

At: Gadeirydd ac Aelodau'r Pwyllgor
Archwilio Perfformiad

Dyddiad: Dydd Mercher, 6 Ebrill
2016

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Annwyl Gyngorydd

Fe'ch gwahoddir i fynychu **Cyfarfod Arbennig** o'r **PWYLLGOR ARCHWILIO PERFFORMIAD, DYDD MAWRTH, 12 EBRILL 2016** am **2.00 pm** yn **YSTAFELL BWYLLGOR 1A, NEUADD Y SIR, Ffordd Wynnstay, Rhuthun, LL15 1YN.**

Yn gywir iawn

G Williams
Pennaeth Gwasanaethau Cyfreithiol a Democrataidd

AGENDA

RHAN 1 - GWAHODDIR Y WASG A'R CYHOEDD I FYNYCHU'R RHAN HWN O'R CYFARFOD

1 YMDDIHEURIADAU

2 DATGANIADAU O FUDDIANT

Dylai'r Aelodau ddatgan unrhyw gysylltiad personol neu gysylltiad sy'n rhagfarnu mewn unrhyw fater a nodwyd i'w ystyried yn y cyfarfod hwn,

3 MATERION BRYD FEL Y'U CYTUNWYD GAN Y CADEIRYDD

Rhybudd o eitemau y dylid, ym marn y Cadeirydd, eu hystyried yn y cyfarfod fel materion brys yn unol ag Adran 100B(4) Deddf Llywodraeth Leol 1972.

4 ADOLYGIAD AC YMGYNGHORIAD GWASANAETHAU GOFAL MEWNOL (Tudalennau 3 - 214)

Gofyn i'r Pwyllgor ystyried canfyddiadau, casgliadau a chynigion y Grŵp Tasg a Gorffen a sefydlwyd i archwilio opsiynau ar gyfer darparu gwasanaethau gofal cymdeithasol o ansawdd uchel yn Sir Ddinbych, a llunio argymhellion i'w cyflwyno i'r Cabinet mewn perthynas â'r sefydliadau gofal yn Hafan Deg (Y Rhyl), Dolwen (Dinbych), Awelon (Rhuthun) a Cysgod y Gaer (Corwen).

AELODAETH

Y Cynghorwyr

Y Cynghorydd Barry Mellor
(Cadeirydd)

Raymond Bartley
Meirick Davies
Colin Hughes
Geraint Lloyd-Williams

Dewi Owens
Arwel Roberts
Gareth Sandilands
Joe Welch

COPIAU I'R:

Holl Gynghorwyr er gwybodaeth
Y Wasg a'r Llyfrgelloedd
Cynghorau Tref a Chymuned

Adroddiad i'r:	Pwyllgor Archwilio Perfformiad
Dyddiad y Cyfarfod:	12 Ebrill 2016
Aelod/Swyddog Arweiniol:	Y Cyng. Bobby Feeley / Phil Gilroy
Awdur yr Adroddiad:	Grŵp Tasg a Gorffen Aelodau Etholedig
Teitl:	Ymgynghoriad ac Adolygiad o'r Gwasanaethau Gofal Mewnol

1. Am beth mae'r adroddiad yn sôn?

Mae'r adroddiad yn crynhoi'r wybodaeth a gasglwyd fel rhan o'r adolygiad o wasanaethau gofal mewnol y cyngor, gan gynnwys yr adborth a dderbyniwyd o'r broses ymgynghori gyhoeddus.

2. Beth yw'r rheswm dros lunio'r adroddiad hwn?

Y rheswm dros lunio'r adroddiad hwn yw er mwyn galluogi'r Aelodau i graffu'r cynigion cyn y cyfarfod ar 24 Mai 2016 pan ofynnir i'r Cabinet wneud penderfyniad ynglŷn â pha opsiynau y dylid eu symud ymlaen mewn perthynas â phob un o'r sefydliadau gofal (h.y. Hafan Deg; Dolwen; Awelon; a Chysgod y Gaer).

3. Beth yw'r Argymhellion?

Argymhellir y dylai'r Pwyllgor ystyried yr adroddiad hwn, a'r atodiadau cysylltiedig, a llunio argymhelliad i'r Cabinet ynglŷn â'r opsiwn a ffeirir ar gyfer y pedwar sefydliad. Mae manylion llawn yr opsiynau a archwiliwyd mewn perthynas â phob safle, gan gynnwys unrhyw gynigion a gyflwynwyd fel rhan o'r ymgynghoriad cyhoeddus, wedi'u nodi yn Atodiadau F-I. Mae'r Grŵp Tasg a Gorffen yn argymhell bod y Cabinet yn cymeradwyo'r opsiynau canlynol:

- 3.1 Hafan Deg (y Rhyl) – Bydd y Cyngor yn ymuno mewn partneriaeth â sefydliad allanol a throsglwyddo'r adeilad iddynt, gan gomisiynu gwasanaeth gofal dydd yn yr adeilad ac, yn ogystal, galluogi asiantaethau'r trydydd sector i ddarparu gweithgareddau ymyrraeth gynnar ar gyfer pobl hŷn a fydd yn lleihau unigedd cymdeithasol, yn cefnogi annibyniaeth ac yn hybu gwytnwch.
- 3.2 Dolwen (Dinbych)- Bydd y cyngor yn ffurfio partneriaeth gyda sefydliad allanol a throsglwyddo'r gwasanaeth cyfan iddynt, tra'n sicrhau bod Dolwen wedi cofrestru i ddarparu gofal lechyd Meddwl yr Henoed.
- 3.3 Awelon (Rhuthun) – Bydd y cyngor yn atal derbyniadau newydd a gweithio gyda'r unigolion a'u teuluoedd ar gyflymder sy'n addas ar eu cyfer nhw i'w symud i ddewisiadau amgen addas (fel y bo'n briodol) ac i ymuno mewn partneriaeth â pherchennog Llys Awelon i ddatblygu mwy o fflatiau Gofal Ychwanegol ar y safle. Fodd bynnag, dylid nodi bod y Cabinet wedi cytuno nad oes yn rhaid i neb adael os nad ydynt eisiau gadael ac y gellir parhau i ddiwallu eu hanghenion yno.
- 3.4 Cysgod y Gaer (Corwen) – bydd y cyngor yn ffurfio partneriaeth gyda'r budd-ddeiliaid perthnasol (gan gynnwys PBC a'r trydydd sector) i ddatblygu'r safle yn 'ganolfan

gefnogaeth' gan gynnwys cyfleusterau gofal preswyl a gofal ychwanegol ynghyd â gofal yn y cartref allanol a gwasanaeth cefnogaeth i denantiaid Cynlluniau Tai Gwarchod lleol a phoblogaeth ehangach Corwen a'r ardal gyfagos.

Argymhellir yr opsiynau hyn am y rhesymau canlynol:

- a) Mae'r rhesymau ar gyfer pob opsiwn a ffefrir ar gyfer pob gwasanaeth wedi'u cyflwyno yn Atodiad C ("yr achos dros newid"). Nid oedd yr ymgynghoriad yn darparu unrhyw resymeg neu dystiolaeth gymhellol i'r cyngor i gyfiawnhau addasu'r opsiynau a ffefrir ar gyfer dyfodol ei wasanaethau gofal mewnol.
- b) Mae achos ariannol cryf dros opsiynau a ffefrir y Cyngor ar gyfer Hafan Deg a Dolwen, ac achos ariannol sylweddol mewn perthynas ag Awelon, y byddai'r arbedion (yn seiliedig ar ddaliadaeth bresennol) oddeutu £350,000 y flwyddyn ar gostau gofal yn unig. Fodd bynnag, dylid pwysleisio nad yr arbedion ariannol yw'r unig (na hyd yn oed y prif) reswm dros yr opsiynau a gyflwynwyd gan y Grŵp Tasg a Gorffen.
- c) Er y cafwyd diddordeb helaeth yn yr ymgynghoriad, ychydig iawn o ymatebion a dderbyniodd y cyngor i'r holiaduron, ac ychydig iawn o bobl a fynegodd ffafriaeth ar gyfer unrhyw un o'r opsiynau a gyflwynwyd (gyda llai fyth yn ffafrio dewis amgen i opsiynau a ffefrir y Cyngor). At hynny, gan ystyried yr holl wybodaeth a gasglwyd yn ystod yr ymgynghoriad, ychydig iawn o bobl a ddarparodd unrhyw resymau ystyrlon dros wrthwynebu opsiynau a ffefrir y cyngor, ac ychydig iawn (os o gwbl) a gyflwynwyd fel dystiolaeth i gefnogi'r rhesymau a gynigwyd. Gan fod nifer yr holiaduron a gyflwynwyd yn is na'r disgwyl, mae Atodiad A yn cynnwys rhestr o'r holl weithgareddau a gynhaliwyd gan y Cyngor i hyrwyddo'r ymgynghoriad. Mae hyn er mwyn sicrhau i'r Aelodau y gwnaed pob ymdrech resymol i annog cyfranogaeth yn yr ymgynghoriad.
- d) Er bod nifer yr ymatebion i'r ymgynghoriad yn isel, roedd cefnogaeth sylweddol ar gyfer yr opsiwn a ffefrir gan y cyngor ar gyfer Cysgod y Gaer yn yr ymatebion a dderbyniwyd i'r holiaduron ymgynghori.
- e) Yn gyffredinol, y neges a gafwyd gan yr unigolion a ymatebodd i'r ymgynghoriad oedd i beidio â newid ein gwasanaethau gofal mewnol. Fodd bynnag, rydym yn credu ein bod wedi dangos yn briodol pam nad yw hynny'n ddymunol nac yn ymarferol o fewn y ddogfen "achos dros newid" (Atodiad C) ac Atodiadau F-I.
- f) Ychydig iawn o gynigion eraill a gyflwynwyd yn ystod yr ymgynghoriad, ac mae'r rhai a gyflwynwyd wedi'u gwerthuso fel rhai sy'n llai ymarferol a /neu gynaliadwy na'r opsiynau a ffefrir gan y cyngor (gweler Atodiadau F-I am ragor o fanylion). Fodd bynnag, mae'n bwysig nodi bod y cynigion amgen wedi'u cyflwyno, gan gynnwys cynigion gan UNSAIN. Dylid rhoi ystyriaeth lawn i'r rhain fel rhan o'r broses o wneud penderfyniadau.
- g) Er bod staff yn Awelon, Dolwen a Hafan Deg yn gwrthwynebu'r opsiynau a ffefrir yn gyffredinol (ac y byddai'n well ganddynt barhau fel gweithwyr cyflogedig y cyngor), mae'n ymddangos fod gan opsiynau a ffefrir y Cyngor gefnogaeth ymysg y grŵp o staff ehangach yn y Gwasanaethau Cymorth Cymunedol, sy'n cynnwys gweithwyr proffesiynol gofal cymdeithasol.
- h) Er y nodwyd rhai effeithiau negyddol posibl ar gyfer defnyddwyr gwasanaeth presennol, staff a phobl sy'n rhannu nodweddion penodol a ddiogelir, mae'r cyngor yn

gallu lliniaru yn erbyn pob un o'r rhain mewn rhyw ffordd. Felly mae'r Grŵp Tasg a Gorffen yn sicr y bydd gwasanaethau gofal a chefnogaeth ar gyfer pobl hŷn yn Sir Ddinbych yn well, ac yn fwy cynaliadwy, pe bai'r holl opsiynau a ffefrir yn cael eu gweithredu.

4. Manylion yr adroddiad

4.1. Cefndir

Mae'r Cyngor wedi cynnal ymarfer i ystyried dyfodol y gwasanaethau gofal cymdeithasol mewnol ers mis Mawrth 2014, pan ofynnodd y Pwyllgor Archwilio Perfformiad bod grŵp Tasg a Gorffen Aelodau Etholedig¹ yn cael ei sefydlu i "archwilio opsiynau gwerth am arian ar gyfer darparu gwasanaethau gofal cymdeithasol o ansawdd uchel yn y Sir".

Ar ddechrau 2015, dechreuom ymarfer 'gwrando ac ymgysylltu' i'n cynorthwyo i ddatblygu cynigion y gellir eu profi pe bai'r Cabinet yn cymeradwyo ymgynghoriad cyhoeddus ffurfiol. Cafwyd trafodaethau gyda phob defnyddiwr gwasanaeth unigol (a'u teuluoedd/eiriolwyr) y gallai newidiadau effeithio arnynt, ac roedd hyn yn cynnwys asesiad o'u hanghenion ac argaeledd darpariaeth amgen addas i ddiwallu'r anghenion hynny pe bai'r Cyngor yn penderfynu newid y gwasanaethau presennol. Yna datblygwyd cynigion ar gyfer pob un o'r pedwar sefydliad ac fe'u cytunwyd gan Grŵp Tasg a Gorffen Aelodau Etholedig, cyn eu craffu gan y Pwyllgor Archwilio Perfformiad. Yn olaf, ar 28 Gorffennaf 2015, cymeradwyodd y Cabinet y cynnig i gynnal ymgynghoriad cyhoeddus ar ddyfodol eu gwasanaethau mewnol, a chytuno ar yr opsiynau a ffefrir ar gyfer pob sefydliad. Dechreuodd yr ymgynghoriad cyhoeddus ar 16 Hydref 2015 a daeth i ben ar 24 Ionawr 2016. Mae disgrifiad llawn o'r gweithgareddau a gynhaliwyd yn ystod yr ymgynghoriad ynghlwm yn Atodiad A.

4.2. Gwybodaeth a gyflwynwyd i'r cyhoedd

Cyhoeddodd y cyngor nifer o ddogfennau i gefnogi'r broses ymgynghori. Buom yn gweithio gyda'r Sefydliad Ymgynghori i sicrhau fod yr wybodaeth a gyhoeddwyd yn hygyrch ac yn ddigon manwl i alluogi'r cyhoedd i ymgysylltu mewn modd ystyrlon. Fodd bynnag, wrth i'r ymgynghoriad fynd rhagddo, roeddem yn parhau i gyhoeddi gwybodaeth bellach os teimlwn y byddai'n cynorthwyo'r broses ymgynghori. Er enghraifft, daeth i'r amlwg yn ystod y cyfarfodydd ymgynghori cyhoeddus bod nifer fechan o gwestiynau / heriau tebyg yn cael eu cyfeirio at y cyngor, a bod rhai o'r rhain yn seiliedig ar fythau neu gamddealltwriaeth. Felly cyhoeddom ddogfen ym mis Rhagfyr 2015 i ymateb i'r saith cwestiwn allweddol oedd yn cael eu codi'n gyson yn y cyfarfodydd cyhoeddus. Y rheswm dros hyn oedd, er ein bod yn gallu ateb y cwestiynau hyn yn uniongyrchol gyda'r rhai oedd yn bresennol yn y cyfarfodydd cyhoeddus, teimlwn y byddai'n ddefnyddiol rhannu'r ymatebion hynny gyda'r cyhoedd ehangach nad oeddent wedi mynychu'r cyfarfodydd cyhoeddus. Mae'r ddogfen hon (a gyhoeddwyd fel datganiad i'r wasg, ei rhoi ar ein gwefan, a'i chyhoeddi'n rheolaidd drwy gyfryngau cymdeithasol) ynghlwm yn Atodiad E. Mae hon yn ddogfen allweddol gan ei bod yn mynd i'r afael â nifer o'r prif heriau a gyflwynwyd yn erbyn dogfen "achos dros newid" y cyngor. Yn ogystal â hyn, cyhoeddwyd newyddlenni yn rheolaidd ar y dudalen ymgynghori ar wefan y Cyngor i ddarparu crynodeb o'r gweithgareddau a gynhaliwyd a'r adborth a dderbyniwyd yn ystod yr ymgynghoriad.

¹ Mae Nodiadau yr holl gyfarfodydd Grŵp Tasg a Gorffen ynghlwm yn Atodiad S

4.3. Gwybodaeth / Tystiolaeth a ystyriwyd yn ystod yr adolygiad

Ystyriwyd ystod o wybodaeth fel rhan o'r adolygiad, ac mae'n anodd cyflwyno hyn mewn modd sy'n gryno ac ystyrlon. Felly mae'r wybodaeth wedi'i chyflwyno fel cyfres o atodiadau y gellir cyfeirio atynt yn hawdd fel bo'r angen i gynorthwyo'r Aelodau i wneud penderfyniad ar sail gwybodaeth. Mae rhestr lawn o'r atodiadau fel a ganlyn:

Atodiad A	Crynodeb o'r gweithgareddau hyrwyddo a chyfranogaeth a gynhaliwyd
Atodiad B	Y ddogfen ymgynghori gyhoeddus
Atodiad C	Yr achos dros newid (wedi'i gyhoeddi ochr yn ochr â'r ddogfen ymgynghori)
Atodiad D	Ffurflen ymateb i'r ymgynghoriad (ar gael fel ffurflen ar bapur neu ar-lein)
Atodiad E	Datganiad i'r Wasg: 7 her allweddol a godwyd yn ystod y cyfarfodydd ymgynghori cyhoeddus
Atodiad F	Dadansoddiad o'r opsiynau ar gyfer Hafan Deg
Atodiad G	Dadansoddiad o'r opsiynau ar gyfer Dolwen
Atodiad H	Dadansoddiad o'r opsiynau ar gyfer Awelon
Atodiad I	Dadansoddiad o'r opsiynau ar gyfer Cysgod y Gaer
Atodiad J	Dogfen Asesiad o Effaith ar Gydraddoldeb
Atodiad K	Ymateb Ffurfiol gan Unsain
Atodiad L	Crynodeb o'r deisebau a dderbyniwyd
Atodiad M	Crynodeb o'r sylwadau gwleidyddol
Atodiad N	"Yr Achos dros Beidio â Newid"; dogfen Llais Sir Ddinbych
Atodiad O	Enghraifft o adroddiad monitro ansawdd darparwr gofal
Atodiad P	Adborth gan staff (a gyhoeddwyd ar y wefan i gefnogi'r broses ymgynghori)
Atodiad Q	Crynodeb o'r adborth o ddigwyddiadau ymgysylltu staff Gwasanaethau Cymorth Cymunedol
Atodiad R	Proffil Demograffig yr Ymatebwyr i'r Ymgynghoriad
Atodiad S	Nodiadau cyfarfodydd Grŵp Tasg a Gorffen Aelodau Etholedig

4.4. Crynodeb o'r adborth a dderbyniwyd i'r ymgynghoriad cyhoeddus

Mae'r tabl isod yn crynhoi faint o ymatebion a dderbyniwyd drwy'r dulliau amrywiol. Dylid nodi bod pedwar ymgynghoriad mewn gwirionedd (un ar gyfer pob sefydliad), ond dyluniwyd un ffurflen ymateb ar gyfer y pedwar ymgynghoriad. Roedd hyn yn galluogi pobl i ymateb drwy lenwi un ffurflen yn unig. Er bod gan rai unigolion ddiddordeb yn y pedwar sefydliad, dim ond diddordeb mewn un sefydliad penodol oedd gan eraill. Felly mae cyfanswm nifer yr ymatebion yn fwy na nifer y ffurflenni ymateb a dderbyniwyd. Mae nifer yr ymatebion ar gyfer pob sefydliad wedi'i nodi yn y dadansoddiad o bob ymgynghoriad (Atodiadau F-I).

Holiaduron Ymgynghori ²	<ul style="list-style-type: none"> • 64 holiadur wedi'u hanfon i'r Tîm Cysylltiadau Cwsmer • 104 holiadur ar-lein
Ymatebion eraill gan unigolion	<ul style="list-style-type: none"> • 14 llythyr (2 gyda deisebau) • 7 ffurflen adborth gan gartrefi gofal • 23 e-bost / 3 neges ffôn
Cyfarfodydd cyhoeddus	<ul style="list-style-type: none"> • 8 cyfarfod cyhoeddus mewn 4 tref • 137 o fynychwyr i gyd
Cyfarfodydd / Grwpiau ffocws	<ul style="list-style-type: none"> • 5 Cyfarfod Grŵp Ardal Aelodau • 2 Gyfarfod Cyngor Tref • 4 digwyddiad ymgysylltu â staff • 25 cyfarfod gyda grwpiau â diddordeb
Deisebau	<ul style="list-style-type: none"> • 9 o ddeisebau wedi'u cyflwyno (5 cyn y cyfnod ymgynghori) • 7240 o lofnodion i gyd
Ymatebion undeb	<ul style="list-style-type: none"> • Un adroddiad ffurfiol gan Unsain

Mae'r tabl isod yn dangos poblogrwydd yr opsiynau amrywiol ar gyfer pob sefydliad unigol o'r ffurflenni ymateb i'r ymgynghoriad (ar bapur ac ar-lein). Yn anffodus, ni ddewisodd mwyafrif yr ymatebwyr unrhyw un o'r opsiynau penodol a nodwyd. Fodd bynnag, o'r sylwadau a gyflwynwyd, mae'n amlwg fod mwyafrif yr ymatebion yn cefnogi "dim newid" h.y. cadw pethau fel y maent ar hyn o bryd. Mae'r ymatebion sy'n gysylltiedig â phob sefydliad unigol yn cael eu dadansoddi'n fanylach yn Atodiadau F-I.

	Hafan Deg	Dolwen	Awelon	Cysgod y Gaer
Opsiwn 1	10	7	0	24
Opsiwn 2	0	0	12	0
Opsiwn 3	0	20	4	0

5. Sut mae'r penderfyniad yn cyfrannu at y Blaenoriaethau Corfforaethol?

Bydd y penderfyniad yn cyfrannu'n uniongyrchol at dair o flaenoriaethau corfforaethol y cyngor:

- Mae pobl ddiamddiffyn yn cael eu diogelu ac yn gallu byw mor annibynnol â phosibl;
- Sicrhau mynediad at dai o ansawdd da; a

Mae'r holl ymatebion unigol i'r ymgynghoriad ar gael ar wefan y cyngor ar y dolenni cyswllt canlynol:

Cymraeg: <https://www.sirddinbych.gov.uk/cy/eich-cyngor/ymgyngoriadau/ymgyngoriadau-wedi-cau.aspx>
Saesneg: <https://www.denbighshire.gov.uk/en/your-council/consultations/closed-consultations.aspx>

- iii. Moderneiddio'r cyngor i sicrhau effeithlonrwydd a gwella gwasanaethau ar gyfer ein cwsmeriaid

Bydd yr opsiynau a argymhellir yn cefnogi'r dair blaenoriaeth corfforaethol hyn oherwydd:

- i. Bydd yn lleihau ein dibyniaeth ar wasanaethau gofal preswyl traddodiadol ac yn darparu dewisiadau amgen gwell (h.y. Tai Gofal Ychwanegol) sy'n gallu diwallu'r un lefel o anghenion, ond sydd wedi'u profi i gynhyrchu gwell canlyniadau ar gyfer dinasyddion, gan gynnwys mwy o annibyniaeth.
- ii. Bydd yn galluogi buddsoddiad mewn cyfleusterau na all y cyngor fforddio eu darparu, a'r canlyniad fydd tai o ansawdd gwell ar gyfer pobl hŷn gydag anghenion gofal sylweddol. Er enghraifft, byddai'n rhaid gwneud gwaith er mwyn i Dolwen ddiwallu'r safonau gofynnol er mwyn i'r perchennog newydd gofrestru fel darparwr Iechyd Meddwl yr Henoed. At hynny, byddai cartref gofal preswyl Awelon sy'n heneiddio yn cael ei ddisodli gan dai gofal ychwanegol cyfoes.
- iii. Bydd Sir Ddinbych yn elwa o gael mwy o gynlluniau Tai Gofal Ychwanegol, a bydd y cyngor yn cyflawni arbedion drwy sicrhau nad ydym yn talu mwy na chyfradd y farchnad ar gyfer gwasanaethau gofal.

6. Beth fydd yn ei gostio a sut bydd yn effeithio ar wasanaethau eraill?

Mae'n debygol y bydd rhai o'r opsiynau a gyflwynwyd yn ei gwneud yn ofynnol i'r Gwasanaethau Cymorth Cymunedol dderbyn cyngor cyfreithiol a /neu gaffael er mwyn eu gweithredu'n llwyddiannus. Er enghraifft, byddai angen cyngor cyfreithiol ar gyfer unrhyw benderfyniad i drosglwyddo perchnogaeth asedau'r cyngor i'r sector annibynnol er mwyn diogelu budd y cyngor a'r gymuned.

7. Beth yw prif gasgliadau'r Aseiad o Effaith ar Gydraddoldeb (AEG) a gynhaliwyd ar y penderfyniad? Dylai'r templed AEG wedi'i lenwi gael ei atodi fel atodiad i'r adroddiad

Mae'n rhaid nodi'r gwahaniaeth rhwng yr effaith uniongyrchol ar y rhai sy'n defnyddio'r gwasanaethau hyn ar hyn o bryd (a'u teuluoedd a'u ffrindiau) a'r effaith ar y gymuned yn ei chyfanrwydd. Mae'r cyngor eisoes wedi addo lliniaru yn erbyn yr effaith posibl ar ddefnyddwyr gwasanaeth presennol (a'u teuluoedd a'u cyfeillion) drwy nodi, na fyddai'n rhaid i unrhyw un symud o'u cartref presennol oni bai nad oes modd diwallu eu hanghenion yn y lleoliad hwnnw mwyach. Yn gyffredinol, credwn y byddai'r cynnig hir dymor a ddarparwyd yn yr opsiynau a ffeirir yn arwain at effaith gadarnhaol ar bobl sydd â nodweddion a ddiogelir a rennir, yn enwedig pobl hŷn. Mae dogfen aseiad o effaith ar gydraddoldeb ynghlwm yn Atodiad J, sy'n archwilio effaith bosibl yr holl opsiynau ar gyfer pob safle.

8. Pa ymgynghoriadau a gynhaliwyd gyda'r Pwyllgorau Archwilio ac eraill?

Mae'r papur hwn (a'r atodiadau perthnasol) yn nodi'r gwahanol weithgareddau ymgynghori a gynhaliwyd mewn perthynas â'r mater hwn. Mae'r cynigion a nodwyd yn yr adroddiad wedi'u datblygu gan Grŵp Tasg a Gorffen Aelodau Etholedig, ac mae'r holl gynigion wedi'u craffu gan Bwyllgor Archwilio Perfformiad cyn i'r Cabinet wneud unrhyw benderfyniad.

9. Datganiad y Prif Swyddog Cyllid

Er bod y goblygiadau ariannol yn ystyriaeth eilaidd, dylai'r opsiynau a ffeirir ddarparu atebion mwy cost effeithiol i'r modelau gweithredu presennol. Yn amlwg, mae budd

ariannol ar sail cost uned, ond bydd cyfanswm y gost yn y pen draw yn dibynnu ar y math o fodel a gaiff ei weithredu a bydd yn amrywio yn ôl galw.

10. Pa risgiau sy'n bodoli ac a oes unrhyw beth y gallwn ei wneud i'w lleihau?

Mae risg y bydd unrhyw benderfyniad a wnaed gan y Cabinet yn cael ei herio gan unigolyn / grŵp, ac y gallai hyn arwain at adolygiad barnwrol o'r penderfyniad. Mae hyn wedi digwydd gyda phenderfyniadau eraill a wnaed gan awdurdodau lleol eraill a sefydliadau'r sector cyhoeddus yn y blynyddoedd diwethaf. Gwneir heriau o'r fath yn gyffredinol ar y sail na ddilynwyd y drefn briodol yn ystod y broses ymgynghori. Mae'r Tîm Prosiect yn teimlo bod y risg hon wedi'i lliniaru gymaint â phosib drwy'r broses drylwyr a gynhaliwyd i reoli'r adolygiad hwn a'r ymgynghoriad dilynol. Er enghraifft, cynhaliwyd ymarfer "gwrando ac ymgysylltu" helaeth (cyn-ymgynghori) a luniodd yr opsiynau a ddaeth yn destun yr ymgynghoriad cyhoeddus. Mae'r Tîm Prosiect wedi gwneud popeth sy'n rhesymol er mwyn galluogi ac annog cyfranogaeth yn y broses ymgynghori. Rydym wedi ystyried Egwyddorion Cyfreithiol Gunning 1985 yn ofalus o ran ymgynghori i sicrhau fod y broses ymgynghori yn gadarn a theg. Cynhaliwyd Asesiad o Effaith ar Gydraddoldeb trylwyr i sicrhau y rhoddwyd ystyriaeth briodol i ddyletswyddau'r Ddeddf Gydraddoldeb. Yn olaf, rydym wedi gweithio gyda'r Sefydliad Ymgynghori sydd wedi cynorthwyo i'n tywys drwy'r broses ymgynghori ac wedi darparu cyngor a her drwy gydol y prosiect.

11. Pŵer i wneud y Penderfyniad

Mae Erthygl 6.3.2(b) Cyfansoddiad y Cyngor yn nodi y gall Pwyllgorau Archwilio "wneud adroddiadau ac/neu argymhellion i'r Cyngor llawn a/neu'r Cabinet mewn perthynas â chyflawni unrhyw swyddogaeth" ac mae Erthygl 6.3.3. (b) yn nodi "wrth arfer eu swyddogaethau adolygu a datblygu polisi gall pwyllgorau archwilio gynnal ymchwil, ymgynghoriad cymunedol ac ymgynghoriad arall wrth ddadansoddi materion polisi ac opsiynau posibl".

Mae tudalen hwn yn fwriadol wag

SUMMARY OF PROMOTION AND PARTICIPATION ACTIVITY UNDERTAKEN BY THE COUNCIL

Summary of communications activity

Throughout the consultation and pre-consultation period, we have kept the public informed of the development of the consultation in a variety of ways, including regular press and media briefings for the Daily Post, Rhyl Journal and the Denbighshire Free Press. These include the following:

1. 28 July 2015 - Press Release: '*Cabinet agrees to formally consult on its in-house care provision*'.
2. 16 October 2015 - Press Release: '*Council launches formal in-house care review consultation*'.
3. 21 October 2015 – Information on the consultation was sent out to Denbighshire Voluntary Services Council (DVSC) for distribution to their networks, and it was also published on their website.
4. 9 November 2015 Press Release – to publicise the public consultation meetings on the future of in-house care services.
5. 20 December 2015 – Frequently Asked Questions feature published to the media, placed on Denbighshire's website and on the websites of the Rhyl Journal, Free Press and the Daily Post.

In addition there have been:

- Television and BBC radio interviews to explain the process and advertise the consultation events.
- Articles in the September 2015, December 2015 and February 2016 editions of County Voice. The article in the winter edition was entitled: '*Council reminds residents on in-house care review consultation*'.
- Information placed on the Council's website has been regularly updated, including 5 newsletters giving updates as the formal consultation has progressed.
- Regular feed of information about the public meetings and other updates on social media (i.e. the Council's Twitter and Facebook pages)
- Information distributed via the DVSC both in hard copy newsletters and through electronic briefings.
- A further press briefing has been arranged for the Journal, Free press and Daily Post before the papers for the April meeting of the Performance Scrutiny Committee are made public.

In addition the following participation activities has taken place:

<u>Stakeholder</u>	<u>Focus</u>	<u>Method of consultation/activity</u>
Service Users	Residents, service users and friends & family of those using current services.	Needs assessments of every service user took place during the pre-consultation period, and discussions were held with all service users, along with their family/friends/advocates where they chose to participate. Feedback from these meetings was fed into the consultation stage.
	Tenants living in Extra Care Housing schemes where DCC staff currently provide care services.	Discussions held with all tenants in Llys Awelon, Gorwel Newydd and Nant y Mor to gather their views about the future of in-house care services. These views were fed into the consultation process.
	Tenants of sheltered housing schemes	Project officer met with tenants at Cysgodfa, Llys y Faner and Llygadog sheltered housing schemes to discuss the potential implications of each option for them.
Community Support Services Staff	Hafan Deg, Dolwen, Awelon, and Cysgod y Gaer staff teams	Members of the project team visited all 4 schemes on a regular basis. They were also at least two visits by the Head of Service and the Lead Member. Union representatives and the Project manager also visited all projects and offered to visit as often as requested.
	Staff in Extra Care Housing schemes	Members of the project team, including Union members, have attended team meetings throughout the consultation period to gather views and to keep them updated on progress.
	Social care staff teams in the north of the county	Senior officers attended team meetings to discuss proposals and to respond to feedback as the consultation progressed.
	Social care staff teams in the south of the county	Senior officers attended team meetings to discuss proposals and to respond to feedback as the consultation progressed.

<u>Stakeholder</u>	<u>Focus</u>	<u>Method of consultation/activity</u>
	All Community Support Services Staff	4 staff engagement events were held in different venues across the county to which all staff in the Community Support Service were invited. A total of 302 staff attended these events, and each event included a presentation of the options for each scheme, and a workshop to enable staff to discuss their thoughts and to feed into the consultation.
	All Community Support Services Staff	Internal messages were circulated regularly to keep staff updated, including the use of the 'Friday Update' from the Head of Service.
	Supporting People Team	The Project Manager met with the Team Manager and staff to discuss the project and possible implications for Supporting People tenants.
Elected Members	Dee Valley member area group	Officers involved in the project presented an update and responded to questions
	Denbigh member area group	Officers involved in the project presented an update and responded to questions
	Rhyl member area group	Officers involved in the project presented an update and responded to questions
	Ruthin member area group	Officers involved in the project presented an update and responded to questions
	Elwy member area group	Officers involved in the project presented an update and responded to questions
City, Town and Community Councils	All Councils contacted to brief them on the consultation and to ask if they would find it useful for someone to attend meetings	Project officers attended, briefed, and answered questions at, Corwen & Denbigh Town meetings

<u>Stakeholder</u>	<u>Focus</u>	<u>Method of consultation/activity</u>
Politicians	MPs, AMs and MEPs etc.	The Project Manager wrote to all MPs, AMs and MEPs enclosing details of the consultation.
Health Service	North Locality Leadership team	Head of Service and other senior officers attended meetings to discuss the progress of the project during the pre-consultation and consultation phases.
	Central & South Locality Leadership team meeting	Head of Service and other senior officers attended meetings to discuss the progress of the project during the pre-consultation and consultation phases.
	General Practitioners	Head of Service attended GP Cluster meetings to discuss and update members on the progress of the project.
Health Service	BCUHB managers in the Denbighshire Area	Head of Service attended meetings with senior members of the BCUHB Central Area team to discuss and update members on the progress of the project.
	BCUHB managers in the Denbighshire Area	A Director for BCUHB is on the project team which meets monthly and acts as a steering group for the project.
	BCUHB Equality Stakeholder Group	Project Officer met with BCUHB Head of Equality, Diversity & Human Rights within Workforce & Organisational Development to brief her and the BCUHB Equality Stakeholder Group (members of the public who work with BCUHB to advice on equality issues) on the consultation. Papers sent and further meetings offered.
General Public	Corwen area to include: Family/friends/advocates and those with a particular interest in the future of Cysgod y Gaer	2 public meetings with independent Chair (1 afternoon, 1 evening).
	Ruthin residents to	2 public meetings with independent

<u>Stakeholder</u>	<u>Focus</u>	<u>Method of consultation/activity</u>
	include Family/friends/advocates and those with a particular interest in the future of Awelon	Chair (1 afternoon, 1 evening).
	Denbigh residents to include Family/friends/advocates and those with a particular interest in the future of Dolwen	2 public meetings with independent Chair (1 afternoon, 1 evening).
	Rhyl residents to include Family/friends/advocates and those with a particular interest in the future of Hafan Deg	2 public meetings with independent Chair (1 afternoon, 1 evening).
3 rd Sector partners	Denbighshire Voluntary Services Council (DVSC)'s Health, Social Care & Wellbeing Forum	Project Officer presented an update and responded to questions to encourage engagement in the consultation.
	Denbighshire Health Social Care & Well Being Newsletter	The Project Team provided detailed articles for this newsletter which goes out to all voluntary and statutory agencies in the health and social care sector before the public consultation began and in December 2015.
	North Wales Deaf Association, who use Hafan Deg at least once a week and run Denbighshire Deaf Coffee Club there	Meetings held with staff and service users. Further meetings offered, using translator/project officer who has offered to translate for others in the deaf community who would find this useful.
	Deafblind Cymru who attend Rhyl Deaf Club and Look Hear Deafblind group at Hafan Deg regularly.	Meetings held with staff and service users. Accessible versions of consultation forms and further meetings offered
	Denbighshire Rotary and Siroptimist groups	Member of the public contacted the project officer and offered to brief these groups. Officers offered to attend

<u>Stakeholder</u>	<u>Focus</u>	<u>Method of consultation/activity</u>
		meetings if required.
	Parkinson's UK	Met Service Improvement Manager to discuss consultation with offer to attend further meetings.
	Faith Groups	Discussions held with representatives of faith groups with offers to meet and discuss further.
	LGBT Older People's network	Meeting held with the Chair of the North Wales LGBT Older People's network to discuss possible implications of the different options under consultation.
	Advocacy Providers	We have been in touch during the engagement phase and Age Connects' Advocacy officers have offered support to older people during the consultation phase
	Age Connects	We have been in touch throughout the consultation period with Community Navigators, staff, volunteers and members and have attended meetings with older people's 'hubhub' networks in Corwen, Ruthin, Denbigh and Rhyl
	'My Life My Way Group'	Project officer has met members of this group of older people who meet monthly at Nant y Mor Extra Care Housing Scheme to discuss the consultation options
	Older People's reference group	Project officer has attended this group to brief them on the consultation and to discuss options. Members include Red Cross, NEWCIS & other Carers organisations, and CSSIW (Care & Social Services Inspectorate Wales).
	Groups/individuals representing those with disabilities and mental health challenges	Project Officer has been in communication with the Learning Disability Planning Group and the Mental Health Planning Group.
	Those with specialist knowledge	Project Officer has sent details of the consultation and offered to discuss

<u>Stakeholder</u>	<u>Focus</u>	<u>Method of consultation/activity</u>
		further with groups including: Autism Initiatives Older People’s champions in Denbighshire and surrounding counties Older People’s Commissioner’s Office Unique Transgender Network VIVA LGBT group
Other	‘Denbighshire Voice’ Group	The Head of Service and the Lead Member met with this interested party in December to discuss their concerns and views. Minutes were shared and agreed and the Head of Service offered to meet again in future if it would be useful.

Mae tudalen hwn yn fwriadol wag

Consultation on the future of Denbighshire County Council's in-house care services

This consultation document should be read in association with the supporting documents, available on the Denbighshire County Council website in the consultation section: <https://www.denbighshire.gov.uk/consultations>
Supporting documents are available in hard copy, and may be available in other formats on request. Please request these by contacting the Customer Connections Team on 01824 708090, email: ssdcomments@denbighshire.gov.uk or by mail to Russell House, Churton Rd, Rhyl, LL18 3DP.

The supporting documents provide more detailed information about the views and suggestions that have already been gathered about the future of our in-house services, and other evidence which we have used to develop the current options. They also include information that could help to provide alternative solutions.

1. The story so far - why change is necessary

The council currently owns and runs three residential care homes for older people (all of which provide some facility for day care) and one day care centre for adults.

Denbighshire County Council has been conducting an exercise to look at the future of these in-house social care services since March 2014, when the Performance Scrutiny Committee requested that an Elected Members' Task & Finish group be established to "*examine value for money options for delivering high quality social care services in the County*".

There are two main reasons for this:

- The Council needs to respond to the changing expectations of Welsh Government and the wider population about what modern social services should look like.
- The Council needs to focus its limited resources towards the areas of highest demand, because of the ongoing requirement to deliver financial savings.

The Council is modernising social services in preparation for the implementation of the Social Services and Well-being (Wales) Act in April 2016. This was developed due to the fact that people are living longer and have different aspirations about their health and social care needs. More information on the Act is available on the website with the other supporting documents. Part of the discussion about modernising social services resulted in the decision to review our in-house services.

Earlier this year, we started what we called a 'listening and engagement phase'. There was discussion with each individual service user and their family who might be affected by any potential future changes, and this included an assessment of their needs and the potential availability of suitable alternative provision to meet those needs in the event that the council decided not to maintain the status quo.

There was detailed scrutiny of the information gathered from these reviews, and discussions with staff and other stakeholders (see supporting documents <https://www.denbighshire.gov.uk/consultations> on the consultation section of the DCC website.) Following this, the Elected Members in the Task & Finish Group looking into this:

- developed an options appraisal for each of the individual in-house services
- agreed that there be a wider engagement exercise on the future modernisation of social services and
- recommended that we hold a formal consultation with all stakeholders, including the public, about the future of our in-house services.

The information gathered from the consultation will be added to that gathered during the listening and engagement phase and will help Elected Members to reach a decision about the future of our in-house services in early 2016. There are 4 separate consultations, one on each of the following:

- **Hafan Deg** day care centre in Rhyl
- **Dolwen** residential care home and day care centre in Denbigh
- **Awelon** residential care home and day care centre in Ruthin
- **Cysgod y Gaer** residential care home and day care centre in Corwen

2. What you have told us so far

During the listening and engagement (pre-consultation) phase we learned a great deal from residents, tenants, service users (and their families/friends and advocates) and staff in the establishments where we currently provide care and/or support. Details of what we learned can be found within the supporting documents in the consultation section on the DCC website:

<https://www.denbighshire.gov.uk/consultations>

It is evident from all our discussions that the services and support provided at all our council-run residential care homes and day centres are greatly valued. Many respondents requested that we explore ways in which the services could be continued in the future, albeit in a different way if necessary.

The bilingual staff teams and the accessibility of the residential care homes, particularly to those without transport, are particularly important to those who

responded in the pre-consultation phase. It became apparent that many residents would be adversely affected if they were asked to leave their homes now. Consequently, our Cabinet agreed that, whatever decisions are made about any future changes, no individual service user will be asked to move from their current home unless a suitable alternative is identified where their needs can be met.

There are currently 25 residential care homes in Denbighshire, as well as 7 nursing homes and others who specialise in Elderly Mental Health (EMH) care. Despite this apparent availability of potential alternative provision, it is evident from the pre-consultation exercise that location is critical for many people, and that many families and friends would find it difficult to visit residents who live far from their current homes.

However, it is also clear from the reducing numbers of people needing to be supported in residential care homes, and the waiting lists for Extra Care Housing, that demand for care and support amongst older people has changed in recent years. This is why we are looking to change our focus and aim to provide more Extra Care Housing and fewer residential care beds in the future. Extra Care Housing provides care and support to tenants with varying levels of need. This can be adapted as tenants' needs change. Reablement and occupational therapy equipment is available in Extra Care Housing, and staff are on call 24 hours a day to assist with personal care including the use of hoists and assisted bathing equipment where required. Further details about Extra Care Housing in Denbighshire is available from the following housing association providers: Wales and West Housing Association, Grwp Cynefin; and Clwyd Alyn

<http://www.wwha.co.uk/About-Us/Our%20Services%20for%20Older%20People/Pages/What-is-extra-care.aspx>

<http://www.grwpcynefin.org/en/chwilio-am-gartref/extra-care-housing/>

<http://www.clwydalyn.co.uk/extra-care/>

The needs and expectations of older people are changing. Older people generally do not wish to move into residential care anymore, and they would prefer to remain at home or move into extra care housing. We also believe that it is much better for the wellbeing of older people to be supported to remain as independent as possible for as long as possible within their own homes, as opposed to being placed in residential care. We believe that there should be no need for anyone to live in a standard residential care home in future. There will always be a need for nursing homes and specialist EMH residential care homes. However, we believe that people with a wide range of low-level needs would be better supported in their own home or in an extra care housing environment in future.

If we were to make no changes to our current services, it seems likely that the waiting lists for extra care housing properties would continue to grow while the numbers of vacancies in residential care homes and day centres would increase. The number of adults supported by the council in residential care on 31st March 2015 was 499, down from 579 on 31st March 2012.

Furthermore, if no changes are made to existing services, Community Support Services (the department which manages in-house social care services in Denbighshire) would need to find additional savings from other areas to avoid exceeding its budget. Significant savings have already been made in this department, and there is a risk that further savings in other areas would have a negative impact on the health and safety of service users.

There are currently plans to develop Extra Care Housing in Denbigh to satisfy demand in that town, and there is a high demand in other areas in the south of the county, with approximately 35 people currently on the waiting list for Llys Awelon in Ruthin, and many enquiries for facilities further south in the county.

The Council and Betsi Cadwaladr University Health Board are also working together to ensure that people's joint health and social care needs can be met more effectively without bureaucracy getting in the way. Further detail is available in the supporting documents.

3. The consultation process and next steps

The consultation will be open from 16th October 2015 to 17th January 2016, after which all information will be collated and presented to the Elected Member Task & Finish Group in early 2016. The group will discuss the information gathered and will make subsequent recommendations on options to present to the Scrutiny Committee and then Cabinet in spring 2016.

4. Equality Impact Assessment

A full Equality Impact Assessment can only be completed after considering the information that comes back from the formal consultation. This will therefore be completed and presented to the Elected Member Task & Finish Group, the Scrutiny Committee and Cabinet to help inform any subsequent proposals and/or decisions for change. The 'listening and engagement' phase has already indicated that there would be a negative impact on many older individuals who currently use those services should they need to move.

However, for future service users and the general population at large, we believe that modern alternative services would mitigate against any potential negative impact on groups who share protected characteristics. We therefore hope that the consultation exercise will:

- i. Help us to learn what the impacts will be on people, communities, local businesses, etc., and identify what mitigation for negative impacts is possible.
- ii. Identify if responders perceive that the proposals might have a greater impact on them than other people; and if so, why.

Individual Consultations

Introduction

Denbighshire County Council needs to make decisions that ensure that adult care services make best use of its limited resources whilst meeting the higher standards expected by current and future service users.

As part of a wider consultation on the modernisation of social services in Denbighshire, the council is consulting specifically on options for the future of Hafan Deg, Dolwen, Awelon and Cysgod y Gaer.

The council will take into account everyone's views and look at all relevant documents, duties and guidance before making a decision. This is likely to be made in spring 2016.

This document sets out the options and asks you for your opinion on them. It also asks you to put forward any other ideas you might have.

When does the consultation period start and finish?

The consultation process begins on 16th October 2015 and will be open until 17th January 2016. Please ensure that you return your responses by that date.

What happens after the consultation?

After the consultation period ends, all the information will be collated, analysed and presented to the Elected Member Task & Finish Group in early 2016. The group will discuss the information gathered and will make subsequent recommendations on options to present to Scrutiny Committee and then Cabinet in Spring 2016.

What if I have some questions or want some further information on the options?

Further detail about the council's proposals is available on our website consultation page <https://www.denbighshire.gov.uk/consultations>, along with supporting documents which include:

- The cabinet report and all appendices, including draft equalities impact assessment
- Feedback from pre-consultation listening and engagement exercise from stake holders including service users, their family/friends/advocates and staff
- Information on the demand for services
- Information on the implementation of the Social Services and Well-being (Wales) Act in April 2016

For further information, please contact the Customer Connections Team on 01824 708090 or email: ssdcomments@denbighshire.gov.uk

How to Respond

There are a number of ways you can make a contribution to the consultation:

- Attend one of the public consultation meetings to be held on the following dates: between October 16th 2015 and January 17th 2016.

18th November – Canolfan Awelon, Ruthin

25th November – Rhyl Football Club

30th November – Canolfan Ni, Corwen

14th Jan – Eirianfa Community Centre, Denbigh

There will be meetings between 2.30-4.00 & 6-7.30pm

A schedule of meetings is with the supporting documents on the consultation pages of the website <https://www.denbighshire.gov.uk/consultations> and will be advertised locally.

- Attend an individual meeting to discuss your views (which families, advocates and/or carers may attend). Please contact the Customer Connections Team on 01824 708090 or email: ssdcomments@denbighshire.gov.uk to arrange this.
- Go to the council's website <https://www.denbighshire.gov.uk/consultations> where you can find background information and the consultation response form.
- By phone - call the helpline on 01824-70 80 90
- By email – ssdcomments@denbighshire.gov.uk
- The consultation response forms can be returned to the email address above or can be sent to the following address:

Customer Connections Team
Denbighshire County Council
Russell House
Churton Road
Rhyl
Denbighshire
LL18 3DP

- If it is easier for you, your form can be handed in to the Manager of the scheme that your response relates to:

Rob Gilmour
Hafan Deg Day Centre
War Memorial Court
Grange Road

Rhyl
LL18 4BS

Nest Vaughan Evans

Dolwen
Ruthin Road
Denbigh
Denbighshire
LL16 3ER
Viv Barlow

Awelon Care Home
School Road
Ruthin
LL15 1BN

Sian Owen
Cysgod y Gaer
Corwen
Denbighshire
LL21 9AD

They will forward your responses on to the consultation team.

Help with your response

If you need help understanding the proposals or providing your response, the following sources of support are available from the council:

- **Single Point of Access and Locality Teams** - social care staff can offer advice on assessments and alternative provision. If you need help because of visual or hearing impairments, or with translating or interpreting because Welsh/English is not your first language, we will arrange that for you. Please contact the Customer Services Team on 01824-70 80 90 or email: ssdcomments@denbighshire.gov.uk to arrange this.
- The following independent organisation is able to provide support and to help you during the consultation:

Age Connects – provide advocacy services for older people who may want someone independent to represent them or to support them through this process. Advocacy services are particularly suitable for older people who may not have family or friends; or whose family or friends are not local and are not able to maintain contact. You can contact them: by **email** to: enquiries@acnwc.org, by **phone** on: 01745 816947 or by **post** or by dropping in to:

Age Connects North Wales Central
15 Bridge Street

Denbigh
Denbighshire
LL16 3LF

This service is provided free of charge for older people.

- Alternatively, if you want to talk to someone about the proposals or about how these may affect you or a friend or relative, you can contact the consultation team using the information below:

Telephone: 01824 708090

E-mail: ssdcomments@denbighshire.gov.uk

Letter:

Customer Connections Team
Denbighshire County Council
Russell House
Churton Road
Rhyl
Denbighshire
LL18 3DP

Hafan Deg

Background

Earlier in the year two independent social workers (i.e. not employed by Denbighshire County Council) looked at a range of criteria for the 24 individuals who, at the time, attended Hafan Deg between 1 and 3 days per week. They found that most individuals require medium or high level support (please see supporting documents).

Locally, there is a range of existing community alternatives which are already used by a few of the individuals, as well as a number of residential care homes that offer day care, albeit on an ad hoc basis at present. While most individuals expressed a view that they would not want to use other services, alternatives are available which could meet their needs. It would also be possible to contract for a bespoke service that would enable those individuals who require that level of care to continue to meet their friends together.

We know the services are valued by those who use them, their families and friends, and that this is an unsettling and stressful time for all involved. This uncertainty also affects other users of Hafan Deg including tenants in the surrounding sheltered housing scheme and groups like Deafblind Cymru and the Deaf Association who have been using the building for many years and value the support provided. We apologise for any distress this may cause.

However, there are a variety of reasons that the council must consider the future of Hafan Deg, as the cost to the council of delivering day care through its own centre is higher than it can secure in the independent sector. Furthermore, demand for day care places is falling and so the number and cost of spaces is likely to increase. Conversely, there is evidence that there are increasing levels of loneliness and social isolation, suggesting a need to increase the level of informal, non-care related, day time activities in the local area.

What options are being considered?

- 1) One solution for Hafan Deg is to enter into a partnership with an external organisation and transfer the building to them, commissioning a day care service within the building and, in addition, enabling 3rd sector agencies to provide early intervention activities for older people that reduce social isolation, support independence and promote resilience.***

This would have the following consequences:

- This would enable the building to continue to be used for the benefit of older people in Rhyl, including those with low level needs who currently attend, while supporting the principle of promoting independence and enabling the existing group of service users to continue to attend together, with the same staff group.
- There would be a revenue saving of £100k on the current running costs.

2) *Another solution is to re-provision services at Hafan Deg with the potential that the centre would close and the service users and their families be supported to find suitable alternative provision.*

This would have the following consequences:

- The council would still be able to meet the current demand for day care but this would be provided through a mixture of council and independent providers.
- It would reduce the overall cost of providing day care and contribute to the necessary savings in the service to address the current council savings targets. There would again be a revenue saving of £100k on the current running costs.
- The cost of current vacancies within day care centres means that current resources are not being used as effectively as possible. This would resolve this problem.
- The council accepts that this change would mean disruption for the users of the centre if this proposal was to be adopted. The council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs.

If the decision was made to close or transfer the unit, a closure or transfer plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place.

If a decision was made to close Hafan Deg it would not close until all the service users' needs had been fully reviewed and suitable alternative provision found.

3) *Any Other Option or Alternative*

No final decision on the options has been made. The council is open to consider any other alternative or option you wish to put forward that meets the demand for day care places and social activities within the available resources. There is a section on the survey for any new ideas, but you may also send them to us in any other format to the Customer Connections Team (details in the introduction).

All alternative submissions will be evaluated for their viability before being considered with the options we have put forward.

Dolwen

Background

Independent assessors (not employed by Denbighshire County Council) looked at a range of criteria for the 22 individuals who, at the time, were placed in this 30 bed standard residential care home, including Welsh language, available alternatives and relationship with local community. The report, which showed that most people would be impacted to some degree if moved, can be found in the supporting documents.

At the time of writing, there were 13 vacant standard residential beds in a reasonable distance from Dolwen, and there were no vacant Elderly Mental Health (EMH) or nursing beds.

We know the services are valued by those who use them, their families and friends, and that this is an unsettling and stressful time for all involved. We apologise for any distress this may cause.

However, there are a variety of reasons that the council must consider the future of Dolwen, as the cost to the council of delivering care through its own buildings is higher than it can secure in the independent sector. Furthermore, demand for places is falling and so the number and cost of spaces is likely to increase.

What options are being considered?

1) *One solution for Dolwen is to enter into a partnership with an external organisation and transfer the whole service to them, while registering for EMH care.*

- This would ensure that individuals living there could continue to do so, supported by the same staff as they currently are and accessing the local community as much as they do now.
- There would be a revenue saving of £92k on the cost of care for the existing 22 individuals and £75K on maintenance costs as the new provider would be commissioned using standard rates.
- However, this means that it is unlikely that there would be a capital receipt as the new provider would need to spend a lot of money to ensure the building meets minimum standards.
- It would also develop a level of EMH provision in the area, a growing area of demand. Plans for the development of Extra Care Housing within the town will continue.

2) *Another solution is to lease or sell Dolwen for another purpose. The home would close and the service users and their families be supported to find suitable alternative provision.*

This would have the following consequences:

- It would reduce the overall cost of providing residential care and contribute to the necessary savings in the service to address the current council savings targets. There would again be a revenue saving of £92k on the cost of care for the existing 22 individuals and £75K on maintenance costs.
- The cost of current vacancies within residential care centres means that current resources are not being used as effectively as possible. This would resolve this problem.
- The council accepts that this change would mean disruption for the residents and their families if this proposal was to be adopted. The council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs.

If the decision was made to close or transfer the unit, a closure or transfer plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place.

If a decision was made to close Dolwen it would not close until all the service users' needs had been fully reviewed and suitable alternative provision found.

3) *Any Other Option or Alternative*

No final decision on the options has been made. The council is open to consider any other alternative or option you wish to put forward that meets the demand for residential and day care places within the available resources. There is a section on the survey for any new ideas, but you may also send them to us in any other format to the Customer Connections Team (details in the introduction).

All alternative submissions will be evaluated for their viability before being considered with the options we have put forward.

Awelon

Background

The independent assessors (not employed by Denbighshire County Council) looked at a range of criteria for the 20 individuals who were, at the time of writing, placed in this 26 bed standard residential care home, including Welsh language, available alternatives and relationship with local community. The report, which found that most people would be impacted to some degree if moved, is one of the supporting documents.

There were 8 vacant nursing beds and 8 vacant standard residential care beds in a reasonable distance from Awelon.

We know the services are valued by those who use them, their families and friends, and that this is an unsettling and stressful time for all involved. We apologise for any distress this may cause.

However, there are a variety of reasons that the council must consider the future of Awelon, as the cost to the council of delivering care through its own buildings is higher than it can secure in the independent sector. Furthermore demand for places is falling and so the number and cost of spaces is likely to increase.

What options are being considered?

1) *One solution for Awelon is to stop new admissions and work with the individuals and their families, at their own pace, to move them to suitable alternatives as appropriate and to enter into a partnership with the owner of Llys Awelon to develop additional Extra Care apartments on the site.*

- This would ensure that individuals living there have plenty of time to find appropriate alternative provision
- It would enable the demand for additional Extra Care in Ruthin (currently 35 people waiting) to be met if a registered social landlord would agree to develop such a provision.
- There would be a requirement on the landlord to ensure that the community activities currently provided at Canolfan Awelon would continue.
- There would be a revenue saving of £280k on the cost of care, as well as a £165k maintenance saving.

2) Another solution for Awelon is to work in partnership with a registered social landlord, health services and the 3rd sector to develop a range of services, transferring half of the building to develop additional extra care flats, possibly as an extension to Llys Awelon, while using the remainder as a small residential unit which could be used to meet the increasing need for respite care and to ensure that no existing resident would need to move unless they chose to.

- This would ensure that individuals living there could continue to do so, supported by the same staff as they currently are and accessing the local community as much as they do now.
- It is unlikely that there would be a capital receipt as a lot of money is needed to ensure the building meets minimum standards. The unit cost of providing small residential homes is very high and this could keep a question mark hanging over the service.
- It would help to meet the growing demand for the development of Extra Care Housing within the town.

Options 1 & 2 would have the following consequences:

- It would reduce the overall cost of providing residential care and contribute to the necessary savings in the service to address the current council savings targets.
- The cost of current vacancies within residential care centres means that current resources are not being used as effectively as possible. These options would resolve this problem.
- The council accepts that change would mean disruption for the residents and their families if either of these proposals were to be adopted. If necessary, the council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs.
- If the decision was made to close or transfer the unit, a closure or transfer plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place in early 2016
- If a decision was made to close Awelon it would not close until all the service users' needs had been fully reviewed and suitable alternative provision found.

3) ***Any Other Option or Alternative***

No final decision on the options has been made. The council is open to consider any other alternative or option you wish to put forward that meets the demand for residential and day care places within the available resources. There is a section on the survey for any new ideas, but you may also send them to us in any other format to the Customer Connections Team (details in the introduction).

All alternative submissions will be evaluated for their viability before being considered with the options we have put forward.

Cysgod y Gaer

Background

Independent assessors (not council employees), looked at a range of criteria for the 11 individuals who were at the time, placed permanently in this 23 bed standard residential care home, including Welsh language, available alternatives and relationship with local community. The report, which found that most people would be impacted to some degree if moved, is part of the supporting documents.

There are no alternative residential services to Cysgod y Gaer in a reasonable distance.

We know the services are valued by those who use them, their families and friends, and that this is an unsettling and stressful time for all involved. We apologise for any distress this may cause.

However, there are a variety of reasons that the council must consider the future of Cysgod y Gaer, as the cost to the council of delivering care through its own buildings is higher than it can secure in the independent sector. Furthermore, demand for places is falling and so the number and cost of spaces is likely to increase.

Please read the following information about the options being considered and complete the attached survey to provide us with your views.

What options are being considered?

1) One solution for Cysgod y Gaer is to enter into a partnership with relevant stakeholders (including BCU and the 3rd sector) to develop the site into a 'support hub' offering both residential and extra care type facilities as well as an outreach domiciliary care and support service to the tenants of local Sheltered Housing Schemes and the wider population of Corwen and the surrounding area.

- This would ensure that the individuals living in Cysgod y Gaer currently can continue to do so
- This option develops services that support independence and improved outcomes for others in the local area.
- While this would result in no immediate saving, it would bring together elements of external domiciliary care with residential services, creating a holistic support offer to a low demand area much more cost effectively. This may result in savings on the current costs of external domiciliary care.

2) *Another solution for Cysgod y Gaer is to stop new admissions and work with the individuals and their families at their own pace to move them to suitable alternatives as appropriate and to enter into a negotiations with registered social landlords to develop Extra Care apartments on the whole site.*

- This would ensure that individuals living there have plenty of time to find appropriate alternative provision
- It would enable the demand for additional Extra Care to be met if a registered social landlord would agree to develop such a provision.
- There would be a request for the landlord to ensure that the community activities currently provided at Cysgod y Gaer would continue.
- The council accepts that change would mean disruption for the residents and their families if this proposal was to be adopted. If necessary, the council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs.
- If the decision was made to close or transfer the unit, a closure or transfer plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place
- If a decision was made to close Cysgod y Gaer, it would not close until all the service users' needs had been fully reviewed and suitable alternative provision found.

3) *Any Other Option or Alternative*

No final decision on the options has been made. The council is open to consider any other alternative or option you wish to put forward that meets the demand for residential and day care places within the available resources. There is a section on the survey for any new ideas but you may also send them to us in any other format to the Customer Connections Team (details in the introduction).

All alternative submissions will be evaluated for their viability before being considered with the options we have put forward.

Mae tudalen hwn yn fwriadol wag

Modernising the Provision of Care – The Case for Change

1. Introduction

This document has been developed to summarise the evidence we have considered before reaching the stage when we embark on a formal public consultation about the future of our in-house care services. Five main factors combined to provide the business case for reviewing our in-house care services, these were:

- The introduction of the Social Services and Wellbeing (Wales) Act, and the focus on enabling people to remain as independent as possible for as long as possible;
- A review of national research into the benefits of extra care housing over standard residential care;
- Local evidence around the falling demand for standard residential care and for day services in Denbighshire;
- Local evidence of demand for existing Extra Care Housing in Denbighshire, particularly in Ruthin; and
- The comparatively high cost of running care homes ourselves, compared to homes in the independent sector and compared to the cost of Extra Care.

2. The Social Services and Well-being (Wales) Act

The Social Services and Well-being (Wales) Act (the “Act”) received Royal Assent and became law on 1 May 2014. It provides the legal framework for improving the well-being of people who need care and support, and carers who need support, and for transforming social services in Wales.

The Act highlights, and responds to, a number of challenges faced by public services in Wales. These include demographic changes, increased expectations from those who access care and support as well as continuing hard economic realities. The Act aims to address these issues and in doing so will give people greater freedom to decide how services are provided to support their needs, while offering consistent, high-quality services across the country.

The Act will transform the way social services are delivered, promoting people’s independence to give them stronger voice and control. Integration and simplification of the law will also provide greater consistency and clarity to:

- people who use social services;
- their carers;
- local authority staff and their partner organisations; and
- courts and the judiciary.

The Act promotes equality, and aims to improve the quality of services and enhance access to the information available to people. It also encourages a renewed focus on

Appendix C: Copy of the “Case for Change” document issued on 16th October 2015 prevention and early intervention. Further information about the Act can be found on the Welsh Government website [<https://www.denbighshire.gov.uk/consultations>].

3. National Research

National research tells us that models of housing and support which help people to remain independent are increasingly favoured by older people. A YouGov survey commissioned by the National Housing Federation in 2010 found people aged between 60 and 65 are increasingly concerned about having to move into a care home or imposing themselves on relatives if they could no longer cope with living on their own. However, the poll also asked people to rate different accommodation options if they could no longer live independently in their own home. The results were:

- 18% had a positive view of living in a care home;
- 10% thought moving in with their family would be a good idea;
- 80% were positive about downsizing to a smaller, more manageable home;
- **65% liked the idea of living in a self-contained home with support or care available if required.**

(Breaking the Mould - Re-visioning older people’s housing, National Housing Federation 2010)

Extra Care is becoming established as a popular model of specialist housing with care provision for older people. Developing extra care is a key plank of government policy in terms of its aims to promote choice, independence and wellbeing for older people. There are many different models of extra care in existence however, put simply, extra care offers housing with full legal rights associated with being a tenant, or homeowner, in combination with 24 hour on-site care that can be delivered flexibly according to a person’s changing needs. Local authorities are increasingly looking to extra care as a strategic response to replacing older models of residential care provision, and to address issues of low demand in older traditional forms of sheltered housing.

Tenants in Denbighshire’s extra care housing schemes speak warmly of their experiences of living there, even though some acknowledged that they were at first reluctant to move in.

Similarly, within research undertaken by the Joseph Rowntree Foundation on ‘*Social well-being for tenants in extra care housing (2007)*’, most participants reported a high level of satisfaction with their social wellbeing and overall quality of life. Having their own home and the independence that it provided seemed to be an important part of this, as was the overall extra care housing environment, the friends they made within it and the contact that they had with the wider community.

For many people, extra care is a viable and preferable alternative to residential care. Most people move in because of an assessed care need, i.e. they and/or their partner requires care at least once a day. **One of the main benefits of extra care housing is that it**

enables couples to remain living together even when one partner has substantial care and support needs.

‘Establishing the Extra in Extra Care - Perspectives from three Extra Care Housing Providers’ (Dylan Kneale, The International Longevity Centre, September 2011) examined outcomes for extra care tenants, tracking the outcomes for residents who in some cases moved into extra care housing as long as 15 or more years ago. In this study, they focus upon outcomes related to health status, usage of health services and usage of institutional accommodation, and highlight the following key findings:

- *Extra care housing is a home for life – much fewer people living in Extra Care (8%) have to move into a care home compared to those living in their original home with domiciliary care (19%).*
- *Extra care is a healthy home for life – 25% of people in Extra Care experience a reduction in their level of care needs.*
- *Extra care housing is associated with a lower likelihood of admittance to hospital for an overnight stay compared to a matched sample living in the community.*
- *Extra care housing translates into fewer falls - a lower than expected number of falls was recorded in a small sample of extra care housing residents than in a matched comparison group living in the community.*
- *Extra care housing supports some of the oldest and frailest members of society with the average age of residents in the very late 70s and early 80s in this research. In addition, the number of people living with dementia, the aftermath of a stroke or Parkinson’s disease was higher in extra care residents than in the general population.*
- *The benefits of residence in extra care housing could translate into substantial cost savings, particularly in the long-term. In Denbighshire, the cost to the council of supporting someone in a standard residential care home in the independent sector is approximately £466 per week, which includes about 17 hours of staff time. In Extra Care Housing, 17 hours of staff time would cost approximately £276 per week, saving the public purse nearly £10,000 per person each year.*

More recently, Aston University's three year longitudinal study of The Extra Care Charitable Trust’s model of integrated housing, health, and social care ‘BETTER LIVES, HEALTH, FUTURE’ (June 2015) have very similar findings, agreeing that extra care housing makes a real difference to older people's lives - improving the quality of life for tenants whilst relieving pressure on the NHS and reducing costs for the public purse.

In addition, the financial benefits to individuals living in Extra Care compared to residential care are demonstrable as charges for domiciliary care are capped by Welsh Government at £60 per week. For home owners, while they may need to sell their home to buy an

Extra Care apartment, they still have that capital asset, whereas in care homes, this money would be used to pay their care fees.

4. Demand for residential care and day services in Denbighshire

The number of people supported by the council in residential care has been reducing year on year for some time now. We measure this in two ways.

- First, we count the number of adults supported by the Council to live in residential/nursing care on 31st March each year. **In 2015, this figure was 499 compared to 579 in 2012.**
- We also count the number of adults who were supported by the Council to live in residential/nursing care at any time during each financial year, which will obviously be a higher number than those living there on any particular day. **This figure has also reduced significantly in recent years; from 815 in 2011/12 to 697 in 2014/15, and we anticipate that this figure could fall to as low as 615 by 2016/17.**

There are currently about 1027 care home beds run by the independent sector in Denbighshire, and the council has an additional 79 beds in its three residential care homes. However, in 2010 there were about 1187 independent sector beds and 90 council beds. In 2008, there were 1199 independent sector beds and 127 council beds. In total, therefore, the number of residential beds in Denbighshire has reduced from around 1326 to around 1106 over the last 7 years.

All of this information demonstrates that the demand and need, at least for standard residential care in Denbighshire, continues to reduce each year, although we know that the demand for specialist (nursing/mental health) care homes continues to rise.

In relation to the provision of **respite care** to enable carers to have a break, there are successful examples in Denbighshire and Flintshire, as well as across England, of Extra Care facilities using one or two apartments to provide this service, suggesting that, again, standard residential care is not an essential requirement for this service.

The demand for day services in Denbighshire has also been falling steadily in recent years. During 2009/10, the number of adults receiving day services in Denbighshire was 611. Last year, during 2014/15, the number had fallen to 417. That is a reduction of 194 people, or 32%, in the past five years.

Demand for existing Extra Care Housing in Denbighshire

We currently have 3 extra care housing developments in Denbighshire:

- Gorwel Newydd in Rhyl, which opened in 2009 and comprises 59 apartments. There are currently 7 people on the waiting list and 5 applications awaiting assessment.

- Nant y Mor in Prestatyn, which opened in 2011 and comprises 59 apartments. There are currently 5 people on the waiting list and a further 4 due to be assessed imminently by the panel.
- Llys Awelon in Ruthin, which opened in 2011 and comprises 21 apartments. There are currently 35 people on the waiting list.

All 3 schemes were filled immediately after opening, and have operated a waiting list ever since. Feedback from tenants is unanimously positive, with particular appreciation expressed for:

- The feeling of safety and security engendered by knowing that staff are on site 24 hours a day
- The friendship and support provided by fellow tenants
- The daily lunches and social activities
- The choice to be able to retreat to one’s own space or to socialise
- The person centred approach and the flexibility in the care packages, able to accommodate periods of ill health

Some residents who are currently living in residential care would have preferred to have found a place in extra care, and their needs could have been met there, but they moved into a residential home as no spaces were available in extra care schemes.

Although numbers have fluctuated over time, there has been a particularly long waiting list for Llys Awelon in Ruthin for some time, which demonstrates a very high demand for additional extra care housing in the Ruthin area.

5. Cost of running care homes

The **average** cost per week for a residential care home placement in **Wales** was £497 in 2013/14 according to the Laing & Buisson Care of Older People, UK Market Report. The agreed rate that we pay to the independent sector to provide standard residential care in **Denbighshire** is £465.90. As can be seen in Table 1 (below), our in-house residential care homes cost significantly more to run. Even if the demand existed for all our in-house care homes to be full at all times, the cost would range from £479.09 to £595.48 per person per week. However, because the fixed costs remain constant, overall it also costs more per resident when there are vacancies in our homes. Based on current occupancy levels, the costs range from £532.32 to £737.26 per person per week.

Therefore the difference between the standard rate we pay to the independent sector for residential care (£465.90) and the amount it currently costs us to provide residential care in Awelon in Ruthin (£737.26) is £271.36 per person per week, or £14,111 per person per year. This is partly because there are economies of scale in larger residential homes or those who come under an umbrella organisation.

As stated previously, the cost of providing care and support in an Extra Care Housing environment at an equivalent level to care provided in a standard residential care home (i.e. an average of 17 hours per week) would be £276 per week. This is £461.26 per week, or £24,000 per year, cheaper than it currently costs us to support a person in Awelon in Ruthin.

Table 2 (below) shows how much it actually cost the council on average to support people within the three Extra Care Housing schemes last year. This ranged from £170.43 per person per week in Llys Awelon (Ruthin), to £65 per person per week in Nant Y Mor (Prestatyn). If we therefore compare the actual average cost of supporting someone in the Nant Y Mor Extra Care Housing scheme in Prestatyn (£65 per week) to the actual average cost of supporting someone in the Awelon residential care home in Ruthin (£737.26/week), then the difference is £672.26 per week, or approximately £35,000 per year.

Table 1:

2015/2016 financial year - based on outturn forecasts as at 08/09/2015

Unit cost for in-house provider services

Gross Unit Cost based on 2015/2016 financial year					Based on Full Occupancy		Based on 15/16 Occupancy as at 1st Sept	
Residential Home	Employee Costs	Premises Costs	Supplies and other services	GROSS TOTAL	Occupancy (Beds)	Gross Unit Cost Per Week	Occupancy (Beds)	Gross Unit Cost Per Week
	£	£	£	£		£		£
Awelon	673,059	79,855	52,172	805,086	26	595.48	21	737.26
Cysgod Y Gaer	547,186	87,968	35,855	671,009	23	561.04	21	614.48
Dolwen	616,570	83,537	47,267	747,374	30	479.09	27	532.32

Table 2:

Gross Unit Cost based on 2014/2015 financial year

ECH	Employee Costs	Premises Costs	Transport	Supplies and other services	Other	GROSS TOTAL	Occupancy	Gross Unit Cost Per Week
	£	£	£	£	£	£		£
Gorwel Newydd	290,397.58	52.00	477.44	11,487.70		302,414.72	66	88.12
Nant Y Mor	218,490.05	1,198.10	256.39	6,499.55		226,444.09	67	65.00
Llys Awelon	179,056.83	3,688.37	147.98	20,938.18		203,831.36	23	170.43

6. Conclusion

All of the information in this document has led the Council to form the view that standard residential care is an outdated method of meeting the care needs of frail elderly people and that, instead, the focus of provision should be as follows:

- where an individual’s needs can and can only be met by support from social services; and
- an individual cannot be cared for safely in their existing home; and
- the person does not need specialist nursing and/or mental health services

the offer from the Council will be the provision of domiciliary care services within an Extra Care Housing development.

This means that, over time, the number of existing standard residential care homes will continue to reduce and be replaced by modern Extra Care Schemes and more specialist nursing and/or mental health care homes.

Denbighshire has an ambitious plan for the development of additional Extra Care Schemes to meet this demand. In addition to the proposed developments on the sites of **Awelon in Ruthin** and **Cysgod y Gaer in Corwen**, the Council is in discussion with developers and Housing Associations about potential developments in **Denbigh, St Asaph** and **Llangollen**. There is a clear commitment in the Council’s Corporate Plan to achieve our ambitions, with agreement to provide capital funding where necessary.

Mae tudalen hwn yn fwriadol wag

CONSULTATION QUESTIONS

(If submitting on paper, please feel free to continue on additional sheets, with question number at the top)

1. Are you responding for yourself or on behalf of someone else?

2. Which of the following categories apply to you (*tick more than one if appropriate*)

- Service user
- Relative/partner/friend of service user
- Advocate for service user
- Member of the public
- Staff member
- Other interested party (please specify)
- Prefer not to say

3. To which of the consultations do your responses refer? (You are welcome to submit responses for as many as you like)

- Hafan Deg Day Centre
- Dolwen Residential Care & Day Centre
- Awelon Residential Care & Day Centre
- Cysgod y Gaer Residential Care & Day Centre

4. In relation to the scheme(s) you are commenting on, which option, as discussed in the consultation document, do you feel is the better solution for service users?

- Why do you think this?

- Whether you have expressed a preference or not, we would be interested to know whether you feel there are flaws or oversights and particular strengths and weaknesses in any of the options of the schemes you are concerned with.

5. In relation to each option for the scheme(s) you are concerned with, can you foresee any positive or negative impacts on people, community, local businesses, land owners, etc.?

- If negative, what do you think could be done to reduce the impact?

6. Will any of these proposals have a greater impact on you and/or the person you represent than others in the community?

- If yes, how and why?

7. The Equality Act 2010 sets out a prescribed list of 'protected characteristics'. These are: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex and sexual orientation. The council has a duty to ensure that individuals within each of these populations do not suffer unequal or unfair treatment on the basis of any of the protected characteristics.

Do you believe that some options will have a particular impact on people with any of these protected characteristics?

- If yes, give as much detail as possible, including ways of reducing negative/increasing positive impact.

8. You are welcome to propose an alternative solution. If you do, please provide as much detail as possible regarding service design, staffing, costs, savings and benefits to the community.

9. Do you have any further comments about our future vision for adult social care in Denbighshire?

10.

Which of the following is your nearest town centre?		
Please tick one box only		
a Corwen	<input type="checkbox"/>	
b Denbigh	<input type="checkbox"/>	
c Llangollen	<input type="checkbox"/>	
d Prestatyn	<input type="checkbox"/>	
e Rhuddlan	<input type="checkbox"/>	
f Rhyl	<input type="checkbox"/>	
g Ruthin	<input type="checkbox"/>	
h St Asaph	<input type="checkbox"/>	
i Don't know	<input type="checkbox"/>	

ETHNIC CLASSIFICATION

Denbighshire County council is committed to promoting Equality. The information you give on this form will remain strictly confidential, in accordance with the Data Protection Act 1998.

OED / AGE

Under 20 <input type="checkbox"/>	20 – 29 <input type="checkbox"/>	30 – 39 <input type="checkbox"/>	40 – 49 <input type="checkbox"/>	50 – 59 <input type="checkbox"/>	60 and over <input type="checkbox"/>
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Do you consider yourself to be a disabled person?	No <input type="checkbox"/> Yes <input type="checkbox"/>
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NATIONALITY

I would describe my nationality as:

Welsh <input type="checkbox"/>	Scottish <input type="checkbox"/>
British <input type="checkbox"/>	English <input type="checkbox"/>
Irish <input type="checkbox"/>	
Other (Please State)	

ETHNICITY

I would describe my ethnicity as:

White <input type="checkbox"/>	Gypsy / Roma <input type="checkbox"/>
Mixed – White and Black Caribbean <input type="checkbox"/>	Black Caribbean <input type="checkbox"/>
Asian – Pakistani <input type="checkbox"/>	Chinese <input type="checkbox"/>
Mixed White and Black African <input type="checkbox"/>	Any other Ethnic Group <input type="checkbox"/>
Asian – Bangladeshi <input type="checkbox"/>	Mixed White and Asian <input type="checkbox"/>
Any other black background (Please state) <input type="checkbox"/>	Any other mixed background (Please state) <input type="checkbox"/>
Any other Asian background (Please state)..... <input type="checkbox"/>	I do not wish to provide this information <input type="checkbox"/>

SEXUALITY

Bisexual <input type="checkbox"/>	Gay <input type="checkbox"/>	Heterosexual <input type="checkbox"/>	Lesbian <input type="checkbox"/>	Prefer not to state <input type="checkbox"/>
If you prefer to define your sexuality in terms other than those stated, please let us know				

CARERS

(including parents and guardians)

1. I consider myself to be a carer	No <input type="checkbox"/> Yes <input type="checkbox"/> please complete questions 2 and 3
2. Are they children under 16?	No <input type="checkbox"/> Yes <input type="checkbox"/>
3. Sick or elderly relative or friend?	No <input type="checkbox"/> Yes <input type="checkbox"/>

FAITH

Agnostic	<input type="checkbox"/>	Atheist	<input type="checkbox"/>	Baha'I	<input type="checkbox"/>	Buddhist	<input type="checkbox"/>	Christian	<input type="checkbox"/>
Hindu	<input type="checkbox"/>	Humanist	<input type="checkbox"/>	Jai'n	<input type="checkbox"/>	Jewish	<input type="checkbox"/>	Muslim	<input type="checkbox"/>
Sikh	<input type="checkbox"/>	No religion	<input type="checkbox"/>	Prefer not to state			<input type="checkbox"/>		
Other Faith (please state)									

LANGUAGES

Languages you speak fluently

English	<input type="checkbox"/>	Welsh	<input type="checkbox"/>
Polish	<input type="checkbox"/>	French	<input type="checkbox"/>
Other (Please state)			

WELSH LANGUAGE

Please state your level of Welsh language below:-

1 =	not at all
2 =	moderately, a little
3 =	fluently, quite well

Listening	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	Reading	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>
Speaking	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>	Writing	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>

Thank you

Mae tudalen hwn yn fwriadol wag

On 16th October 2015, Denbighshire County Council started a formal consultation about the future of its in-house adult social care services. This means the three council-run residential care homes and day care centres (Awelon in Ruthin; Dolwen in Denbigh; and Cysgod y Gaer in Corwen) and Hafan Deg day care centre in Rhyl. The consultation period runs until 24th January 2016, which is a week later than originally planned in order to give people time to respond following all our public consultation meetings. We have already held six public meetings in Ruthin, Rhyl and Corwen. Our final two public meetings will be held in Denbigh on 14th January 2016, which is later than in the other towns due to the availability of appropriate venues.

During those first six public meetings, people have raised some really important questions and challenges for the council. Some questions have been raised at all six meetings, so we thought it would be useful to publish answers to those questions so that people who have been unable to come to the public meetings can hear our responses.

Does the council want to close Awelon; Dolwen; Cysgod y Gaer; and Hafan Deg?

No, there are a number of potential options under consideration, and the options currently favoured by the council are different for each site. Our preferred options would result in all four sites remaining as care facilities, although they would not necessarily be owned by the council anymore. Also, the types of services provided at the four sites would be different, but would actually provide a better offer for the residents of those towns and surrounding areas.

Has the council already made up its mind what to do?

Although we have preferred options, no decisions about the future of any site have been made. The reason for our public consultation is to gather views about the options currently being considered, but also to explore whether any other options exist.

Is it true that the real reason why there are vacancies in your three care homes is that the council has had a deliberate policy to block or reduce admissions?

No, the council does not have a policy of stopping people from moving into our care homes. The reason we have vacancies is simply that the demand for standard residential care has been reducing for several years. Generally speaking, people do not want to live in residential care homes when they get older. They want to be supported to remain independent within their own homes or within alternative settings, like extra care housing.

Is it true that the council has stopped GPs from referring people to its care homes?

No, GPs have never been able to decide whether someone can move into one of our residential care homes. GPs can only refer people to the council so that we can undertake an assessment of their social care needs. If that assessment shows that a person needs residential care, they are free to move into one of our homes if that home can meet their needs. Different people have different needs, and not every home can meet the needs of each person. For example, some people need to be supported in homes that are registered to deal with complex dementia-related needs. The

registered manager of a care home makes the final decision about whether that home can meet the specific needs of each person.

If you did decide to close any of your care homes, how soon would that happen, and what would happen to the people who currently live there?

If we did decide to close, transfer or develop any of our care homes, nobody will be forced to move to another home if they are unwilling or unable to do so. We have therefore not put any timescales on any of the options we are currently considering. For example, if we decided to close Awelon in Ruthin to enable the site to be re-developed to provide more extra care housing, we would not do so until it was empty.

What is the difference between a residential care home and extra care housing?

The basic difference is that people rent or buy an apartment in extra care housing. Care staff are on-site for 24 hours a day in extra care housing, just as they are in a residential care home. Extra care housing can support people who have the same level of social care needs as in a residential care home. However, research shows that there are many benefits to extra care housing over residential care. Extra care housing tends to be a more enabling environment, and people have better outcomes and are able to live more independent and fulfilling lives. People can also be better off financially in extra care housing because they do not have to sell their own property to pay for care home fees. People may have to sell their property in order to buy an extra care apartment, but they can then retain ownership of a property. A couple can also move into extra care housing together, even if one partner does not have social care needs.

Isn't this just about saving money for the Council?

No, this is not just about saving money. It is true that all councils are under pressure to save money because our budgets have reduced significantly in recent years. We also have an obligation to spend our money in the most efficient way so that we can continue to support everyone with social care needs in Denbighshire. It is also true that our current preferred options would save significant amounts of money. However, we would be proposing these same changes even if we did not need to save money. The demand for these traditional models of service is reducing, and we need to develop services that will meet the demand for more modern services for the future. We believe that the current proposals will mean that social care services for older people in Denbighshire will be better in future as a result of the proposed changes, not worse.

Our public consultation runs until 24th January 2016. All the consultation documents are on our website (<https://www.denbighshire.gov.uk/en/your-council/consultations/current-consultations.aspx#0>), or you can contact the council on 01824 708090 if you do not have access to the internet. We also have the two final public consultation meetings in Eirianfa Community Centre in Denbigh on 14th January 2016 (2:30pm - 4:00pm and 6:00pm - 7:30pm), and we hope to see as many people as possible at those events.

Options for Hafan Deg

1. Introduction

This document provides an analysis of the options for Hafan Deg in Rhyl. This means the two distinct options put forward by the council, and also any other options put forward during the consultation process (Option 3).

2. The current provision in the Rhyl area

In addition to Hafan Deg, Rhyl and the surrounding area is currently served by the following provision:

- 16 day care spaces in the independent sector within residential homes in Rhyl and Prestatyn (2 in Richmond House; 6 in Bryn Estyn; 6 in Dolanog; and 2 in Beach Court).
- There are a range of places offering day activities for older people, but for people needing personal day care, the only alternative options available are in residential care homes and EMH care homes in the area.

3. The options for Hafan Deg

Taking into account the current provision available in the Rhyl area (highlighted above), the council developed 3 options in relation to Hafan Deg which became the subject of the formal public consultation:

Option 1 (the council's preferred option): To enter into a partnership with an external organisation and transfer the building to them, commissioning a day care service within the building and, in addition, enabling 3rd sector agencies to provide early intervention activities for older people that reduce social isolation, support independence and promote resilience.

Option 2: To re-provision services at Hafan Deg with the potential that the centre would close and the service users and their families be supported to find suitable alternative provision.

Option 3: The council is open to any other alternative option you wish to put forward that would meet the demands for residential and day care places within the available resources.

- The only alternative option put forward during the consultation was for the council to continue to own and run Hafan Deg. This was only explored in detail within the UNISON response, so this is the option that is considered within this paper as being Option 3.

4. The rationale for Option 1:

- 4.1. There is a compelling financial case for Option 1 because there would be an annual saving of £51,858 on the cost of care. It is also very likely that there would be additional maintenance costs if we were to retain ownership of Hafan Deg because only the minimum, essential maintenance requirements have been met over the last few years. There is currently a maintenance backlog of approximately £50,000 for Hafan Deg which we would need to spend if we kept the building, and this adds weight to the financial case for Option 1.

- 4.2. No evidence has emerged during the consultation to demonstrate that there would be any negative consequences, either for the current cohort of service users, or for the wider population of older people in Rhyl and the surrounding area.
- 4.3. Option 1 would safeguard jobs for Hafan Deg staff and protect their current terms and conditions.

5. Consequences of Option 1:

- The building would continue to be used for the benefit of older people in Rhyl, including those with low level needs who currently attend, while supporting the principle of promoting independence and enabling the existing group of service users to continue to attend together, with the same staff group.
- Staff would be transferred (via TUPE transfer) to the partner organisation. Although this may be seen by some as a potentially negative impact, it would have some tangible benefits, such as safeguarding jobs and protecting the terms and conditions of staff. If the decision was made to transfer the unit, a transfer plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place.
- There would be a revenue saving of £51,858 on the cost of care (based on current levels of provision, i.e. 39 days per week)¹. This is because we can buy day care from the independent sector for £50 per day (or £101,400 per year for 39 days of day care per week), whereas it currently costs us £153,258 per year (or the equivalent of £75.57 per day per person) to provide day care from Hafan Deg (see tables below). **Note:** we have updated the financial information to take account of the current levels of day care provision in Hafan Deg, and the revised costs of running Hafan Deg versus the cost of purchasing the equivalent amount of day care from the independent sector from April 2016. This revised calculation is required because of new employer regulations and additional employer costs from April 2016, which will increase the cost to the council of owning and running Hafan Deg.

Unit cost to the council of providing care in Hafan Deg:

Day Care Centre	Employee Costs	Premises Costs	Transport	Supplies and other services	GROSS TOTAL	Days of care per week	Gross Unit Cost per day of care
	£	£	£	£	£		£
Hafan Deg	116,813.00	18,017.00	10,150.00	8,278.00	153,258.00	39	75.57

Calculation of potential savings on the cost of care:

Unit daily cost of purchasing day care from independent sector	£50.00
Unit daily cost of providing day care from Hafan Deg	£75.57
Total annual cost of purchasing 39 days of day care per week from independent sector	£101,400
Total annual cost of providing 39 days of day care per week from Hafan Deg (i.e. total cost of running Hafan Deg)	£153,258
Annual saving on cost of day care for 39 people per week (compared to cost of running Hafan Deg)	£51,858

¹ The consultation document stated that the annual revenue saving would be £100,000, based on provision levels as of 1st September 2015 and costs which were correct at the time the papers were finalised for the consultation

- In addition to the savings on the cost of care, it is also very likely that there would be additional savings in relation to maintenance costs that the council would incur if it were to retain ownership of Hafan Deg. This is because only the minimum, essential maintenance requirements have been met over the last few years, and there is currently a maintenance backlog of approximately £50,000 for Hafan Deg.
- The council would no longer own and run a stand-alone day care centre. It is clear that this is seen as a negative impact by many people who have responded to the consultation. However, no evidence has emerged to suggest that there would be a negative impact on service users or the community as a result of this option being implemented.

6. Consequences of Option 2:

- The council would still be able to meet the current demand for day care but this would be provided mainly by independent providers within residential care home settings.
- It would reduce the overall cost of providing day care and contribute to the necessary savings in the service to address the current council savings targets. There would be a revenue saving of £51,858 on the current running costs, and the council would avoid the additional spend on maintenance costs which would be likely to occur if it retained ownership of Hafan Deg.
- The cost of current vacancies within day care centres means that current resources are not being used as effectively as possible. This would resolve this problem.
- This change would mean disruption for the current users of the centre. The council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs. If the decision was made to close Hafan Deg it would not close until all the service users' needs had been fully reviewed and suitable alternative provision found.
- Hafan Deg staff would be at risk of redundancy. If the decision was made to close the unit, a closure plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place.

7. Consequences of Option 3:

- The council would continue to own and run a stand-alone day care centre in partnership with other agencies.
- Staff would continue to be employed by the council, which they would prefer.
- The council would not realise the available revenue saving of £51,858 on the current running costs, and would still be liable for the additional maintenance costs that are likely to occur if it retained ownership of Hafan Deg.

- As proposed by UNISON, the revenue shortfall could be mitigated (at least for 2016/17) by an additional increase in council tax. This would have a negative impact on citizens within the community who would be effectively subsidising relatively expensive council-run day services for a minority of service users from Hafan Deg.

8. Summary of the consultation responses relating to Hafan Deg

40 consultation questionnaires returned	<ul style="list-style-type: none"> 10 questionnaires submitted via Customer Connections Team 30 online questionnaires
Other submissions from individuals	<ul style="list-style-type: none"> 5 letters 1 email
Public meetings	<ul style="list-style-type: none"> 2 public meetings in Rhyl 32 attendees in total
Meetings / focus groups	<ul style="list-style-type: none"> 1 meeting with Rhyl Member Area Group 5 meetings with interested groups 4 Community Support Services staff engagement events
Petitions	<ul style="list-style-type: none"> 2 petitions submitted: <ul style="list-style-type: none"> ➤ One with 881 signatures in total ➤ 13 identical letters from tenants of War Memorial Court asking to have lunch at Hafan Deg (treated as one petition with 13 signatures)
Union responses	<ul style="list-style-type: none"> One formal report from Unison

8.1 Responses from consultation forms

Option	Number of people expressing a preference for this option
Option 1	10
Option 2	0
Option 3	0

Unfortunately, only a small percentage of those who responded indicated which option they would prefer. Of the 46 responses relating to Hafan Deg, 10 respondents specifically expressed a preference for Option 1. Nobody expressed a preference for Option 2 or Option 3. However, the comments submitted with responses forms indicate that several respondents expressed a preference for the council working in partnership with a charity or third sector organisation (which also seems to support Option 1). Several of the comments show support for keeping Hafan Deg in the ownership of the council. Although this would have to be considered as support for an alternative option (i.e. an “Option 3”), none of the comments elaborated on how that could be done whilst making the service sustainable for the future.

8.2 Summary of other submissions from individuals

During the pre-consultation phase (i.e. before the formal consultation period began), we received 13 identical letters from tenants of War Memorial Court, a sheltered accommodation scheme which surrounds the day centre. The letters were asking for an

opportunity to have lunch in Hafan Deg once or twice a week. In response the project manager arranged to meet all tenants to discuss their proposal.

During the consultation we received 3 letters and one e-mail saying the following:

'I am writing on behalf of the residents of War Memorial court to express our concern about the future of Hafan Deg. At the moment we residents are allowed to use Hafan Deg three time every week for community activities, and on other special occasions such as birthday parties, Halloween, Christmas and Easter parties. We have also joined with the service users to celebrate national occasions such as Royal Weddings, and V E Day and MacMillan Coffee Mornings. We are all worried that we will not be able to continue our activities if an external organisation takes over the running of Hafan Deg.

It is not only the loss of our use of the centre, but the worry about what use will be made of the centre. War memorial Court is an ex-warded controlled residential complex providing accommodation for the elderly and disables. There is considerable concern about who would have access to the Court and whether there would be much use to be made of it at night with the possibility of noise until late into the evenings.

We are always being told that it is better for the elderly to remain in their own home, but if this means they sit alone all day except for 2-3 fleeting visits from uninterested 'carers' this in not improving their quality of live. We feel that our activities, held in Hafan Deg, give many of the resident's company and friendship on their doorstep, and enhance their daily life.

Of course the same could be said of the service users who go to hafan Deg at the moment. I'm sure every one of them would agree that they enjoy the time they spend in Hafan Deg'

I am sure that the service users (who are not just numbers but people in their own right, who could be you mother, father, husband or wife) will agree that their visits to Hafan Deg are probably the highlight of their week, and give their carers a much needed break.

It is not just the loss of our use of the centre that worries us, but what will replace it. War memorial Court is an ex warden controlled complex, providing accommodation for the elderly and disabled. There is considerable concern about whether it would be open in the evenings, who would be wandering round. There are plenty of dark corners on the court. Would there be noise and parking problems. These may be silly concerns to you, but to an 80 or 90 year old resident these points are important.

You may think you are saving some money but if Hafan Deg closes the whole heart of the community will be lost.'

In addition, there was one letter expressing disappointment at the need for cuts.

8.3 Summary of views from the public meetings

The majority of those who attended the public meetings were tenants of War Memorial Court, the sheltered flats neighbouring Hafan Deg and their family members. In addition, some staff attended, as did some service users.

It was clear that the vast majority of attendees would prefer that there was no change to Hafan Deg. However, the thing that united everyone in the room was the desire to ensure that Hafan Deg doesn't close. Therefore, it is fair to say that there was universal opposition to Option 2 for Hafan Deg. Some people seemed to be more accepting than others of the need for change. Those people appeared to be open to the prospect of the Option 1, as long as protections were put in place in relation to what a new owner could do with the site.

Tenants of War Memorial Court were most concerned about the prospect of Option 2, and were worried that the unit might be used for a completely different purpose. Many tenants explained that they feel safe and secure with the current arrangements and wanted reassurance that if Hafan Deg was run by an independent agency, they would not be disturbed by noise or too much activity, particularly late at night. They currently use Hafan Deg for activities such as bingo nights and coffee mornings and were keen to continue to have these activities available to them. Whilst most people agreed that they would like the centre to continue to be used to support predominantly older people, a suggestion that they would welcome younger adults with disabilities was welcomed. Those present seemed reassured to hear that under Option 1, it would be built into the contract/service agreement that any activities would be geared at meeting the needs of the older person.

As in other meetings, we were asked whether an organisation could simply sell the unit on once it were transferred to a third party. Attendees seemed to be assured to hear that council would be proposing a lease-hold arrangement with clauses which would prohibit the site being sold on again.

Whilst caution was expressed as to the wisdom of working with the private sector, many of those who attended were keen for a charity to become involved in the running of Hafan Deg. They were keen for organisations who already provide services to older people such as Age Connect, Crossroads and carers agencies to be considered, and pleased to hear that this is the model the council is keen to explore under Option One.

Unison suggested that the council could involve another provider in the running of Hafan Deg in future but could work in partnership rather than handing over completely (see Unison report at Appendix K for further details). UNISON is keen that Hafan Deg, and its resources, are retained in the public sector.

The detrimental effect of the uncertainty over the future of Hafan Deg for staff, service users and neighbouring tenants was discussed, as was a range of ways of making better use of the excellent resources there.

8.4 Summary of views from other meetings & focus groups

Following the letters from War Memorial Court in July, requesting luncheon club at Hafan Deg, the project manager met with the tenants and explained the process and time scale of the consultation, the options and ways to get involved. At their request she also found some information about social enterprises for them as they were considering exploring the possibility of forming a social enterprise to run the day centre in the future.

The day after the public consultation meetings, the project manager attended the tenant's coffee morning forum (at their request) to explain the process again to those who were not able to attend. Points discussed were very similar to those covered in the public meetings.

The project manager also met with staff and service users from North Wales Deaf Association and Deafblind Cymru who attend Rhyl Deaf Club, Denbighshire Deaf Coffee Club and Look Hear Deafblind group at Hafan Deg regularly. Members clearly expressed how important the groups are to them and how they appreciate the location and the accessibility. One explained how it offered her respite from her caring duties and many explained how it helps them to feel less isolated and is an important chance to socialise and compare notes with others who may also sign or benefit from an interpreter. One member in particular explained how the uncertainty over the future of Hafan Deg was causing her to feel very anxious as she had suffered from depression in the past and felt she would suffer again if she did not have the group to look forward to. The organisers of the groups currently benefit from using the room without charge, but they know that no-one can guarantee that another provider would offer this.

Judging from the general Community Support Services staff engagement events (see Appendix Q for further details) and meetings held with Hafan Deg staff throughout the pre-consultation and consultation phases, there appears to be a good deal of support for Option 1. Although most Hafan Deg staff would undoubtedly prefer to continue to work for the council, they appear to be somewhat reassured by TUPE legislation. A number of staff referred to the importance of using all the resources at Hafan Deg more effectively, ensuring that it benefits more people in the future. There are some concerns about the parking facilities, but enthusiasm for making it a community integration facility. Some staff expressed concern about the low level of referrals in recent times.

8.5 Summary of petitions relating to Hafan Deg

There was one petition submitted in relation to Hafan Deg in before the consultation phase began. 881 signatures were collected and it was accompanied by letters from the family of those who attend, stressing its importance. This petition was presented to full council in April 2015. The petition reads:

“Save our/your Day centre from closure – Hafan Deg is the only day centre in the North of Denbighshire, It is currently run by DCC but even this is too much for them. Prestatyn day centre has already been closed so please sign the petition and help us save this vital and essential community service for Rhyl and Prestatyn. Our residents in Prestatyn were not given notice of the closure and we have lost this vital service for our town. Our residents now attend Hafan Deg in Rhyl which is at risk of closure without your help!”

In addition, 13 identical letters were received from residents of War Memorial Court in July 2015. We have been advised that these should be treated as one petition, with 13 signatures, as they are identical. The letter reads as follows:

“I write to enquire if it may be possible and the Council services may be willing and able to provide cooked meals for myself on the days when the staff are cooking for day care visitors.

I fully realise that all services are under potential threat and withdrawal because of financial constraints and would accept that if the above was allowed it would only be on a trial basis and could be withdrawn at any time.

If this request was met with a favourable response I would be more than happy to pay a week in advance so that the catering staff could make provision to order sufficient supplies and prepare the same.

One would like to comment that on VE day this year the residents and day care visitors had a very nice meal together provided by your catering staff who coped admirably.

Thank you for your help with this matter”.

8.6 Summary of UNISON response relating to Hafan Deg

The full response submitted by UNISON is attached at Appendix K, and this is an important document because it does set out a genuine alternative to the council’s preferred options. It is a difficult document to summarise, and doing so may do the document an injustice, so we would strongly recommend that the document is examined thoroughly by Members. However, in general terms, UNISON set out a case for keeping all of the existing services under council control. UNISON argue that:

“The retention of in house options within a broad range of providers allows us the flexibility we need to offer sustainable solutions”.

In order to make the services affordable, and therefore sustainable, UNISON argue that:

“The wisdom of investing in sustainable public sector provision is clear in any financial scenario but we feel compelled in the current circumstances to request Elected Members to revisit the size and extent of the reduction they have applied to the Community Support Services budget. In doing so they should consider the possibility of utilising the opportunity afforded by the better than expected settlement”.

UNISON continue by arguing that the better than expected settlement enabled the council to reduce its original proposal for increasing council tax for 2016/17 from 2.75% to 1.5%, and that the difference between the two proposals (an estimated £551,430 in income) represents the “*degree of leeway which could be used to reduce the impact of the cut in the Community Support Services Budget*”.

Page 11 of the document states that:

“We [UNISON] see day care services playing a key role in providing the release valve for carers enabling them time to themselves. We [UNISON] see this as an invaluable way to reducing the risk of carer breakdown and breakdown in the relationship between carer and the person they care for.

We [UNISON] believe quality day care contributes substantial cost avoidance, when the consequences of carer breakdown are considered. We [UNISON] also can see little hope of the local authority being able to fulfil its duty to carers

under the new Act without the availability of the relatively inexpensive short-term break from caring that day services can provide.

If the proposals in 'Future of Denbighshire County Council's in-house care services' are adopted this important provision will be lost as the proposals focus on activities for those without care needs and thus provide no respite for those involved in supporting the many people who do have care needs".

Page 12 of the document states that:

"Offering a diverse range of activities is reliant on a 'market place' of independent sector and community providers offering activities that are accessible to those members of the community in need of support. Without a local authority infrastructure of trained staff and accessible venues this market is restricted to only those organisations who are able to secure the required accommodation. This beyond the reach of many local community providers who would be excluded from offering activities if the infrastructure is lost. By charging organisations for facilities and support the council can develop a new revenue stream that taps into the donations and grant funding streams that are often seen as a key advantage of third sector provision. Furthermore, the presence at the facility of well-trained and professional council staff means that the necessary health and safety practices can be maintained even where activities are delivered by unqualified and/or volunteer partners".

UNISON do make some important points within their response document, and the option of raising council tax to subsidise the current arrangements is a genuinely alternative which Cabinet could consider supporting. However, the UNISON response is based on a clear assumption that the council does not see the importance of day services for people who have social care needs, and that the council wants an independent sector provider to focus only on preventative activities for people without care needs. The council has never said this. In fact, the council would like to commission an expanded and enhance day care service from Hafan Deg in future, in addition to (not instead of) expanding the range of preventative activities being delivered from there.

Mae tudalen hwn yn fwriadol wag

Options for Dolwen

1. Introduction

This document provides an analysis of the options for Dolwen in Denbigh. This means the two distinct options put forward by the council, and also any other options put forward during the consultation process (Option 3).

2. The current provision in the Denbigh area

Denbigh and the surrounding area is currently served by the following care provision:

- 61 standard residential care beds (23 at Llanrhaedr Hall, 10 at Vale View, 28 at the Old Deanery)
- 32 EMH residential care beds (13 at Llanrhaedr Hall, 19 at Bryn Derwen)
- No standard nursing beds
- 52 EMH nursing beds; 18 at Llys Meddyg, 34 at Plas Eleri
- No Extra Care Housing facilities.

3. The options for Dolwen

Taking into account the current provision available in the Denbigh area (highlighted above), the council developed 3 options in relation to Dolwen which became the subject of the formal public consultation:

Option 1 (the council's preferred option): To enter into a partnership with an external organisation and transfer the whole service to them, while registering for EMH care.

Option 2: To lease or sell Dolwen for another purpose. The home would close and the service users and their families would be supported to find suitable alternative provision.

Option 3: The council is open to any other alternative option you wish to put forward that would meet the demands for residential and day care places within the available resources.

- The only alternative option put forward during the consultation was for the council to continue to own and run Dolwen. This was only explored in detail within the UNISON response, so this is the option that is considered within this paper as being Option 3.

4. The rationale for Option 1:

- 4.1 The demand for standard residential care in Denbighshire is declining year on year, and Dolwen is not sustainable as a standard residential care home in the long-term.
- 4.2 There is growing demand for EMH residential care in the Denbigh area, and Option 1 would address that.
- 4.3 There is strong financial argument for Option 1 because there is potential for a significant financial saving if the council did not own or run Dolwen. This saving would

be £148,658 if based on the current occupancy levels (24 beds). The actual savings to the council depend on the occupancy level, with a smaller number of residents resulting in a larger saving to the council. As the occupancy levels in Dolwen fluctuate, it can be said that the projected annual saving on the cost of buying care is up to £148,658 (based on current occupancy levels, i.e. 24 beds). However, as the demand for standard residential care is reducing year on year, it is reasonable to suggest that the savings may be even greater in future. In addition to any savings to the council on the cost of care, it is also very likely that there would be additional maintenance costs if we were to retain ownership of Dolwen. This is because only the minimum, essential maintenance requirements have been met over the last few years. There is currently a maintenance backlog of approximately £76,000 for Dolwen which we would need to spend if we kept the building, and this adds weight to the financial case for Option 1. Furthermore, the council has incurred more than £40,000 of capital expenditure on the Dolwen building over the past three years, and further capital investment will be needed if the Council was to retain the building.

- 4.4 Despite the apparent widespread interest in the consultation, only 20 people submitted a consultation response expressing a preference for an alternative to the council's preferred option for Dolwen. Furthermore, taking into account all of the information gathered during the consultation, very little was received in terms of a clear rationale for opposing the council's preferred option for Dolwen. The main rationale was Dolwen would be as cost effective as the independent sector if it were operating at full occupancy, and that the council had been intentionally refusing entry to Dolwen in order to make the independent sector a more attractive financial option. However, no evidence was submitted to support this position, and the council has made it very clear throughout the consultation that the council has had no policy of refusing entry to Dolwen. The number of vacancies simply reflects the reducing demand for standard residential care.

5. Consequences of Option 1:

- This would ensure that individuals currently living in Dolwen could continue to do so, supported by the same staff as they currently are and accessing the local community as much as they do now. The current day care offer would continue and could potentially be extended in future.
- Staff would be transferred (via TUPE transfer) to the partner organisation. Although this may be seen by some as a potentially negative impact, it would have some tangible benefits, such as safeguarding jobs and protecting the terms and conditions of staff. If the decision was made to transfer the unit, a transfer plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place.
- There would be an annual revenue saving of £148,658 on the cost of care (based on current occupancy levels, i.e. 24 beds)¹ because, from April 2016, it will cost the council £483.46 per person per week to commission standard residential care from the

¹ The consultation document stated that the annual revenue saving would be £92,000, based on an occupancy level as of 1st September 2015 and costs which were correct at the time the papers were finalised for the consultation.

independent sector, whereas it will cost £854.61 per week (from April 2016) to support one person in Dolwen (see tables below). **Note:** we have updated the financial information to take account of the current number of residents in Dolwen and the revised costs of running Dolwen versus the cost of purchasing the equivalent amount of standard residential care from the independent sector from April 2016. This revised calculation is required because of new employer regulations and additional employer costs from April 2016, which will alter the cost to the council of both running its own residential care homes and purchasing residential care from the independent sector.

- If Dolwen was at full capacity (30 beds), the council would not save money on the cost of care by buying residential care from the independent sector. However, Dolwen does not run at full occupancy because the demand for standard residential care is reducing year on year.

Unit cost to the council of providing care in Dolwen:

<i>Residential home:</i>	<i>Employee Costs</i>	<i>Premises Costs</i>	<i>Transport</i>	<i>Supplies and other services</i>	<i>GROSS TOTAL</i>	<i>Full Occupancy (Beds)</i>	<i>Gross Unit Cost Per Week</i>	<i>Current Occupancy (29/02/16)</i>	<i>Gross Unit Cost Per Week</i>
	£	£	£	£	£		£		£
Dolwen	637,478.00	67,271.00	70.00	47,197.00	752,016.00	30	482.06	24	602.58

Calculation of potential savings on the cost of care:

Unit weekly cost of purchasing standard residential care from independent sector	£483.46
Unit annual cost of purchasing standard residential care from independent sector	£25,139.92
Total annual cost of purchasing standard residential care from independent sector for 30 people	£754,197.60
Total annual cost of purchasing standard residential care from independent sector for 24 people	£603,358.08
Total cost of running Dolwen	£752,016.00
Annual saving on cost of care for 30 people (compared to cost of running Dolwen)	£-2,181.60
Annual saving on cost of care for 24 people (compared to cost of running Dolwen)	£148,657.92

- In addition to the savings on the cost of care, it is also very likely that there would be additional savings in relation to maintenance costs that the council would incur if it were to retain ownership of Dolwen. This is because only the minimum, essential maintenance requirements have been met over the last few years, and there is currently a maintenance backlog of approximately £76,000 for Dolwen which would need to be spent if the Council retain ownership of the building. This would be avoided if Option 1 was implemented.
- The council has incurred more than £40,000 of capital expenditure on the Dolwen building over the past three years, and further capital investment will be needed if the Council was to retain the building. This would be avoided if Option 1 was implemented.
- The council would be unlikely to receive a capital receipt for the Dolwen site because any new provider would need to invest significant amounts of money to ensure that the building met the minimum standards that are likely to be required by CSSIW of any new owner.

- It would develop a level of EMH provision in the area, a growing area of demand, and enable local people with specialist EMH needs to remain in the Denbigh area.
- Plans for the development of Extra Care Housing within the town will continue, and this would be complemented by the other provision (including Dolwen becoming an EMH residential care home) to create a balanced offer of support for older people in the Denbigh area.

6. Consequences of Option 2:

- There would still be a revenue saving of £148,658 on the cost of care¹ (as there would be with Option 1) because the new provider would be commissioned using standard rates.
- The council would still avoid any additional maintenance costs and any necessary capital expenditure on the Dolwen building (as it would with Option 1).
- The cost of current vacancies within residential care centres means that current resources are not being used as effectively as possible. This option would resolve this problem.
- The council accepts that this option would mean disruption for current residents and their families. The council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs. Dolwen would not close until all the service users' needs had been fully reviewed and suitable alternative provision found. Furthermore, the council has already agreed that no individual service user will be required to move from their current home unless they wish to do so (as long as their current home is still able to meet their needs).
- Existing staff would be at risk of redundancy, but would be able to have a planned progression from working for the Council due to the likely timescales involved. A closure plan would be agreed, subject to consultation and approval, and statutory consultation with staff would take place.

7. Consequences of Option 3:

- The council would continue to own and run Dolwen as a residential care home and day care centre.
- Staff would continue to be employed by the council, which they would prefer.
- The council would not realise the available revenue saving of £148,658 on the cost of care, and would continue to incur additional maintenance costs and capital expenditure because it would still own the building. The existing maintenance backlog of approximately £76,000 would remain as a council liability.

- As proposed by UNISON, the revenue shortfall could be mitigated (at least for 2016/17) by an additional increase in council tax. However, it could be argued that this would have a negative impact on citizens within the community who would be effectively subsidising relatively expensive council-run services for a minority of service users from Dolwen.
- Unless the council was able to register to provide EMH residential care from Dolwen, there would continue to be an unmet demand for EMH provision in Denbigh.
- Unless the council was able to register to provide EMH residential care from Dolwen, this proposal would do nothing to address the issue of a reducing demand for standard residential care. It is therefore likely that vacancies would continue to increase in Dolwen, and the service would become increasingly less sustainable.

8. Summary of the consultation responses relating to Dolwen

106 consultation questionnaires returned	<ul style="list-style-type: none"> • 34 paper questionnaires • 72 online questionnaires
Other submissions from individuals	<ul style="list-style-type: none"> • 5 letters • 7 emails
Public meetings	<ul style="list-style-type: none"> • 2 public meetings in Denbigh • 54 attendees in total
Meetings / focus groups	<ul style="list-style-type: none"> • 1 meeting with Denbigh Member Area Group • 1 meetings with Denbigh Town Council • 1 meeting with Cysgodfa and Llys y Faner tenants through Age Connects • 4 Community Support Service staff engagement events
Petitions	<ul style="list-style-type: none"> • 1 petition specifically relating to Dolwen, with 72 signatures. • 30 identical letters received during the consultation period opposed to any changes to any of the 3 residential homes. • 1 petition submitted prior to the consultation period (November 2014) opposed to changes to any of the residential homes (approx. 5000 signatures).
Union responses	<ul style="list-style-type: none"> • One formal report from Unison

8.1 Responses from consultation forms

Option	Number of people expressing a preference for this option
Option 1	7
Option 2	0
Option 3	20

Unfortunately, only a small percentage of those who responded using the consultation forms indicated which option they would prefer. Of the 106 returned questionnaires relating to Dolwen, 7 respondents specifically expressed a preference for Option 1; nobody

expressed a preference for Option 2; and 20 expressed a preference for Option 3. The comments submitted with the responses forms indicate that several more respondents expressed a desire to keep Dolwen in the ownership of the council. Although this could be considered as support for an alternative option (i.e. an “Option 3”), few of the comments elaborated on how that could be done whilst making the service sustainable for the future. The only exception is that a number of people highlighted that Dolwen would be more cost effective if it were full. The financial calculation used by respondents here is technically correct, but the argument is not. The council’s *Case For Change* document does state that Dolwen (at full occupancy) would cost the council £479.09 per person per week². However, the argument overlooks the fact that the demand for standard residential care has been reducing year on year for a number of years now, and the demand therefore does not exist to run Dolwen at full occupancy as a standard residential care home.

A number of respondents also suggested that there are only vacancies in Dolwen [and Awelon and Cysgod y Gaer] because the council has had a policy of stopping people moving into its care homes. As mentioned in other appendices, this is something that came up repeatedly during the public consultation meetings, prompting to council to issue a press release in December 2015 (Appendix E), which contained the following response:

“Is it true that the real reason why there are vacancies in your three care homes is that the council has had a deliberate policy to block or reduce admissions? No, the council does not have a policy of stopping people from moving into our care homes. The reason we have vacancies is simply that the demand for standard residential care has been reducing for several years. Generally speaking, people do not want to live in residential care homes when they get older. They want to be supported to remain independent within their own homes or within alternative settings, like extra care housing”.

Other respondents queried the cost savings available if the independent sector were to run Dolwen, particularly in the light of new legislation regarding the national minimum living wage (and other employee responsibilities) which are due to be introduced in April 2016. This is something that has developed since the council started to look at the future of its in-house care services, and we have therefore investigated the probable implications of this further in order to help Members to consider the impact. The figures have been re-calculated and have been included above in section 4. The revised expected annual savings (based on current occupancy levels) are £148,658 on the cost of care.

While it is acknowledged by many respondents that a need for EMH provision exists in Denbigh, many query whether Dolwen is the place for this. For example, one respondent commented that the provision of EMH care:

“...is not best achieved by dispensing with a sector of care provision which is needed to address the needs of those for whom 4 daily visits is not enough. The latter cohort do not necessarily have adult mental health issues. Their issues revolve more around independence and Dolwen has addressed these needs peerlessly for many years...” (Consultation respondent).

² Again, this information was correct at the time the papers were finalised for the consultation.

The council would counter the above argument by saying that residential care is not designed to support independence, and that people who require 4 or more visits per day (but do not have specialist EMH needs) would achieve much better outcomes in Extra Care Housing.

A few respondents also complained that some the evidence in the council's *Case for Change* document is based on a national rather than local survey, and that some of the research is several years old. The council would respond to this challenge by saying that we used the most relevant and appropriate research available to support the review. There has been some very good national research which just hasn't been replicated at the county area level. Furthermore, a lot of the issues (for example, the reduction in demand for residential care) are national phenomena and not at all limited to Denbighshire. All of the research used to inform the review is relevant and valid.

Several respondents took the opportunity to comment on a wide range of topics which, whilst having a bearing on the experience of older people in the area, were not directly related to the consultation. These included comments expressing disappointment at proposed or actual cuts to the bus services and cottage hospitals.

Other suggestions for saving money made by respondents included the following, some of which depend on saving money in other departments:

- "...I believe that funding should be spent on the elderly who have contributed to society and paid their taxes rather than on 2 and 1/2 year olds being funded to go to pre-school when a few years ago the funding was not provided until 3 and 1/2! Allocation of funding within the council should be moved from education of babies to social care for the elderly"
- "...Keep Dolwen open by reducing provision of free sporting activities; summer play schemes..."
- "link with a charity to increase subsidy for maintenance cost",
- "Raise rents on DCC owned flats",
- "... reduce payments to staff from the 'bank' by having your own list"
- "make use of empty buildings for Council Tax".
- "DCC currently owns farms with an estimated value of £30 million whose income could be much higher if rents were increased. How much have DCC gained in capital investment for these farms in recent years e.g. new slurry tanks etc.?"
- "County Councillors who fail to attend more than 75% of meetings should have salary deducted to be used for Dolwen."
- "Joined up thinking between departments. Less money spent on administrative costs and new office buildings, more community involvement in schemes like planting on roundabouts and community support groups."
- "Sell some council-owned farms and stop paying gagging orders and put a limit on mileage expenses for councillors and council staff."

In addition a number of respondents suggested reducing the number of senior management officers/Elected Members and/or reducing their wages.

One respondent *“was under the impression..., that Dolwen was not available to self-funders”*. He felt that health professionals might be under the same impression and thought that more people might ask to be assessed for a referral to Dolwen if they knew this.

Most respondents comment on the high quality of care currently offered at Dolwen both in the home and day care centre and some refer to the good CSSIW reports, which they say are generally better than those of other residential care homes in the area. The importance of the respite offered there is also referenced frequently and several mention what an important role the home has in the community, mentioning, for instance how they helped in the St Asaph floods. There seems to be some concern that their profile might not be the same if run by the independent sector,

It is clear that many people do not fully understand Extra Care Housing. One respondent writes:

“There isn't enough detail regarding the structure of the Extra Care Housing, i.e. staffing levels etc, my understanding is that they are not regulated and therefore they could be downgraded to suit the Council's financial targets rather than the needs of the residents. (Consultation respondent).

During the public meetings, council officers explained that this provision, and their staff, are indeed regulated and that the new act ensures that support care workers will be overseen by the same regulatory body as social workers.

Concern is also expressed for the staff, and some expressed concern that there would be a higher turnover of staff if the independent sector were to run Dolwen, which could be confusing or distressing for residents. One respondent writes:

“I would suggest Dolwen staff are invited to join with officers and social work staff to 'brainstorm' the way the service is provided.” (Consultation respondent).

8.2 Summary of other submissions from individuals

Most people stressed how important it is to them, and those they represent, that Dolwen stays open. One of the key messages put forward by the council during the public consultation meetings was that it also wants Dolwen to stay open. The council's preferred Option 1 would achieve that outcome.

However, distrust of the private sector is cited in the majority of the submissions relating to Dolwen. This seems to be why the majority of people would prefer Dolwen to remain in the ownership of the council.

The fact that the home provides a Welsh medium service to residents of a Welsh speaking area is also highlighted by many people as being crucially important. One respondent writes:

“...there is no expectation on the private sector to provide care in the mother tongue of the residents that live in their homes. We know that a provision in your mother tongue makes a person feel more at home and comfortable...”
(Respondent).

The fact that the majority of the current staff come from Dolwen’s cultural circles, and that the residents there knew a number of them before going to live there, is cited as important:

“This consistency gives assurance and peace of mind for care home residents that cannot be obtained in other homes.” (Respondent).

It seems that many respondents fear that if an independent sector provider were to take over, whilst they would have an obligation to take on our staff under TUPE arrangements, they might add their own staff who might not be local.

Many people expressed concern that residents of the residential home and day centre should keep the links with the community, and fear that this might not be maintained with a different provider.

Many respondents clearly believe that there is still demand for standard residential care homes and it is very apparent that many do not understand the distinction between sheltered housing and extra care housing, or that people can receive 24-hour care in an extra care housing environment. This comment is fairly typical of many others received:

“... there is a percentage of the population that require care in a care home environment, where the staff there can ensure that everyone has enough food, keeps warm, has a drink and in sporadic cases, when the need arises, takes their medication. This care provision is not available in a sheltered housing environment.” (Respondent).

Many respondents cite recent developments in the Care Home sector which ‘have shown how vulnerable the sector is’ and refer to the closure of Maes Elwy and other homes in recent years. Mabon ap Gwynfor writes:

“This uncertainty...means that the Authority’s provision of care for the elderly should not be compromised. I know that officers and the County’s portfolio holder will say that the private sector already provides 90%+ of care to the elderly in the county. But this is not a reason in itself to justify the county providing even less care”. (Mabon ap Gwynfor).

Terms and conditions are the main reasons for the difference in price for care in the private sector and care in the County homes. Some respondents suggest that;

“...ensuring better terms and conditions for the workforce means a better, happier and contented workforce that provide a better service.” (Respondent).

In addition to this, they refer to the new pay level which will come into effect for the private sector workforce in April with the new living wage. A number ask if this has been considered with the viability of private care homes in the county. As stated earlier (in section 4 of this appendix), we have re-calculated the financial figures to take new employer costs and

current occupancy levels into account. The revised expected annual savings (based on current occupancy levels) are £148,658 on the cost of care.

Almost all respondent say that the existing arrangement at Dolwen is excellent as evidenced by the most recent inspection report. Many praise the staff there and describe the care as ‘*second to none*’.

Some individuals suggested that the type of plan that is the preferred option for Cysgod y Gaer, should also be developed for Awelon and Dolwen. Mabon ap Gwynfor states:

“I’m confident that such a plan can be a breakthrough in care for elderly people in Wales and set a bench-mark for providers and other authorities”. (Mabon ap Gwynfor)

8.3 Summary of views from the public meetings

Essentially, very similar points/concerns were raised during the public meetings as are outlined in the sections above. These include concerns about:

- The capacity/capability of the independent sector;
- The reduced referrals into standard residential care;
- The costs, including the implications of the national living wage;
- The potential impact on residents, day centre service users and their families;
- Access to the community; and
- Welsh language

Discussions were held as to who would own the building under Option 1, and what would happen if the new owner went bankrupt. Officers explained that they envisage transferring the facility as a leasehold arrangement, with a clause to ensure that the property could only pass back to the council in future.

In response to suggestions to the contrary, council officers clarified that there has not been a council policy to stop people entering residential care, and that the number of vacancies in Dolwen reflects the reduction in demand for standard residential care. This assertion was met with some scepticism, and it is clear that many people simply do not believe this.

The proposed new Extra Care Housing development in Denbigh (on the Middle Lane site), was discussed, and it was asked whether we could wait until this was open before making decisions about Dolwen. It was explained that it would probably be around 2 years before the Extra Care Housing development was open, and that there was a clear rationale for Option 1 for Dolwen which does not depend on the Extra Care facility being open.

One of those who attended sent in the following submission:

“We wish to express that the discussion was well-managed and fair with everyone being respectful of the other person's views. We are of the opinion that serious consideration should be given to all feed-back from Staff at the Residential Homes as shown in the documents on the web-site, which were not available at the Consultation, as many of these ideas are practical and sensible. We believe that insufficient attention has been given to these constructive comments made by hands-on staff at the Homes.

We are also of the opinion that any partnerships with regard to the running of the Homes and maintenance of properties should be supported by adequate scrutiny investigations and due diligence tests, and any other adjustments should be covered by firm covenants to secure the establishments for the future”.

The feedback from staff (referred to above) is attached at Appendix P to the report, and was published on the council’s website to support the consultation process. The feedback was collected during the pre-consultation phase and informed the development of the options included in the consultation stage. In addition, Appendix Q summarises views expressed in the staff engagement events during the formal consultation stage. These form an important part of information presented to support the decision-making process.

One attendee was concerned that it is not possible to be a tenant in an extra care housing apartment unless one is on benefits, and officers explained that this is not the case.

Many of those who attended suggested closer working with the Health services and asked why the model suggested under Option 1 for Cysgod y Gaer could not be replicated with Dolwen. Officers explained that Option 1 for Cysgod y Gaer has primarily been developed due to the lack of other services available in the Corwen area, and that the situation was very different in Denbigh.

Attendees also asked if it would be possible to have dual registration so that Dolwen could accept some residents for standard residential care and some for specialist EMH care. It was confirmed that this is indeed possible within Option 1.

A rumour was dispelled about two companies outside Wales being in discussion with the council about taking over Dolwen. It was stressed that no decision has been made about which Option (if any) to pursue in relation to Dolwen, and therefore no discussions have taken place with any provider.

Officers were asked how much it is likely to cost to bring Dolwen up to national minimum standards to enable the council to register as an EMH residential care home. Although this has not been quantified, officers provided a view that it would require significant building work and would be likely to cost hundreds of thousands of pounds.

8.4 Summary of views from other meetings & focus groups

The views expressed in the Member Area Group, Denbigh Town Council and other meetings and focus groups largely echoed the issues already mentioned above.

People asked why it costs more for the council to run Dolwen and asked if it because quality is poorer in the independent sector. Staff described how CSSIW regulate all providers who all have to meet minimum standards. All providers are inspected by CSSIW and monitored by the council. Conditions of service were noted as contributing to the additional costs. Members were assured that there would be safeguards in the contract to ensure that quality would be maintained.

Some people referred to a public meeting organised by Plaid Cymru and Denbighshire Voice in which counter-arguments were put forward, for example that Dolwen would be viable if it were full, and the independent sector is not robust enough. That financial argument is discussed in section 4 above. In relation to the other point, officers referred to

a recent Wales Audit Office report which concluded that the independent care sector is robust in Wales and that a “Southern Cross” situation isn’t likely to happen in Wales.

Many asked about the monitoring role of the council and were pleased to hear of the council’s plans to add two staff to the team which monitors the quality of care provided and would keep an overview of the homes in addition to the CSSIW inspections. Many were pleased to know that all options for working with the independent sector would be considered, including social enterprises and charities.

Judging from the general Community Support Services staff engagement events (see Appendix Q for further details) and meetings held with Dolwen staff throughout the pre-consultation and consultation phases, there appears to be a lot of support for Option 1, particularly for the development of further provision for residents with mental health needs, ideally dual registration. Many staff speak of the value of the day care and respite services offered at Dolwen. Although most Dolwen staff would undoubtedly prefer to continue to work for the council, they appear to be somewhat reassured by TUPE legislation. A number of staff are keen to develop community support services at Dolwen alongside the proposed new Extra Care Housing development on the Middle Lane site. Several people suggested that Social Care and Health should join forces, and that Dolwen and Cysgodfa could work together more closely, perhaps by making Cysgodfa into Extra Care Housing and using Dolwen as a base.

8.5 Summary of petitions relating to Dolwen

We received 72 signatures of a petition *saying:*

“We the undersigned oppose the DCC plans to take Dolwen out of local authority control and move the emphasis on elderly mental health”

In July 2015, we also received 30 identical copies of letters from people saying:

“DCC intends to close Awelon, ‘privatise’ Dolwen & develop Cysgod y Gaer as a ‘support hub’. I am utterly opposed to the plans to change the current status of the above named care homes. This means that I am opposed to the closure of Awelon, I am opposed to the transfer of Dolwen to an external organisation and I’m opposed to Cysgod y Gaer being changed from its current status”.

In addition, a petition relating to all 3 residential care homes, opposing any changes was submitted in November 2014 containing nearly 5000 signatures.

8.6 Summary of UNISON response relating to Dolwen

The full response submitted by UNISON is attached at Appendix K, and this is an important document because it does set out a genuine alternative to the council’s preferred options. It is a difficult document to summarise, and doing so may do the document an injustice, so we would strongly recommend that the document is examined thoroughly by Members. However, in general terms, UNISON set out a case for keeping all of the existing services under council control. UNISON (on Page 5) argues that:

“The retention of in house options within a broad range of providers allows us the flexibility we need to offer sustainable solutions”.

In order to make the services affordable, and therefore sustainable, UNISON (on Page 5) argues that:

“The wisdom of investing in sustainable public sector provision is clear in any financial scenario but we feel compelled in the current circumstances to request Elected Members to revisit the size and extent of the reduction they have applied to the Community Support Services budget. In doing so they should consider the possibility of utilising the opportunity afforded by the better than expected settlement”.

UNISON continue by arguing that the better than expected settlement enabled the council to reduce its original proposal for increasing council tax for 2016/17 from 2.75% to 1.5%, and that the difference between the two proposals (an estimated £551,430 in income) represents the *“degree of leeway which could be used to reduce the impact of the cut in the Community Support Services Budget”*.

Page 13 of the document notes:

“Under option 1 of ‘Future of Denbighshire County Council’s in-house care services’, we find the statement that ‘Plans for the development of Extra Care Housing within the town will continue’. We welcome this but is really misleading since suggestion in the consultation is about the future of facilities at the Dolwen site and plans to develop Extra Care at the Middle-Lane site are quite separate”

Page 13 goes on to say:

“An expansion of Extra Care is to be welcomed as part of the mix of provision for the growing number of older people in the area which demographic processes will produce. However, it is not an alternative to the Dolwen [and Awelon] facilities and it is unhelpful to conflate these two distinct demands.

Unison believe that we are correct to emphasise the impact of increases in dementia cases, but go on to say (on page 15):

“Both specialist EMI and residential services are important provisions in order to meet the needs of people appropriate to their particular life-stage and provision for these should be made in the mix of care provision on offer”.

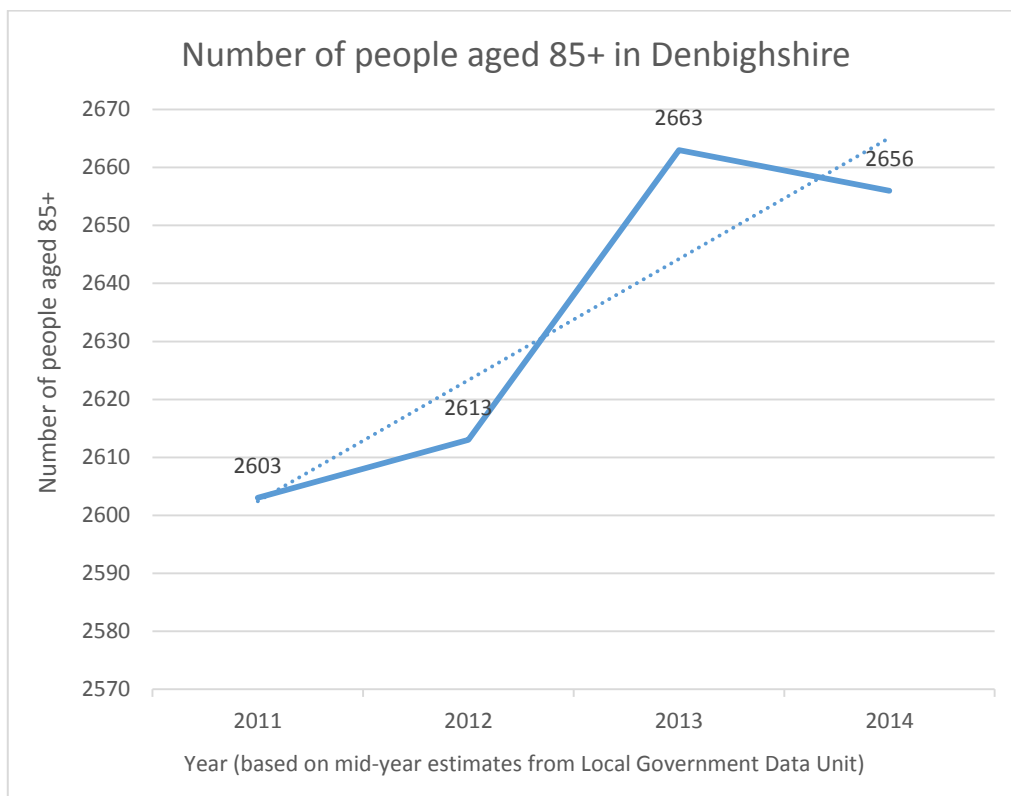
It is not clear at this stage the role that Dolwen [or Awelon] may have in supporting those with dementia under any of the proposals and additional provision may be required and that direct in-house provision of EMI services should be considered alongside other proposals in a separate process to this review.’

UNISON contend that many of the arguments made in its “case for change” document (Appendix C) are flawed. There are two main points made by UNISON in this respect. The first one is that Extra Care is not a suitable replacement for residential care, and that we need both. However, the council strongly disagrees with this argument. Extra Care can be, and should be, put forward as an alternative to standard residential care. The only real difference between the two is that people rent or buy an apartment in extra care housing, and therefore live in their own apartment, with their own front door, rather than just having a room. Care staff are on-site for 24 hours a day in extra care housing, just as they are in a residential care home. Extra Care Housing can (and does) support people who have the

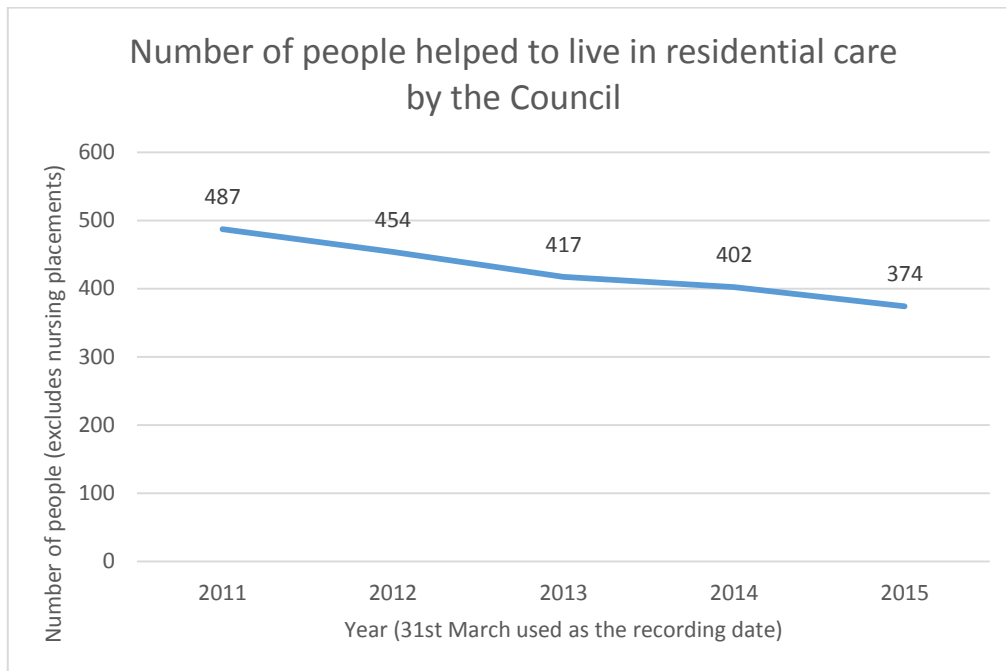
same level of social care needs you would find in a standard residential care home. However, research shows that there are many benefits to extra care housing over residential care. Extra care housing tends to be a more enabling environment, and people have better outcomes and are able to live more independent and fulfilling lives. People can also be better off financially in extra care housing because they do not have to sell their own property to pay for care home fees. People may have to sell their property in order to buy an extra care apartment, but they can then retain ownership of a property. A couple can also move into extra care housing together, even if one partner does not have social care needs.

The second UNISON argument is that demographic change, in particular the projected continued increased numbers of older people in Denbighshire, will necessarily result in an increase in demand for standard residential care. Again, the council does not share this view. Whilst it is true that the number of older people in Denbighshire is projected to rise over the next 15 years, this is not a new phenomenon. The first graph below shows that the number of people aged 85 and over in Denbighshire (the expected age for someone entering residential care) has been rising for some time. The second graph shows that the number of people supported by the council to live in residential care homes has been decreasing steadily during the same period. This suggests that there is not necessarily a consequential link between the two factors. Part of the explanation for this lies in the development of better alternatives to standard residential care, such as Extra Care Housing.

Graph 1: shows the increase in the 85+ population in Denbighshire between 2011 and 2014. Note: the figure for 2015 has not yet been released by the Local Government Data Unit.



Graph 2: shows the decrease in the number of people supported by the Council to live in residential care homes between 2011 and 2015. This reflects the decrease in demand for standard residential care in Denbighshire, and indeed across Wales.



UNISON do make some interesting and important points within their response document, and the option of raising council tax to subsidise the current arrangements is a genuinely alternative which Cabinet could consider supporting. However, the UNISON response is based on a number of assumptions and arguments which the council does not agree with. Most fundamentally, the council firmly believes that Extra Care Housing is a better alternative to standard residential care. In fact, the council's vision is that:

*“Where an individual’s needs can only be met by support from social services; **and** an individual cannot be cared for safely in their existing home; **and** the person does not need specialist nursing and/or mental health service...the Council will provide domiciliary care services within an Extra Care Housing development”.*

Mae tudalen hwn yn fwriadol wag

Options for Awelon

1. Introduction

This document provides an analysis of the options for Awelon in Ruthin. This means the two distinct options put forward by the council, and also any other options put forward during the consultation process (Option 3).

2. The current provision in the Ruthin area

Ruthin and the surrounding area is currently served by the following care provision:

- 45 standard residential care beds (23 at Llanrhaedr Hall; 12 at Trosnant; 10 at Vale View)
- 26 EMH residential care beds (13 at Llanrhaedr Hall; 13 at Valley Lodge)
- 51 standard nursing beds (30 at Plas Gwyn; 21 at Valley Lodge)
- 52 EMH nursing beds (18 at Llys Meddyg, 34 at Plas Eleri)
- 21 Extra Care Housing apartments (Llys Awelon)

3. The options for Awelon

Taking into account the current provision available in the Ruthin area (highlighted above), the council developed 3 options in relation to Awelon which became the subject of the formal public consultation:

Option 1 (the council's preferred option): The council will stop new admissions and work with the individuals and their families, at their own pace, to move them to suitable alternatives (as appropriate) and to enter into a partnership with the owner of Llys Awelon to develop additional Extra Care apartments on the site. However, it should be noted that Cabinet has agreed that nobody will be required to leave if they don't want to and their needs can still be met there.

Option 2: To work in partnership with a registered social landlord, health services and the 3rd sector to develop a range of services, transferring half of the building to develop additional extra care flats, possibly as an extension to Llys Awelon, while using the remainder as a small residential unit which could be used to meet the increasing need for respite care and to ensure that no existing resident would need to move unless they chose to.

Option 3: The council is open to any other alternative option you wish to put forward that would meet the demands for residential and day care places within the available resources.

- Two clear alternative options were put forward during the consultation, and these will be referred to as Option 3a and Option 3b:
- **Option 3a (UNISON):** The UNISON proposals are explored/explained in detail within the full UNISON response (Appendix K), but essentially their proposal is for the council to continue to own and run Awelon, and for this to be funded with an additional increase in Council Tax.

- **Option 3b (Elected Member):** It was suggested that the council could look to build additional Extra Care Housing on one of the potentially vacant school sites in Ruthin (following school re-organisation). This would satisfy the demand for additional Extra Care Housing in Ruthin, and enable the Awelon site to continue as it currently is.

4. The rationale for Option 1:

- 4.1. The demand for standard residential care is declining year on year, and Awelon is therefore not sustainable as a residential care home in the long-term.
- 4.2. Option 1 would enable the demand for additional Extra Care Housing in Ruthin to be met, and people with 24-hr care needs generally achieve better outcomes in an Extra Care Housing environment than they do in a residential care home.
- 4.3. There is an overwhelming financial argument for Option 1, with an annual saving on the cost of care of between £146,274 and £347,393. The council would also avoid additional maintenance costs and capital expenditure on the Awelon building which would be very likely to occur if it retained ownership of the building.
- 4.4. Despite the apparent widespread interest in the consultation, only 16 people submitted a consultation response expressing a preference for an alternative to the council's preferred option for Awelon. Furthermore, taking into account all of the information gathered during the consultation, very little was received in terms of a clear rationale for opposing the council's preferred option for Awelon. Two main arguments were put forward for opposing Option 1 for Awelon. First, that Awelon would be more financially competitive (with the independent sector) if it were operating at full occupancy, and that the council had been intentionally refusing entry to Awelon in order to make the independent sector a more attractive financial option. However, no evidence was submitted to support this position, and the council has made it very clear throughout the consultation that the council has had no policy of refusing entry to Awelon. The number of vacancies simply reflects the reducing demand for standard residential care. The second argument was that Extra Care Housing cannot provide for the same level of care needs as a residential care home, and that Extra Care Housing should therefore not be seen as a replacement for Awelon. Again, no evidence was submitted to support this argument, and the council is very clear that Extra Care Housing can (and does) meet the needs of people with 24-hour care needs (i.e. the level of needs that you would expect to result in a standard residential care home placement).

5. Consequences of Option 1:

- Individuals currently living in Awelon would have plenty of time to find appropriate alternative provision. Furthermore, the council has already agreed that no individual service user will be required to move from their current home unless they wish to do so (as long as their current home is still able to meet their needs).
- Awelon would not close until all the service users' needs had been fully reviewed and suitable alternative provision found for all current residents.
- At the point at which the council was able to give notice of the closure of Awelon, existing staff would be at risk of redundancy. However, this option would enable staff to have a planned progression from working for the Council due to the likely timescales

involved. A closure plan would be agreed, subject to consultation and approval, and statutory consultation with staff would take place.

- It would enable the demand for additional Extra Care Housing in Ruthin to be met. There are currently 35 people on the waiting list.
- There would be a requirement on the landlord to ensure that the community activities currently provided at Canolfan Awelon would continue.
- There would be an annual revenue saving of £347,393 on the cost of care (based on current occupancy levels, i.e. 18 beds)¹ because, from April 2016, it will cost the council £483.46 per person per week to commission standard residential care from the independent sector, whereas it will cost £854.61 per week (from April 2016) to support one person in Awelon (see tables below). **Note:** we have updated the financial information to take account of the current number of residents in Awelon and the revised costs of running Awelon versus the cost of purchasing the equivalent amount of standard residential care from the independent sector from April 2016. This revised calculation is required because of new employer regulations and additional employer costs from April 2016, which will alter the cost to the council of both running its own residential care homes and purchasing residential care from the independent sector.
- Even if Awelon was at full capacity (26 beds), the council would save £146,274 per year on the cost of care by buying residential care from the independent sector. The actual savings to the council depend on the occupancy level, with a smaller number of residents resulting in a larger saving to the council. As the occupancy levels in Awelon fluctuate, it can be said that the projected annual saving on the cost of buying care is likely to be somewhere between £347,393 (based on current occupancy levels, i.e. 18 beds) and £146,274 (based on full capacity). However, as the demand for standard residential care is reducing year on year, it is reasonable to suggest that the savings may be even greater in future.

Unit cost to the council of providing care in Awelon:

<i>Residential home:</i>	Employee Costs	Premises Costs	Transport	Supplies and other services	GROSS TOTAL	Full Occupancy (Beds)	Gross Unit Cost Per Week	Current Occupancy (29/02/16)	Gross Unit Cost Per Week
	£	£	£	£	£		£		£
Awelon	690,504.67	57,235.00	4,050.00	48,122.00	799,911.67	26	591.65	18	854.61

Calculation of potential savings on the cost of care:

Unit weekly cost of purchasing standard residential care from independent sector	£483.46
Unit annual cost of purchasing standard residential care from independent sector	£25,139.92
Total annual cost of purchasing standard residential care from independent sector for 26 people	£653,637.92
Total annual cost of purchasing standard residential care from independent sector for 18 people	£452,518.56
Total cost of running Awelon	£799,911.67
Annual saving on cost of care for 26 people (compared to cost of running Awelon)	£146,273.75
Annual saving on cost of care for 18 people (compared to cost of running Awelon)	£347,393.11

¹ The consultation document stated that the annual revenue saving would be £280,000, based on an occupancy level as of 1st September 2015 and costs which were correct at the time the papers were finalised for the consultation.

- In addition to any savings to the council on the cost of care, it is also very likely that there would be additional maintenance costs if we were to retain ownership of Awelon. This is because only the minimum, essential maintenance requirements have been met over the last few years. There is currently a maintenance backlog of approximately £165,000 for Awelon which we would need to spend if we kept the building. Furthermore, the council has incurred more than £25,000 of capital expenditure on the Awelon building over the past three years, and further capital investment will be needed if the Council was to retain the building.

6. Consequences of Option 2:

- Only a proportion of the annual revenue saving (mentioned in Option 1) would be realised, and the council would continue to incur additional maintenance costs and capital expenditure because it would still own at least part of the building.
- It would enable some of the existing demand for additional Extra Care Housing in Ruthin to be met.
- The unit cost of providing small residential homes is very high. This could keep a question mark hanging over the service, especially as people's preference is likely to be for the Extra Care Housing.
- The cost of residential care per person in Awelon will increase even further, due to economies of scale being lost and the cost of any vacancies becoming more significant in a smaller unit.

7. Consequences of Option 3a (UNISON):

- The council would continue to own and run Awelon as a residential care home and day care centre.
- Staff would continue to be employed by the council, which they would prefer.
- The council would not realise the potential annual revenue saving of between £146,274 and £347,393² on the cost of care, and would continue to incur additional maintenance costs and capital expenditure because it would still own the building. The existing maintenance backlog of approximately £165,000 would remain as a council liability.
- As proposed by UNISON, this financial pressure could be mitigated by an additional increase in council tax. However, it could be argued that this would have a negative impact on citizens within the community who would be effectively subsidising relatively expensive council-run services for a minority of service users from Awelon.
- The proposal does nothing to address the unmet demand for additional Extra Care Housing in Ruthin.
- The proposal does nothing to address the issue of a year-on-year reduction in demand for standard residential care. However, it is clear that this is because UNISON do not agree that this reduction in demand exists.

² The consultation document stated that the annual revenue saving would be £280,000, based on an occupancy level as of 1st September 2015 and costs which were correct at the time the papers were finalised for the consultation.

8. Consequences of Option 3b (put forward by an Elected Member):

- The council would continue to own and run Awelon as a residential care home and day care centre.
- Staff would continue to be employed by the council, which they would prefer.
- The council would not realise the potential annual revenue saving of between £146,274 and £347,393² on the cost of care, and would continue to incur additional maintenance costs and capital expenditure because it would still own the building. The existing maintenance backlog of approximately £165,000 would remain as a council liability.
- The demand for additional Extra Care Housing in Ruthin would be met by using an alternative site. However, the alternative site is not as good as the Awelon site for Extra Care Housing because it is further away from town, and therefore residents may have less access to the community, which may reduce their independence. It is possible that a completely new (and bigger) Extra Care Housing development in another part of Ruthin could have an impact on the viability of Llys Awelon. The council could also lose out on a significant capital receipt from the sale of the school site.
- The proposal does nothing to address the issue of a year-on-year reduction in demand for standard residential care, and the impact that has on the financial viability of Awelon.

9. Summary of the consultation responses relating to Awelon

70 consultation questionnaires returned	<ul style="list-style-type: none"> • 13 paper questionnaires • 57 online questionnaires
Other submissions from individuals	<ul style="list-style-type: none"> • 15 letters • 10 emails • 3 telephone messages
Public meetings	<ul style="list-style-type: none"> • 2 public meetings in Ruthin • 54 attendees in total
Meetings / focus groups	<ul style="list-style-type: none"> • 1 meeting with Ruthin Member Area Group • 1 meetings with Age Connect Ruthin Hubbub forum • 4 Community Support Services staff engagement events
Petitions	<ul style="list-style-type: none"> • 2 petitions opposed to the closure of Awelon specifically: <ul style="list-style-type: none"> ➢ 1 via Plaid Cymru (1242 signatures) ➢ 1 from English Presbyterian Church (15 signatures) • 2 petitions against closure of all residential homes: <ul style="list-style-type: none"> ➢ 1 with approx. 5000 signatures ➢ 30 identical letters • Total of 6282 signatures opposing the closure of Awelon
Union responses	<ul style="list-style-type: none"> • One formal report from Unison

9.1 Responses from consultation forms

Option	Number of people expressing a preference for this option
Option 1	0
Option 2	12
Option 3	4

Unfortunately, only a small percentage of those who responded indicated specifically which option they would prefer. Of the 70 returned consultation questionnaires relating to Awelon, none explicitly expressed a preference for Option 1; 12 expressed a preference for Option 2; and 4 expressed a preference for Option 3. The 12 people indicating a preference for Option 2 seemed to favour the idea of joint working with health and other agencies.

Several respondents commented about how greatly valued the services at Awelon are, including reference to the importance of day care and respite provision. It is important to note that extra care housing can, and does, provide respite care. One respondent refers to the advantages, currently, of having extra care and residential care facilities on the same site.

Another respondent outlines what she sees as the advantages of option 2 thus:

“Option 2 would be very beneficial so that people can still stay in their local community even if they have greater needs, giving them the opportunity for more visits by friends and family, and staying in touch with their own churches and chapels, GPs, dentists, opticians, podiatrists etc. Extra Care residents could move seamlessly from that to Residential Care should their needs increase owing to physical or mental frailty” (Consultation respondent).

One respondent suggested that:

“... DCC already owns a large area of land that Awelon Community Centre stand on, this could easily be used for Extra Care Housing without interfering with the structure and running of Awelon Care Home”. (Consultation respondent).

We also received other queries from those stressing the value of this community centre. We assured those who raised similar concerns during the public meetings that there will continue to be a community centre where the current activities can continue.

Some respondents referred to the need for nursing care beds, a point with which the council agree with.

Some respondents suggested that savings could be made, or could have been made in, other departments rather than in Social Services. One suggests that senior officer wages should be cut. Other comments included:

“... Maybe councillors should consider the dramatic overspend on their headquarters in Ruthin. A recent article in "Private Eye" highlighted this. To build it in 2004 it cost £12.1million, but the total cost spent via the PFI scheme, allowing for compensation, was £42.1million- £30 million extra”. (Consultation respondent).

“...Perhaps the council should be disbanded to save money, or cut back on their subs to save old people's homes, or become a voluntary organisation”. (Consultation respondent).

Many respondents mention concern for staff and their future if Awelon is closed.

9.2 Summary of other submissions from individuals

We received 28 letters, calls and e-mails, most of which showed support for keeping Awelon in the ownership of the council. Although this would have to be considered as support for an alternative option (i.e. an “Option 3”), none of the comments elaborated on how that could be done whilst making the service sustainable for the future. The only response which does this is the response from Unison (Appendix K).

All respondents were positive about the services currently provided at Awelon. It is clear that many families find its presence reassuring having known a number of local people who have lived there over the years. However a number also suggest that it is being run down by the council, for example:

‘... with a large number of empty beds to be seen on the floor where my relative was. This did not provide any kind of support for my relative who wanted to have some kind of contact with other people during his stay. I was very sad to see the decline in the lack of opportunities to communicate in general except for mealtime. This in my view is a situation that has been created by the Council, which appears to be slowly closing the centre, even during the consultation period.’ (Consultation respondent).

This is something that came up repeatedly during the public consultation meetings, prompting to council to issue the press release (Appendix E), which contained the following response:

“Is it true that the real reason why there are vacancies in your three care homes is that the council has had a deliberate policy to block or reduce admissions? No, the council does not have a policy of stopping people from moving into our care homes. The reason we have vacancies is simply that the demand for standard residential care has been reducing for several years. Generally speaking, people do not want to live in residential care homes when they get older. They want to be supported to remain independent within their own homes or within alternative settings, like extra care housing”.

Some refer to the greatest challenge facing older people being loneliness, and the importance of the location and culture of Awelon. Many people also believed that the council has topped GPs from referring people to our care homes, including Awelon. One respondent went on to say:

‘...The recent experience of my relative shows this clearly, and that is basically because it is probably more difficult for doctors to send people to receive care at Awelon, therefore the number who go there has fallen considerably. I don't think there are less people using the centres, it's just more difficult these days to be referred there....’. (Consultation respondent).

This was another theme which came up repeatedly during the public consultation meetings. Again, we responded to this challenge within our press release in December (Appendix E), which contained the following response:

“Is it true that the council has stopped GPs from referring people to its care homes? No, GPs have never been able to decide whether someone can move into one of our residential care homes. GPs can only refer people to the council so that we can undertake an assessment of their social care needs. If that assessment shows that a person needs residential care, they are free to move into one of our homes if that home can meet their needs. Different people have different needs, and not every home can meet the needs of each person. For example, some people need to be supported in homes that are registered to deal with complex dementia-related needs. The registered manager of a care home makes the final decision about whether that home can meet the specific needs of each person”.

Issues of the importance of location and of the Welsh speaking staff are often referred to. Although many respondents refer to all 3 residential homes and day care centres in their comments, it is clear that many people in the community are alarmed at the idea of Awelon turning from a residential care centre to an extra care scheme. The following sentiments can be found within many submissions:

‘...The three homes in question have provided excellent care for local people for as long as I can remember and has been the centre of the community. It's hard to believe how closing these centres could lead to anything else but worsen the situation tremendously. The bilingual service is also an extremely important factor for older people who have lived in the Vale of Clwyd all their lives, and feel much more comfortable communicating in Welsh. The Welsh experience is not something that is always considered by all private home...’ (Consultation respondent).

‘...with so few options in the nearby area. There is not enough capacity in private care homes to deal with the demand, especially a demand which inevitably is going to increase over time with the ageing population. Having to move to an unfamiliar area at that time of their life adds to the feeling of loneliness I have already referred to. It would also make it harder for families to visit, where visiting Awelon and Dolwen is very convenient, even with public transport.’ (Consultation respondent).

Many respondents cite reports in the local and national press on private care homes either closing or offering a poor quality service. They refer to the reported inability of private care homes across the UK to continue with the provision in the future due to additional staffing costs and other issues. They also refer to recent care home closures, and a perceived increase in demand for residential care due to the increasing numbers of older people in the community. One said:

“One would expect the number of people over 65 years to grow over 50 percent in the coming years, therefore, in my view it would be complete nonsense to close the 3 centres”. (Consultation respondent).

We also had submissions from those who use and value Canolfan Awelon, including the indoor bowling club, who said:

“We as a club meet every Monday afternoon from Oct to Easter. We are disappointed to learn that you intend to close the home and thinking of building more flats like Llys Awelon. What will happen to the Centre? Is the Centre going to be demolished and build a hall for the community? The Centre is used regularly by a number of the groups within the town and it would be of a great loss to them. Yes Llys Awelon has been an asset but it would be a loss for the people of Ruthin if the home is closed. It is a shame that this is causing such a lot of anxiety for the people in the local area”.

A letter, too was received on behalf of the Chapels of Ruthin and the area saying:

“In our recent meeting it was with some concern that you were thinking of closing Awelon. Care is required for the elderly in the area who cannot look after themselves. Praise was given to Llys Awelon but what will happen when the tenants will no longer be able to look after themselves and family maybe living far away? There’s a shortage of quality homes in Ruthin and the elderly are worrying about the future”.

9.3 Summary of views from the public meetings

A significant proportion of both public meetings was spent in explaining the differences between standard residential care; EMI residential care; nursing care; and Extra Care Housing. Staffing levels in extra care housing were discussed, as many of those who attended were not aware that tenants in these settings receive different amounts of care, dependent on their assessed needs, and could receive 24-hour-a-day care.

Many of those who attended both meetings expressed concern about the quality of care provided by the private or independent sector. Officers explained that 95% of all care in Denbighshire is already provided by the independent sector. All care homes where Denbighshire residents live are inspected by CSSIW and monitored by the council.

Details of Option 1 were discussed including how many extra care flats could be provided if the residential home were to change into extra care. In response, it was stated that we could see an additional 29 apartments, or up to 58 additional beds).

Attendees asked why extra care housing is cheaper for the council. It was explained that for residents in care homes, the council pays for everything whilst in extra care housing, the responsibility for paying for food, heating, rent, etc., lies with the tenant.

Many of those who attended were worried about the effect that it would have on their relatives/friends if they were asked to leave Awelon where they are happy and feel safe. It was reiterated that the council has said that no one will need to be moved unless the needs of the individual have changed such that the care home can no longer meet their needs.

Some expressed concern about those people still being admitted to the homes under consultation, worrying that changes might be disruptive. The council confirmed that, until a decision is made by Cabinet, we will continue to operate as normal which is why new residents and day care users are still being accepted. However those present were assured that the council was explaining the current situation regarding the review with any prospective new residents and service users.

On the other hand a rumour was referred to that Awelon is being ‘wound down’. One attendee said that he had heard that GPs have been told not to refer people to Care Homes in Denbighshire. These two points have been covered previously (in section 5.2 above, and in Appendix E).

Many spoke of the importance of respite care that is offered in many care homes. Council officers responded to say that respite care is already offered in extra care housing schemes, and that it was hoped in the future that this could be developed further.

Attendees were assured that the community facilities at Canolfan Awelon would remain in future, either in its current form, or as a new or re-furbished facility.

Scepticism was expressed as to whether decisions have already been made. Again, this was a challenge that was raised in many of the public meetings, and prompted the council to include this in its press release in December (Appendix E):

“Has the council already made up its mind what to do? Although we have preferred options, no decisions about the future of any site have been made. The reason for our public consultation is to gather views about the options currently being considered, but also to explore whether any other options exist”.

An Elected Member raised a question of whether we were missing an opportunity in relation to schools sites that might be potentially available for development. This followed on from a discussion about the lack of potential sites in Ruthin for developing additional Extra Care Housing (hence our proposal to re-develop the Awelon site to provide more ECH). The question was raised as to whether an alternative proposal could be to develop ECH on one of the school sites that will be made available when the new school is built in Ruthin. Council officers committed to investigating this as a potential alternative option, and it is referred to as Option 3b in this paper.

9.4 Summary of views from other meetings & focus groups

The views expressed at various other meetings and focus groups largely echoed those expressed in the public meetings (noted above). Indeed many of those who attended the Ruthin Member Area Group and the Ruthin Hubbub also went on to attend the public meetings. In the Age Connects meeting, tenants of Llys Erw were interested in hearing the difference between sheltered and extra care housing and wanted to find out more, with a view to joining the waiting list for Llys Awelon.

Judging from the general Community Support Services staff engagement events (see Appendix Q for further details) and meetings held with Awelon staff throughout the pre-consultation and consultation phases, there appears to be a substantial amount of support for Option 1. However, it should be said that staff working at Awelon are understandably concerned about their jobs and also about the wellbeing of the service users they currently support. The existing Awelon staff group are therefore less favourable towards Option 1 than the wider staff group in Community Support Services. Some staff have suggested developing the provision of reablement within the extra care facility, and some have suggested developing a provision for EMH residents at Awelon. Some staff are concerned about how Option 2 might affect people remaining there whereas others suggest that it would be a good opportunity to develop a step-up/step-down facility, offering respite and rehabilitation from hospital discharge patients.

9.5 Summary of petitions relating to Awelon

Two petitions were submitted during the consultation period which expressed opposition to the closure of Awelon specifically. One petition, which had 1242 signatures, was organised through Plaid Cymru, and was presented at County Hall on 14th January 2016. The other petition was received from the English Presbyterian Church, and had 15 signatures.

A further petition was received which expressed opposition to the closure of all three residential homes. This had nearly 5000 signatures but came in before the start of the consultation period in November 2014. In August 2015, we also received 30 identical letters which say:

“DCC intends to close Awelon, ‘privatise’ Dolwen & develop Cysgod y Gaer as a ‘support hub’. I am utterly opposed to the plans to change the current status of the above named care homes. This means that I am opposed to the closure of Awelon, I am opposed to the transfer of Dolwen to an external organisation and I’m opposed to Cysgod y Gaer being changed from its current status”.

We have been advised that these 30 letters represent a petition due to the fact that they are identical.

9.6 Summary of UNISON response relating to Awelon

The full response submitted by UNISON is attached at Appendix K, and this is an important document because it does set out a genuine alternative to the council’s preferred options. It is a difficult document to summarise, and doing so may do the document an injustice, so we would strongly recommend that the document is examined thoroughly by Members. However, in general terms, UNISON set out a case for keeping all of the existing services under council control. UNISON (on Page 5) argues that:

“The retention of in house options within a broad range of providers allows us the flexibility we need to offer sustainable solutions”.

In order to make the services affordable, and therefore sustainable, UNISON (on Page 5) argues that:

“The wisdom of investing in sustainable public sector provision is clear in any financial scenario but we feel compelled in the current circumstances to request Elected Members to revisit the size and extent of the reduction they have applied to the Community Support Services budget. In doing so they should consider the possibility of utilising the opportunity afforded by the better than expected settlement”.

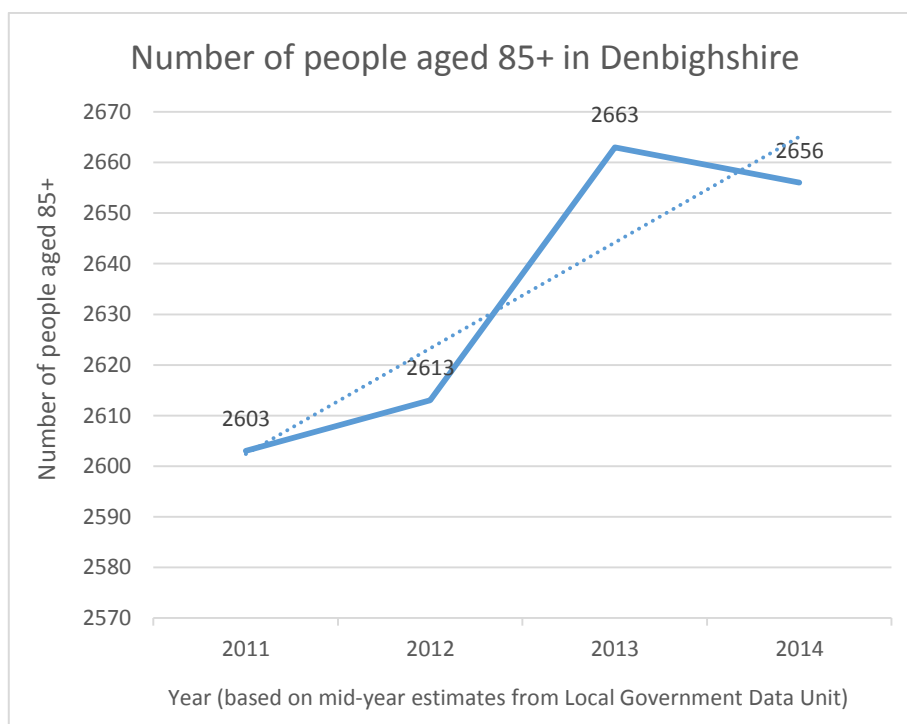
UNISON continue by arguing that the better than expected settlement enabled the council to reduce its original proposal for increasing council tax for 2016/17 from 2.75% to 1.5%, and that the difference between the two proposals (an estimated £551,430 in income) represents the “degree of leeway which could be used to reduce the impact of the cut in the Community Support Services Budget”.

UNISON also contend that many of the arguments made in its “case for change” document (Appendix C) are flawed. There are two main points made by UNISON in this respect. The first one is that Extra Care is not a suitable replacement for residential care, and that we

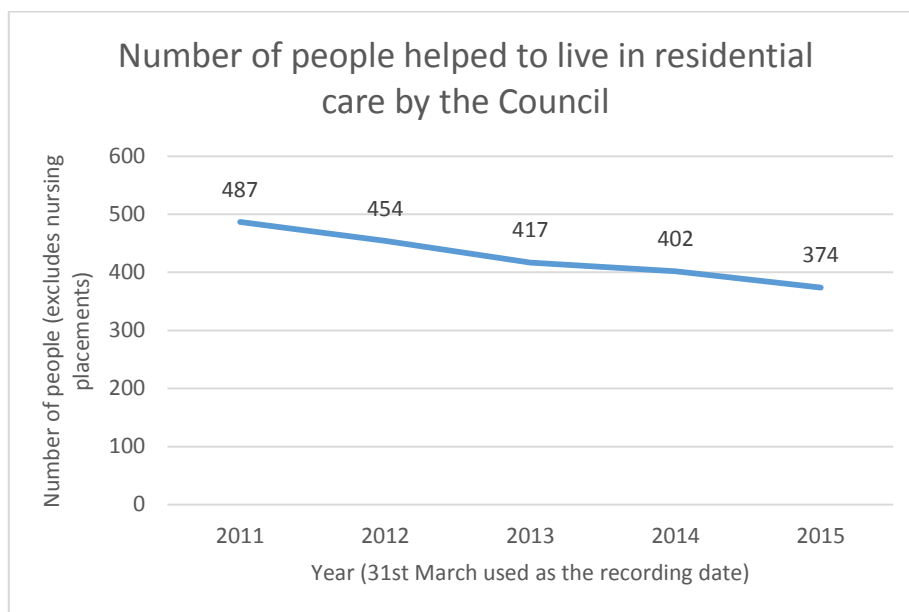
need both. However, the council strongly disagrees with this argument. Extra Care can be, and should be, put forward as an alternative to standard residential care. The only real difference between the two is that people rent or buy an apartment in extra care housing, and therefore live in their own apartment, with their own front door, rather than just having a room. Care staff are on-site for 24 hours a day in extra care housing, just as they are in a residential care home. Extra Care Housing can (and does) support people who have the same level of social care needs you would find in a standard residential care home. However, research shows that there are many benefits to extra care housing over residential care. Extra care housing tends to be a more enabling environment, and people have better outcomes and are able to live more independent and fulfilling lives. People can also be better off financially in extra care housing because they do not have to sell their own property to pay for care home fees. People may have to sell their property in order to buy an extra care apartment, but they can then retain ownership of a property. A couple can also move into extra care housing together, even if one partner does not have social care needs.

The second UNISON argument is that demographic change, in particular the projected continued increased numbers of older people in Denbighshire, will necessarily result in an increase in demand for standard residential care. Again, the council does not share this view. Whilst it is true that the number of older people in Denbighshire is projected to rise over the next 15 years, this is not a new phenomenon. The first graph below shows that the number of people aged 85 and over in Denbighshire (the expected age for someone entering residential care) has been rising for some time. The second graph shows that the number of people supported by the council to live in residential care homes has been decreasing steadily during the same period. This suggests that there is not necessarily a consequential link between the two factors. Part of the explanation for this lies in the development of better alternatives to standard residential care, such as Extra Care Housing.

Graph 1: shows the increase in the 85+ population in Denbighshire between 2011 and 2014. Note: the figure for 2015 has not yet been released by the Local Government Data Unit.



Graph 2: shows the decrease in the number of people supported by the Council to live in residential care homes between 2011 and 2015. This reflects the decrease in demand for standard residential care in Denbighshire, and indeed across Wales.



UNISON do make some interesting and important points within their response document, and the option of raising council tax to subsidise the current arrangements is a genuinely alternative which Cabinet could consider supporting. However, the UNISON response is based on a number of assumptions and arguments which the council does not agree with. Most fundamentally, the council firmly believes that Extra Care Housing is a better alternative to standard residential care. In fact, the council's vision is that:

*“Where an individual’s needs can only be met by support from social services; **and** an individual cannot be cared for safely in their existing home; **and** the person does not need specialist nursing and/or mental health service...the Council will provide domiciliary care services within an Extra Care Housing development”.*

Mae tudalen hwn yn fwriadol wag

Options for Cysgod y Gaer

1. Introduction

This document provides an analysis of the options for Cysgod y Gaer in Corwen. This means the two distinct options put forward by the council, and also any other options put forward during the consultation process (Option 3).

2. The current provision in the Corwen area

There are no independent sector, 24-hour care facilities of any registration type in the immediate area around Corwen. The nearest towns with such provision are Llangollen and Ruthin. There are no Extra Care Housing facilities in the area either.

3. The options for Cysgod y Gaer

Taking into account the current provision, or the lack of alternative provision, available in the Corwen area (highlighted above), the council developed 3 options in relation to Cysgod y Gaer which became the subject of the formal public consultation:

Option 1 (the council's preferred option): The council would enter into a partnership with relevant stakeholders (including BCU and the 3rd sector) to develop the site into a 'support hub' offering both residential and extra care type facilities as well as an outreach domiciliary care and support service to the tenants of local Sheltered Housing Schemes and the wider population of Corwen and the surrounding area.

Option 2: The council would stop new admissions and work with the individuals and their families at their own pace to move them to suitable alternatives as appropriate and to enter into a negotiations with registered social landlords to develop Extra Care apartments on the whole site.

Option 3: The council is open to any other alternative option you wish to put forward that would meet the demands for residential and day care places within the available resources.

- No alternative options were presented during the consultation period. However, the UNISON response (Appendix K) expressed a desire for further detail in relation to Option 1, and stressed that:
 - a) "The council should retain ownership and control of the Cysgod y Gaer site while working with other providers to make the best of the facilities".
 - b) "It is also key that the well trained public sector work force is retained as direct employees of Denbighshire County Council".
- However, Option 1 does already assume that the council will retain ownership and control of Cysgod y Gaer, and that the current employees would remain as employees of Denbighshire County Council. Therefore, it can be concluded that no potential alternatives were presented under Option 3 during the consultation.

4. Consequences of Option 1:

- Individuals currently living in Cysgod y Gaer could continue to do so.
- This option develops services that support independence and improved outcomes for others in the local area.
- While this would result in no immediate saving, it would bring together elements of external domiciliary care with residential services, creating a holistic support offer to a low demand area much more cost effectively. This may result in savings on the current costs of external domiciliary care.

5. Consequences of Option 2:

- The council accepts that this option would mean disruption for the residents and their families. As stated earlier, there are no independent sector, 24-hour care facilities of any registration type in the immediate area around Corwen. This means that people would have to move a long way out of the area to find alternative provisions which, given the poor transport links, means that they would potentially be adversely affected by losing touch with friends and relatives. However, we would ensure that individuals living in Cysgod y Gaer would have plenty of time to find appropriate alternative provision. Furthermore, the council has already agreed that no individual service user will be required to move from their current home unless they wish to do so (as long as their current home is still able to meet their needs). Cysgod y Gaer would not close until all the service users' needs had been fully reviewed and suitable alternative provision found.
- There would be an annual revenue saving of £287,241 on the cost of care (based on current occupancy levels, i.e. 16 beds)¹ because, from April 2016, it will cost the council £483.46 per person per week to commission standard residential care from the independent sector, whereas it will cost £828.70 per week (from April 2016) to support one person in Cysgod y Gaer (see tables below).
- Even if Cysgod y Gaer was at full capacity (i.e. 23 beds), the council would still save £111,263 on the cost of care by buying residential care from the independent sector.

Unit cost to the council of providing care in Cysgod y Gaer:

<i>Residential home:</i>	Employee Costs	Premises Costs	Transport	Supplies and other services	GROSS TOTAL	Full Occupancy (Beds)	Gross Unit Cost Per Week	Current Occupancy (29/02/16)	Gross Unit Cost Per Week
	£	£	£	£	£		£		£
Cysgod y Gaer	574,509.57	79,115.41	2,150.00	33,705.00	689,479.98	23	576.49	16	828.70

Calculation of potential savings on the cost of care:

¹ The number of permanent residents in Cysgod y Gaer on 29th February 2016.

Unit weekly cost of purchasing standard residential care from independent sector	£483.46
Unit annual cost of purchasing standard residential care from independent sector	£25,139.92
Total annual cost of purchasing standard residential care from independent sector for 23 people	£578,218.16
Total annual cost of purchasing standard residential care from independent sector for 16 people	£402,238.72
Total cost of running Cysgod y Gaer	£689,479.98
Annual saving on cost of care for 23 people (compared to cost of running Cysgod y Gaer)	£111,263
Annual saving on cost of care for 16 people (compared to cost of running Cysgod y Gaer)	£287,241

- It would enable the demand for additional Extra Care to be met if a registered social landlord would agree to develop such a provision.
- There would be a requirement for the landlord to ensure that the community activities currently provided at Cysgod y Gaer would continue.
- Existing staff would be at risk of redundancy, but would be able to have a planned progression from working for the Council due to the likely timescales involved. A closure plan would be agreed, subject to consultation and approval, and statutory consultation with staff would take place.

6. Consequences of Option 3:

- Since no alternative proposals were put forward, there is no Option 3 to consider.

7. Summary of the consultation responses relating to Cysgod y Gaer

51 consultation questionnaires returned	<ul style="list-style-type: none"> • 40 on-line response • 11 responses submitted via Customer Connections team
Other submissions from individuals	<ul style="list-style-type: none"> • 1 e-mail • 1 letter • 7 submissions as part of a separate Cysgod y Gaer questionnaire
Public meetings	<ul style="list-style-type: none"> • 2 public meetings (42 attendees in total)
Meetings / focus groups	<ul style="list-style-type: none"> • 1 meeting with Dee Valley Member Area Group • 1 meeting with Corwen Town Council • 1 meeting with Dee Valley Hubbub, arranged through Age Connects • 4 Community Support Services staff engagement events
Petitions	<ul style="list-style-type: none"> • 1 petition specifically opposed to the closure of Cysgod y Gaer: <ul style="list-style-type: none"> ➢ 1 via Plaid Cymru (1076 signatures) • 2 petitions against closure of all residential homes: <ul style="list-style-type: none"> ➢ 1 with approx. 5000 signatures ➢ 30 identical letters • Total of c.6390 signatures opposing the closure of Cysgod y Gaer
Union responses	<ul style="list-style-type: none"> • One formal report from Unison

7.1 Responses from consultation forms

Option	Number of people expressing a preference for this option
1	24
2	0
3	0

As with all 4 consultations, only a small percentage of those who responded indicated specifically which option they would prefer. Only 24 people specifically selected Option 1 as their preferred option, with nobody selecting Option 2 or Option 3. However, a total of 51 consultation responses were received in relation to Cysgod y Gaer, and all 51 seemed to be in favour of Option 1 in one way or another. Even where no preference was specifically indicated, the comments suggested that they would also prefer option 1.

In answer to the question: 'Do you have any further comments about our future vision for adult social care in Denbighshire?' one person writes:

"...Vision could be further enhanced if the services offered were made available to the adjoining areas of Gwynedd and Conwy where there is also a great need for these facilities given the nature of the rural area. This could also increase its financial viability. Contractual arrangements could be made across LA boundaries as they have previously in some areas."

Whilst this suggestion does not have a direct bearing on the choice of options, it will be taken into account.

7.2 Summary of other submissions from individuals

All the feedback we had about Cysgod y Gaer emphasised what a valuable service it provides to the local community and how important it is to keep it open. Many respondents were enthusiastic about the potential for developing it further as a hub for support of older people, working in collaboration with the health service and other agencies. Many refer to issues relating to the relative isolation of Corwen with few other services nearby and several refer to the culture and importance of the Welsh speaking staff.

A family member of one of the current care home residents writes:

"If the outcome of the review regarding CYG resulted in change I feel option 1 would be more favourable - the idea of creating a holistic support offer to a low demand area seems realistic, Following 19 weeks in hospital, (G) was a shadow of her former self. She had very limited mobility and was very anxious when entering CYG. The facility currently offered provides a happy environment where residents are stimulated by positive staff. If (G) had to go back to more isolated living I think we would see deterioration in her general wellbeing as she has thrived in the environment CYG provides." (Respondent)

A relative of another current resident writes:

“For the elderly who can no longer live an independent life but do not need nursing care, there is a need for a residential home where they can feel safe and secure, enjoy companionship and receive the 24 hour care they need. CYG, in offering a warm, secure, supportive and friendly home with a strong family atmosphere fulfils this need in a way Extra Care apartments or other homes locally could not do. To find similar provision would necessitate a removal some distance from family and friends at a time when they need them most. We would strongly support any option which allows Cysgod to continue to offer the excellent service and care that it currently supplies.” (Respondent)

Another person, who lives in Edeirion, expresses the following views about the future of Cysgod y Gaer:

“I wish to register my support for the first recommendation in the document...Indeed, I believe that this is the type of plan that should also be developed for Awelon and Dolwen. I’m confident that such a plan can be a breakthrough in care for elderly people in Wales and set a bench-mark for providers and other authorities.

Firstly it is very important to keep Cysgod-y-Gaer open. The home provides a Welsh medium service to residents of a Welsh speaking area. There is no expectation on the private sector to provide care in the mother tongue of the residents that live in their homes’ We know that a provision in your mother tongue makes a person feel more at home and comfortable.

Secondly, the majority of the current staff come from Corwen’s cultural circles, and the residents there knew a number of them before going to live there. This consistency gives assurance and peace of mind for care home residents that cannot be obtained in other homes.

Thirdly there is no other home care within a reasonable distance to the communities of Corwen and Edeirion. By closing Cysgod-y-Gaer people will be expected to travel much further to live and visit their loved ones. This will increase isolation, which is the biggest challenge that faces older people.” (Respondent).

7.3 Summary of views from the public meetings

A number of those who attended the public meetings lived in sheltered accommodation in Corwen, or had friends or relatives living there. They were keen to hear what the implications might be for Llygadog and other sheltered schemes in the area. They seemed pleased to hear that, if Option 1 was to go ahead, as well as being a residential care home, Cysgod y Gaer would become a hub which could provide support to tenants at Llygadog as well as to other residents in the area. A fair time was spent discussing services for sheltered housing tenants and recent changes in this area.

As in other public meetings, the rumours that Cysgod Y Gaer has turned away referrals was discussed. As mentioned in other appendices, this is something that came up repeatedly during the public consultation meetings, prompting to council to issue a press release in December 2015 (Appendix E), which contained the following response:

“Is it true that the real reason why there are vacancies in your three care homes is that the council has had a deliberate policy to block or reduce admissions? No, the council does not have a policy of stopping people from moving into our care homes. The reason we have vacancies is simply that the demand for standard residential care has been reducing for several years. Generally speaking, people do not want to live in residential care homes when they get older. They want to be supported to remain independent within their own homes or within alternative settings, like extra care housing”.

Officers were asked to provide some clarification regarding the costs of extra care housing and residential care and the difference between the two. Officers also explained the differences between standard residential care and nursing care.

In answer to a question about whether Cysgod y Gaer could provide services for people who have been discharged from hospital...i.e. people who need more (non-nursing) care than a home help, but not enough for being in hospital. Officers explained that this type of provision is already provided from Cysgod Y Gaer, and would continue.

A number of those who attended expressed a preference for Option 1, but asked for assurance that individuals currently living at Cysgod y Gaer would be able to continue doing so. Officers confirmed that this would be the case, as long as Cysgod y Gaer is still able to meet their needs.

One person was concerned that if we chose Option 1, we might we need to empty the site to rebuild. We explained that we cannot begin to look into the detail of the next steps until the consultation had finished and Cabinet has made a decision about which options to pursue. Whilst no guarantees were given this stage, officers did state that they were confident that it would be possible to deliver Option 1 without emptying the site. Officers explained how this had occurred when Llys Awelon was being developed.

Another person who expressed approval for Option 1, asked: *“...I understood that the vision of the council was to be commissioners not providers. If you are going to invest in Cysgod Y Gaer, is this is a long term investment or will we have to revisit, needing to commission the services?”*. Officers explained that the proposed vision does not necessarily mean that we would always look externally to deliver all services. Officers clarified that whilst the intention is that the vast majority of services will be provided by the independent sector (as is already the case), Option 1 recognises that this geographical area is different to the rest of the county, and there sometimes needs to be flexibility.

A number of those who attended the public meetings expressed a hope that Option 1 would help address what they noted as previous lack of collaboration with the health board. They asked for any evidence of joint working with health to reassure them. Officers explained that health are represented on the steering group and that the expectation is that there will be more collaboration with health, in line with the Social Services and Wellbeing (Wales) Act.

Some people came to the meeting under the impression that Cysgod Y Gaer was going to be closed. They were most relieved to hear that this is not the council's preferred option.

Officers were asked about the process we would need to go through if the council was to decide on Option 1. Officers explained this, and clarified that the development of extra care housing would probably require us to find a partner to work with.

One attendee reflected on how the Dee Valley is a unique space, with services not coming down to Corwen and surrounding areas regularly, and asked how we would address this. We explained that Option 1 had been specifically designed for this area and that this acknowledged that Corwen (and surrounding area) has specific needs which Option 1 would help to address.

7.4 Summary of views from other meetings & focus groups

The views expressed at the meetings and focus groups echoed those noted in the rest of this report. Option 1 was universally welcomed, and time was generally spent discussing the potential detail of how that would work. For example, ways in which Option 1 could offer support to vulnerable older people in the area, particularly those in sheltered housing schemes. Time was also spent in describing how extra care housing works.

Those in the town council were somewhat concerned as to whether this was a 'stand-alone' consultation or whether it would be affected by the results of the other three consultations. Officers confirmed that options for each of the four sites would be considered separately, and decisions about other sites should not impact on the decision about Cysgod y Gaer.

Staff at Cysgod y Gaer, and those who work with them, were instrumental in helping to develop the preferred option (Option 1) for this site. It is therefore not surprising that a strong preference for Option 1 has been expressed during meetings with Cysgod Y Gaer staff and also in the staff engagement events for Community Support Services staff. Some staff have also suggested that within Option 1, Cysgod y Gaer should offer hot meal delivery again, that domiciliary care should cover all outlying areas and possibly involve working with the community, developing support and relationships across age groups. The value of day care and reablement service has been stressed as well as the importance of working closely with the health service. It has been recommended that any future Extra Care Housing facility should maintain beds for respite care. Staff have also suggested that we look at out of county protocols in terms of taking referrals from other counties.

7.5 Summary of petitions relating to Cysgod y Gaer

Early in 2015, Plaid Cymru organised a public meeting on the future of Cysgod y Gaer.

1076 people signed a petition, submitted in July, by Age Connects entitled 'Keep Cysgod y Gaer open'. 79 left letters and comments ranging from simply 'keep open!', to long, moving accounts of the importance of the home in the community and the excellent quality of care provided there. 104 people left name and contact details but no comments, while 82 people signed a photocopied letter giving reasons to keep the home open. In general, responses suggest that they would be in favour of Option 1 in the consultation.

In July 2015 we received 30 identical copies of letters from people saying:

“DCC intends to close Awelon, ‘privatise’ Dolwen & develop Cysgod y Gaer as I ‘support hub’. I am utterly opposed to the plans to change the current status of the above named care homes. This means that I am opposed to the closure of Awelon, I am opposed to the transfer of Dolwen to an external organisation and I’m opposed to Cysgod y Gaer being changed from its current status”.

In addition, a petition relating to all three residential care homes, opposing any changes, was submitted in November 2014, containing nearly 5000 signatures.

7.6 Summary of UNISON response relating to Cysgod y Gaer

The full response submitted by UNISON is attached at Appendix K, and this is an important document because it does set out a genuine alternative to the council’s preferred options. It is a difficult document to summarise, and doing so may do the document an injustice, so we would strongly recommend that the document is examined thoroughly by Members. However, in general terms, UNISON set out a case for keeping all of the existing services under council control. UNISON (on Page 5) argues that:

“The retention of in house options within a broad range of providers allows us the flexibility we need to offer sustainable solutions”.

UNISON describes Option 1 for Cysgod y Gaer as *“...the closest to the vision Unison has for the development of residential and day services.”* (page 16). The only reservation it makes are that *“.. the proposed partnership arrangements with Health and the third sector are not fleshed out in detail.”*

They also stress the importance of adding the following further points to the proposals in Option 1 for Cysgod y Gaer:

- 1. The council should retain ownership and control of the Cysgod y Gaer site while working with other providers to make the best of the facilities.*
- 2. It is also key that the well trained public sector work force is retained as direct employees of Denbighshire County Council.*

However, as noted in section 2 of this appendix, Option 1 does already assume that the council will retain ownership and control of Cysgod y Gaer, and that the current employees would remain as employees of Denbighshire County Council.

Review of in-house care services

Equality Impact Assessment

Review of in-house care services

Contact: Tony Ward – Principal Manager: Business Support – Community Support Services
Updated: 09.03.2016

1. What type of proposal / decision is being assessed?

A review of current service provision

2. What is the purpose of this proposal / decision, and what change (to staff or the community) will occur as a result of its implementation?

Four decisions are required for each of the four existing in-house care services (Hafan Deg in Rhyl; Dolwen in Denbigh; Awelon in Ruthin; and Cysgod y Gaer in Corwen). A number of different proposals exist for each of the four sites, and each will result in different changes for staff and/or the community. The potential impact of the preferred options being put forward by the Elected Member Task & Finish Group are set out in sections 5, 6 & 7 below. The potential impact of the alternative options are set out in section 9 in order to enable Elected Members to make an informed decision about each establishment.

3. Does this proposal / decision require an equality impact assessment? If no, please explain why.

*Please note: if the proposal will have an impact on people (staff or the community) then an equality impact assessment **must** be undertaken*

<Please Select> Yes

4. Please provide a summary of the steps taken, and the information used, to carry out this assessment, including any engagement undertaken

(Please refer to section 1 in the toolkit for guidance)

We have undertaken a wide range of activities in order to help us understand the potential impact of each option on people who share protected characteristics. This has included:

- A pre-consultation “listening and engagement” exercise, which included an assessment (undertaken by an independent social worker) of all existing services users/residents of the four in-house care establishments. The assessments also looked into the potential impact on each individual of

changing the current service provision.

- Desktop research as part of the pre-consultation phase, including reviewing the materials available corporately within DCC to assist with Equality Impact Assessment.
- A review of all the comments received as part of the formal public consultation exercise, to identify any equality-related concerns raised. The consultation forms specifically invited respondents to identify any reasons why any of the proposals could have a negative or positive impact of people who share protected characteristics.
- 8 public meetings were held during the consultation process to explain the proposals to the public, and also to gather feedback and identify concerns about the proposals.
- Specific meetings were offered with the following groups/individuals as part of our attempts to engage with groups representing people with protected characteristics:
 - Older People's champions in Denbighshire and surrounding counties;
 - Older People's Commissioner's Office;
 - Unique Transgender Network;
 - VIVA LGBT group;
 - Autism Initiatives;
 - Learning Disability Planning Group; and
 - The Mental Health Planning Group.
- Meetings were held with the following groups/individuals to discuss the ways in which the proposals could have a negative or positive impact of people who share protected characteristics:
 - all tenants in Llys Awelon, Gorwel Newydd and Nant y Mor extra care housing schemes;
 - North Wales Deaf Association service users and staff;
 - Deafblind Cymru service users and staff;
 - 4 Age Connects' older people's 'hubhub' networks;
 - tenants at Cysgodfa, Llys y Faner and Llygadog Sheltered housing schemes;
 - members of the 'My Life My Way Group';
 - Community Support services staff, including those in the affected schemes;
 - BCUHB Head of Equality, Diversity & Human Rights, who in turn briefed the BCUHB Equality Stakeholder Group (members of the public who work with BCUHB to advice on equality issues);
 - Denbighshire Voluntary Services Council (DVSC)'s Health, Social Care & Wellbeing Forum;
 - the Chair of the North Wales LGBT Older People's network;
 - Age Connects' Advocacy officers and Community Navigators;
 - the Older People's reference group (including representatives of CSSIW, Red Cross, NEWCIS, Age Connect, Alzheimer's Society)

5. Will this proposal / decision have a positive impact on any of the protected characteristics (age; disability; gender-

reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; and sexual orientation)?

(Please refer to section 1 in the toolkit for a description of the protected characteristics)

The General Duty within the Equality Act sets out three main principles that public bodies like Denbighshire County Council must follow, i.e. public bodies must:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations between people of different protected characteristics

We have considered all of the information gathered as part of the pre-consultation and consultation exercises in order to ensure due regard to the General Duty. Section 6 considers whether the proposals may have a disproportionate negative impact on any of the protected characteristics, and this covers the part of the General Duty about “eliminating discrimination, harassment and victimisation”. Sections 7 and 8 also refer to “eliminating discrimination, harassment and victimisation”. Section 7 explains how the proposals have already been amended to eliminate or reduce any potential disproportionate negative impact. Section 8 considers any further actions to address and / or monitor any potential negative impact.

This section (5) considers whether the proposals may have a positive impact on any of the protected characteristics, and this is relevant to the General Duty to “advance equality of opportunity and foster good relations between people of different protected characteristics”. Any positive impact on people who share a particular protected characteristic will advance quality of opportunity. Section 8 also refer to ways in which the proposals could “advance equality of opportunity and foster good relations between people of different protected characteristics” because it considers the need to ensure that the care sector could improve training in relation to LGBT issues, which is an issue that was raised by one of the groups we engaged with as part of the consultation.

As highlighted in Section 2 above, each of the 4 care facilities has a number of different options, and there are therefore many elements to consider here. The potential impact of the alternative options are set out in section 10 in order to enable Elected Members to make an informed decision about each establishment. However, the potential impact of the preferred options being put forward by the Elected Member Task & Finish Group are set out below:

Hafan Deg (Option 1):

- The main client group affected (from an equality perspective) would be older people. We would hope that there would be a positive impact on older people because there would be an expansion of day care services and other preventative activities to combat social isolation and support the principle of promoting independence.

- It could be argued that there would be a positive impact on older people in Denbighshire generally. This is because Option 1 would save the council money, and would enable the current services to be provided in a cheaper way. This reduces pressure generally on the community care budget, and helps the council to use its money in the most effective way to support all older people in Denbighshire who have care needs.

Dolwen (Option 1): To enter into a partnership with an external organisation and transfer the whole service to them, while registering for EMH care.

- The main client groups affected (from an equality perspective) would be older people and disabled people (particularly those with specialist mental health needs, such as dementia). Option 1 would result in a positive impact for people who share these protected characteristics, because it would result in a new offer of EMH residential provision in Denbigh. This means that people living in the Denbigh area would be able to continue to living in Denbigh, rather than having to move to an EMH residential care home in another area.
- Again, it could be argued that there would be a positive impact on older people in Denbighshire generally. This is because Option 1 would save the council money, and would enable services to be provided in a cheaper way. This reduces pressure generally on the community care budget, and helps the council to use its money in the most effective way to support all older people in Denbighshire who have care needs.

Awelon (Option 1): The council will stop new admissions and work with the individuals and their families, at their own pace, to move them to suitable alternatives as appropriate and to enter into a partnership with the owner of Llys Awelon to develop additional Extra Care apartments on the site.

- The council believes that there will be a positive impact for older people in the Ruthin area in the long-term (i.e. once the development of the new Extra Care apartments is complete). This is because research shows that Extra Care is a more enabling alternative to standard residential care, and that outcomes for people living in Extra Care developments are better than for people in standard residential care.
- The ability to provide additional Extra Care Housing would have a positive impact for people who are married or in a civil partnership, because a couple can move into an apartment together, even if one partner does not have social care needs. This is not the case in a residential care home.
- There could also be a positive financial impact for older people, because people will not have to sell their own property to pay for care home fees (as may be the case if a person moves into a residential care home. People may have to sell their property in order to be able to afford to buy an extra care apartment, but they can then retain ownership of a property.
- Again, it could be argued that there would be a positive impact on older people in Denbighshire generally. This is because Option 1 would save the council money, and would enable services to be provided in a cheaper way. This reduces pressure generally on the community care budget, and helps the council to use its money in the most effective way to support all older people in Denbighshire who have care needs.

Cysgod y Gaer (Option 1): The council would enter into a partnership with

relevant stakeholders (including BCU and the 3rd sector) to develop the site into a 'support hub' offering both residential and extra care type facilities as well as an outreach domiciliary care and support service to the tenants of local Sheltered Housing Schemes and the wider population of Corwen and the surrounding area.

- Option 1 will develop services that support independence and improved outcomes for older people in the local area. It will also bring together elements of external domiciliary care with residential services, creating a holistic support offer to a low demand area much more effectively.
- The council believes that there will be a positive impact for older people in the Corwen area in the long-term (i.e. once the development of the new Extra Care apartments is complete). This is because research shows that Extra Care is a more enabling alternative to standard residential care, and that outcomes for people living in Extra Care developments are better than for people in standard residential care.
- The ability to provide additional Extra Care Housing would have a positive impact for people who are married or in a civil partnership, because a couple can move into an apartment together, even if one partner does not have social care needs. This is not the case in a residential care home.
- There could also be a positive financial impact for older people, because people will not have to sell their own property to pay for care home fees (as may be the case if a person moves into a residential care home. People may have to sell their property in order to be able to afford to buy an extra care apartment, but they can then retain ownership of a property.

Consideration of particular protected characteristics:

1. Age:

Age is specifically considered throughout this document because the evidence we have gathered suggests that the main protected characteristic affected by the proposals would be older people, particularly people over 85 years of age (as this is the general demographic for our in-house care services, particularly for residential care).

2. Disability

Although disability does not feature prominently within the evidence gathered during the consultation (because there was very little specific reference to the impact on disabled people within consultation responses), there is an assumption that older people (particularly the over 85 years age group) are more likely to be disabled than the general population, and therefore many of those older people will also share this protected characteristic. These two groups are therefore considered to be inextricably linked for the purposes of this exercise. Any perceived positive impact on older people would also apply to older disabled people, for example the benefits of Extra Care Housing over standard residential care would also apply to older disabled people.

3. Gender reassignment

No current service users highlighted any potential benefits of the proposals in relation to gender reassignment, and we have not been advised of anything specifically relating to the options under consultation which would have a positive impact on people who share this protected characteristic. This may be because many older people may prefer not to share or discuss such information about themselves, perhaps because of previous negative experiences of doing so. However, no information was gathered as part of the consultation to suggest any potential positive impact on people who share this protected characteristic.

4. Marriage and civil partnership

There is a potential positive impact on people who share this protected characteristic, and this is highlighted within this section (above).

5. Race

No information was gathered as part of the consultation to suggest any potential positive impact on people who share this protected characteristic.

6. Religion or belief

No information was gathered as part of the consultation to suggest any potential positive impact on people who share this protected characteristic.

7. Sex

No information was gathered as part of the consultation to suggest any potential positive impact on people who share this protected characteristic.

8. Sexual orientation

No current service users highlighted any potential benefits of the proposals in relation to sexual orientation, and we have not been advised of anything specifically relating to the options under consultation which would have a positive impact on people who share this protected characteristic. This may be because many older people may prefer not to share or discuss such information about themselves, perhaps because of previous negative experiences of doing so. Although no information was gathered as part of the consultation to suggest any potential positive impact of the proposals on people who share this protected characteristic, Section 8 (below) does consider the need to ensure that the care sector could improve training in relation to LGBT issues, which is an issue that was raised by one of the groups we engaged with as part of the consultation. Progressing this as one of our further actions (Section 8) would advance equality of opportunity for people who share this protected characteristic and foster good relations between people of different protected characteristics.

9. Welsh Language

No information was gathered as part of the consultation to suggest any potential positive impact on people who share this protected characteristic. However, Welsh Language has rightly been identified as important issue by many people. Therefore, the council will ensure that any asset transfer agreements (or new contracts) with independent sector providers, which become necessary following Cabinet decisions, include strict requirements about the need to be able to provide care services through the medium of Welsh. This would advance equality of opportunity for Welsh speakers.

6. Will this proposal / decision have a disproportionate negative impact on any of the protected characteristics (age; disability; gender-reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; and sexual orientation)?

As highlighted above, each of the 4 care facilities has a number of different options, and there are therefore many elements to consider here. The potential impact of the alternative options are set out in section 10 in order to enable Elected Members to make an informed decision about each establishment. However, the potential impact of the preferred options being put forward by the Elected Member Task & Finish Group are set out below:

Hafan Deg (Option 1): To enter into a partnership with an external organisation and transfer the building to them, commissioning a day care service within the building and, in addition, enabling 3rd sector agencies to provide early intervention activities for older people that reduce social isolation, support independence and promote resilience.

- The main client group affected (from an equality perspective) would be older people. We envisage that there would be no negative impact on this group because the building would continue to be used for the benefit of older people in Rhyl, including those with low level needs who currently attend, while enabling the existing group of service users to continue to attend together, with the same staff group.
- Staff would be transferred (via TUPE transfer) to the partner organisation. This may be seen by some as a potentially negative impact (because staff would generally prefer to remain as Denbighshire County Council employees). However, there are no tangible negative impacts for staff, because jobs would be protected, as would the terms and conditions of staff. If the decision was made to transfer the unit, a transfer plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place.

Dolwen (Option 1): To enter into a partnership with an external organisation and transfer the whole service to them, while registering for EMH care.

- One area of concern identified during the consultation which could highlight a potential negative impact, is the perception (which seems to be widely held) that the general quality of care provision is much poorer in the independent sector than it is in the public sector. However, there is no real evidence to

back this view up, particularly in relation to our experience in Denbighshire. The vast majority (around 95%) of adult social care services in Denbighshire are already provided by the independent Sector. All providers are regulated and inspected by CSSIW, and they are all monitored by the council. Very few significant issues arise regarding the quality of care provided by the independent sector, and we have robust processes in place to deal with them when they do arise.

- Another area of concern raised during the consultation in relation to Dolwen is the provision of services through the medium of Welsh. The staff in Dolwen are currently able to deliver care through the medium of Welsh to cater for the needs of all the current residents who would request a Welsh-speaking service. Concerns were raised that there would be no requirement for an independent sector provider to continue providing services in Welsh. However, the council would be looking to develop a contract with an independent provider that would ensure that the new provider was required to meet the Welsh language needs of its residents.

Awelon (Option 1): The council will stop new admissions and work with the individuals and their families, at their own pace, to move them to suitable alternatives as appropriate and to enter into a partnership with the owner of Llys Awelon to develop additional Extra Care apartments on the site.

- In the short-term, there would be a negative impact on existing residents of Awelon (i.e. older people from an equality perspective) if the council was to insist that existing residents had to move to another home. However, it was identified within the pre-consultation stage that forcing people to move would have a negative impact on those individuals. Therefore, the council has already agreed that no individual service user will be required to move from their current home unless they wish to do so (as long as their current home is still able to meet their needs). This means that Option 1 should not have a negative impact on existing residents of Awelon.
- Existing staff would be at risk of redundancy, and this could be said to have a disproportionate impact on females as the vast majority of Awelon staff are female. However, there would be a planned progression from working for the Council due to the likely timescales involved. A closure plan would be agreed, subject to consultation and approval, and statutory consultation with staff would take place.

Cysgod y Gaer (Option 1): The council would enter into a partnership with relevant stakeholders (including BCU and the 3rd sector) to develop the site into a 'support hub' offering both residential and extra care type facilities as well as an outreach domiciliary care and support service to the tenants of local Sheltered Housing Schemes and the wider population of Corwen and the surrounding area.

- No potential negative impact has been identified with this option because individuals currently living in Cysgod y Gaer will be able to continue doing so.

Consideration of particular protected characteristics:

1. Age:

Again, age is specifically considered throughout this document because the evidence we have gathered suggests that the main protected characteristic affected by the proposals would be older people, particularly people over 85 years of age (as this is the general demographic for our in-house care services, particularly for residential care). The Council considers that any potential negative impact on older people has been mitigated against within its preferred options, for example by making the commitment that current residents of residential care homes would not have to move if they did not wish to do so (as long as their current home was still able to meet their needs).

2. Disability

Although disability does not feature prominently within the evidence gathered during the consultation (because there was very little specific reference to the impact on disabled people within consultation responses), there is an assumption that older people (particularly the over 85 years age group) are more likely to be disabled than the general population, and therefore many of those older people will also share this protected characteristic. These two groups are therefore considered to be inextricably linked for the purposes of this exercise. Any potential negative impact is therefore likely to have a disproportionate impact on older people and disabled people. However, the Council considers that any potential negative impact on older people or disabled people has been mitigated against within its preferred options, for example by making the commitment that current residents of residential care homes would not have to move if they did not wish to do so (as long as their current home was still able to meet their needs).

3. Gender reassignment

No current service users have highlighted any potential concerns in relation to gender reassignment. Therefore, we have not been advised of anything specifically relating to the options under consultation which would have a negative impact on people who share this protected characteristic. This may be because many older people may prefer not to share or discuss such information about themselves, perhaps because of previous negative experiences of doing so. However, no information was gathered as part of the consultation to suggest any potential negative impact on people who share this protected characteristic.

4. Marriage and civil partnership

No information was gathered as part of the consultation to suggest any potential negative impact on people who share this protected characteristic.

5. Race

No information was gathered as part of the consultation to suggest any potential negative impact on people who share this protected characteristic.

6. Religion or belief

Some concerns were raised (mainly by existing residents of our existing residential care homes) that there could be a negative impact if the homes were to close and they would have to move to another home. This was on the grounds that their local religious representative (e.g. Minister) currently visits them in Dolwen, Awelon etc. and they may not be able to do so if they were required to move home. Residents were therefore concerned that their religious or spiritual needs would not be met as they are often not able to attend their preferred place of worship. There are two main strands to the mitigation against this potential negative impact. First, the Council has made a commitment that current residents of residential care homes would not have to move if they did not wish to do so (as long as their current home was still able to meet their needs). Therefore there should be no impact on the majority of existing residents for this reason. Second, in the longer-term, there is no reason why religious leaders cannot visit whatever care facilities exist as a result of the decisions made by Cabinet. For example, religious leaders could visit Dolwen if it were an independent sector EMH residential care home, and the same applies if Awelon is replaced by additional Extra Care Housing.

7. Sex

No information was gathered as part of the consultation to suggest any potential negative impact on people who share this protected characteristic.

8. Sexual orientation

No current service users have highlighted any potential concerns in relation to sexual orientation. Therefore, we have not been advised of anything specifically relating to the options under consultation which would have a negative impact on people who share this protected characteristic. However, we are aware that many older people may prefer not to share or discuss such information about themselves, perhaps because of previous negative experiences of doing so. We did receive some feedback from the Chair of the North Wales LGBT Older People's network that training should be provided for staff on LGBT (lesbian, gay, bisexual and trans) issues (see Section 8 below for further details). This was a general point about the need for staff across the whole health and social care sector needing to receive such training, and it does not highlight a potential negative impact as a consequence of any of the options being put forward for our in-house care services. However, it is still an important point, and it referred to in more detail in Section 8 below in relation to potential mitigation.

9. Welsh Language

Welsh Language has rightly been identified as important issue by many people, and some concerns were raised that some of the options being considered may have a negative impact on the Welsh Language. The main concern was that the Council takes the provision of care services through the medium of Welsh very seriously, and that this may not be the case if, for example, Dolwen was transferred to the independent sector. This is clearly an important consideration, and the Council

would have to ensure that any asset transfer agreements (or new contracts) with independent sector providers, which become necessary following Cabinet decisions, include strict requirements about the need to be able to provide care services through the medium of Welsh. This would therefore form part of the service specification for any future tender process, and the council would monitor compliance with these requirements rigorously. As highlighted in Section 7 below, the council has committed to re-invest an element of any savings to employ two additional contract monitoring officers in order to increase our capacity to monitor the quality of care provided by the independent sector.

7. Has the proposal / decision been amended to eliminate or reduce any potential disproportionate negative impact? If no, please explain why.

Yes	<p>The proposals being put forward by the Elected Member Task & Finish have been amended and refined over the lifetime of this review. The main changes came about during the pre-consultation stage as a result of the information gathered by the “listening & engagement” exercise. For example, the option to retain Cysgod y Gaer as a council-owned asset and develop it as a support hub came about because our pre-consultation work highlighted that no real alternatives existed in that area if Cysgod y Gaer was to close.</p> <p>Strategies to mitigate against any potential negative impacts were also developed during the pre-consultation stage, for example, the commitment from Cabinet that current residents of residential care homes would not have to move if they did not wish to do so (as long as their current home was still able to meet their needs). Furthermore, the commitment was made to re-invest an element of any savings to employ two additional contract monitoring officers in order to increase our capacity to monitor the quality of care provided by the independent sector.</p> <p>Reference to mitigation is also included wherever a potential negative impact on people who share a protected characteristic is highlighted within Section 6, above.</p>
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8. Have you identified any further actions to address and / or monitor any potential negative impact(s)?

Yes	<p>Following Cabinet decisions, a number of safeguards will be explored in relation to mitigating against the risk of any potential negative impact. This Equality Impact Assessment document will be reviewed again following the Cabinet decisions, and the further actions will be agreed. However, these actions will primarily focus on ensuring that any necessary asset transfer agreements, or contracts with independent sector providers,</p>
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	<p>include safeguards about the future quality of care provided. This will include, for example, the need to offer (and provide where necessary) care services through the medium of Welsh.</p> <p>One additional point that was made by the Chair of the North Wales LGBT Older People’s network was that training should be provided for staff on LGBT (lesbian, gay, bisexual and trans) issues, in line with a Stonewall report) called “Unhealthy Attitudes: the treatment of LGBT people in health and social care organisations in Wales”. This report shows gaps in the way LGBT staff are supported and how LGBT patients are cared for. It also shows the negative way in which LGBT people are talked about, and states that <i>“one in ten health and social care staff in Wales have witnessed colleagues expressing the dangerous belief that a person could be ‘cured’ of being gay, lesbian or bi”</i>.</p> <p>Although this does not necessarily identify a potential impact of any of the options presented for a decision by Cabinet, it does highlight an important issue that needs to be considered, regardless of what decisions are taken by Cabinet. Certainly all Denbighshire County Council staff are required to read the council’s mandatory equality training materials, which cover all the protected characteristics. There is also an expectation that all care providers in the independent sector provide adequate equality training for their staff. This is something that will be considered further as part of any contractual discussions that become necessary following decisions made by Cabinet.</p> <p>One final point to make is that this Equality Impact Assessment uses the information available (included any evidence gathered during the consultation) to predict the likely impact of all the options being put forward. Although this is a good exercise to undertake, it is not always possible to predict the actual impact of a change before the change is made. This is why it is essential to review the actual impact of any change at a point in time after the change has been made. It is therefore proposed that any change that is made as a result of any Cabinet decision is reviewed 6 months after implementation to establish the actual impact on people who share protected characteristics.</p>
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Action(s)	Owner	By when?
This EqIA document to be reviewed following Cabinet decision in order to identify and agree the specific further actions that will be required. This is because the further actions will depend on the decisions made by Cabinet	Tony Ward	31.05.2016

Any change that is made as a result of any Cabinet decision will be reviewed 6 months after implementation to identify any unexpected and unintended disproportionate negative impact on people who share protected characteristics. Further mitigation will be then be agreed and implemented as required.	Tony Ward	tbc

The section below explores the potential impact (positive and/or negative) of the alternative options being put forward for Cabinet consideration. This is to enable Cabinet to make informed decisions which take protected characteristics into account and to demonstrate that due regard has been given to the duties of the Equality Act.

9. Will the alternative options have a disproportionate negative or positive impact on any of the protected characteristics (age; disability; gender-reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; and sexual orientation)?

This section looks at each of the alternative options considered for each of the four in-house care services, and identifies any potential disproportionate (negative or positive) on people who share protected characteristics. This section mentions a particular characteristic where the council believes there is a potential disproportionate impact. Where particular protected characteristics are not mentioned, this is because the council has not received any evidence to suggest that there is a potential disproportionate impact on people who share that protected characteristic.

ALTERNATIVE OPTIONS FOR HAFAN DEG:

Hafan Deg (Option 2): To re-provision services at Hafan Deg with the potential that the centre would close and the service users and their families be supported to find suitable alternative provision.

Potential Positive Impact:

- This option would reduce the overall cost of providing day care and would generate a revenue saving for the service. It could therefore be argued that there would be a positive impact on older people in Denbighshire generally. This is because it would reduce the pressure generally on the community care budget, and help the council to use its money in the most effective way to support all older people in Denbighshire who have care needs.

Potential Negative Impact:

- The main client group affected (from an equality perspective) would be older people. Although the council would still be able to meet the current demand for day care, and therefore continue to meet the needs of all existing service users, this would be provided through different (independent sector) providers. This change would mean disruption for the current users of the centre. However, the council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of current attendees would be sought and they would be helped to find suitable alternative provision that meets their needs. If the decision was made to close Hafan Deg it would not close until all the service users' needs had been fully reviewed and suitable alternative provision found.
- Hafan Deg staff would be at risk of redundancy. From an equality perspective, this would have a disproportionate impact because the majority of staff in Hafan Deg are female. If the decision was made to close the unit, a closure plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place. These processes are designed to try and mitigate against the impact on staff.

Hafan Deg (Option 3): The council to continue to own and run Hafan Deg.

Potential Positive Impact:

- This option would result in no change to the current service, and therefore there are no identifiable potential positive impacts.

Potential Negative Impact:

- The council would not realise the available revenue saving on the current running costs, which would create a financial pressure on the service. As proposed by UNISON, the revenue shortfall could be mitigated (at least for 2016/17) by an additional increase in council tax. It could be argued that this may have a negative impact on council tax payers in Denbighshire who would be effectively subsidising relatively expensive council-run day services for a minority of service users from Hafan Deg. This would therefore have a disproportionate impact on people over 18 years of age, as people under 18 years old do not pay council tax.

ALTERNATIVE OPTIONS FOR DOLWEN:

Dolwen (Option 2): To lease or sell Dolwen for another purpose. The home would close and the service users and their families be supported to find suitable alternative provision.

Potential Positive Impact:

- This option would reduce the overall cost of providing residential care and would generate a revenue saving for the service. It could therefore be argued that there would be a positive impact on older people in Denbighshire generally. This is because it would reduce the pressure generally on the community care budget, and help the council to use its money in the most effective way to support all older people in Denbighshire who have care needs.

Potential Negative Impact:

- This option would mean disruption for current residents and their families, and this means a potential negative impact for older people (mainly 85+ years old). The council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs. Dolwen would not close until all the service users' needs had been fully reviewed and suitable alternative provision found. Furthermore, the council has already agreed that no individual service user will be required to move from their current home unless they wish to do so (as long as their current home is still able to meet their needs).
- Existing staff would be at risk of redundancy. From an equality perspective, this would have a disproportionate impact because the majority of staff in Dolwen are female. However, staff would be able to have a planned progression from working for the Council due to the likely timescales involved. If the decision was made to close Dolwen, a closure plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place. These processes are designed to try and mitigate against the impact on staff.

Dolwen (Option 3): The council to continue to own and run Dolwen.

Potential Positive Impact:

- This option would result in no change to the current service, and therefore there are no identifiable potential positive impacts.

Potential Negative Impact:

- The council would not realise the available revenue saving on the current running costs, which would create a financial pressure on the service. As proposed by UNISON, the revenue shortfall could be mitigated (at least for 2016/17) by an additional increase in council tax. It could be argued that this may have a negative impact on council tax payers in Denbighshire who would be effectively subsidising relatively expensive council-run residential & day care services for a small number of service users at Dolwen. This would therefore have a disproportionate impact on people over 18 years of age, as people under 18 years old do not pay council tax.

ALTERNATIVE OPTIONS FOR AWELON:

Awelon Option 2: To work in partnership with a registered social landlord, health services and the 3rd sector to develop a range of services, transferring half of the

building to develop additional extra care flats, possibly as an extension to Llys Awelon, while using the remainder as a small residential unit which could be used to meet the increasing need for respite care and to ensure that no existing resident would need to move unless they chose to.

Potential Positive Impact:

- No potential positive impacts (from an equality perspective) have been identified with this option.

Potential Negative Impact:

- Only a proportion of the potential annual revenue saving and the annual maintenance saving (achievable via Option 1) would be realised. Therefore it could be argued that the council is creating an unnecessary pressure on the community care budget by selecting this option, which means that less money is available to meet the needs of all people in Denbighshire with care and support needs. This could be argued to have a disproportionate impact on older people and disabled people in Denbighshire generally, because other services may be put under pressure.

Awelon Option 3a (UNISON): The UNISON proposals are explored/explained in detail within the full UNISON response, but essentially their proposal is for the council to continue to own and run Awelon, and for this to be funded with an additional increase in Council Tax.

Potential Positive Impact:

- This option would result in no change to the current service, and therefore there are no identifiable potential positive impacts.

Potential Negative Impact:

- The council would not realise the available revenue saving on the current running costs, which would create a financial pressure on the service. As proposed by UNISON, the revenue shortfall could be mitigated (at least for 2016/17) by an additional increase in council tax. It could be argued that this may have a negative impact on council tax payers in Denbighshire who would be effectively subsidising relatively expensive council-run residential & day care services for a small number of service users at Awelon. This would therefore have a disproportionate impact on people over 18 years of age, as people under 18 years old do not pay council tax.

Awelon Option 3b (Elected Member): The council to build additional Extra Care Housing on one of the potentially vacant school sites in Ruthin (following school re-organisation). This would satisfy the demand for additional Extra Care Housing in Ruthin, and enable the Awelon site to continue as it currently is.

Potential Positive Impact:

- The demand for additional Extra Care Housing in Ruthin would be met, which would have a positive impact on outcomes for older people in the Ruthin area because

research shows that outcomes for people living in Extra Care developments are better than for people in standard residential care.

- The ability to provide additional Extra Care Housing would have a positive impact for people who are married or in a civil partnership, because a couple can move into an apartment together, even if one partner does not have social care needs.
- There could also be a positive financial impact for older people, because people will not have to sell their own property to pay for care home fees (as may be the case if a person moves into a residential care home. People may have to sell their property in order to be able to afford to buy an extra care apartment, but they can then retain ownership of a property.

Potential Negative Impact:

- This is a much more expensive way of meeting the unmet demand for Extra Care Housing in Ruthin (compared with Option 1). The council would not achieve the revenue and annual maintenance savings achievable via Option 1, and the council could also lose out on a significant capital receipt from the sale of the alternative site. As argued previously, this could be argued to have a negative impact on people with care and support needs in Denbighshire because it creates an unnecessary financial pressure and limits our ability to use the community care budget in the most effective way to support people with care and support needs. This would have a disproportionate impact on older people and disabled people.
- The location of the potential alternative sites are not ideal, and would not afford the same opportunities for residents to maintain links to the local community (as with Option 1). This represents a negative impact if compared to the opportunities presented by Option 1.

ALTERNATIVE OPTIONS FOR CYSGOD Y GAER:

Cysgod y Gaer Option 2: The council would stop new admissions and work with the individuals and their families at their own pace to move them to suitable alternatives as appropriate and to enter into a negotiations with registered social landlords to develop Extra Care apartments on the whole site.

Potential Positive Impact:

- It would enable the demand for additional Extra Care to be met if a registered social landlord would agree to develop such a provision. This would have a positive impact on outcomes for older people in Corwen and the surrounding area because research shows that outcomes for people living in Extra Care developments are better than for people in standard residential care.
- The ability to provide additional Extra Care Housing would have a positive impact for people who are married or in a civil partnership, because a couple can move into an apartment together, even if one partner does not have social care needs.
- There could also be a positive financial impact for older people, because people will not have to sell their own property to pay for care home fees (as may be the case if a person moves into a residential care home. People may have to sell their property in

order to be able to afford to buy an extra care apartment, but they can then retain ownership of a property.

Potential Negative Impact:

- Existing staff would be at risk of redundancy. From an equality perspective, this would have a disproportionate impact because the majority of staff in Cysgod y Gaer are female. However, staff would be able to have a planned progression from working for the Council due to the likely timescales involved. If the decision was made to close Cysgod y Gaer, a closure plan would be agreed, subject to consultation and approval. Statutory consultation with staff would take place. These processes are designed to try and mitigate against the impact on staff.
- This option would mean disruption for current residents and their families, and this means a potential negative impact for older people (mainly 85+ years old). The council would carry out further individual assessments of every service user and find alternative provision in a sensitive and timely manner with the involvement of service users and families where possible. The council would ensure that it complies with all its legal duties to its service users. The views of attendees would be sought and they would be helped to find suitable alternative provision that meets their needs. Cysgod y Gaer would not close until all the service users' needs had been fully reviewed and suitable alternative provision found. Furthermore, the council has already agreed that no individual service user will be required to move from their current home unless they wish to do so (as long as their current home is still able to meet their needs).

10. Declaration

Every reasonable effort has been made to eliminate or reduce any potential disproportionate impact on people sharing protected characteristics. The actual impact of the proposal / decision will be reviewed at the appropriate stage.

Review Date:	30.05.2016
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Name of Lead Officer for Equality Impact Assessment	Date
Tony Ward, Principal Manager: Business Support	09.03.2016

Please note you will be required to publish the outcome of the equality impact assessment if you identify a substantial likely impact.

Mae tudalen hwn yn fwriadol wag

Denbighshire County Branch

Care in Denbighshire:

A Future for In-House Provision



Contents

The Case for Care	2
Why In-house Provision Matters	6
Hafan Deg	9
Dolwen and Awelon	13
Cysgod y Gaer	16
Appendix I	0



The Case for Care

Unison believe that the protection and support of the most vulnerable people within society should be a priority for those across the political spectrum. We opposed the imposition of the savings target that the proposals in 'Future of Denbighshire County Council's in-house care services' are designed to meet.

Furthermore, we find it disingenuous that cost saving, the real motivation behind the proposals, should be given such a low profile in the paper outlining the arguments for the change. This notwithstanding, we wish to challenge the idea that the proposals are more economically sound than the maintenance of in-house provision as part of a diverse market of care provision in the county.

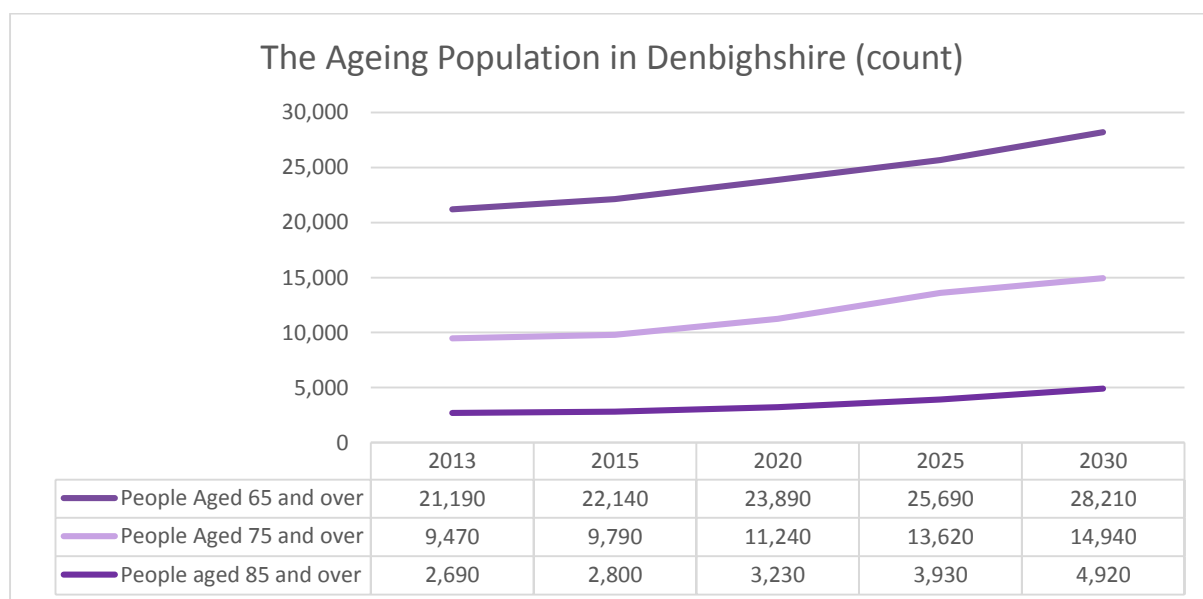


Proposals to outsource provision are a knee jerk reaction based on short-term rather than sustainable financial decisions and a baseless ideologically motivated desire to dismantle public sector services. Public services that generations of tax payers have invested in over the years that have deep-roots in our local communities and democratic governance through the participation of our Elected Members.

Demographic Change

In the submission from the review team we are presented with figures describing the number of over 65 year olds in each ward in the county in 2011 as evidence. Unison believe this is a wholly inadequate evidence-base for a decision of this magnitude. Consequently we have provided our own more comprehensive evidence-base below.

Population projections have been developed at a whole county level for Denbighshire, by the Welsh Government. These show increasing numbers of older people throughout the projected period, which runs to 2030.

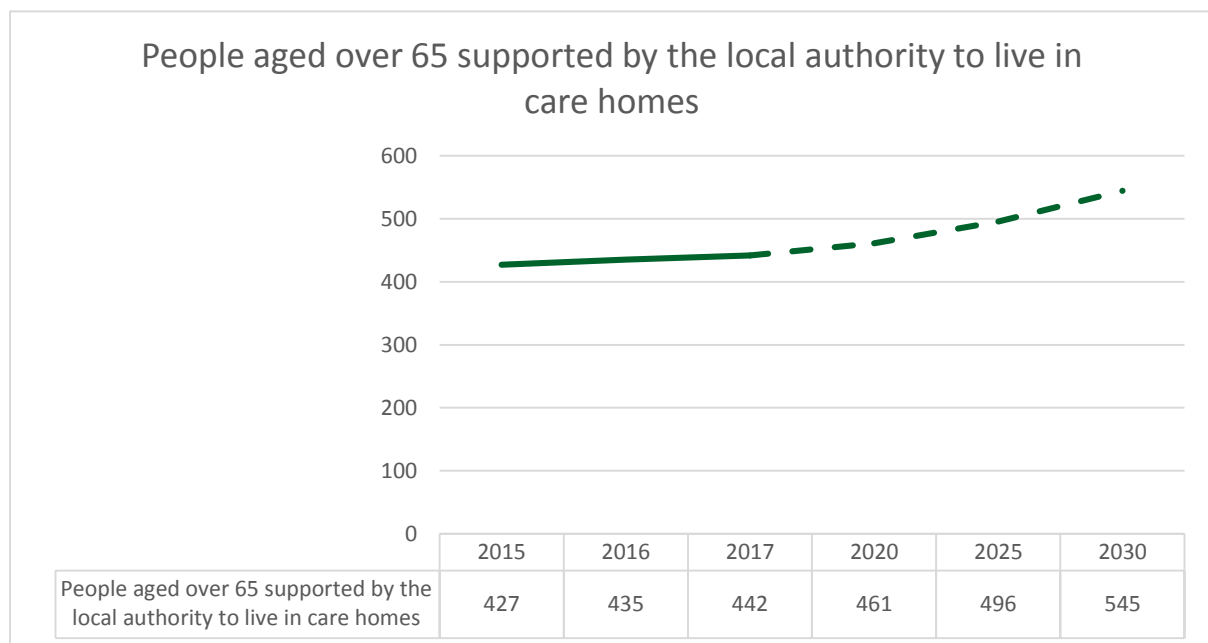


As the numbers of older people rises we expect to see a rise in the numbers of people predicted to experience a range of age related problems including:

- Being admitted to hospital because of a fall
- Being unable to manage at least one domestic task on their own
- Being unable to manage at least one activity on their own (mobility)
- Being unable to manage at least one self-care activity on their own
- Experiencing a bladder problem (incontinence)

Figures for this are presented in [appendix I](#) below

A major element of the argument given for the proposed cuts to services is the historically low rate of older people supported by the local authority to live in care homes. For many years now the Council have operated a policy of actively seeking to reduce the number of people it supports in this way as reablement and other alternative services are offered. Even at this historically low rate we still see increasing demand over the longer period when population projections are considered.¹



The demographic pressures show that in the medium to long-term we are not in fact facing a reduction in demand for services but should expect the reverse. This is not only relevant to residential provision. A convenient distinction is emphasised in the proposals between Day Care and other services and activities that may be considered to preventative or to promote wellbeing. The distinction is correct but assertion that one form can replace the other is erroneous. Provision of activities

¹ This chart uses the methodology widely used in the Daffodil projections and is based on application of the 2014-15 rate to the 2011 based population projections released by Welsh Government.

without care and support cannot replace the provision of activities with such support available.

Moving from Day Care to prevention and wellbeing by its very nature excludes those who have already developed care needs. Unison believes that in order to tackle demographic change and promote wellbeing we need to begin thinking of *day services* in the round.

The solution is retaining the workforce and facilities able to deliver care support while expanding the range of activities available within the assets able to accommodate people with a diverse range of needs. This means our facilities and day care workforce and working in partnership with other providers to arrange activities suitable for promoting the wellbeing of those with and without current care needs.

Far from being in contradiction to the Social Services and Wellbeing Act this approach furthers many of its aims in a sustainable and inclusive way. Section 16 of the Act introduces a duty on local authorities to promote the development, in their area, of not-for-private-profit organisations to provide care and support, and support for carers, and preventative services. These models include social enterprises, cooperatives, co-operative arrangements, user led services and the third sector.²

It does not require us to get rid of our in-house provision. In fact the act aims for a plurality of providers, a mixed economy of care provision. We believe strongly that the public sector has a role within this mixed economy of providers. It is only by retaining assets in the public sector and by retaining a highly skilled public sector work force that we can provide the necessary help and support to enable local community groups and other new entrants into the care provision market place. Our proposals for the future of [Hafan Deg](#), in particular demonstrate the important role that public sector provision has in shaping the day services market.

As mentioned the other (and we believe real) argument advanced relates to cost savings and yet there are significant cost dangers in the current array of proposals in 'Future of Denbighshire County Council's in-house care services'. The continuation of market trends and the impact of already announced policy changes means the independent sector is in an ever-more precarious position and that provider failure and rapidly rising charges are likely to become common features of care provision market place across Wales. See [Why In-House Provision Matters](#) below.

We support ideas to increase the availability of Extra Care and to develop new models of day provision (incorporating wider community participation, diversity of providers, preventative and wellbeing activities). However, we believe that the local

² Technical Briefing - Social Services and Well-being (Wales) Act 2014 - Part 2: Section 16 Duty to promote social enterprises, co-operatives, user led services and the third sector
<http://gov.wales/docs/phhs/publications/151125pt2socialen.pdf>

authority has a key role to play in facilitating these developments as a holder of key assets (both in terms of skilled work force and physical assets) and a provider of services that set the benchmark for cost and quality. The retention of in house options within a broad range of providers allows us the flexibility we need to offer sustainable solutions.

The wisdom of investing in sustainable public sector provision is clear in any financial scenario but we feel compelled in the current circumstances to request Elected Members to revisit the size and extent of the reduction they have applied to the Community Support Services budget. In doing so they should consider the possibility of utilising the opportunity afforded by the better than expected settlement.

The table below shows the budget impact of a range of council tax options. The ‘Original Case’ is the level of council tax rise planned for in budget discussions earlier in 2015 when a worse settlement figure was expected. The ‘New Proposal’ is the much lower council tax rise now being proposed. It is clear that between these two is a degree of leeway which could be used to reduce the impact of the cut in the Community Support Services Budget.

Budget Implications of Council Tax decisions

2018/17 Options	Increase %	Funding Increase £'000	Budget Impact £'000	Avg Band D Annual Impact	Avg Band D Annual £
	0.00%	0	-661.71	£0.00	£1,142.22
	0.25%	110	-551.43	£2.86	£1,145.08
	0.50%	221	-441.14	£5.71	£1,147.93
	0.75%	331	-330.86	£8.57	£1,150.79
	1.00%	441	-220.57	£11.42	£1,153.64
	1.25%	551	-110.29	£14.28	£1,156.50
New Proposal	1.50%	662	0.00	£17.13	£1,159.35
	1.75%	772	110.29	£19.99	£1,162.21
	2.00%	882	220.57	£22.84	£1,165.06
	2.50%	1,103	441.14	£28.56	£1,170.78
Original Case	2.75%	1,213	551.43	£31.41	£1,173.63
	3.00%	1,323	661.71	£34.27	£1,176.49
	3.50%	1,544	882.28	£39.98	£1,182.20
	4.00%	1,765	1,102.85	£45.69	£1,187.91
	4.50%	1,985	1,323.42	£51.40	£1,193.62
	5.00%	2,206	1,543.99	£57.11	£1,199.33

Let’s take the opportunity to invest in in house service improvement this year, including adapting services to meet the new challenges and developing revenue streams that can allow a more phase reduction in budget in subsequent years. By restoring this budget in part or in full Members should stipulate that funds be reinvested in the proposals we outline below.

Why In-house Provision Matters

A diverse market, with multiple providers, benefits from the inclusion of direct in-house provision, indeed this is essential if Denbighshire hopes to shape the market to meet the needs of current service users and resident of the county.

The financial crisis and austerity policies of the Westminster Government have had and obviously damaging impact on the public sector. It is however, extraordinary to envisage the independent sector as a solution or panacea, when that sector is in an even more precarious position. The recent document written collaboratively by Association of Directors of Social Services Cymru (ADSSC), in consultation with the National Provider Forum (including Care Forum Wales, United Kingdom Homecare Association (UKHCA) Cymorth Cymru, Carers Trust Wales, Learning Disability Wales and Age Cymru) , outlines, in their own words, some of the precarious position of the independent sector.

The provider market within social care has been fragile for some time and all the signs are that the difficulties will increase. The Southern Cross experience in Wales several years ago demonstrated the impact that provider failure can have [...] on the sector. Clearly the impact of the Judicial Review into Nursing Care fees may have an impact in this area but that will still leave the residential care market unresolved.³

We have seen residential and nursing places disappear in Denbighshire at an alarming rate as Maes Elwy, Grove Hall, Fron Yw and Plas Gwyn have closed while the consultation period has been ongoing. The Maes Elwy closure in particular illustrated the dramatic speed at which provider failure can take place and consequences for the public sector who have to pick up pieces.

The ADSSC document identifies risks inherent in the marketization of care services for service users, local authorities, health services, and the local economy. In particular the paper explains the danger of fragmentation of the market that looks a real possibility given the current pressures.

The prospect that some local authorities will make provision for additional costs in this area, while neighbouring authorities do not, is likely to pose a real threat to the

³ ADSSC, The impact of the National Living Wage on the care sector in Wales – January 2016

shape of the market. Providers will naturally be drawn to authorities paying the higher rates, effectively cherry picking packages whilst leaving other authorities struggling for capacity.⁴

This scenario opens up the prospect of spiralling cost for independent sector provision as Denbighshire would have little choice but to compete in a costly bidding war with other local authorities as the reduced number of providers sell to the highest bidder.

There is an alternative of course, and this is for Denbighshire to retain some direct in house provision and act as a participant in the market place. By offering value for money care services the local authority has the opportunity to influence whole market prices downwards through competition. If the local authority's only role in the market is as passive commissioner it can have little hope of achieving such an impact.

For Extra-Care developments too, the possibility of the council providing for the care needs of client opens up the market opportunities rather than reducing them. It opens up the range of potential investment partners including those with the necessary building expertise but without the experience or resources to arrange the care provision or establish the necessary partnership to do so. Without this the council is put at a competitive disadvantage with a restricted pool of potential development partners to take forward Extra-Care schemes in the future.

In-house provision can offer a more flexible approach to respite provision.

It is increasingly the case that independent providers will not allow advanced booking of respite placements because they find it more financially advantageous to hold out for a long-term placement. Pre-booking is an essential element to planning respite for both the service users and their carers. Advance booking of regular respite allows a carer to organise their other commitments and rest periods around their caring responsibilities and provides service users with structure, certainty and regular routine.

Local authorities are able to recognise the benefits of respite to preventing carer breakdown and a requirement for additional formal services. They are in a position to see the cost benefit of preventative activities in a way that independent providers are not.

Local experience shows that many problems can arise with the quality of care in independent residential homes, while the council run homes have a track record of excellent care.

⁴ ibid

During 2014 CSSIW found that 16 of the 70 care homes⁵ failed to meet required standards. The council run homes all received positive inspection reports and continue to do so. Staff at the homes, residents and the public are concerned that proposals intent to sacrifice some of the best performing care facilities. At the same time we see the cost of additional monitoring for failing residential homes as an inefficient use of public funds that should be directed at frontline provision of high standards of care as is currently available at the local authority run homes.

The presence of high performing public sector provision should be used more as a means of setting the standard in the local market with the aim of leading improvement across the wider range of providers.

⁵ This includes residential and nursing care facilities.

Hafan Deg

The Service User and Workforce Case for Continuing In-house Provision

The summary paper, on Hafan Deg, produced by the independent review team as part of the listening exercise, demonstrates superior staff training; and therefore care provision, better access arrangements and superior facilities available within our Day Care infrastructure compared to alternative locations.

Our Day Care infrastructure offers:

1. Transport to enable people with mobility issues to access the services.
2. Whole day provision taking the pressure off carers and mitigating against the risk of carer breakdown.
3. Highly trained staff and facilities able to cater for a range of care needs.
4. Provision of meals meeting nutritional requirements and enabling longer engagement with services.

The alternative suggested in initial proposals were based upon

1. Shorter sessions, which fail to provide the break for either client or carers.
2. Less accessible and less appropriate community centre accommodation
3. No transport
4. No Meals

Revised proposals advocate the winding down of care services at the site and a shift in focus to non-care related activities. In its consultation paper Denbighshire County Council have argued that:

There are a variety of reasons that the council must consider the future of Hafan Deg, as the cost to the council of delivering day care through its own centre is higher than it can secure in the independent sector. Furthermore, demand for day care places is falling and so the number and cost of spaces is likely to increase. Conversely, there is evidence that there are increasing levels of loneliness and social isolation, suggesting a need to increase the level of informal, non-care related, day time activities in the local area.

The paucity of vision in the current proposal arises from the presentation of a false dichotomy between what are perceived to be elements of 'traditional' care models and 'modern methods'. In fact innovative practice need to develop as a synthesis.

Day Care is seen above as a traditional model in need of revision to adapt to changing demand for greater reablement focus and more service user choice. We argue here that the baby should not be thrown out with the bath water, or to be more precise that the assets that could form the basis of future provision should not be thrown away for unnecessary short-term savings. Furthermore, a shift completely away from care support for day activities risks excluding those who have already developed care needs or subsequent generations who develop care needs from our wellbeing work.

Sector leading practice, the Social Services and Wellbeing Act, Wellbeing and Future Generations Act and Denbighshire's Wellbeing Plan all emphasise participation in social activities as key to wellbeing. The idea is that people maintain their independence and experience greater wellbeing through engagement with community based activities from a range of providers. While we agree that services should be available that focus on preventing the deterioration in health and need for care services we do not believe that service users will often become beyond the reach of wellbeing activities when they begin to develop care needs, however late in life this may occur.

There are also substantial human resources benefits from retaining in house provision. Maintaining a well trained in house care provision and adequate physical assets can eliminate the risk of introducing lower standards or of being stung by spiralling provider costs. The operation of a new model without loss of staff provides continuity for clients and also means that the cost of redundancy is avoided.

The Carer's Case for Continuing In-house Provision

Our proposed model sees day care services as vital not only to client but also to their carers. Recent research by Carers UK has highlighted the scale of the issue of carer breakdown and the consequences for the carers and the person they care for.

'For 1 in 9 carers who reached breaking point, the person they cared for had to be rushed into hospital and emergency care or social services had to step in to look after the older or disabled person whilst the carer recovered.

Not only does this often cause disruption and distress for the person needing care and huge worry for the carers, but it is extremely costly for emergency services.'

For the local authority the impact is felt through the need to set up costly placements, provide home care or unnecessary residential care. Carers UK have suggested changes required to avoid these problems.

'The longer-term solutions seem to lie in frontline health and social care professionals spotting the warning signs early, and guiding carers to advice, information and support which might prevent crisis.

But advice and information must also result in access to high quality, affordable care services. Carers talk about how their lives can be transformed by good care services – which give them the confidence to take time for themselves, go to work or just to rest without the constant worry of what is happening to the person they care for.’

We see day care services playing a key role in providing the release valve for carers enabling them time to themselves. We see this as an invaluable way to reducing the risk of carer breakdown and breakdown in the relationship between carer and the person they care for.

We believe quality day care contributes substantial cost avoidance, when the consequences of carer breakdown are considered. We also can see little hope of the local authority being able to fulfil its duty to carers under the new Act without the availability of the relatively inexpensive short-term break from caring that day services can provide.

If the proposals in ‘*Future of Denbighshire County Council’s in-house care services*’ are adopted this important provision will be lost as the proposals focus on activities for those without care needs and thus provide no respite for those involved in supporting the many people who do have care needs.

The Market Case for Continuing In-house Provision

Proposals seek to transfer the workforce and assets to a single independent provider. Examples of sector leading practice include the development of Community Wellbeing Hubs. These deliver a range of flexible classes and activities with a flexible timetable tailored to suit individuals. Classes and activities are delivered by a range of providers. It is clear from the consultation process that there is a desire to retain a strict focus on activities for older people.

This is why our suggested model sees a future for Hafan Deg that combines the strengths of the traditional and sector leading approaches providing the infrastructure for wellbeing.

The transport, superior staff and facilities offer the opportunity for the development of Community Wellbeing Hubs that do not require costly new build, that are capable of catering for clients with a range of needs including those with greater care requirements than can be met in community centres. Engagement with a greater variety of providers of classes and activities will allow for greater use of underutilised day care facilities and can act as a source of income to support the infrastructure.

Those of you who are familiar with the argument for developing more Extra – Care Housing (another example of sector leading practice) will be struck by the similarity between the combined offer of accommodation, care and social activities offered by Extra-Care and what is described above. This is no co-incidence as bringing as many

of the advantages of Extra-Care to the population in residential homes is a further aim of the model we are suggesting.

Offering a diverse range of activities is reliant on a 'market place' of independent sector and community providers offering activities that are accessible to those members of the community in need of support. Without a local authority infrastructure of trained staff and accessible venues this market is restricted to only those organisations who are able to secure the required accommodation. This is beyond the reach of many local community providers who would be excluded from offering activities if the infrastructure is lost. By charging organisations for facilities and support the council can develop a new revenue stream that taps into the donations and grant funding streams that are often seen as a key advantage of third sector provision. Furthermore, the presence at the facility of well-trained and professional council staff means that the necessary health and safety practices can be maintained even where activities are delivered by unqualified and/or volunteer partners.

Dolwen and Awelon

Under option 1 of 'Future of Denbighshire County Council's in-house care services' we find the statement that 'Plans for the development of Extra Care Housing within the town will continue' we welcome this but is really misleading since suggestion in the consultation is about the future of facilities at the Dolwen site and plans to develop Extra Care at the Middle-Lane site are quite separate. Similarly the proposals for Awelon seek to set Extra Care and residential care as alternatives when there is in fact a demand for both.

An expansion of Extra Care is to be welcomed as part of the mix of provision for the growing number of older people in the area which demographic processes will produce. However, it is not an alternative to the Dolwen and Awelon facilities and it is unhelpful to conflate these two distinct demands.

The Dolwen and Awelon facilities provide both residential and day services and the key questions regarding its future are:

1. Is there likely to be future demand for these services in the area?
2. If there is what is the best model for providing these services?

In answering the first question it is necessary to challenge elements of the thinking outlined in Case for Change document as well as the specifics outlined in the options presented.

It is assumed that the reducing numbers of older people supported by the council to live in residential care and the presence of vacancies at Dolwen or Awelon are conclusive proof of a reduction in demand. They are not.

As we explained above in [The Case for Care](#) the process of demographic change is continuing and even with the historically low rate, of older people supported by the local authority to live in care homes, seen in recent figures we still see increasing demand over the longer period when population projections are considered.

Demand also has a relationship with supply and we know the state of the private and independent sector residential market is in a period of contraction. Locally this has manifested in the closure of Maes Elwy, Grove Hall, Plas Gwyn and Fron Yw and a consequent sharp reduction in available residential and nursing places. Further risks of rising costs and independent provider failure are outlined above in [Why In-house Provision Matters](#).

Focusing now on the specific circumstances at Dolwen and Awelon it is necessary to recognise that there are several extra-ordinary factors currently at play negatively impact upon the reputation of these residential services and their perceived attractiveness as a choice for local older people. Firstly, is the historic lack of investment in the two sites particularly the hiatus during the current period of

uncertainty. Secondly, and most significantly is the uncertainty itself. When determining where to live-out the closing period of one's life stability and certainty are key considerations. The threat of closure and subsequent suggestion of transfer upheaval have seriously damaged Dolwen and Awelon's ability to attract residents. It has made them appear an undesirable option to both potential residents and to the professionals who work with them when making these life choices.

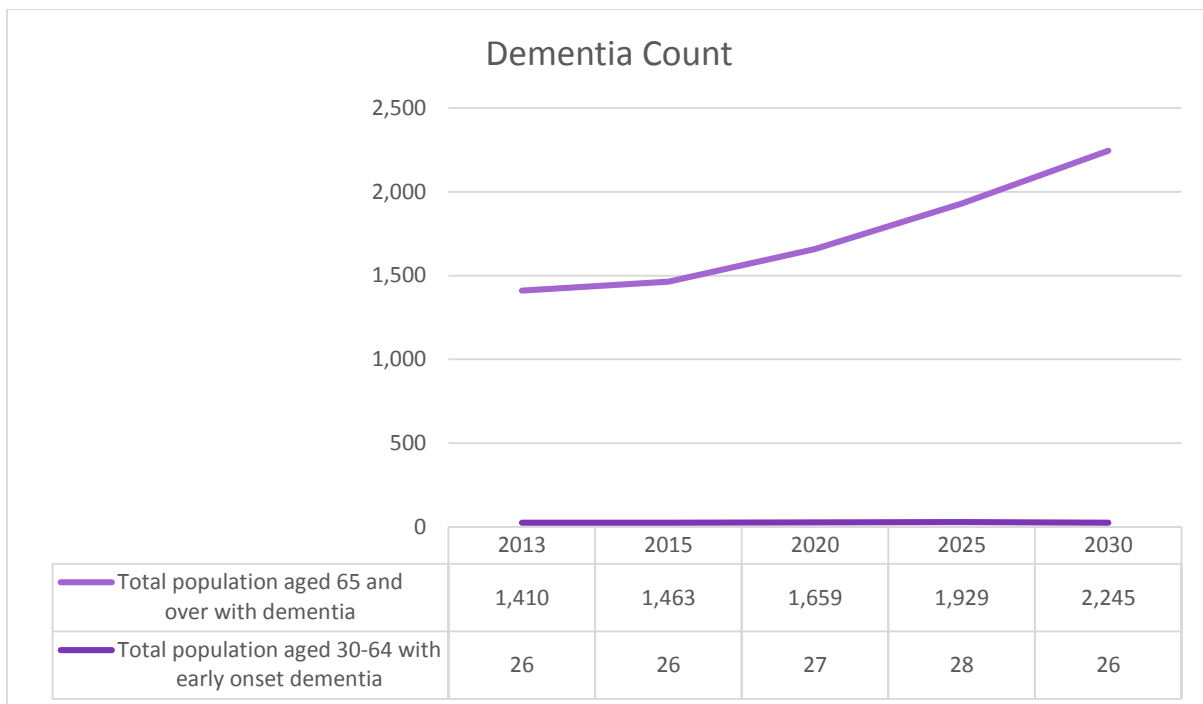
Co-location of residential and day services has great advantages for service users particularly if users of day services require respite placement or come to require full residential services in the future. Transition is much less daunting where service users are in familiar surroundings with familiar staff and fellow service users around them.

In relation to day services the principles outlined in our proposals for [Hafan Deg](#) apply to day services at Dolwen and Awelon too, although the scope and capacity will naturally be different. By handing over its assets the council loses the ability to direct and facilitate the develop day services to meet the needs of the changing population and implement the preventative wellbeing policies that are enshrined in the Social Services and Wellbeing Act. The independent provider and developers will develop services along their own model without any responsibility to draw in wider community and voluntary organisations or to ensure a diversity of provision.

In contrast, by maintaining control of facilities for day services the council can offer a venue, specialist facilities and highly trained staff to support a wide range community, third sector and mutual organisations who are capable of meeting its aspiration for a diverse range of preventative wellbeing services.

Dementia

We believe that 'Future of Denbighshire County Council's in-house care services' is correct to emphasise the impact of increases in dementia cases. We have data on projected numbers of people with dementia from the Daffodil system. These are produced by applying the national prevalence rates for dementia, for different age groups, to the projected numbers of people in each of those age groups in Denbighshire over the next few years. These show an expected increase of 125 people, aged 65 and over, over the period from 2013-2017. The numbers of people aged between 30 and 64 with dementia is expected to remain constant.



The long-term projections show this rising trend will continue. A further 124 dementia cases in the 65+ group are expected by 2020 with the total expected to climb to 2,245 by 2030.

We also note that many service users with earlier stages of dementia and less severe needs require residential homes to EMI provision where services and social activities are geared towards those with much more severe needs. Both specialist EMI and residential services are important provisions in order to meet the needs of people appropriate to their particular life-stage and provision for these should be made in the mix of care provision on offer.

It is not clear at this stage the role that Dolwen or Awelon may have in supporting those with dementia under any of the proposals and additional provision may be required and that direct in-house provision of EMI services should be considered alongside other proposals in a separate process to this review.

Cysgod y Gaer

Of all the proposals in the 'Future of Denbighshire County Council's in-house care services' Option 1 for Cysgod y Gaer is the closest to the vision Unison has for the development of residential and day services.

The proposal recognises the point we have made above in relation to the other sites:

- Residential and day care provision that is co-located.
- The opportunity to expand the range of activities and the use of facilities for a greater number of people within the community including those with care needs.
- Recognition of the need for both Extra-Care housing and residential care places.
- Recognition of the importance of facilities based in the local community.
- Recognition of the need to protect the cultural and linguistic needs of different communities.
- Recognition that work with other sectors, in a diverse market, does not mean the public sector should pull out completely.

However, the proposed partnership arrangements with Health and the third sector are not fleshed out in detail. We feel it is essential to add the following further points to the proposals in Option 1 for Cysgod y Gaer:

1. The council should retain ownership and control of the Cysgod y Gaer site while working with other providers to make the best of the facilities.
2. It is also key that the well trained public sector work force is retained as direct employees of Denbighshire County Council.

The responsibility for ensuring care services and wellbeing services are available rest with the local authority and it is right that both the accountability and control of delivery should rest there too.

Appendix 1

These projections come from the Welsh Government commissioned Daffodil Project, which projects social care need.⁶ Figures relate to the whole county of Denbighshire.

	2013	2014	2015	2016	2017	2020	2025	2030
Sum of Total population aged 65 and over predicted to be admitted to hospital because of a fall	535	546	558	571	583	626	726	841
Sum of Total population aged 65 and over unable to manage at least one domestic task on their own	8418	8596	8764	8943	9138	9738	1086 2	1212 8
Sum of Total population aged 65 and over unable to manage at least one activity on their own	3771	3848	3924	4006	4100	4374	4906	5562
Sum of Total population aged 65 and over unable to manage at least one self-care activity on their own	6917	7061	7198	7342	7493	7956	8867	9931
Sum of Total aged 65 and over predicted to have a bladder problem less than once a week	671	687	702	717	732	774	847	943
Sum of Total aged 65 predicted to have a bladder problem at least once a week	3438	3513	3583	3648	3711	3909	4295	4764

Source Daffodil - <http://www.daffodilcymru.org.uk>

⁶The project is led by the Institute of Public Care at Oxford Brookes University <http://www.daffodilcymru.org.uk/index.php>

Summary of the nine petitions received

Nine petitions were submitted which were broadly in relation to the consultation about the future of our in-house care services. However, five of these were submitted during the pre-consultation period, four of which were written before any options had been identified and presented to the public.

We have been advised (by the Consultation Institute) that a group of identical letters should be regarded as a petition. We have therefore included a group of 13 letters (see paragraph 4, below) as one petition; another group of 30 identical letters (see paragraph 5, below) as one petition; and 4 letters from tenants in War Memorial Court (see paragraph 6 below and also referred to in Appendix F) as one petition.

In summary, during the public consultation phase, we received petitions with a total of 1329 signatures:

- 1257 signed a petition opposing option 1 for Awelon
- 72 signed a petition opposing option 1 for Dolwen

In addition we received 30 identical letters submitted shortly before the consultation phase opposing option 1 for all 3 consultations. Other petitions submitted before the consultation phase are in relation to the prospect of all 4 establishments closing.

In chronological order, the following petitions were received by the council:

In pre-consultation phase:

1. In **November 2014**, we received a petition opposed to changes to any of the council's three residential homes. This contained approximately **5000** signatures, but appeared to assume that the proposal would be to shut all three homes. The Petition reads:

"Petitioning Denbighshire County Council. Do not close Awelon Dolwen and Cysgod Y Gaer!"

The two people who developed the submission, included the following letter as a rationale to encourage people to sign the petition:

"We, Sara and Ceri Bell, need your help to stop the closure of the local care homes which are an essential asset to their community they accommodate local elderly people who do not require nursing care. Their locations are very central to all outlying villages and the care in these homes is undoubtedly second to none. I can say this as my late Grandma was a resident at Awelon and so happy there and the care she had until her last day where outstanding. I also have my nain at Dolwen who is the happiest I have ever seen her. She has dementia and is deteriorating every day however she is in a lovely home with lovely friends there and feels as though she is in a luxury hotel she is so happy there. For people to be so happy somewhere at such an age to have to be moved now is just disgusting. Moving is enough stress for any aged person never mind the elderly whom are so settled and relaxed. To have to be put through such change will just be heartbreaking for them and their families. Also because there are many very elderly people in these homes it must be taken that their family members are no

longer young people and consideration has to be given for them and travelling to visit. For instance at Awelon there are several over 100 yrs old. I need as many people signatures as possible to please try and keep these fantastic homes open and the jobs of so many fantastic staffs to be secured. We can't see any more people lose jobs. Please share this and help me get everyone to support this essential petition. Huge thanks."

The (approximately) 5000 people who signed the petition provided no specific rationale for their objection, they just signed to say that they were opposed to the closure of Awelon Dolwen and Cysgod Y Gaer.

2. In **April 2015**, a petition was submitted in relation to **Hafan Deg**. This is also in relation to an assumed closure of the centre. **881** signatures were collected, and it was accompanied by letters from the family of those who attend, stressing its importance. This petition, which was presented to full Council is entitled:

"Save our/your Day centre from closure"; and it was supported by the following rationale:

"Hafan Deg is the only day centre in the North of Denbighshire, It is currently run by DCC but even this is too much for them. Prestatyn day centre has already been closed so please sign the petition and help us save this vital and essential community service for Rhyl and Prestatyn. Our residents in Prestatyn were not given notice of the closure and we have lost this vital service for our town. Our residents now attend Hafan Deg in Rhyl which is at risk of closure without your help!"

3. In **July 2015** a petition, signed by **1076** people, entitled 'Keep **Cysgod y Gaer** open' was submitted by Age Connects. Early in 2015, Plaid Cymru organised a public meeting on the future of Cysgod y Gaer where this petition originated. The petition was accompanied by 79 letters and comments ranging from simply "*keep open!*" to long, moving accounts of the importance of the home in the community and the excellent quality of care provided there. 104 people left name & contact details but no comments, while 82 have signed a photocopied letter giving reasons to keep the home open. In general, the comments suggest that those who contributed would be in favour of Option 1 for Hafan Deg, although the petition was submitted before the options had been developed. The rationale provided in support of this petition, which included the scarcity of alternative equivalent sources of care was taken into account in the pre-consultation phase, hence the closure of Cysgod y Gaer not being the council's preferred option.
4. Late in **July 2015**, 13 identical letters were received from tenants of War Memorial Court, asking to have lunch at **Hafan Deg** (treated as one petition with **13** signatures). The letter reads as follows:

"I write to enquire if it may be possible and the Council services may be willing and able to provide cooked meals for myself on the days when the staff are cooking for day care visitors."

I fully realise that all services are under potential threat and withdrawal because of financial constraints and would accept that if the above was allowed it would only be on a trial basis and could be withdrawn at any time. If this request was met with a favourable response I would be more than happy to pay a week in advance so that the catering staff could make provision to order sufficient supplies and prepare the same.

One would like to comment that on VE day this year the residents and day care visitors had a very nice meal together provided by your catering staff who coped admirably.”

Whilst this letter does not relate specifically to any of the 3 options it is clear that it will be important to include, and to consider, the tenants of War Memorial Court in discussions regarding the future of Hafan Deg, which is something the council intends to do.

5. In **August 2015**, we received **30** identical copies of letters from people saying:

“DCC intends to close Awelon, ‘privatise’ Dolwen & develop Cysgod y Gaer as I ‘support hub’. I am utterly opposed to the plans to change the current status of the above named care homes. This means that I am opposed to the closure of Awelon, I am opposed to the transfer of Dolwen to an external organisation and I’m opposed to Cysgod y Gaer being changed from its current status”.

The petitioners provided no rationale for their objection.

Consultation phase:

6. The following is the content of the letter written in December 2015, from tenants of War Memorial Court in relation to Hafan Deg. We received 4 copies:

“I am writing on behalf of the residents of War Memorial Court, to express our concern about the future of Hafan Deg.”

The rationale and evidence included is as follows:

“At the moment we residents are allowed to use Hafan Deg three time each week for community activities, and on other special occasions such as birthday parties, Halloween, Christmas and Easter parties. We have also joined with the service users of the centre to celebrate national occasions such as Royal Celebrations, VE day and MacMillan Coffee mornings. We are all worried that we will not be able to continue our activities if an external organisation takes over the running of Hafan Deg.

We are always being told that it is better for the elderly to remain in their own home, but if this means they sit alone all day except for 2-3 fleeting visits from uninterested ‘carers’ this is not improving their quality of life. We feel that our activities, held in Hafan Deg, give many of the residents company and friendship on their doorstep, and enhance their daily life.

I am sure that the service users (who are not just numbers but people in their own right, who could be you mother, father, husband or wife) will agree that their visits to Hafan Deg are probably the highlight of their week, and give their carers a much needed break.

It is not just the loss of our use of the centre that worries us, but what will replace it. War memorial Court is an ex warden controlled complex, providing accommodation for the elderly and disabled. There is considerable concern about whether it would be open in the evenings, who would be wandering round. There are plenty of dark corners on the court. Would there be noise and parking problems. These may be silly concerns to you, but to an 80 or 90 year old resident these points are important.

You may think you are saving some money but if Hafan Deg closes the whole heart of the community will be lost.”

Again, whilst this letter does not relate specifically to any of the 3 options, as mentioned in paragraph 4, it is clear that it will be important to include, and to consider, the tenants of War Memorial Court in discussions regarding the future of Hafan Deg, which is something the council intends to do.

7. One petition specifically relating to **Dolwen**, with **72** signatures. The petition reads:

“We the undersigned oppose the DCC plans to take Dolwen out of local authority control and move the emphasis on elderly mental health”.

The petitioners provided no rationale for their objection.

8. One petition, which had **1242** signatures and was organised through Plaid Cymru, expressed opposition to the closure of **Awelon**. This was presented at County Hall on 14th January 2016.

The petitioners provided no rationale for their objection.

9. Another petition was received from the English Presbyterian Church, in January 2015, containing **15** signatures “*against the proposed closure of **Awelon** care home*”.

The petitioners provided no rationale for their objection.

Summary of political submissions

Details of the consultation were sent to all AMs, MPs and MEPs, and we have received written responses from Ann Jones (AM, Labour); James Davies (AM, Conservative); and Mabon ap Gwynfor (Plaid Cymru candidate for Clwyd South). These responses are provided in full below):

Response from Ann Jones

I wish to submit my response to the consultation on the future of Denbighshire County Council's in house care services. In doing so, can I start by saying I believe the consultation document lacks firm evidence and information in which to make any decision on the options put forward in this consultation. Following on from the document and having listened to views from my constituents, my comments will focus on the future of in house care services at **Hafan Deg**, Rhyl and **Dolwen**, Denbigh, yet I feel that my comments could be taken into further consideration with regard to Awelon, Ruthin and Cysgod y Gaer, Corwen, although these are not in my constituency.

Looking at the Council's reasons, there are many questions that stem from why the Council feel this review is necessary. The disastrous closure and the handling of the closure at Aberwheeler Nurseries leads me to ask why the Authority feels that denying choice to residents using that facility assists the Authority with "squaring a circle" around Independent Living. Great play is made in this document that there is need to have various options open to them, yet this was not seen as a priority for those using Aberwheeler Nurseries who may be likely in later life to need a different care package.

- What lessons have the Authority gleaned from the procedure that led to the closure of Aberwheeler Nurseries and therefore the removal of a choice?
- What lessons have the authority learned from the decision sometime previous to remove all in-house residential care in North of the County e.g. Rhyl, Prestatyn, St Asaph area, and allow private firms to run all of the Authorities needs for residents needing either day care or full time residential care.
- What monitoring and evaluation has been done of the use of public funding to the private care sector?
- How does the Authority intend to deal with any closure of homes or the removal of day care services from the private sector?
- What consideration, if any, has been given to subsequent CSSIW reports on those homes transferred to the private sector?
- The generalisation that older people do not wish to move into residential care anymore, seems to be used as the need for a review, yet what evidence does the Authority have of those who would at some stage want to avail themselves of residential care.

The paragraph at the foot of page 3 seems to be a contradiction but shows contrary to the points made in the document that even with changes, the decrease over 3 years is 80 places less.

- How many people are waiting either in other care settings such as Community Hospitals for a residential care placement and how many more will wait during that 3 year period mentioned in the document?
- What adjustment could there be to the Adult Service budget of the Social Services following the better than expected settlement for the financial year 2016/7?
- The Equality Impact Assessment should be carried out against all the options in order that those wishing to comment do so with all available facts before them.

Hafan Deg

Background:

- Is 24 the correct number of people using the Centre?
- How many could the centre truly accommodate?
- Many have told me over the period of this consultation that agencies have been deterred from referring potential people to have services provided at Hafan Deg. Is this the reason that you assert demand is falling?
- Turning to the options cited:

Option 1 appears to accept that there is very much a need for the services at Hafan Deg to be maintained and also enhanced. This is certainly the views of the residents that have contacted me. If this is the case, then I see no rational reason for the Authority to look to off load this to others and this approach serves to reinforce the views of the community that this is a financial decision and not based on any other firm foundation.

- How has the Authority arrived at the saving of £100k and it must be pointed out this is a one off saving?
- What lessons have been learned from the recent decision to stop providing Welfare Rights and how does the Authority now deal with this and the TUPE arrangements for staff.

Option 2:

- How does this option provide the same savings?
- The Authority make the statement that they can still provide day care. How will this be achieved and who will deliver this?
- The Authority state that they recognise the disruption this may cause, so again the question has to be asked what has been learned from the closure of Aberwheeler Nurseries?
- The views of those attending Aberwheeler seemed not to be taken into account.

Further Options:

How do you intend to evaluate any other suggestions or other delivery models arising from this consultation and place into the public domain the evaluation of such suggestions?

Dolwen

I have earlier stated that the need for residential care is still very much apparent and there are those who feel they would benefit from this care.

Option 1 is a clear indication that there is a feeling that the service can be run by the Independent Sector, yet there is no evaluation or monitoring of how the Authority deals with the consequences of the Private Sector deciding to withdraw its services. This option cannot be analysed without the authorities plan for dealing with a reduction in residential care from the Private Sector.

There needs to be a real understanding of how the Authority will manage any reduction of residential places and the option for Dolwen cannot be considered as viable with the scant amount of information surrounding the decisions contained within this document.

Conclusion:

The Authority should not look to make its financial savings by selling off the assets of Hafan Deg or Dolwen. There needs to be further evaluation and monitoring of the services provided and how the Authority can enhance the services for the benefit of all those who would benefit from these services. There is no advantage to either those using the services provided at Hafan Deg and Dolwen or the Authority of a knee jerk reaction to the difficult financial challenges facing budget holders.

There is no evidence that the consequences of the options in the paper have been fully explored.

I believe the authority should look to enhance and develop services for those adults needing them and to find additional ways to offer respite care for many of the carers who currently struggle to find the appropriate placements.

There is no evidence that there is any desire or willingness in the private sector to take over the running of both care homes. Indeed the report itself identifies that there is no capacity locally in the private sector to take over the running of Hafan Deg and Dolwen.

There needs to be a review of the way referrals are made, advertised and dealt with and I feel that there is a need for good public placement in Adult Services including a full range of Day Care settings and I would urge the Authority to provide more evidence to back up their statements contained in this document.

Response from James Davies

I am aware that the consultation period relating to the future of in-house care services is now drawing to a close and with this in mind, I write to set out my views and concerns. I would thank you for meeting me to discuss these issues and for your helpful responses to queries raised in correspondence over recent months.

I will restrict my comments to the facilities within my own constituency, namely **Dolwen** Residential Care Home and Day Care Centre in Denbigh and **Hafan Deg** Day Centre in Rhyl.

It is clear that **Dolwen** is a much-loved facility, having been located in Denbigh for many decades. I accept however that demand for residential care home beds is not as great as it once was, with a greater preference for independent living which has partly been made possible by the development of extra care housing and domiciliary care. Your consultation documentation indicates that there are currently empty beds at Dolwen with consequent costs to the council. There is also reference to the fact that there is no Elderly Mental Health care home facility in the Denbigh area and yet this is an increasing need. In light of these facts, the concept of transforming Dolwen into an EMH nursing home is understood. You advised me that the capital needed to develop such a facility and the requirement to minimise running costs implies the need to enter into a partnership with an external organisation. A change of ownership would oblige the facility, which does not currently meet CCSIW standards, to do so. I am advised that such organisations often function with leaner management structures and are subject to lesser pension costs than councils, hence are in a position to reduce revenue implications with respect to councils. My comments are as follows:

- (a)** A transfer is far preferable to closure.
- (b)** Any such transfer should, as promised, be open to any appropriate external organisation i.e. not-for-profit including social enterprises, in addition to established private sector players.
- (c)** There should be no undue pressure applied on existing residents to move so as to allow the plans to progress more quickly.
- (d)** If anticipated third party interest does not materialise, the council should fully reconsider the decision.
- (e)** I welcome the council's decision to take on an additional two contract monitoring officers. It is important that the team of four ensure the highest of standards are being met at any future EMH care model operating at Dolwen.
- (f)** You advised me that the current intention is to lease the building to the external organisation rather than to sell the freehold. This would be welcome as it would ensure the council can retain more control over the destiny of the building and future provision of services, in the public interest.

(g) While you advised that existing staff would benefit from TUPE arrangements and retain their current Terms and Conditions, safeguards would be preferred so as to ensure these could not be eroded over time.

(h) Further to the acquisition of the Middle Lane school site, proposals for a new extra care facility here or elsewhere in the town, as per local wishes, should be pursued. The council should consider the need to progress such a development before removing residential care beds from Dolwen.

(i) The council should liaise with third party residential home providers such as to ensure that this model of provision remains as accessible as possible to those who still seek it and that local people are aware of and satisfied with the location and quality and Welsh language provision of this.

(j) The consultation documentation is limited in its discussion of how the provision of day care services will be protected and developed and this needs to be clearly articulated.

Hafan Deg is also a popular facility and it is understandable that any proposal to change how it operates will be met with concern. I understand you have been approached by a number of organisations about their possible involvement in the future however, and this is positive.

My comments are as follows:

(a) The consultation documents refer to a reduction in the demand for local day care services over recent years. While this may be true, I would suggest that any such statistics be treated with caution as the remaining local authority day care services have over that time also become less easy to access.

(b) Continuation of service provision in the existing building is far preferable to closure.

(c) If anticipated third party interest does not materialise, the council should fully reconsider the decision.

(d) It would be preferable for the council to retain the freehold of the building so as to enjoy greater control of the building and future provision of services.

(e) Nearby residents eg.in War Memorial Court need assurances that the use of the Hafan Deg building will not change so as to result in inconvenience.

(f) Any existing staff benefiting from TUPE arrangements and therefore retaining their current Terms and Conditions would also benefit from safeguards so as to ensure these could not be eroded over time.

Response from Mabon ap Gwynfor

(English translation follows)

Ygrifef atoch i gyflwyno fy marn parthed eich ymgynghoriad ar ddyfodol Gwasanaethau Gofal Mewnol y Sir.

Fel rhywun sy'n byw yn Edeirnion, fy mhryder uniongyrchol yw dyfodol Cysgod y Gaer.

Hoffwn gofrestru fy nghefnogaeth i'r argymhelliad cyntaf yn y ddogfen, sef i "ffurfio partneriaeth gyda'r budd-ddeiliaid perthnasol (gan gynnwys PBC a'r trydydd sector) i ddatblygu'r safle yn 'ganolfan gefnogaeth' gan gynnwys cyfleusterau gofal preswyl a gofal ychwanegol ynghyd â gofal yn y cartref allanol a gwasanaeth cefnogaeth i denantiaid Cynlluniau Tai Gwarchod lleol a phoblogaeth ehangach Corwen a'r ardal gyfagos."

Yn wir, rwyf o'r farn mai dyma'r math o gynllun y dylid hefyd eu datblygu ar gyfer Awelon a Dolwen. Hyderaf y gall cynllun o'r fath dorri tir newydd mewn gofal i bobl mewn oedran yng Nghymru a gosod mainc-nod i ddarprawyr ac awdurdodau eraill.

Yn gyntaf mae'n hynod bwysig cadw Cysgod-y-Gaer yn agored. Mae'r cartref yn darparu gwasanaeth Cymraeg i drigolion ardal sydd yn Gymraeg ei hiaith. Does dim disgwyl i'r sector breifat ddarparu gofal ym mamiaith y trigolion sy'n byw yn eu cartrefi. Gwyddom fod darpariaeth yn eich mamiaith yn gwneud person i deimlo yn fwy cartrefol a chyfforddus.

Yn ail daw'r rhelyw o'r staff presenol o gylchoedd diwyllianol Corwen, ac mae'r trigolion yno yn adnabod nifer ohonynt ers cyn mynd i fyw yno. Mae'r cysondeb yma yn rhoi sicrwydd a thawelwch meddwl i drigolion cartref gofal na ellir ei gael mewn cartrefi eraill.

Yn drydydd does yna ddim cartref gofal arall o fewn pellter rhesymol i Gorwen a chymunedau Edeirnion. O gau Cysgod-y-Gaer bydd disgwyl i bobl deithio llawer pellach i fyw ac i ymweld a'u hannwyliaid. Bydd hyn yn cynyddu unigrwydd, sef yr her mwyaf sy'n wynebu pobl mewn oed.

Mae yna alw am gartref gofal. Mae gan gartrefi cysgodol yn ogystal a medru byw yn annibynol eu rhinweddau, ond mae yna ganrhan o'r boblogaeth sydd angen gofal mewn awyrgylch cartref gofal, lle y medr y staff yno sicrhau fod pawb yn cael digon o fwyd, yn cadw'n gynnes, yn cael hylif ac mewn achosion achlysurol pan fo'r angen yn codi yn cymryd meddyginiaeth. Nid yw'r ddarpariaeth yma o ofal ar gael mewn awyrgylch tai cysgodol.

Ar y cwestiwn ehangach o ddyfodol Awelon a Dolwen, hoffwn gofrestru fy nghefnogaeth i opsiynau 3, sef unrhyw opsiwn arall. Yr opsiwn yr hoffwn i chi ei hystryried yw cyflwyno'r un datblygiad i Dolwen ac Awelon a'r hyn yr ydych yn ei gynnig i Gysgod-y-Gaer.

Yn gyntaf, mae'r un ddadl ynghylch darpariaeth ieithyddol, unigrwydd teithio ac adnabyddiaeth staff yn perthyn i'r ddwy gartref yma, o'r hyn a ddeallaf ar ol siarad gyda thrigolion y ddwy dref a'r cartrefi.

Serch hynny mae datblygiadau diweddar yn y sector Cartrefi Gofal wedi mynd i ddangos pa mor fregus ydy'r sector (neu'r 'diwydiant' yn ol rhai - nid diwydiant mo gofal). Rydym wedi derbyn rhybydd gan arweinwyr busnesau preifat sy'n darparu gofal yn ddiweddar; wedi gweld un cartref yn cau; a dyfodol un arall yn ansicr. Mae'r ansicrwydd yma, ynghyd a'r

anallu i sicrhau darpariaeth ym mamiaith y trigolion yn golygu na ddylid crebachu ar ddarpariaeth yr Awdurdo o ofal i'n henoed. Gwn y dywed swyddogion a deulydd portffolio'r adran hon yn y Sir fod y sector breifat eisioes yn darparu 90%+ o'r gofal i henoed y sir. Ond nid yw hyn yn reswm yn ei hun dros gyfiawnhau i'r Sir ddarparu hyd yn oed yn llai o ofal.

Mae swyddogion y Sir eisioes wedi dweud mai, yn ei tyb hwy, termau ac amodau ydy'r gwahaniaeth pennaf dros y gwahaniaeth mewn pris mewn gofal yn y sector breifat a gofal yng nghartrefi'r Sir. Ar bapur felly mae'n anodd cystadlu yn arianol. Serch hynny mae sicrhau termau ac amodau gwell i'r gweithwyr yn golygu gweithlu gwell, mwy dedwydd a bodlon yn darparu gwasanaeth gwell. Yn hytrach rydym yn mynd am ras i'r gwaelod - pwy fedrith gostio lleiaf, ac yn ei dro cael staff anfodlon sydd yn methu bod yn llwyr ymroddedig i'r gwaith am nad ydyn nhw'n cael eu parchu. Yn ogystal a hyn bydd lefel cyflogau newydd yn dod i rym i weithlu y sector breifat ymhen rhai misoedd, gyda'r Cyflog Byw newydd. Ydy hyn wedi cael ei ystyried gyda hyfywedd cartrefi gofal preifat y sir? Faint o gartrefi fydd yn parhau y tu hwnt i 2016? Byddai'n dda cael dogfen yn dangos ystyriaeth o hyn.

Diolch i chi am eich amser, a gobeithio y gwnewch chi'r penderfyniad cywir.

I am writing to relay my opinion regarding your consultation on the future of the County's Internal Care Services.

As someone who lives in Edeirnion, my immediate concern is the future of Cysgod y Gaer.

I wish to register my support for the first recommendation in the document, which is to "form a partnership with the relevant stakeholders (including BCU and the third sector) to develop the site as a 'support centre' including residential care and extra care facilities as well as external home care and support services to local Sheltered Housing Scheme tenants and Corwen and the surrounding area's wider population."

Indeed, I believe that this is the type of plan that should also be developed for Awelon and Dolwen. I'm confident that such a plan can be a breakthrough in care for elderly people in Wales and set a bench-mark for providers and other authorities.

Firstly it is very important to keep Cysgod-y-Gaer open. The home provides a Welsh medium service to residents of a Welsh speaking area. There is no expectation on the private sector to provide care in the mother tongue of the residents that live in their homes' We know that a provision in your mother tongue makes a person feel more at home and comfortable.

Secondly, the majority of the current staff come from Corwen's cultural circles, and the residents there knew a number of them before going to live there. This consistency gives assurance and peace of mind for care home residents that cannot be obtained in other homes.

Thirdly there is no other home care within a reasonable distance to the communities of Corwen and Edeirnion. By closing Cysgod-y-Gaer people will be expected to travel much further to live and visit their loved ones. This will increase isolation, which is the biggest challenge that faces older people.

There is a demand for a care home. As well as being able to live independently, sheltered homes do have their merits, but there is a percentage of the population that require care in a care home environment, where the staff there can ensure that everyone has enough food, keeps warm, has a drink and in sporadic cases, when the need arises, takes their medication. This care provision is not available in a sheltered housing environment.

On the wider question of Awelon and Dolwen's future, I would like to register my support for option 3, which is any other option. The option that I would like you to consider is to introduce the same development in Dolwen and Awelon as you're proposing for Cysgod-y-Gaer.

Firstly, the same argument about the language provision, isolation, travel and knowing staff is relative to both these homes too, from what I understand after talking with residents from the town and homes.

However, recent developments in the Care Home sector have shown how vulnerable the sector is (or 'industry' according to some - care is not an industry). We've received notice from private business leaders who provide care recently; one home has closed; and another's future is uncertain. This uncertainty, along with the inability to ensure the provision in the residents' mother means that the Authority's provision of care for the elderly should not be compromised. I know that officers and the County's portfolio holder will say that the private sector already provides 90%+ of care to the elderly in the county. But this is not a reason in itself to justify the County providing even less care.

County officials have already said that, in their opinion, terms and conditions are the main reasons for the difference in price for care in the private sector and care in the County homes. On paper therefore, it is difficult to compete financially. Nevertheless, ensuring better terms and conditions for the workforce means a better, happier and contented workforce that provide a better service. Instead we go for a race to the bottom - who can cost the least, and in turn having dissatisfied staff who fail to be fully committed to work because they are not being respected. In addition to this, the new pay level will come into effect for the private sector workforce in a few months, with the new living wage. Has this been considered with the viability of private care homes in the county? How many homes will survive beyond 2016? It would be good to see a document showing consideration of this.

Thank you for your time and I hope you make the right decision.

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Note:

Ann Jones and Mabon ap Gwynfor also attended and contributed to the public consultation meetings (in Rhyl and Corwen respectively).

Ann Jones requested that the Consultation period be extended a week to take into account the date of the public meetings in Denbigh. We extended the period a further week to meet this request.

Mabon ap Gwynfor also attended a meeting with Denbighshire Voice with the Head of Service and Lead Member.

The Case for No Change: submitted by Denbighshire Voice

This document has been developed to summarise the evidence that has not been considered before reaching the stage that a decision should be taken not to go to public consultation using a task and finish group with an overload of biased views, and no inclusion of lay and service users input to the group.

This case needs to go further than these two opening paragraphs, as the evidence in the case for change is strong and clear that no provision has been made when the privatisation goes pear shaped.

We have plenty of evidence that the Private Sector is not able to sustain a safe level of care and consequently we are witnessing the closure of Private Care Institutions one by one!!!

The Case for Change has no evidence of how they intend to provide care in emergency situations when the Private Sector is not an option, then it will be very expensive for the Public purse, and prove once more that this council is not capable of making responsible decisions re budget allocations.

Six main factors spell out the disaster that will follow the recommendations of the Modernising the provision of care.

1. The referral to the Social Services and Wellbeing (Wales) Act, which doesn't focus on the increasing amount of people who are not able to remain independent, and therefore need good residential 24 hr care.
2. The review of National research into the benefits of Extra care is not relevant to this case as every area and authority is different.
3. Local evidence of the authority failing to meet the growing demand for standard residential care and for day services in Denbighshire, due to the intentional winding down of services and refusing places in order to bulldoze the officers recommendations.
4. Local evidence of demand for existing Extra Care Housing in Denbighshire, alongside residential care not as a replacement. The demand for both is high.
5. The cost factor shows a lack of business plan and bad management, as a home running on full occupancy should be a good business venture, and no consideration has been given to the work of Friends of Dolwen etc who do so much for the welfare and support of the homes.
6. This report will make every effort to show that we are dealing with vulnerable people here and focus on their needs, not a balance sheet exercise to win points for an authority and council who are becoming a public disgrace.

The Social Services and Well-being (Wales) Act

This Case for No Change highlights the need to address continuing hard economic realities, shows that the Case for Change document does not give a greater freedom to

decide, and proves that we already have a consistent high quality which is not as freely available in the private sector.

The continuing care provided at Cysgod y Gaer, Awelon, Dolwen and Hafan Deg provide a service that doesn't need improving other than building maintenance and up grading.

National Research

The facts provided in the Case for Change (DCC) refers to low demand is not a true picture as there has been clever management of places to present evidence of decline.

Again the Case for No change has no doubts that Extra Care is an excellent amenity but as an option in the welfare of our older generation but not a replacement.

We have evidence that there still remains a great need for residential and day care in Denbighshire.

The argument is far greater than the costs to the public purse, from these hard working good living people we have inherited most of our excellent services and traditions today, and if they are a cost on the public purse, they deserve it.

Demand for Residential Care and Day Services.

It is a true fact that people supported by the council in residential care has been reducing, but we need to ask why. Because the closure of several privately run homes, and secondly people not being offered due to the intention to close the authority homes.

The argument in the Case for Change (DCC) is a report containing figures but no breakdowns or supporting evidence. It does not address the continuing need of our authority run homes.

It certainly needs an audit of the work and management of our homes and to convince us that our well paid officers are making every attempt to make sure these homes are good business ventures alongside providing the much needed care.

If the energy placed into driving this Case for Change was put into ensuring the future success of these excellent care homes, this consultation would never have needed to take place.

Time could then be well spent to move ahead with more excellent care projects which we stress again are much needed alongside our residential care homes.

Conclusion.

All of this information in this document has led us lay people but more importantly ratepayers and people to whom the county council have a responsibility to listen.

To form a view and provide evidence that standard residential care is still needed to meet the needs of frail elderly people, who live in fear of arriving in privately run care homes, who more often than not are not up to the standard a client could expect.

The focus of provision should be as follows.

- Where an individual's needs can be met when the Social Services are allowed to make the appropriate referrals and provide a service to all elderly people having no bearing on what their financial situation is.
- Where an individual cannot be cared for safely in their existing home or Extra care Home and the demand for this is much higher than in Extra Care.

The offer from the Council should therefore be in Awelon, Cysgod y Gaer, Dolwen and Hafan Deg.

There is no Case nor sufficient evidence that the Council have researched this matter fully, and with the proposal to develop more Extra Care Sites and EMI these will compliment our existing excellent care homes, not replace them.

The Council needs to re visit its Corporate Plan to allocate Capital Funding to secure the future of these Care Homes and bring them up to a standard that are fit for purpose.

Mae tudalen hwn yn fwriadol wag

Report To: Scrutiny Chairs and Vice Chairs Group

Date: October 2015

Lead Member / Officer: Bobby Feeley / Phil Gilroy

Report Author: Anne Hughes-Jones

Title: Quality monitoring of External Care Services

The following is a short report on quality monitoring of the services we commission with the Independent Care Sector.

During the quarter July, August, September 2015 the Regional Hub was disbanded and the 26 care homes they had been responsible for monitoring became the responsibility of the Denbighshire Contracts Team. This additional workload was unmanageable unless the monitoring role could be re-configured. It became obvious that automatic 12 monthly reviews for all providers were not achievable. We have decided to move to an 18 month programme of formal contract review visits and reports with a risk-based approach in order to prioritise appropriately. A monthly meeting is being held to prioritise the work to ensure that providers which are causing any concern at all are monitored more frequently as the need arises. This process will be trialled for a 6 month period.

In the meantime, we can advise that:

Number and type of provider	Monitoring Activity	Outcome
38 Residential and nursing homes	<ul style="list-style-type: none"> 36 formal contract reviews have taken place in the last 18 months Reviewing Officers carried out 307 visits to 38 homes in the past 12 months. No data available for Q1 and Q2 of 2014 	4 care homes are currently under escalating concerns
26 Care homes previously monitored by the regional Hub	<ul style="list-style-type: none"> Care reviews for residents, from all LAs, feeding into monitoring process 10 formal Quality Monitoring contract reviews carried out in the last 18 months 	None of these care homes are currently under escalating concerns.
10 providers supporting 48 Community Living Schemes	<ul style="list-style-type: none"> Weekly visits at each project are taking place with more detailed monitoring visits taking place every quarter. 7 providers have had formal contract review within the last 18 months 	None of these providers are currently under escalating concerns.
34 Domiciliary Care providers:	<ul style="list-style-type: none"> Reviewing Officers carried out 173 scheduled Care reviews for care provided by 18 separate agencies based within Denbighshire and 27 	2 domiciliary providers are under regional escalating concerns.

<p>20 currently used by DCC</p> <p>10 monitored under CL above</p> <p>4 Out of County</p>	<p>Care Reviews for care provided by 5 separate agencies based outside of Denbighshire. Within the first 2 quarters of 2015. No data is available prior to this. These reviews all feed into the monitoring process</p> <ul style="list-style-type: none"> • 12 agencies have been subject of formal contract review over last 18 months • Out of County providers supporting fewer than 3 service users are subject to desk top monitoring using information from neighbour authorities and our own care reviews. 	
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Joint monitoring/inspection visits continue to take place with CSSIW Inspectors and with Health colleagues where appropriate.

Staff carrying out care reviews are regularly feeding back to the Contracts team in respect of all externally provided care provision.

Questionnaires are sent to service users to ask their opinion of the services they receive.

Reports from service users are positive in response to the Contracts questionnaires, Carer Assessor conversations and to the quality questionnaires sent by our Customer Connections Team.

There were two complaints in respect of the quality of one domiciliary provider during this quarter. Both complaints are informing the ongoing local and regional work with the provider under Escalating Concerns.

Age Connects Speak Up project continues to provide feedback to the Contracts team for those homes they visit. They have had problems with volunteers but are actively recruiting again and have an action plan in place to improve the service.

Suggestions from staff in DCC residential homes and day centres

There is significant overlap in the feedback from each centre; however the responses are divided into the schemes which provided them as there are also significant variations.

AWELON:

Money saving suggestions includes the following:

1. Increasing in-house training would save on travel costs and result in more staff trained in one session.
2. Purchasing food/supplies from different sources, e.g. when on offer etc. would reduce costs.
3. Similarly, if the manager could 'shop around' for maintenance/repair companies they might be able to arrange cheaper rates.
4. Installing solar panels and automatic lighting would reduce electricity bills in the long run.
5. Keeping one/two of the 3 homes, (at least 26 -- 30 beds) and day centre Looking to voluntary redundancy/retirements, to then have a full staff team of remaining staff from 3 homes, thus keeping the skills and dedication of the staff DCC have invested so much in. This would also ensure that a high standard of care could continue for those who need it in the community of Corwen/Ruthin Denbigh for permanent and for respite stays.
6. Lowering the criteria for residential admissions which would ensure that beds were full.
7. Providing more respite care would enable people to remain at home longer as this support is not only enabling for the temporary resident but significantly for their carers
8. Similarly, reinstating full day care services for people in the community would provide support for the person and their carer to enable them to remain at home longer
9. Further liaison with health and other partners might enable appropriate input from health to provide care/respite after hospital stay which would prevent bed blocking.
10. Managing with only 1 minibus

In general terms they suggest:

- A. That money is wasted on reablement staff with no work hours
- B. Some staff members propose that the 1st day's sickness absence could not be paid, whilst others suggest that they could not be paid for 3 days sickness absence. *(Unions are not in favour of these proposals however)*

Staff members wonder how private residential homes seem to make a profit and run when DCC are not profit making and thus are looking to close.

DOLWEN:

General suggestions from staff at Dolwen include the following:

1. Older people with learning disabilities could benefit from both day care and residential care services. This would be a good example of different parts of the service working together.
2. The creation of a dementia unit in Dolwen would utilise the recent, excellent staff training on dementia care and awareness and could provide a service for clients with dementia on either a respite or permanent basis as necessary. Since Dolwen is made up of 3 units and a day centre, 1 unit could be utilized for residents with dementia. They have all the facilities needed for this specialist care. The staff team at Dolwen has enthusiasm and many ideas to enhance client care and well-being during their time at Dolwen.
3. A reablement unit would be ideal for Dolwen as, lately some people from Denbigh and Llandyrnog have had to use the Cysgod y Gaer unit. Due to lack of transport, friends and family have been unable to visit and to help with this. A reablement unit in the centre of the county would presumably help with hospital discharges too.
4. (linked to 3) Over the past few months, day care has been involved in reablement support, generally for 6 or 12 weeks for people living in the community. Staff members suggest that this could be extended so that more people could benefit from this service. They have examples of individuals who have been issued with mobility equipment which they have not been able to make much use of, since they have not left the house. These people might benefit from a shopping trip as part of their reablement. They can be encouraged too, to use help available at Dolwen to learn to make use of serving dishes and small tea pots/jugs and in some cases kettles/microwaves.
5. Some patients at Ysbyty Glan Clwyd are delayed from being discharged because the services are not yet set up to provide the help needed to support them during their recovery period, e.g. homecare, food etc. Dolwen's kitchen could help to provide 'hot balanced meals' for a period of time, perhaps 6 weeks to help with this issue.
6. Staff members note that the biggest problem is the low number of referrals and reflect that this may be influenced by the uncertainty over the future of DCC residential homes.
7. Again a staff member suggests that for DCC staff as a whole, the sick pay entitlement could be reduced from 6 months to 3 or even 2 to save money.
(Unions are not in favour of these proposals however)

Day care

Staff point out that that service users attending the day care centre benefit greatly from each other's' presence. Those who are more able encourage those who are less able and thereby help themselves. They join in exercises recommended by physio therapists and are able to make suggestions for useful exercises

CYSGOD Y GAER:

Cysgod y Gaer is currently divided into two separate sections, a reablement unit upstairs and a residential unit downstairs. The 15 rooms downstairs are full and have been for some time with 2 referrals pending assessment.

The beds in the reablement unit have not always been filled. This may be influenced by staff sickness in team who refer and support those could use this service.

Staffing is tight in the home as they have decided to manage without a deputy given the uncertainty over the future. It has been suggested that the re-ablement function is looked at again when considering the future. Whilst acknowledging the difficulties in assessing staffing requirement whilst referrals are intermittent, up to 3 re-ablement staff have made up hours downstairs in the residential wing on some occasions. Concurrently respite residents assessed as ready to go home once a care package can be arranged are unable to do so because they are waiting for these packages, sometimes for 3-4 weeks.

They suggest that a slightly different arrangement for the South of the County is considered in which the re-ablement staff could be flexible in their role and could assist with some community support work when other duties allow. .

With some care agencies pulling out, the difficulties highlighted above will be an ever increasing problem but that using Cysgod y Gaer as a hub they could be significantly eased.

HAFAN DEG:

Staff at Hafan Deg made the following suggestions:

1. Building from Day Care to Hafan Deg Enablement centre.
2. Longer working days 8:30 to 18:00pm, open Evenings and Weekends.
3. Hafan Deg is a purpose built building and will accommodate individuals with physical or mental disabilities it already has a fully trained team; it would be a crying shame to lose such asset to an ageing community here in the north.
4. Dementia specialist Centre
5. If the building was used to its full capacity it could pay for itself with no problem 70 individuals divided over 5 days or possibly 7 one day a week at the maximum £60 a week = £218,400 (that does not count those Service users who would require more than one day a week this could increase income by more than £62,000 plus income from other groups using centre Deaf and Blind, Lip reading classes, Deaf club, Residents coffee morning, Computer Classes, residents bingo and activity evenings, sign language NEWCIS drop in centre). It would be a shame for all these essential groups to lose their building also.
6. Private funding and Grants.
7. Hafan Deg covers a large area and with accessible transport provides a very high quality service to older vulnerable people in the area of Prestatyn, Meliden, Dyserth, St Asaph, Bodewyddan, Rhuddlan and Rhyl. This is a large area to cover since the closure of Llys Nant Day Centre last year.
8. Sick Leave not paid for 1st 3 days
9. More structured outcome-focussed activities work with S/W to keep them informed on activities/trips
10. Enablement Kitchen: This will help staff to enable Service Users to learn how to use kettles, microwaves, small tea pots etc. and to support Service users in making small, simple meals.
11. Support for individuals with their personal care.
12. Hafan Deg is more than just Day Care it provides a home from home where people can make lifelong friends. In some cases this slows down people's illnesses and keeps them out of an already over populated NHS.
13. The fully functional kitchen could be used as a drop in for individuals needing support with nutritional meals being provided.

Staff Engagement Events

The Head of Service and the Community Support Services Senior Leadership Team held four engagement events for community support services staff on the 13th and 25th January 2016. A total of 302 staff attended the four events. As part of each event, a workshop was held to discuss the options being considered for the future of the council's in-house care services, and to gather feedback from the wider staff group in Community Support Services. The following is a summary of the main themes and comments expressed by staff during those four workshops. The comments from each event have been collated and presented together in relation to each of the four in-house care services.

Hafan Deg:

Most staff appeared to feel that Option 1 is the best option. A number of staff referred to the importance of using all the resources there better, ensuring that it benefitted more people in the future.

The following comments/suggestions or questions were posed:

- Is there a more cost effective option regarding running of the building - could services be combined with existing services in the Rhyl area available to learning disability services i.e., older people have access to day care centres.
- Weekends should be included to expand services.
- Should be not for profit.
- Worried about wider use because of parking (could they use the football club parking facilities?).
- Should be a community integration facility, supporting communities & isolated population.
- Could develop a service user led CIC to deliver this moving forwards?
- Could be intergenerational with contributions from younger people - modern and flexible changes needed.
- The service offered seems to go well with the new social care act. Works particularly well with people who may soon need full care.
- The service could be expanded to benefit 20 or 30 people a day. We could take self-funders.
- Are panel re-directing people away from the Hafan Deg service?
- Isolation should be part of criteria - so again service is a good fit.
- Building could be used for EMH project workers.
- We could provide a more activity based centre. Could it be used as a talking point, should be able to be a multi-functional community hub.

- Needs to come into 21st century and not be left behind. Wider use of activities, it's under used.
- Option 1 is best. At present quite an expensive service but not getting much for your money. Need to remarket as 21st Century day centre. Opportunity to recreate revenue i.e. laundry service. More staff on duty than service users, poorly managed.
- Utilise all the building, involving wider community volunteers.
- DCC continue to own, provide services - e.g. hairdresser, room rental, day centre, laundry services. All charges so that money contributes to running costs.
- Option 1: Advantages- people can still attend, Staff will still work at site - but assumes suitable provider available. Current service only 3 day so opportunities to expand / be more flexible - made for all ages in the community.
- Option 2: People will become isolated and disengaged, staff will lose jobs.
- Option 3: Explore possibility of using extra care in Rhyl as a venue for day activities.
- Like idea of community hub - Could be so much more than it is.
- Option 1: Creativity required.
- Good resource, voluntary agencies to be involved as a resource centre. Could become a community centre for all ages. (Monday clinic, Parent& baby groups, youth club, cubs, scouts etc Slimming clubs, benefits ETC).
- Important service - Inclusion, prevents need to go onto more formal services.
- Option 1 is preferred, however have to be aware of added starting in 3rd sector and possible cherry picking (could be solved by service specifications)
- Positive-community groups could use early intervention.
- Concerns - Every group after money.

Dolwen

Several staff expressed a preference for option 1. However the following comments / suggestions or questions were posed:

- Option 1 preferred - with provisions for reablement as a clause for new owner.
- EMI Nursing care units will still be needed though DCC cannot offer these.
- Being dual registered would be a big advantage. It would be good to developing community support services alongside extra care housing development. Developing reablement further.
- Dolwen and Cysgodfa could work more closely, e.g. by making Cysgodfa into extra care housing and using Dolwen as a base.
- Could Dolwen be used as intermediate care for patients leaving hospital?

- Day care centre could be 5 days a week again.
- Option 1 might be the right choice for those who would qualify. However this is not nor can be the preferred option for all staff, residents and day clients.
- Option 2: would mean residents being moved to places against their will to places they don't know. (Choice) Day care would disappear.
- Option 3: Join forces with the health service to provide for the section of users who currently block beds in hospitals and increase occupancy of residential homes.
- Utilise the building in other ways.
- Increase charges for services provided.
- EMH is a good option (x2)
- Option 1 appears most appropriate, with social clubs using day rooms.
- Extra care housing, Sell part of land - keeping structure to develop as EMI/Nursing DCC owned home. Including DCC staff to provide in house service.
- Option 1: Advantage - recognised need for a specialist provision in county - needs to be linked to the development of ECH in Denbigh.
- Option 2: Disadvantages - goes against promise of council to not compulsory moving people from residential care homes.
- Option 3: Include EMI provision with in the new ECH development in Denbigh, freeze admissions, transfer people to new development when completed. Sell site.
- Privatised day centre same as Hafan Deg.
- DCC to develop as EMI same as CCBC did.
- Would like to see it used for EMH residential and respite. Would like a provision for day care especially to support informal carers.
- Other option: Intermediate care? Contribution from health.

Awelon

Again a number of staff expressed support for option one. However the following comments/suggestions or questions were posed:

- Within Option 1 - propose developing reablement with in the extra care facility, maintaining current services and further developing community support.
- Need more flats and day care facility.
- Extra care with facility.
- Build extra care for EMI on Awelon.
- Extra care provision is needed for this site.

- Concerned for people remaining and their wellbeing under option 2. How would this be sensitively managed?
- Reference to two tenants moving from Llys Awelon to Awelon because they could not cope at the former due to mental health issues (...but the familiarity of Awelon made it suitable for them).
- References to the advantages of shared catering between Awelon/Llys Awelon in terms of both finance and social integration.
- References to the fact that Awelon effectively provides nursing care though it is not registered to do so.
- Keep as residential / EMI expand day care as rural area has a few community facilities chargeable, develop existing reablement service.
- Advantages of option 2 - Vulnerable people do not have to move. Disadvantages - Could be costly to run two care teams.
- In future change residential to EMI.
- Prefer Option 2: With step up or step down facility - Keep half of Awelon for extra care and half for standard residential, respite and rehabilitation from hospital discharge patients.
- Consider bringing back private day centre and meals on wheels.
- Will the building and carers be kept on to cater for a handful of people?

Cysgod y Gaer

A strong preference for Option 1 was expressed with the following additional suggestions:

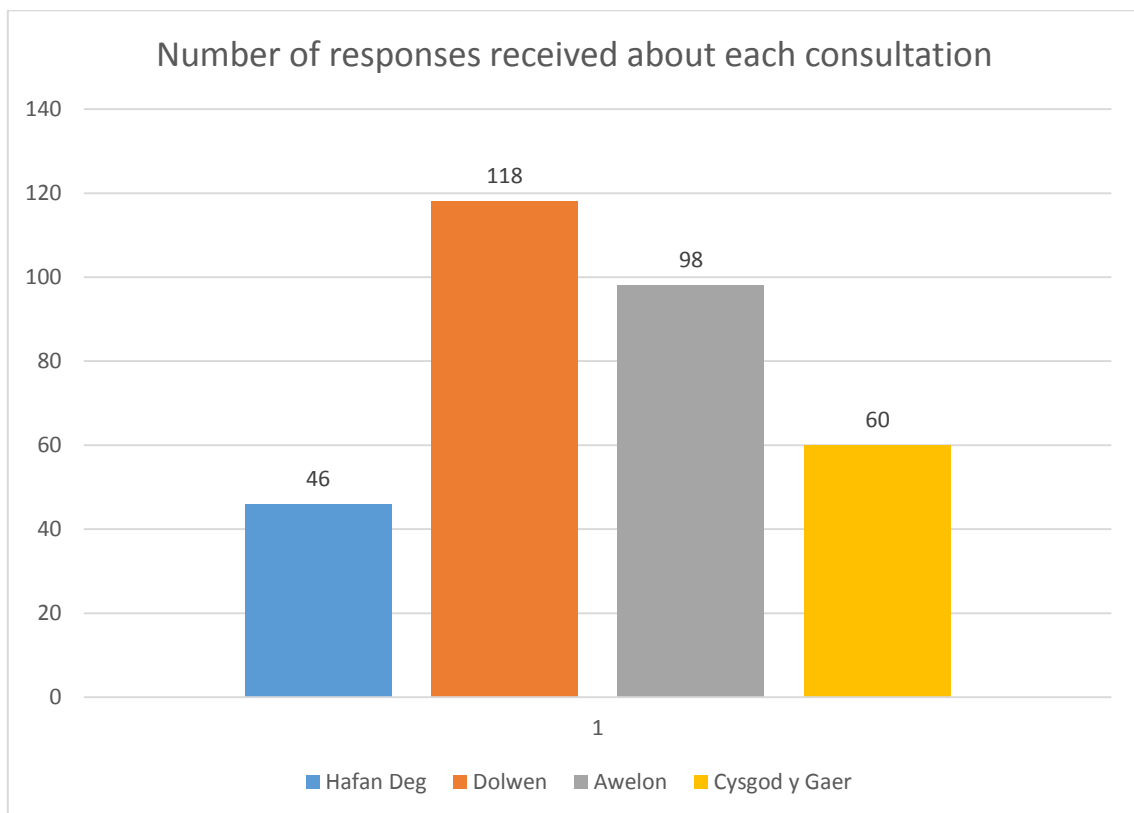
- Option 1 to include hot meal delivery again.
- Homecare needs to cover all outlying areas which are problematic.
- Recruitment of domiciliary care has historically been difficult. Volunteers, working as a community, developing support and relationships across age groups would help.
- Keep day care and reablement section. Work with BCU regarding nursing care.
- Reablement unit should be better used.
- Extra care facility should maintain beds for respite care or if residential require Hub for in house services and 3rd sectors.
- Support hub in Corwen.
- Out of county protocols for existing schemes e.g.:- Bala, Wrexham etc. should be considered.
- Regional approach need for rural areas in order to maintain local connections.

Demographic profile of people who submitted consultation responses

Note: many people responded to more than one consultation using the same consultation form, and not all people who submitted a consultation response answered every question. Therefore some of the number and percentages presented in this appendix may appear not to add up.

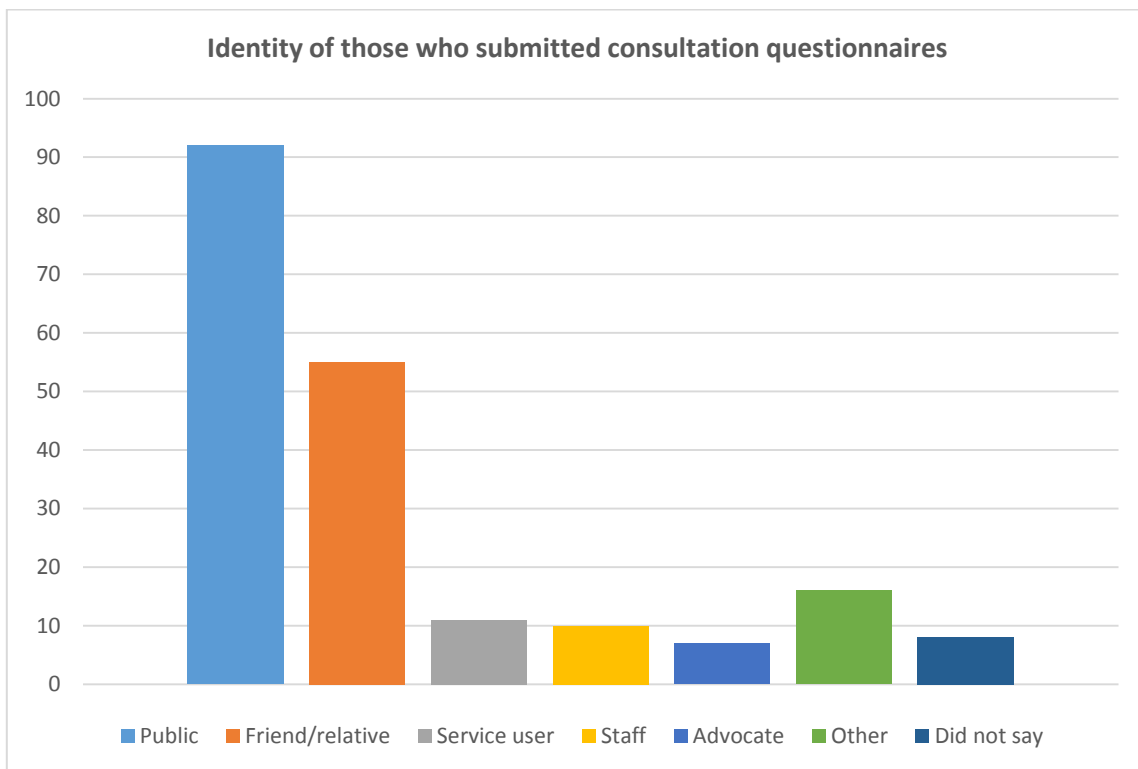
1. Number of consultation responses received about each of the four establishments

- More people responded to the consultation about Dolwen than any of the other 3 consultations. Overall we received the following responses:
 - **118** responses related to **Dolwen**
 - **98** related to **Awelon**
 - **60** related to **Cysgod y Gaer**
 - **46** related to **Hafan Deg**



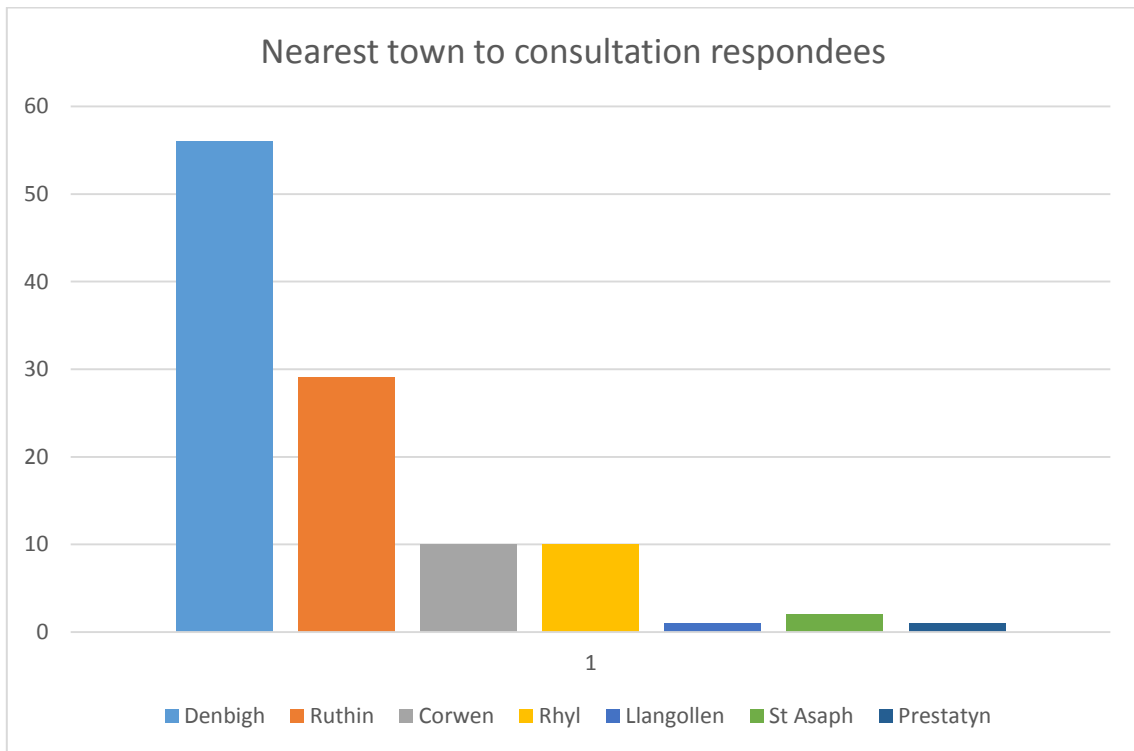
2. Identity of those who submitted consultation questionnaires

- The majority of those who answered this question identified themselves as members of the public, although many were friends or relatives of current service users.
 - 92 were from members of the public
 - 55 were from friends or relatives of service users
 - 16 identified themselves as 'other'
 - 11 were from service users
 - 10 were from staff
 - 8 chose not to say
 - 7 were from advocates of service users



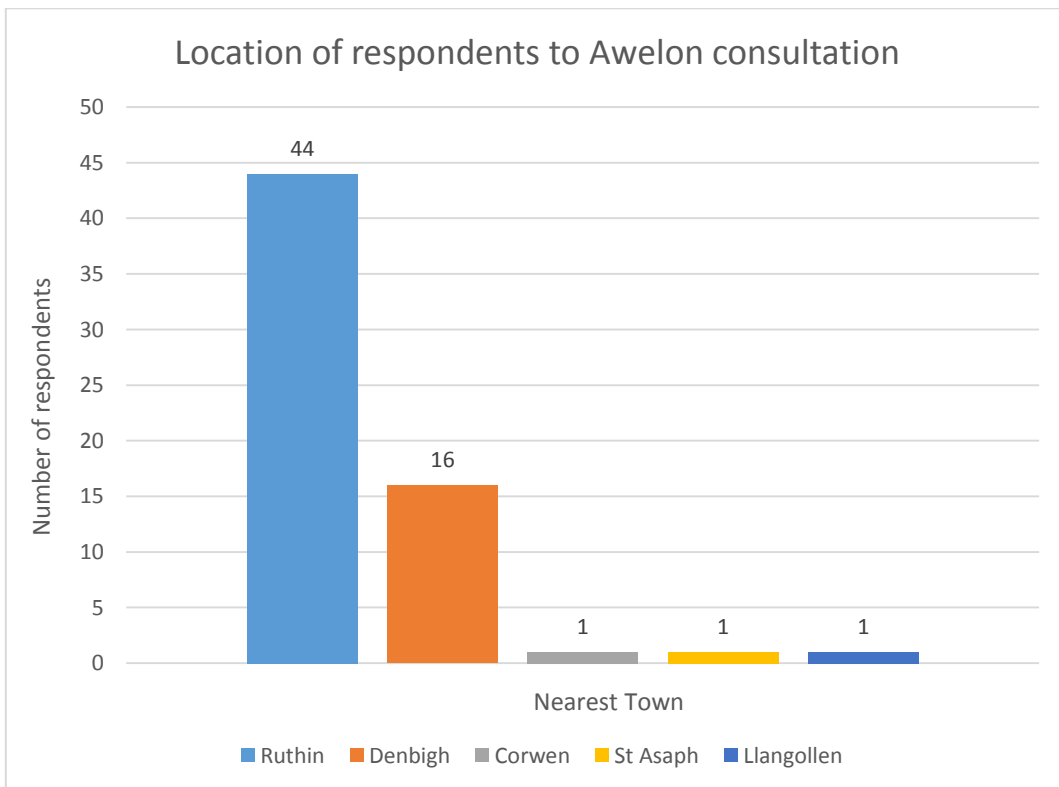
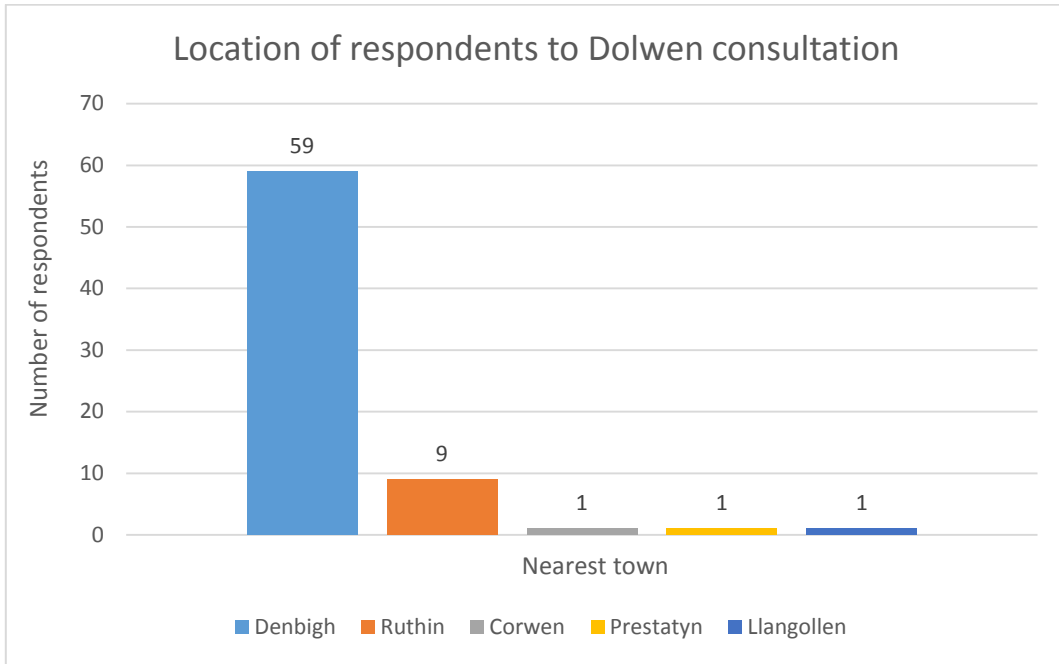
3. Where respondents were from

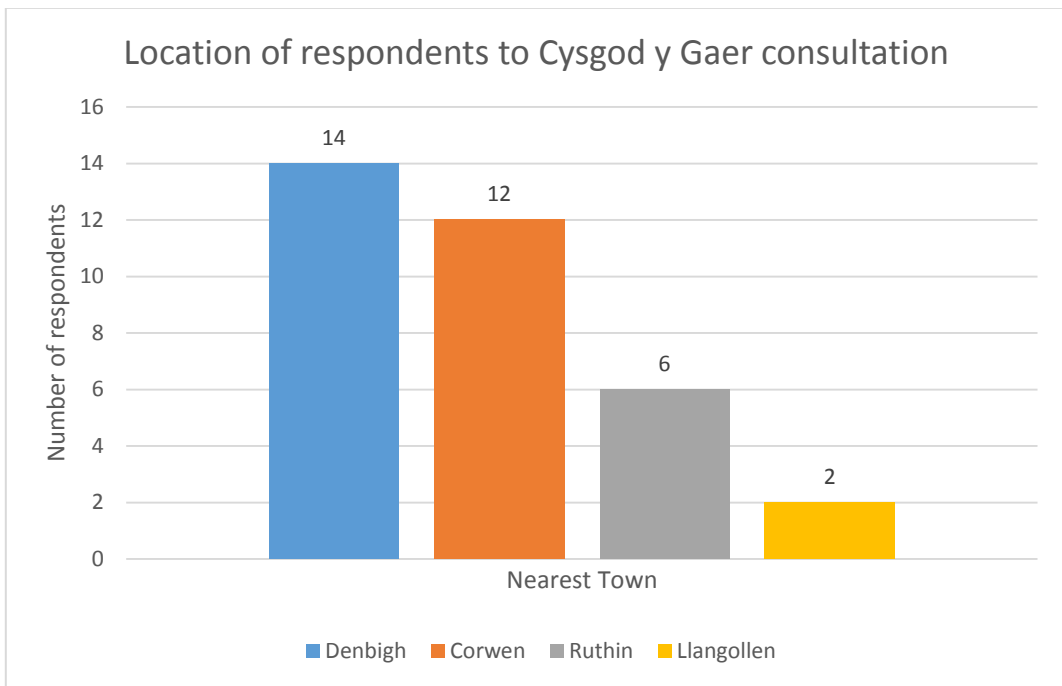
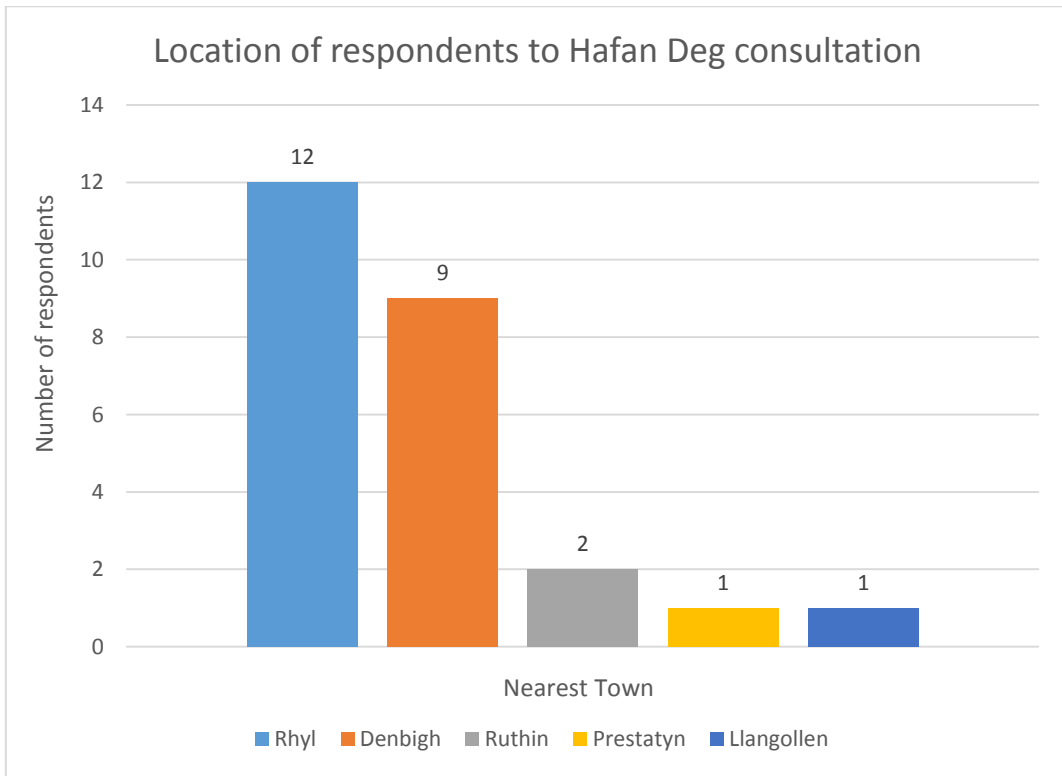
- In terms of location, the majority of respondents who answered this question live in (or near to) Denbigh. This may partly explain why more people responded to the consultation about Dolwen than any of the other 3 consultations.
 - 56 lived in or near Denbigh
 - 29 live in or near Ruthin
 - 10 live in or near Corwen
 - 10 live in or near Rhyl
 - 1 lives in Llangollen
 - 2 live in St Asaph
 - 1 lives in Prestatyn



4. Location of respondents to individual consultations

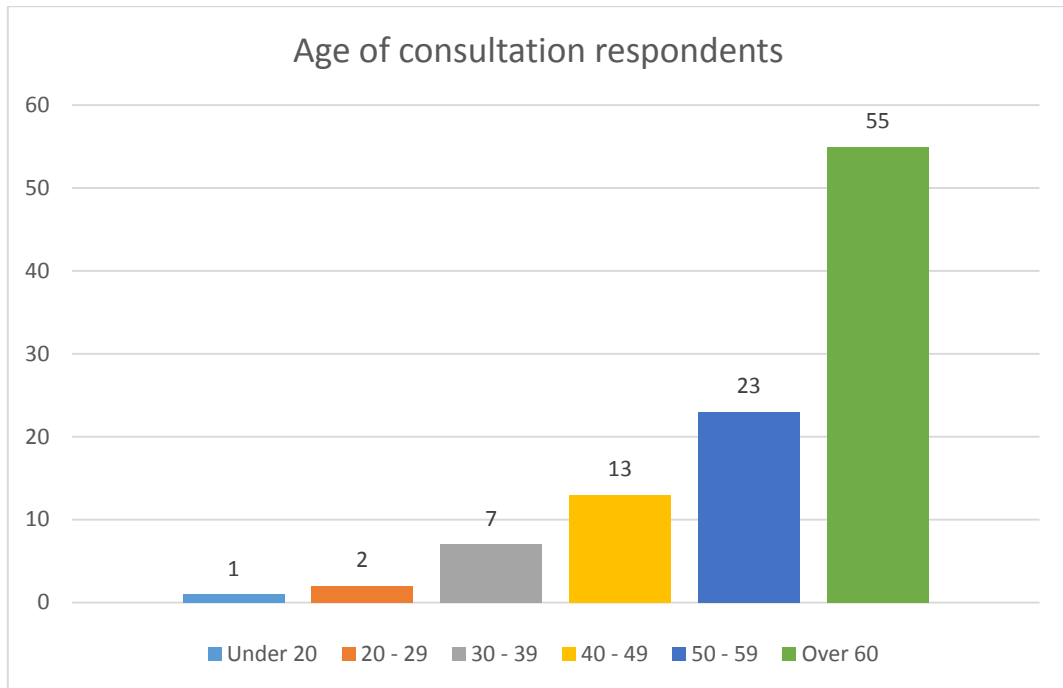
The following charts give an indication of the where those who responded to each consultation live, bearing in mind that not all respondents gave this information and that many have responded to more than one consultation. Not surprisingly, most people have responded to the scheme to which they live nearest. The only exception is for Cysgod y Gaer where numbers of respondents were low but the highest numbers were from the Denbigh area, many of whom responded to all 4 consultations.





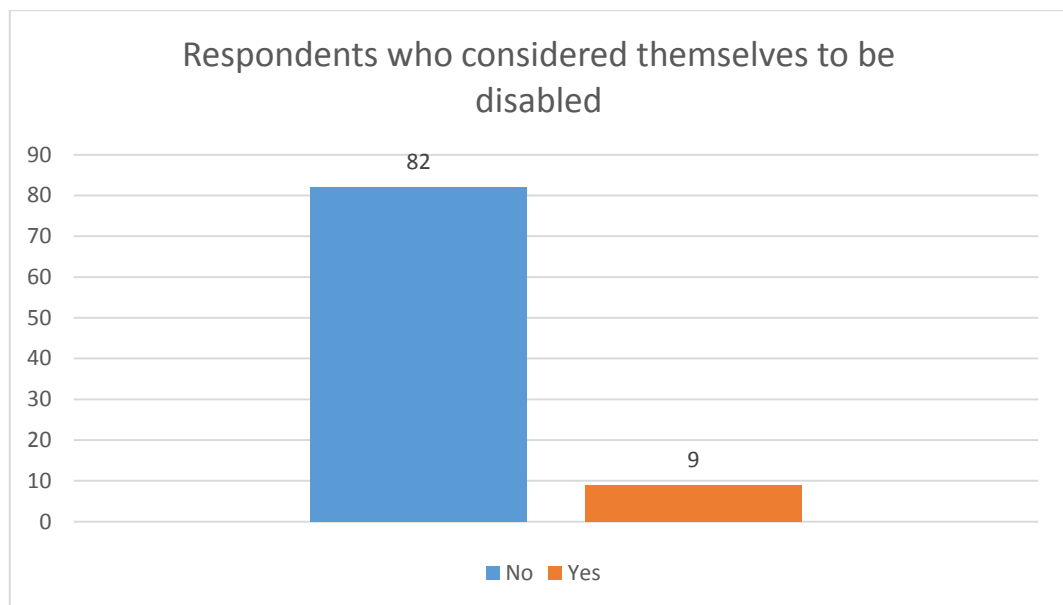
5. Age of consultation respondents

- The majority of those who answered this question are over 60 years of age.



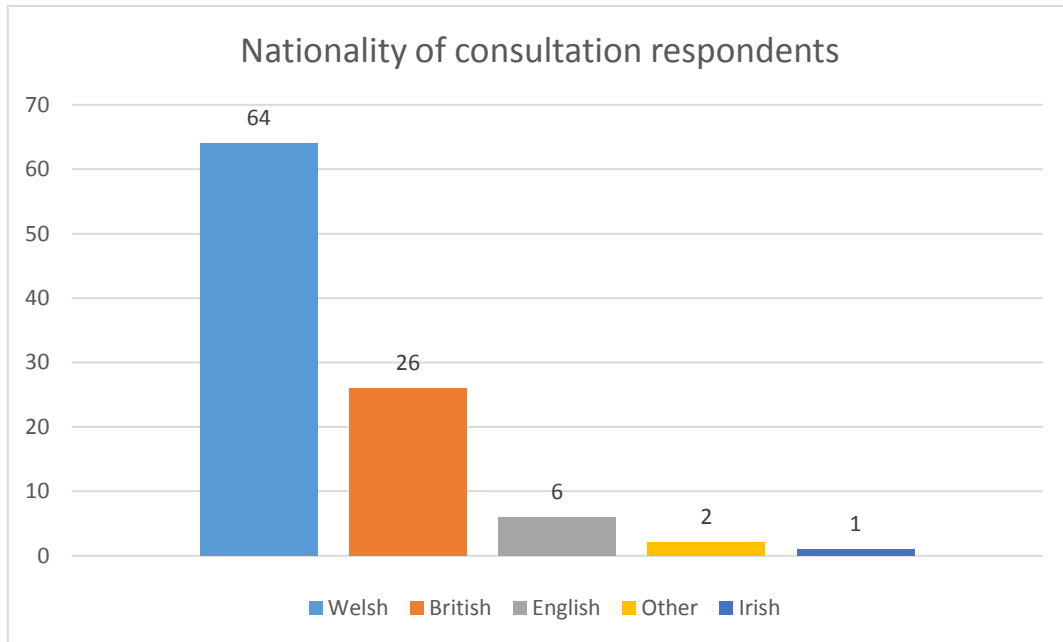
6. Number of respondents who considered themselves to be disabled

- The majority of those who answered this question did not consider themselves to be disabled.



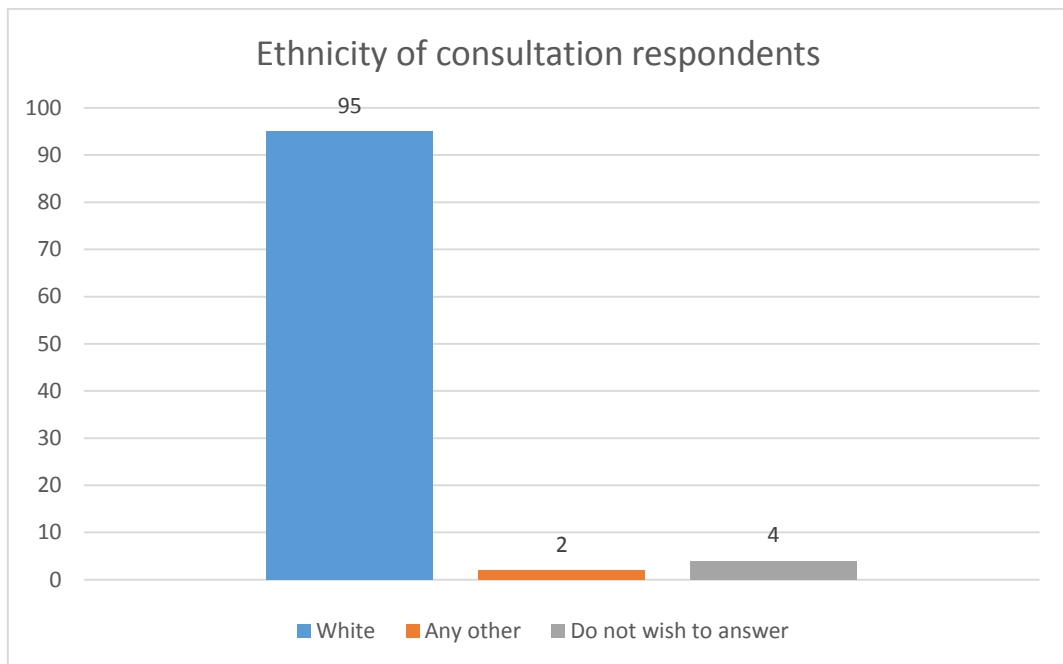
7. Nationality of consultation respondents

- The majority of those who answered this question identified their nationality as Welsh.



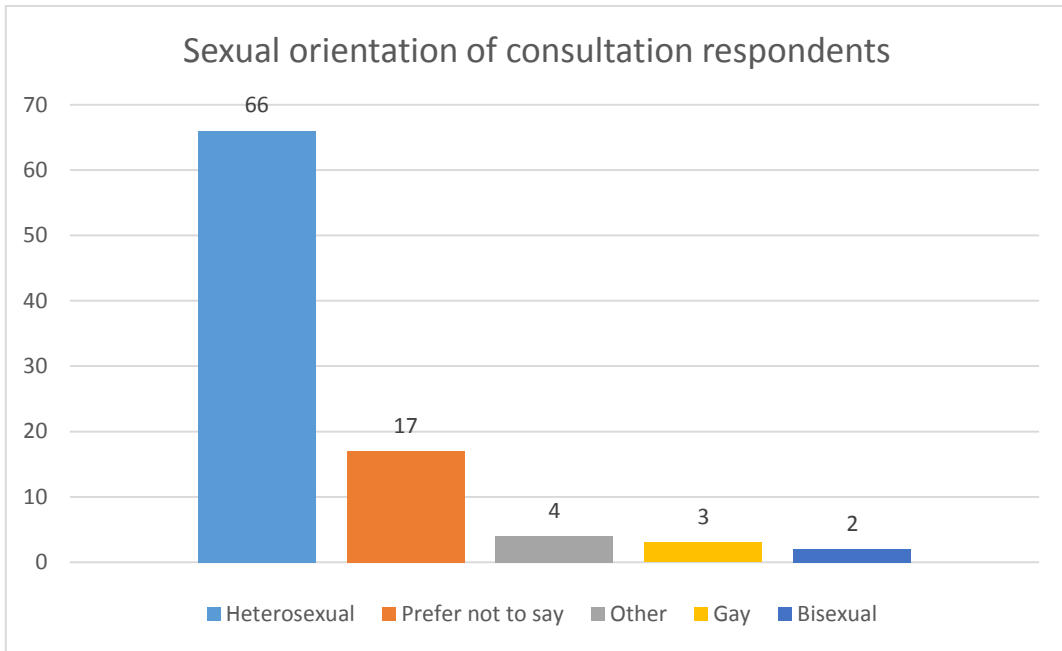
8. Ethnicity of consultation respondents

- Not surprisingly, given the demographic profile of Denbighshire, the majority of those who answered this question identified their ethnicity as white.



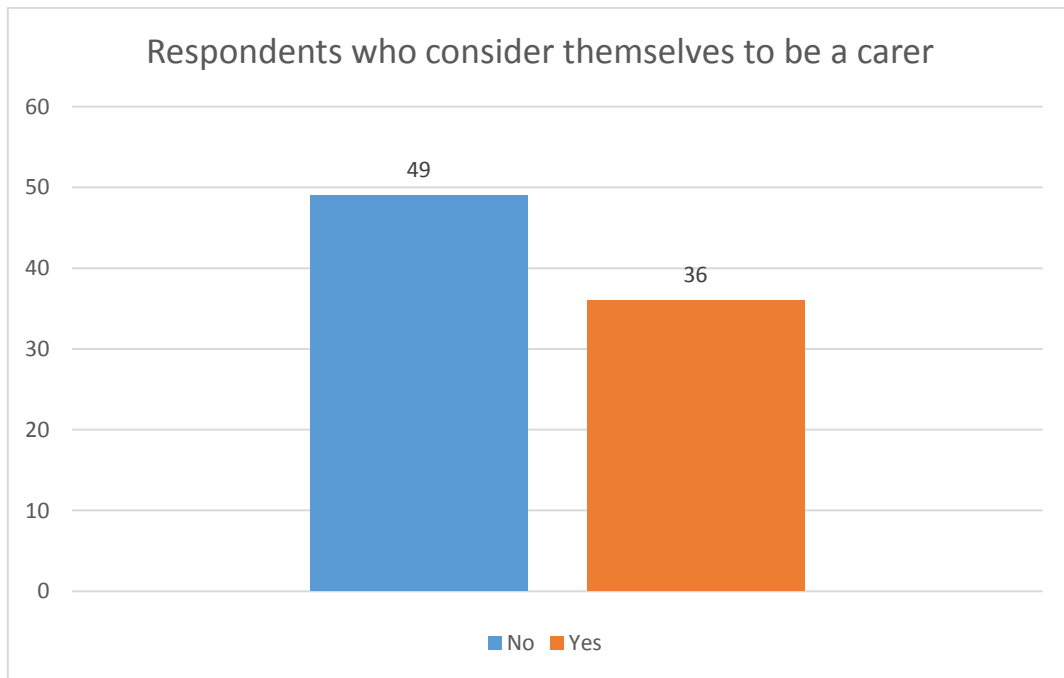
9. Sexual orientation of respondents

- The majority of those who answered this question identified themselves as heterosexual



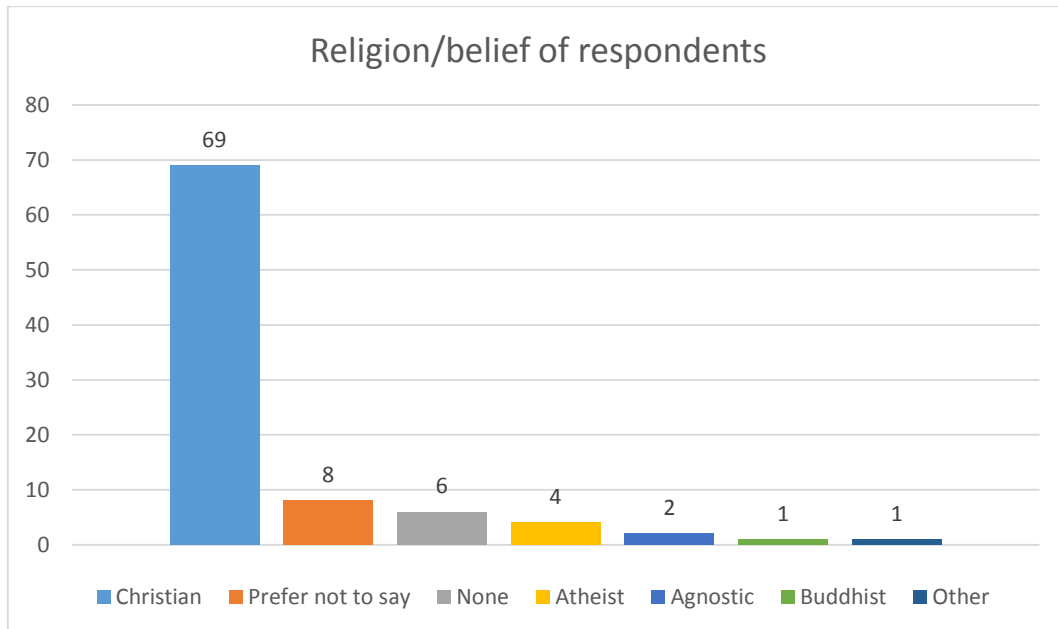
10. Number of respondents who considered themselves to be a carer

- The following gives an indication that a significant proportion of those who responded consider themselves to be carers.
- Of those who consider themselves to be carers, 11 people stated that they care for children under 16 years of age.
- Of those who consider themselves to be carers, 33 people stated that they care for a sick and/or elderly friend(s) or relative(s).



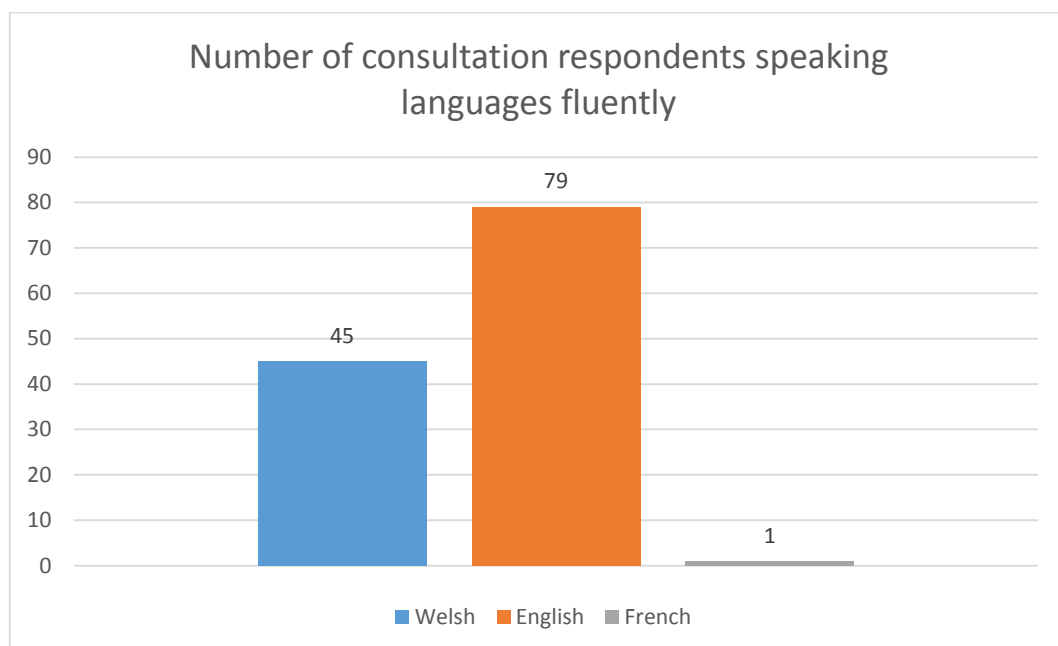
11. Respondents and religion/belief

- The following gives an indication of the religion/belief of those who responded to this question.
- The majority of those who answered this question identified their religion/belief as Christianity.



12. Language ability of respondents

- The following gives an indication of the numbers of those who responded to the question asking what languages they speak fluently
- More than a third of those who answered this question are able to speak Welsh fluently



Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 20th May 2014, Conference Room 1b, County Hall, Ruthin

Meeting commenced at 8:30am

Present: Councillors Raymond Bartley, Richard Davies, Meirick Lloyd-Davies and Win Mullen-James

Apologies: Councillors David Simmons and Huw Williams

Also present: Nicola Stubbins (Director of Social Services); Phil Gilroy (Head of Adults and Business Services); Rhian Evans (Scrutiny Coordinator) and Karen A Evans (Democratic Services Officer).

1. Introduction

Head of Adults and Business Services welcomed everyone to the meeting and explained that the Task and Finish Group was established as a result of Performance Scrutiny Committee's consideration of a recent report on member visits to in-house social care providers. Whilst the report was a positive one, questions were raised with respect to whether the Authority could continue to provide this type of service in future in the light of financial pressures and a national shift in emphasis from dependency services to services which promoted and assisted independent living.

2. Appointment of Chair

Councillor Meirick Lloyd-Davies was appointed as the Group's Chair.

3. Terms of Reference

The draft Terms of Reference for the Group had been circulated to members ahead of the meeting. These detailed the purpose and scope of the review to and the proposed timescales. Officers answered members' questions on the draft document and members agreed the terms of reference and scope of the review.

4. Objective of the review

Background information outlining the context of the review (new legislation and reducing cost whilst improving quality and outcomes) had been circulated to the Group prior to the meeting. The document included information on the population profile for Denbighshire, unit costs and activity information relating to the Council's residential care, day care, extra care, community living schemes and work opportunities services as of 1st April 2014. Capital and maintenance costs of the Council's social care establishments were not covered in the document. Members were advised that the objective of the review was to explore the sustainability of the Council's delivery of adult social care services in future. Officers explained that the Council's statutory duties in the area of adult social care was to assess the individuals' care needs; delivery of services to

Appendix S: Task & Finish Group notes

meet identified needs did not have to be undertaken by the Authority, they could be commissioned from the private sector or other from organisations. The unit costs for delivering care services in-house were higher than the private sector because local authority employers were bound by national pay and terms and conditions agreements. Transportation costs for people with learning disabilities to access work opportunities was also becoming unsustainable. Consequently a review of the services at this moment in time was appropriate, as the Council faced unprecedented revenue budget cuts for the foreseeable future and current and pending legislative changes focussed on reablement services to promote independence rather than institutional care or services that encouraged dependency.

It was emphasised that the ultimate aim of the review was to deliver services which met users' needs in a different way but without detriment to the users. Services need to become more outcome focussed and be able to prove that they were improving people's lives. By disinvesting in some services and investing in others the Council should be able to meet its statutory obligations whilst also delivering the corporate priorities of 'making sure that vulnerable people are protected and able to live as independently as possible' and modernising the Council'. Whatever adult social care would look like in future dignity and care had to be the basis on which it was built and wherever possible continuity of care should also form a central part of any future service.

Members were advised that there were now private providers in the market delivering the majority of social care services which the local authority currently provided.

5. Proposed Work Programme

The proposed timescale and draft work programme for each meeting as listed in the terms of reference document was agreed.

6. Dates of future meetings

The following dates and times were agreed for future meetings of the Group:

10 June 2014 at 2pm
24 June 2014 at 2pm
2 July 2014 at 2pm
7 July 2014 at 9.30am
16 July 2014 at 9.30am

With a possibility of giving a verbal report to Performance Scrutiny Committee at its meeting on 17 July, prior to the Adults and Business Services' Budget Workshop on 30 July 2014.

7. Confirmation of information required for the next meeting

- Information on unit costs for each of the listed social care services at full occupancy
- Information on actual occupancy of the services over that last 3 years
- Information on the actual costs of comparable independent and 3rd sector services
- Information on Adult and Business Services' usage of agency staff and corresponding unit costs over that last 3 years
- Councillor Julian Thompson-Hill as Lead Member for Finance and Assets to be invited to attend as a witness for meeting 2
- Councillor Bobby Feeley as the Lead Member for Social Care (Adults and Children's Services) to be invited to attend as a witness for meeting 3
- Information on how the 'Dial-a-Ride' service is funded
- Information on residents use of comparable services delivered by other providers
- Information on the criteria and clauses for buying flats in Extra Care accommodation

Meeting concluded at 10:05am

Appendix S: Task & Finish Group notes

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 10th June 2014, Conference Room 2, Caledfryn, Denbigh

Meeting commenced at 2pm

Present: Councillors Richard Davies, Meirick Lloyd-Davies (Chair), Win Mullen-James and Huw Williams.

Also present: Phil Gilroy (Head of Adult and Business Services); Rhian Evans (Scrutiny Coordinator) and Councillor Julian Thompson-Hill (Lead Member for Finance and Assets)

1. Apologies: Councillors Raymond Bartley, David Simmons and Nicola Stubbins (Director of Social Services).

2. Notes of meeting held on 20th May 2014

The notes of the previous meeting were agreed as a true and accurate record of the discussion

3. Discussion on unit costs and occupancy rate for Adult Social Care Services in Denbighshire over the last three years in comparison to independent/third sector unit costs for delivering similar services

Prior to the meeting details of the unit costs for the Council's residential care, extra care, community living schemes and day care services had been circulated, along with the occupancy rates at each establishment for the past three years. Comparative information had also been provided on costs for residential care in the private sector and on domiciliary charges levied by the local authority and those charged by the private sector for similar services. In addition information on the charges for private nursing care, both nursing and Elderly Mentally Infirm (EMI) services were provided – the local authority did not provide any nursing care nor EMI care in-house. It was explained that charges relating to the provision of nursing care could not include full nursing costs (FNC) which was an element of the cost which was met by the Health Board. Figures were also provided for Learning Disabilities residential care, which could cost up to £1,000 per week for individuals with complex needs. With respect to domiciliary care the Welsh Government (WG) had capped these charges at a maximum of £55 per week for 2014/15, a rise of £5. Therefore the local authority was charged with providing or commissioning these services on an individual's need basis, however it was not permitted to levy more than £55 on the service user.

In response to members' questions with regards to the quality of care provided by external providers and private residential/nursing homes, officers advised that contracts between the Council and the independent providers stipulated the type and quality of care expected, be it domiciliary care or residential/nursing care. Contracts specified the contract monitoring arrangements and officers from the Authority could call in unannounced to undertake visits to satisfy themselves that

Appendix S: Task & Finish Group notes

the contract requirements were being met. Similar to local authority provision, private residential and nursing homes and domiciliary agencies were also subject to CSSIW inspections.

Figures provided on resident numbers at each of the three residential homes run by the Council indicated that the homes were not full to capacity at present. They had not been full to capacity during the last three years, although both Dolwen and Awelon had seen an increase in the number of residents during 2013/14. On the contrary the Extra Care schemes seemed extremely popular with all three full to capacity for the last three years. The Community Living Schemes for people with learning disabilities were also proving popular and had been full to capacity for the last three years. The information provided indicated that the cost for the local authority for providing extra care was more than double the cost in the independent sector. Staffing costs (including on-costs) was the main reason for this disparity.

The Day Care Centres at Hafan Deg and Llys Nant had both been operating well under capacity for the last two years, and with the service now being provided solely at Hafan Deg the numbers attending were still only 14, although the centre had room for 30 people.

The WG was quite clear about its expectations for social care in the future. It expected fewer people to be residing in residential care with more people supported to live as independently as possible either in their own homes or in schemes similar to Extra Care, where support was available if required. In future the WG's expectation was that care packages should be flexible and tailored to achieve individuals' desired social care outcomes based on regular assessments. Individuals who could not be supported in this way would more likely to be in need of nursing care than residential care in the future.

Members were advised by the Head of Adult and Business Services that a separate working group was looking in detail at future provision of Work Opportunities services for people with learning disabilities. This working group, which was chaired by a representative from the voluntary sector, was looking at a number of options including social enterprises, and included 2 Councillors in its membership.

The Lead Member for Finance and Assets provided figures for residential care in comparison to extra care costs. At present providing residential care cost the Council around five times more than extra care provision. Members were reminded that in the Authority's corporate plan councillors had given a commitment to increase the number of extra care facilities in the County by 2017.

Group members also raised concerns with respect to the potential capital maintenance costs that may face the Authority in future due to the ageing buildings within which the residential services were currently being provided.

In response to members' concerns that future non-availability of local authority provided social and residential care had the potential to drive up the charges in

the private sector, the Head of Adult and Business Services advised that evidence from England suggested that market forces actually drove down the cost of private provision.

Members concluded that whatever option was chosen for future provision of adult social care services quality should not be compromised. The ultimate outcome of the Group's work should be the provision of cost effective high quality social care for Denbighshire residents which met their individual needs.

4. Confirmation of information required for the next meeting

Following consideration of the information provided to it the Group requested that the following information be provided for its next meeting.

- information on the quality of the Council's provision in all of the areas under consideration;
- information the quality of comparable services in the private/third sector;
- information on the number of present in-house residential care residents who would be suitable for transfer to extra care accommodation;
- details of the contract specifications which could be included in future contracts for the delivery of domiciliary, extra care, residential, day care and work opportunities services from independent providers (including contract management, quality assurance and monitoring arrangements, stipulations to mitigate extortionate increases in charges and contingency arrangements if the provider ceased to trade);
- details of the number of local authority staff in each service that could potentially be affected if services were to transfer over to independent providers (including the numbers that could potentially be subject to transfer to independent providers under TUPE arrangements) and the numbers who could potentially leave their current services through natural wastage;
- information on the projected capital maintenance costs on each of the social care establishments which form part of this review for the next ten years; and
- that the Lead Member for Social Care (Adult and Children's Services) be invited to attend the next meeting for the discussion on the quality of social care services

5. Dates of future meetings

The next meeting will be held in Conference Room 2. County Hall, Ruthin at 2pm on Tuesday, 24th June 2014 with subsequent meetings scheduled for the following dates and times:

25 June 11am (rescheduled from 24 June 2014 at 2pm)
2 July 2014 at 2pm
7 July 2014 at 9.30am
16 July 2014 at 9.30am

Meeting concluded at 3:15pm

Appendix S: Task & Finish Group notes

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 2nd July 2014, Conference Room 1b, County Hall, Ruthin

Meeting commenced at 2pm

Present: Councillors Meirick Lloyd-Davies (Chair), Richard Davies, Raymond Bartley, Win Mullen-James.

Also present: Nicola Stubbins (Director of Social Services) and Rhian Evans (Scrutiny Coordinator).

1. **Apologies:** Councillor David Simmons, Councillor Bobby Feeley (Lead Member for Social Care – Adults and Children’s Services) and Phil Gilroy (Head of Adult and Business Services).

2. Notes of meeting held on 10th June 2014

The notes of the previous meeting were agreed as a true and accurate record of the discussion

3. Discussion on quality monitoring for Adult Social Care Services in both the public and independent sector in Denbighshire

Prior to the meeting documentation relating to quality monitoring of in-house and external adult social care services had been circulated to members along with a document illustrating the ‘Profile of Staff and Residents in DCC Residential Care Homes’ and details of the estimated capital maintenance costs at the Authority’s three residential homes. The Director of Social Services gave an overview of the quality assurance process. It was explained that it was a statutory duty of the local authority to quality assure and monitor care establishments within which the Authority placed residents who required care. Quality assurance checks were undertaken by qualified Council officers and officers from the North Wales Commissioning Hub (NWCH). One of the Hub’s objectives was to develop a consistent approach to quality assurance work across North Wales. The Council was presently developing a quality assurance mechanism for domiciliary care services. The Care and Social Services Inspectorate Wales (CSSIW) had commented that Denbighshire’s staffing numbers for undertaking quality assurance work was low compared to other local authorities in North Wales and across Wales. The current review, dependent on its conclusions regarding potential future service delivery models, may free up staffing and financial resources to undertake more quality assurance and monitoring work.

Both residential and nursing care establishments were regulated by the CSSIW. Registration criteria included having a suitably qualified manager in charge. During the registration process CSSIW would determine how many residents the home could accommodate and provide guidance on room sizes, minimum staffing numbers and resident numbers etc. Council or Hub officers who currently visited care homes on other business would undertake contract monitoring work as a matter of course. Joint working with other services e.g.

Appendix S: Task & Finish Group notes

Fire and Rescue Service and Health and Safety Executive (HSE) could also facilitate a higher number of monitoring visits being completed.

In response to members' questions on whether the same quality assurance processes were applied to learning disabilities accommodation, members were advised that they were as learning disabilities work was the original objective for establishing the NWCH. Members were also advised that Protection of Vulnerable Adults (POVA) procedures were in place to safeguard adults using services. Members asked to see a copy of the latest POVA Annual Report. Residential or nursing homes would only be closed down following inspection after all possible avenues for improvement had been exhausted – residents would be re-homed if homes closed.

Members also requested information on the arrangements in place to assess or monitor the needs of residents who resided in what used to be classed as 'sheltered accommodation' if they were not already in receipt of a social care package. The Scrutiny Coordinator undertook to enquire on the Group's behalf with respect to this matter.

Members were assured that officers from the Social Services' Department always followed-up a resident's placement in a residential home with a visit to ensure they had settled-in and were happy with the care received. Subsequent visits would be made if necessary. Following each visit the Care Home Review Checklist form (form C1) would be completed as a matter of course. With respect to the frequency of care plan reviews for individuals it was confirmed that for new people to the service care plans should be reviewed every 4 to 6 weeks. Each case would be judged on its own merits with respect to the required frequency of reviews, but each individual's care and support plan should be reviewed on at least an annual basis. This aspect of the Service's work was reported in the Director of Social Services' Annual Report.

Members questioned whether the Assessment process for individuals who wanted to enter the Council's own residential care homes was appropriate, reference being made to recent applications known to members and which had been turned down. The Director of Social Services outlined the process followed and the role of the Assessment Panel. It was explained that the process did not assess an individual's suitability for a specific residential home, but for the most appropriate type of care e.g. residential or nursing care. Members requested that they be provided with more detailed information on the assessment process and the Assessment Panel.

It was clarified that the reason why such a high number of local authority residential care residents were below 50 years of age was because they usually had early onset of dementia, physical disabilities or mild learning disabilities. It was also confirmed that even if all local authority operated residential care homes in the County closed, there was sufficient capacity within the private sector in the area to accommodate current residents.

Extra care facilities were purposely designed and built to adapt to residents' changing care needs, thus avoiding them having to move from one type of

Appendix S: Task & Finish Group notes

establishment to another as their care needs increased. However, due to financial constraints future extra care accommodation may not be as 'grand' as the ones already built.

Members were advised that whilst Council social care staff were aware of the local authority's funding constraints going forward, officers had not discussed any proposed changes to service delivery with them to date as the Task and Finish Group was not yet in a position to formulate recommendations with respect to future provision. Members emphasised that any recommendations would need to ensure that day care provision was also managed within future provision.

4. Confirmation of information required for the next meeting

Following consideration of the information provided to it the Group requested that the following information be provided for its next meeting:

- information on the assessment process for adult social care and the assessment panel and its membership
- an update on the position with respect to future development of Extra Care provision in the County
- the latest copy of the POVA Annual Report
- a visit to a social care establishment had been scheduled for the next meeting and members indicated that they would appreciate a visit to Nant y Môr Extra Care Complex in Prestatyn.

5. Dates of future meetings

The next meeting was scheduled for 7 July at 9.30am at an Extra Care facility, followed by 16 July at 9.30am in Caledfryn, Denbigh, with the final meeting taking place at County Hall, Ruthin at 9.30am on 25 July 2014 at 9.30am

The Chair apologised that he would be away for the next meeting on 7 July. Councillor Win Mullen-James was appointed to chair the Group's next meeting.

Meeting concluded at 3:30pm

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 16th July 2014, Conference Room 2, Caledfryn, Denbigh

Meeting commenced at 9:30am

Present: Councillors Meirick Lloyd-Davies (Chair), Richard Davies, Raymond Bartley, Win Mullen-James.

Also present: Phil Gilroy (Head of Adults and Business Services) and Rhian Evans (Scrutiny Coordinator).

- 1. Apologies:** Councillor David Simmons, and Nicola Stubbins (Director of Social Services).
- 2. Notes of meeting held on 2nd July 2014**

The notes of the previous meeting were agreed as a true and accurate record of the discussion

3. Vacant position on the Group

It was decided that, as the Group's review of Adult Social Care provision in the county was nearing completion, it would not be practical at this late stage to appoint a replacement representative instead of Councillor Huw O Williams on the Group.

4. Development of an options appraisal for the future provision of services

Prior to the meeting documentation relating to the protection of vulnerable adults had been circulated to Group members.

In compiling an options appraisal for future adult social care provision in the County, for presentation to county councillors at the Adult and Business Service's budget meeting on 30th July 2014, based on the information considered during the course of the Group's work members agreed that the following options should be presented.

Residential Care Homes for Older People

Three options with detailed costings to be put forward.

- continue as present with no changes to service provision (not cost effective and would require considerable financial investment to deal with capital maintenance backlog)
- close all current provision and transfer residents to the private sector (potential to realise approximately £300K revenue savings and additional capital receipts from sale of land and property)
- in partnership with developers and other care providers develop Extra Care facilities, either on current residential care sites or within close proximity, with a view to delivering individually tailored care packages which meet individual needs and support independent living.

Appendix S: Task & Finish Group notes

The benefits of the third option being that the Extra Care approach helps to maintain independence for longer, more often than not until such time as nursing care is required, reducing the need for residential care. Although, it was emphasised that future Extra Care Schemes would not be as 'grand' as the ones already built. Nevertheless it was anticipated that by cutting down extras such as redundant floor space and procuring less expensive fixtures and fittings (but not the cheapest) Extra Care housing schemes could still be delivered in line with the aspiration in the Corporate Plan.

It was emphasised that if either the second or third option was chosen as the preferred option, prior to any closure or transfer of services provision required to be made for day care services, currently operating at these premises, to be commissioned/delivered elsewhere.

Extra Care Housing Domiciliary Care Services (not housing support)

Two options were agreed to be put forward for this service:

- i. keep and resource the present provision (at a premium of circa £350K in comparison to similar private provision)
- ii. tender for the provision of care from the private sector (initial savings would be minimal, but in future this approach had the potential to realise further savings of in excess of £350K upon the expiry of Transfer of Undertakings Protection of Employment (TUPE) protection for staff who transferred over to the private sector, as the care contracts could then be re-tendered in time).

Day and Work Opportunities for adults with disabilities

As a separate working group of members and officers was currently reviewing this service area it was decided not to draw up any options for future service delivery until such time as that Group's work had concluded.

Day Services for older people

It was decided to put forward two options for this service:

- i. continue to run the service as at present at a cost of approximately £150K per annum (compared to circa £76K in the private sector);
- ii. discuss with Extra Care providers the options for delivering day care services (including aspects of reablement) in Extra Care Housing Schemes

Again any alternative provision needed to be fully operational before any present day centre closed.

With respect to Hafan Deg in Rhyl, possible options for future use of the building needed to be discussed with Rhyl Town Council. Options could include transferring the ownership of the building to the Council for use as a community resource – as this particular building was in a good state of repair.

Community Living Schemes

Councillor Raymond Bartley advised that the Day and Work Opportunities Working Group was looking at certain aspects of these schemes – in particular the bungalow used for craft activities etc. at Llanrhaeadr during weekdays.

With regards to the current 24 hour Community Living Schemes, of which there were only 3 still run by the Council, based on the costs paid by the Council for similar provision in the private sector the Council-run services cost an additional £27K. It was therefore decided that the following options should be presented to members for consideration as potential service delivery models:

- i. continue to provide the services in-house at an estimated £27K premium cost; or
- ii. outsource the provision of the service from the private sector following a tendering process

It was emphasised that the Council and the Care and Social Services Inspectorate Wales (CSSIW) would quality monitor and inspect the services provided by the private sector to ensure that they delivered the expected level of service and care required. The Council and the Commissioning Hub would quality assure and visit any residents they placed in the private sector as part of their contract management and monitoring practices, whilst the CSSIW had overall responsibility for inspecting all residential and nursing care homes.

All tender and contract documents for future provision would need to clearly specify contract management, quality assurance and contract monitoring arrangements. Quality of services and supervision of contracts would be a key requirement of any decision taken to change service delivery methods.

Members also requested that all staff affected by any potential service changes were kept fully briefed on the proposed changes on a regular basis.

Detailed costings of all options should include financial costs of reconfiguring services including redundancy costs etc.

5. Confirmation of information required for the next meeting

The draft report outlining future options for Adult Social Care provision in Denbighshire, as per the above discussion.

6. Date of next meeting

The next meeting was scheduled for 9.30am on 25th July 2014 in Conference Room 1b, County Hall, Ruthin.

Councillor Raymond Bartley tendered his apologies for the next meeting.

Meeting concluded at 10:25am

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 25th July 2014, Conference Room 1b, County Hall, Ruthin

Meeting commenced at 9:30am

Present: Councillors Meirick Lloyd-Davies (Chair) and Richard Davies.

Also present: Phil Gilroy (Head of Adults and Business Services) and Rhian Evans (Scrutiny Coordinator).

1. Apologies: Councillor Raymond Bartley and Nicola Stubbins (Director of Social Services).

2. Notes of meeting held on 16th July 2014

The notes of the previous meeting were agreed as a true and accurate record of the discussion

3. Finalisation of the report for presentation to the Adult and Business Services Budget Workshop on 30th July

A copy of the Options Appraisal for the Future Provision of Services, developed at the last meeting, had been circulated to members ahead of the meeting. At the meeting the Head of Adult and Business Services distributed a copy of a draft report he had prepared for presentation to a future Performance Scrutiny Committee meeting, on the outcomes of the Group's work. The report outlined the Group's remit and, based on the information it had examined, its preferred options for the future delivery of adult social care in Denbighshire. The Group discussed the draft report in detail and agreed that it did accurately reflect the conclusions of their deliberations.

The Head of Adults and Business Services confirmed that, with respect to the preferred option for **Residential Care**, none of the Council operated homes would close until all residents had been moved to suitable placements in the independent sector locally. It was confirmed that recent entrants into Dolwen, and their families, had been advised on entry that the home was not likely to be open long-term and that they would most likely have to move to another home in the not too distant future. Only a minority of current residents were likely to be suitable to be re-homed in Extra Care, the majority would most likely need nursing or elderly mental health (EMH) care. There was at present ample supply of independent residential care places available in the area, as this sector due to the impact of recent central government policies aimed at promoting independence seemed to be struggling to fill all empty places.

With respect to **Day Care** services the preferred option was to close the remaining day care centre, Hafan Deg in Rhyl, and look to transfer the structural asset to a third party to be operated as a community asset. The recommendation in respect of the day care services themselves would be to procure the services from the independent sector. Procurement of day care

Appendix S: Task & Finish Group notes

services from the independent sector was also the preferred option for the delivery of domiciliary services in Extra Care housing schemes, following a tender exercise. Whilst the housing at the current schemes was the responsibility of housing associations, the domiciliary care was presently provided by the Council. In response to a question on the timeframe for going out to tender for domiciliary services the Head of Adults and Business Services advised that ideally there needed to be a six month lead in time from tender to service delivery. Therefore if the preferred option was approved the Council would be looking at inviting providers to tender around October 2014 with a view to providing the services from April 2015. If this was achieved it was anticipated that the Council could realise savings in the region of £300K for 2015/16, increasing to a conservative estimate of £800K from 2016/17 onwards.

Whilst jobs would be lost in the domiciliary services it was anticipated that a substantial number of staff would be transferred over to the independent providers successful under the tendering process in accordance with Transfer of Undertakings Protection of Employment (TUPE) arrangements. A consequence of the change in delivery method would be the need to grow the contract monitoring and inspection services within the Council to ensure that the standards of care were maintained and improved in the independent sector.

With respect to **Community Living Schemes** the Group concluded that the most appropriate approach would be to continue with the transfer of the remaining three schemes operated by the Council over to the independent sector on a scheme by scheme basis when the opportunity arose and the conditions were right. This would be in line with the approach taken during recent years.

Future provision of **Work Opportunities** schemes for people with learning disabilities was the subject of a review undertaken by a separate working group made up of members, officers and third sector representatives. Due to the complexities involved with the delivery of these services, which included transport arrangements, the conclusions of this review would not be available until the autumn.

Members enquired on alternative proposals for achieving the necessary savings if the above proposals were not acceptable to the Council's wider membership. The Head of Adults and Business Services advised that the only alternative which had the potential to realise the level of savings required, would be to increase the social care eligibility threshold. This would reduce the number of services and service-users. However, it was felt that this approach would not be acceptable to county councillors or to the general public; neither would it be conducive with the Council's duty to protect vulnerable people or with its Corporate Plan commitment to support vulnerable people to live as independently as possible for as long as possible.

Group members agreed that the conclusions detailed above be reported to Performance Scrutiny Committee at its meeting on 2nd October 2014. The Committee's recommendations following consideration of the report would then

Appendix S: Task & Finish Group notes

be reported to Cabinet and County Council as part of the budget setting process for 2015/16.

Group members requested that the final report clearly outline the inspection and contract monitoring arrangements that would be in place for the new services. This would help reassure county councillors that the new service provision will be as a minimum as good as at present services, and would be aspiring for even higher standards to improve service-users life outcomes and experiences. There would also be a need to fully brief staff on the proposals' implications for them before the report was made public, and to devise a communication strategy to deal with the publication of the proposals.

Actions to be taken prior to the report being submitted to Performance Scrutiny on 2nd October:

- Head of Adult and Business Services to schedule a meeting(s) with all affected staff (and stakeholders) in September to explain the proposals to them, their implications for the residents and for employees, and to detail to all parties the support that will be available to them to prepare for the transition
- Consideration to be given to inviting the Chair of the Task and Finish Group or a member of the Group to attend the staff meetings with officers
- A communication strategy for dealing with the press and media interest in the proposals to be put in place ahead of the Scrutiny Committee meeting.

Meeting concluded at 10:35am

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 23rd June 2015, Conference Room 1b, County Hall, Ruthin

Meeting commenced at 9:30am

Present: Councillors Raymond Bartley, Meirick Lloyd-Davies, Richard Davies and Win Mullen-James

Also present: Nicola Stubbins (Corporate Director: Communities), Phil Gilroy (Head of Community Support Services), Councillor Bobby Feeley (Lead Member for Social Care: Adults and Children's Services), Holly Evans (Project Manager) and Rhian Evans (Scrutiny Coordinator).

1. Apologies: None received

2. Election of Chair

Councillor Meirick Lloyd-Davies indicated that he did not wish to continue as the Task and Finish Group's chair. He was thanked for his services. Nominations were sought for the position of Chair. Councillor Win Mullen-James was nominated and seconded. No other nominations were received and consequently it was:

Resolved: that Councillor Win Mullen-James be appointed as the Task and Finish Group's Chair

3. Notes of meeting held on 25th July 2014

The notes of the previous meeting were agreed as a true and accurate record of the discussion

4. Consideration of the responses to the consultation exercise

A copy of a report titled 'Results from Information Gathering' had been circulated to members in advance of the meeting. The Head of Community Support Services introduced the report to Group members and also introduced Holly Evans, the Project Manager who had been working closely with the Consultation Institute on how to progress the Task and Finish Group's proposals following their approval by Cabinet in December 2014.

Cabinet had agreed that the proposals should be progressed in two stages:

- (i) Undertake a consultation with each individual service user and their family in respect of the proposal, including an assessment of their needs and the availability of suitable alternative provision to meet those needs; and
- (ii) A general public consultation on proposals for modernising social care services in the County to deliver the expectations of the Social Services and Well-being (Wales) Act 2014

Appendix S: Task & Finish Group notes

Before proceeding with the above advice had been sought from the Consultation Institute (CI) and the proposals presented to the T&F Group at the meeting had been drawn up based on the CI's advice to mitigate the risk of a Judicial Review. Members were advised that consultation in the field of social care differed from that in other areas e.g. education. Consultation needed to take place with each individual service-user in order to ensure that their needs were being safeguarded. This individual consultation should protect the Council if a legal challenge or Judicial Review was instigated.

For the purpose of undertaking the consultation and needs assessment exercise with each individual service user, and to ensure objectivity, qualified social workers had been engaged via an agency. These social workers had spoken to all service users, apart from the ones who were in hospital at the time, and assessed their needs. They had also assessed the impact of the proposed changes on each service user on an individual basis.

The proposals now being put forward regarding the future provision of adult social care services, detailed in the report, had been drawn up based on the above needs and impact assessments, and comments received from families and carers and staff comments – all this information was included in the appendices to the report. The Head of Community Support Services detailed the proposals for each social care establishment and answered members' questions as follows:

Hafan Deg Day Centre, Rhyl:

- For current service users there was a choice of suitable alternative service provision available in the Rhyl area;
- The Council would ideally prefer to commission a service for all current service users which would see them staying together ;
- A Service Level Agreement (SLA) would be drawn up specifying in detail the type, level and quality of service expected of any provider and in cases where personal care was required the Council would monitor any contracts and they would also be subject to regulatory inspection by the Care and Social Services Inspectorate Wales (CSSIW) if they provided personal care;
- An organisation had already indicated an interest in this facility (no firm decisions could be taken with respect of this until a decision had been taken with regards to the future of the services currently provided there. In addition procurement and legal matters had to be adhered to);
- One option for the building's future would be to transfer it to another organisation as a community asset transfer, the Council could then charge a peppercorn rent for it and be released from expensive building maintenance obligations. This would be similar to the Canolfan Awelon facility in Ruthin, which provided social day care services during the day and was used as a community facility in the evening and weekends for the benefit of the wider community.

Dolwen, Denbigh:

- At present there were no vacant Elderly Mental Health (EMH) beds in the Denbigh area. Consequently the study had identified a gap in the market in this specialist area;
- Based on the above conclusion the proposal with respect to Dolwen was for the Council to seek a partner to take over the facility and develop it into an establishment that could cater for EMH care – this had the potential to ensure that current residents could stay there for a longer period of time as their needs increased;
- Any potential future service provider on the site would be expected to take on the current staff, a high proportion of whom were Welsh speaking - an aspect which had featured highly amongst the satisfaction factors for current residents with Dolwen, as had its accessibility to family and friends;
- Initial research had indicated that there was potential interest in the facility given recent experiences with similar establishments in other parts of Wales as well as in England

Awelon, Ruthin:

- Awelon already had the Llys Awelon Extra Care facility on the same site which was proving to be extremely popular;
- The proposals for Awelon would see new admissions to the residential care home cease, which would in time see the building become vacant;
- During the preceding period to the building becoming vacant the Council would enter into discussions with the owner of Llys Awelon Extra Care facility with a view to the site being sold to them when it became vacant for the purpose of developing additional extra care apartments on the site – potentially an extra 29 units;
- Members were keen to ensure that as the proposal relating to Awelon was different to that for the other establishments that none of the current residents should be forced to move against their will to any other establishment. If their needs increased so greatly that they would require nursing care that would be a different matter;
- It was emphasised that it would be highly unlikely that an agreement could be reached with the Betsi Cadwaladr University Health Board (BCUHB) for beds to be set-aside at Ruthin Hospital for respite care, in place of Awelon, as the Health Board would only admit individuals with medical needs, respite would not be a consideration for them;
- Members were also keen that any future agreement with the partner organisation, most probably the current owner of Llys Awelon, for the development of the site should include an expectation that a community centre (similar to Canolfan Awelon) be built as part of the site and that should deliver as a minimum all the services available at present and any appropriate new services that become available. That facility should also be widely available for public use.

Cysgod y Gaer, Corwen:

- the needs and impact assessments for residents at this home had highlighted a lack of residential care facilities in Corwen and its surrounding areas. The nearest facilities were either in Bala or Llangollen;

Appendix S: Task & Finish Group notes

- it had also highlighted that the demand for residential care in the area was low;
- there were problems in the Corwen area, due to its rurality, with the availability of domiciliary services, particularly services which required the attendance of more than one domiciliary carer at the same time;
- based on the above factors the proposals now being put forward was, to enter into a partnerships with stakeholders (including BCUHB and third sector) to develop Cysgod y Gaer into a 'support hub' offering residential and extra care services as well as an outreach domiciliary care and support services to the tenants of Llygadog Sheltered Housing Scheme and the wider population of Corwen and its surrounding areas

Extra Care Schemes:

Extra care was seen as the way forward for delivering social care needs in the future, as it fitted in with the Welsh Government's vision of enabling people and assisting them to live as independently as possible for as long as possible. Negotiations were currently underway with a view to developing an extra care facility in Denbigh, where land had recently been secured, and in St. Asaph within the next three years.

At present the Council provided domiciliary care services at the three Extra Care facilities already operating in the County – Llys Awelon, Ruthin; Nant y Môr, Prestatyn and Gorwel Newydd in Rhyl. The housing services at all three complexes were provided by other organisations (housing associations). Therefore the proposal was that the domiciliary care should be put out to tender and that the staff be consulted on the transfer of their employment to the successful tenderer for the contracts.

- Ideally the Council would like to see the owners of the extra care housing facilities successfully bid for the domiciliary contracts as this would provide for synergy between housing and domiciliary needs and services;
- Nevertheless, if the domiciliary contract was let to another provider it should not be a cause of concern as domiciliary care was a regulated service and therefore inspected by CSSIW;
- Members agreed with the proposals having received reassurances that every effort would be made to ensure a seamless transfer of domiciliary care services between the Council and the new provider(s) in order to avoid disruption, distress or cause concern to service-users.

Despite the fact that the new proposals were quite different to the original vision for future social care services in Denbighshire, as put forward by the Task and Finish Group in 2014, it was anticipated that the financial savings as a result of their implementation would be in the region of £680K over a two year period. Revenue savings from staffing costs would be a recurring saving year on year thereafter.

Appendix S: Task & Finish Group notes

In addition to the above members were given a brief overview of the next stages with respect to developing an Extra Care facility in Denbigh and how that affected the work opportunities task and finish group's work. Members were also advised that the Council's former sheltered housing complexes would form part of the Council's Housing Strategy which was expected to be finalised by the autumn of 2015.

At the conclusion of the discussion on all the proposals contained within the report the Task and Finish Group concluded that the report to be presented to Performance Scrutiny Committee on 16 July 2015 and to Cabinet on the 28 July 2015 contain the following recommendations:

Hafan Deg

To recommend that the Council enter into a partnership with an external organisation and transfer the building to them, commissioning a day care service within the building and, in addition, enabling third sector agencies to provide early intervention activities for older people that reduce social isolation, support independence and promote resilience.

Dolwen

To recommend that the Council work with an external organisation to take over the employment of the staff and the running of the Dolwen building as an ongoing service, but registering for EMH care.

Awelon

To recommend

- (i) that new admissions to Awelon cease;**
- (ii) that the Council works with the individuals and their families to meet their needs and at an appropriate point in their lives to move to suitable alternatives; and**
- (iii) that the Council enters into a partnership with the owner of Llys Awelon for it, when the site is available, to develop Extra Care apartments on the site, with a caveat that the developed site has a community centre that will deliver a range of community services and benefits including those currently available at Canolfan Awelon.**

Cysgod y Gaer

To recommend that the Council enters into a partnership with relevant stakeholders (including BCU and the 3rd Sector) to develop the Cysgod y Gaer site into a 'support hub' offering both residential and extra care type facilities as well as an outreach domiciliary care and support service to the tenants of Llygadog Sheltered Housing Scheme and the wider population of Corwen and surrounding area.

Extra Care Schemes

To recommend that:

Appendix S: Task & Finish Group notes

- (i) **all three schemes are put out to tender for a care provider for each of them and enter into formal consultation with the staff involved regarding transfer of employment; and**
- (ii) **each contract agreement clearly specify the Council's expectations for the services and each contract will be subject to strict quality and performance monitoring arrangements.**

Members were reminded of the confidential nature of the information discussed by them at the meeting and the need to keep it confidential until such time as the reports for Performance Scrutiny Committee were published no earlier than 9th July. The Head of Community Support Services would be meeting all affected staff on 8th July to brief them on the proposals and Task and Finish Group members were invited to come along to those meetings. It was emphasised that only Task and Finish Group members and the Lead Member for Social Care should attend those meetings with the staff.

Actions to be taken prior to the report being submitted to Performance Scrutiny on 16th July 2015:

- Head of Community Support Services and Project Manager to share the list of proposed briefing meetings with social services' staff on the 8th July to discuss with them the proposals and the contents of the report to Performance Scrutiny Committee on 16th July and Cabinet on 28th July to enable T&F Group members to inform the officers which meetings they would like to attend;
- Contact to be made with the Communications Team ahead of the report's publication for Performance Scrutiny Committee to draw the proposals to their attention in anticipation of press/media and public interest.

Meeting concluded at 11:20am

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 1st October 2015, Cabinet Room, County Hall, Ruthin

Meeting commenced at 1pm.

Present: Councillors Raymond Bartley, Meirick Lloyd-Davies and Richard Davies

Also present: Phil Gilroy (Head of Community Support Services), Tony Ward (Principal Manager: Business Support) and Rhian Evans (Scrutiny Coordinator).

1. Apologies: Councillor W Mullen-James.

In the Chair's absence Councillor Meirick Lloyd-Davies was appointed by members to chair the meeting.

Members extended their good wishes for a speedy recovery to Councillor Mullen-James.

2. Notes of meeting held on 23rd June 2015

The notes of the previous meeting were agreed as a true and accurate record of the discussion

3. Consideration of the consultation document

The Head of Community Support Services introduced the consultation document (previously circulated) and explained that the prologue to the consultation document itself detailed the background to the review and set out the case for change. This would give members of the public an overview of the legislative and socio-economic changes that necessitated the Council to review the delivery of its adult social care provision.

Members were advised that the consultation document was being presented to the Task and Finish Group and Cabinet Briefing for observations prior to its publication. Consultation on the proposals would take place between mid-October and mid-January with consultation responses being reported to the Task and Finish Group for it to formulate a set of recommendations on the future provision of adult social care services for submission to Performance Scrutiny Committee in March 2016. Scrutiny's recommendations would then be presented to Cabinet during April 2016. Cabinet had requested that the presentation of the final recommendations to Cabinet should only be made when all consultation responses had been considered and after any alternative proposals put forward had been fully evaluated.

Responding to members' questions the Head of Community Support Services confirmed that:

- the options put forward in the consultation document were based on thorough research and on feedback from current tenants in Extra Care facilities in the county;

Appendix S: Task & Finish Group notes

- legislation capped the cost of domiciliary care in Extra Care accommodation at the same rate as in a service-user's own home, at a maximum of £60 per week;
- the needs of residents who had until recently been met by Allied Healthcare were now being met by other providers;
- changes were afoot with respect to domiciliary care nationally and members would in the near future be asked to recommend and approve the concept of individual care budgets;
- to date four expressions of interest had been received for operating the proposed Extra Care facility in Denbigh. Work was currently underway to evaluate these expressions of interest prior to inviting them to tender for the project which would include approximately 12 houses on site for social care use. It was anticipated that the facility should be ready in approximately 18 months' time;
- the council would look into the possibility of whether the cafeteria on the Denbigh Extra Care site could potentially be operated by Popty;
- outline drawings were now available for the proposed Extra Care provision in Corwen. It was anticipated that this development would have 14 units;
- all Extra Care developments could have units available for the purpose of providing respite care;
- the demand for Extra Care housing in the area was growing year on year;
- the Welsh Government (WG) required that demand in residential care be recorded in two ways – the number of individuals supported to live in residential or nursing homes on 31st March each year and the number of adults supported to live in residential or nursing homes at any time during each financial year. Both these figures recorded a reduction in demand for residential care in both the public and private sector in the last three years, whilst the demand for nursing and dementia care in both sectors was on the increase;
- discussions had taken place with Age Connect with respect to the proposals being put forward for the future provision of services and they were generally supportive of the approach.

With respect to the consultation itself officers advised that they were willing and open to talk to anyone interested in the consultation. They advised that a series of consultation events had been arranged. These would be held at:

- Canolfan Awelon, Ruthin on 18 November;
- Rhyl Football Club on 25 November;
- Canolfan Ni, Corwen on 30 November; and
- Eirianfa, Denbigh on 14 January 2016

Two sessions would be held at each venue, 2.30pm to 4pm, and 6pm to 7.30pm. Sessions would be chaired by Mr Meirion Hughes, former Director of Social Services for Denbighshire County Council. Simultaneous translation services would be available at all meetings.

Appendix S: Task & Finish Group notes

The Head of Community Support Services took members through the consultation document and explained that whilst it was a single document it did consist of four individual consultations, one on each of the four sites – Hafan Deg Day Centre in Rhyl and the residential care homes at Cysgod y Gaer in Corwen, Dolwen in Denbigh and Awelon in Ruthin.

The consultation on each establishment would give the general public three options – the Council's preferred option, another suggested option and the third option would give the public an opportunity to put forward an alternative proposal for the future provision of services – any alternative option put forward needed to meet the demands of current residents/users within the available resources.

With respect to the Equality Impact Assessment (EqIA) document officers advised that this was a live document and would be revisited and revised as consultation responses were received. At the conclusion of the consultation stage a new EqIA document would be produced to reflect the impact on equalities of the final recommendations. At the conclusion of the discussion the Group:

Resolved: to recommend that,

- (i) subject to undertaking the actions listed at the end of these notes, that the document be approved for publication and that the options contained in the document be consulted on for a period of 3 months; and**
- (ii) the consultation be for a minimum period of 3 months, if however additional time was required to accommodate everyone who wanted to contribute to the consultation the consultation exercise should be extended for a reasonable period of time to permit this to take place.**

4. Communication Strategy

The Head of Community Support Services took members through the Communication Plan for the consultation (previously circulated) explaining who would be involved (both stakeholders and wider stakeholders) with the consultation, their involvement with the project, the extent of their involvement to date, where the Council would like them to be at the end of the consultation stage, and how the Authority would facilitate and support them through the process.

It was confirmed that a trade union representative now served on the Project Team for the consultation and this had proved extremely useful in moving the project forward.

A press release would be issued in mid-October to draw the public's attention to the consultation, its timescale and how residents could take part in it. It would also include information on the public meetings arranged as part of the consultation. Social media would also be used to draw attention to the consultation and how people could contribute to it.

The Group:

Resolved: to approve the Communication Plan for the consultation

5. Date(s) for future task and finish group meeting(s)

The Scrutiny Chairs and Vice-Chairs Group (SCVCG) had suggested that it may be worthwhile for the task and finish group to meet mid-way through the consultation to consider the responses received to date and identify any emerging themes and consider alternative proposals submitted. Another meeting would then be held at the conclusion of the consultation period for the purpose of considering the findings of the consultation in its entirety and to formulate final recommendations for presentation to Performance Scrutiny Committee and Cabinet during the spring of 2016. The Group concurred with the above approach and:

Resolved: that meetings be arranged for early December 2015 and late January/early February 2016

Actions to be taken prior to the report being published for public consultation:

- **The location of the four centres to be clearly identified within the consultation document**
- **Numbers attending day care provision at all four sites to be provided in the consultation report;**
- **The typographical errors and erroneous dates in the Equality Impact Assessment to be amend prior to publication;**
- **The cost of meals at Extra Care facilities' cafeterias to be circulated to members.**

Dates for future Task and Finish Group meetings

- **Tuesday, 8 December 2015, 2pm – 4pm, Council Chamber, Ruthin**
- **Wednesday, 3 February 2016, 10am – 12pm, Conference Room 1b, County Hall, Ruthin**

Meeting concluded at 2pm

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 8th December 2015, Council Chamber, County Hall, Ruthin

Meeting commenced at 2pm.

Present: Councillors Raymond Bartley, Meirick Lloyd-Davies Richard Davies and Win Mullen-James.

Also present: Phil Gilroy (Head of Community Support Services), Tony Ward (Principal Manager: Business Support), Holly Evans (Project Officer: In-house Provider Services Consultation) and Rhian Evans (Scrutiny Coordinator).

1. Apologies:

None.

2. Notes of meeting held on 1st October 2015

The notes of the previous meeting were agreed as a true and accurate record of the discussion

3. Summary of responses received to date

The Head of Community Support Services introduced the report (previously circulated) that summarised the observations received to date in response to the consultation exercise. He explained that the majority of responses related to the three residential care homes, Awelon (39), Cysgod y Gaer (19) and Dolwen (50). 19 responses relating to Hafan Deg day care centre had been received to date. An analysis of whom the respondents were and where they resided was included in the report. Despite the encouraging level of engagement with the consultation no real alternatives to the proposals set out in the consultation document had been presented so far. Nevertheless, during the public meetings held to date, some individuals had suggested that a social enterprise model for the delivery of adult social care services should be explored. UNISON had also suggested that the social enterprise model should be considered prior to any decision being taken. The union was actually considering supporting staff to prepare and submit a staff co-operative bid to run Dolwen and Hafan Deg.

Responding to members' questions officers advised that:

- Social Enterprises were private entities run on a not-for-profit basis, with any surplus income generated being re-invested in the 'enterprise';
- Members of the public enquired on the possibility of private companies buying the current establishments, operating them for a period of time and then selling the land to build, or turning the buildings into luxury apartments. To avoid the risk of speculators buying the assets the Council would need to attach clauses or covenants to any lease agreements or conditions of sale it may enter into;
- For Hafan Deg the majority of respondents to date preferred Option 1, with a proviso in some cases that it was operated by the voluntary sector.

Appendix S: Task & Finish Group notes

However, in future other organisations who used the Hafan Dag facility for their meetings would likely need to be levied a charge for its hire;

- The majority of people who had attended the public meetings held to date had clearly indicated that they wished to have quality social care provision available in their respective areas, they were not unduly worried who provided the service so long as the quality was not compromised;
- The consultation responses received and the public meetings held to date had highlighted that there was a lot of confusion amongst the general public about the different types of care homes available, what the proposals would actually mean and about the term 'public sector', with some residents thinking that the public sector was large national/multi-national companies rather than local/national government organisations or the voluntary sector;
- The demand for standard residential care was actually reducing in both the public and private sector, evidence to substantiate this had been included in the Group's agenda pack in the form of a Welsh Government (WG) response to an enquiry it had received 'about people in care homes in Wales'. This reduction in demand had been highlighted in the consultation document and during the consultation meetings, as had the increase in demand for respite and extra care services;
- Some residents were of the view that decisions had already been taken with respect to the four facilities and that GPs had been told not to apply for residential places for patients at any of the three residential care homes. This was not the case, no decisions had yet been taken, rather preferred proposals were being consulted upon. GPs could not refer people to individual residential homes, and never had been able to do so. Applications could only be submitted to Social Services, it was Social Services that assessed people's needs and suggested the type of care that would be appropriate for them. Since the commencement of the review work not one individual who was suitable for entry to any of the establishments had been refused entry;
- For both Awelon and Dolwen the majority of respondents to date wanted to maintain the status quo, with no alternative option being put forward. Denbigh Town Council had by a large majority favoured Option 1 for Dolwen, i.e. for it to enter into a partnership with an external organisation, transfer the whole service to them, whilst registering for elderly mental health (EMH) care status;
- To date all respondents with respect to Cysgod y Gaer were supportive of the Council's preferred option of entering into a partnership with relevant stakeholders, including the Health Board and voluntary sector, to develop it into a 'support hub' offering both residential and extra care type facilities, as well as outreach domiciliary care and support services to tenants of local sheltered housing schemes and the wider population of Corwen and surrounding areas;
- Language and family ties featured high on the list of priorities for respondents to the proposals for all three residential care establishments;
- Staff were generally in favour of the keeping the status quo at all four establishments. Nevertheless, they were far more positive about the preferred options once they realised they would continue to be employed;

Appendix S: Task & Finish Group notes

- Six public consultation meetings had taken place to date, the ones in Denbigh would take place in January 2016. The reason why the Denbigh meetings were not taking place until then was the lack of availability of the preferred venue. All public meetings to date had been well attended, with around 70 people at the best attended event, with an average attendance of between 30 and 40 people at each event. It had been established that the majority of attendees had a connection with current residents/ service-user;
- Age Connect had been extremely engaged with the consultation process and had permitted Council officers access to all their forums.

4. Question and Answer Draft Document

The Head of Community Support Services introduced the Frequently Asked Questions (FAQs) document (previously circulated) to the Group explaining that this was a 'live' document and as such was updated on a regular basis, as and when new questions/themes came to light via the consultation exercise.

Responding to a query on when the contracts for new extra care facilities in the county were likely to be signed, the Head of Community Support Services advised that they anticipated they would all be signed early in the next financial year. Likewise, realisation of the savings anticipated from changes in the way in-house adult social care was delivered were also anticipated to commence during the next financial year, 2016/17.

5. Proforma Response for Dolwen Residential Home

Included with the papers circulated ahead of the meeting was a copy of a proforma response form, which contained suggested answers and responses, for use by those responding to the consultation in respect of Dolwen Residential Home. This proforma had been drawn up by a resident. Advice had been sought from the Consultation Institute (CI) with respect to the Council's position when evaluating consultation responses and the use of 'proforma' answers. The CI had advised that if it was evident that respondents had utilised standard answers or responses the Authority was not under an obligation to accept them or count them as 'full' responses.

6. Consultation Diary

A copy of the diary of events held as part of the consultation exercise had been included with the papers for the meeting. This listed all events, both private and public, internal and external, which had or were scheduled to take place during the consultation period.

Corwen and Denbigh Town Councils were the only two town councils who had accepted the Council's invitation to meet with them to discuss the proposals.

Appendix S: Task & Finish Group notes

The Head of Community Support Services advised that an additional meeting had been offered to Dr Alistair Moulden as lead for the group Denbighshire Voice. The Consultation Institute had advised that it would be good practice to meet with this group as they are clearly an interested party.

7. Date of next meeting

Thursday, 10th March 2016, 2pm – 4pm, Conference 1a, County Hall, Ruthin

Meeting concluded at 3.05pm

Local Authority Provided Adult Social Services Scrutiny Task and Finish Group

Meeting held on 17th March 2016, Conference Room 1a, County Hall, Ruthin

Meeting commenced at 11.50am.

Present: Councillors Raymond Bartley, Meirick Lloyd-Davies, Barry Mellor and Win Mullen-James.

Also present: Nicola Stubbins (Corporate Director: Communities), Phil Gilroy (Head of Community Support Services), Tony Ward (Principal Manager: Business Support), Holly Evans (Project Officer: In-house Provider Services Consultation) and Rhian Evans (Scrutiny Coordinator).

1. Apologies:

Councillor Richard Davies

2. Notes of meeting held on 8th December 2015

The notes of the previous meeting were agreed as a true and accurate record of the discussion

3. Consideration of the responses to the consultation exercise

The Principal Manager: Business Support, via a PowerPoint presentation, gave task and finish group members an overview of the evidence gathered during the public consultation on the future of in-house care services. He explained that he was proposing to provide the presentation to both Performance Scrutiny Committee and Cabinet when they would be considering the task and finish group's report and recommendations. He therefore requested group members to suggest additions, amendments, or points for clarification in the draft presentation.

The Group were advised that the consultation had been undertaken in accordance with the 1985 Gunning Legal Principles for consultation:

- i. **Formative stage:** during this stage information collected by independent social workers on residents and other service users' preferred choices of services were analysed to determine whether current service provision would meet demand for future service preferences.
- ii. **Sufficient reasons for intelligent consideration:** the information collated via the above exercise was deemed sufficient and robust to enable the task and finish group to formulate a set of preferred recommendations for each of the four in-house social care establishments. These were only the task and finish group's preferred proposals based on the intelligence gathered. They were to be published for public consultation on that basis and stipulating that alternative options put forward by respondents would be welcomed and given due consideration.

- iii. **Adequate time for consideration and response:** in response to a request received the consultation period was extended. This gave attendees at the final consultation events more time to submit their views. It also gave the Council more time to analyse and give due consideration to all responses prior to the task and finish group finalising its conclusions and formulating its recommendations for presentation to Performance Scrutiny Committee. In addition, to enable Performance Scrutiny Committee's observations and/or amendments to be incorporated into the final report, and to ensure that Cabinet had sufficient time to consider Scrutiny's final recommendations, the proposals' presentation to Cabinet had been deferred until Cabinet's meeting on 24 May 2016.
- iv. **Conscientiously taken into account:** all responses received, whether written, electronically or verbal were required to be given careful consideration as were any alternative options put forward as part of the consultation exercise. The Council was required to consider all responses received. It could not disregard any of them, but having given them due consideration it could disagree or decide otherwise with any of them.

In effect the entire consultation exercise represented four separate consultation exercises on the proposals, one on each of the in-house social care establishments in Denbighshire. During the consultation period two alternative proposals had been put forward. One by UNISON which provided alternative solutions for each of the four establishments, although in the case of Cysgod y Gaer, they were not opposing Option 1 just emphasising that more work was required with the Health Board and the third sector to support effective partnership working. The Council acknowledged this point.

The other was a suggestion made by an elected member in relation to Awelon, Ruthin. This involved the Council exploring the viability of building the additional Extra Care Housing in Ruthin on one of the potentially vacant school sites in the town. The rationale behind this suggestion was that it would enable Awelon to operate as it currently does. The disadvantage of this proposal was that, whilst it did address the shortage of Extra Care facilities in the town to meet current and projected demand, albeit that having two separate schemes would be more expensive than operating a single scheme, it did not address the issue of a reduction in demand for the 'traditional' model of residential care and the consequential additional costs of having empty beds.

Whilst nine signed petitions (7,240 signatories in total) had been received both before and during the public consultation phase, none of these had suggested any alternative service provision models or had stipulated a rationale for their objection to the proposals or for keeping the status quo.

168 individuals had responded by completing the consultation questionnaire, both on-line and in hard copy format. In addition individual letters, e-mails, telephone messages and feedback forms had been received from interested parties, and 137 people had attended 8 public meetings in 4 towns. Only a minority of consultation respondents had answered all the questions on the consultation questionnaire.

Appendix S: Task & Finish Group notes

Whilst there was general opposition in the responses to any changes in the in-house social care services, people did recognise the benefits of Extra Care housing, although very few regarded it to be an acceptable alternative for standard residential care. Very few also acknowledged that the demand for standard residential care was reducing – they were of the view that the Council was refusing admission in a bid to close the residential care facilities.

Of those who had indicated a preference for any of the options put forward in the consultation proposals the majority had indicated that if they had to choose one of the options it would be the 'preferred' option listed in the report, Awelon being the exception – the majority wanted to see part of it transferred to Extra Care housing and other services in partnership with other providers, whilst keeping a small residential unit on site. Nevertheless during staff engagement events, most people had indicated 'Option 1', the Council's 'preferred' option as the top choice. For Dolwen, whilst most respondents who had indicated an option had stated they wanted an alternative option, no feasible 'alternative' had been put forward and the second placed option was the Council's 'preferred' option. In the case of Hafan Deg, all of those who had indicated a service delivery choice for the future had selected 'Option 1', the Council's 'preferred' choice, as the way forward. The proposal for Cysgod y Gaer had attracted no opposition, with the majority of respondents viewing the 'preferred' option as a progressive and positive way forward for securing much needed health and social care services in a rural area.

Consultation events had been held for staff, Member Area Groups (MAGs), town councils and interest groups. In addition a meeting had been held with representatives from Denbighshire Voice. Despite that group alluding to their intention to do so during one of the public consultation meetings in Denbigh, no formal request to view the Service's accounts had been received and no alternative proposal was submitted by Denbighshire Voice for consideration.

Of the four individual consultations the one relating to Dolwen in Denbigh had attracted the greatest number of responses, a total of 118. The general theme of the responses received to all consultation correspondence and at events was that the respondents did not want to see services closing. There was also a perception amongst respondents that the reason why residential care homes were no longer financially viable was because the Council did not fill all available beds in them. Respondents were unwilling to accept that fewer individuals now wanted to enter 'traditional' residential care establishments.

Officers acknowledged that whilst the alternative proposal put forward by UNISON would in the short term address the financial pressures on the service, it would not address the root of the problem, which was the reduction in demand for 'traditional' residential services and the growing demand for 'Extra Care' services and specialist nursing care services.

Responding to members questions officers advised that:

- based on the information collated as part of the review of in-house social care services it was expected that any additional Extra Care housing on the

Appendix S: Task & Finish Group notes

Awelon site would be filled to capacity, and if Dolwen was registered for Elderly Mental Health (EMH) care it would also likely be running at full capacity;

- whilst enquiries from external organisations about certain establishments had been received prior to the consultation exercise, expressions of interest in taking them over had not yet been sought as the Group was yet to formulate its recommendations on future provision;
- whilst the majority of respondents viewed the proposals as an attempt to save money by the Council, the rationale behind them was not primarily to save money but to deliver sustainable social care services in line with the Welsh Government's (WG) vision for the future provision of social care services, and service-users' preferred choice of services;
- if the proposals were approved and implemented in due course staff currently employed by the Council at Hafan Deg, Dolwen and Cysgod y Gaer would be transferred over to the new provider(s) under Transfer of Undertakings of Employment (TUPE) arrangements, which meant that their current employment terms and conditions would be protected by legislative regulations for a specific period of time. However, staff currently employed at Awelon were likely to be made redundant when the establishment closed, but the Council's up to date skills training programme should stand them in good stead to find alternative employment quickly.

Members stressed the need for dementia care provision in the area, to support both dementia sufferers and their carers. The need to deliver care services in the preferred language of the service-user, be that English or Welsh, was also stressed, including ensuring that service-users had access to recreational activities in their mother tongue. Officers assured members that every effort was made to deliver social care services in line with WG's strategic framework for Welsh language services in the health and social care services. 'Mwy na geiriau' (More than words), although it was acknowledged that it could be difficult to recruit sufficient numbers of Welsh speaking staff at times.

4. Determination of the Group's recommendations and final report to Performance Scrutiny Committee on 12th April 2016

Following consideration of the PowerPoint presentation and the contents of the draft report presented to it, the Group asked that the following amendments be made to the presentation prior to it being presented to Performance Scrutiny Committee at a Special Meeting on 12 April 2016:

- under the 'Case for Change', the first bullet point on how the demand for residential care continued to fall should be reinforced and made clearer as the statement as currently worded was likely to raise questions;
- under the proposals for Awelon the line about Awelon residents moving on "*at their own pace....as appropriate*" needed to be clarified to assure the public that the Council would keep to its promise of not asking anyone to leave if they did not want to and if their needs could still be met there;
- on the slide on overall responses, after "*There is general opposition...*" add "*from the small number of people who responded*" before "*to the preferred options.*"

Appendix S: Task & Finish Group notes

- On the penultimate line of the slides on 'Alternative Proposals Submitted' change "deemed to be far less..." to "... does not address..."
- the final line on the rationale slide could be improved and made clearer by avoiding the use of the noun 'offer' which could be seen to be jargonistic and replace it with 'care and support services';
- it would be useful to emphasise at an appropriate point in the presentation that Extra Care provision can and does provide respite care accommodation and services; and
- if possible illustrate (possibly in graph format) information on the number of people in residential care and the demand for residential care (possibly in comparison to the number of people who require 'care packages' generally)

With respect to the draft report the Group requested that it be presented to Performance Scrutiny Committee in the Task and Finish Group's name and that the Chair would introduce the report to the Committee prior to handing over to officers for the presentation.

Having given full and detailed consideration to the report and its associated appendices the Task and Finish Group:

Resolved: that it would recommend to Performance Scrutiny Committee at its meeting on 12 April 2016 to recommend to Cabinet to approve the following options:

- (i) for Hafan Deg (Rhyl) – the council enter into a partnership with an external organisation and transfer the building to them, commissioning a day care service within the building and, in addition, enabling 3rd sector agencies to provide early intervention activities for older people that reduce social isolation, support independence and promote resilience.***
- (ii) for Dolwen (Denbigh) – the council enter into a partnership with an external organisation and transfer the whole service to them, whilst ensuring that Dolwen is registered to provide EMH care.***
- (iii) for Awelon (Ruthin) – the council stop new admissions and work with the individuals and their families, at their own pace, to move them to suitable alternatives as appropriate and to enter into a partnership with the owner of Llys Awelon to develop additional Extra Care apartments on the site; and***
- (iv) for Cysgod y Gaer (Corwen) – the council enter into a partnership with relevant stakeholders (including BCU and the 3rd sector) to develop the site into a 'support hub' offering both residential and extra care type facilities as well as an outreach domiciliary care and support service to the tenants of local Sheltered Housing Schemes and the wider population of Corwen and the surrounding area.***

Appendix S: Task & Finish Group notes

Members and officers requested that their best wishes for a full and speedy recovery be conveyed to Councillor Richard Davies who had not been well for some time and who was currently in hospital.

Meeting concluded at 1:05pm

Actions to be taken prior to the publication of the papers for Performance Scrutiny Committee on 12 April 2016:

- the revised presentation, following incorporation of the amendments/additions listed above to be circulated to all Task and Finish Group members;
- the report to be amended for presentation to highlight that it reports the findings, conclusions and recommendations of the Task and Finish Group, and include some background information on the Group e.g. membership, number of meetings, length of inquiry etc.