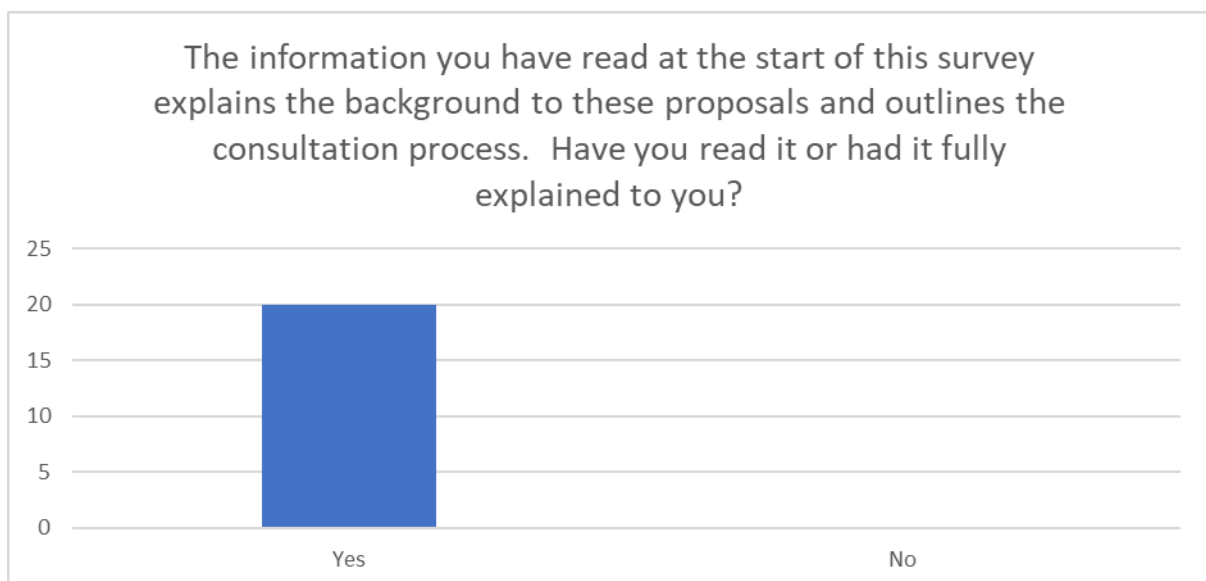
Richmond House Consultation, January to March 2021 - Survey Results (20 Responses)

Are you a?				
Resident	Respite resident	Relative	Representative	Staff member
12	2	3	1	4

Please note the answer to the above could be more than one category.

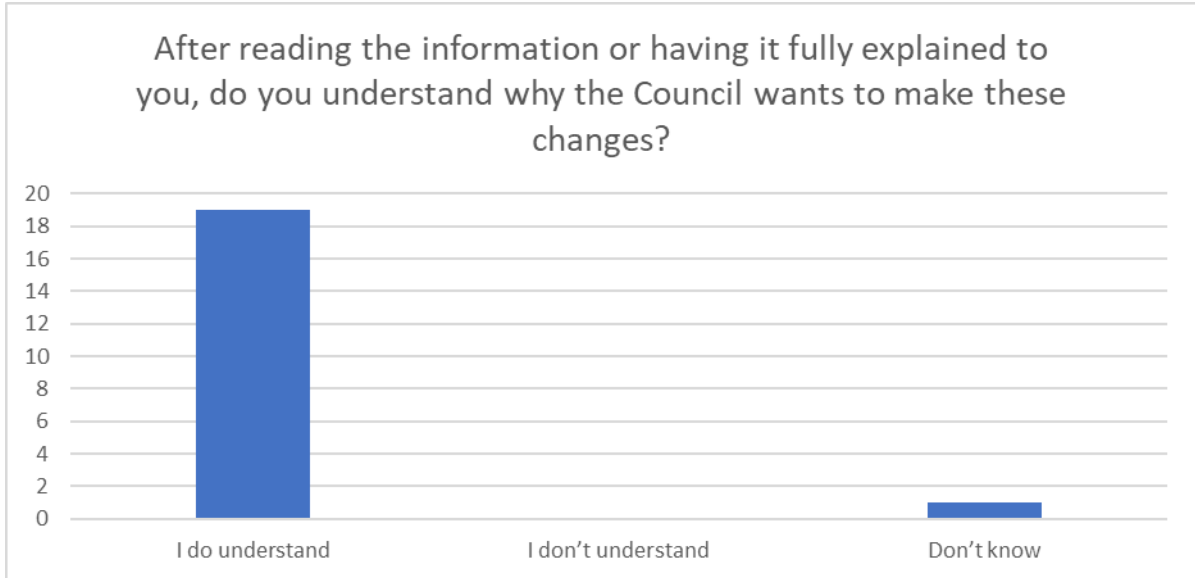


The information you have read at the start of this survey explains the background to these proposals and outlines the consultation process. Have you read it or had it fully explained to you?	
Yes	No
20	0



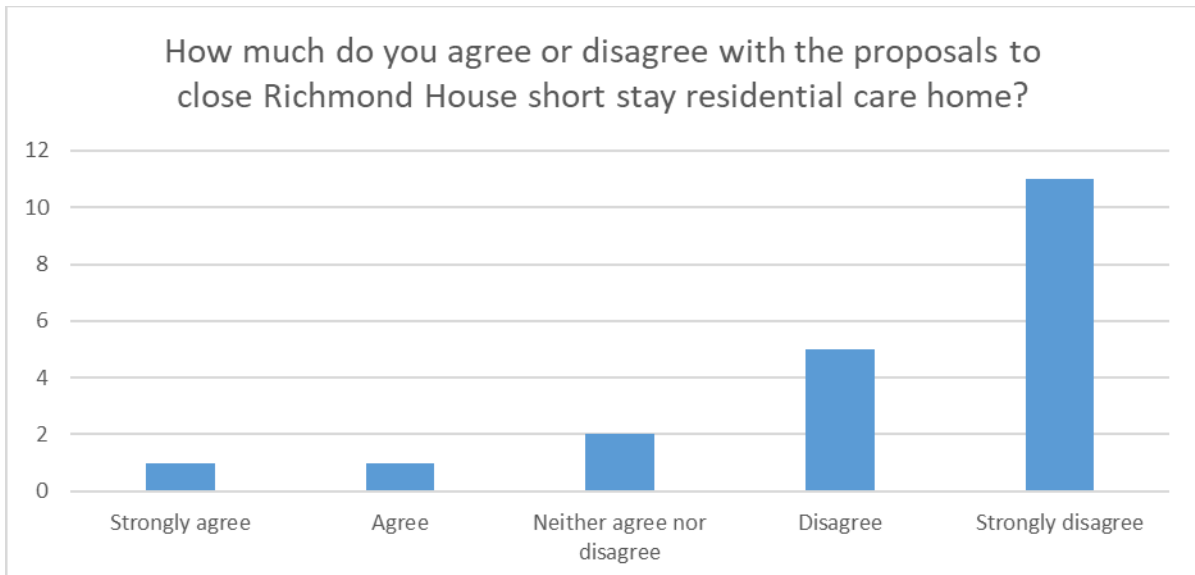
After reading the information or having it fully explained to you, do you understand why the Council wants to make these changes?

I do understand	I don't understand	Don't know
19	0	1



How much do you agree or disagree with the proposals to close Richmond House short stay residential care home? Please tick one box.

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
1	1	2	5	11



Please tell us the reason for your answer

I do not feel like Richmond House has been supported, not just through the pandemic,

but beforehand. As stated, only 60% of the beds were full, but it hasn't been taken into consideration about the residents we are getting in and staff numbers on the floor. We can have 10 residents and it can feel full due to individual needs. Nobody explained to staff about the change in residents we were receiving and the issues they had, or even ages. (Not elderly men and ladies - young people with serious mental health/alcoholics/drug addicts). If staff were updated and provided training for this, it would have been managed better. Richmond House has so much potential to be a 'safe place' if support to the home was given. Admissions were being held back due to the lack of this, especially when only x2 members of staff were allowed on the floor due to low numbers but dealing with high dependency residents. We all feel we have been given up on.

The staff are good and you get looked after well. It's a nice place to be.

Because there are a lot of unwell people in this place.

If you're in hospital you need somewhere to recuperate. It's a local home. Family can come and see you. It's not far to come. You get well looked after. If you need help, they're there all the time. The staff are all friendly. The other place I went to was all very old people. I want to live somewhere like this where there's staff all the time.

We don't want it to close. The staff are like family. I love it here. I love everything about it. It's a bit like a hospital and a home.

I came here because I was stuck in hospital for a long time. The staff here help me with washing myself, cleaning my room, making my meals. They got me new clothes. I need more help otherwise things go back to the same way. They will help me with that here.

It's up to the Council because it's a business. If you are not meeting your targets, it's no use moving forwards.

You never know when you might need a service like this and they aren't close together. People need this help and the staff are kind. It's a nice home.

Because things change. The Covid pandemic means we don't know what things will be like in 6 months. The care staff do a great job. I've never been in a place like this before. They work hard, make you feel comfortable and do the best they can.

Over 10 years we have struggled to get respite, which allows us to continue to care. Richmond House has been the most consistent, high quality service in the whole of Leeds for respite. It's the one service where I have peace of mind. The best care elderly frail people can have is with their family but quality respite is essential to keep this going. It's an easy target but very short-sighted in the long term. The people who use the service deserve continuity.

██████████ is familiar with the routine of a two week stay at Richmond House. It's local for ██████████ and I to pop in. The staff are great, ██████████ looks forward to 2 weeks over the Christmas period and 2 weeks in August which allows me to have a holiday with my family. It's a local home - the rest of the family is too far away. There's just me and ██████████ so it is local to us to take her there and back because she doesn't like travelling with taxis or other transport. We have tried other places and it is a lot more money and not as good quality.

It just needs to fill its rooms up. It's a nice home with friendly staff. When you come out of hospital and you can hardly walk like I could - they can handle it.

A decision has to be made. If it's not financially viable to keep it going then the residents will have to be dispersed amongst other homes. I have found it a good place, people try and do their best for you here.

They need to look after people. These people who work there are very helpful and will lose their jobs. The people who live there might end up on the streets. The people who live there are very poorly. The residents and staff deserve much better.

I understand the budget position and the occupancy at Richmond House has been low since I have been in post and I do believe the service can be provided in other ways. If the customers were permanent residents then I would perhaps hold a different opinion on the proposal but the customers here are short stay and do not have any ties to the service. They will all be moving on at some point.

Part of the information is about people going into permanent care at the start of the form. Given that affordable options for carers are reducing, there are so few places for respite across the city without a massive top-up. It means that, as a carer, you have very little, if any choice of where to go. Sitting services are increasingly expensive. For some people, the cost is a massive issue. There needs to be some way of getting a break to allow us to keep caring for people at home. There is a consistent, well-trained, person-centred staff group and [redacted] loves them all. It's provided very good care - [redacted] can go on holiday because she has full confidence that they will look after [redacted] well.

They want to save money. [redacted] will have nowhere to go. They shut all the centres down - even the new ones get shut down now. I've been in centres and a hostel and they flattened that down. People are alright here. The staff put you to bed and give you a bath or a shower. They help me.

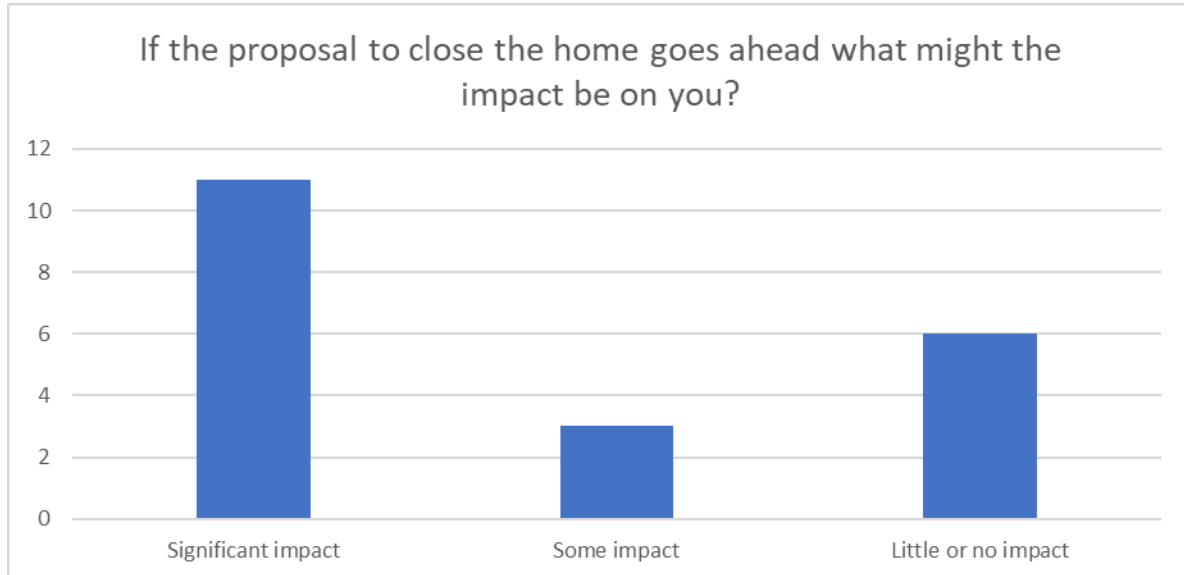
Richmond House is well known for being a caring well-run establishment. It doesn't have a quick turnover of staff. Many have worked at Richmond House for many years. Outside agencies have regularly commented at how we look after our customers with pride and full respect. I think it would be a shame to close a well-run highly committed and dedicated team/home down.

I do not agree at all and believe the Council is being very short sighted and denying people like [redacted] the local authority respite facility. 10 years ago [redacted] was assessed and I was assessed regarding care needs. [redacted] has dementia; arthritis; glaucoma; coeliac to mention a few of her ailments. These have only worsened over the last 10 years, including falls with broken bones (one in rehab - [redacted] as recent as yesterday at [redacted] the social worker at the time, assessed her needs as needing respite 42 days a year. The last year this service denied due to Covid. At no time has any social worker consulted me about the closure and given any useful information about any alternative local authority respite provision. Unpaid carers like me save the local authority thousands of pounds looking after disabled people. It is disgraceful that the local authority propose to cut this service, which is the one thing that I as [redacted] full time carer value more than anything. Until Covid it was a service that I utilised 100% and the staff provided excellent respite care for [redacted] unlike any provision.

I understand to what has been said about the closure, that old people do not want to be in such a setting which doesn't motivate them to still be alive. The building was built for nursing people, they, the rooms are not en-suite most of them that residents have to use commode or walk out of there to bedrooms to use toilets which are communal.

If the proposal to close the home goes ahead what might the impact be on you?

Significant impact	Some impact	Little or no impact
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Please tell us the reason for your answer

I worked so hard for this role. For 5 years I was on the local care force agency and this was the only home I came to where I felt at home. Only last year I got the position and I've never felt so happy and complete in what I did. The managers and staff are all so wonderful and approachable. The hours suited my life as I have a two year old. It would be such a huge shame and such a sad day if Richmond closes. I feel so passionate about it. It would impact on my life hugely.

I won't be here because I am going home but I still don't think it should be shut.

I like it here, I feel safe, I've got used to it.

I'm going to move on. I know it will take time. It all depends whether there is somewhere I can go from here. I'm wondering about where I'll go next.

I hope I won't still be here and they will have helped me move on. I'm waiting for my home to be cleaned.

There will be an impact for people who don't/won't/can't live privately. People would be worried about where they will go.

I'll be going back home, but if something happened in future, you might need it again. There's an impact on the other people, especially people who are here longer.

Because I don't know what happens next.

People who are full-time carers will hit a brick wall and won't be able to continue caring if they don't have trusted respite to be able to alleviate some of the pressure and allow for some time off. Respite has been the most valuable support the local authority has been able to give us. When the Green shut, I had great trouble finding another place, then we tried Yeadon and that shut. When we got to Richmond House, we were able to book regular respite and plan ahead, which we couldn't anywhere else. We have great anxiety that the service is just being withdrawn. The need for respite will increase, not decrease.

<p>██████ has dementia (and has had it for 10 years), has benefitted from the continuity from the team at Richmond House and has remembered and mentioned Richmond House to the hospital staff recently.</p>
<p>I will have to cancel the summer holiday with my children and be available 24/7 365 days of the year, unless alternative arrangements could be put in/be in place for summer and Christmas. At some times over the past year, because of Covid restrictions, they couldn't take ██████ anymore and I am desperate for some respite.</p>
<p>I won't be here. Other people will be.</p>
<p>I live on my own and my family aren't close by so it doesn't make much difference where I'm staying. To somebody else, it may make a big difference. Everybody has a different situation.</p>
<p>It's very bad to move ██████. The people who work with these people know the residents well. ██████ needs 24 hour care from people who understand ██████. People are poorly and will get more poorly and stressed and it's not right, especially at this time.</p>
<p>I am hopeful that if Richmond House does close I will be granted ELI and be able to take early retirement.</p>
<p>██████ says ██████ goes happily to the home and enjoys the care and support. ██████ can go away with confidence and know ██████ is okay - needs a break emotionally, physically and psychologically from caring (with peace of mind). ██████ wouldn't be able to go on holiday if the home were to close because ██████ wouldn't want to go anywhere else and the strain of caring would hugely increase.</p>
<p>I won't be here, will I? But other people were here before I came. I don't know if they would still be here.</p>
<p>There is no other Council home in this area. I live in a very isolated place with no means of transport as my husband has not long passed away. It would mean walking to catch two buses late at night/early morning. I would also miss the support of my friends/colleagues who I have worked with for many years.</p>
<p>It will 100% affect my ability to permanently care for ██████ and give such stress and ill health to myself and my family not being able to plan any break in my 100% care of ██████. I have other care commitments to ██████ too and what kept me going was knowing every few weeks I could plan for ██████ care to be taken over by a group of people who really understand ██████ care needs and responded appropriately. I believe the Council are targeting unpaid carers as an easy target for cuts. It is the case that no alternative provision from the local authority has been discussed with myself.</p>
<p>It will be a significant impact to my system because I am getting old and starting something new will be a good challenge for me. Anyway, when I joined the Council in 2008 I managed to upgrade myself educationally and gained an Honours degree in Youth and Community Development in 2012. I can work with young people in residential which will be good for me. However, 3 years ago I managed to gain a Diploma in Adult and Social Care which can be useful, hence I have duty of care and I can work with parents and their children.</p>

What could the Council do to reduce the potential impact?

The Council need to speak up. SUPPORT US! Listen to staff concerns, have some answers as to why we have never had a meeting about the clientele in, and when requested one, everyone is always too busy. Keep us open, supply us with the training and keep us in the loop.

Don't know.
Keep it open to help everybody. If they close this down, where's other people going to go.
This is the first time I've been in a home so I don't know what somewhere else would be like.
Provide another house for them with all the care needed (or send people back to their family with help by sending carers to their family house).
Don't close it. Keep people close to home and family. When [REDACTED] was in a council home and it closed, he had to go to [REDACTED] and it was awkward for family to get there.
Obviously finding somewhere adequate to move to, may be another care home.
Ensure that there is an equivalent service. I'd like to know what and where and have a plan in place. I'd rather that a facility which is working perfectly well was not closed. The demand for respite will not decrease. It's only going to increase with the effects of long Covid and also as Covid restrictions allow respite again, there will be a much higher need. People are waiting to have a break and are in great need of it to be able to continue caring.
Please keep it open, or make similar alternative accommodation. We would like to not be forgotten about and have the same respite times, the same cost and the same level of care.
They need to get some more clients.
The Council needs to do their best to make sure your needs are cared for.
It's not right to close the home. There is such a high quality of care.
Keep somewhere like Richmond House open or provide an alternative at local authority rates so carers can get a break (of a similar standard of care). Why couldn't it be used better as a hub? It's not known about enough, which makes it under-utilised. They used to have physios and OTs - given that hubs are bursting at the seams, why couldn't it be used that way?
I don't know.
Provide an immediate named local authority short term/respite provision that is guaranteed I will be able to use in the near future.
First I need my redundancy pay or Early Leavers if not then secondly, I need to work with young people, if possible not in another home with elderly people no. I am [REDACTED] [REDACTED] which will make sense for me for the 3 choices I have put across. Most importantly I am a single woman and I have never been on benefit since I came to the UK [REDACTED].

Please state if there is another viable approach which you believe should be considered?
We haven't been full because of the reasons I've stated. Fill us up, let us have more staff on shift, provide us with training and see what difference it can make.
There must be other ways to save money. The government should give the Council more money.
They could charge people to stay permanently. If they kept it open, they could make it into a permanent home and people could stop here all the time. I like it here and would stay here.
I don't know.

The Council needs to look at why they are not meeting their targets. Do they need to reduce the workforce or add more patients?
I've heard they've spent a lot on making changes in the city centre (pavements and cycle lanes). The Council needs to think more about other areas where people live.
The Council doesn't appear to have an option, the way that it's put here because the figures show a massive gap. It makes sense in a business sense but not for the people that live in the homes.
If you contacted all the respite customers from prior to Covid (over the previous year) you would find a higher need. What time frame was used to compile the statistics? There has been a freeze on respite so this has affected the occupancy figures over the last year. They should put the prices up for respite. It's much cheaper than [REDACTED] going into a home 24 hours.
None.
Why not let all the rooms out?
I don't know.
Disabled and poorly people need special help, especially at this time when people can be very low. The Council should keep places and good staff because these are the people who need it most.
Not a money-saving approach, but it could be better used. It's been refurbished and has great facilities.
I don't know.
Respite home.
I do not believe the local authority should reduce/stop any respite provision. It is short sighted and not cost effective in the long term. Us unpaid permanent carers gave Leeds local authority 13 billion pound a year as it is.
As for Richmond House, the best thing is to demolish it and build new housing or flats for elderly people to live. As for me, my Early Leavers and redundancy pay, that will be nice.

Finally, do you have any other comments?
Please listen to staff. We know better than anyone, it's so unfair during a pandemic especially. I have worked through the whole thing and my mental health has been hit hard. I know Richmond House is better than this. Thank you.
It's not fair on the staff.
No, because all the staff are nice and make you welcome.
While there's a pandemic (and all the time) it's a safe place. I'm worried about the staff and the other residents and where they will all go.
The staff are alright. They help me and make sure I get a shower and my tablets.
I like the service here. They are very respectful and they make the house like a family house. They don't treat you like a patient. They listen to your problems and advise you if you need it.
Where would you go if you closed this home? Would you have to go further and how would people visit? A lot of people haven't got cars. It will also affect people's jobs.
Although it might be a quick cut, if you look at what the local authority saves through having carers caring, that saves much more. Demand for respite won't decrease but demand for 24 hour care, which is more costly will increase as a direct consequence of short breaks being in shorter supply.

<p>We do our bit and although I get 2 weeks off here and there, I think we save the Council a lot of money. The time off we get is a godsend – we really need it.</p>
<p>Obviously, if you're closing somewhere, you're losing facilities, so it must be a difficult decision. I've found the care here has been very good. People are interested in you and your health. They're all doing their best.</p>
<p>Everybody should have rights and be well looked after.</p>
<p>The level of care is what is important. It's not about the building, it's about the care the team shows towards the residents (which is very individual and very personalised).</p>
<p>It's alright here. I like it.</p>
<p>I think it will be a very sad day when we close.</p>
<p>I am horrified at the poor level of care provided by the rehab centre that the local authority is using for people discharged from hospital (Green Lane). [REDACTED] [REDACTED] was a previous regular respite user of Richmond House.</p>
<p>My Early Leavers and redundancy pay please.</p>

4b) Home Lea House and Richmond House closure proposals

Consultation Submissions and Responses Please note names have been redacted.

	Submission	Raised By	Response
1.	<p>Why is it not possible to negotiate with the NHS to have therapeutic input at Richmond House again? This joint working of physiotherapists, occupational therapists, including one expert on splints, and a joint care manager, worked well with the care home staff? This is needed more than ever now for those people who are stuck in care homes waiting for (re-)assessment by social workers under the Care Act and/or Mental Capacity Act and new care packages to be put together to be able to go home. I know from personal experience that this is an even lengthier wait at the moment due to Covid restrictions.</p>	<p>On behalf of Leeds Hospital Alert</p> <p>At Outer West Community Committee meeting in February 2021</p>	<p>Richmond House did operate very successfully as an intermediate care resource (known at the time as Community Intermediate Care, CIC). However when the Clinical Commissioning Group (CCG) reviewed the Community Intermediate Care (CIC) service, they identified a different set of priorities for the Community Care Bed service. Leeds Adults & Health were successful in bidding to the new specification and secured, in partnership with Leeds Community Healthcare, two new nursing services and one residential service, in buildings owned by LCC across Leeds. The CCG will be reviewing their commissioned service in the next 18 months but at present have commissioned 227 beds across the city and are content that they have sufficient resource available to them.</p> <p>Continuing Health Care (CHC) nurses were not able to undertake assessments from March to August last year. As such, a number of individuals who were thought to be in need of Continuing Health Care funding in a nursing care setting were awaiting reassessment. Once the service was able to recommence, social workers worked with the CHC team to review/reassess everyone who was in that position, these assessments were concluded by 31st December 2020.</p> <p>Adults and Health are not seeing long wait times for independent home care packages, and there is a range of good quality residential care provision in the city, with 25 of the 35 homes within 5 miles of Richmond House CQC dementia registered.</p>

	Submission	Raised By	Response
2.	How many people, how long are they waiting, and how much is the Council paying for these people who are stuck in private homes waiting for re-assessment and packages of care? Couldn't this be spent on professionals for Richmond House instead?	On behalf of Leeds Hospital Alert At Outer West Community Committee meeting in February 2021	As described above, there was one group of people who were waiting for CHC assessment and during the period in which the CHC team were unable to assess, the CCG funded their care. In addition, the NHS have provided temporary funding to the CCG to support hospital discharge during the pandemic. The CCG have used this funding to commission a small number of community beds (nursing and residential) across the city, and as part of this Discharge to Assess process; people are supported to stay there while their needs are assessed and their care arranged at home or in another residential care or nursing home. Their needs are assessed very quickly and a sizeable proportion of the people who are discharged in this way, return home within a week to ten days.
3.	I was not reassured to learn of the large number of vacancies in private care homes in west Leeds as a measure of availability of places and stability of the market. Has Adults and Health done a survey to find out how many of these care home businesses will survive the pandemic?	On behalf of Leeds Hospital Alert At Outer West Community Committee meeting in February 2021	The 35 care homes within 5 miles of Richmond House are owned by 30 different providers; ranging from individual owners, small to medium enterprises through to large national providers. Adults and Health work closely with Leeds Care Association and care home providers to understand any pressures affecting the market, and have continued to do so throughout the pandemic to understand impact of Covid on cost pressures for care homes.
4.	Surely it is premature to plan the closure of Richmond House before a full study is done into the acknowledged gap in the need for places for people with complex needs, including dementia and nursing care, which Cath Roff said is being trialled in the 10 pioneering places at the South Leeds Recovery Hub?	On behalf of Leeds Hospital Alert At Outer West Community Committee	The pilot service at South Leeds Recovery Hub offers nursing provision for people with the most complex needs including people with dementia. Adults & Health previously reviewed different models of care and support that could be offered at Richmond House, however the size of the home made the cost per head prohibitive for investment by the CCG, which would be a requirement for the provision of this type of service.

	Submission	Raised By	Response
		meeting in February 2021	The Integrated Commissioning Executive has taken a number of reports which have attempted to model the needs of people with complex dementia and as a result the following service developments have been put in place, as detailed in the <i>Leeds Integrated Market Position Statement 2019-22</i> ; NHS development of intensive and responsive specialist support to care homes, an individualised approach to funding of care, including transitional support to leave hospital as well as long-term funding; and the development of training in 'leadership in dementia care.'
<p>5. “ Richmond House has a reputation second to none for supportive, person-centred and effective rehab care for older people.</p> <p>Successful rehab for older people coming out of hospital is extremely cost-effective for both the NHS and Social Care.</p> <p>The "market" in Care Home/Respite/Rehab accommodation is extremely unstable (and likely to be more so after the pandemic). If Richmond House closes, private provision is unlikely to meet these needs in future.</p> <p>When you break up a good staff team in a care home they are gone forever. ”</p>	<p>On behalf of Leeds Hospital Alert</p> <p>At Outer West Community Committee meeting 18th January 2021</p>	<p>Richmond House provides short stay residential care and respite provision. It has not provided rehabilitation services since 2017 when the service was de-commissioned by Leeds CCG.</p> <p>The CCG commission citywide Community Care Beds for rehabilitation. Adults & Health previously reviewed whether Richmond House could offer CCB provision, however the size of the home made the cost per head prohibitive.</p> <p><u>Care Home/Respite Alternative provision</u></p> <p>There are currently 6 people who access the respite service at Richmond House, to arrange a short break or an extended short day depending on the need of the individual and their family / carer.</p> <p>Respite beds are not commissioned as dedicated beds, instead a social worker will approach care homes at the time required, and if there is capacity, will spot commission a short break or extended short stay</p>	


Submission	Raised By	Response
		<p>depending on need.</p> <p>There are 21 care homes with a total of 932 beds in the Leeds Boundary within 5 miles of Richmond House. 16 are rated as good, one as outstanding and 4 are awaiting an inspection outcome. 14 are CQC dementia registered. 15 are residential, 2 are nursing and 4 offer both.</p> <p>There are a further 14 homes with a total of 723 beds within 5 miles of Richmond House but outside the Leeds boundary. 8 are rated as good, one as outstanding, 3 require improvement and 2 are awaiting inspection. 11 are CQC dementia registered. 7 are residential and 7 offer both residential and nursing care.</p> <p><u>Short Stay Residential Alternative provision</u></p> <p>There are 258 beds (not including Richmond House) across the city providing short term care and support, in addition to the at home services.</p> <p>There are 8 short term beds in services within 5 miles of Richmond House (all D2A beds). Hutton Manor (awaiting inspection), with 5 residential dementia D2A beds is 2.3 miles from Richmond House; St Luke's (to be inspected), with 3 nursing D2A beds is 2.5 miles from Richmond House.</p> <p>By comparison, there are 84 short term beds that are 6 miles or less from Richmond House, all at provisions rated as Good or To be Inspected,</p>

Submission	Raised By	Response																					
		<p>Between April and August 2020 occupancy rates in community care beds across the city ranged from 53% to 78%.</p> <p><u>Occupancy Rates at Richmond House</u></p> <p>Over the last three years, 11 individuals from the Farsley area (with postcode LS28 5) attended Richmond House. For the wider LS28 postcode area over the same time period 37 individuals attended (including the 11 above). Total number of individuals attending over that time period is 196. Of the 11, most stayed for between 2 and 41 days (one was 138 days) with an overall average stay of 30 days.</p> <table border="1" data-bbox="1173 715 1720 1278"> <thead> <tr> <th></th> <th colspan="2">Richmond House (built 1971)</th> </tr> </thead> <tbody> <tr> <td>monthly occupancy</td> <td>12.58</td> <td>63%</td> </tr> <tr> <td>Average 2016/17 occupancy</td> <td>14.83</td> <td>74%</td> </tr> <tr> <td>Average 2017/18 occupancy</td> <td>14.58</td> <td>73%</td> </tr> <tr> <td>Average 2018/19 occupancy</td> <td>11.42</td> <td>57%</td> </tr> <tr> <td>Average 2019/20 occupancy</td> <td>10.67</td> <td>53%</td> </tr> <tr> <td>Occupancy levels at 4 January 2021</td> <td>10</td> <td>50%</td> </tr> </tbody> </table>		Richmond House (built 1971)		monthly occupancy	12.58	63%	Average 2016/17 occupancy	14.83	74%	Average 2017/18 occupancy	14.58	73%	Average 2018/19 occupancy	11.42	57%	Average 2019/20 occupancy	10.67	53%	Occupancy levels at 4 January 2021	10	50%
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6. "Leeds UNISON believes it is because of Covid that the last 11 months Richmond House has been under used.	On behalf of Leeds Unison	<p><u>Occupancy rates at Richmond House.</u></p> <p>The home supports a citywide short term care and support offer</p>																					

Submission	Raised By	Response
<p>LCC upgraded Richmond House extensively in 2018 to ensure it was fit for purpose to accommodate residents comfortably. By closing Richmond house the money that was spent will be wasted.</p> <p>Richmond House was awarded a CQC rating of good.</p> <p>Leeds UNISON believes there may be an alternative to closing Richmond House. The alternative would be to turn it into a residential dementia care unit. The Green in Seacroft provided long term care for dementia patients, but this was closed by the Council. The closure of the Green was strongly opposed by Leeds UNISON at the time. LCC has only 10 specific beds for service users with Dementia care across the City. Caring for people who are suffering from dementia is a specialised job that requires skills, understanding, patience, and commitment. Leeds UNISON believe if Richmond House was opened as a Residential Care home specialising in dementia care this would give people who have family members suffering from dementia the reassurance that their loved ones were being cared for in a safe environment.</p> <p>If LCC go ahead with closing Richmond House this will be another important resource that will be gone from Farsley and the west of Leeds.”</p>	<p>At Outer West Community Committee meeting 18th January 2021</p>	<p>along with Community Care Beds. People are referred to a suitable short term provision based on their individual needs and preferences.</p> <p>Over the last three years, 11 individuals from the Farsley area (with postcode LS28 5) attended Richmond House. For the wider LS28 postcode area over the same time period 37 individuals attended (including the 11 above). Total number of individuals attending over that time period is 196. Of the 11, most stayed for between 2 and 41 days (one was 138 days) with an overall average stay of 30 days.</p> <p><u>Building Maintenance Work</u></p> <p>Since 2018, there has been £216,870 capital and revenue spend on Richmond House, in order to carry out essential maintenance works to ensure the building remains “wind and watertight” and suitable for the people residing there. This has included some larger works such as a new lift and replacement windows at Richmond.</p> <p>Richmond House is 50 years old (built 1971) and falls within the Grade B category which indicates stock condition is satisfactory and performing as intended but exhibiting some deterioration. Further long term capital investment in the region of £300 to £500k will be required to bring the building and facilities up to a good standard in order to comply with current legislation and support continued use as intermediary care facilities. Existing mechanical services are in need of attention to prevent major break down of the plants associated items along with upgrades to the electrical installation, wind and weathertight items and associated building works. Additionally the cost for full refurbishment is estimated to be £1.7m</p>

Submission	Raised By	Response
		<p>which far outweighs the spend in recent years.</p> <p><u>Alternative use as residential dementia care</u></p> <p>There is already a range of good quality residential care provision in the city, 25 of the 35 homes within 5 miles of Richmond House are CQC dementia registered. However, there is an undersupply of nursing provision for people with the most complex needs. To respond to this need, the council with partners is piloting this type of provision in the South Recovery Hub, which is possible as Leeds Community Healthcare provides the nursing care.</p> <p>Given the age of the building it may be uneconomical to remodel. Consultant Norfolk Property Services has stressed that refurbishment alone will not meet current statutory requirements and nationally described space standards due to the some corridor widths being too narrow and a number of bedroom sizes being too small. To meet this standard major structural and internal alteration will need to be carried out.</p> <p>High level refurbishment budget costings indicate that a capital spend of IRO £1.7m would be required to bring the property up to current required standard including nationally described space standards and to meet the minimum requirements set out in the Leeds Model for housing with care.</p> <p>Given the Gross Internal Area of Richmond House this would equate to approximately £1150 per sqm to refurbish against a cost of IRO £2000 per sqm for new build so on this basis the most cost effective approach would be new purpose built accommodation that will meet modern building standards and is more conducive to</p>

	Submission	Raised By	Response
			<p>health and wellbeing of residents.</p> <p>Delivering new housing with care provision in line with the current and future demand is one of the keys strategic drivers of the Better Lives Programme.</p> <p>LCC Design team have been commissioned to undertake preliminary site analysis and desktop capacity and constraint studies in order to understand options for re-provisioning of specialist accommodation should sites become available through asset realisation. This will provide indicative site capacity and compatibility with proposed future land uses. It is anticipated that this will be completed by end of January.</p>
7.	<p>Has a full impact assessment been done on the implications of the closure of Richmond House on current and possible future residents' physical and mental health and rehabilitation potential?</p>	<p>By Councillors in attendance</p> <p>At Outer West Community Committee meeting 18th January 2021</p>	<p>Full Equality, diversity, cohesion and integration impact assessments will be carried out as part of the consultation process. One will focus on the potential impacts to people using the service and their families/carers and one will be specific to organisational change impacting on the workforce for the staff affected.</p>
8.	<p>What evidence is there that the proposed future placements for people who would have gone to Richmond House will be any more effective and safe?</p>	<p>By Councillors in attendance</p> <p>At Outer West Community Committee meeting 18th</p>	<p>Richmond House has taken short term/step down placements directly from social workers and in some cases from hospital (LTHT and LYPFT). If Richmond House was not there anymore as a resource then other placements would be sought. Generally these would be in residential care homes offering good quality care.</p> <p>There are 21 care homes with a total of 932 beds in the Leeds Boundary within 5 miles of Richmond House. 16 are rated as good, one as</p>

	Submission	Raised By	Response
		January 2021	<p>outstanding and 4 are awaiting an inspection outcome. 14 are CQC dementia registered. 15 are residential, 2 are nursing and 4 offer both.</p> <p>(There are a further 14 homes with a total of 723 beds within 5 miles of Richmond House but outside the Leeds boundary. 8 are rated as good, one as outstanding, 3 require improvement and 2 are awaiting inspection. 11 are CQC dementia registered. 7 are residential and 7 offer both residential and nursing care).</p> <p>Over the last 3 years 196 individuals were admitted to Richmond House, on average 65 people per year, staying an average of 30 days. The current market for older people's residential care has capacity to absorb this demand.</p>
<p>9. The Council-employed hospital social workers are working with people in the 4 wards in Beckett Wing at St. James Hospital and Wharfedale General Hospital, outsourced to Villacare, which all "need improvement" according to the latest Care Quality Commission reports. Why not transfer directly to Richmond House, a "good" care home?</p>		<p>By Councillors in attendance</p> <p>At Outer West Community Committee meeting 18th January 2021</p>	<p>The service provided in the wards at LTHT is nursing care, whereas Richmond House provides residential care.</p> <p>Also, some of the people are only resident in the wards at LTHT for a few days whilst home care services are arranged; it wouldn't be appropriate to discharge from the hospital, admit to Richmond House, and then go home, all within a few days.</p> <p>There are significantly more beds in SJUH and Wharfedale than we could provide in RH and the CCG wouldn't fund non-nursing care provision.</p>
<p>Dear Rachel Reeves MP,</p> <p>Have you heard about the campaign to keep open Richmond</p>		<p> via Rachel</p>	<p><u>Consultation on potential closure</u> Richmond House is a 20 bedded residential service situated in</p>

Submission	Raised By	Response
<p>House care home at Farsley, which is run by Leeds City Council Adults and Health as a short term residential rehabilitation place (recovery hub for west Leeds), especially for people coming out of hospital?</p> <p>I think it is underused at present because it doesn't take people with dementia. I know from personal experience that some people are being placed in private care homes, paid for by the local authority, until the social workers are able to re-assess their needs and mental capacity to make decisions about their care, review their social care services, and put together a package of care.</p> <p>There appear to be even more delays in this process at the moment due to the effects of the pandemic. People often wish to return to live at home and it is very difficult to get enough home care, which has already largely been privatised in Leeds. This is especially difficult if you need more help in the evening or at night and/or you have dementia.</p> <p>The local authority appears to be outsourcing some of their services to private, profit-making care home companies when they have in-house services which could be utilised, with some change, in order to be able to take people with dementia, as happened with the South Leeds Recovery Hub.</p> <p>I am concerned that people may feel stuck in the system where they don't want to be, and Council Tax payers are not</p>	<p>Reeves MP, 26 Jan 2021</p>	<p>Farsley. The current service offer is short term care and support to people who require a period of recovery following a hospital admission. The service also offers support to people from the community to prevent hospital admission.</p> <p>A report to the Council's Executive Board in October 2020 highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the ongoing financial impact of Covid-19. The council is legally required to set a balanced budget therefore, a number of savings proposals have been put forward, including one for the proposed closure of Home Lea House Long Stay Residential Care Home in Rothwell, and the closure of Richmond House Short Stay Residential Care Home in Farsley, making savings annually of £1.531million as a contribution to the budget gap identified.</p> <p>On the 21st October 2020 Leeds City Council's Executive Board approved a period of consultation on a proposal for the closure of Home Lea House long stay residential care home and Richmond House short stay care and support service. The consultation period started on 4th January 2021 and will end on 26th March 2021. The findings of the consultation will be analysed and a report with recommendations will be presented to the Council's Executive Board in June 2021.</p> <p>For your information I have attached a copy of the brief sent to all Elected Members and MPs representing the affected ward areas, which includes all the information about the consultation; including timescales, options for participation, how to seek support to participate where needed and next steps following the consultation period.</p>

Submission	Raised By	Response
<p>getting value for money. It is very hard to visit or telephone friends and relatives in care homes at present to find out how they are and ask them what they want.</p> <p>I do hope that you can make some enquiries about this proposed closure and help with this campaign.</p>		<p><u>Short term services for people living with dementia</u></p> <p>Richmond House provides short stay residential care and respite provision. It has not provided rehabilitation services since 2017 when the service was de-commissioned by Leeds Clinical Commissioning Group (CCG). The CCG commission citywide Community Care Beds (CCBs) for rehabilitation. People are referred to a suitable short term provision based on their individual needs and preferences.</p> <p>There is already a range of good quality residential care provision in the city, and 25 of the 35 homes within 5 miles of Richmond House are CQC dementia registered. However, there is an undersupply of nursing provision for people with the most complex needs. To respond to this need, the council with partners is piloting this type of provision in the South Recovery Hub, which is possible as Leeds Community Healthcare provides the nursing care. Adults & Health previously reviewed different models of care and support that could be offered at Richmond House, including whether Richmond House could offer Community Care Bed provision, however the size of the home made the cost per head prohibitive for investment by the CCG.</p> <p><u>Supporting people to return home</u></p> <p>As detailed in the <i>Better Lives</i> strategy, the Council's strategy for people with care and support needs, we know from our discussions that many older people want a wider choice of accommodation and support options with, as much as possible, support being delivered in their own homes or in care environments like extra care housing.</p>

Submission	Raised By	Response
		<p>Wherever possible, people should be supported to return to their home as the first option. Adults & Health provide the SkiLs Reablement Service which offers short term intensive care and support for people in their home; supporting hospital discharge and hospital avoidance. Leeds Community Healthcare Neighbourhood Teams provide at home therapy services, such as Occupational Therapy, Physiotherapy and District Nursing. In addition, Adults and Health are not seeing long wait times for independent home care packages.</p> <p><u>Communicating with residents</u></p> <p>We are keen to ensure that we hear the voices of people who use the service and the consultation provides different options for participating, including; online, over the phone, via email, by posting a paper copy to us, or through a face to face discussion during their short stay. The consultation survey is also open to the general public via leeds.gov.uk.</p> <p>People only stay at Richmond House for only a short period of time and so current residents won't be affected by the proposed closure, however throughout the consultation period all residents are being informed about the consultation taking place and encouraged to participate if they wish to do so.</p> <p>The service also proactively engages customers in the use of technology (such as ipads, tablets, mobile phones, Alexa's) where appropriate, to keep in touch with loved ones during their stay. In addition window visits, garden visits and use of in-door pods have enabled choices to suit customers in being able to communicate with one another.</p>
Rothwell has two high quality performing council-run care	Cllr Stewart	Based on supply and demand analysis, Rothwell has an oversupply

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homes. Dolphin Manor has been put forward as alternative to Home Lea house, however Dolphin Manor has previously been brought to Executive Board for closure. At that time we were told that Dolphin Manor had worse facilities than Home Lea House. Has the council decided to withdraw from in-house provision altogether?	Golton at Outer South Community Committee meeting	<p>of 119 residential care home beds. There is sufficient alternative local supply if Home Lea House were to close.</p> <p>Regular rolling stock condition surveys are carried out, Home Lea House is 20 years older than Dolphin Manor and is a smaller home.</p> <p>My professional recommendation as the Director of Adults and Health is that should Home Lea House and Richmond House care homes be approved for closure, that no further council run care homes should be put forward for decommissioning. This would enable the council to retain flexibility in the face of any potential future challenges and retain expertise.</p> <p>This would mean Dolphin Manor, along with Knowle Manor (Morley South) and Spring Gardens (Otley and Yeadon) would be retained in the city as council-run care home provision</p>
<p>The independent sector care provision is precarious.</p> <p>What is the occupancy in independent sector provision?</p>	Cllr Stewart Golton at Outer South Community Committee meeting	Occupancy figures can be provided if requested, they do change on a regular basis.
Could social care reserves be used to keep Home Lea House open for another year and work with the community to keep it open?	Cllr Stewart Golton at Outer South Community Committee meeting	Reserves could be used to keep the home open for a further year but this would not resolve the need for the council to make recurrent revenue savings as part of delivering a legally balanced budget.
I am writing on behalf of Rothwell Neighbourhood Forum to register its opposition to proposals that could see the Home Lea House Long Stay Residential Care Home in Rothwell	On behalf of Rothwell Neighbourhood	<p><u>Closure proposals</u></p> <p>As outlined in the report to Leeds City Council's Executive Board in</p>

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<p>threatened with closure.</p> <p>This is a particularly unsatisfactory state of affairs when one recognizes the success of the existing provision, as illustrated by the most recent CQC report, and in particular the comments contained within the report allied to the “outstanding” designation of the Home in terms of caring for its residents.</p> <p>A rough analysis of all the care home facilities on the CQC web site that have been subject to inspection, and are within 10 miles of Rothwell, reveals that out of 243 facilities only 8 are better rated than Home Lea and another 6 are rated the same. In other words Home Lea is, from a rating perspective, in the top 6% of facilities in the immediate area.</p> <p>On the basis of this information and bearing in mind that this is a local authority home, it is extremely difficult to understand why it is being targeted for closure, other than what is perceived to be a financial imperative.</p> <p>It is important that within a local community there is a robust provision in respect of this type of care, especially recognizing local demographics which show that the number of people in the community above the age of 65 is considerably in excess of the figure for Leeds as a whole and above the average figure for England (Source Leeds Observatory).</p> <p>It therefore appears to be short sighted in the extreme to</p>	<p>Forum</p>	<p>October 2020 and at the Outer South Community Committee Meeting on the 15th March 2021, the key driver for the proposal to close Home Lea House long stay residential care home is due to the Council facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic which is unprecedented.</p> <p>The Executive Board report in October report highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the ongoing financial impact of Covid-19. The council is legally required to set a balanced budget therefore, a number of savings proposals have been put forward, including one for the proposed closure of Home Lea House Long Stay Residential Care Home in Rothwell, and the closure of Richmond House Short Stay Residential Care Home in Farsley, making savings annually of £1.531million as a contribution to the budget gap identified.</p> <p><u>Quality of Care</u></p> <p>The high quality of care and support provided at Home Lea House is absolutely acknowledged. However, the need for residential homes is decreasing within Leeds and where this resource is required to meet people’s needs, there is a well-developed independent sector care home market.</p> <p>There are 14 care homes within five miles of Home Lea House, including a Council-run home, that are CQC registered as Outstanding (1), Good (9), and Requires Improvement (4). Of the 10 homes that are rated as Good or Outstanding, six offer residential</p>

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<p>remove a facility of clear quality from an area with a population where demographics suggest an ever increasing requirement for its services. Reliance on underfunded private provision is not a comprehensively sustainable solution.</p> <p>The local nature of such facilities is also considered extremely important and a home where residents are still within the body of the community is a valuable consideration and makes it less likely that people, requiring the care the home provides, might have to be relocated to other areas. This must surely be something that residents appreciate notwithstanding access for family and relatives etc. If there is one thing that the last year has made clear it is that this category of provision is very much needed and services of this type must be retained notwithstanding the pressure on local authority budgets. A report by the Director Adults and Health prepared for a recent meeting of the Outer South Committee establishes one of the reasons cited for the proposed closure of Home Lea House ,notwithstanding purported changes to models of care and financial considerations, is the age of the building. Surely it is the quality of the care provision that is paramount.</p> <p>The model of care argument within the aforementioned report is understood, but not fully accepted and while a strategy that maximises independent living facilities is welcomed, the question of those with greater dependency and requiring the present model of care is not very clearly</p>		<p>care, four offer both residential and nursing care. Eight of the homes are listed by the CQC as offering specialist Dementia provision.</p> <p>If a recommendation for closing Home Lea House was made and approved, no-one will have their care taken away or their level of support reduced.</p> <p><u>Capacity of alternative provision</u></p> <p>The 10 care homes rated as Outstanding or Good within five miles of Home Lea House total 501 beds. Occupancy at care homes can vary from week to week; as of 11th March 2021 occupancy rates at those homes ranged from 44% to 95% with an average occupancy of 79%. The council has two residential care homes situated in Rothwell, Dolphin Manor has 35 beds and on average achieved 67% occupancy during 2020-21.</p> <p>The Rothwell ward area has an oversupply of residential care provision by 120 beds. The Council's Extra Care Supply & Demand Model calculates anticipated future demand for residential, nursing and extra care provision, taking into account proposed population changes to 2028 at a ward level, and suggests there is sufficient capacity of alternative good quality provision.</p> <p>Delivering new housing-with-care provision in line with the current and future demand is one of the key drivers of the Better Lives Strategy (which is the Council's strategy for people with care and support needs) and Adults & Health continue to work alongside the Housing Growth Team to identify suitable sites for extra care housing.</p>

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<p>addressed. There is also a suggestion in the report that Dolphin Manor in Rothwell is an alternative provision option. It is not long since that Dolphin Manor was identified for closure, but which due to local opposition was retained and it is therefore difficult to have long term confidence in such a strategy.</p>		<p>In January 2019 Leeds City Council appointed a delivery group made up of Ashley House Ltd, Morgan Ashley LLP and Home Group to deliver four Extra Care schemes on Council owned sites in Leeds including Windlesford Green in Rothwell. The Windlesford Green Scheme will deliver 64 units of Extra Care housing with anticipated start on site in June 2021.</p> <p>The 14 care homes within 5 miles of Home Lea House are owned by 11 different providers. These range from individual owners, small to medium enterprises through to large national providers. Adults and Health work closely with Leeds Care Association and care home providers to understand any pressures affecting the market, and have continued to do so throughout the pandemic to understand impact of Covid on cost pressures for care homes.</p> <p><u>Quality of the Building</u></p> <p>Home Lea House (built 1964) is a substantially older building than Dolphin Manor (built 1987) with a shorter remaining asset life which will require significant capital investment in the near future in order to bring the building and facilities up to an acceptable standard that complies with current legislation.</p> <p>Dolphin Manor is currently performing as intended and requires only minor improvements. The property condition report for Home Lea House and projected component life expectancy and renewal costs indicate more substantial investment would be required which may be uneconomical given the remaining asset life.</p> <p>In addition, Dolphin Manor is the larger home and the building is suitable for dementia provision which is why it attracted investment</p>

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		<p>from Leeds Clinical Commissioning Group (CCG) for a proof of concept short term dementia care pilot. Home Lea House by contrast is not suitable for dementia provision.</p> <p><u>Dolphin Manor</u></p> <p>As discussed at the recent Outer South Community Committee meeting on 15th March, my professional recommendation as the Director of Adults and Health is that should Home Lea House and Richmond House care homes be approved for closure, that no further council run care homes should be put forward for decommissioning. This would mean Dolphin Manor, along with Knowle Manor (Morley South) and Spring Gardens (Otley and Yeadon) would be retained in the city as council-run care home provision.</p>
<p><u>Re the proposed closure of local authority care homes but of Richmond House in particular</u></p> <p>I'm writing on behalf of Leeds Unison retired members group to urge Leeds City Council to rethink plans to close two residential care homes, one of which provided invaluable short stays and respite care.</p> <p>1. The moves to shut community facilities runs counter to the current proclaimed intent in the local and regional integrated care partnerships to frontload support in the community and take pressure off secondary/hospital care. Some of us remember times when Leeds Social Services were</p>	<p>On behalf of Leeds Unison Retired Members Group</p>	<p>1: The moves to shut community facilities</p> <p>As detailed in the <i>Better Lives</i> strategy, the Council's strategy for people with care and support needs, we know from our discussions that many older people want a wider choice of accommodation and support options with, as much as possible, support being delivered in their own homes or in care environments like extra care housing.</p> <p>Wherever possible, people should be supported to return to their home as the first option. Adults & Health provide the SkiLs Reablement Service which offers short term intensive care and support for people in their home; supporting hospital discharge and hospital avoidance. Leeds Community Healthcare Neighbourhood Teams provide at home therapy services, such as Occupational Therapy, Physiotherapy and District Nursing. In addition, Adults and Health are not seeing long wait times for independent home care</p>

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<p>able to provide older people and their families with much needed breaks and convalescence by the coast but these facilities are long gone. Richmond House is the only local authority home left which provides vital respite care for people and their families. As we come through what we hope is the worst of the pandemic, with many of an estimated eight million informal carers stretched to the limit, we should be seeking to provide many more short stays to help reinvigorate and sustain older people and family carers, not closing what little is on offer.</p> <p>2. The closure of local authority residential provision means that more people will be directed to private homes which have no accountability to local people, are obliged to prioritise profit over care, often pay below the minimum wage, offer little training and poor conditions of service for staff, as well as being inherently unstable. The larger providers who have been hoovering up smaller concerns, tend to build big to maximise economies of scale, even though most people would prefer to live in smaller cosier, neighbourhood facilities. There is also some evidence to suggest that large private chains of homes have been less safe in the pandemic. The</p>		<p>packages.</p> <p><u>Short Term Services</u></p> <p>Richmond House provides short stay residential care and respite provision. The CCG commission citywide Community Care Beds for rehabilitation. Adults & Health previously reviewed whether Richmond House could offer CCB provision, however the size of the home made the cost per head prohibitive. The CCG will be reviewing their commissioned service in the next 18 months but at present have commissioned 238 beds across the city and are content that they have sufficient resource available to them.</p> <p>In addition, the NHS have provided temporary funding to the CCG to support hospital discharge during the pandemic. The CCG have used this funding to commission a number of community beds (nursing and residential) across the city (currently 97 beds), as part of this Discharge to Assess process, although this is reviewed on a regular basis. People are supported to stay there while their needs are assessed and their care arranged at home or in another residential care or nursing home. Their needs are assessed very quickly and a sizeable proportion of the people who are discharged in this way, return home within a week to ten days.</p> <p><u>Short Break / Respite Services</u></p> <p>There are currently 6 people who access the respite service at Richmond House, to arrange a short break or an extended short stay depending on the need of the individual and their family / carer.</p>

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<p>Office for National Statistics report on the impact of coronavirus on care homes in May to June this year found a lower incidence of infections in care homes which pay sick pay and a higher incidence amongst those employing agency workers and workers who work across multiple sites.</p> <p>Rather than shrinking the public sector we would like to see the Council doing exactly the opposite, seeking to take private providers of social care and support into public ownership.</p> <p>3. We are also concerned that the NHS seems to be calling the shots on what the City Council provides, as we understand that a proposal was put forward for Richmond House to continue to provide care, support and rehabilitation but Leeds Clinical Commissioning Group deemed the costs too high. Presumably what are regarded as high costs include complying with the minimum standards embodied in Unison's ethical care charter, unlike private providers. The imbalance of power between Local Authorities and the NHS is reflected in proposals in the recent Health White paper which seem to view social care's primary role as handmaiden to health, keeping the pressure off hospitals and facilitating speedy discharge. It is worrying that the White paper proposes to relegate the weight of local authority</p>		<p>All local authority in-house homes offer respite bed places as well as Richmond House.</p> <p>Respite beds are not commissioned as dedicated beds, instead a social worker will approach care homes at the time required, and if there is capacity, will spot commission a short break or extended short stay depending on need.</p> <p>There are 21 care homes with a total of 932 beds in the Leeds Boundary within 5 miles of Richmond House. 16 are rated as good, one as outstanding and 4 are awaiting an inspection outcome. 14 are CQC dementia registered. 15 are residential, 2 are nursing and 4 offer both.</p> <p>There are a further 14 homes with a total of 723 beds within 5 miles of Richmond House but outside the Leeds boundary. 8 are rated as good, one as outstanding, 3 require improvement and 2 are awaiting inspection. 11 are CQC dementia registered. 7 are residential and 7 offer both residential and nursing care.</p> <p>Other options are also available such as community based short breaks, or a personal budget to arrange a short break that suits the carer and the cared-for person. This could be through various organisations such as private home care agencies, charities or community interest companies.</p> <p>2: The closure of local authority residential provision means that more people will be directed to private homes</p> <p>As noted above, of the 35 care homes within 5 miles of Richmond House, 24 have a CQC rating of Good and two have a rating of Outstanding.</p> <p>The 35 care homes are owned by 30 different providers; ranging</p>

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<p>power into subsidiary ICS Boards and private providers are given significant opportunity to skew the agenda by being offered seats at the same table. It is also of concern that that despite the emphasis on joint working and seamless support between health and social care there seems to be a degree of "pass the parcel" going on regarding the responsibility for the growing group of people with dementia who need substantial support.</p> <p>4. We do want to see a radical transformation of social care and support in which residential care would play a much smaller part but now is not the time, in the middle of a pandemic to start rushing into restructuring which can't easily be undone. Developing flexible alternatives for independent living and building inclusive communities where everyone has a access to a full life needs to be done in full and transparent partnership with people who use support services, their families and neighbourhoods and takes time and care. It also needs to start from what people want and what works best not from what is the cheapest option.</p> <p>5. We appreciate that the Council is facing gross</p>		<p>from individual owners, small to medium enterprises through to large national providers. In terms of the size of the homes, 9 have 30 or less beds, 17 have between 31 and 60 beds, and 9 have over 60 beds.</p> <p>As detailed in the <i>Leeds Integrated Market Position Statement 2019-22</i> the Adults and Health Care Quality Team delivers proactive, targeted support around providing care to regulated care providers in the city. The purpose of the team is to improve quality of care for those citizens of Leeds receiving care in the city as measured against success criteria, such as the percentage of CQC Good rated care homes, improved feedback from residents and families etc. Initially working with Care Home sector the team gives care home providers in Leeds access to a responsive support and specialist advice and guidance network committed to improving quality of life for older people receiving care through regulated services in the city and thence improved CQC ratings and feedback. The overall quality of independent sector provision in Leeds has been steadily improving with 83% of all registered provision now rated good or outstanding.</p> <p>In addition, the Leeds CCG Quality team is an established team within Leeds CCG that supports the maintenance and improvement of quality in care homes with nursing beds, through the use of targeted support (in collaboration with LCC or independently through contract processes). Quality improvements are also further supported through Commissioning for Quality and improvement (CQUINs) built in to contracts and monitored as part of that process, which helps to further incentivise defined improvements.</p>

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<p>underfunding from a Government who have little commitment to public services and finds it hard to take a stand on its own. However Leeds is by no means on its own and if all councils bow down under government pressure, who speaks up for local people? Strong Labour Councils like ours could put their foot down and appeal to the public for support. Covid has made many people realise that the marginalisation of older and disabled people in our society and the undervaluing of care and support workers, which is the other side of the same coin is all wrong. This is a great opportunity to make a stand and insist that we all start building a better future.</p>		<p>3: We are also concerned that the NHS seems to be calling the shots</p> <p>As noted above, the size of Richmond House made the cost per head prohibitive for investment by the CCG for CCB provision. It does have a responsibility to ensure value for money in what it commissions.</p> <p>The Department for Health and Social Care White Paper: <i>Integration and Innovation: Working together to improve health and social care for all, Feb 2021</i>, provides a basis for further consultation and discussion with interested or affected groups; and Leeds Adults and Health, the different political parties in Leeds, and other organisations, will contribute as appropriate to shape the Health and Care Bill that will be presented to Parliament.</p> <p>The Integrated Commissioning Executive has taken a number of reports which have attempted to model the needs of people with complex dementia and as a result the following service developments have been put in place, as detailed in the <i>Leeds Integrated Market Position Statement 2019-22</i>; NHS development of intensive and responsive specialist support to care homes, an individualised approach to funding of care, including transitional support to leave hospital as well as long-term funding; and the development of training in 'leadership in dementia care.'</p> <p>4: We do want to see a radical transformation of social care and support in which residential care would play a much smaller part but now is not the time, in the middle of a pandemic</p> <p>Adults and Health work closely with Leeds Care Association and care home providers to understand any pressures affecting the</p>

Submission	Raised By	Response
		<p>market, and have continued to do so throughout the pandemic to understand impact of Covid on care homes.</p> <p>As detailed in the Better Lives Strategy we know from our discussions that many older people want a wider choice of accommodation and support options with, as much as possible, support being delivered in their own homes or in care environments like extra care housing.</p> <p>It is equally important that we make sure our services can still meet the city's changing requirements for care, with more people living independently for longer and a rising number of people needing specialist care, such as those who develop dementia.</p> <p>Adults and Health is therefore continuing to invest in the development of extra care accommodation and, as outlined above, to work with NHS partners to model service developments to support people with dementia and complex needs.</p> <p>5: We appreciate that the Council is facing gross underfunding As outlined in the report to Leeds City Council's Executive Board in October 2020, the key driver for the proposals to close Home Lea House long stay residential care home and Richmond House short stay residential care home are due to the Council facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic which is unprecedented.</p> <p>The Executive Board report in October report highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the</p>

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		<p>ongoing financial impact of Covid-19. The council is legally required to set a balanced budget therefore, a number of savings proposals have been put forward. The proposed closures of the two care homes in question would make savings annually of £1.531million as a contribution to the budget gap identified.</p> <p>My professional recommendation as the Director of Adults and Health is that should Home Lea House and Richmond House care homes be approved for closure, that no further council run care homes should be put forward for decommissioning. This would mean Dolphin Manor, along with Knowle Manor (Morley South) and Spring Gardens (Otley and Yeadon) would be retained in the city as council-run care home provision.</p>
<p>GMB Submission regarding the closure of Osmondthorpe Day Centre, Richmond House Farsley and Homelea House in Rothwell. <u>Osmondthorpe</u></p> <p>GMB have several concerns about the closure of Osmondthorpe Day Centre, whenever a community provision is lost you will almost certainly lose customers, out of the 125 customers who were accessing the day centre prior to the pandemic only 67 have registered an interest in alternative provision. The reasons that management have given us why only 67 have registered an interest is varied, from shielding to family issues and Health, we asked if the travelling had an impact, and the management response was that 50% of customers will be travelling more and 50% travelling less. We also have concerns about the alternative</p>	<p>On behalf of GMB</p>	<p>Thank you for contacting on behalf of GMB, with regards to the proposals relating to consultation on the future of Home Lea House long stay residential care home, and Richmond House short stay residential care home. I can also confirm receipt of the petition on behalf of GMB Members.</p> <p>Your submission on behalf of GMB will be considered along with all consultation submissions and the findings of the consultation will be analysed and a report with recommendations will be presented to the Council's Executive Board in June 2021. In the meantime I have responded on the points you raise in your letter below.</p> <p>To clarify, Osmondthorpe Day Centre is not part of this consultation. The report to Leeds City Council's Executive Board in October 2020 regarding the proposals in relation to Osmondthorpe Day Centre were classified as Business As Usual, therefore not subject to mandatory consultation, and this position was accepted by the Executive Board at that time. Under recommendation (b) of the</p>

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<p>provision in respect of disability access, Holt Park, Stocks Hill, Calverlands and Wykebeck Day Centres, are the alternative offer and two of the centres we do not believe are big enough to accommodate the PI (Physical Impairment) service, Stocks Hill and Calverlands we do not believe will have the space for many wheelchair users including personal care access which must be resolved prior to accepting customers in the alternative sites. Osmondthorpe was the only provision in an already deprived demographic in the Burmantofts and Richmond hill Ward, we think this is a huge loss and having visited the Day Centre regularly and seeing such a wonderful provision first-hand it is a sad day to think this facility is no longer part of this community, it should also be noted that there is an impact to those who provided services such as wood making and gardening, many relationships will have been formed over many years and that needs to be factored in as the consistency can impact on a service users mental health and wellbeing.</p> <p><u>Industrial Issues</u> The staff from Osmondthorpe have all been redeployed across the Adults service; this has caused a lot of anxiety and uncertainty as the roles are not permanent and their future unknown at least 5 members of staff are just floating in other services. Some staff have added anxieties about driving across the city and these anxieties need to be taken into consideration when realigning those staff. We also have concerns that travel expenses are currently not being paid as the previous</p>		<p>report Executive Board was requested to “Note the ‘Business as Usual’ savings and that decisions to give effect to them shall be taken by the relevant Director or Chief Officer in accordance with the Officer delegation scheme (Executive functions)”.</p> <p>Whilst a formal consultation process is not required, conversations with existing service users at Osmondthorpe day centre in relation to their individual care and support plans have taken place. In addition, I and other Senior Officers have met with local Elected Members and the Executive Member for Children, Families and Adult Social Care and we are working with them to answer their questions on this matter. They in turn are seeking the views of local community groups. The points your raise with regards to Osmondthorpe Day Centre will be considered as part of the significant operational delegated decision and associated EDCI impact assessment. In the meantime I have responded on the points your raise in your letter below.</p> <p><u>Osmondthorpe Day Centre</u> There are 103 people registered with the service at Osmondthorpe, of which 67 people have to date re-engaged with the service. Other people are receiving welfare calls and/or a digital offer. As restrictions lift and people feel more confident we will see more people return to a building base and/or community group.</p> <p>People registered with the service live across Leeds, therefore some people may travel further whilst others travel less as they choose which services and activities they wish to attend; this tends to be with friendship groups.</p> <p>Stocks Hill is used by the Pottery and Art Groups and the service</p>

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<p>line manager is not at work and nobody had taken over that responsibility, GMB do not believe this is acceptable on top of an already stressful situation and we are ensuring that this is rectified and that when any service change occurs, we do not find it acceptable that they must wait for additional travel expenses to be paid. There is concern from both groups of staff; Complex Needs and the Physical Impairment service about aligning roles and how this will work going forward, there will be a mix of pay grades and an uncertainty about if their roles will change. We would like the management team to prioritise the future for the service to relieve some anxieties.</p> <p><u>Homelea House</u> The decision to propose closure of a residential care home that has a current good CQC rating overall and outstanding for care is a travesty, the alternative LCC provision in Rothwell is Dolphin Manor which scored good overall but required improvement on safety when previously inspected, Dolphin Manor only has 9 current vacancies and 16 customers current live in Homelea, we are informed by management that the families are already requesting a place at Dolphin Manor and we have concern that not all families will have a place for their relative. We know there is considerable opposition to this closure in the community and it is not surprising. We are wholly opposed to the closure of Care Homes especially in the middle of a pandemic, the crisis in care is widely publicised and the pandemic has shone another light of public vs private when it comes to</p>		<p>has an accessible toilet facility. Calverlands has a registered Changing Place facility and a sizable extension built at the back of the building. Health and Safety risk assessments are reviewed to ensure suitability of any building base to be used for services / activities proposed to operate from them, along with the EDCI Assessment to consider impacts and mitigations for all those affected by the change in service delivery.</p> <p>Wykebeck complex needs centre is council run and is 1 mile away from Osmondthorpe day centre. There are also local Neighbourhood Networks, along with other charitable and community group organisations. The Workers Education Association provided groups/activities and when guidance allows will be providing these groups at the other building bases including Holt Park Active.</p> <p>The services and activities that people attend are linked to the goals within their individual support plans, and we will continue to work with people to ensure these goals can be met. When guidance allows, the organisations that provide services and activities will be providing these at the other building bases.</p> <p><u>Staff at Osmondthorpe</u> The management team is currently working closely with the Day Opportunities staff to engage them in shaping how the service will look moving forward. All staff have been extremely flexible with some staff covering the critical services, these staff will begin to return to their substantive roles as the number of customers attending services increases. The aim is to ensure staff have a substantive base and minimum travel where possible. The difficulty with staff claiming expenses has now been resolved and briefings</p>

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<p>managing a crisis. 84% of all care homes are in the private sector now, the sector is now so heavily fragmented created by the 2012 Health and Social Care Act that it was always going to a logistical nightmare when having to respond to a pandemic, when run by the local authority you can regulate and provide a consistent approach. When you allow too much customer choice you remove the ability to monitor effectively. If only all the money handed out to Serco for a disastrous test and trace system had been distributed to the NHS and Local Authorities, and then there was the PPE scandal which ultimately caused unnecessary deaths. Whenever we are about to lose a public care provision, we sigh a deep sigh as we all know that once it has gone it is never coming back. We urge the authority to rethink this decision.</p> <p><u>Richmond House</u> This was the least surprising to see on the executive board paper as the GMB have been raising concerns over many months/years with management that numbers within the home have been kept low to justify any potential closure and although we cannot evidence this it is a belief all the same. There is no other provision within the locality and customers will have to travel a lot further to access future care in either the East or South of the city. The provision allows for high quality respite when leaving hospital prior to returning to their home. The home has had over 100k spent on renovation only a few years ago including new windows, decorating and a new heating system and has a very good reputation in</p>		<p>have been delivered to support staff with the self-service function. There is no intention to change job descriptions or pay grades but to support staff to work to these as effectively as possible. Priority and time is being given to the Day Opportunities service to ensure that staff feel supported and included in the future developments.</p> <p><u>Home Lea House</u> <u>Provision at Dolphin Manor</u> Dolphin Manor (35 beds) is the larger of the two homes and the building is suitable for dementia provision which is why it attracted CCG investment for the proof of concept short term dementia care. Home Lea House by contrast is not suitable for dementia provision.</p> <p>In addition, in terms of life expectancy and renewal costs, Home Lea House is a substantially older building than Dolphin Manor, with a shorter remaining asset life which will require significant capital investment in the near future in order to bring the building and facilities up to an acceptable standard that complies with current legislation and supports continued use as an intermediary care facility. Dolphin Manor is currently performing as intended and requires only minor improvements.</p> <p><u>Option to move to Dolphin Manor</u></p> <p>As the closest alternative in-house provision, Dolphin Manor has 35 beds and on average achieved 67% occupancy during 2020-21. Home Lea House has 29 beds and currently has 16 residents. The service have received two enquires to date from relatives of residents at Home Lea House about availability at Dolphin Manor. Those relatives are happy to wait until the Executive Board decision in June, and should the decision to close go ahead, they understand</p>

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<p>the community. GMB as above would urge the authority to reconsider this decision.</p> <p><u>Industrial Issues at Homelea and Richmond House</u> Some staff have applied for ELI in the knowledge that the closures of these homes are looming, some have taken the opportunity to leave early as it is their wish to do so but some tell us that they have applied as they do not want to be deployed elsewhere and travel further and start a whole new role elsewhere. The worry about alternative work when your workplace is proposed to close is huge even when given assurances that alternative work will be sought as we live in an uncertain economic climate and this worry cannot and must not be underestimated. We will support our members through this process but want the authority to recognise the upheaval placed upon those front-line workers who have been at the forefront of a pandemic whilst worrying about contracting the virus and taking it home to their loved ones, it is so sad that instead of commending their work they are having to consider either leaving a role they have worked in for years or move across the city to keep their job.</p> <p>Please accept this submission on behalf of GMB members and representatives and the wider community we serve.</p>		<p>the need for a social work re-assessment at that time. The Leeds CCG commissioned 10 beds at Dolphin Manor to trial discharge to assess short term care for people with dementia as a proof of concept. This will have concluded by the time any Home Lea House residents may be looking to transition there.</p> <p>In addition, we know from previous closures that some residents choose to move closer to their family, also that upon assessment some residents needs have changed and they require a move to nursing care provision.</p> <p>Should the recommendations to Executive Board in June post consultation be for the closure of Home Lea House, residents and their families / carers would be fully supported by the assessment and transition social work team, in accordance with the Care Guarantee, to ensure they choose an alternative home that meets their individual needs.</p> <p><u>Care Home Market</u></p> <p>As outlined in the report to Leeds City Council's Executive Board in October 2020, the key driver for the proposals to close Home Lea House long stay residential care home and Richmond House short stay residential care home are due to the Council facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic which is unprecedented.</p> <p>The Executive Board report in October report highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the ongoing financial impact of Covid-19. The council is legally required to set a balanced budget therefore, a number of savings proposals have been put forward. The proposed closures of the two care homes in question would make savings annually of £1.531million as</p>

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		<p>a contribution to the budget gap identified.</p> <p>Adults and Health work closely with Leeds Care Association and care home providers to understand any pressures affecting the market, and have continued to do so throughout the pandemic to understand impact of Covid on care homes.</p> <p>As detailed in the Better Lives Strategy we know from our discussions that many older people want a wider choice of accommodation and support options with, as much as possible, support being delivered in their own homes or in care environments like extra care housing.</p> <p>It is equally important that we make sure our services can still meet the city's changing requirements for care, with more people living independently for longer and a rising number of people needing specialist care, such as those who develop dementia.</p> <p>Adults and Health is therefore continuing to invest in the development of extra care accommodation and, as outlined above, to work with NHS partners to model service developments to support people with dementia and complex needs.</p> <p><u>Independent Provision</u> The need for residential homes is decreasing within Leeds and where this resource is required to meet people's needs, there is a well-developed independent sector care home market. Following concerted work by the Council's Care Quality Team from 2017 the number of residential care homes rated good or outstanding is now 83%.</p>

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		<p>There are 13 independent care homes within 5 miles of Home Lea House (not including Dolphin Manor). 7 offer residential care, 6 offer residential and nursing. 1 home is CQC rated Outstanding, 8 rated Good, 4 rated Requires Improvement. Those rated Outstanding or Good total 501 beds. 7 of those rated Outstanding or Good are listed by CQC as offering specialist Dementia provision.</p> <p>My professional recommendation as the Director of Adults and Health is that should Home Lea House and Richmond House care homes be approved for closure, that no further council run care homes should be put forward for decommissioning. This would mean Dolphin Manor, along with Knowle Manor (Morley South) and Spring Gardens (Otley and Yeadon) would be retained in the city as council-run care home provision.</p> <p><u>Richmond House</u> Leeds has a range of services to meet the needs of people who require some type of intervention to either support them to reach their optimum with therapeutic and recovery focused support to return home or to undertake an assessment to support their longer term needs.</p> <p>Richmond House provides short stay residential care and respite provision. The CCG commission citywide Community Care Beds for rehabilitation. Adults & Health previously reviewed whether Richmond House could offer CCB provision, however the size of the home made the cost per head prohibitive. The CCG will be reviewing their commissioned service in the next 18 months but at present have commissioned 238 beds across the city and are content that they have sufficient resource available to them.</p>

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		<p>In addition, the NHS have provided temporary funding to the CCG to support hospital discharge during the pandemic. The CCG have used this funding to commission a number of community beds (nursing and residential) across the city, and as part of this Discharge to Assess process, currently 97 beds although this is reviewed on a regular basis. People are supported to stay there while their needs are assessed and their care arranged at home or in another residential care or nursing home. Their needs are assessed very quickly and a sizeable proportion of the people who are discharged in this way, return home within a week to ten days. All are citywide services, with beds offered to individuals and their families / carers based on those closest to home and also the particular needs of the individual. Over the last three years, 11 individuals from the Farsley area (with postcode LS28 5) attended Richmond House. For the wider LS28 postcode area over the same time period 37 individuals attended. This is out of a total of 196 individuals admitted citywide in that time period.</p> <p>The closest commissioned Community Care Bed service is Green Lane Intermediate Care Centre in Armley, with 49 beds, which is 5.5 miles away.</p> <p><u>Short Break / Respite Services</u></p> <p>There are currently 6 people who access the respite service at Richmond House, to arrange a short break or an extended short day depending on the need of the individual and their family / carer. All in-house care homes offer two or three respite beds.</p> <p>Respite beds are not commissioned as dedicated beds, instead a social</p>

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		<p>worker will approach care homes at the time required, and if there is capacity, will spot commission a short break or extended short stay depending on need.</p> <p>There are 21 care homes with a total of 932 beds in the Leeds Boundary within 5 miles of Richmond House. 16 are rated as good, one as outstanding and 4 are awaiting an inspection outcome. 14 are CQC dementia registered. 15 are residential, 2 are nursing and 4 offer both.</p> <p>There are a further 14 homes with a total of 723 beds within 5 miles of Richmond House but outside the Leeds boundary. 8 are rated as good, one as outstanding, 3 require improvement and 2 are awaiting inspection. 11 are CQC dementia registered. 7 are residential and 7 offer both residential and nursing care.</p> <p>Other options are also available such as community based short breaks, or a personal budget to arrange a short break that suits the carer and the cared-for person. This could be through various organisations such as private home care agencies, charities or community interest companies.</p> <p><u>Building Maintenance Work</u> Since 2018, there has been significant capital and revenue spend on Richmond House, in order to carry out essential maintenance works to ensure the building remains “wind and watertight” and suitable for the people residing there. This has included some larger works such as a new lift and replacement windows at Richmond.</p> <p>Richmond House is 50 years old (built 1971) and falls within the Grade B category which indicates stock condition is satisfactory and performing as intended but exhibiting some deterioration. Further</p>

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		<p>long term capital investment in the region of £300 to £500k will be required to bring the building and facilities up to a good standard in order to comply with current legislation and support continued use as intermediary care facilities. Existing mechanical services are in need of attention to prevent major break down of the plants associated items along with upgrades to the electrical installation, wind and weathertight items and associated building works. Additionally the cost for full refurbishment is estimated to be £1.7m which far outweighs the spend in recent years.</p> <p><u>Staff at Home Lea House and Richmond House</u></p> <p>The commitment and quality of care provided by staff at both homes is acknowledged. I also fully acknowledge that hearing that your workplace is being consulted on for closure can create uncertainty and worry.</p> <p>As outlined in my first letter to advise staff of the recommendations to consult on the closure of Home Lea House and Richmond House in October 2020 ahead of Executive Board, I also feel it is important that staff are made aware of the recommendations directly from me and at the earliest opportunity. Keeping staff informed and involved is expected as a good employer. It is also integral in helping to provide a greater sense of security on the part of customers.</p> <p>Staff have used their experience and expertise in helping to coordinate the consultation process by assisting service users and their relatives to understand, consider and take-in the information. Managers have arranged one to one sessions with the residents and their relatives, and with staff, using the consultation survey to identify any impact the proposed future changes may have on individuals. This is much appreciated, it will help us to manage and reduce these impacts where</p>

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		<p>possible, and I'm sure I can rely on staff's ongoing professionalism and commitment to our residents.</p> <p>The programme will work closely with Trade Unions to ensure employee matters are given high priority and regular meetings with trade unions have and will continue to take place. Nothing will happen suddenly or unexpectedly, either for staff or for residents and we will continue to work with Trade Unions to support affected staff through this process.</p>
<p>I write on behalf of Carlton Village Neighbourhood Forum to register an objection to proposals that threaten the closure of this Residential Care Home in Rothwell.</p> <p>Scrutiny of the most recent CQC report for this home together with other local homes reveals that Home Lea House is in the very top tier of performers in our area and that in terms of caring for its residents it is rated as outstanding. With this status in mind, it is hard to accept why this particular home is being identified for closure other than purely on financial grounds. Logically one would hope that closures should be directed at less well performing facilities.</p> <p>A report authored by the LCC Director of Adults and Health points to the assessment that the building is less new than the other home in Rothwell. However Home lea has the benefit of ensuite facilities and is specifically configured for the type of resident that it accommodates. Dolphin Manor which it is understood has less bespoke facilities was subject to closure itself some time ago and local opposition was</p>	<p>On behalf of Carlton Village Neighbourhood Forum</p>	<p><u>Closure proposals</u></p> <p>As outlined in the report to Leeds City Council's Executive Board in October 2020 and at the Outer South Community Committee Meeting on the 15th March 2021, the key driver for the proposal to close Home Lea House long stay residential care home is due to the Council facing financial challenges unlike anything in the past, and in addition, the financial impact of the Covid-19 pandemic which is unprecedented.</p> <p>The Executive Board report in October 2020 highlighted a budget gap in 2021/22 of £118.8 million, of which £59.1 million is due to the ongoing financial impact of Covid-19. The council is legally required to set a balanced budget therefore, a number of savings proposals have been put forward, including one for the proposed closure of Home Lea House Long Stay Residential Care Home in Rothwell, and the closure of Richmond House Short Stay Residential Care Home in Farsley, making savings annually of £1.531million as a contribution to the budget gap identified.</p> <p><u>Quality of Care</u></p>

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<p>instrumental in negating this action. This does not appear to be strategy that the local community can have confidence in.</p> <p>The report also highlights changes to models of care citing the requirement by residents for increased independence. This is a laudable aim and will certainly benefit residents who fall into a category where sustainable levels of independence are possible. However, more dependent patients surely require a more intensive and constant caring service such as that made available at Home Lea.</p> <p>The idea that a top quality bespoke well run home should be subject to the proposed action, with the potential to divert patients to a home not specifically designed for the types of dependent resident living at Home Lea is wrong and short sighted.</p> <p>The provision of homes for dependent people is very important and something that local demographics and medical trends suggest will need to be enhanced and not reduced.</p> <p>It is important that within a local community there is a robust provision in respect of this type of care, especially recognizing local demographics which show that the number of people in the community above the age of 65 is considerably in excess of the figure for Leeds as a whole and above the average figure for England (Source Leeds Observatory). It therefore appears to be short sighted in the</p>		<p>The high quality of care and support provided at Home Lea House is recognised and acknowledged. It is the staff group that has helped the home gain its good rating and we hope to retain the staff and redeploy them into other council services so their good practice is not lost.</p> <p>The need for residential homes is decreasing within Leeds and where this resource is required to meet people's needs, there is a well-developed independent sector care home market.</p> <p>There are 14 care homes within five miles of Home Lea House, including a Council-run home, that are CQC registered as Outstanding (1), Good (9), and Requires Improvement (4). Of the 10 homes that are rated as Good or Outstanding, six offer residential care, four offer both residential and nursing care. Eight of the homes are listed by the CQC as offering specialist Dementia provision. If a recommendation for closing Home Lea House was made and approved, no-one will have their care taken away or their level of support reduced.</p> <p><u>Quality of the Building</u></p> <p>Dolphin Manor is a single story building with small kitchenettes and lounges leading from each corridor giving a homely feel. People are able to live and dine in smaller groups as opposed to having meals in a large dining area with 29 other people. By comparison, Home Lea House is a two storey building with three large communal living spaces and a large dining room away from the bedrooms. It is more difficult for people to live in small friendship groups because of the layout of the building.</p> <p>There are en-suite facilities to most bedrooms at Home Lea House (Dolphin Manor does not have en-suite facilities), however, they are</p>

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<p>extreme to remove a facility of clear quality from an area with a population where demographics suggest an ever increasing requirement for its services.</p> <p>The local nature of such facilities is also considered extremely important and a home where residents are still within the body of the community is a valuable consideration and makes it less likely that people, requiring the care the home provides, might have to be relocated to other areas. This must surely be something that residents appreciate notwithstanding access for family and relatives etc. If there is one thing that the last year has made clear it is that this type of provision is very much needed and services of this type must be retained notwithstanding the pressure on local authority budgets.</p> <p>A report by the Director Adults and Health prepared for a forthcoming meeting of the Outer South Committee establishes the reasons for the proposed closure of Home Lea House and notwithstanding purported changes to models of care and financial considerations, the age of the building is cited as a reason for the action to be taken. Surely it is the quality of the care provision that is paramount.</p> <p>The model of care argument within the aforementioned report is understood, but not fully accepted and while a strategy that maximises independent living facilities is welcomed, the question of those with greater dependency and requiring the present model of care is not very clearly</p>		<p>small and not fully accessible (not large enough to accommodate a wheelchair).</p> <p>The environment at Dolphin Manor lends itself to supporting people with dementia and additionally has an exit from the living area on the garden space. It is the larger of the two homes and is suitable for dementia provision, which is why it attracted investment from Leeds Clinical Commissioning Group (CCG) for a “proof of concept” short term dementia care pilot. Home Lea House by contrast is not suitable for dementia provision.</p> <p>Home Lea House (built 1964) is a substantially older building than Dolphin Manor (built 1987) with a shorter remaining asset life which will require significant capital investment in the near future in order to bring the building and facilities up to an acceptable standard that complies with current legislation.</p> <p>Dolphin Manor is currently performing as intended and requires only minor improvements. The property condition report for Home Lea House and projected component life expectancy and renewal costs indicate more substantial investment would be required which may be uneconomical given the remaining asset life.</p> <p><u>Capacity of alternative provision</u></p> <p>The 10 care homes rated as Outstanding or Good within five miles of Home Lea House total 501 beds. Occupancy at care homes can vary from week to week: as of 11th March 2021 occupancy rates at those homes ranged from 44% to 95% with an average occupancy of 79%. The council has two residential care homes situated in Rothwell, Dolphin Manor has 35 beds and on average achieved 67% occupancy during 2020-21.</p> <p>The Rothwell ward area has an oversupply of residential care</p>

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<p>addressed. The suggestion is that Dolphin Manor in Rothwell is an alternative option of provision. It is not long since that Dolphin Manor was identified for closure, but which due to local opposition was retained and it is therefore difficult to have long term confidence in such a strategy.</p>		<p>provision by 120 beds. The Council's Extra Care Supply & Demand Model calculates anticipated future demand for residential, nursing and extra care provision, taking into account proposed population changes to 2028 at a ward level, and suggests there is sufficient capacity of alternative good quality provision.</p> <p>Delivering new housing-with-care provision in line with the current and future demand is one of the key drivers of the Better Lives Strategy (which is the Council's strategy for people with care and support needs) and Adults & Health continue to work alongside the Housing Growth Team to identify suitable sites for extra care housing of which there is an undersupply, and also with Health partners and independent care sector providers for the development of more nursing care for people with the most complex needs where, again, there is an undersupply.</p> <p>In January 2019 Leeds City Council appointed a delivery group made up of Ashley House Ltd, Morgan Ashley LLP and Home Group to deliver four Extra Care schemes on Council owned sites in Leeds including Windlesford Green in Rothwell. The Windlesford Green Scheme will deliver 64 units of Extra Care housing with anticipated start on site in June 2021.</p> <p><u>Dolphin Manor</u> As discussed at the recent Outer South Community Committee meeting on 15th March, my professional recommendation as the Director of Adults and Health is that should Home Lea House and Richmond House care homes be approved for closure, that no further council run care homes should be put forward for decommissioning. This would mean Dolphin Manor, along with Knowle Manor (Morley South) and Spring Gardens (Otley and Yeadon) would be retained in the city as council-run care home</p>

	Submission	Raised By	Response
			provision.

4c) Consultation Petitions

Home Lea House petition – online comments

[Petition · Prevent the closure of Home Lea House, Rothwell. · Change.org](#)

Total signatures - 1248

Number of comments – 139

Comments:

<p>More elderly in society means more not less homes like this. Not everyone can live independently, a caring society and City (LEEDS) knows this and provides.</p>
<p>Why am I reading recent updates on numerous housing developments within Rothwell then reading that the council intend to close this amazing care home! This is the second one they have tried to close in recent years! The population of Rothwell is growing so where do they intend for us all to go when we reach an age where we depend on these services?! I know I would want to remain in this area where I was raised and where I've raised my children! Absolutely despicable of the Council!</p>
<p>This is a lovely place to live the staff are great and the cook is always baking buns, what is up with these people who want to close homes like these.</p>
<p>We know there is inadequate provision in the private sector and it is a total folly for the Labour Council to continue close public services when there is inadequate provision elsewhere. They did this at The Green in Seacroft decimating dementia provision. As an independent councillor I am very happy to sign this. It's a ridiculously short term view.</p>

I'm signing because !! Whoever took the decision to close is a C**T !!
They think Covid will be a smokescreen for them, absolutely disgusted
We do not want Home Lea to close down
How can closing Home Lea solve the care crisis in this country?! Ridiculous! Incomprehensible! My grandma was cared for here in her final years. More homes need to be provided by Leeds City Council, not fewer!
This place has been home to many local residents it is a disgrace that anyone would think of closing it
It's not fair that people homes where they are settled and looked after and you are going to unsettle them all just because u want to close it leave it open
The home is needed by many people. Closing will affect them, their families, the staff and the local area.
We need care homes more than ever
I know a lot of people want this to stay open
People deserved to be looked after in fabulous care homes such as Home Lea! Where is the council proposing they go?
This care home has provided excellent care for the elderly in this area for many years and it closure will mean another essential service closed for the most vulnerable in our community. Shame on those responsible who think this can be just sold off.
A lot of elderly people have lived in Rothwell and when the time would come where they need to be cared for I'm sure they would certainly wish to stay in their local village and be near family and friends.I know I would if it came to this.
Moves are detrimental to the health of elderly residents especially during a pandemic
We need care homes at all times x
Where are the elderly going to live and get together with the rest of the elderly residents. All the council want to do is cut back on everything
I'm signing this as this is a group of people's home, we are a community so sick together and remember morals
It needs to stay open
My friend's mum is here. It's a lovely home and well run. Feels like all the big

consortiums are taking over and losing that family friendly touch
We need more elderly care places, not fewer, and the short-sightedness of LCC is dangerous.
If it is closed what happens to the residents. Let's think about them and not budget cuts. They elderly deserve the best. They are what makes a family and country whole
I am signing because this home means so much to friends and family, good nursing homes are hard to find and we need to keep them open
The closure of this home is a backward step and needs rethinking!
Vulnerable people need to be protected
Not enough homes, stupid to close this one
I'm old myself and this sounds like somewhere I would like to go
To maintain local provision of 24 hour care for those who need it.
Protect the elderly and vulnerable
Because LCC think they can treat our elderly and vulnerable with contempt and get away with it.
We need good homes
My auntie is a resident here and has settled in so well
My dad stays there for respite care. It's so important for our family
My dad was cared for at home lea. The staff were lovely and gave me and my family reassurance he was safe.
Save our elderly care as it's needed so much.
My mum has advanced dementia and not long in the near future I will probably have to make the heart wrenching decision to put her in a home. Good nursing homes are hard to find and shutting them down is absolutely ridiculous. We need more good homes like these to stay open
We are an ageing population and need more homes like this rather than shutting them. Find other areas to save money
My grandma was looked after there and clearly there is a shortage in this country of residential care for the elderly. Should be expanding provision not closing homes!

Only heard good things about this home.
Care homes provide a vital service that is needed more than ever due to an ageing population. We need more not less.
There should always be care homes for vulnerable people
we need homes like this in our area please do not close Home Lea House
Don't take their home from them. The care of these vulnerable adults should come well before budget cuts.
My Mum is a resident at Home Lea and she is very settled there. It has an outstanding CQC report and fabulous staff. After being isolated for so long due to covid, it's the worst thing that could be happening to them at this time. We must fight this closure.
I had a dear friend whose mum was a resident here. Local homes for local people need to remain part of the community.
My father in law is here, happy and settled, he has lived in Rothwell all his life, this will be a huge upset if he has to move elsewhere.
My grandad is happy and settled here
I signed because not only is it the most stupid idea ever under present circumstances, I'm sure they could find other areas within their own organisation that wastes our hard-earned money to make cuts.
Would be a shame to close.
It is a fantastic home best in the area would be sinful to shut it.
It is a needed residence in the area.
As it's taxpayer funded, I as a taxpayer say no to its closure.
My grandma is a resident!
This is a well-run home leave it alone if the council stop putting asylum seekers in motels that will more than pay for the home
I don't think they should close any care homes as we need them to protect our elderly people and their families also more people will lose more jobs and we have lost enough places and jobs already
Too many care homes are closing down and they are needed more than ever. My dad only spent a few months in a home before he passed away but I remember him saying that he wished he had done it much sooner because he wasn't so

lonely there.
It's their home.
Home Lea House is a valuable community asset and should be kept open
We need more homes for our elderly
I think it would be very unfair to close it down.
Please keep it there
I know of 2 people who received excellent care here. It is a vital place in the community and to close it would be a disgrace. These are people not just numbers.
There needs to be council funded care homes for those not fortunate enough to have £££££ set aside or a house to sell to pay for a place in a private care home, where money comes before care
I care
This is part of the heritage of Rothwell.
Why is it always the elderly to suffer. They've paid all their lives, this is their home. Don't take it away from them
Because our elderly need more homes like this one. There is no need for it to close at all
There are other areas Leeds City Council could make savings but elderly care should not be one of them. With an increasing population of older people, this is exactly the area we need to be spending on long term future goals putting people before profits. Where do you expect those residents to go? Please consider the impact on the local community there in an already challenging time ahead and the residents in their last few years if life.
We need this care home.. Too many are closing in an ageing population. It's not good business sense at all.
We should be building more care homes not closing them. What are the residents supposed to do ?
Home Lea is a much needed home in this area, staff are great, would be awful to lose such a caring home
Leeds City Council have forgotten those that they serve. They should hang their collective heads in shame

We love Home Lea.
I have worked here whilst the home I worked at was getting renovated and the staff were so caring not only about their residents but about their staff also .. it's like one massive family vibe & they do loads of fund raising so they can take them on trips out ... please do not shut this home, just think of the residents being isolated because of covid19 & now they're losing home/family /friends if you close this home. You're making a massive mistake and we will see a lot of deaths but not to covid19 but to broken hearts...
I may need this lovely care home myself in the future
Closing a lovely care home where so many happy people live is ludicrous! These are people not piles of rubbish that can be just moved on with no care or thought for the trauma and upset it will cause.
Home Lea has been there for all my life the staff are amazing and this is a vital service for our elderly. Closing this place would be devastating for staff residents current and the future. Look after our elderly and the people who care for them
A vital local resource.
This home has been there for years, it's people's home, needs to stop open
We need care homes in the area. Why close an excellent facility that is giving outstanding service
Disgusting, Leeds City Council has the best care
They were amazing with both my grandma and grandad. They are wonderful and a much needed service for our community.
I have someone in this home and it's a lovely place, he's settled. This damn country, government, council NEVER learn. It's more homes we need with more investment and facilities. For gods sake stop ripping everything and everyone apart
I visited there as community nurse. The staff were a brilliant..
When i worked as a community staff nurse many years ago this was a fantastic place. The staff were outstanding. It will be tragic for the residents to loose there home and their families
Leeds city council has closed down too many homes already Home Lea is the only home left in Rothwell for the local community.

This is a beautiful and well looked after care home also is part of the Rothwell community.
It's short sighted to close council run care homes.
My father is in home lea and he loves it it would be a massive shame to close now
Some years ago Leeds City Council declared that they wanted to be "The" dementia friendly city in the UK. The way this announcement has been made, hidden away, under the news of today is shambolic. People are living longer, more are being diagnosed with dementia, and more will be requiring the specialist care needed. Familiarity and routine are important to those with dementia, especially as many have not seen family for many months, any move now will certainly have an impact on their well being.
My sister here and just settled in after losing her mum after living with her for 70+ years, please don't take her safety net away
This home has been part of Rothwell for as long as i can remember there are never enough places for the elderly were they can feel safe in there elderly years so why close down a good thing that they have and upset the residents in there later years
Good care homes & staff are very few & far between unlike private care homes that are more interested in making money than actually caring about their residents.
One if the best care homes in Leeds. Put care before money.
It's important.
This is their home.
That's the easy option. Think harder.
It's an essential part of Rothwell community
South of the Aire also needs residential care.
The residents have contributed all their life and now the Councils are effectively stealing all their input. The government just want to euthanise the elderly and keep reducing funding!
I lived in Rothwell for much of my life and my parents still live there. I remember going to Home Lea to do school concerts and seeing the care the residents received. To rip them from the place they are comfortable and where they feel safe

is disgraceful. Never forgetting the families, you will destroy as they watch their loved ones crumble or (staff) lose their jobs. This is not about one issue, it's about a myriad. Hang your heads in shame for treating people like this!!
Nooo! People who now live there depend on the security and support provided by Home Lea. An enforced removal of vulnerable elderly people who will be confused and even more devastated through the lack of contact with family and friends. It does not bear thinking about and would be the ultimate betrayal
We cannot afford to lose such a vital and well-loved service
It would be a real shame to see such a wonderful place closed. Many people rely on these to keep family local and well cared for. Its one of the better care facilities in Leeds.
It's just not the time to close care and support venues and homes
My Grandma lives here.
My grandma is in this home, it's the happiest she has been in years and she has met some lovely people. Why do this to these residents who are settled, cared for exceptionally by amazing carers?
Too many homes for the elderly are closed with little consideration of the consequences for the residents they care for! Please do not close this care home in Rothwell
Residents should not be part of any "Budget Plan" ...it is their Home ...Please do not let this happen ..
This home is lovely, the staff are amazing and it would be such a loss for the lovely residents that live there it's there home :(
Supporting friends who have family in this lovely local care home
People's lives should not be part of a "Budget Plan" ...
Supporting family
Home lea house provides a vital local service
My sister Laura Harwood is a resident there
It should not be closing, we need more not less nursing homes
Rothwell must continue to provide a safe environment for our elderly community. I don't understand the rationale for the proposed closure but I know that this is a much needed service.

Why would you close it, just don't
They elderly need to be taken care of and this home is a wonderful part of our community.
Please do not close
We need local care homes for the local elderly people
Care homes are needed in this community!
We need places like this in our area for our elder family members
My nan is is there and she is very settled and well looked after by all staff
This is a valuable part of the community and is much needed
Extremely needing this in the area. Why do they have to do this, or is it all about the money again for the council?
This is a vital local service
Home Lea provides exceptional care for our community
This wonderful home is a large part of the community and needs to stay
My Aunt spent her last happy years in Home Lea House. This is a vital service for the Rothwell community. We need Home Lea House, there is always a waiting list for places demonstrating a need for this service.
Care homes are needed more than ever this has always been a good place
This is a lovely care home and it's amazing for the community to help our vulnerable
Because it's needed
Home Lea is a wonderful home for elderly residents we shouldn't be losing such a vital service
This is vital to the older people in this area.
Care homes are needed now more than ever. The staff obviously care for their residents. Budgets can be easily cut elsewhere.
During the current problems we should be supporting those with dementia and their families, not trampling on them.

Richmond House petition – online comments

[Petition · Proposed closure of Richmond House in Farsley · Change.org](#)

Total signatures - 1178

Number of comments – 90

Comments:

We need Richmond House, especially in view of the Pandemic
We need to look after our elderly
We're signing because my mum stayed here. It's such a community building- with fabulous personal care
I'm signing because it is a wonderful local service. My grandma was looked after there, such high standard of service
My Mum was cared for wonderfully by the staff after having a hip operation. A vital service both for the residents and local community.
This is crazy it is a well-used home and a step up to people getting back to their own independent living after an illness or fall.
Moving frail, elderly people at any time, is traumatic and particularly in a pandemic - distressing for residents and their families.
A friend of mine had a short stay in this care home after being placed there from hospital after a fall at home. She made great progress with her rehabilitation while there and was able to return home successfully in a planned way with carers. Many more people need to get back home in this way instead of being put in private care homes subsidised by the Council.
A vital service both for the residents and local community.
Want to save Richmond House
It's the only Council run local one with a good reputation
Richmond house provides much needed care and respite to the elderly. Instead of closing all these facilities we need to be supporting them and keeping them open. Some of these people will have been there for years and having to move and get used to change will be so stressful for some of these poor people!

Cutting back facilities doesn't create job and doesn't help the local community. The government can do better then closing this place.
These homes are needed and those there I feel be very upset to move
This place is so needed for our elderly as LCC have closed most of the others, it's a good place for rehabilitation to get people back into the comfort of their own homes.
Because it needed in the community
I care
My grandad stayed here and they don't a fabulous job!
This is a vital resource for the local area which is needed for supporting the most vulnerable and should not be closed.
You can't just close it, where do the elderly go? To strange places they don't know, they will die from upset. Like a member of my family did
Much needed facility for local people.
Try to keep all good care homes open. Communities need them.
This is a fantastic facility run by people who really care about the vulnerable people in our community.
It's a valued part of Farsley
It's a much needed service, especially in these times
I want to see our community built on and our older people looked after. Not everything closed and demolished!
We really do need this, in fact we need more places like this!
No care home should be closed
its a disgrace that you are trying to close Richmond House once more.
We need more care homes for the elderly not less.
It's a lovely place of retired of the elderly
There aren't enough care facilities as it is. This needs to stay open for the community who need the services it offers.
Residential and care homes are needed more than ever with an ever-increasing ageing population
Elderly people need safe local places to live in comfort the life they deserve

So many Farsley and Pudsey residents rely on Richmond House, it is needed!
Residential homes are essential part of the community, especially for those unable to be cared for by relatives. 'Care from the cradle to the grave' was a slogan we're familiar with and wish to see it lived up to.
I'm from Farsley and can't bear the thought of this closing unnecessarily.
My grandma lives in a care home and if hers was made to close lots of people would have nowhere to live
This is short sighted in every aspect and everyone will agree we all get older discriminative to say the least
The people deserve the best care possible in our area.
This is a great care home and heart of Farsley community.
This facility is essential for the wellbeing of the local community.
Now more than ever these facilities are desperately needed to help the elderly and their families
My friend was in Richmond house for months after an operation, the staff provided excellent care. This is short sightedness on Leeds city council If it was not for places like Richmond House offering care for those that need it, people would end up staying in hospital for longer periods, bed blocking, which in the end would be more costly.
My friend was in Richmond house for months after an operation, the staff provided excellent care. This is short sightedness on Leeds city council If it was not for places like Richmond House offering care for those that need it, people would end up staying in hospital for longer periods, bed blocking, which in the end would be more costly.
It is much needed to care for our elderly population. Please LCC why are you aiming to close this and the one at Rothwell? We are living longer and we need a place for our increasing older population that will otherwise have to take up a place in hospital as they cannot afford private care.
Richmond House provides high quality respite and short term care and assessment for elderly people. It was purpose built and has a spacious and comfortable feel which gives residents dignity and care.
Richmond House is a valuable asset to the are fabulous staff and care

Just think Councillors, you might need it yourselves one Day. You can destroy the City Centre and spend over £20m doing it and at the same time say you have no money for such as this! Lies, all of it.
Richmond House has cared for many people over the years. It should be allowed to continue its work! We are losing too many of our much needed Care Homes
Especially at this particular time this closure makes no sense whatsoever. The wellbeing of residents must be first priority not money.
We need more places like this not less
This facility is needed in the area to cut down on travel for elderly family and friends. It is well located with good transport links and parking
This is upsetting people's lives, especially the elderly!
This is a much needed, and loved, care home, locally used and a local asset.
Our elderly are not disposable
We need our elderly to be safe in their home. There are far too few good ones and this deserves to stay open
It's paramount to have this facility for the local people
This is a very valuable asset within the community.
It needs to be saved for the older generation in the community
My dad was in there and it's a vital service that can't be lost
It's a ridiculous, short sighted idea.
We need to keep places like this open – wonderful place and one of the best in my opinion - looked after my dad amazingly
Richmond House provides an excellent service to those who need it.
Its been there many years and used by patients all over Yorkshire it will be very sad if this closes. I have many a memorable day there visiting from school n the harvest festival
And the staff provide such care. Don't let it close. .
This service is needed now more than ever
Was very convenient when my mother in law needed respite care
Does so much good for the community
It's much needed, for the residents it gives them hope and reassurance they will

be cared from
We need this resource in our area. My dad would have been lost in the system when he came out of hospital a few years back.
We need to keep this in our community it is a great help for people in their time of need.
It offers a vital service to the area and was a blessing when my father was ill with Parkinson's giving my mum the much needed respite
I think its disgusting they are wanting to close this place
We need this home to remain a home
Very important to the local community
Farsley needs Richmond house
There are too many closures of homes. More are needed.
Simply I think it's disgusting that you're taking this home away from the elderly who have most likely lived most of their lives in Farsley. You should be ashamed of yourselves, corrupt idiots
We have lost too many valuable adult social care services. Let's not reduce services provided by statutory services to zero, we are failing the vulnerable in our society.
This is a much needed resource for the area
Leeds city council have just scrapped a clean air zone vanity scheme at a cost of millions but when it comes to looking after the elderly "we've got to cut costs"
People of Farsley depend on this home so they can stay in the village they've been all their lives, which is everything, Farsley is more than a place to live, it's home and memories
This is a lifeline to patients recovering they need the transition from hospital to home especially if theres no one there when they get home
I object to this fantastic local provision being decommissioned - it is the only local respite care available and is desperately needed.
We need to retain local services for local people
Because we need this home it's a community resource that Leeds City council have failed to promote

This home was a life saver for us when we needed it for my mum who had Parkinson's. Lovely, homely and caring staff. Not just left to sit in a chair. We loved going to visit.
The elderly a soft target, time we stood up, enough is enough.
Our elderly needs one where safe to live.

GMB Petition – 390 signatures

Submitted as an exported PDF from website

Comments:

So disappointed that it has got to the point of cutting homes for older people. The system is broken.
Solidarity from Leeds TUC.
Care facilities are our lifeline.
We have seen how great the private sector is. Low pay, long hours and lack of necessary kit and little scrutiny or accountability.
Solidarity to one of my favourite cities.
The last thing to go is not the lights, it's the care homes. Stop it!
For the good of our communities, Leeds Trade Unionists should support the GMB.
We are in the middle of a pandemic and have a proposal to close care homes for the most vulnerable people in society, it is wrong and we need to stop accepting the funding cuts imposed on local authorities by fighting back.
Labour Councillors do not make cuts in my name as a Labour Party member and Trade Unionist. We need to publicly fight against cuts. I am a member of Leeds Labour Representation Committee and we will support any Trade Unions and campaign groups organising against cuts.
The private sector is not fit for purpose. The closure of the OAP homes in Leeds was the Council's worse decision ever.
Our elderly have given so much, when it's time to give a little back you can't just say no and forget what they have given. Disgraceful Leeds. I know the twits in London pull the strings, so push for a united Yorkshire to hold your own purse

strings and tell London to get lost.
I worked in older people's services for many years and have seen the impact of closing people's homes where they feel safe and supported by people they have come to see as family. It is devastating.
Care homes have been hit far too much, they should be supported and protected.
We must protect our local authority communities before they are stripped bare. Private sector is a business run purely for shareholders pockets.
Leeds needs these essential services, please avoid closures.
This is very sad to hear, it is always the vulnerable and elderly that suffer! The elderly that have worked hard all their lives to be treated like this and the staff that have cared for them throughout this pandemic now face losing their jobs, it's very disappointing.
I am disgusted, closing the homes.
We need to look after the customer and take care of them. If they move from one home to another they will possibly pass away.
Not the right time!! Never the right time!!
Whoever has decided the closures should hang their heads in shame. It's always the elderly and the most vulnerable that takes a hit.
Devastating news. What has happened to duty of care?
We need council care homes. Too many closing, for the residents and staff.
Keep them open.
I'm at one of the facilities - worked tirelessly through this pandemic on the front line putting myself and family members at risk, sacrificed so much of myself willingly and with loyalty by completing lots of extra Covid related duties and restricted myself from going anywhere and doing anything other than work and home in an effort to keep my customers safe only to be told that a proposal of closure has been submitted to the executive board. I then read in the tabloids that 600 jobs are to be axed - so how do I and my colleagues feel right now?? betrayed.....worthless..... used..... for many of us this is not the first time we have faced this awful situation.
Let's all sign and stop this from happening.
Very sad, great service and staff.

Keep the care homes open.
Decisions made by people wealthy enough to never feel its consequences.
We need care homes for our vulnerable people. They need to feel they have care and support and be around people to give them some life.
Keep open, the governments shut everything down.
Devastating.
Everyone needs to sign this to stop closures.
It's disgusting that they always pick on the most vulnerable people in society and they always get away with it. We need stick together to protect them.
Everyone needs to sign this to stop closures.
It's an absolute disgrace the closure of the homes.
It's ridiculous that these care homes are being threatened with closure, especially in these chaotic times, where care homes are invaluable.
It would be devastating if it was your mother or father who was having to undergo such a traumatic experience. Older people can't cope with changes like this. If it was the case that the Council had decided to renovate the properties, that could be done incrementally, with support from staff. If they wanted to close the care homes, the Council should phase them out, gradually over time.
There is nowhere for the elderly to go if government is closing homes down. It's always elderly that has to suffer.
I totally agree with GMB stance on this matter.
Appalling.
Don't close them.
Stop closure of the 3 care homes.
The passion the adults and young people show throughout this pandemic in the nursing homes has not shone as much as it should have. A massive shout out for the legends who were left behind. Keep fighting for justice, every one matters, love and happiness will defeat the bugs!!!!!!!!!!!!
My sister works in one of these care homes and all the hard work for the residents in protecting them from Covid whilst maintaining the standard of care they provide, whilst living with the increased risk themselves, they should be rewarded for their

efforts. This does not feel right.
Appalled to hear this news. C19 has been the excuse to dismantle so many services of care and NHS.
Disgraceful.... Do the vulnerable in our city not count as citizens of our city.
Those older people need to be kept in their home especially as we are in Covid.
It's upsetting to see this sort of thing in this day and age.
Hope all the front line service's staff who make a difference to the people of Leeds can get through this uncertain and difficult time and can in time have a bright future to look forward to.
We need our care homes. Please consider the consequences if we shut our homes down. Some elderly people use this as their comfort zone. Please be considerate.
Homes are important for people who don't have family to care for them.
We need these facilities to help take the pressure off the hospitals.
It's a disgrace.
Disgusting.
We need these care homes for vulnerable elderly people. It's imperative that they stay open.
Stop closure of care homes.
Absolutely stunned. Why is it always the vulnerable that are penalised at a time when residents, staff and families have enough worries?
LCC have to claw back this deficit. It is a worrying time when much needed care homes become a target for austerity measures. These are front line provisions and the workers are doing a much needed service. Please allow them to continue in their posts; LCC you must reconsider.
Keep these places open and stop privatising care places. It's not a business, it's about CARING.
LCC should be protecting the vulnerable.
We don't need more homes closing.
Care homes are important.
We need these homes, so why do you need to shut them. It's not right when you

are shutting down. Where are people going to go?
I work in one of these buildings and I feel as though the money is more important than the PEOPLE that work there and most importantly the poor unforgettable PEOPLE that live in them, the ones that think they won't have to move again when they are settled and have trust in the PEOPLE that support them and the PEOPLE that the only family they have are the ones that support them and that they live with. PEOPLE'S mental health is not even taken notice of as when these PEOPLE have to move they will become only a shell and probably will be thinking "when will I have to move again?" So they will not be able to settle and relax. Anyway rant over as no matter what is said or done no one listens or even cares.
What's the point of anything if our final years are unhappy. It's more important we safeguard our elderly and ensure they benefit from their own contributions.
Absolutely disgusting!!!
There are not enough decent care facilities and resource centres around these days to provide the care and support these people need anyway. Absolute disgrace!
It's easy to fall out of society, not easy to get back in and with that is a much higher cost to be paid, both personal and loss of economic activity.
Appalling.
Disgraceful. We are still working through this pandemic. Coming to work to care for the vulnerable putting our own health at risk and the health of our own families.
Just where do they think these people are going to go. Generally elderly and vulnerable people do not like change of any kind.
Must be saved.
Really bad.
Services for our elders and vulnerable citizens need to remain as for a lot it is their only human contact that day.
They are the only care homes I would trust with my relatives, the rest are just money grasping institutions.
A travesty! With this government it's always the vulnerable who suffer!
It's sad to hear this.
This is disgusting. The old and vulnerable need looking after. How can they justify

closing homes down.
It is disgraceful that yet again the elderly and the vulnerable are cast to one side to save money along with dedicated staff set to lose jobs. Everything should be done to stop this. You have my support.
These care homes should be the last places the Council should look to save money by closures, surely it's a civilised society's duty to provide decent adequate care to residents of Leeds.
It's a shame that the Tories are treating our elderly like this. Some have been through wars, paid their taxes and national insurances, to be now slapped in the face. The government really needs to hold their heads in shame.
We can't afford to lose any more care homes. Where are the elderly supposed to live out their lives. They will have worked all their lives and end up getting pushed all over the place.
My mum has been a devoted care worker for Leeds City Council for nearly 30 years.
I have worked in dementia for twenty years and with LCC they won't stop until they're all closed, after all elderly people can't fight back.
All LCC want to do is save money again. Not considered the residents who live there and once again they have the money to waste on Leeds city centre work. Just not fair.
Outrageous.
Been out there from day one of lockdowns from Covid-19. I don't think and feel like I've been appreciated. I am worried and concerned about my working future and income, my mental health has also suffered due to worrying, but I'm still here working hard for LCC.
My mother is in a nursing home. The waiting times for places are agonising, worrying about your loved one being safe.
We need to protect our vulnerable people.
We need these to look after our parents and grandparents to know they are safe and cared for.
Care homes will be required in the future after this pandemic is over and if we start losing them now, we will increase the care crisis in the longer term.

My late grandma worked at Richmond House, Pudsey for many many years. You can't shut it down, it's a much needed home that is usually to full capacity.
I agree wholeheartedly, far too many homes and facilities have been shut down over the past few years, leaving the elderly and the vulnerable sad and confused. You have my backing all the way.
Stop this barbaric treatment to our elderly.
It's disgusting, our elderly and vulnerable need support, shutting down care homes is appalling.
We need to support all staff and service users.
Keep council carers.
I think we are seeing the true face of Conservative, caring yet again!
This cannot be right! What are the cared for and carers supposed to do? My lovely late Grandma lived at Richmond House and couldn't have been treat better, keep these homes open!
I have elderly parents and if they were to need to go in to a care home, it would not be in the local area of Rothwell where they live, and have friends and family.
Been there myself, when they closed the home I work in. It's not a nice thing to go through, hopeful that won't come to that for them.
These care establishments are where I live, this effects lots of people in my community, this cannot be right, outrageous!!!
Years of Tory cuts to local authority funding has brought about this crisis in care facilities.
For staff this will be devastating financially and the mental health impact for staff and for service users.
The Tories clearly do not care about the elderly, vulnerable and hard working public sector workers.
We need these homes for our residents who get the best care that they deserve.
You have already lost the Labour seats in Rothwell and won't get them back making moves like this.
Don't be foolish.
Shut the Houses of Parliament. They don't do anything apart from sitting around and be given bonuses for doing jack.

I acknowledge the LA's financial pressures but also recognise the importance of homes such as these play in caring for the vulnerable in our society.
This should not be happening, typical of of Tory rule.
The elderly in these care homes are in the midst of a pandemic, they now should not be losing their homes.
LCC front line staff have risked their lives to keep these people safe, so we need to fight to keep their jobs.
Why would the Council sell their care homes when there is an intensive demand to house older people and those with disabilities? This in the long run will add additional pressures to local authorities' service in the future, also jobs will be lost in the process. What will happen to tenants and occupants who have had to use these types of facilities prior awaiting discharge for health reasons.
Need to keep all care in house not for private profit.
Sad times.
LCC must demand emergency funding from the Tory government. Our local authorities have been starved of funds for too long! End austerity now.
Why is Richmond House care home proposed for closure by Leeds City Council while they are still funding services for people leaving hospital and awaiting reassessment and review of their care plans in private care homes? This out-sourcing and privatisation should stop in order to save money and preserve the community facilities for rehabilitation and recovery of Leeds people.
I feel the decision to close at such an unprecedented moment in time is harsh. Keep the Council facilities open! It is so important to keep valuable public services operating.
We need these homes.
Where will vulnerable people who need these amenities go. How much has the government spent on Serco?
This is such a remarkable facility which is not available in many parts of the country. It would be a tragedy to lose it.
What a way to treat frontline staff after risking their lives to care for some of the most vulnerable people in society. I know the pandemic has had an effect on everyone, but to potentially lose your livelihood at any time is devastating. I hope

that GMB fight this all the way.
Devastating news for so many in the elderly and disabled community. Really hope these care homes and Osmondthorpe HUB can stay open. Very sad for residents, service users and staff!
I have been working in this care home for the past 2 months and cannot believe they are going to close it. The elderly need looking after and this place is fantastic for them, they are all happy and content here.