

Report of: Director of Adult Social Services

Report to: Executive Board

Date: 21 September 2016

Subject: '*Better Lives Programme*' Phase Three – Next Steps and Progress Report

Are specific electoral Wards affected?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, name(s) of Ward(s): Armley (Middlecross Care Home and Day Centre) Beeston and Holbeck (Springfield Day Centre) Gipton and Harehills (Wykebeck Valley Day Centre) Horsforth (Manorfield House) Killingbeck and Seacroft (The Green Care Home and Day Centre) Morley South (Siegen Manor Care Home and Day Centre) Pudsey (Radcliffe Lane Day Centre)		
Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, Access to Information Procedure Rule number: Appendix number:		

Summary of main issues

The *Better Lives* strategy is the Council's strategy for people with care and support needs. A key aspect of this strategy has been a strategic review of the Council's in-house service for older people. This has taken place in a number of phases since 2011.

In September 2015, Executive Board gave officers permission to consult on Phase Three proposals which included the following:

- Closure of Middlecross care home and day centre
- Closure of Siegen Manor care home and day centre
- Closure of The Green care home and day centre
- Closure of Springfield and Radcliffe Lane Day Centres and
- The conversion of Wykebeck Day centre to a day centre with a specific focus on older people with complex needs including dementia
- The potential delivery of estimated annual revenue savings of £2.2m.

The formal consultation concluded in December 2015 and since then officers have been collating and analysing the outcome of the consultation plus participating in a comprehensive Scrutiny Board process. This has involved five attendances at the Adult Social Care, Public Health and NHS Scrutiny Board as well as participation in two Scrutiny working groups which considered the issues raised by the proposals and examined them in more detail. Scrutiny Board has made extensive and detailed comments on the proposals which have been taken into account in compiling this report to put before Executive Board for its consideration and final decision.

There are four main drivers shaping the recommendations of this report:

- (i) 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.
- (ii) The challenging financial context for local authorities and the need for the most efficient and effective model of services to make the Leeds pound go further
- (iii) The need for capital investment in buildings that are no longer suitable for the level of frailty and complexity of support need that we now see in our care home population
- (iv) The impact of older people exercising choice now on the occupancy levels in our care homes and day services and therefore the unit cost of service

This report details the consultation process that has been undertaken and what service users, family members and staff have said about the proposals. In drawing up the initial proposals, conducting the consultation and in revising the proposals to make the formal recommendations described in this report, officers have been acutely conscious of the depth of feeling aroused among service users, families, local communities and staff. The overwhelming message from older people and their families can be summarised as wanting the services to remain open.

However, the Council's own view, as was set out in the September 2015 Executive Board report is that older people should be afforded a better quality of life than is currently possible in the buildings that are the subject of this report. The Council also believes that the range of housing, care and support opportunities available in some independent and voluntary sector facilities exceeds the material quality of those offered by the Council, and should be widened to be more universally available. In addition, the Council has a duty to future generations of older people to ensure their residential and day care services match their increasing expectations in terms of standard of living and choice of service.

The recommendations in this report are listed below and, if agreed, will result in people currently living in the three residential care homes moving to alternative residential accommodation in localities of their choice which will be equal to or better than the Council's own facilities.

Recommendations

The Executive Board is asked to:

1. Approve the decommissioning of the services provided at Middlecross, Siegen Manor and The Green residential care homes.
2. Approve the decommissioning of the services provided at Middlecross, Siegen Manor and The Green, Springfield and Radcliffe Lane day centres.
3. Agree the timescales for ceasing the services based on the timeline attached in Appendix 3.
4. Approve the remodelling of Wykebeck Valley day centre to become a complex needs centre for the east of the city, taking a phased approach to accommodate the needs of existing and future customers.
5. Agree reinvestment of £0.111m of the planned savings to ensure Wykebeck can offer an enhanced service like Laurel Bank and Calverlands complex needs day centres.
6. Agree that the Siegen Manor site be ear-marked to explore the potential to develop extra care housing.
7. Approve the development of a city-wide in-house integrated recovery service comprised of Assisted Living Leeds, the SkILs enablement service and a bed-based offer to support the wider Leeds Intermediate Care Strategy. Agree that this service should be called Leeds Recovery Service.
8. Agree that The Green be retained as a community asset for intermediate care / recovery beds subject to the discussion and agreement with NHS commissioners. A further report will be presented to Executive Board when discussions have concluded.
9. Note the outcome of the full consultation reports with stakeholders, including residents, service users, their families and carers, Trade Union, staff and Scrutiny Board appended (Appendices 1 and 2).
10. Note the immediate decommissioning of the services provided at Manorfield House residential home and the assessment and transfer process of residents.
11. Note the continued formal consultation under Employment Legislation with Trade Unions and staff and support for staff throughout the decommissioning process including identifying any opportunities for employment within the Council.
12. Note the development of alternative models of support, including those provided in the independent sector and by other in-house services.
13. Note that the commissioned service Bay Tree Resource Centre in Moor Allerton also offers a choice of day support for people with complex needs including dementia.

14. Note the continued work via the Housing and Care Futures programme to identify potential future use of the sites that become available as a result of the implementation of these proposals, including the opportunity for further development of specialised older people accommodation, including extra care housing.
15. Note that the lead officer responsible for implementation is the Director of Adult Social Services.

1 Purpose of this report

- 1.1 At its meeting on 23rd September 2015, the Executive Board agreed to a period of consultation on the future of the residential care homes at The Green, Siegen Manor and Middlecross, including their adjoining day centres, plus the additional day centres at Springfield, Radcliffe Lane and Wykebeck Valley. It also agreed that a further report would be presented to Executive Board detailing the outcome of the consultation process and make further recommendations in relation to next steps.
- 1.2 This report informs Executive Board of what service users, families, staff and the wider community have said about the proposals. It also informs Executive Board of the Scrutiny Board process and issues that Scrutiny Board has asked to be taken into consideration including some specific recommendations. It summarises the business case for the proposals including revised financial modelling in light of changes such as the new national living wage and makes a final set of recommendations.
- 1.3 The report also sets out recommendations regarding the re-use of some of the establishments or sites to further support the Council's policy objectives to promote extra care housing, daytime support for people living with dementia and for the in-house services to deliver recovery and rehabilitation services.

2 Background information

- 2.1 The *Better Lives* Programme commenced in 2011 with a remit to review the care and support services directly provided by Leeds City Council. The review's terms of reference and review criteria were determined by the Adult Social Care Scrutiny Board in 2010. This focused on whether the services were meeting the current and projected needs and aspirations of older people and whether they represented value for money.
- 2.2 The Scrutiny Board's 2010 review of the in-house care homes and day centres concluded that to maintain and operate the Council's residential and day facilities as they are was unrealistic in terms of changing future demand and expectations and unaffordable in terms of the resources needed to provide the quality required to make them viable for the future. The inquiry accepted that people's expectations around choice, quality and control over their residential accommodation had increased significantly and that a position of 'no change' in the provision of Council-run residential care was not an option.
- 2.2 The outcome of the reviewing process has been implemented in phases and has resulted in the development of new services and the closure of some facilities where the demand has fallen and the cost of maintaining and improving the buildings has been prohibitive. The service users affected by these changes have been transferred to a range of alternative care and support options. The transfer process has involved a dedicated team of social care staff working in accordance with a clearly defined protocol and overseen by a quality assurance group.
- 2.3 The Council continues to realign its services to better meet the needs of older people in Leeds and is striving to ensure that the future needs of older people will

be met by supporting them to live in their own home safely and for as long as possible. This will be achieved through the main strands of the *Better Lives* programme:

- Integration
- Enterprise
- Housing, Care and Support
- Strengths-Based Social Care

- 2.4 The Council will look towards working more collaboratively and in partnership with other organisations (notably the NHS and Third Sector). In addition it will influence the market to provide services that are most in demand. There is a recognition that residential care may be appropriate for some people and the Council will continue to commission good quality services from the independent sector through use of its quality framework. The Council is also working on improvement plans for independent sector homes where the Care Quality Commission (CQC) has identified homes that require improvement.
- 2.5 The future strategic role of local authorities will be to financially support people with the highest and most complex needs and ensure people with low to moderate needs are able to access services that will help them remain independent. To this end, local authorities have a key role in developing an independent, voluntary, charitable and faith-sector care and support market that provides its customers with a wide variety of good quality choices across the city. Our 37 Neighbourhood Networks are a good example of these preventative services working in practice.
- 2.6 In order to manage demand for services, the Council is working closely with city partners to help people stay as well and as independent as possible. Our strengths-based approach has, as its starting point, the firm belief that people have strengths as well as support needs and that, by facilitating better links with the natural support assets in our communities, people will need to make less call on formal services. However, we also recognise that sometimes people need a bit of short term help to get back on their feet. The Council has made a commitment to use the skills of staff in our in-house services to promote recovery and rehabilitation. The first part of this was agreeing to transfer the remainder of our long term home care service into the SkILs re-ablement services so it could provide a seven day service. This report now includes proposals for the bed-based part of our recovery service.

3 Main issues

Future long term accommodation-with-support needs for Older People

- 3.1 Leeds City Council has been a leading authority in the move from institutional models of care to independent living schemes for adults with disabilities and adults with mental health needs. Older people's services have not made this transition at the same speed or to the same extent and by default many older people end up in residential care homes.
- 3.2 If an older person's current accommodation is not suitable, then extra care housing should be offered as an alternative to a care home. Extra care housing offers the

benefit of independence in a safe environment where social interaction is the norm and care and support is tailor made for individual tenants.

- 3.3 Demand analysis has been carried out (extending to 2028) on the number of older people in the community and the type of care and support services they will require. The findings of this research are embodied in the Leeds 'Housing and Care Futures Programme' that was approved by Executive Board in the form of a prospectus and which is closely aligned to the Leeds *Better Lives* Programme. The prospectus acknowledges that some longer term services may be required, but these will increasingly be specialist housing models either supporting independence (e.g. extra care housing) or meeting a specific need (e.g. nursing care).
- 3.4 For example, a city the size of Leeds should have 1,400 units of extra care housing but we currently only have 700 units. This represents an undersupply of 700 units and projections indicate that by 2028, Leeds will require a total of 1,900 extra care units. In addition to the 700 units currently available, an additional 93 are being built, which suggests that there will be an under supply of 1,100 extra care units by 2028.
- 3.5 A small number of Council owned sites have been brought to the market for the development of specialist housing in areas where there is a shortfall of homes designed for older people. The Council is also leading the way in the construction of 45 new extra care apartments in Yeadon and 60 new extra care apartments in West Ardsley which will be available to rent and for shared ownership. A suitable site has been earmarked in Rothwell for the development of extra care and community based services for older people.
- 3.6 Access to suitable sites remains a challenge and many wards have the aspiration for a local extra care scheme but cannot find a site. Part of the solution could rest with redeveloping care home sites for extra care housing: a sort of "new homes for old" strategy.
- 3.7 Demand projections indicate that we have an over-supply of residential care with supply exceeding demand by 1,400 bed spaces. This is forecast to rise to a surplus of 1,500 bed spaces by 2028. These figures support the need to carry out the transition from residential services towards extra care over the coming years. It is likely that this over supply is a contributory factor in some of the quality issues the sector faces, with some care homes struggling to achieve the occupancy levels that would ensure a viable business.
- 3.8 Few people actively choose to go into a long term care home and the likelihood is that their admission is dictated in part by a lack of immediately available alternatives and the stereotypical view of older people (particular those with living with some element of confusion) as being unable to live independently safely.
- 3.9 However good the care home is, choice and the opportunity to be involved in day to day activities is limited by the environment. National surveys reveal that 40% of care home residents experience depression. There is also a much greater chance of an older person (compared to someone under 65) going straight from an unplanned admission to hospital into a long term residential care home. In this instance, a change to the existing model of care is required to ensure that people are able to find the relevant type of care and support and, if possible, are able to

undergo a period of rehabilitation and recovery to facilitate a return to their own home. We know that in 2014/15 Leeds admitted 753 people per 100,000 population aged 65+ into long term care compared to 711 per 100,000 in our benchmarking group. The regional average in 2015/16 was 612 per 100,000 so we know we need to do more to reduce the number of people going into long term care.

- 3.10 The council's care homes were built at a time when the population of residents was fitter, more mobile and there were less people with dementia. We have been increasingly successful at supporting frail older people, including those with mild to moderate dementia, in their homes. This has meant that the current population of care home residents are now older, frailer, with higher mobility needs and a far greater proportion living with dementia. The built environment of our care homes is now less suitable to meet those people's needs. Our room standards are relatively small so if someone is a wheel chair user or needs a mobility aid, it takes up precious space in their bedroom and can be a tripping hazard. If someone needs two people to help them transfer or be hoisted then we have to position their bed away from the wall so care staff can get round both sides of the bed. This reduces the amount of personal furniture a person can have in their room.
- 3.11 Our homes do not have full en-suite facilities. The toilets are situated at the end of a corridor. This distance can mean the difference between being able to go to the toilet by yourself or needing assistance. In terms of dignity in care, many older people highly value the ability to manage their own personal care.
- 3.12 We know that the majority of people in our care homes now have some element of sensory loss and/or confusion and the challenges that advanced dementia brings is one of the reasons that residential care is the appropriate care setting for some of our older residents. We also know, from the work done by the University of Stirling, that the right living environment can keep people safer from such dangers as falls, allow people the freedom and confidence to use their abilities to the fullest extent, aid memory in day-to-day living and reinforce personal identity. While we can make some changes to our care settings that would go some way to making our homes more dementia friendly, they would really need to be re-built to meet modern standards.

Future day opportunities for Older People

- 3.13 While they remain popular among the people that use them and provide essential respite for carers, attendance at older people's day centres has shown a decline over the past five years and it is felt that they no longer represent the most effective response to meeting people's needs. Attendance rates average at 35%.
- 3.14 People are choosing to access meaningful daytime activities that are provided by the 37 Neighbourhood Networks and other Third Sector activities. The Council has also re-modelled some of its in-house services to create a more attractive offer. For example:
- Holt Park Active – is an integrated and accessible social care, well-being and leisure service developed as a corporate initiative and offering new opportunities to over 70 older people who previously would have attended a day centre

- The Leeds Shared Lives scheme, which offers both day support and short breaks for people to relieve some of the pressure on their family carers.
- The Peer Support Network and dementia cafes, which provide safe environments for people with dementia and their carers to meet, make new friends and share experiences.

3.15 However, we are clear that for people with complex needs such as advanced dementia, the Council should continue to offer a dedicated day service and this report contains proposals at items 6.7-6.9 for what might look like. (It should be noted that the Council also commissions a dementia day service from the Methodist Homes Association and this provides 20 places per day at its Bay Tree Resource Centre in Moor Allerton, Alwoodley ward. Together with the three in-house day centres, this provides an evenly distributed geographical offer for Leeds residents).

Future prevention, short-term support and recovery services

3.16 The majority of older people will have their needs met by supporting them to live in their own home safely and for as long as possible. This will be achieved by the Council working more corporately to ensure that older people benefit from active engagement within their communities and by the Council working in partnership with other organisations (notably the NHS and Third Sector). By adopting this approach the Council has already refocused some of its resources on preventative and recovery services. These includes the development of:

- The South Leeds Independence Centre (SLIC) – an Intermediate Care unit developed and run in partnership with the NHS.
- The expansion of the SkILs (re-ablement) service
- Assisted Living Leeds – the city-wide hub for the provision of equipment and assistive technology.

3.17 The Council continues to investigate opportunities to realign services to better fit the needs and aspirations of older people in Leeds. It has recently confirmed its commitment to focusing part of the in-house service on supporting people to recover by transferring the remainder of the Long Term Community Support staff in to Skills for Independent Living (SkILS) enablement service.

3.18 The Council also currently runs Richmond House, Suffolk Court and South Leeds Independence Centre (with the NHS) as short-stay residential homes where people can have a few weeks of rehabilitation to get back on their feet, usually after a spell in hospital. Where there is active therapy input this is sometimes referred to as intermediate care.

3.19 The service primarily supports hospital discharge, but with some usage to prevent hospital admissions. Officers believe the skills of our in-house service can contribute to the city offer of recovery and rehabilitation and this report contains proposals for how that might be enhanced and developed.

Consultation

3.20 Following a review of the potential options for each service, Executive Board gave approval in September 2015 for a period of consultation with residents, service users and staff, to cease the services provided at Middlecross, Siegen Manor and

The Green residential care homes and day centres and Radcliffe Lane and Springfield day centres and commission alternatives in the independent sector. In addition, consultation was approved for the proposal to recommission Wykebeck Valley day centre as a specialist dementia / complex needs service. Executive Board requested that officers submit a further report in 2016 detailing the outcome of the consultation process and making further recommendations in relation to next steps.

- 3.21 The consultation process took place over a twelve week period from 1st October 2015 to 23rd December 2015. The consultation included residents, service users and their family / carers as well as staff to gather their views and keep them informed of the detail around the proposals. The information gathered from the consultation was analysed and used to inform the revised proposals made for the services under review. Detailed consultation reports were compiled and these are available at Appendices 1 and 2.

Outcomes of the consultation and key themes: residents, service users, their families and carers

- 3.22 The consultation questionnaire was provided to 193 day centre service users with 187 providing a response which represents a 97% return.
- 3.23 The consultation questionnaire was provided to 97 care home residents with 92 providing a response which represents a 95% return.
- 3.24 There were also some people who did not complete the questionnaire, with a variety of reasons for non-completion (e.g. resident/service user in hospital, declined or relative completed questionnaire on their behalf).
- 3.25 The following is a summary of the key themes emerging from the consultation process (full consultation reports are attached at Appendices 1 and 2).
- The majority of respondents didn't want the home/day centre to close. Many suggested that savings should be made elsewhere in the Council.
 - There were positive comments on the care home/day centre and the quality of care provided by a skilled, friendly and professional staff. It was felt that the services were good and the decision to close was simply about money.
 - Concern was raised about the potential negative impact on the health and well-being of vulnerable older people and what will happen to them if the home/day centre closes. The current services were seen as familiar, safe and secure environments with service users comfortable with their established routines.
 - Respondents felt that there was a lack of alternative services and had concerns about the quality and price of alternative services in the independent sector. This included comments that the independent sector was not well placed to meet the care needs of people with dementia, which is an area of increasing demand.
 - Criticism was voiced that a decision has already been made and the consultation is futile. People want their comments to be taken on board and be kept informed / involved as to what happens next.
 - There was concern that the needs of carers would not be met.

- Suggestions were made that opening day centres only on certain days could save money (e.g. close on weekends).
- If the proposals were to be implemented, then it was suggested that the Council should consider a gradual phased shutdown of homes; i.e. not taking on any further permanent admissions, but allowing the current residents to continue living there.
- If services do close, there needs to be clarity on what will happen to the buildings in the future.

Outcomes of consultation and key themes: staff

- 3.26 The consultation questionnaire was sent to 139 staff, with 96 providing a response which represents a 69% return. In addition to the questionnaires, monthly staff briefings and drop-in sessions were held throughout the consultation period, 10 meetings took place between Chief Officers / Heads of Service and staff and two meetings took place between staff and Ward Councillors.
- 3.27 The key themes emerging from the responses were:
- Do not want the home/day centre to close
 - Concern about the health and wellbeing of residents / service users who they consider as ‘friends, not clients’.
 - Concern about their own future (employment, pensions, personal finances).
 - Expressed a need for Dementia services as there didn’t seem to be many alternatives in Leeds and this is an increasing area of demand.
 - Voiced concern over the lack of alternative options for respite.
 - Perceived lack of alternative services in the area.
 - Felt that money should be saved elsewhere, not older people’s services.
 - Perceived poor standards of care in the independent sector in comparison to the Council provided care.
- 3.28 Staff have been involved throughout the consultation process and will continue to be supported throughout the implementation of any proposals agreed by Executive Board.

Scrutiny Board

- 3.29 The Adult Social Care, Public Health and NHS Scrutiny Board has played a very active role in providing constructive challenge around the business case for the proposals.
- 3.30 In January 2016, the Scrutiny Board (Adult Social Care, Public Health, NHS) received a petition (containing over 3,800 names) along with a request for the Scrutiny Board to “...stop the closure of *The Green Home for Older People*” – which was formally considered at the meeting on 27th January 2016. At that meeting, Scrutiny Board agreed to consider the issues raised and examine the matter in more detail through a working group of the Scrutiny Board.
- 3.31 The Scrutiny Board working group considered a wide range of issues including the high quality of the care provided by the staff at The Green, cost comparisons with the independent sector, the quality of alternative care in the locality and the impact on the care market if the Council withdrew directly provided care services. The

working group findings included: The Green serves a local population and caters for local residents; The Green has a clear local focus and could take more residents; families and residents are happy and feel safe at the home; care is good – it has been judged so independently by the CQC; and the quality of alternative nearby provision in the independent sector is ‘variable’.

3.32 Following the working groups findings, the Scrutiny Board made the following recommendations:

“That any decision regarding the long-term future of The Green be deferred for a minimum of 2 years, in order to:

- i. Re-consider the comparative costs of provision as the impact of a national living wage and the requirements of the Care Act 2014 take effect locally.*
- ii. Assess the occupancy levels achieved through positive promotion of The Green to local residents and beyond.*
- iii. Re-assess the overall ‘quality landscape’ across the care sector in Leeds and specifically the quality of alternative nearby provision in the independent sector.”*

3.33 Cost comparisons, taking into account the National Living Wage, are included in the financial analysis that has been carried out as part of the review process. The implementation of the National Living Wage makes a minor reduction in the overall savings that could be made from closing The Green and does not fundamentally alter the business case.

3.34 Occupancy levels across all the council’s care home have been steadily declining with no material difference if a home is under consultation for closure or not.

3.35 In response to the findings of the consultation, the Scrutiny Board working group and the Council’s ambition to focus its remaining in-house services on promoting recovery and independence, the recommendation regarding The Green has been revised. It is now proposed that The Green should still close as a long term care home but remain as a community asset and be re-commissioned as a bed-based short term recovery service subject to the discussion and agreement with NHS commissioners CCGs.

3.36 The Scrutiny Board has played a valuable role in highlighting the very real concerns that have been presented to them and the revised proposal for The Green acknowledges the efforts of the working group and the recommendation of the Scrutiny Board (full details of the Scrutiny Board findings are available at Appendix 4). However the recommendation to defer a decision for over two years would leave The Green in the same position as some of the local authority homes that were considered in Phases 1 and 2 of the *Better Lives for Older People* programme. The uncertainty regarding the future of a home has led in many cases to staff leaving to find more secure jobs.

3.37 The requirements of the Care Act (2014) have also been taken into account and the revised proposal, involving the retention of directly provided short term recovery bed-based service, allows the Council to influence the care market and to provide a ‘safety-net’ (as required of the Care Act 2014) if a residential care provider fails.

- 3.38 Although the revised proposal for The Green offers the wider community a resource that will be available to more older people and with the potential to achieve better outcomes, the impact on existing residents, their families and carers is acknowledged. Having undertaken a similar exercise previously, in which a residential home was decommissioned then the building used to recommission an alternative service (Harry Booth House, now the South Leeds Independence Centre) Adult Social Care staff have the understanding, skills and sensitivity to minimise any distress or disruption. If The Green is approved for decommissioning / recommissioning the assessment and transfer of residents will be scheduled as part of the *Better Lives for Older People* programme plan. Care will be taken to ensure that the transfer process is centred on the need of each resident and they will be given time and support to allow them to choose an appropriate alternative service.
- 3.39 In addition to the request for Scrutiny regarding The Green, two further requests for scrutiny were received in relation to (a) Siegen Manor (May 2016) and (b) all three care homes and attached day centres, with particular emphasis on Middlecross (June 2016). These requests were considered by the Scrutiny Board at its meeting in June 2016.
- 3.40 Scrutiny Board emphasised the importance of ensuring the health and well-being of current service users and also asked the Director of Adult Social Services to be *“very clear about how individual circumstances have helped shape any proposals and what the proposals are likely to mean for the city and the individual localities affected”*.
- 3.41 They also reflected on the importance of considering the circumstances for each care home and day centre, with specific reference to alternative services and their quality and opportunities to develop facilities for the future. These factors were considered during the review process and details are provided in Appendix 5 - ‘Profile of services’, in which Executive Board will find a breakdown of the business case for each establishment, the number of people affected and what the choices are for them within a 5 mile radius and what we might use the site for going forward.
- 3.42 Other comments raised by Scrutiny Board reflected the outcomes of the consultation findings, with concern over the quality of alternative independent sector provision. The Council recognises the variable quality of independent sector provision and is committed to continually monitoring providers as outlined at items 3.43–3.54 below.

Cost and Quality of the independent sector

- 3.43 Following an extensive viability review into the Phase Three homes, a detailed viability report was presented to Executive Board in September 2015 alongside the proposals for the Phase Three homes and day centres. This report highlighted the cost comparison between the Local Authority services and independent sector provision. The findings showed that the cost of independent sector long term residential care beds in Leeds is £410 per week lower than the cost of the phase three homes operated by the Council.

- 3.44 Consultation responses during Phase Three raised concern over the quality of provision in the independent sector, with a general view that Council provided services were of a higher standard. There are currently 57 independent sector residential homes across Leeds, providing 2,262 beds. 40% are rated 'good' by the CQC. This represents 909 beds. 50% are rated as 'requires improvement' and a further 10% have not yet been rated.
- 3.45 Analysis has also taken place to identify the alternative options for service users based on independent sector homes within a 5 mile radius of their current home. Initially the analysis was carried out based on alternatives within the same ward as the care home subject to the proposal. However, further investigation into residents' previous home addresses and the addresses of their next of kin found that those using services had not always come from within the same ward as the home, though they had generally come from within 5 miles. This mapping allows an understanding of viable alternatives for each individual allowing them to maintain any community, friendship or family links with the area. Further detail can be found at Appendix 5 – 'Profile of Services'.
- 3.46 The issue relating to an alternative care home being of comparable quality has been, and will continue to be, guided by the Council's Quality Standards in the Residential and Nursing Framework contract.
- 3.47 The current standards were developed in 2011 at a time when CQC had withdrawn their rating system for care homes. The intention of our approach was to continue to drive up quality, whilst providing a framework within which we could assign increased funding to higher quality – in effect the 'enhanced rate'.
- 3.48 The Quality Standards were agreed by an Advisory Board, chaired by the Executive Lead Member, following a coproduction process which contained substantial and detailed consultation with service user representatives and independent sector providers. When the contract was let and the standards introduced in 2012, CQC had not yet released the standards or the rating system which is currently in place and which were only implemented during 2014. However, the core standards are reflective of the elements of a service which commissioners, providers and service users identified during the co-production process as critical areas of good or very good service delivery, and therefore there is already significant read across between our contractual standards and the CQC ratings.
- 3.49 Any home that is on the Council's Quality Framework contract and has subsequently been rated by the CQC as "Requires Improvement" is subject to Adult Social Care officers working with the home to help it deliver that improvement and to closely monitor any actions recommended by the CQC. If a home is not able to demonstrate rapid improvement, the enhanced fee rate is withdrawn.
- 3.50 Work is about to commence to re-commission the current framework contract (again overseen by an advisory board chaired by the Executive Member for Health, Well-Being and Adults) and this will be the opportunity to increase the links between the payment system and the ratings given by CQC. This is already the approach we have taken with the recently let community homecare contract where we have made it a requirement that that all providers who are part of the contract must maintain a CQC rating of at least 'Good'.

- 3.51 We recognise that greater coordination between the CQC regulatory approach, the Council contract monitoring approach, and the outcomes of consultation with service users and providers, will always be an advantage to all involved, producing an approach to quality which is easier for providers to evidence and for service users to understand.
- 3.52 The recommissioning of the residential framework contract will be a positive opportunity to incorporate into the Council's Quality Standards, the valuable experience gained under the current standards, the new approach by CQC, the results of consultation with service users, their families, key partners and service providers, alongside the helpful input from Scrutiny Board.
- 3.53 The *Better Lives for Older People* programme has overseen the structured closure of eight Local Authority residential homes and eight Local Authority day centres through two distinct phases of activity. In total, 401 residents and service users and 260 staff have been affected by the changes. 155 residents have been supported to choose alternative homes, with 133 of these people choosing independent sector residential care. These people were supported throughout the process and follow-up reviews were carried out at three months and 12 months to identify any issues and check on their health and wellbeing in their new home. Of the people that moved, 79% were happy and settled in their new home at the three month review, with 65% still happy and settled in the same home at 12 months. Others had moved on to other services (e.g. nursing, end of life care, hospital etc).
- 3.54 Through the review of the residential framework contract and continued support of people who make a move to an alternative home, any issues regarding the quality of the independent sector provision will continue to be addressed.

4 HR Implications

- 4.1 There are currently a total of 351 Adult Social Care (ASC) and 132 Civic Enterprise Leeds (CEL) staff employed at all older people care homes and day centres. 148 ASC and 39 CEL staff (187 staff in total) are working at establishments which are proposed to close.
- 4.2 There have been 128 'informal' expressions of interest from ASC staff employed at all older people services in the council's Early Leaver's initiative (ELI) scheme. In addition, proposals to re-model / re-size existing establishments may result in additional opportunities for staff.
- 4.3 Ongoing engagement is taking place with staff and HR regarding potential opportunities for all staff, if they are affected by any of the proposals. A local Early Leaver Initiative (ELI) scheme is likely to be offered to staff currently employed in services at risk and in services where roles have similar skill sets to create further redeployment opportunities across the organisation. We are also working with a range of partners to increase alternative employment opportunities for affected staff.
- 4.4 In addition, the service will take decisions to freeze recruitment and reduce agency usage as and when appropriate. 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.

- 4.5 Continued formal consultation will take place under Employment Legislation with Trade Unions and staff and support will 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.

5 Corporate Considerations

5.1 Consultation and Engagement

- 5.1.1 Consultation took place on the three homes with attached day centres (Middlecross, The Green and Siegen Manor) alongside the additional day centres at Springfield, Radcliffe Lane and Wykebeck Valley from 1st October to 23rd December 2015.
- 5.1.2 The consultation followed a similar process and best practice used during consultation in Phases 1 and 2 of the *Better Lives for Older People* programme. A comprehensive suite of information was provide to all key stakeholders to explain the process, the purpose of consultation and the potential impact of the proposed change to the services. One to one sessions were held with residents, service users and staff to aid the completion of a questionnaire, supplemented by group sessions and other methods of communication. A summary of the key themes of the consultation is provided at items 3.22-3.28 above and full details can be found in Appendices 1 and 2.

5.2 Equality and Diversity / Cohesion and Integration

- 5.2.1 An Equality Impact Screening was undertaken as part of the initial review of services and this concluded that the proposals would potentially give rise to equality impacts relating to older and disabled people their families and carers. Staff will also be affected, particularly women, who make up a large proportion of the workforce.
- 5.2.2 Full Equality Impact Assessment for residents and service users has been undertaken as a parallel process to the consultation and details can be found in Appendices 6 (covering Middlecross, Siegen Manor and The Green care homes) and 7 (covering Middlecross, Radcliffe Lane, Siegen Manor, Springfield, The Green and Wykebeck Valley day centres).
- 5.2.3 A full Equality Impact Assessment was undertaken in September 2013 for Manorfield House's residents and can be found at Appendix 8.
- 5.2.4 Staff will also be affected, particularly women, who make up 92% of the workforce. An Equality Impact Assessment will also be carried out in relation to the impact on staff. A screening document on the current proposal can be found at Appendix 9.

5.3 Council policies and the Best Council Plan

- 5.3.1 The review of the directly provided services for older people has been undertaken as part of the Adult Social Care's *Better Lives* Programme. This strategy focuses on the Council's capacity to help support the growing number of older people with their care and support needs. It recognises the changing expectations and aspirations of people as they grow older and the need to match these with appropriate and affordable responses.
- 5.3.2 Implementing the *Better Lives* Programme is key to delivering the Council's 'Best Council Plan 2015-2020'.
- 5.3.3 The Plan identifies specific priorities for 2016-17 to make Leeds "*The Best Place to Grow Old in*" and to provide "*Early Intervention... reducing health inequalities*". These priorities link closely with the realignment of services to be more responsive to older people's needs, giving them greater choice and control over their care and reducing the impact on longer-term care services. The Plan also refers to Leeds intention to "*become a more efficient and enterprising council*", which again is reflected by the move towards commissioning more quality services from the independent sector where it is more efficient to do so. The Plan's vision is "*for Leeds to be the best city in the UK: one that is compassionate with a strong economy, that tackles poverty and reduces the inequalities that still exist*". Adult Social Care will continue to work with others to achieve better outcomes for the city through a "*combination of innovation and efficiencies*".

5.4 Resources and value for money

- 5.4.1 As central government funding to local authorities decreases and demand for services increases councils are under pressure to find more efficient and cost effective ways of doing things. Whilst the social care precept is helpful in providing additional funding for adult social care services, the funding it raised in Leeds for 2016/17 was fully utilised to fund the impact of the National Living Wage. The review recognises the need to refocus resources on affordable and sustainable models of service delivery that offer better outcomes for older people.
- 5.4.2 Based on current occupancy levels, the proposals in this report for decommissioning services provided at Manorfield, Middlecross, Siegen Manor and The Green residential homes will deliver net savings of £1.945m in a full-year. There may be costs in 2016/17 if some staff leave the service through the Early Leaver Initiative that are not included in these savings.
- 5.4.3 This report also recommends that The Green be retained as a community asset for intermediate care / recovery beds subject to the discussion and agreement with NHS commissioners, which will include consideration of any additional funding for this enhanced service and bed base. Savings are also anticipated within Adult Social Care through the recovery service enabling people who would otherwise have gone into residential care to be supported in the community at a lower cost, or to fully regain their independence and require no ongoing support. A further report will be presented to Executive Board to advise on the outcome of discussions with NHS commissioners.

5.4.4 The proposals in this report for the decommissioning of services provided at Middlecross, Siegen Manor, The Green, Springfield and Radcliffe Lane day centres will deliver net savings of £0.897m in a full year. In order to deliver the city-wide dementia service £0.111m is required to fund additional staffing. This would leave an overall net full-year saving of £0.786m. There may be costs in 2016/17 if some staff leave the service through the Early Leaver Initiative that are not included in these savings.

Establishment	Net saving £	Sub-totals £
Manorfield House care home	-530,242	
Middlecross care home	-646,122	
Siegen Manor care home	-402,372	
The Green care home	-366,632	
<i>Care homes sub total</i>		-1,945,368
Middlecross day centre	-253,200	
Radcliffe Lane day centre	-160,340	
Siegen Manor day Centre	-90,750	
Springfield day centre	-164,960	
The Green day centre	-227,360	
<i>Day centre sub totals</i>		-896,610
Grand total		-2,816,706

5.4.5 The 2016/17 budget included savings of £0.635m for the anticipated part-year effect of the immediate decommissioning proposals included in this report.

5.5 Legal Implications, Access to Information and Call In

- 5.5.1 This decision is a key decision, has been published to the List of Forthcoming Key Decisions, and is subject to the call-in process as a report to Executive Board.
- 5.5.2 The review of services has taken into consideration the Council's statutory duties and Adult Social Care's specific duties – including duties contained in the Care Act (2014) to meet the needs of those members of the community who require care services. Public consultation on the future of older people's services has been undertaken in accordance with guidance.
- 5.5.3 When making a decision on this matter Executive Board must have "*due regard*" to its duties under section 149 of the Equalities Act 2010 which are set out in more detail in the Legal Implications in Appendix 1 of the Act. In doing so Executive Board must take account of the impact the financial proposals could have on different equality groups and consider ways of mitigating or avoiding any adverse impact.
- 5.5.4 To assist Executive Board to make an informed decision on these matters a full Equalities Impact Assessment has been carried out and the results are summarised at item 5.2 and set out in full at appendices 6-9.

5.6 Risk Management

- 5.6.1 A risk log has been maintained throughout the review in-keeping with the *Better Lives* Programme approach to managing projects. All risks are recorded and a governance board oversees the process.

6 Conclusions

- 6.1 An extensive review of services and a period of consultation on proposals for the residential homes at Siegen Manor, Middlecross and The Green and their adjoining day centres, plus further day centres at Springfield, Radcliffe Lane and Wykebeck Valley has been completed.
- 6.2 The consultation clarified that current residents and service users appreciate the services provided by the highly skilled and compassionate staff teams and the majority would like to see the current services remain unchanged. Executive Board has to balance the needs of current day centre users and care home residents with the future needs and aspirations of the next generation of older people- all within the context of shrinking council budget when making its final decision.
- 6.3 The demand for the services provided by the Council has been in decline and the Council cannot compete with independent sector providers in terms of the cost of the services. The Council is looking towards a different approach to developing and providing services, through commissioning high quality long term care from the independent sector and concentrating in-house services on prevention, reablement and recovery models.
- 6.4 While the fundamental business case for closures has not changed some of the original proposals have been modified in light of what people have said, Scrutiny Board's contribution and the commitment to develop in-house services to promote recovery services.
- 6.5 Scrutiny Board has looked at the issue of the closure of homes and day centres and have raised important issues which have fed into the process. Their contribution has led to further consideration of the issues and amendment to the original proposal. However, it is not possible to satisfy all interested parties and whilst current residents and users of services are a priority the local authority is satisfied that the plans they have put in place in the past, and are proposing to utilise again, to identify alternative placements, will protect the interests of those groups.

- 6.6 The changes are as follows:

Day services

- 6.7 The original proposal to close the named day services still stands as does the proposal to re-model Wykebeck Valley day centre into a complex needs/ dementia day service. Officers are proposing that £0.111m of the £0.897m day services saving is reinvested to ensure Wykebeck Valley has the staffing ratios to meet higher needs, and that all centres can offer both an 'in-reach' and 'out-reach'

service. The primary aim of the centres will be to deliver a service model aimed at keeping people well and offering a more varied choice of service provision.

- 6.8 The services will be delivered with the customer and their family carer at the heart of developing their own care/support plan. Customers will be supported to identify their strengths, working towards building a fulfilling life, wishes, aspirations and goals whilst maintaining them in their own home as long as possible. The range of services will include:
- A safe space which is dementia friendly and flexible
 - Information and signposting service
 - Carer support groups
 - Dementia café
 - Group activities, one to one support including support with personal care
 - Peer support
 - Links to other professional including CPN's, physiotherapists, podiatry and the memory clinic
 - Links back to local communities, neighborhood networks
 - Health and wellbeing advice, guidance and support

- 6.9 This investment would ensure that **all current service users with advanced dementia** in the Middlecross, Siegen Manor and The Green day centres will be **guaranteed a place** in one of the three complex needs / dementia day services.

Care homes

- 6.55 In order to continue the council's commitment to developing extra care housing-with-support as the preferred alternative to residential care and taking into account the circumstances of the individual localities affected, it is proposed that Siegen Manor care home still be closed but the site ring-fenced to explore the potential to develop extra care housing. This has long been an aspiration in the Morley area, but after five years no viable site has been identified. In order to achieve "new homes for old", the Council will prioritise this site for this purpose. Initial financial comparisons on the cost of residential care versus extra care reveal that extra care, even with all care recipients having medium to high care and support needs, costs less per week than residential care. An older person (dependent upon the state for their care) with high to medium care and support needs would save ASC in excess of £200 a week if living in extra care compared with a core residential bed on the commissioning framework.
- 6.10 The proposals regarding The Green care home have come under particular challenge and scrutiny. One key point being the home is seen as a local community asset. Officers have considered carefully all contributions and now propose that The Green care home be closed as a long-stay home but be kept as a local community asset for intermediate care / recovery beds subject to the discussion and agreement with NHS commissioners.
- 6.11 In September 2013, Executive Board approved the decommissioning of Manorfield House residential care home once one or more of the following criteria were fulfilled: no longer required by existing residents; if the health and wellbeing of the remaining residents cannot be maintained; should alternative new residential care provision

become available within the ward; or in response to changes in registration requirements or legislation.

- 6.12 The home has remained open since this date, but with no further admissions. As outlined in the Leeds Assessment and transfer protocol *“Running up to closure of a residential home, a minimum core of 10 residents is required to prevent deterioration in morale”*. The number of residents at Manorfield House has now fallen below this level and as such it is proposed that the remaining residents are supported through the assessment and transfer process to choose alternative services to meet their needs. Residents’ needs will continue to be met, there will be no loss of service. While the Director of Adult Social Services has delegated authority to action this closure, for the sake of transparency it is being reported to Executive Board. The process will be carried out by the experienced Assessment and Transfer team who worked with residents throughout previous decommissioning exercises during Phase 1 and 2 of the Better Lives programme. The team will use the existing assessment and transfer protocol including the Care Guarantee. All residents and staff impacted will be kept fully informed and engaged throughout this process.

Leeds Recovery Service

- 6.13 The Council has always been clear that, as well as supporting people with complex needs, the remaining in-house services should focus on recovery, rehabilitation and short term support. A key part of this was agreeing at Executive Board, in June 2016, to transfer the remaining long term community support staff into the SkILS service and for that service to make an extended offer into the weekend.
- 6.14 It is now proposed that three key in-house services are integrated to provide a comprehensive, city-wide recovery service. These services are: Assisted Living Leeds, the SkILS enablement service (recovery support in people’s own homes) and bed-based recovery support the wider Leeds Intermediate Care Strategy. This integrated service will be known as the **Leeds Recovery Service**.
- 6.15 The proposal to retain The Green and develop the Leeds Recovery Service may require some utilisation of the forecast £1.945m savings from care home closures, subject to discussions with NHS commissioners. The business case for this is the assumption that if long-term care home placements can be avoided or delayed in a year, then the investment will be at worst cost neutral or help to make further savings. Up to 37 additional recovery beds could be provided by the Local Authority if The Green is retained as a community asset for intermediate care subject to the discussion and agreement with NHS commissioners. The Green is also located in the East North East Management Area and Leeds North CCG, where a lack of recovery beds has been identified.

Assessment and Transfer process at Decommissioned Care Homes and Day Centres

- 6.16 The rest of the original proposals remain unchanged which are to decommission the services at Siegen Manor, Middlecross, The Green (care homes and day centres) and Springfield and Radcliffe Lane day centres. On confirmation of approval to decommission these services, customers and their families / carers will be informed

of the decision to close the service. They will be supported through the closure process by familiar staff and also by an established Assessment and Transfer team who will support the customer in making alternative and appropriate arrangements for their care needs.

- 6.17 The Assessment and Transfer team has supported residents and day centre users affected by closures of services during the previous phases of the Better Lives programme. This has entailed carrying out person-centred assessments, considering the needs and choices of the residents and service users, their families and carers. This work takes place in line with the Council's established assessment and transfers protocols including its Care Guarantee, which provides reassurance on the service that residents, service users and their families can expect to receive. This includes a guarantee that **each person will receive the same level of service** and a commitment that **no resident will be worse off** financially if they have to move. Appendix 10 sets out the Care Guarantee in more detail.
- 6.18 As stated at item 6.12, all current service users with advanced dementia in the Middlecross, Siegen Manor and The Green day centres will be guaranteed a place in one of the three complex needs / dementia day services. In addition, existing service users at Radcliffe Lane and Springfield day centres will be supported to transfer to either Holt Park, a Neighbourhood Network, the Leeds Shared Lives scheme or to a service provided through a Direct Payment. Current service users at Wykebeck Valley will continue to attend the day centre if they wish to do so whilst the service is being remodelled as a complex needs hub. In brief, all residents and service users' needs will continue to be met.
- 6.19 Where necessary, independent advocates have supported this process to ensure the needs of the person affected are captured and responded to. The Assessment and Transfer Team's work has been checked by an independent quality assurance team. This involves the use of a quality checklist to ensure each part of the process including completion of documentation and input of information onto systems takes place appropriately. This process will be carried out by the Programme Office Team following the documented protocols.
- 6.20 Staff will also be supported through the process, with ongoing discussions to support them in finding opportunities elsewhere in the Council, or exploring opportunities for ELI where applicable.

7 Recommendations

The Executive Board is asked to:

- 7.1 Approve the decommissioning of the services provided at Middlecross, Siegen Manor and The Green residential care homes.
- 7.2 Approve the decommissioning of the services provided at Middlecross, Siegen Manor and The Green, Springfield and Radcliffe Lane day centres.
- 7.3 Agree the timescales for ceasing the services based on the timeline attached in Appendix 3.

- 7.4 Approve the remodelling of Wykebeck Valley day centre to become a complex needs centre for the east of the city, taking a phased approach to accommodate the needs of existing and future customers.
- 7.5 Agree reinvestment of £0.111m of the planned savings to ensure Wykebeck can offer an enhanced service like Laurel Bank and Calverlands complex needs day centres.
- 7.6 Agree that the Siegen Manor site be ear-marked to explore the potential to develop extra care housing.
- 7.7 Approve the development of a city-wide in-house integrated recovery service comprised of Assisted Living Leeds, the SkILs enablement service and a bed-based offer to support the wider Leeds Intermediate Care Strategy. Agree that this service should be called Leeds Recovery Service.
- 7.8 Agree that The Green be retained as a community asset for intermediate care / recovery beds subject to the discussion and agreement with NHS commissioners. A further report will be presented to Executive Board when discussions have concluded.
- 7.9 Note the outcome of the full consultation reports with stakeholders, including residents, service users, their families and carers, Trade Union, staff and Scrutiny Board appended (Appendices 1 and 2).
- 7.10 Note the immediate decommissioning of the services provided at Manorfield House residential home and the assessment and transfer process of residents.
- 7.11 Note the continued formal consultation under Employment Legislation with Trade Unions and staff and support for staff throughout the decommissioning process including identifying any opportunities for employment within the Council.
- 7.12 Note the development of alternative models of support, including those provided in the independent sector and by other in-house services.
- 7.13 Note that the commissioned service Bay Tree Resource Centre in Moor Allerton also offers a choice of day support for people with complex needs including dementia.
- 7.14 Note the continued work via the Housing and Care Futures programme to identify potential future use of the sites that become available as a result of the implementation of these proposals, including the opportunity for further development of specialised older people accommodation, including extra care housing.
- 7.15 Note that the lead officer responsible for implementation is the Director of Adult Social Services.

8 Background documents¹

8.1 Nil.

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.