

Cabinet – Supplementary agenda No.2

A meeting of the Cabinet will be held on:

Date: 14 February 2012

Time: 3.00pm

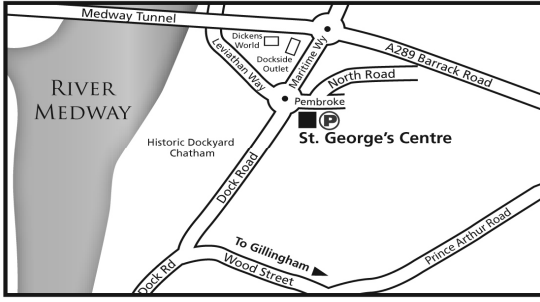
Venue: St George's Centre, Pembroke Road, Chatham Maritime, Chatham
ME4 4UH

Items

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| 4. | Medway Council's Vision for Commissioning and Providing Adult Social Care Social Services in Medway (Outcome of Consultation) | (Pages
1 - 86) |
| 5. | Fairer Contribution for Fairer Access to Services (Outcome of Consultation) | (Pages
87 -
114) |

For further information please contact Wayne Hemingway/Anthony Law, Democratic Services Officers on Telephone: 01634 332509/332008 or Email: democratic.services@medway.gov.uk

Date: 10 February 2012



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CABINET

14 FEBRUARY 2012

MEDWAY COUNCIL'S VISION FOR COMMISSIONING, AND PROVISION OF, ADULT SOCIAL CARE SERVICES IN MEDWAY

Portfolio Holder: Councillor David Brake, Adult Services
Report from: Rose Collinson, Director of Children and Adults
Author: Genette Laws, Social Care Commissioning and
Voluntary Sector Manager

Summary

The purpose of this report is for Cabinet to determine the future of the services at Balfour Day Centre, Robert Bean Lodge, Platters Farm Lodge and Nelson Court, in the light of consultation which was approved on 29 November 2011 based on the outcome of consultation regarding the future of the services at Balfour Day Centre, Robert Bean Lodge, Platters Farm Lodge and Nelson Court.

The Council owns each of the sites where these services are provided.

1. Budget and Policy Framework

- 1.1 The Cabinet is asked to accept this as an urgent item to enable the Cabinet to consider the outcome of consultation at the earliest opportunity, and to give service users and other stakeholders certainty over the future of services at Balfour Day Centre, Robert Bean Lodge, Platters Farm Lodge and Nelson Court.
- 1.2 The Council has a range of statutory duties and powers to provide services to vulnerable adults such as older people, people with learning disabilities, physically disabled people, people with mental health problems, drug and alcohol misusers and carers. Duties and powers are contained within the National Assistance Act 1948, the Chronically Sick and Disabled Persons Act 1970, the NHS and Community Care Act 1990, the Mental Health Act 1983 together with other statutes and regulations.
- 1.3 Local authorities can provide or commission services in a variety of ways to meet the needs of those it assesses as eligible for services. Indeed the personalisation agenda encourages moves away from direct provision by

local authorities to personal budgets allowing service users the choice to purchase from a range of services.

2. Background

- 2.1 The council owns and provides services from the following four adult social care provisions:
- (a) The Balfour Day Centre. The consultation has focused on the proposal for the day centre to be decommissioned.
 - (b) Robert Bean Lodge is a residential care home for older people with dementia and provides on-site day care services. The consultation has focused on the proposal for the care service to be outsourced to an independent provider.
 - (c) Platters Farm Lodge is an intermediate care facility and provides on-site day care services. The consultation has focused on the proposal for the care service to be outsourced to an independent provider.
 - (d) Nelson Court is a residential care home for older people with dementia and provides on-site day care services. The consultation has focused on the proposal for the care service and the property to be sold to an independent provider.
- 2.2 Separating responsibility for commissioning and providing services is the approach being taken by Local Authorities. Many councils are therefore taking strategic decisions to provide services only where the local sector cannot provide such services.
- 2.3 Officers consider that the proposals are in line with best practice for the reasons set out in the advice and analysis and specifically described for each service below:
- 2.3.1 **Balfour Day Centre** is a day centre that supports adults with disabilities. Its initial purpose was to support working age adults (18 to 64 years) with physical disabilities. There are 130 people registered to attend. Over time the Day Centre has accepted people with learning disabilities (12 No) and mental health needs (4 No). Many of those that started going to the Day Centre twenty or more years ago are now older people (27 No. 65 and above). The number of people using the service is falling and the number of people choosing direct payments is rising. People cannot use Direct Payments to purchase day care at the Balfour Day Centre as it is a Local Authority Day Centre.
- 2.3.2 In the last year attendance has been running at approximately 73% of booked places. Over the same period, Direct Payments (a Personal Budget where the Service User chooses a cash payment in lieu of a service and arranges personalised support) have increased by 17%. In particular, many young people coming through transition are not choosing the Balfour Day Centre for support. For these reasons the unit cost of the service is increasing and the average age of those attending the Centre is currently 55 years old.

- 2.3.3 Access to community facilities such as leisure services and adult education with specially adapted facilities including *Changing Place* toilets is now available in Medway. *Changing Place* toilets are disabled toilets that include an adjustable bed for changing facilities and tracked ceiling hoists. *Changing Place* toilets means that Medway is a more accessible place for people with complex needs.
- 2.3.4 The independent sector offers more cost effective and personalised alternatives. The Council is working with a number of providers and has been contacted over the last 12 months by organisations that are keen to provide day opportunities for people with disabilities.
- 2.3.5 **Robert Bean Lodge** (34 beds) and **Nelson Court** (28 beds) provide residential care for older people with dementia. **Platters Farm Lodge** (43 beds) is an accommodation based intermediate care and respite facility. They all provide on-site day care. The care provided is of a high quality.
- 2.3.6 The benchmarking of the costs for these in-house services are significantly in excess of the independent sector unit costs. By outsourcing these services the council can widen access to these services for people who fund their own care without recourse to the council and also better use its resources in terms of purchasing services for those in most need.
- 2.4 Where a significant change occurs in relation to a service to the public, consultation is always required. Consultation is an opportunity to explain the reasoning for the proposals and to obtain the views of stakeholders, such as current users, family carers and staff, as to existing services and proposals and to give others the opportunity to put forward options on how to reshape the service. Sections 10 to 13 set out the key messages relating to the proposals.
- 2.5 Even if the Council are able to demonstrate cogent reasons for the proposals, the council must also mitigate against any unintended or consequential impact that the changes may cause. The Council mechanism for considering these impacts is an impact assessment, into which the Council will feed information it has regarding equalities, including information gathered through engagement with stakeholders.
- 2.6 The Cabinet, as decision makers, must consider all the information and diversity impact assessments (see appendices 4, 5, 6, 7, 8 and 9), when making decisions regarding these services. All council members and local MPs have been offered an opportunity to review copies of the completed questionnaires and notes of the consultation meetings.

3. **Advice and analysis – Balfour Day Centre**

- 3.1 In 2010/11, Medway Council spent 89% of the day care budget, £520,000, on in-house services for people with disabilities. There are currently 130 people registered to use the Day Centre and average daily attendance is 37. Four people are from out of area, five are not open to care management and

therefore their eligibility requires further assessment, two are due to leave to take up employment, five people are not currently attending and two new people are registered to join but are not yet attending. In addition, six people are part of a long-term supported employment scheme and not part of the registration numbers because they do not attend the Day Centre but are supported by a Support Worker employed by the Day Centre.

3.2 Medway Council is responding to the Government's Vision for a modern system of social care that is built on seven principles:

3.2.1 **Personalisation:** individuals not institutions take control of their care. Personal budgets and direct payments are provided to all eligible people. Information about care and support is available for all local people regardless of whether or not they fund their own care.

3.2.2 **Partnership:** care and support delivered in a partnership between individuals, communities, the voluntary and private sectors, the NHS and councils.

3.2.3 **Plurality:** the variety of people's needs is matched by diverse service provision with a broad market of high quality service providers.

3.2.4 **Protection:** there are sensible safeguards against the risk of abuse or neglect. Risk is no longer an excuse to limit people's freedom.

3.2.5 **Productivity:** greater local accountability will drive improvements and innovation to deliver higher productivity and high quality care and support services. A focus on publishing information about agreed quality outcomes will support transparency and accountability.

3.2.6 **People:** we can draw on a workforce who can provide care and support with skill, compassion and imagination, and who are given the freedom and support to do so. We need the whole workforce, including care workers, nurses, occupational therapists, physiotherapists and social workers, alongside carers and the people who use services, to lead the changes set out here.

3.2.7 **Prevention:** empowered people and strong communities will work together to maintain independence. Where the state is needed, it supports communities and helps people to retain and regain independence.

3.3 In recommending a consultation about the proposals for the Balfour Day Centre, officers considered the risk of providers not offering individuals the best care and value for money. Officers consider the risk to be low because the personalisation agenda is about making sure individual service users can get the service that they need in the way that they would want.

3.4 However, an important developing theme in the consultation was that users of the service and their families were not confident about the prospects of being able to replicate the benefits that they derive from the Balfour Day Centre. As a consequence, and with a view to not predetermining the decision by Cabinet, a list (that is not exhaustive) was provided to service users and their

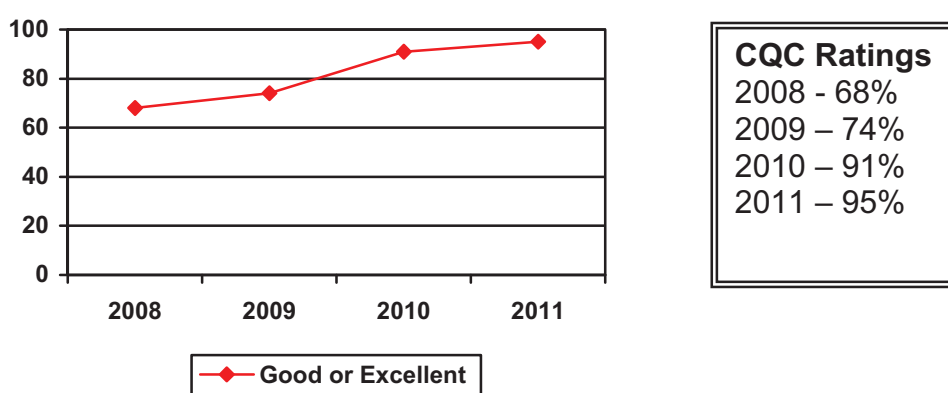
families of suitable alternatives. At a public meeting, one family carer explained 'Of the list of 36 services that could be a suitable alternative only four were possibilities for her daughter'. This was one of a number of themes that were shared during the consultation and are fully set out in section 8 of this report.

- 3.5 Good information, advice and guidance available in Medway supports Service Users to obtain the services they want. Therefore an updated list of possible suitable providers – which is not exhaustive – and reflects the range of needs, interests and aspirations of the service users at the Balfour Day Centre is set out in appendix 3. In addition to build on the theme of good information, advice and guidance being available on an ongoing basis to people in Medway, the republishing of the Adult Social Care Guide will have a clear section dedicated to day care services in Medway that includes the independent sector as well as council run services.
- 3.6 Medway Council has demonstrated its commitment to ensuring that the local Adult Social Care sector benefits from excellent training. All provider services (in-house and external providers) can access training from the Medway College of Social Care, which is run by the Medway Adults Community Learning Service.
- 3.7 The council has a duty to ensure that people with eligible care needs with services or an appropriate amount of money in the form of a personal budget so that the agreed outcomes are met. In proposing the closure of the Balfour Day Centre, the council will continue to have that duty and will ensure that they discharge this duty with care.
- 3.8 On the site of the Balfour Day Centre is the Home Improvement Agency (HIA) workshop – separate to the building of the Balfour Day Centre – and the Enhanced Care Unit (ECU). The ECU operates from three buildings to the rear of the building of the Balfour Day Centre and uses the kitchen of the Balfour Day Centre for meals. The council currently works with an independent sector provider who works in partnership with Medway's community meals service to provide nutrition to the attendees of that centre. Officers propose a similar service for attendees of the ECU and this will be provided in accordance with the dietary needs of the service users at that Centre. It continues to be the intention of the council to find a purpose-built home for this service and, in particular, co-locate the service with the Napier Unit (operating at the Robert Bean Lodge site), which supports the same client group of people with complex care needs.

4. Advice and analysis – Older People's residential care and day services

- 4.1 In 2010/11, Medway Council spent 21% of its Older People residential care budget, £4.4 million, on in-house services; the bed capacity represents 3% of the market. Outsourcing in Adult Social Care started with the NHS and Community Care Act 1990, which established councils' central functions as assessing need and funding and commissioning care, rather than service delivery.

- 4.2 Evidence from a wide range of public services shows that choice and competition can be a powerful tool to drive up quality and reduce and control costs. Benchmarking both quality and unit costs provides an important reference for councils as they grow a broader market of local care.
- 4.3 During the consultation meetings, officers explained why they were confident in the ability of the independent sector to provide good quality care to service users. Officers explained that 97% of the care market constitutes independent sector (not-for-profit organisations and privately owned businesses). Since 2008, the Care Quality Commission started publishing the star ratings of regulated services, which includes all care homes (council run and those in the independent sector). The overall percentage of Good and Excellent care homes in Medway has increased year on year. See graph below.



In speaking with service users and their families there was a request for detail to be provided about the split between Good and Excellent care homes. This is as follows:

Year	Percentages		
	Good	Excellent	Good and Excellent
2008	47%	21%	68%
2009	44%	30%	74%
2010	71%	20%	91%
2011	58%	37%	95%

- 4.4 Quality assurance is at the heart of commissioning and the council has robust contract monitoring arrangements in place that ensure that service providers offer high quality services and value for money.
- 4.5 When commissioning services, the council has a duty to demonstrate that it has secured best value and by this it means balancing quality versus price. In adult social care when evaluating the bids of independent sector providers, the council weights these two factors 80:20, where 80% of the scoring is about quality and 20% is about the price. In addition, the council reviews the financial viability of an organisation when entering into a new contract with a provider.

- 4.6 The council's arrangements includes at least annual visits to services, along with unannounced visits that can take place outside of business hours to monitor that activities such as helping people into our out of bed, are undertaken with dignity and respect. Additionally, the council undertakes visits in partnership with Medway Community Healthcare or NHS Medway in terms of infection control or medicines management.
- 4.7 Medway Council has demonstrated its commitment to ensuring that the local Adult Social Care sector benefits from excellent training. All provider services (in-house and external providers) can access training from the Medway College of Social Care, which is run by the Medway Adults Community Learning Service.
- 4.8 Additionally the council funds programmes such as My Home Life that is designed to support care home managers in sharing best practice. My Home Life is an initiative that is part funded by the Department of Health and designed by the City University London, Age UK and the Joseph Rowntree Foundation.
- 4.9 The Care Quality Commission (CQC) is the regulator for these services.

5. Advice and analysis – Nelson Court

- 5.1 The weekly bed cost for dementia care (not including on-costs from council overheads such as HR, Finance, etc) at Nelson Court is 44% more than the most expensive weekly bed price that the council pays in the independent sector. The prices that the council pays in the independent sector ranges from £457 to £602 per week, where the most expensive price attracts a third party top up of £145 per week.
- 5.2 The day care at Nelson Court is for people with dementia and has 100% occupancy due to the demand for this service and is one of two dementia day care services for people in Medway. The price of the day care service is in excess of twice the price of the alternative independent sector provider – both of which deliver much needed support to carers by enabling them to take a break from their caring duties.

6. Advice and analysis – Platters Farm Lodge

- 6.1 The weekly bed cost for Platters Farm Lodge in relation to intermediate care is 10% more than the average weekly price in the independent sector of £610 per week independent sector, although it should be noted that the independent sector provider includes nursing care in the offer. The weekly bed costs are based on the direct costs of running the home (not include overheads such as Finance, HR or facilities management, etc.) The differential between Platters Farm Lodge and the average price in the independent sector is in excess of 30% and these beds have wide ranging occupancy levels.
- 6.2 Day care at Platters Farm is more than 40% more expensive in terms of the daily running costs per place than centres operating in the independent

sector. This cost does not include the costs relating to transport. At consultation meetings, service users explained that they thought that the additional costs relating to the council run services were due to the fact that they have a choice of food on the menu, that they have big portions and are able to have seconds. They placed great value on the quality of the food and explained that they would be prepared to pay a bit extra to maintain this.

7. Advice and analysis – Robert Bean Lodge

- 7.1 The weekly bed cost for Robert Bean Lodge in relation to dementia care is 48% more than the most expensive weekly price in the independent sector of £602 per week independent sector. The weekly bed costs are based on the direct costs of running the home (not including overheads such as Finance, HR or facilities management, etc...)
- 7.2 Day care at Robert Bean Lodge is 50% more expensive in terms of the daily running costs per place than centres operating in the independent sector. This cost does not include the costs relating to transport. .

8. Risk Management

Risk	Description	Action to avoid or mitigate risk
Complaints from Service Users and family carers at the Balfour Day Centre, Nelson Court, Platters Farm Lodge and Robert Bean Lodge	Poor communication could lead to a poor relationship between the council and the Service Users and carers.	<p>Ensure that decision takers take into account all relevant factors and comply with all legal requirements.</p> <p>Ensure that we appropriately communicate the decision, and any subsequent actions, with all service users and carers, and provide clear information.</p>

9. Consultation – process

- 9.1 The consultation period commenced on 12 December 2011 and concluded on 9 February 2012.
- 9.2 Due regard was given to the process as well as the information made available for the decision-making that it would inform so that the consultation process took into account the social model of disability. To ensure participation, the council ensured that there were ‘reasonable adjustments’ so that people could share their views. The adjustments included independent advocacy, use of Easy Read versions of questionnaires; use of accessible buildings for consultation events, the offer of transportation to service user/family meetings and making available the opportunity for service users who could not attend the consultation meetings to call the Social Care Commissioning Team to share their views.

- 9.3 The consultation exercise was undertaken for two purposes. First to inform people about the details of the proposed policy changes and, secondly, to invite the views of service users and carers so that the Council could better understand the direct impact of those changes on them, and take into account those views when reaching its final decision. The consultation programme included writing to existing service users, carers and families, Medway Council Members, Medway Members of Parliament, Medway LINK, NHS partners and Social Care staff. It also included presentations to the Health and Adult Social Care Overview and Scrutiny Committee, on 26 January 2012. Consultation meetings were held as part of the listening exercise.
- 9.4 On the 26 January 2012, the Health and Adult Social Care Overview and Scrutiny Committee received a presentation from the Social Care Commissioning and Voluntary Sector Manager regarding the consultation with service users, staff and stakeholders in respect of the proposed closure of the Balfour Day Centre and the proposed outsourcing of Nelson Court, Platters Farm Lodge and Robert Bean Lodge.
- 9.5 The Committee forwarded to Cabinet the comments of the public made at this meeting to be taken into account as part of the consultation process. See appendix 1.
- 9.6 Additionally, a number of petitions in respect of the proposals have been received (summarised below), some of which were submitted at the Full Council meeting on 12 January 2012. Since the Council meeting, additional signatures for some of these petitions have been received and have been included in the total numbers of signatures shown below:

Summary of petition details	No. of signatures
Requesting retention of Nelson Court Linked Service Centre under Council management and not outsource this care provision	577
Opposing proposed closure of Balfour Day Centre	68
Objection to proposed closure of Balfour Day Centre	991
Petition Council to safeguard care and services for elderly and disabled people by: retaining Robert Bean Lodge, Platters Farm and Nelson Court in public ownership, staffed by Council workers and keeping the Balfour Centre open	507
Requesting Council to safeguard care and services for elderly and disabled people by: retaining Robert Bean Lodge, Platters Farm and Nelson Court in public ownership, staffed by Council workers and keeping the Balfour Centre open	1162
Objecting to the proposed closure of the Balfour Day Centre as removal of these facilities represents Medway Council's failure to recognise the need of Disabled Adult Service users and their carers	3413
Request Council to retain Robert Bean Lodge Linked Service Centre under Council management and do not outsource this provision	1152

We the undersigned benefit from the amenities available at Platters Farm Lodge and oppose the proposal to privatise Platters Farm Lodge and other centres. The proposals outlined, open to question, have merely caused alarm and consternation. Platters Farm Lodge at one time had a shop, a bar and the opportunity to purchase items of clothing and other articles. All have been withdrawn. A private provider will be in the business to make a profit not indulge in philanthropy. It would appear that we are to be the victims of others mis-management.	93
Keep the Balfour Day Centre in Rochester open	16
Defend day care. Defend care homes. No privatisation.	461
Keep the Balfour Day Centre in Rochester open An e-petition on the direct.gov website	428

10. Consultation – Balfour Day Centre

10.1 Service users and their families were provided with plain English and Easy Read versions questionnaires. 144 completed questionnaires were returned and fourteen people were referred for independent advocacy support so that they could share their views. 38 items of correspondence were received including letters and emails, in addition to the petitions referred to in paragraph 9.6. There were nine consultation meetings held as part of the listening exercise with 93 attendees at the meetings – although some people attended more than one meeting.

10.2 In asking people to share their views about the proposal to close the service, the opportunity was taken to ask people to respond to the following question:

What do you see as the main benefits of day services?	No. of respondents choosing this option	% of respondents choosing this option
Social Contact	140	97%
Building confidence	117	81%
Reassurance	97	67%
Gaining new skills	96	67%
A break for carers	94	65%
Other essential services	77	53%
Access to employment	30	21%

10.3 The majority of people explained that they went to the Day Centre for social contact and confidence building. A high number of people also went to the Day Centre to gain new skills, benefit from reassurance and provide a break for carers. Twenty-nine of the respondents wanted to access employment, however, six people currently receive a form of supported employment. These six people were legacy clients from the Manor Road Scheme, which was designed for people with learning disabilities.

10.4 The key messages that have been shared as part of the consultation process so far are:

- 10.4.1 People said that people with disabilities should not bear the same level of savings as other council departments.
 - 10.4.2 People felt the proposals would impact on their social life leaving them more isolated.
 - 10.4.3 Concerns that the changes could result in additional burdens for carers.
 - 10.4.4 Concerns were raised about extended journey times if day centres closed.
 - 10.4.5 Concerns that people moving day centres would not adapt well to the change.
 - 10.4.6 Some people explained that they did not feel safe in parts of Medway.
 - 10.4.7 The Balfour Day Centre was seen as a high quality service and people were not happy to see such a good centre being proposed for closure.
 - 10.4.8 The possibility of outsourcing, rather than closing, the service was raised during the consultation process.
 - 10.4.9 Some people were concerned about anti-social behaviour in the area and vandalism to the building should the service close.
 - 10.4.10 The supported employment programme required refreshing and increased capacity to enable people to access employment, work experience or volunteering opportunities.
- 10.5 In preparing this report, and informing the recommendations, officers identified the need to complete a full impact assessment, see Appendix 4. The full impact assessment will enable Cabinet to give due regard to the issues in determining whether or not to close the Balfour Day Centre and also issues that would need to be addressed if the decision was made to close the Balfour Day Centre.
- 10.6 It is important to emphasise that if the decision to close the Day Centre is made by the Cabinet then this would not mean that service users would not receive a service at all. Instead the council would discharge its statutory duty and ensure that it provides or commissions services in a variety of ways to meet the needs of those it assesses as eligible for support.
- 10.7 In considering the potential impact of this proposal on service users, carers and their families; and having sought advice, in particular, on moving people with a strong affiliation to the Day Centre, any move would need to be carefully undertaken to take into account the anxiety expressed throughout the consultation period. A phased approach would allow for each individual to identify a suitable alternative or alternatives; experienced; and adopted so that a full, person-centred transitional approach is developed on an individual basis. A transitional approach including the matters set out in paragraphs 10.7.1 to 10.7.9 would be undertaken to mitigate against any adverse impact of a decision to close.

Mitigation that could be put in place if the service closed

- 10.7.1 A review of every service user would include but not be limited to individual preferences in relation to activities (both social and therapeutic), access to personal care, general routines at the centre, meal choices, cultural preferences, preferences relating to friendship networks and transport would be undertaken.
- 10.7.2 People who are physically disabled are not by definition automatically vulnerable people. However, those people with disabilities that have additional needs that make them vulnerable would, as a result of a decision to close the Day Centre, be prioritised for assessment and support so that the transition is carefully managed from the point at which the decision is made.
- 10.7.3 On an individual basis it will be essential to determine the best preparation approach for the move on with confidence.
- 10.7.4 Ensure that all carers are provided with a meaningful carers assessment and the necessary support that is identified from that assessment.
- 10.7.5 Ensure clear communication of the decision and how it will be implemented so that being kept informed about the decision itself lessens people's anxiety and what it means in terms of them as an individual.
- 10.7.6 Facilitate opportunities for alternative providers to visit the Day Centre and meet service users, their families and carers to understand the offer in the independent sector.
- 10.7.7 Where appropriate the council would augment the provision of services so that, for example, opportunities for raised flower beds in day care facilities will enable wheelchair users to enjoy an activity such as gardening.
- 10.7.8 Ensure that everyone involved in supporting each service user (formal and informal carers, health professionals and other social care professionals) were involved in, and aware of, the change. This would be particularly important for those people that use the Day Centre and whose vulnerabilities become more acute.
- 10.7.9 Ensure that all dietary requirements and preferences continue to be met.
- 10.8 The potential for outsourcing was explored in the report presented to Cabinet on 29 November 2011. Given that the responses in the questionnaires identify that nearly 30 people would like to access employment and therefore, if appropriately supported, would move on from the Balfour Day Centre, it is considered that the attendance at the Day Centre would continue to fall.

- 10.9 Although not raised by people during the consultation period, all the attendees of the Day Centre from Medway may be affected by another proposed change in Adult Social Care relating to the Fairer Contributions Policy. This will be carefully monitored as part of the individual assessments that take place as part of the needs assessment, support planning and financial assessment.
- 10.10 Options about the future of the building should not directly impact on the decision about whether it is appropriate to close the service. However, the recommendations relating to the future of the service includes a proposal to manage the security of the property, if the recommendations indicate that the service should close.

Counter-proposals

- 10.11 In terms of the staff consultation, staff have submitted a counterproposal, as part of their formal consultation, for consideration by the Service Managers and Assistant Director.
- 10.12 The staff proposal was that the wider community could use the building so that other services could operate from the building alongside the day care element. In particular, a Food Enterprise Hall would be made available to members of the public and it could be commercially run. The day care element could be either kept in-house or outsourced.
- 10.13 This proposal was carefully considered, however, it did not provide evidence of need/demand to support it being a viable alternative. Therefore officers would not support this proposal.
- 10.14 On 9 February 2012, a proposal came forward from Medway Community Healthcare. Given that the consultation period ended on this date, officers have not had an opportunity to explore the viability of the proposal or its impact on service users. Officers would require a period of time to explore this proposal with Medway Community Healthcare and then, if appropriate, consultation with service users and their families so that the outcome can be reported to Cabinet.

11 Consultation – Platters Farm Lodge

- 11.1 There were four consultation meetings held as part of the listening exercise with 45 attendees at the meetings plus a public meeting about outsourcing generally, where 24 people attended. 213 completed questionnaires were returned and two people requested independent advocacy support so that they could share their views. 40 items of correspondence were received including letters and emails (15 items are specifically about Platters farm Lodge), in addition to the petitions referred to above.
- 11.2 Key messages that have been shared as part of the consultation process so far:
- 11.2.1 People valued the support that they had received, or are receiving, from the services.

- 11.2.2 People said that older people services should not bear the same level of savings as other council departments.
 - 11.2.3 Some people were concerned that the proposal was about closing the service and this view was expressed throughout the consultation period.
 - 11.2.4 People were concerned about that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred.
 - 11.2.5 People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service.
 - 11.2.6 People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector.
 - 11.2.7 Concerns that the changes could result in additional burdens for carers of people that use the day services.
 - 11.2.8 Concerns were raised about access to the minibus service in terms of day care.
 - 11.2.9 Concerns were raised about the quality of the food falling or the price becoming more expensive in the day care facilities.
- 11.3 In preparing this report, and informing the recommendations, officers identified the need for a full impact assessment. See Appendix 5. The full impact assessment enables Cabinet to give due regard to the issues in determining whether or not to outsource the service at Platters Farm Lodge and also the issues that would arise and need to be addressed if the decision was made to outsource Platters Farm Lodge. Paragraphs 11.5 to 11.7 set out the mitigations that could be put into place if a decision to outsource were made.
- 11.4 In considering the impact of this proposal on service users, carers and their families, there are a minimum of two key themes that are addressed in the full impact assessment: Quality assurance and affordability. These are also addressed in paragraphs 11.5 to 11.9.

Mitigation that could be put in place if the service is outsourced

- 11.5 If the decision is taken by Cabinet to outsource the service then officers would consult with service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of bids.
- 11.6 Bids would be evaluated in terms of a scoring that has a weighting of 80% quality and 20% price.
- 11.7 In awarding a contract the council would frequently visit the service during the first six months and review the frequency of visits as part of those meetings.

- 11.8 Officers developing a Third Party Top Up & Legacy Placements Policy would address the issue of affordability for existing residents.
- 11.9 There is recognition that the current high quality of care needs to be maintained. Therefore, officers would make available regular reporting, of key performance indicators about the service after transfer, to the Cabinet as part of the Council Plan.

12 Consultation – Nelson Court

- 12.1 There were two consultation meetings held as part of the listening exercise with attendees at the meetings – although some people attended more than one meeting. There was also a public meeting about outsourcing generally, where 24 people attended. 213 completed questionnaires were returned and two people requested independent advocacy support so that they could share their views. 40 items of correspondence were received including letters and emails (10 were specifically about Nelson Court), in addition to the petitions referred to above. Three unbefriended residents were referred to the Independent Mental Capacity Advocacy service to provide them with an opportunity to participate in the consultation.
- 12.2 Key messages that were shared as part of the consultation process were:
- 12.2.1 People valued the support that they had received, or are receiving, from the services.
 - 12.2.2 People were concerned that there was not a full understanding of the demand for the day care service at this unit. As one of two providers of dementia day care services, their service is currently oversubscribed.
 - 12.2.3 People said that Adult Social Care, and in particular older people services, should not bear the same level of savings as other council departments.
 - 12.2.4 Some people were concerned that the proposal was about closing the service and this view was expressed throughout the consultation period.
 - 12.2.5 People were concerned about the prospect of the service being outsourced together with the property being sold as well.
 - 12.2.6 People were concerned that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred.
 - 12.2.7 Concerns that the changes could result in additional burdens for carers of people that use the day services and anxiety for relatives of those that are resident at the service.
 - 12.2.8 People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service.
 - 12.2.9 People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service.

- 12.2.10 People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector.
- 12.2.11 Some people said that their loved ones could not find an alternative service in the independent sector that would accept the challenging behaviours – related to their condition of dementia – and therefore Nelson Court had been the ‘safety net’.
- 12.3 In preparing this report, and informing the recommendations, officers identified the need for a full impact assessment. See Appendix 5. The full impact assessment enables Cabinet to give due regard to the issues in determining whether or not to outsource the service at Nelson Court and also the issues that would arise and need to be addressed if the decision was made to outsource. Paragraphs 12.5 to 12.10 set out the mitigations that could be put in to place if a decision to outsource were made.
- 12.4 In considering the potential impact of this proposal on service users, carers and their families, there are three key themes that are addressed in the full impact assessment: Quality assurance, affordability and control of the future of the service. These are also addressed in paragraphs 12.5 to 12.10.

Mitigation that could be put in place if the service is outsourced

- 12.5 If the decision is taken by Cabinet to outsource the service then officers would consult with service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
- 12.6 In awarding a contract the council would frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
- 12.7 Officers developing a Third Party Top Up & Legacy Placements Policy would address the issue of affordability for existing residents.
- 12.8 A key message that recurred during the meetings related to the ownership of the building and the need to be able to have greater control on the future of the service by retaining the building as a landlord. If the decision is made to sell the building the Council can impose a covenant, enforceable under s33 of the Local Government (Miscellaneous Provisions) Act 1982 against the purchaser and any subsequent owners of the property, regulating the use of the land.
- 12.9 The council should consider specifying a number of beds or a wing for people with challenging behaviours to be supported either during crisis or for long-term placements.
- 12.10 There is recognition that the current high quality of care needs to be maintained. Therefore, officers would make available regular reporting of key performance indicators about the service after transfer to the Cabinet as part of the Council Plan.

13 Consultation – Robert Bean Lodge

- 13.1 There were five consultation meetings held as part of the listening exercise with 42 attendees at the meetings – although some people attended more than one meeting. There was also a public meeting about outsourcing generally, where 24 people attended. 213 completed questionnaires were returned and two people requested independent advocacy support so that they could share their views. 40 items of correspondence were received including letters and emails (13 were specifically about Robert bean Lodge), in addition to the petitions referred to above.
- 13.2 Key messages that were shared as part of the consultation process were:
- 13.2.1 People valued the support that they had received, or are receiving, from the services.
 - 13.2.2 People said that older people services should not bear the same level of savings as other council departments.
 - 13.2.3 Some people were concerned that the proposal was about closing the service and this view was expressed throughout the consultation period.
 - 13.2.4 People were concerned that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred.
 - 13.2.5 Concerns that the changes could result in additional burdens for carers of people that use the day services and anxiety for relatives of those that are resident at the service.
 - 13.2.6 People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service.
 - 13.2.7 People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service.
 - 13.2.8 People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector
 - 13.2.9 Concerns were raised about access to the minibus service
 - 13.2.10 Concerns were raised about the quality of the food falling or the price becoming more expensive in the day care facilities
- 13.3 The Diversity Impact Assessment presented in the report to Cabinet on 29 November has been updated to reflect the views shared as part of the consultation process, see Appendix 5.
- 13.4 In considering the potential impact of this proposal on service users, carers and their families, there are two key themes that are addressed in the full impact assessment: Quality assurance and affordability. These are also addressed in paragraphs 13.5 to 13.8.

Mitigation that could be put in place if the service is outsourced

- 13.5 If the decision is taken by Cabinet to outsource the service then officers would consult with service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
- 13.6 In awarding a contract the council would frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
- 13.7 Officers developing a Third Party Top Up & Legacy Placements Policy would address the issue of affordability for existing residents.
- 13.8 There is recognition that the current high quality of care needs to be maintained. Therefore, officers would make available regular reporting, of key performance indicators about the service after transfer, to the Cabinet as part of the Council Plan.

14. Director's comments

Balfour Centre

- 14.1 Those that use the Balfour Day Centre and their carers highly value the service and benefits that it provides to them.
- 14.2 Officers are confident that the outcomes achieved at the Balfour Centre will continue to be delivered by the independent sector if Cabinet agrees to the recommended closure of the Balfour Centre.
- 14.3 If Cabinet are minded to consider the expression of interest from Medway Community Healthcare, then officers will work with Medway Community Healthcare to explore the matter, consult service users, carers and staff as appropriate and return to Cabinet for determination.

Nelson Court, Platters Farm Lodge and Robert Bean Lodge

- 14.4 People that use the day services, and those resident at Nelson Court, Platters Farm Lodge and Robert Bean Lodge, as well as their carers, highly value the services that it provides to them.
- 14.5 Officers are confident that the outcomes achieved at Nelson Court, Platters Farm Lodge and Robert Bean Lodge, will continue to be achieved if Cabinet agrees to the recommended outsourcing.

15. Legal, Financial and HR implications

Legal

- 15.1 The Council has a range of statutory duties and powers to provide services to vulnerable adults such as older people, people with learning disabilities, physically disabled people, people with mental health problems, drug and alcohol misusers and carers. Duties and powers are contained within the National Assistance Act 1948, the Chronically Sick and Disabled Persons Act

1970, the NHS and Community Care Act 1990, the Mental Health Act 1983 together with other statutes and regulations. Local Authorities can provide or commission services in a variety of ways to meet the needs of those it assesses as eligible for services. Indeed the personalisation agenda encourages moves away from direct provision by councils to personal budgets allowing service users the choice to purchase services from a range of providers.

- 15.2 Where any consultation is undertaken it must be undertaken at a time when proposals are still at a formative stage; it must include sufficient reasons for particular proposals to allow those consulted to give intelligent consideration and an intelligent response; adequate time must be given for this purpose; and the product of consultation must be conscientiously taken into account when the ultimate decision is taken.
- 15.3 When considering making changes to service provision, the decision maker needs to comply with its obligations as to equalities under the Equality Act 2010. In essence this requires decision makers to have due regard to the need to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
- 15.4 Protected characteristics, as defined in the 2010 Act, are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 15.5 Having due regard to the above needs involves
- removing or minimising disadvantages suffered by people due to their protected characteristics.
 - taking steps to meet the needs of people from protected groups where these are different from the needs of other people.
 - encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.
- 15.6 In order to comply with its equality duties, the Council is required to engage with service users, representative groups, staff and unions and to use the information and views gathered as a result of such engagement (together with other equality information the local authority has) in assessing the equality impact of the proposals.
- 15.7 Where the Council will be procuring services as a result of the transfer of properties to the private sector, it must carry out a procurement exercise. The services that would be procured are Part B under the Public Contracts Regulations 2006 (as amended) which means that only some of the EU procurement rules apply – namely, obligations relating to technical specifications (i.e. non-discriminatory specification requirements) and post-award information (i.e. a requirement to send a Contract Award Notice to the Office of Publication of the OJEU).

- 15.8 It is established case law that the award procedures for contracts must comply with the general principles derived from the Treaty on the functioning of the European Union, in particular the principle of equal treatment and the consequent obligation of transparency. This means that the contract should still be given a sufficient degree of advertising necessary in order to alert likely potential suppliers of the opportunity to bid. Competition remains the main mechanism by which the Council can ensure both improvements in quality and innovation of service provision, and value for money. The invitations to tender will still need to be accompanied by agreed evaluation criteria that are designed to determine the bid that represents the best solution to deliver the specified requirements. The best value for money bid will be that which is judged to offer the optimum combination of service capability and quality (including safeguarding standards, safety, deliverability and other specified areas).
- 15.9 The Council also needs to taken into account the human rights of residents under the Human Rights Act 1998. The human rights relevant under the Human Rights Act 1998 are those set out in Article 8, the First Protocol, Article 1 of the European Convention on Human Rights.

Article 8 states as follows:

- (1) *Everyone has the right to respect for his private and family life, his home and his correspondence.*
- (2) *There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others.*

Article 1 of the First Protocol states as follows:

Every natural or legal person is entitled to the peaceful enjoyment of his possessions. No one shall be deprived of his possessions except in the public interest and subject to the conditions provided for by law and by the general principles of international law.

The preceding provisions shall not, however, in any way impair the right of a State to enforce such laws as it deems necessary to control the use of property in accordance with the general interest or to secure the payment of taxes or other contributions or penalties.

In making a final decision Cabinet will need to take in to account any issues raised by residents including any alternative options put forward, and ensure that the agreed action is proportionate to the aims pursued by the Council.

Financial

- 15.10 The council must make efficiencies in order to deliver a balanced budget over the next three years and to respond to the reduction in funding available to the council from central Government.
- 15.11 Adult Social Care is the second highest spend in the council, after schools. By better using resources so that the same or better outcomes are delivered in an affordable way this will enable the council to continue to make the same range of services available to the growing population of those with substantial and critical needs.
- 15.12 It is estimated that the options for outsourcing the residential care services will deliver a saving in the region of £1.1m per year.
- 15.13 In addition to this, it is estimated that decommissioning the Balfour Day Centre and reproviding services through Personal Budgets and alternative services, could save between £100,000 and £200,000 per year.

Human Resources

- 15.14 Any reorganisation of services will have an impact on employees. Where an undertaking (e.g. the management and operation of a care home) is transferred as a going concern the Transfer of Undertakings (Protection of Employment) Regulations 2006 will apply. Any staff assigned to that undertaking will be transferred on the same terms and conditions to the new provider.
- 15.15 Where a provision is closed without being transferred to a new provider staff will be made redundant, however every effort will be made to redeploy employees. The Council must ensure that the process for any proposed redundancies complies with the required statutory obligations to inform and consult employees both collectively and individually under Section 188 of The Trade Union and Labour Relations (Consolidation) Act 1992. The Council is also under a duty to inform the Secretary of State under Section 193 of the above Act about proposed redundancies. In addition, the process adopted with regard to potential redundancies must be in accordance with the Council's reorganisation policy and comply with the general principles of fairness.

16. Recommendations

Balfour Day Centre

- 16.1 That Cabinet notes the issues identified in the Full Diversity Impact Assessment (as set out in Appendix 6).
- 16.2 That Cabinet notes the expression of interest from Medway Community Healthcare and if minded to instruct officers to explore this, consult with service users, carers and staff and report back to Cabinet for determination.

Platters Farm Lodge

- 16.3 That Cabinet notes the issues identified in the Full Diversity Impact Assessment (as set out in Appendix 8) and agrees to outsource the services provided at Platters Farm Lodge.
- 16.4 That Cabinet adopts the implementation plan as set out in the Full DIA for Platters Farm Lodge.

Nelson Court

- 16.5 That Cabinet notes the issues identified in the full Diversity Impact Assessment (as set out in Appendix 7) and agrees to outsource the services provided at Nelson Court, including sale of the site and to receive a further report to approve the terms of proposed disposal in due course.
- 16.6 That Cabinet adopts the implementation plan as set out in the full DIA for Nelson Court.

Robert Bean Lodge

- 16.7 That Cabinet notes the issues identified in the full Diversity Impact Assessment (as set out in Appendix 9) and agrees to outsource the services provided at Robert Bean Lodge.
- 16.8 That Cabinet adopts the implementation plan as set out in the full DIA for Robert bean Lodge.

17. Suggested reasons for decisions

Balfour Day Centre

- 17.1 To ensure that all potentially viable options for the future of the Balfour Day Centre are properly investigated before a decision is made.

Platters Farm Lodge, Nelson Court and Robert Bean Lodge

- 17.2 Benchmarking the quality of Nelson Court, Platters Farm Lodge and Robert Bean Lodge against the independent sector demonstrates that the services are relatively expensive and that efficiencies can be achieved without compromising the quality of outcomes delivered by each service.
- 17.3 The implementation plans within the full DIAs provide assurance that suitable adjustments will be made to ensure that any impact on those using the service is minimised.
- 17.4 In relation to the sale of the Nelson Court site, the imposition of a covenant will protect the future of the site.

Lead officer contact details

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Background Papers:

Report to Cabinet 29 November 2011 - Medway Council's Vision for Commissioning and Providing Adult Social Care Services in Medway:

<http://democracy.medway.gov.uk/ieListDocuments.aspx?CId=115&MId=2336&Ver=4>

Report to Health and Adult Social Care Overview and Scrutiny Committee 26 January 2012 - Medway Council's Vision for Commissioning and Providing Adult Social Care Services in Medway:

<http://democracy.medway.gov.uk/ieListDocuments.aspx?CId=131&MId=2436&Ver=4>

Consultation documentation and responses

Appendix One

Extract of the record of the meeting from the Health and Adult Social Care Overview and Scrutiny Committee meeting held on 26 January 2012

Discussion:

The Committee considered the issue of the decommissioning of the Balfour Centre first and received a presentation on the proposals by the Social Care Commissioning and Voluntary Sector Manager.

(a) Balfour Centre

Discussion:

The Social Care Commissioning and Voluntary Sector Manager explained the background to the proposal to close the Balfour Centre which was that the attendance at the Centre was falling as more people chose direct payments. She also pointed out that a number of independent sector providers were keen to enter the market and would be more cost effective. She referred to the commissioning of a number of Changing Place toilets across Medway one at Eastgate and another at Hempstead Valley.

Mrs Cooper, as lead petitioner, addressed the Committee and put forward the following points:

- Recent visits from some Members of the Council to the Balfour Centre had been welcome
- She intended to make a request, under the Freedom of Information Act, for full attendance register details of attendance at the Balfour Centre over the past two years to check whether attendance had fallen
- Disappointment had been expressed that the details of alternative provision had not been made available during the consultation period in spite of them being requested
- Once the Centre was closed it could not be easily replaced and it was likely such Centres would be in even greater demand in future
- If the independent sector were keen to provide such facilities why could the Council not provide them?
- Staff at Balfour Centre provided a helpful service to service users in helping them deal with practical and emotional problems including providing a place where they could share their concerns

Mr Munton, as lead petitioner of one of the petitions relating to both Balfour and the outsourcing issue, put forward the following points:

- It was felt that to ensure a mix of provision in social care that good public sector provision was needed

- There had been an increase in reports in the media recently of problems with social care establishments run by the private sector
- The cost to the private sector of running social care establishments must be the same as for the local authority so why could the local authority not run them more economically?
- There was no private provision that adequately compensated for the loss of the Balfour Centre
- Why had the Council not considered other alternatives to privatisation involving a more co-operative style?

Mr Crittenden a service user at the Balfour Centre spoke in support of the Centre and put forward the view that if it closed there would be limited options for the service users.

A relative of a service user at the Balfour Centre urged Members to vote in accordance with their conscience.

Members then questioned officers about the proposal to decommission the Balfour Centre and the Social Care Commissioning and Voluntary Sector Manager undertook to provide the list of alternative provision, along with some responses to frequently asked questions, to the consultation meeting, which would be held on 30 January.

Concern was expressed by some Members that, without the use of the Balfour Centre, there would be very few places which could accommodate a number of people using wheelchairs to allow these service users an opportunity to socialise. They felt this would increase the possibility of the service users becoming isolated and remaining at home.

Reference was made to a Member task group, which took place in 2008 relating to Linked Service Centres and, responding to a question, the Assistant Director, Adult Social Care, outlined the attempts made to follow through on some of the recommendations to investigate whether some could be run as user led organisations. He also confirmed that discussions had taken place with other Council departments about the potential for using the Balfour Centre for other uses. Unfortunately these did not result in any solutions coming forward. He then spoke about the varied services offered at an Age Concern centre such as chiropody and other care services, which were proving very popular.

In relation to the alternative provision suggested by officers the view was put forward that it would have been useful if the service users could have been given details of these options to allow them to assess them during the consultation period.

Details were given of further signatories to the petition from a number of Medway General Practitioners, relating to the possible decommissioning of the Balfour Centre, who were concerned about the prospect of no longer being able to refer people to the Centre.

Decision:

In referring the comments of the Committee to the Cabinet, Members requested that appropriate support is given to people at the Balfour Centre and all people with

disabilities to steer them through the choices available to them, and to a more independent life.

(b) Outsourcing of Nelson Court, Platters Farm and Robert Bean Lodge

Discussion:

The Social Care Commissioning and Voluntary Sector Manager gave a presentation on the outsourcing proposals. She explained that the proposal was for Nelson Court to be sold in terms of the property and service and for Robert Bean Lodge and Platters Farm Lodge it was proposed that only the services would be outsourced.

Nelson Court

Mrs Ruparel, as lead petitioner, and whose husband is at Nelson Court, stated that she had an additional 62 signatures to her petition. She then addressed the Committee on the following points:

- Nelson Court has an excellent rating by the Care Quality Commission and she felt it was a centre of excellence
- She, and other families/carers of service users, were extremely concerned and worried about the future provision for challenging residents if Nelson Court were to be privatised on the basis that some of the privately run centres were unwilling to take people with complex conditions or advanced dementia. She queried where the Council's safety net would be in such circumstances and in cases where the private sector failed either financially or with regard to the quality of care offered
- In her view the services offered by the private sector did not compare to those offered by staff at Nelson Court. In particular she referred to the fact that staff accompanied residents on hospital visits, which was very important for users with no relatives. She also mentioned that if her husband is hungry at 2am the staff are prepared to make him a sandwich. She did not think this would happen in a privately run establishment.
- The Diversity Impact Assessment did not appear to cover a large proportion of the issues. She gave two examples from her own personal experience, one relating to her husband's need for daily baths on religious grounds and to an incident at a particular private establishment she looked at, as her husband was offered a room on the first floor which had open access to stairways. He was also offered a manually operated wheelchair there and considering that her husband suffers from dementia she saw this as a significant safety risk.

Platters Farm

The Chairman stated that a further petition had been received in relation to Platters Farm signed by 93 people. A copy had been given to each Member present. A lead petitioner had been identified but was unable to attend the meeting.

A member of the public present addressed the Committee about her concerns regarding privatisation of care homes, which she said did not work. She referred to the evidence of poor care, the incidence of pressure sores and malnutrition, which meant that a number of residents had to be referred to hospital, which cost the NHS

money. She hoped that the Council would actually listen to the views and concerns expressed during the consultation.

Robert Bean Lodge

Cheryl Ling, lead petitioner and family member of a service user, addressed the Committee and made the following points:

- She felt Medway should be proud of Robert Bean Lodge and see it as a flagship and model of good practice
- She illustrated a number of examples where the private sector had failed its residents
- As a teacher she was expected to subscribe to the principle of 'Every Child Matters' and she felt that elderly people should also be shown the same high levels of priority when it came to service provision
- The standards of care and positive interaction with residents at Robert Bean Lodge was very noticeable across the organisation from kitchen staff to carers at the centre and she felt this was unlikely to be replicated by private organisations
- She pointed out that not one person at the consultation events had been in favour of privatisation

Concerns were then expressed by a number of Members about privatisation, in particular the Council's ability to intervene being significantly weakened if things went wrong.

Responding to a question, the Director of Children and Adults explained that the reason why the Council could not operate at a comparable cost to the private sector was because the Council were unable to take in 'self funders' into Council run Linked Service Centres and because of collective corporate costs. The proportion of self funding people into privately run establishments made it much more cost effective for them.

The Assistant Director, Adult Social Care, explained that in relation to more challenging residents the Council would work closely with private organisations to protect the needs of the residents. Partly this would be done at the commissioning stage when service specifications were set out and by providing comprehensive training for staff in dealing with complex residents as their initial response to challenging behaviour was vital in such cases. He also stated that the establishments would all be subject to announced and unannounced inspections both by the Care Quality Commission and by Performance and Compliance Officers from the Council. Responding to a further question he explained that the Council had emergency measures in place in the event that any residential home had to be closed at short notice.

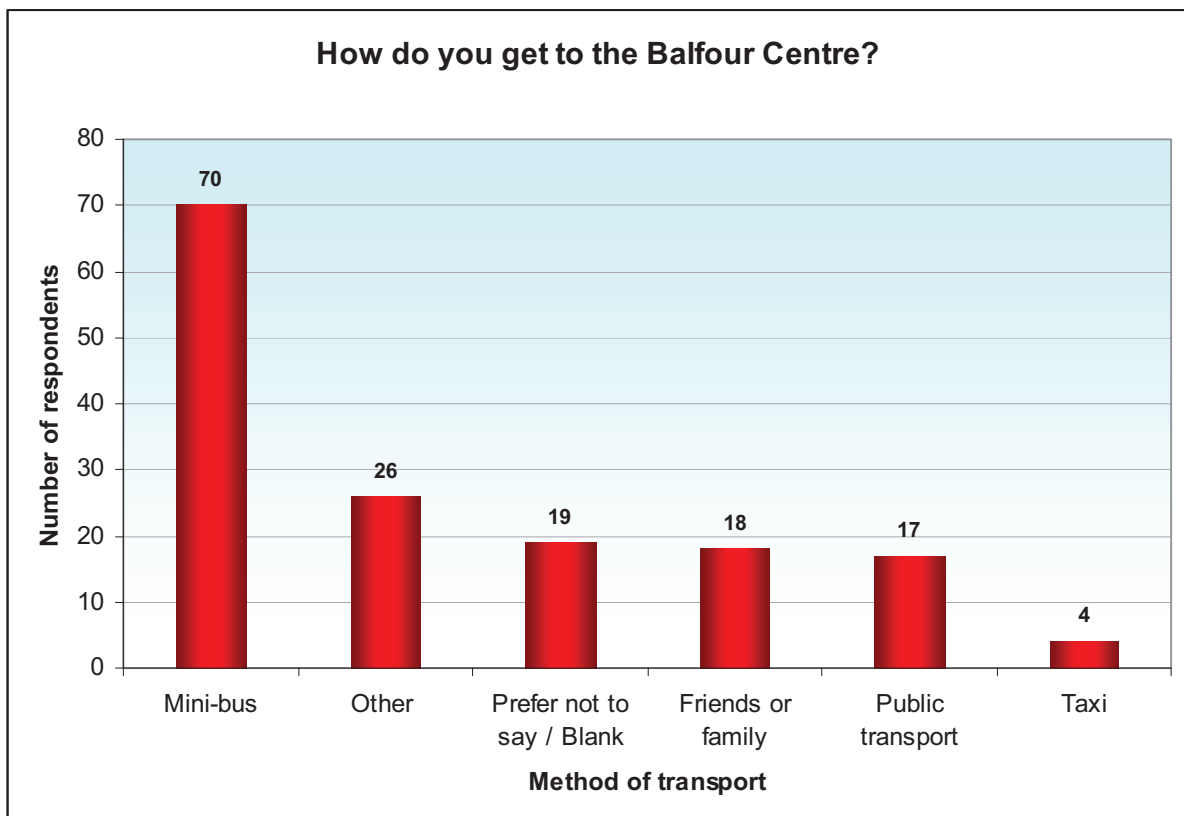
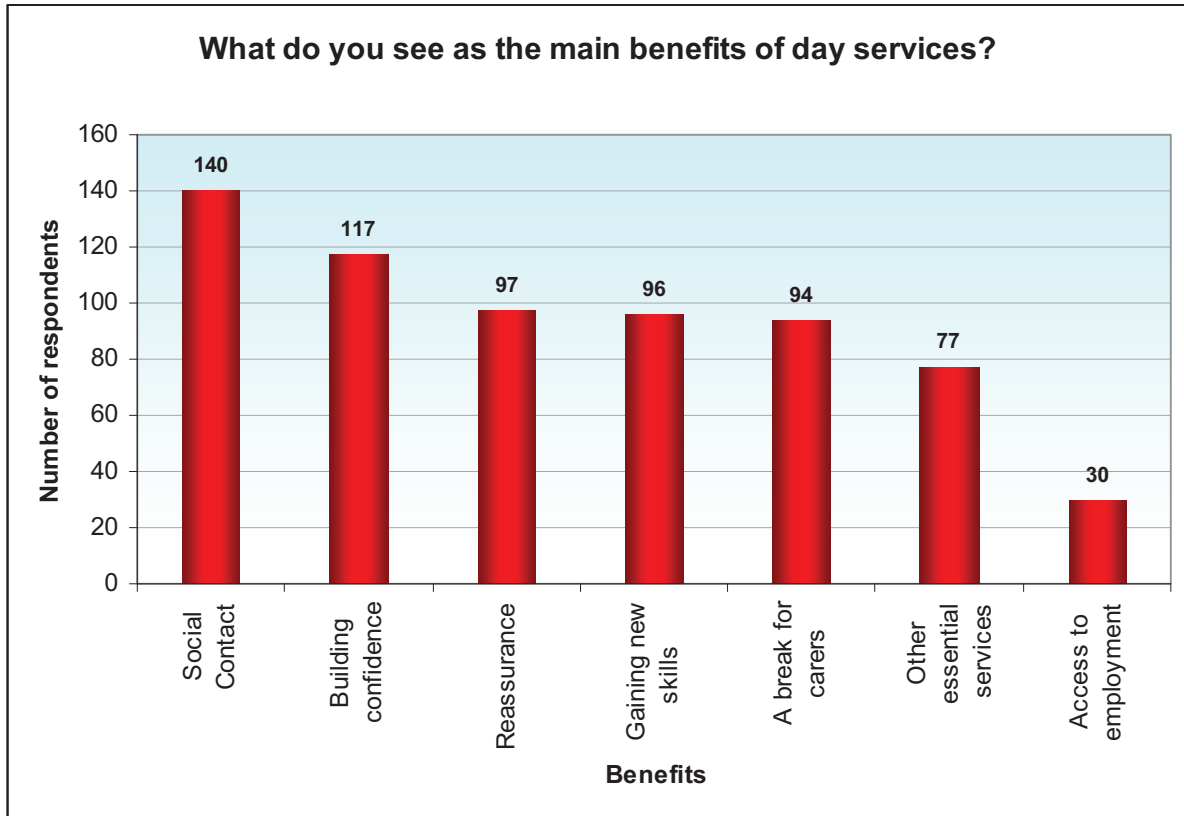
A concern was then expressed that if the Council were to sell Nelson Court, it could leave it vulnerable to being sold to developers, and not retained as a social care establishment, in view of the area of development around it.

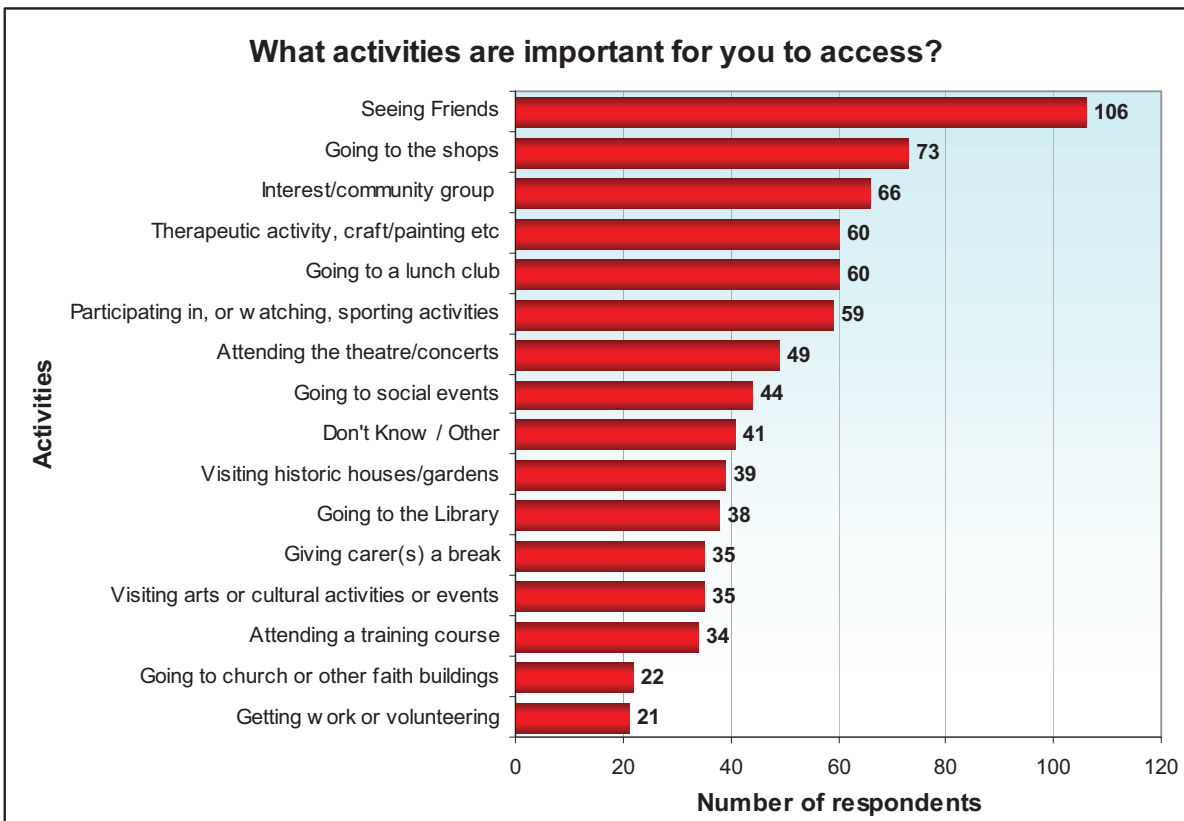
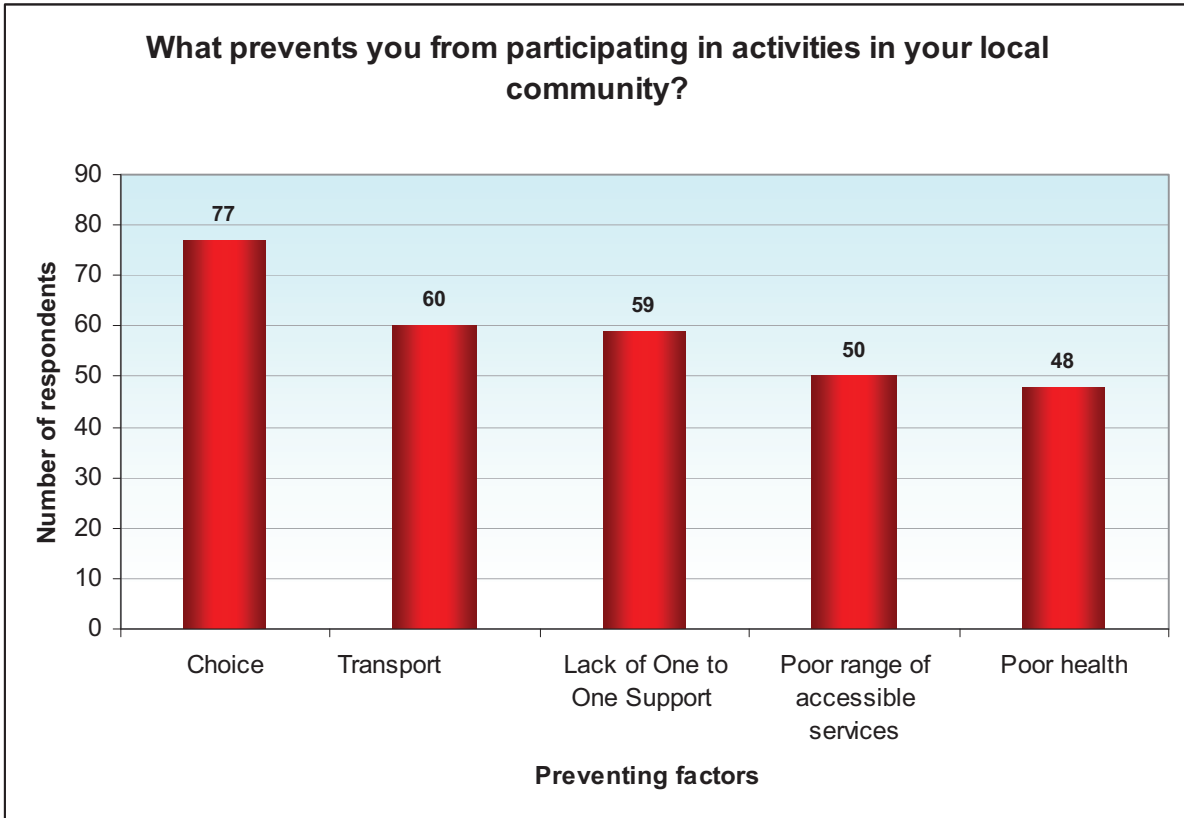
Decision:

The Committee forwarded to Cabinet the comments of the public made at this meeting to be taken into account as part of the consultation process.

Appendix Two

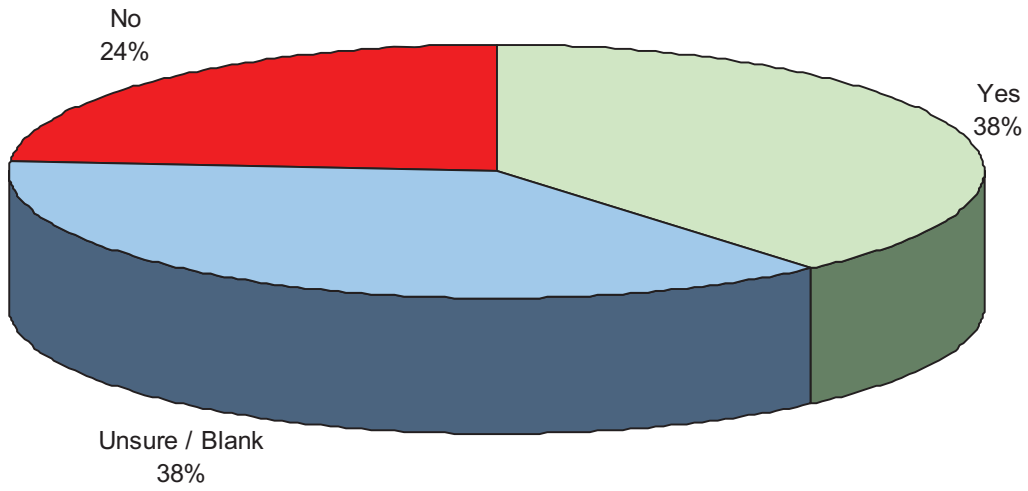
Analysis of the responses to the Balfour Centre consultation questionnaire



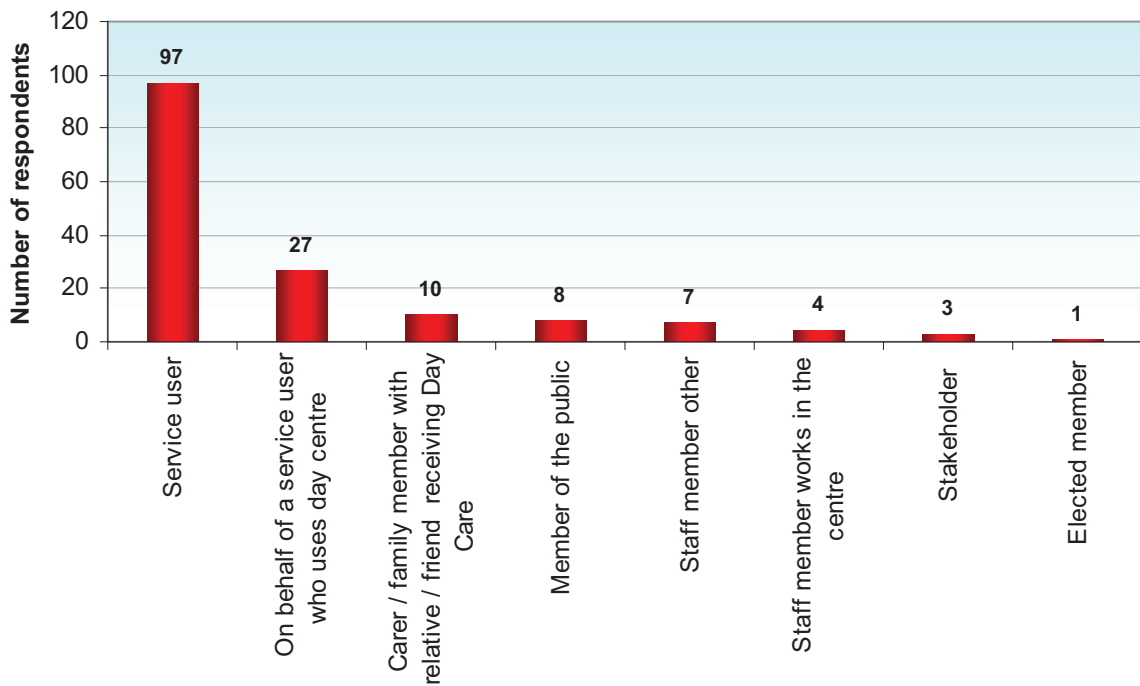


Some of the activity options have been merged for this question to ensure consistency between the standard and easy-read version of the questionnaire

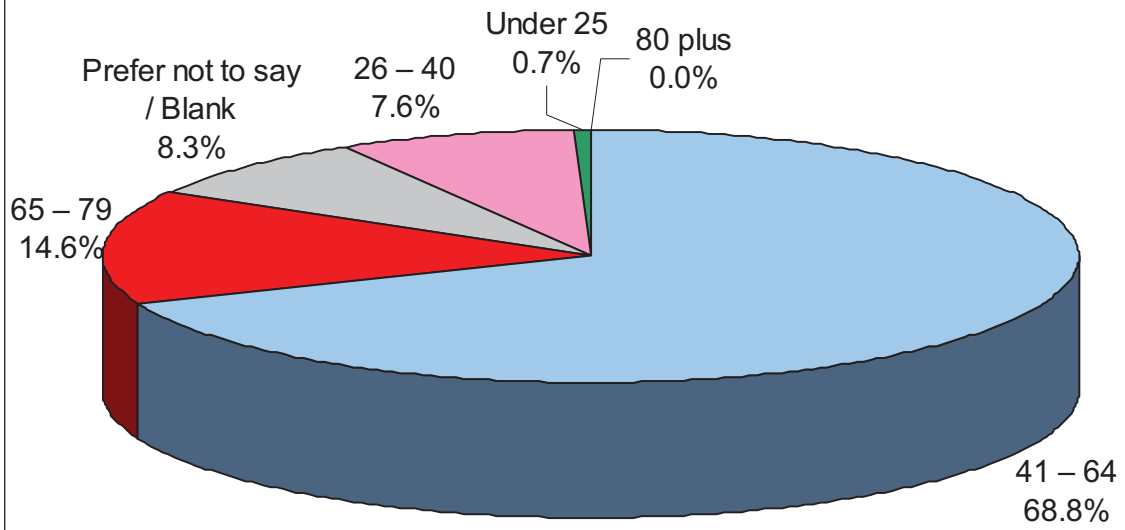
Would you like more tailored support to help you access local activities or support to enable small groups of friends to meet together at home?



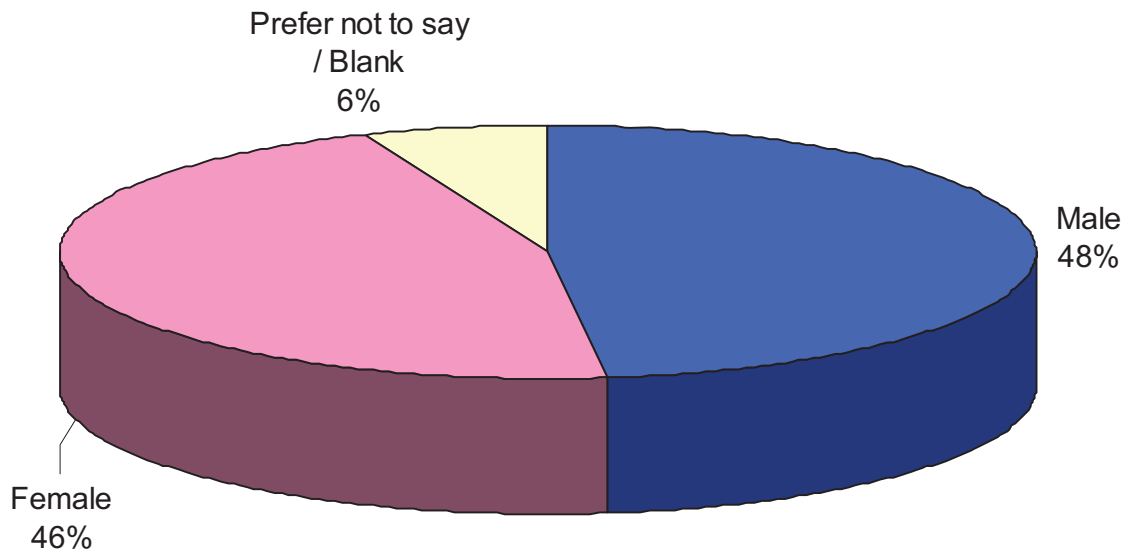
How respondents described themselves

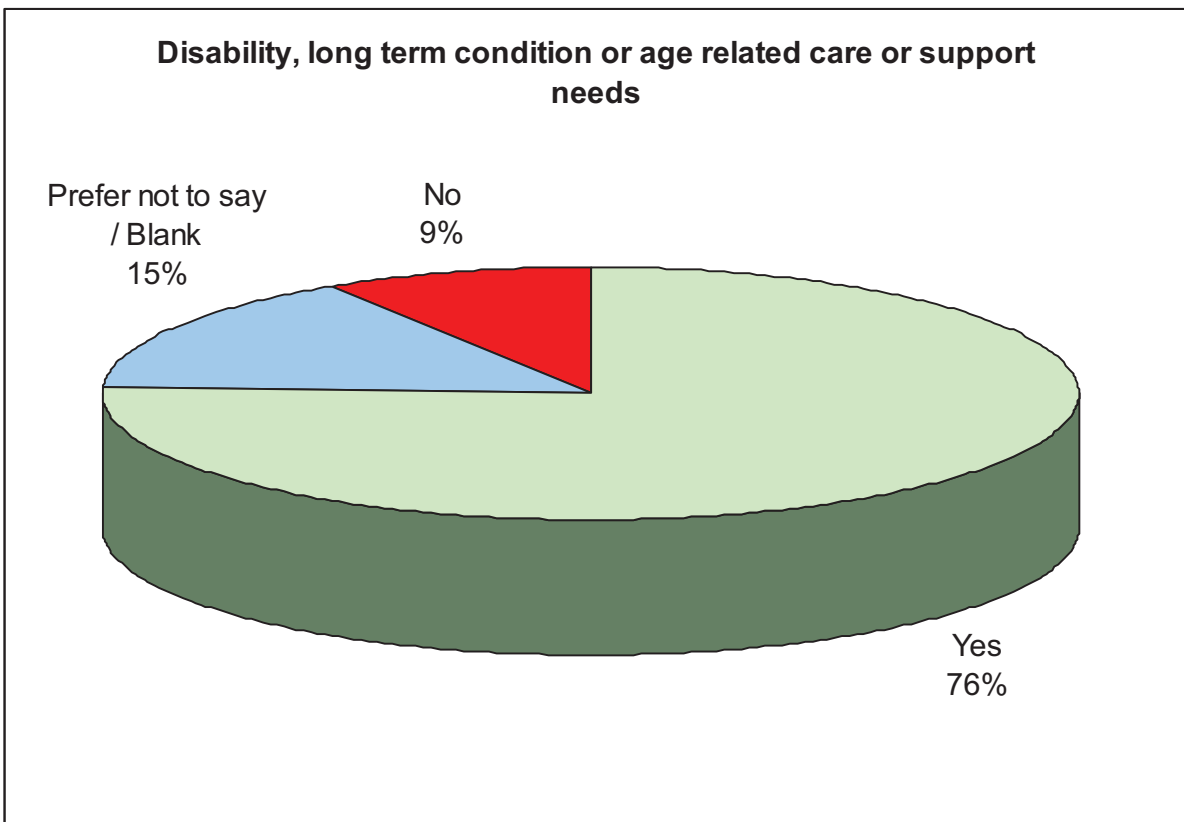
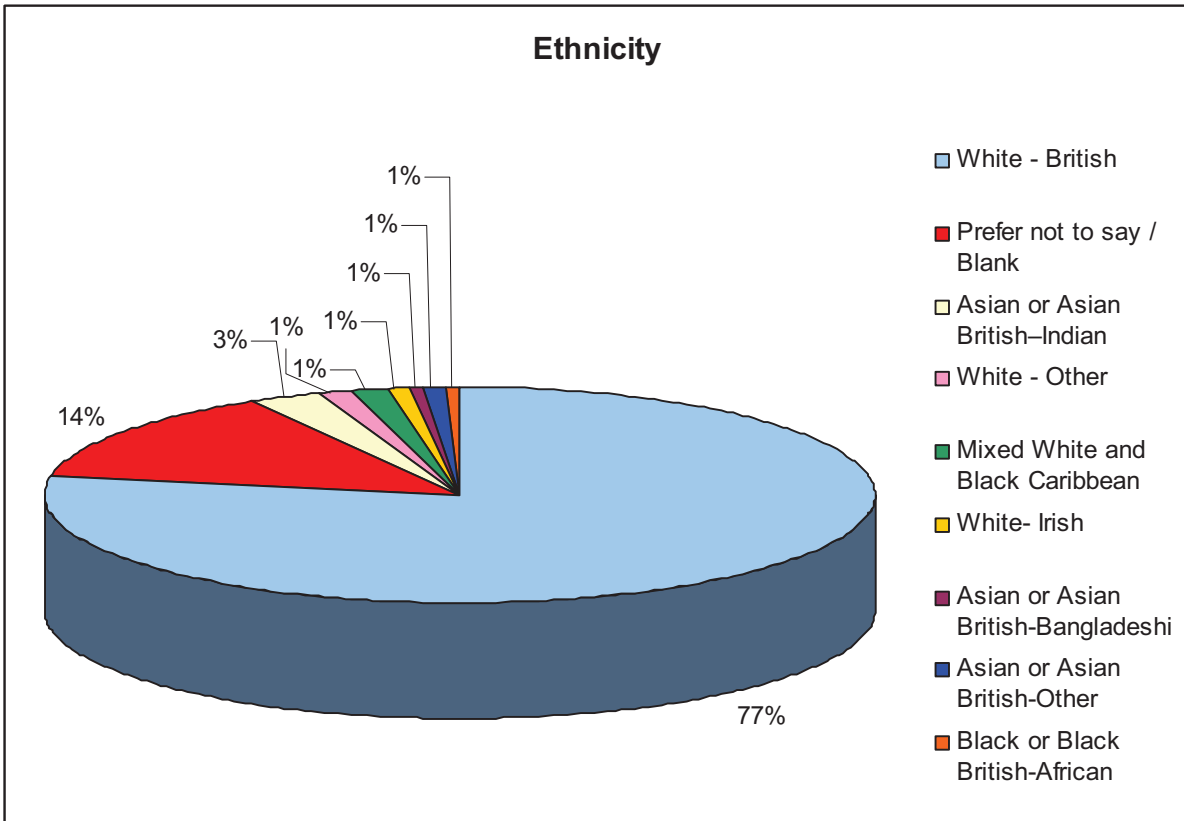


Age Group of respondents

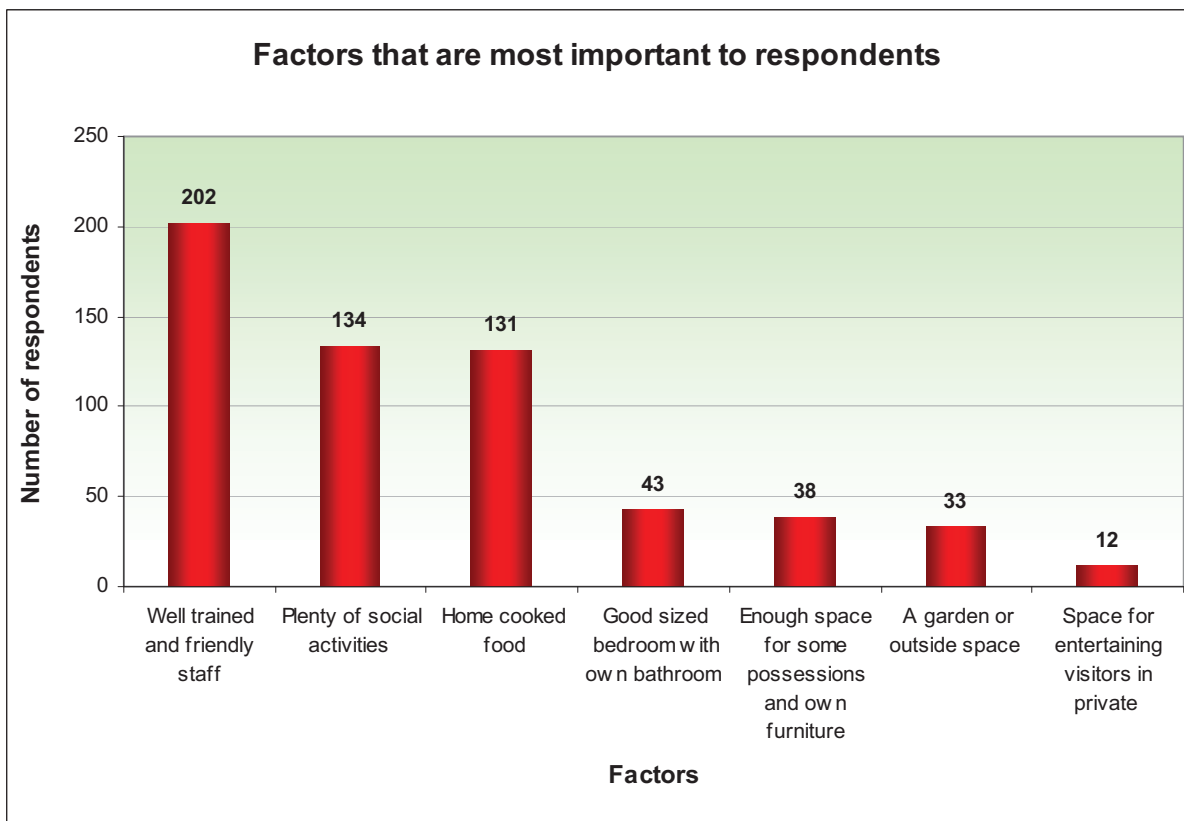
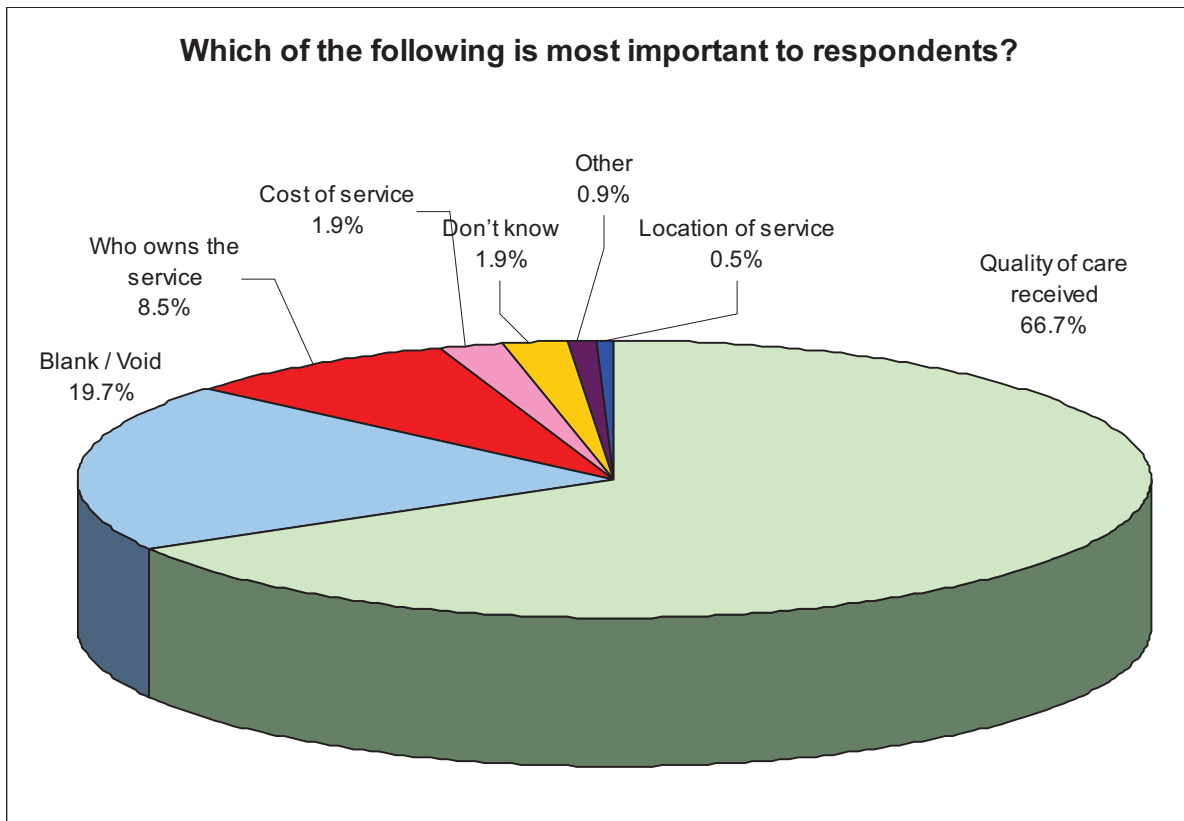


Gender of respondents

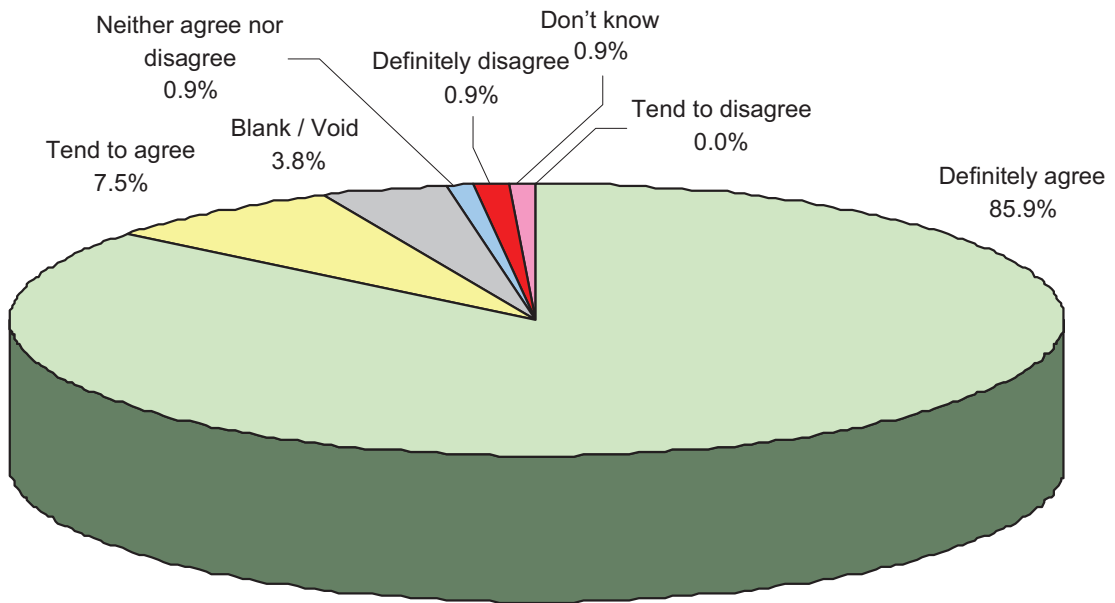




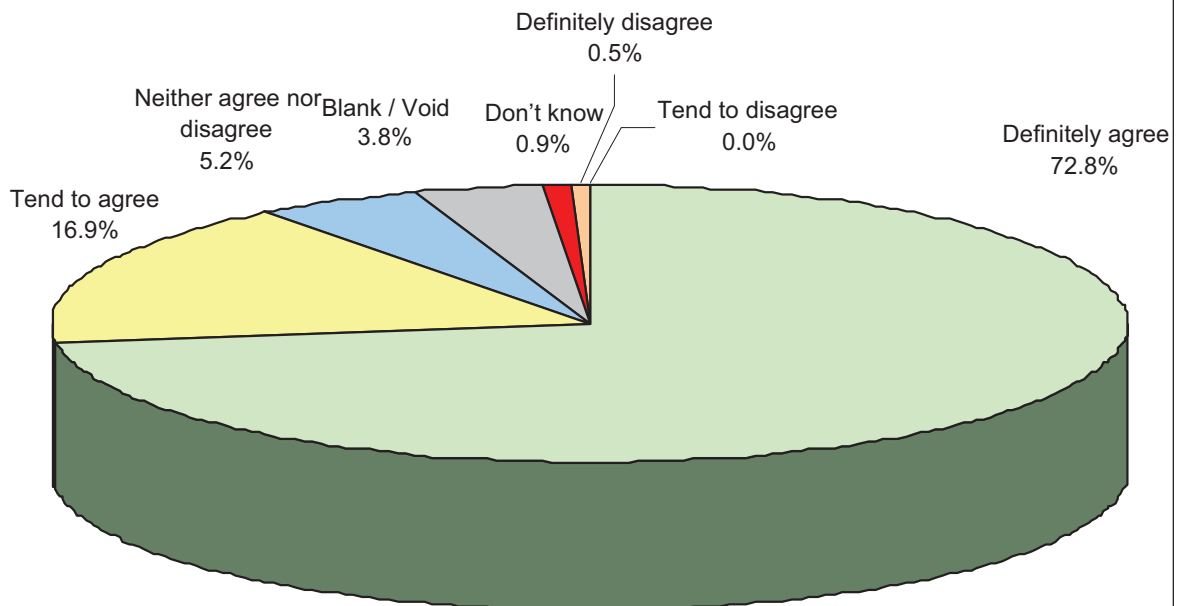
Analysis of the responses to the LSC consultation questionnaire



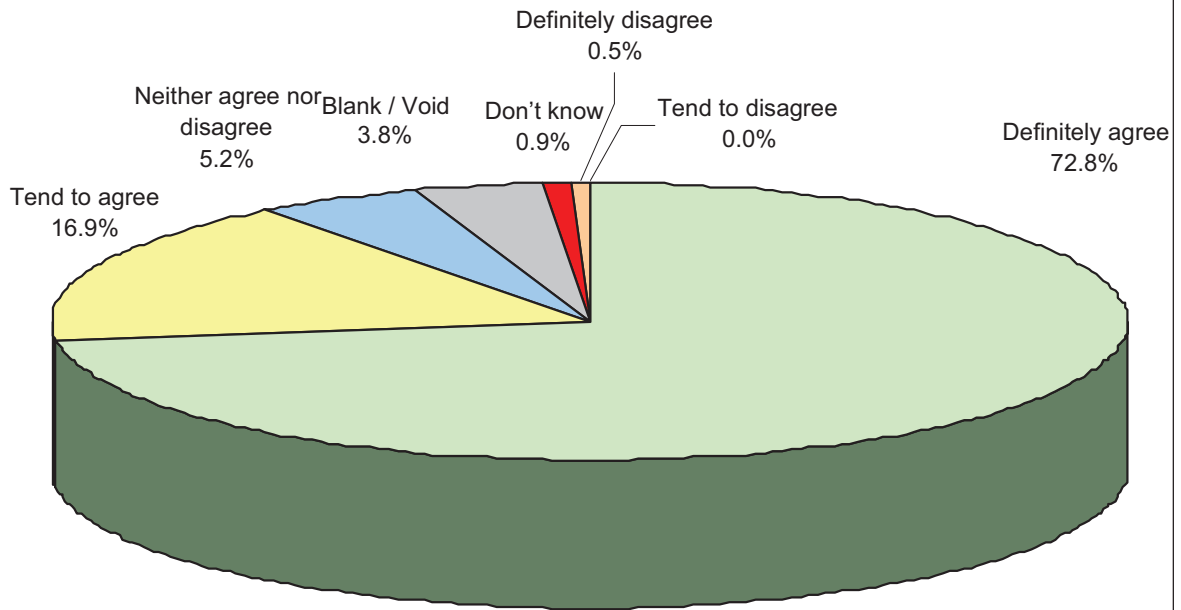
Is it appropriate for the council to continue to provide specialist adult social care services?



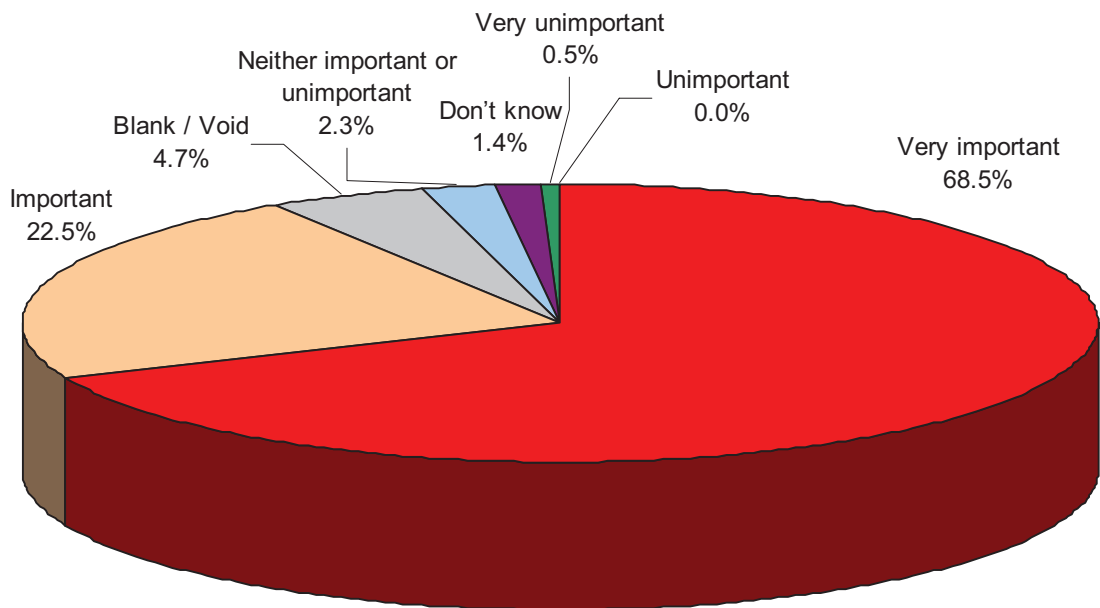
Is it important for health and social care organisations to work together to provide are services like intermediate care?



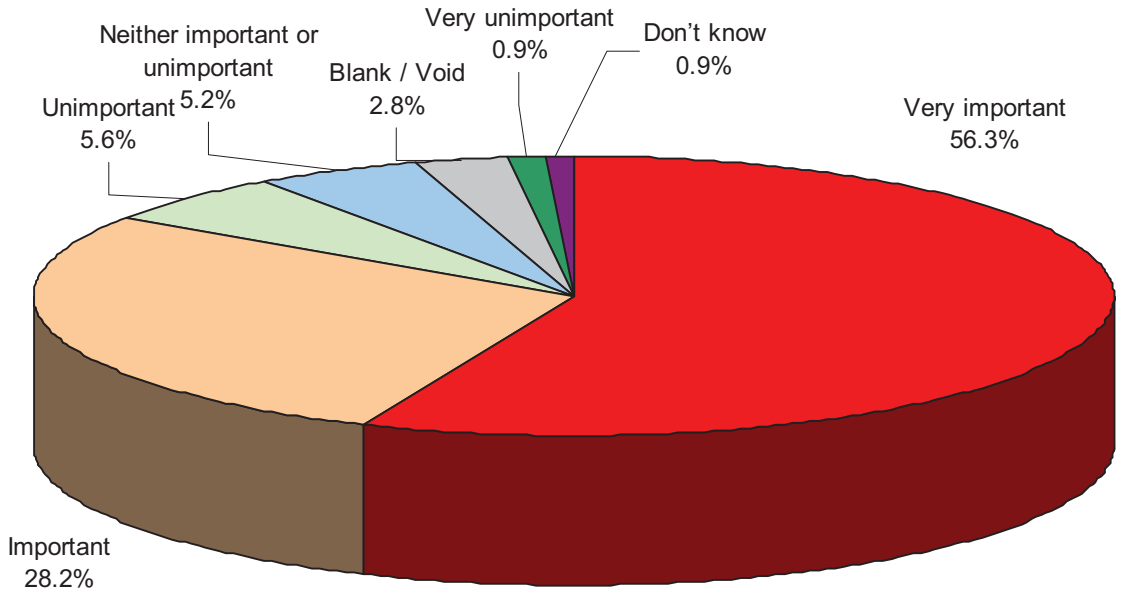
Is it important for health and social care organisations to work together to provide are services like intermediate care?



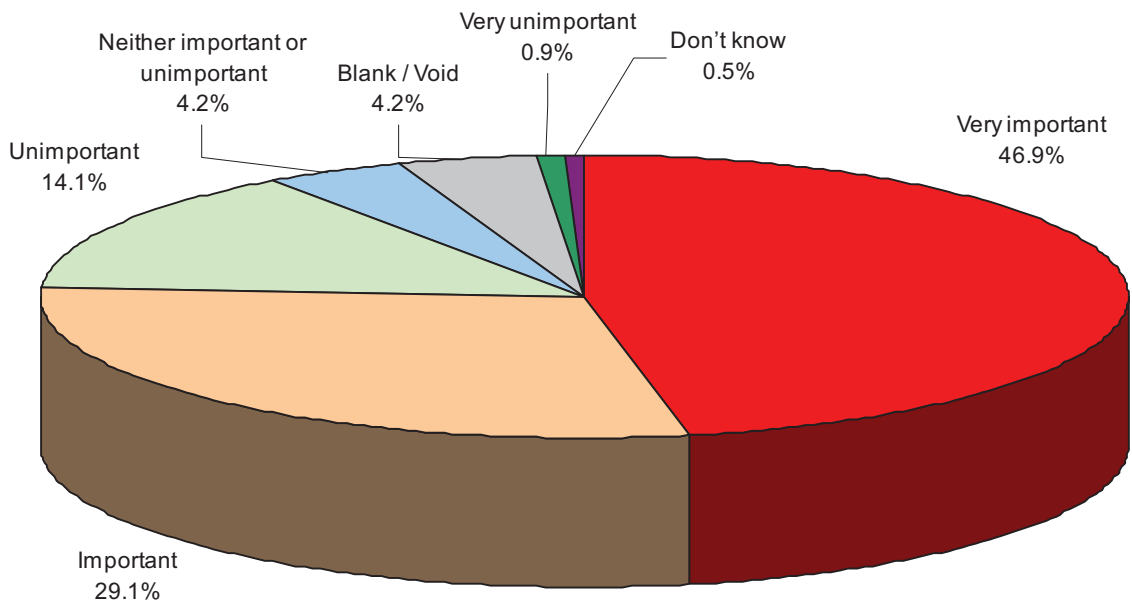
How important is it to you that adult social care provide prevention and early intervention service?



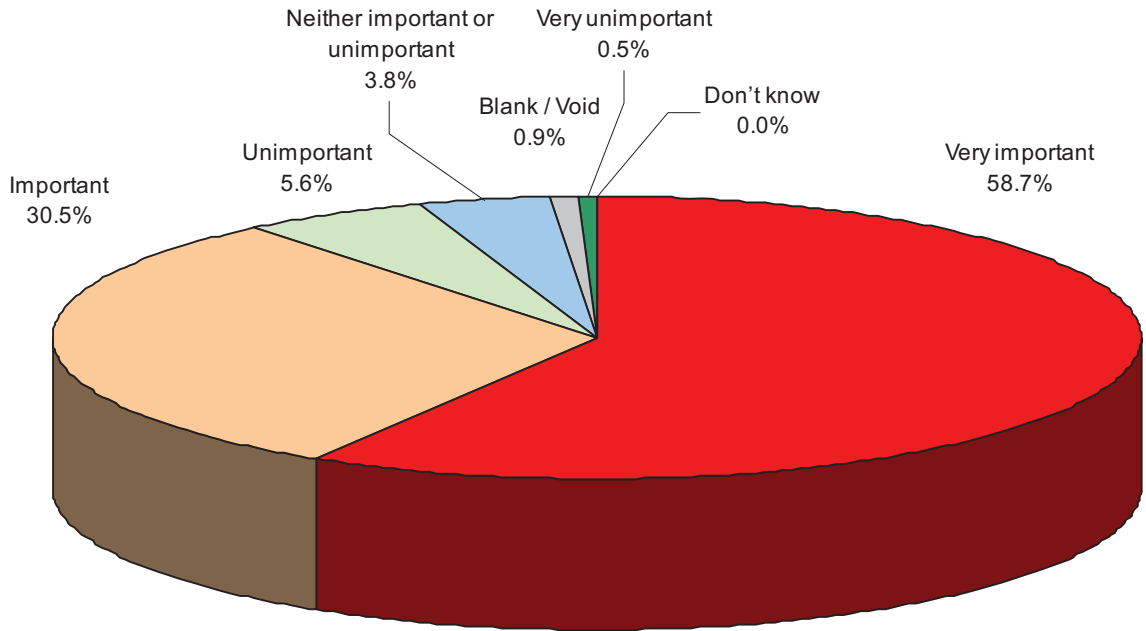
How important is it for ASC to focus on designing services that enable people to remain independent in their own homes as long as possible?



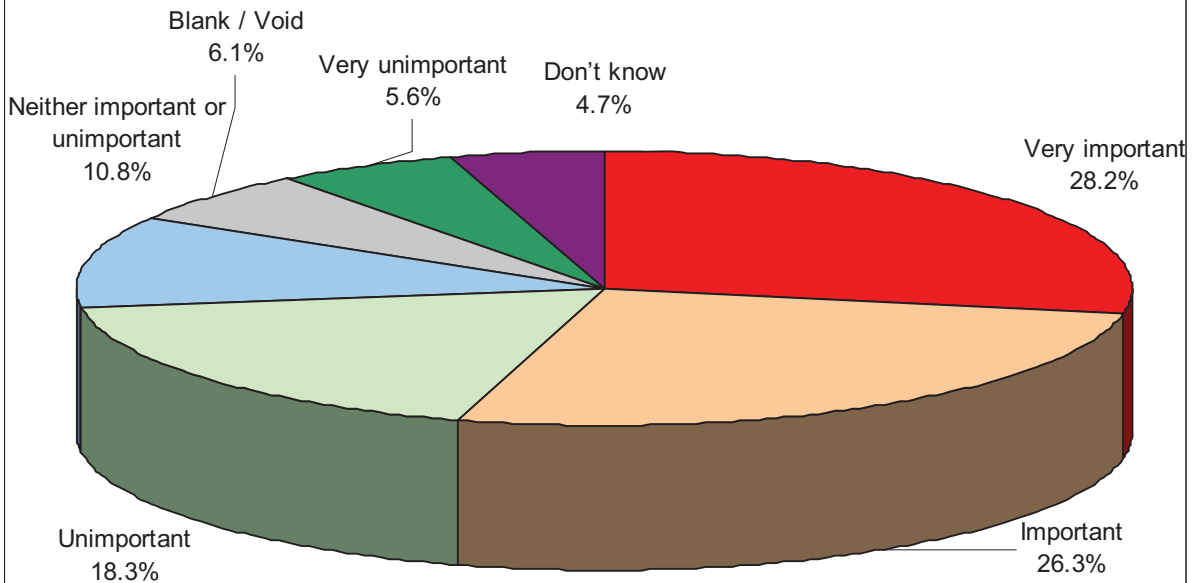
How important is it that ASC provides more opportunities for older and disabled people to access and use public spaces and services?

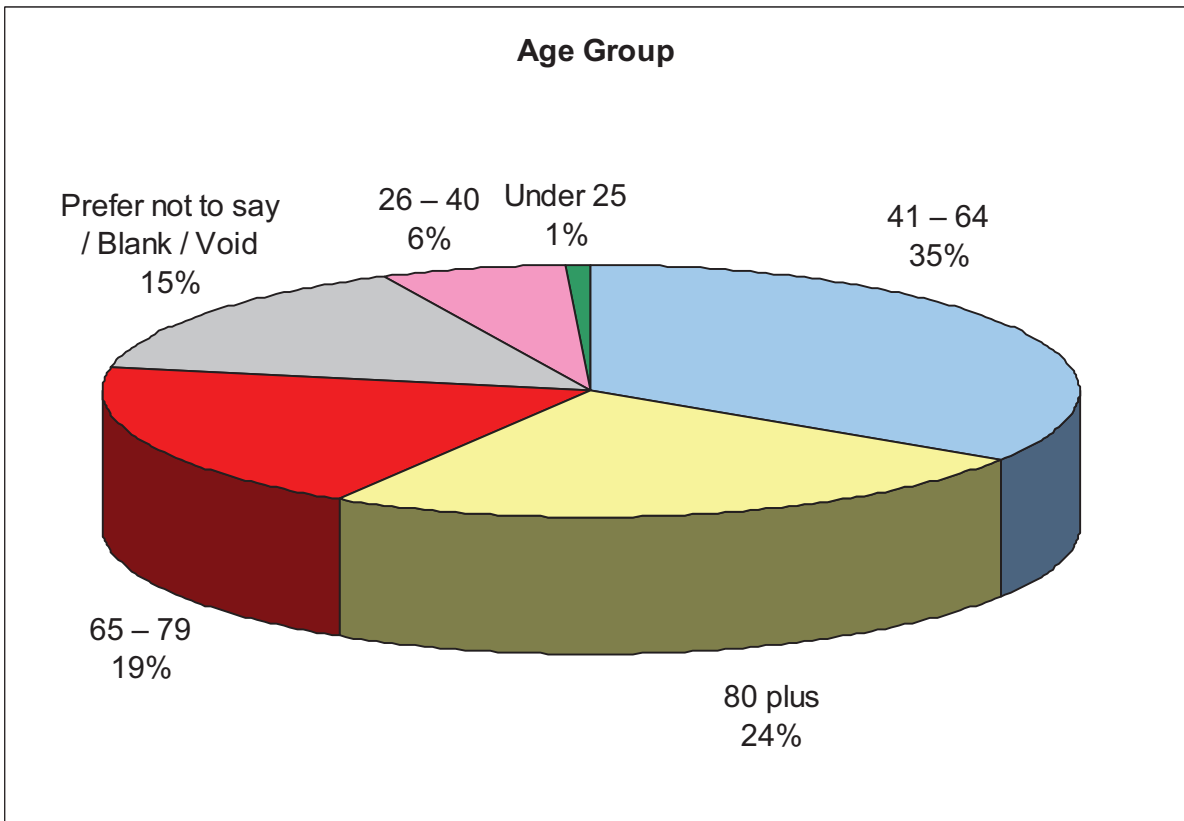
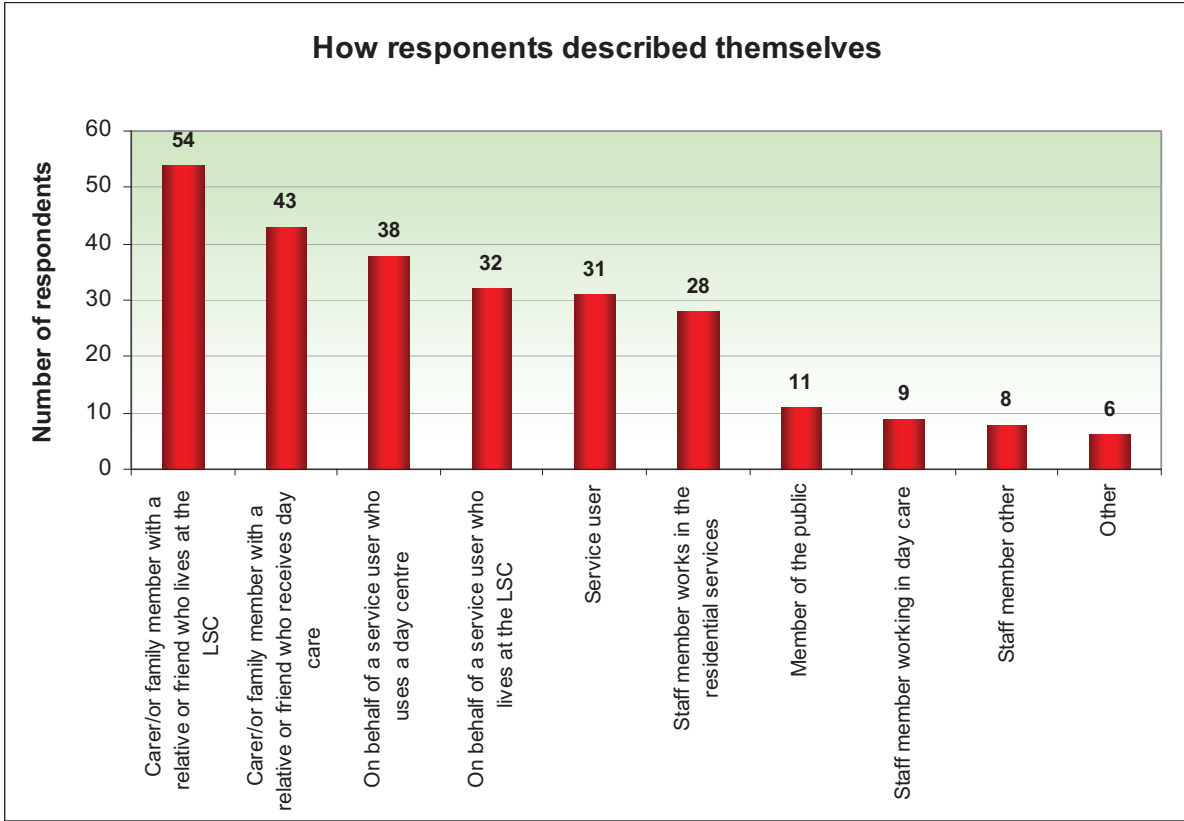


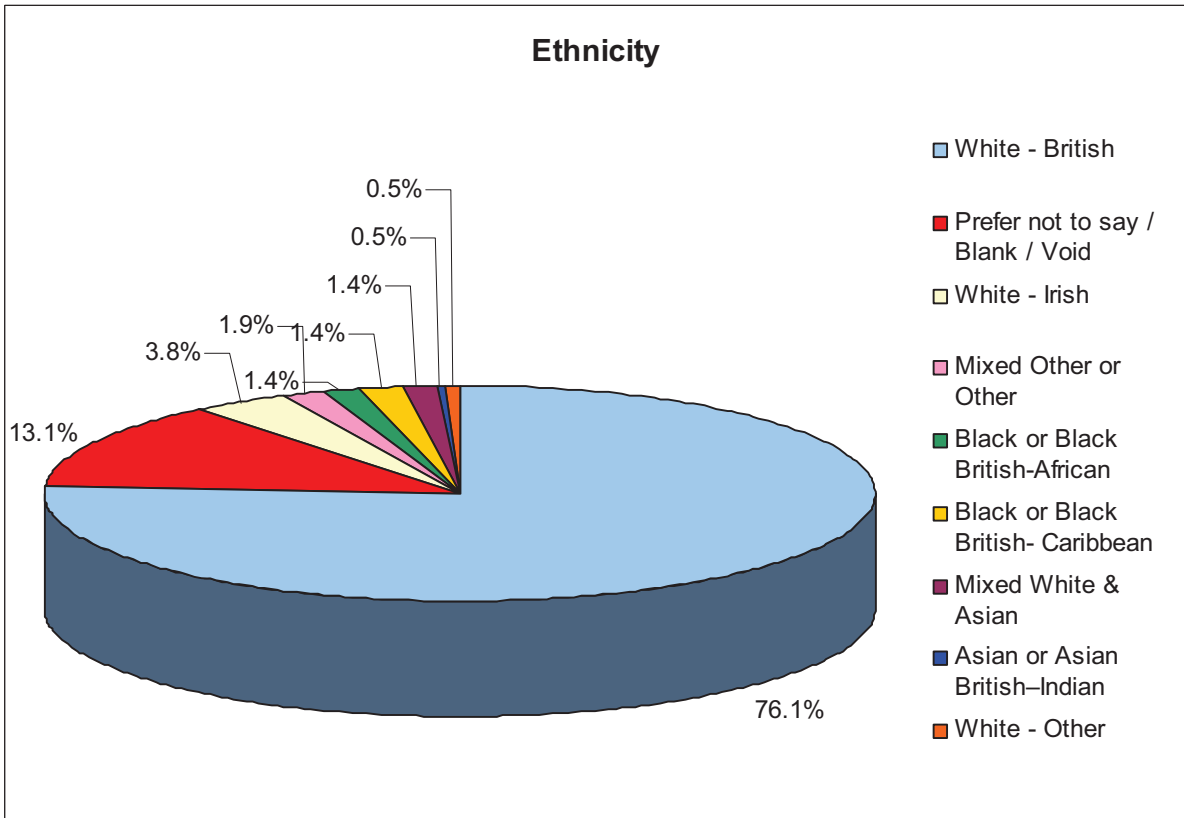
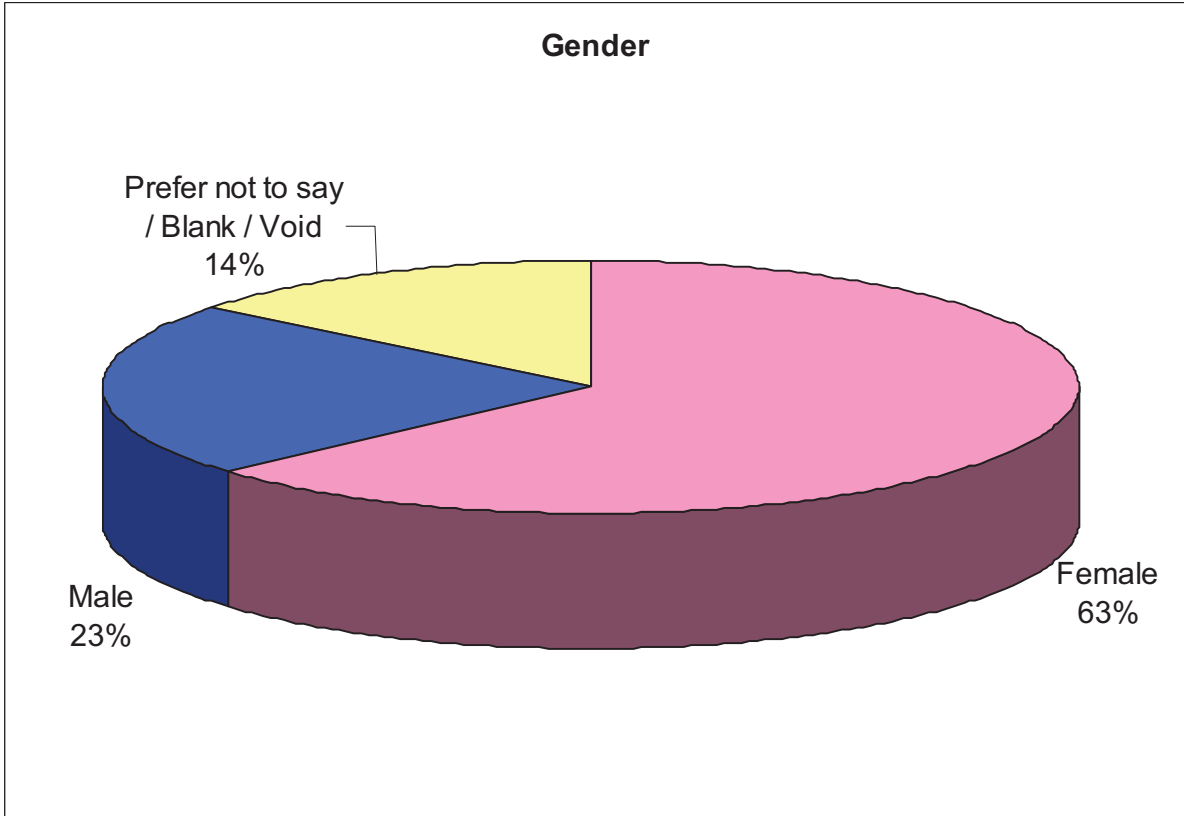
How important to you are information and advice services?



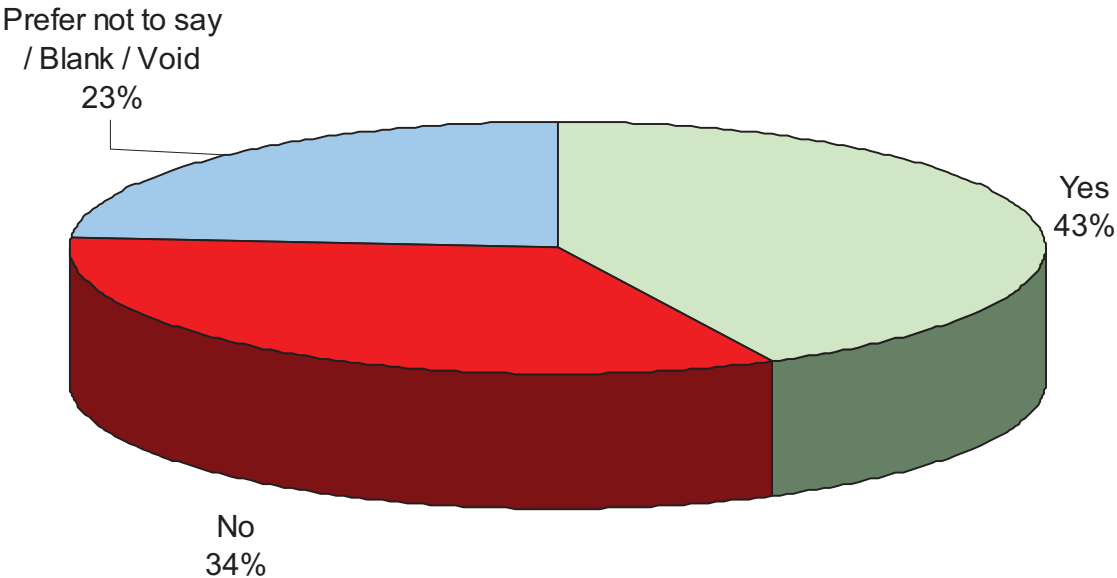
How important is the provision of personal budgets and direct payments?







Disability, long term condition or age related care or support needs



Appendix Three

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Day Care Opportunities- Medway based providers

DAY CARE PROVIDER AND LOCATION	CAPACITY/ACTIVITIES AVAILABLE	CURRENT VACANCIES	POTENTIAL FUTURE CAPACITY (ADDITIONAL)	TYPE OF PEOPLE SUPPORTED	WHEELCHAIR ACCESS?
Age Concern Medway The Mackenney Day Centre Woodlands Road, Gillingham	60 - 70 per day Creative Arts/Crafts, Mobility, Lifeskills, Social interaction, Meal, visiting services (chiroprody, hairdressing)	35 per week (5 per day)	15 per day	Older People (55 +) PD & LD supported including MH needs (L/M Dementia + Alzheimer's). Wheelchair users & limited mobility Specialist transport, toilets & bathing facilities	YES
Age Concern Medway The Chris Ellis Centre, 130 Brompton Lane, Rochester	40 per day Creative Arts/Crafts, Mobility, Life skills, Social interaction, Meal, visiting services (chiroprody, hairdressing)	No current vacancies	None	Older People (55 +) PD & LD supported including MH needs (L/M Dementia + Alzheimer's). Wheelchair users & limited mobility Specialist transport, toilets & bathing facilities	YES
Age Concern Chatham The Hopwell Centre, Units 4/5 Park House 92/94 Hopwell Drive Chatham	60 people per day. Day opportunities, menu of choices available	5 per day	25 per day	LD/PD	YES
Clearwater Care - Phoenix Hall Hatton Road, Lordswood, Chatham	5 current users Half day or full-day activities depending on need -Swimming, horse riding- Trampoline-meals out- one to one support	45 per day	50 per day	Learning Disability (LD) + PD (wheelchair users). Specialist transport	YES
Carers Relief Service Lingley House, Room 2&3 Commissioners Road, Strood, Kent	60 clients currently supported. Individual basis, community based support.	20 per week	Not known	LD / Physical Disability (PD) Specialist transport, toilets & bathing facilities	YES

<p>Complete Professional Care (CPC Kent) Bradbury House, View Road Cliffe Woods, Rochester Kent</p>	<p>Life skills, Creative arts & educational activities.Outings</p>	<p>Monday,Wednesday,Friday Could take additional 30 service users now and Tuesday, Thursday an additional 40 people per day from now on</p>	<p>Tuesday and Thursday: additional 10 per day from April 2012.Monday and Friday an additional 10 per day from April 2012.</p>	<p>OPMHN - OP-PD (wheelchair users).Specialist transport</p>	<p>YES</p>
<p>Crossroads Care Medway Suite 1, 8 Chestnut Avenue, Walderslade</p>	<p>Activity breaks and events programme</p>	<p>12 per event</p>	<p>Multiples of 12 (depending upon event)</p>	<p>PD & LD (incl wheelchair users)</p>	<p>YES</p>
<p>Everycare- Day Care-- Room 2 Delta Suite Laser Quay Culpeper Close Rochester</p>	<p>Ratio of 3 to 1 -- taken out, sometime they cook on site,usually bring own food 09.30am-4.00pm Mon-Fri</p>	<p>5 per day</p>	<p>15-20 per day</p>	<p>LD + PD (inc L/M MH needs)</p>	<p>YES</p>
<p>Frindsbury House 42 Hollywood Lane, Frindsbury Rochester Kent</p>	<p>Life skills, Creative arts & educational activities.Outings</p>	<p>2 per day</p>	<p>2 per day</p>	<p>OP - PD & LD, Specialist transport, toilets & bathing facilities</p>	<p>YES</p>
<p>J&J Services Park Lodge, 362 Canterbury Street, Gillingham Kent</p>	<p>20 day- 9 til 4. Regular weekly activities, dance drama, swimming, gym</p>	<p>Monday: 6 spaces, Tuesday: 9/10 spaces, Weds, 7 spaces, Thursday, 9 spaces, Friday, 8 spaces</p>	<p>No additional capacity</p>	<p>LD</p>	<p>NO</p>
<p>K Ying Chinese Elderly Association The Sunlight Centre, 105 Richmond Road, Gillingham,</p>	<p>100 per day</p>	<p>25 per day</p>	<p>Not known</p>	<p>Chinese OP (incl PD)</p>	<p>YES</p>

Mental Health Community Day Resource Team (Medway Council)

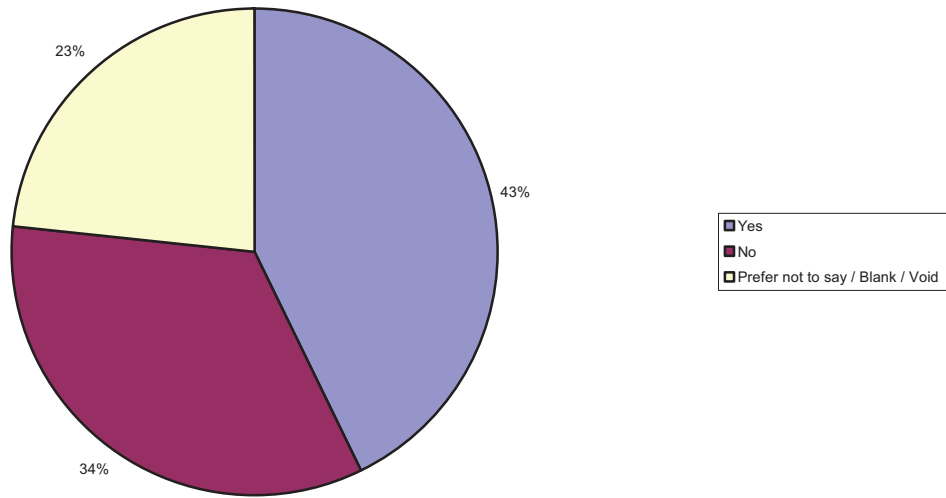
<p>Eagle Court Resource Centre, 124 High Street Rochester</p>	<p>Daily living skills, social and leisure skills/activities, work skills & experience (Fort Amherst). Benefits advice</p>	<p>Capacity 30 per day. Vacancies within groups and sessions</p>	<p>Available capacity</p>	<p>Adults with Mental Health needs</p>	<p>YES</p>
<p>Mental Health Resource Centre, 147 Nelson Road, Gillingham</p>	<p>Daily living skills, social and leisure skills/activities, work skills & experience (Royal Engineers Museum). Benefits advice</p>	<p>Capacity 30 per day. Vacancies within groups and sessions</p>	<p>Available capacity</p>	<p>Adults with Mental Health needs</p>	<p>YES</p>

Day Care Opportunities- non Medway based providers

DAY CARE PROVIDER AND LOCATION	CAPACITY/ACTIVITIES AVAILABLE	CURRENT VACANCIES/ CAPACITY	POTENTIAL FUTURE CAPACITY (ADDITIONAL)	TYPE OF PEOPLE SUPPORTED	WHEELCHAIR ACCESS?	HOISTING?
Canterbury Oast Trust Highlands Farm Woodchurch Ashford	Range of activities and support to develop individuals based on planned needs including a working farm, lifeskills courses, college and restaurant	5 per day	4 per day	Learning Disability (LD) + Physical Disability (PD)	YES	NO
Inspire Community Trust Active Lives Network c/o Riverside Community Centre • Dickens Road • Gravesend • Kent •	Art and crafts, computer room, gym, gardening, Boccia and ball games, bingo and quizzes			PD for low to moderate needs	YES	NO, BUT CHANGING PLACES TOILET AVAILABLE ON SITE
Madeira Day Centre, Madeira Road, Littlestone on Sea, New Romney, Kent	15 per day- food and drink provided	Between 2- 5 per day	20 per day	PD-Older People (OP)-Dementia	YES	NO
Sands Day Service (National Autistic Society)- 22-24 Princes Street, Gravesend	22+ -- Mon- Fri 09.00am to 15.30pm Planned Activities specific sessions can be booked	5-10 per day	Max 10 per day	LD (Autism Spectrum)	NO	NO
Spadework, Teston Road, Offham, West Malling, Kent	1 to 5 days a week, Horticulture, Amenity Gardening, woodwork, Catering, Retail and Crafts	1 per day	5 per day	LD-PD	YES	NO
Strode Park Foundation Rise Day Centre Strode Park House Herne Bay Kent	Available for those aged 30-60 years. 25 day- there is a half day rate. Wide range activities, Arts and Craft, Indoor Bowling, netball, Cookery etc	4-5 per day	4-5 per day	LD/PD	YES	NO
Strode Park Foundation - Lifeways Academy for Independence Herne Bay Kent	18+ years. Currently 5 people attend per day. Three training facilities available to assist with transition to independent living. Work experience opportunities, art, photography,	5 per day	10 per day	LD/PD	YES	NO
The Freedom Centre St Georges Avenue, Sheerness, Isle of Sheppey	18 to 25 depending on activity Mon- Thurs-10-3pm Friday 10-2pm	2 per day	Max 5 per day	PD	YES	NO

Lifeskills opportunities in Medway						
Medway Adults & Community Learning Services (MACLS) Rochester Community Hub, Eastgate House, High Street Rochester and Green Street, Gillingham	Supported Learning Programme : Towards Independence, Computing Skills, Cooking, Pottery, Photography, Keeping Fit, Literacy & Numeracy	N/A	N/A	N/A	LD /PD	YES
Medway Council Leisure & Culture Services	Passport to Leisure Disability Sports Medway Walks What's On (website) Disabled Sports Clubs (various)	N/A	N/A	N/A	LD/PD and Visually Impaired	
Employ Medway 99-101 High Street, Chatham	Advice on CV writing, interviews, skills training in Medway, links to Job Centre + services	N/A	N/A	N/A	LD/PD	
Next Step Careers Advice Service	Independent advice to adults (18+) on careers, jobs, education and money to attend courses	N/A	N/A	N/A	Any client group	N/A
Jobcentre Plus Crown House The Brook Chatham	Employment support for all adults (18+) Disability Employment Advisors (DEA) available for specialist employment advice. Work programmes available for disabled people	N/A	N/A	N/A	Any client group	N/A
Medway Youth Trust	Independent advice to young people with a learning disability up to 25 years on careers, jobs, education and money to attend courses	N/A	N/A	N/A	Any young person up to 25 years old	N/A

Respondents were asked whether they had a disability, long term condition or age related care or support needs



Appendix Four

Diversity Impact Screening Assessment for Balfour Day Centre

Directorate Children and Adults	Name of Function Balfour Day Centre		
Officer responsible for assessment Genette Laws	Date of assessment 10 February 2012	New or existing? existing	
Defining what is being assessed			
1. Briefly describe the purpose and objectives	Close the Balfour Day Centre and commission alternative services to ensure that people with eligible needs achieve the outcomes required by the eligible individuals.		
2. Who is intended to benefit, and in what way?	Users of the service who have identified activities that are not currently available in the Day Centre will be able to benefit from exploring wider opportunities. The taxpayer will continue to fund the needs of future potential service users in more cost effective ways that provide the same or better outcomes.		
3. What outcomes are wanted?	More choice and control for people with eligible needs. Cost effective solutions for individuals		
4. What factors/forces could contribute/detract from the outcomes?	<p style="text-align: center;"><u>Contribute</u></p> <p>A responsive independent sector</p> <p>An improved process of understanding people's needs and agreeing meaningful outcomes</p>	<p style="text-align: center;"><u>Detract</u></p> <p>Resistance of service user and their families to engage in the change process.</p> <p>The possible impact relating to day care service users who have not been previously financially assessed deciding to decline an alternative service due to the assessed contribution.</p>	
5. Who are the main stakeholders?	Service users Carers Referral agencies Employees		
6. Who implements this and who is responsible?	Social Care Commissioning team has facilitated the consultation and care management teams will be responsible for implementation of the decision by Cabinet.		

Assessing impact																								
7. Are there concerns that there <u>could</u> be a differential impact due to <i>racial groups</i>?	YES	There is no significant over-representation of a minority ethnic group.																						
	NO																							
What evidence exists for this?	Information from Care Director																							
	<table> <thead> <tr> <th>Ethnicity</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>White - British</td> <td>119</td> </tr> <tr> <td>Asian or Asian British - Indian</td> <td>4</td> </tr> <tr> <td>Not stated - Information not obtained</td> <td>4</td> </tr> <tr> <td>Any other ethnic group</td> <td>2</td> </tr> <tr> <td>Asian or Asian British - Any other Asian background</td> <td>2</td> </tr> <tr> <td>Asian or Asian British - Pakistani</td> <td>1</td> </tr> <tr> <td>Chinese</td> <td>1</td> </tr> <tr> <td>White - Any other White background</td> <td>1</td> </tr> <tr> <td>White - Irish</td> <td>1</td> </tr> <tr> <td>Unknown</td> <td>2</td> </tr> </tbody> </table>		Ethnicity	Total	White - British	119	Asian or Asian British - Indian	4	Not stated - Information not obtained	4	Any other ethnic group	2	Asian or Asian British - Any other Asian background	2	Asian or Asian British - Pakistani	1	Chinese	1	White - Any other White background	1	White - Irish	1	Unknown	2
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Chinese	1																							
White - Any other White background	1																							
White - Irish	1																							
Unknown	2																							
8. Are there concerns that there <u>could</u> be a differential impact due to <i>disability</i>?	YES	See below.																						
	NO																							
What evidence exists for this?	Information from Care Director																							
	<table> <tbody> <tr> <td>Older People</td> <td>10</td> </tr> <tr> <td>Physical Disabilities</td> <td>99</td> </tr> <tr> <td>Learning Disabilities</td> <td>16</td> </tr> <tr> <td>Mental Health</td> <td>4</td> </tr> <tr> <td>Total</td> <td>129</td> </tr> <tr> <td></td> <td>plus one unknown</td> </tr> </tbody> </table> <p>Through consultation concerns have been raised about service users and their carers being impacted by a decision to close the service, where the service user declines an alternative care service.</p>		Older People	10	Physical Disabilities	99	Learning Disabilities	16	Mental Health	4	Total	129		plus one unknown										
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Total	129																							
	plus one unknown																							
9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i>?	YES																							
	NO																							

<p>What evidence exists for this?</p>	<p>The service users of the Balfour Centre reflect the gender profile of the people of Medway</p> <table border="1" data-bbox="627 304 1246 656"> <thead> <tr> <th rowspan="2">Service Users by Gender and Age Group</th> <th colspan="6">Age Group</th> <th rowspan="2">Total</th> </tr> <tr> <th>18-34</th> <th>35-44</th> <th>45-54</th> <th>55-64</th> <th>65-74</th> <th>75+</th> </tr> </thead> <tbody> <tr> <td>Gender</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Female</td> <td>3</td> <td>12</td> <td>20</td> <td>21</td> <td>10</td> <td>0</td> <td>66</td> </tr> <tr> <td>Male</td> <td>5</td> <td>4</td> <td>28</td> <td>17</td> <td>15</td> <td>2</td> <td>71</td> </tr> <tr> <td>Total</td> <td>8</td> <td>16</td> <td>48</td> <td>38</td> <td>25</td> <td>2</td> <td>137</td> </tr> </tbody> </table>		Service Users by Gender and Age Group	Age Group						Total	18-34	35-44	45-54	55-64	65-74	75+	Gender								Female	3	12	20	21	10	0	66	Male	5	4	28	17	15	2	71	Total	8	16	48	38	25	2	137
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<p>10. Are there concerns there <u>could</u> be a differential impact due to <i>sexual orientation</i>?</p>	<p>YES</p>	<p>There is no information to neither indicate this nor refute it.</p>																																														
<p>What evidence exists for this?</p>	<p>NO</p>																																															
<p>11. Are there concerns there <u>could</u> be a have a differential impact due to <i>religion or belief</i>?</p>	<p>YES</p>	<p>There is no information to neither indicate this nor refute it.</p>																																														
<p>What evidence exists for this?</p>	<p>NO</p>																																															
<p>12. Are there concerns there <u>could</u> be a differential impact due to people's age?</p>	<p>YES</p>																																															
<p>What evidence exists for this?</p>	<p>The age profile of the service users of the Balfour Centre is set out below.</p> <table border="1" data-bbox="627 1377 1246 1776"> <thead> <tr> <th rowspan="2">Service Users by Gender and Age Group</th> <th colspan="6">Age Group</th> <th rowspan="2">Total</th> </tr> <tr> <th>18-34</th> <th>35-44</th> <th>45-54</th> <th>55-64</th> <th>65-74</th> <th>75+</th> </tr> </thead> <tbody> <tr> <td>Gender</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Female</td> <td>3</td> <td>12</td> <td>20</td> <td>21</td> <td>10</td> <td>0</td> <td>66</td> </tr> <tr> <td>Male</td> <td>5</td> <td>4</td> <td>28</td> <td>17</td> <td>15</td> <td>2</td> <td>71</td> </tr> <tr> <td>Total</td> <td>8</td> <td>16</td> <td>48</td> <td>38</td> <td>25</td> <td>2</td> <td>137</td> </tr> </tbody> </table>		Service Users by Gender and Age Group	Age Group						Total	18-34	35-44	45-54	55-64	65-74	75+	Gender								Female	3	12	20	21	10	0	66	Male	5	4	28	17	15	2	71	Total	8	16	48	38	25	2	137
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<p>13. Are there concerns that there <u>could</u> be a differential impact due to <i>being transgender or transsexual</i>?</p>	<p>YES</p>	<p>There is no information to neither indicate this nor refute it.</p>																																														
<p>What evidence exists for this?</p>	<p>NO</p>																																															

14. Are there any <i>other</i> groups that would find it difficult to access/make use of the function (e.g. people with caring responsibilities or dependants, those with an offending past, or people living in rural areas)?	YES	Through consultation concerns have been raised about service users and their <u>carers</u> being impacted by a decision to close the service, where the service user declines an alternative care service.
	NO	
What evidence exists for this?	Responses to questionnaires and views shared at consultation meetings indicate that there may be some – albeit small in number – people that may decline an alternative service which means that carers can not have a break from their caring responsibilities, or indeed continue with activities such as going out to work.	
15. Are there concerns there <u>could</u> be a have a differential impact due to <i>multiple discriminations</i> (e.g. disability <u>and</u> age)?	YES	Brief statement of main issue
	NO	
What evidence exists for this?	Please see above	

Conclusions & recommendation		
16. Could the differential impacts identified in questions 7-15 amount to there being the potential for adverse impact?	YES	The views shared in completed questionnaires, correspondence and at consultation meetings means that there is potential for differential impact in relation people with disabilities who have additional needs becoming (more) vulnerable as a result of the proposed change possibly being implemented at the same time as the proposed changes in the Fairer Contributions policy.
	NO	
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group? Or another reason?	YES	The responses to the questionnaires indicate that people are looking for opportunities like accessing employment or volunteering opportunities, which have not been well provided or developed by the Centre.
Recommendation to proceed to a full impact assessment?		
NO		
NO BUT ...	What is required to ensure this complies with the requirements of the legislation? (see DIA Guidance Notes)?	
YES	Give details of key person responsible and target date for carrying out full impact assessment (see DIA Guidance Notes)	Genette Laws, Social Care Commissioning and Voluntary Sector Manager The full impact assessment is in appendix six of the Cabinet report published 10 February 2012.

Action plan to make Minor modifications		
Outcome	Actions (with date of completion)	Officer responsible

Planning ahead: Reminders for the next review		
Date of next review		
Areas to check at next review (e.g. new census information, new legislation due)		
Is there <i>another</i> group (e.g. new communities) that is relevant and ought to be considered next time?	No	
Signed (completing officer/service manager) Genette Laws, Social Care Commissioning and Voluntary Sector Manager	Date 10 February 2012	
Signed (service manager/Assistant Director)	Date	

Appendix Five

Diversity Impact Screening Assessment for Nelson Court, Platters Farm Lodge and Robert Bean Lodge

Directorate Children and Adults	Name of Functions Nelson Court and Robert Bean Lodge Residential care and day care for people with dementia and Platters Farm Lodge Intermediate care service		
Officer responsible for assessment Genette Laws	Date of assessment 10 February 2012	New or existing? existing	
Defining what is being assessed			
1. Briefly describe the purpose and objectives	Outsource both services		
2. Who is intended to benefit, and in what way?	The allocated budget for people with adult social care needs will be used in a more cost effective way so that the efficiencies realised from the outsourcing can be reinvested in other services such as prevention.		
3. What outcomes are wanted?	Better use of resources for people with social care needs and in particular those living with dementia. To maintain, and where possible, improve the good outcomes currently being delivered.		
4. What factors/forces could contribute/detract from the outcomes?	<u>Contribute</u> A responsive and cost effective independent sector	<u>Detract</u> Lack of confidence by existing service users in the incoming provider regarding quality being maintained	
5. Who are the main stakeholders?	Service users Carers Referral agencies Employees		
6. Who implements this and who is responsible?	Social Care Commissioning team has facilitated the consultation and would be responsible for implementation of the decision by Cabinet, if the decision is to outsource the service.		

Assessing impact																										
7. Are there concerns that there <u>could</u> be a differential impact due to <i>racial groups</i> ?	YES	There is no significant over-representation of a minority ethnic group.																								
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What evidence exists for this?	<table border="1"> <thead> <tr> <th>Ethnicity</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>White - British</td> <td>297</td> </tr> <tr> <td>White - Any other White background</td> <td>6</td> </tr> <tr> <td>White - Irish</td> <td>6</td> </tr> <tr> <td>Asian or Asian British - Indian</td> <td>5</td> </tr> <tr> <td>Black or Black British - Any other Black background</td> <td>2</td> </tr> <tr> <td>Not stated - Information not obtained</td> <td>2</td> </tr> <tr> <td>Not stated - Refused</td> <td>2</td> </tr> <tr> <td>Any other ethnic group</td> <td>1</td> </tr> <tr> <td>Asian or Asian British - Any other Asian background</td> <td>1</td> </tr> <tr> <td>Black or Black British - African</td> <td>1</td> </tr> <tr> <td>Grand Total</td> <td>323</td> </tr> </tbody> </table>		Ethnicity	Total	White - British	297	White - Any other White background	6	White - Irish	6	Asian or Asian British - Indian	5	Black or Black British - Any other Black background	2	Not stated - Information not obtained	2	Not stated - Refused	2	Any other ethnic group	1	Asian or Asian British - Any other Asian background	1	Black or Black British - African	1	Grand Total	323
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Grand Total	323																									
8. Are there concerns that there <u>could</u> be a differential impact due to <i>disability</i> ?	YES	The service is designed for people with frailties and disabilities who are living with dementia.																								
	NO																									
What evidence exists for this?	All clients have a primary care need of dementia.																									
9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i> ?	YES	The service users for both services reflect the gender profile of people that receive care and support from Adult Social Care																								
	NO																									
What evidence exists for this?	<table border="1"> <thead> <tr> <th rowspan="2">Age Group</th> <th colspan="2">Gender</th> </tr> <tr> <th>Female</th> <th>Male</th> </tr> </thead> <tbody> <tr> <td>18-64</td> <td></td> <td></td> </tr> <tr> <td>75-84</td> <td>83</td> <td>40</td> </tr> <tr> <td>64-75</td> <td>24</td> <td>18</td> </tr> <tr> <td>85-94</td> <td>112</td> <td>31</td> </tr> <tr> <td>95+</td> <td>13</td> <td>1</td> </tr> <tr> <td>Grand Total</td> <td>232</td> <td>90</td> </tr> </tbody> </table>		Age Group	Gender		Female	Male	18-64			75-84	83	40	64-75	24	18	85-94	112	31	95+	13	1	Grand Total	232	90	
	Age Group	Gender																								
Female		Male																								
18-64																										
75-84	83	40																								
64-75	24	18																								
85-94	112	31																								
95+	13	1																								
Grand Total	232	90																								
10. Are there concerns there <u>could</u> be a differential impact due to <i>sexual orientation</i> ?	YES	There is no information to neither indicate this nor refute it.																								
	NO																									
What evidence exists for this?	The monitoring of sexual orientation is a challenge for the council.																									
11. Are there concerns there <u>could</u> be a have a differential impact due to <i>religion or belief</i> ?	YES	There is no information to neither indicate this nor refute it.																								
	NO																									
What evidence exists for this?	The monitoring of religion is a challenge for the council.																									

12. Are there concerns there <u>could</u> be a differential impact due to people's age?	YES	The service is designed for older people.	
	NO		
What evidence exists for this?			Gender
	Age Group	Female	Male
	18-64		
	75-84	83	40
	64-75	24	18
	85-94	112	31
95+	13	1	
Grand Total	232	90	
13. Are there concerns that there <u>could</u> be a differential impact due to <i>being transgendered or transsexual</i> ?	YES	There is no information to neither indicate this nor refute it.	
	NO		
What evidence exists for this?	The monitoring of transgender or transsexual is a challenge for the council.		
14. Are there any <i>other</i> groups that would find it difficult to access/make use of the function (e.g. people with caring responsibilities or dependants, those with an offending past, or people living in rural areas)?	YES		
	NO		
What evidence exists for this?			
15. Are there concerns there <u>could</u> be a have a differential impact due to <i>multiple discriminations</i> (e.g. disability <u>and</u> age)?	YES	Brief statement of main issue	
	NO		
What evidence exists for this?	Please see above		

Conclusions & recommendation		
16. Could the differential impacts identified in questions 7-15 amount to there being the potential for adverse impact?	YES	
	NO	
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group? Or another reason?	YES	Not applicable
Recommendation to proceed to a full impact assessment?		
NO		
NO BUT ...	What is required to ensure this complies with the requirements of the legislation? (see DIA Guidance Notes)?	
YES	Give details of key person responsible and target date for carrying out full impact assessment (see DIA Guidance Notes)	Genette Laws, Social Care Commissioning and Voluntary Sector Manager The screening tool does not indicate the need for a full impact assessment. However, given the significance of the decision, a separate full impact assessment – for each service - will be made available to Cabinet when the recommendations are published, 10 February, following the conclusion of the consultation period.

Action plan to make Minor modifications		
Outcome	Actions (with date of completion)	Officer responsible

Planning ahead: Reminders for the next review	
Date of next review	
Areas to check at next	

review (e.g. new census information, new legislation due)		
Is there <i>another</i> group (e.g. new communities) that is relevant and ought to be considered next time?	No	
Signed (completing officer/service manager) Genette Laws, Social Care Commissioning and Voluntary Sector Manager	Date 10 February 2012	
Signed (service manager/Assistant Director) David Quirke-Thornton	Date 10 February 2012	

Appendix Six

Full Diversity Impact Assessment – Balfour Centre

Directorate Children and Adults – Learning and Caring	Name of Service Change/Policy/Function Closure of the Balfour Centre and reprovion of care and/or support in the independent sector			
Officer responsible for assessment Genette Laws, Social Care Commissioning and Voluntary Sector Manager		Assessment date 10 February 2012	New or existing? New	
Identify potential issues and factors				
1. In regard to which groups are there concerns that there <u>could</u> be a differential impact?	Race	Religious belief	Trans-gendered or transsexual	
	Disability	Age	Other (specify)	
	Gender	Sexual orientation	Carers	
2. What differential impact do you think there <u>could</u> be on this/these group(s)?	Whilst all the people that use the Balfour Centre have a disability, the potential adverse impact will be in relation to people with disabilities that have additional special needs which make them vulnerable to responding to change.			
Map existing data				
3. What existing evidence do you have for this - e.g. take-up, complaints?				
Information/ data	When collected	Source	Strengths of data (e.g. up- to-date)	Gaps
People felt the proposals would impact on their social life leaving them more isolated	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Concerns that the changes could result in additional burdens for carers	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place

Concerns were raised about extended journey times if day centres closed	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Concerns that people moving day centres would not adapt well to the change	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Some people explained that they did not feel safe in parts of Medway	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Equalities monitoring data for people using the service	February 2012	Care Director – the council's electronic social care record system	Collated in February 2012	There is insufficient information in relation to sexual orientation or religious belief to either support or refute concerns about adverse impact.
4. What are implications of the gaps in evidence (e.g. people with visual impairments do not know about council services)?	There are no implications in relation to the gaps identified because the personalised approach to assessment means that any needs in relation to sexual orientation or religious belief would be identified, respected and supported.			
5. What is the key question you want answered, and by whom.	What do people think about the proposal to close the Balfour Centre and, in particular, what, if any, are the concerns?			

Formal Consultation		
6. Are there any experts/ relevant groups who you could approach to ask their views on the issues?	YES	Please list: Officers have met with MULO (Medway User Led Organisation) and the Physical Disability Partnership Board.
	NO	
7. Have you discussed your consultation request with Research and Review?	YES	
	NO	
8. Describe in detail the views of the relevant groups/experts on the issues.		
<ol style="list-style-type: none"> 1. People said that Adult Social Care and, in particular services for people with disabilities, should not bear the same level of savings as other council departments 2. People felt the proposals would impact on their social life leaving them more isolated 3. Concerns that the changes could result in additional burdens for carers. 4. Concerns were raised about extended journey times if day centres closed 5. Concerns that people moving day centres would not adapt well to the change 6. Some people explained that they did not feel safe in parts of Medway 7. The Balfour Centre was seen as a high quality service and people were not happy to see such a good centre being proposed for closure. 8. The possibility of outsourcing, rather than closing, the service was raised during the consultation process 		

9. What options, alternatives or reasonable readjustment(s) have been considered?

1. A review of every service user including but not limited to individual preferences in relation to activities (both social and therapeutic), access to personal care including washing and toileting, general routines at the centre, meal choices, cultural preferences, preferences relating to friendship networks and transport.
2. On an individual basis determine the best preparation approach for the move on with confidence.
3. Ensure that all carers are provided with a meaningful carers assessment and the necessary support that is identified from that assessment.
4. Ensure clear communication about the decision and how it will be implemented so that being kept informed about the decision itself lessens people's anxiety and what it means in terms of them as an individual.
5. Facilitate opportunities for alternative providers to meet with service users, and their families, of the Centre so that there is an improved understanding about the offer in the independent sector.
6. Where appropriate the council will augment the provision of services using the Community Infrastructure grant scheme that contributes to the Community Chest so that opportunities for raised beds in day care facilities will enable wheelchair users to enjoy an activity such as gardening.
7. Ensure that everyone involved in supporting each service user (both formal and informal carers, health professionals and other social care professionals) are involved in, and aware of, the change. This is particularly important for those people that use the day care service and their vulnerabilities become more acute.
8. People that are physically disabled are not by definition vulnerable people. However, those people with disabilities that have additional needs that make them vulnerable should, as a result of a decision to close the Centre, be prioritised for assessment and support so that the transition is carefully managed from the point at which the decision is made.
9. Ensure that all dietary requirements and preferences continue to be met.
10. The potential for outsourcing was explored in the report presented to Cabinet on 29 November. Given that the responses in the questionnaire identifies that nearly 30 people would like to access employment and therefore should move on from the Balfour Centre to achieve this outcome, then the attendance at the Centre will continue to fall and therefore continues to not be a viable option.
11. Although not raised during the consultation period, all the attendees of the Centre from Medway may be affected by another proposed change in Adult Social Care relating to Fairer Contributions Policy. This will be carefully monitored as part of the individual assessments that take place as part of the needs assessment, support planning and financial assessment.

Conclusion and recommendations

10. In your own words, briefly state what changes (from the customers' point of view) are reasonable adjustments to make access fair.

In order to ensure that the alternatives to the Balfour Centre are acceptable and suitable the reasonable adjustments, from the customer's perspective would be to:

1. Ensure that a clear communications and implementation plan is in place that provides dignity and respect for service users and their families. In particular, clarity about the timetable of implementation and commitment to finding good alternatives rather than alternatives that are good enough.
2. Ensure that meaningful carers' assessments – with the carers - are integral to the assessment of the service users.
3. Facilitate opportunities for alternative providers to meet with service users, and their families, of the Centre so that there is an improved understanding about the offer in the independent sector.
4. Where appropriate the council will augment the provision of services using the Community Infrastructure grant scheme that contributes to the Community Chest so that opportunities for raised beds in day care facilities will enable wheelchair users to enjoy an activity such as gardening.
5. Ensure that the changing place toilet programme is delivered to ensure that Medway is an accessible place.
6. Ensure that hate crimes in Medway are tackled and that community cohesion is promoted.

Target setting

Outcome	Actions (with completion dates)	Measure of progress
Clear communication and respectful implementation	If decision is made to close the Balfour Day Centre, letters to service users and their families following the decision by Cabinet to close the Centre – with clarity about how the decision would be implemented. (By 16 February 2012) <i>Provisional planning suggests that assessments will take place over a five week period.</i>	Reporting to DMT by the Service Manager for the Centre
	Face to face briefings, subsequent to the letter being sent out, over a five day period to ensure that people understand the contents of the letters. (From 20 to 25 February)	Reporting to DMT by the Service Manager for the Centre
	Reporting of progress to Cabinet through the Council Plan. (Throughout the period of decommissioning)	

Carers are supported in their own right for their own benefit and the benefit of the service user	Carers' assessments should be resourced and planned to be coordinated with the reassessment of service users. (<u>Over the five week period</u>)	Weekly reporting to DMT by the Service Manager for the Centre
Improved confidence in the independent sector	Hold a weekly fair for service users, their carers and families and care managers to improve understanding of what is available in the independent sector. (<u>Over the five week period</u>)	Weekly reporting to DMT by the Service Manager for the Centre
Supporting the independent sector to support service users and their families	A clear process for identifying the need to augment services will be established so that the AD for Adult Social Care has clarity about the request being needs-led from assessments and proportionate in terms of cost/benefit. (<u>Over the reassessment period up to end of April 2012</u>)	Weekly requests to AD for ASC by the Service Manager for the Centre Weekly reporting to DMT by the AD for Adult Social Care
Medway, in terms of facilities, is an improved place	Continue with the programme of developing Changing Place toilets in Medway. (<u>Three toilets by end of 2012</u>)	Quarterly reporting to DMT
Medway in terms of the community is a place where people feel welcome and safe and where necessary confident to report harassment and/or hate crimes	The community cohesion to work with disability groups like MULO to develop a programme of promoting the value that people with disabilities bring to the community. (<u>Presentation of a communications strategy to the community cohesion group by May 2012.</u>) Community Safety Partnership to include its work programme strategies to support people with disabilities in relation to hate crimes, including a Safe Haven programme. (<u>By May 2012</u>)	
Signed (officer responsible for achieving above DIA actions) David Quirke-Thornton, Assistant Director for Adult Social Care		Date
Signed (completing officer/service manager) Genette Laws, Social Care Commissioning Manager		Date

Signed (service manager/Assistant Director) David Quirke-Thornton, Assistant Director for Adult Social Care	Date
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Appendix Seven

Full Diversity Impact Assessment – Nelson Court

Directorate Children and Adults – Learning and Caring	Name of Service Change/Policy/Function Outsourcing of Nelson Court		
Officer responsible for assessment Genette Laws, Social Care Commissioning and Voluntary Sector Manager		Assessment date 10 February 2012	New or existing? New
Identify potential issues and factors			
1. In regard to which groups are there concerns that there <u>could</u> be a differential impact?	Race	Religious belief	Trans-gendered or transsexual
	Disability	Age	Other (specify) Expressed anxiety by carers about the potential implications for the future of the services at Nelson Court
	Gender	Sexual orientation	
2. What differential impact do you think there <u>could</u> be on this/these group(s)?	The outsourcing of the service will cause anxiety to those that use the service due to the uncertainty around who may be the new provider. There is a clearly expressed lack of confidence about the independent sector's ability to meet some of the challenging needs of those that currently use the service and a concern about the council's ability to maintain the current quality of care through a contracting arrangement.		

Map existing data

3. What existing evidence do you have for this – e.g. take-up, complaints?

Information/ data	When collected	Source	Strengths of data (e.g. up- to-date)	Gaps
People were concerned that there was not a full understanding of the demand for the day care service at this unit. As one of two providers of dementia day care services, their service is currently oversubscribed	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned about the prospect of the service being outsourced together with the property being sold as well	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned about that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place

People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place

Some people said that their loved ones could not find an alternative service in the independent sector that would accept the challenging behaviours – related to their condition of dementia – or accommodate their religious needs and therefore Nelson Court had been their ‘safety net’.	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Equalities monitoring data for people using the service	February 2012	Care Director – the council’s electronic social care record system	Collated in February 2012	There is insufficient information in relation to sexual orientation or religious belief to either support or refute concerns about adverse impact.
4. What are implications of the gaps in evidence (e.g. people with visual impairments do not know about council services)?	There are no implications in relation to the gaps identified because the personalised approach to assessment means that any needs in relation to sexual orientation or religious belief would be identified, respected and supported.			
5. What is the key question you want answered, and by whom.	What do people think about the proposal to outsource Nelson Court and, in particular, what, if any, are the concerns?			

Formal Consultation		
6. Are there any experts/ relevant groups who you could approach to ask their views on the issues?	YES	Please list: Officers have met with Medway Older People’s Partnership
	NO	
7. Have you discussed your consultation request with Research and Review?	YES	
	NO	

8. Describe in detail the views of the relevant groups/experts on the issues.

1. People valued the support that they had received, or are receiving, from the services.
2. People were concerned that there was not a full understanding of the demand for the day care service at this unit. As one of two providers of dementia day care services, their service is currently oversubscribed.
3. People said that Adult Social Care, and particular older people services, should not bear the same level of savings as other council departments
4. Some people were concerned that the proposal was about closing the service and this view persisted throughout the consultation period
5. People were concerned about the prospect of the service being outsourced together with the property being sold as well
6. People were concerned about the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred
7. Concerns that the changes could result in additional burdens for carers of people that use the day services and anxiety for relatives of those that are resident at the service.
8. People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service
9. People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service
10. People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector
11. Some people said that their loved ones could not find an alternative service in the independent sector that would accept the challenging behaviours – related to their condition of dementia – and therefore Nelson Court had been the ‘safety net’.

9. What options, alternatives or reasonable readjustment(s) have been considered?

1. Service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service.
2. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
3. In awarding a contract the council will frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
4. Officers developing a Third Party Top Up & Legacy Placements policy would address the issue of affordability for existing residents.
5. The council specifies a number of beds or a wing for people with challenging behaviours to be supported either during crisis and for long term placements.
6. The council works with all independent sector providers to ensure that they respect and support the religious beliefs of current and prospective residents so that all care homes are inclusive.

Conclusion and recommendations

10. In your own words, briefly state what changes (from the customers' point of view) are reasonable adjustments to make access fair.

In order to ensure that the outsourcing of Nelson Court safeguards the Quality assurance, affordability and control of the future of the service, the reasonable adjustments, (from the customer's perspective) would be to:

1. Service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service.
2. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
3. In awarding a contract the council will frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
4. Officers develop a Third Party Top Up & Legacy Placements policy would address the issue of affordability for existing residents.
5. The council specifies a number of beds or a wing for people with challenging behaviours to be supported either during crisis and for long term placements.
6. The council works with all independent sector providers to ensure that they respect and support the religious beliefs of current and prospective residents so that all care homes are inclusive.

Target setting

Outcome	Actions (with completion dates)	Measure of progress
Service user involvement in the development of the specification and the tender evaluation	<p>Meetings with service users and their families to develop the specifications (By 26 March 2012)</p> <p>Identify representatives to contribute to the evaluation of the tenders (By 26 March 2012)</p> <p>Service users and their families participate in the tender evaluation (April to September 2012)</p>	
Confidence is established and maintained in the new service provider	<p>Service users and their families participate in the tender evaluation (April to September 2012)</p> <p>Reporting of progress to Cabinet through the council plan. (Ongoing)</p>	

A Third Party Top Up and Legacy Placement policy	Officers will present a policy for approval by Cabinet. (By May 2012)	
Access to beds for people with challenging behaviours	Part of the development of the specification and contract. (By May 2012)	
Increased confidence that care homes provide support for people to practice their religious beliefs	Incorporate into the Medway College of Social Care programme regarding dignity and respect and make a key theme for contract monitoring (possibly with the CQC). (By September 2012)	
Signed (officer responsible for achieving above DIA actions) David Quirke-Thornton, Assistant Director for Adult Social Care		Date
Signed (completing officer/service manager) Genette Laws, Social Care Commissioning Manager		Date
Signed (service manager/Assistant Director) David Quirke-Thornton, Assistant Director for Adult Social Care		Date

Appendix Eight

Full Diversity Impact Assessment – Platters Farm Lodge

Directorate Children and Adults – Learning and Caring		Name of Service Change/Policy/Function Outsourcing of Platters Farm Lodge		
Officer responsible for assessment Genette Laws, Social Care Commissioning and Voluntary Sector Manager		Assessment date 10 February 2012	New or existing? New	
Identify potential issues and factors				
1. In regard to which groups are there concerns that there <u>could</u> be a differential impact?	Race	Religious belief	Trans-gendered or transsexual	
	Disability	Age	Other (specify) Expressed anxiety by carers about the potential implications for the future of the services at Platters Farm Lodge	
	Gender	Sexual orientation		
2. What differential impact do you think there <u>could</u> be on this/these group(s)?	The outsourcing of the service will cause anxiety to those that use the service due to the uncertainty around who may be the new provider. There is a clearly expressed lack of confidence about the independent sector's ability to meet some of the challenging needs of those that currently use the service and a concern about the council's ability to maintain the current quality of care through a contracting arrangement.			
Map existing data				
3. What existing evidence do you have for this – e.g. take-up, complaints?				
Information/data	When collected	Source	Strengths of data (e.g. up-to-date)	Gaps
People were concerned about the prospect of the service being outsourced	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place

People were concerned about that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place

Concerns were raised about access to the minibus service in terms of day care	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Concerns were raised about the quality of the food falling or the price becoming more expensive in the day care facilities	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Equalities monitoring data for people using the service	February 2012	Care Director – the council’s electronic social care record system	Collated in February 2012	There is insufficient information in relation to sexual orientation or religious belief to either support or refute concerns about adverse impact.
4. What are implications of the gaps in evidence (e.g. people with visual impairments do not know about council services)?	There are no implications in relation to the gaps identified because the personalised approach to assessment means that any needs in relation to sexual orientation or religious belief would be identified, respected and supported.			
5. What is the key question you want answered, and by whom.	What do people think about the proposal to outsource Platters Farm Lodge and, in particular, what, if any, are the concerns?			

Formal Consultation		
6. Are there any experts/ relevant groups who you could approach to ask their views on the issues?	YES	Please list: Officers have met with Medway Older People’s Partnership
	NO	
7. Have you discussed your consultation request with Research and Review?	YES	
	NO	

8. Describe in detail the views of the relevant groups/experts on the issues.

1. People valued the support that they had received, or are receiving, from the services.
2. People said that Adult Social Care, and particular older people services, should not bear the same level of savings as other council departments
3. Some people were concerned that the proposal was about closing the service and this view persisted throughout the consultation period
4. People were concerned that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred
5. Concerns that the changes could result in additional burdens for carers of people that use the day services and anxiety for relatives of those that are resident at the service
6. People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service
7. People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service
8. People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector

9. What options, alternatives or reasonable readjustment(s) have been considered?

1. Service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service.
2. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
3. In awarding a contract the council will frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
4. Officers developing a Third Party Top Up & Legacy Placements policy would address the issue of affordability for existing residents.
5. The council works with all independent sector providers to ensure that they respect and support the religious beliefs of current and prospective residents so that all care homes are inclusive.

Conclusion and recommendations

10. In your own words, briefly state what changes (from the customers' point of view) are reasonable adjustments to make access fair.

In order to ensure that the outsourcing of Platters Farm Lodge safeguards the quality and affordability of the service, the reasonable adjustments, from the customer's perspective) would be to:

1. Service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service.
2. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
3. In awarding a contract the council will frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
4. Officers develop a Third Party Top Up & Legacy Placements policy would address the issue of affordability for existing residents.
5. The council works with all independent sector providers to ensure that they respect and support the religious beliefs of current and prospective residents so that all care homes are inclusive.

Target setting		
Outcome	Actions (with completion dates)	Measure of progress
Service user involvement in the development of the specification and the tender evaluation	<p>Meetings with service users and their families to develop the specifications (By 26 March 2012)</p> <p>Identify representatives to contribute to the evaluation of the tenders (By 26 March 2012)</p> <p>Service users and their families participate in the tender evaluation (April to September 2012)</p>	
Confidence is established and maintained in the new service provider	<p>Service users and their families participate in the tender evaluation (April to September 2012)</p> <p>Reporting of progress to Cabinet through the council plan. (Ongoing)</p>	
A Third Party Top Up and Legacy Placement policy	Officers will present a policy for approval by Cabinet. (By May 2012)	
Access to beds for people with challenging behaviours	Part of the development of the specification and contract. (By May 2012)	
Increased confidence that care homes provide support for people to practice their religious beliefs	Incorporate into the Medway College of Social Care programme regarding dignity and respect and make a key theme for contract monitoring (possibly with the CQC). (By September 2012)	
Signed (officer responsible for achieving above DIA actions) David Quirke-Thornton, Assistant Director for Adult Social Care		Date
Signed (completing officer/service manager) Genette Laws, Social Care Commissioning Manager		Date
Signed (service manager/Assistant Director) David Quirke-Thornton, Assistant Director for Adult Social Care		Date

Appendix Nine

Full Diversity Impact Assessment – Robert Bean Lodge

Directorate Children and Adults – Learning and Caring	Name of Service Change/Policy/Function Outsourcing of Robert Bean Lodge			
Officer responsible for assessment Genette Laws, Social Care Commissioning and Voluntary Sector Manager		Assessment date 10 February 2012	New or existing? New	
Identify potential issues and factors				
1. In regard to which groups are there concerns that there <u>could</u> be a differential impact?	Race	Religious belief	Trans-gendered or transsexual	
	Disability	Age	Other (specify)	
	Gender	Sexual orientation	Expressed anxiety by carers about the potential implications for the future of the services at Robert Bean Lodge	
2. What differential impact do you think there <u>could</u> be on this/these group(s)?	The outsourcing of the service will cause anxiety to those that use the service due to the uncertainty around who may be the new provider. There is a clearly expressed lack of confidence about the independent sector's ability to meet some of the challenging needs of those that currently use the service and a concern about the council's ability to maintain the current quality of care through a contracting arrangement.			
Map existing data				
3. What existing evidence do you have for this – e.g. take-up, complaints?				
Information/ data	When collected	Source	Strengths of data (e.g. up-to-date)	Gaps
People were concerned about the prospect of the service being outsourced	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place

People were concerned about that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place

Concerns were raised about access to the minibus service in terms of day care	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Concerns were raised about the quality of the food falling or the price becoming more expensive in the day care facilities	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Equalities monitoring data for people using the service	February 2012	Care Director – the council’s electronic social care record system	Collated in February 2012	There is insufficient information in relation to sexual orientation or religious belief to either support or refute concerns about adverse impact.
4. What are implications of the gaps in evidence (e.g. people with visual impairments do not know about council services)?	There are no implications in relation to the gaps identified because the personalised approach to assessment means that any needs in relation to sexual orientation or religious belief would be identified, respected and supported.			
5. What is the key question you want answered, and by whom.	What do people think about the proposal to outsource Robert Bean Lodge and, in particular, what, if any, are the concerns?			

Formal Consultation		
6. Are there any experts/ relevant groups who you could approach to ask their views on the issues?	YES	Please list: Officers have met with Medway Older People’s Partnership
	NO	
7. Have you discussed your consultation request with Research and Review?	YES	
	NO	

8. Describe in detail the views of the relevant groups/experts on the issues.

1. People valued the support that they had received, or are receiving, from the services.
2. People said that Adult Social Care, and particular older people services, should not bear the same level of savings as other council departments
3. Some people were concerned that the proposal was about closing the service and this view persisted throughout the consultation period
4. People were concerned about that the quality of the service would deteriorate under private ownership. In particular that the delivery of service would become task orientated and not person-centred
5. Concerns that the changes could result in additional burdens for carers of people that use the day services and anxiety for relatives of those that are resident at the service
6. People were concerned about the affordability of the service in relation to third party top ups for current and future residents of the service
7. People were concerned about the continuity of care from the staff and in particular the management of the home because they felt they were the key to the quality of the care at the service
8. People were concerned that people would not be able to access or afford the facilities if they transferred to the independent sector

9. What options, alternatives or reasonable readjustment(s) have been considered?

1. Service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service.
2. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
3. In awarding a contract the council will frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
4. Officers developing a Third Party Top Up & Legacy Placements policy would address the issue of affordability for existing residents.
5. The council works with all independent sector providers to ensure that they respect and support the religious beliefs of current and prospective residents so that all care homes are inclusive.

Conclusion and recommendations

10. In your own words, briefly state what changes (from the customers' point of view) are reasonable adjustments to make access fair.

In order to ensure that the outsourcing of Robert bean Lodge safeguards the quality and affordability of the service, the reasonable adjustments, from the customer's perspective) would be to:

1. Service users and their families to agree the outcomes and outputs that are necessary to maintain the excellent standard of care available within the service.
2. In developing a specification for the contracted service and the incoming provider, the council would also involve representatives from the service users, carers and families in the evaluation of the service.
3. In awarding a contract the council will frequently visit the service during the first six months and review the frequency of visits as part of those meetings.
4. Officers develop a Third Party Top Up & Legacy Placements policy would address the issue of affordability for existing residents.
5. The council works with all independent sector providers to ensure that they respect and support the religious beliefs of current and prospective residents so that all care homes are inclusive.

Target setting

Outcome	Actions (with completion dates)	Measure of progress
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<p>Service user involvement in the development of the specification and the tender evaluation</p>	<p>Meetings with service users and their families to develop the specifications (By 26 March 2012)</p> <p>Identify representatives to contribute to the evaluation of the tenders (By 26 March 2012)</p> <p>Service users and their families participate in the tender evaluation (April to September 2012)</p>	
<p>Confidence is established and maintained in the new service provider</p>	<p>Service users and their families participate in the tender evaluation (April to September 2012)</p> <p>Reporting of progress to Cabinet through the council plan. (Ongoing)</p>	
<p>A Third Party Top Up and Legacy Placement policy</p>	<p>Officers will present a policy for approval by Cabinet. (By May 2012)</p>	
<p>Access to beds for people with challenging behaviours</p>	<p>Part of the development of the specification and contract. (By May 2012)</p>	
<p>Increased confidence that care homes provide support for people to practice their religious beliefs</p>	<p>Incorporate into the Medway College of Social Care programme regarding dignity and respect and make a key theme for contract monitoring (possibly with the CQC). (By September 2012)</p>	
<p>Signed (officer responsible for achieving above DIA actions) David Quirke-Thornton, Assistant Director for Adult Social Care</p>	<p>Date</p>	
<p>Signed (completing officer/service manager) Genette Laws, Social Care Commissioning Manager</p>	<p>Date</p>	
<p>Signed (service manager/Assistant Director) David Quirke-Thornton, Assistant Director for Adult Social Care</p>	<p>Date</p>	

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CABINET

14 FEBRUARY 2012

FAIRER CONTRIBUTIONS FOR FAIRER ACCESS TO SERVICES

Portfolio Holder: Councillor David Brake, Adult Services

Report from: Rose Collinson, Director of Children and Adults

Authors: Genette Laws, Social Care Commissioning and Voluntary Sector Manager

Summary

To set out the final outcome of consultation regarding proposed changes to the council's policies on charging contributions for non residential Adult Social Care services and the Major Adaptations Policy relating to the Disabled Facility Grant for adaptations.

1. Budget and Policy Framework

1.1 The Cabinet is asked to accept this as an urgent item to enable its views to be reported to Full Council on 23 February 2012.

1.2 **Fairer contributions for non-residential Adult Social Care services**
Adult Social Care contributions have been set by the council under its charging policy, and fees and charges are a matter for Full Council. This decision is within the council budget and policy framework.

1.3 **Major Adaptations Policy**
There is a statutory duty to provide mandatory Disabled Facilities Grants (DFG) to disabled people under the Housing Act 1989 for essential home adaptations. This provision was revised through The Housing Grants, Construction and Regeneration Act 1996, which provides the current legislative framework.

1.4 The maximum grant available under the DFG is £30,000 in England and subject to a nationally determined means test, which applies to those over 18 to establish their contribution to the cost of the works. Those service users aged under 18 are not means tested for the DFG. This decision is within the council budget and policy framework.

2. Background

Fairer contributions policy for non-residential services

- 2.1 The current charging arrangements for home care and other non-residential services were introduced in 2002. The charges are based on the *type* of care delivered. This form of charging is focused on care services and not on the personalised care and support, which is now offered. With personalisation, the emphasis is outcome based and the personal budget is set to meet the outcomes, i.e. there is no *type* of care defined. Currently Medway Council collects over £9 million of income in client contributions for residential, respite and home care services. The Council does not currently charge for day care or transport services.
- 2.2 On 24 February 2011, Full Council agreed, as part of the budget setting that “The legitimate emphasis that has been placed on personalisation and direct budgets has exposed anomalies in the way in which the Council calculates contributions for social care. These will be addressed to create an equalised and fairer system ...”
- 2.3 In order to create an equalised and fairer system, it is proposed that the contributions policy for Adult Social Care services or a direct payment should have regard to the personal financial circumstances of the individual in receipt of a service or a direct payment to provide such. The current system results in some people not being assessed to make a contribution because of the *type* of service that they receive.

Major Adaptations policy

- 2.4.1 The Disabled Facilities Grant (DFG) and the additional social care funding for adaptations are finite budgets. In order to make it go further and ensure fair access to this limited funding it is important to ensure that where people can repay a contribution after benefiting from the social care contribution to their DFG, that this should be implemented to ensure that more people can benefit from this support.
- 2.4.2 The proposed policy would benefit about ten people per year and provides an affordable option for people to access the DFG and proceed with an expensive schedule of works (where the overall costs of construction are in excess of the £30,000 grant).

3. Advice and analysis – Fairer contributions for personal budgets

- 3.1 A Personal Budget funds a person to achieve outcomes, regardless of the activities undertaken. It is equitable for all support funded by Adult Social Care to all client groups to be assessed for contributions with the exception of services which must be provided free of charge by virtue of statutory provisions, such as services under Section 117 of the Mental Health Act 1983 and minor adaptations. By collecting income from all people in receipt of Adult Social Care support who are means tested as liable for charging it will also enable Medway Council to sustain the funding available to vulnerable adults in Medway.

4. Advice and analysis – Major Adaptations Policy

- 4.1 A DFG is a grant given by the council to a person who needs to make adaptations to their home in order for them to live safely and with dignity and respect, for example a downstairs bedroom or bathroom, where a complex adaptation is essential.
- 4.2 The maximum grant available under the DFG is £30,000 in England is subject to a nationally determined means test, which applies to those over 18 to establish their contribution to the cost of the works – this contribution is known as the ‘notional loan’. Those service users aged under 18 are not means tested for the DFG and therefore do not have a notional loan.
- 4.3 The notional loan does not always reflect the person’s ability to pay, as the fixed allowances within the calculation do not take into account individual housing costs. As a result there are service users unable to afford the assessed contribution for their essential works and who therefore cannot proceed with their adaptations. Should this be the case the proposal is that Adult Social Care would offer an interest free loan.
- 4.4 Where the cost of the adaptations exceeds the DFG limit of £30,000, the proposal is that the Council could offer funding as a maximum loan of up to £25,000, which would enable a bedroom or bathroom extension to be supported for those with a substantial disability requiring adaptations. Loans would be secured by legal charge against the property and would be repayable when the property is sold; or there is significant change in financial circumstances enabling repayment; or the applicant or their carer is not able to maintain their commitment to provide care at home.

5 Advice and analysis - Consultation

- 5.1 The consultation period commenced on 12 December 2011 and concluded on 9 February 2012.
- 5.2 The consultation exercise was undertaken for two purposes. First to inform people about the details of the proposed policy changes and, secondly, to invite the views of service users and carers so that the Council could better understand the direct impact of those changes on them, and take into account those views when reaching its final decision. The consultation programme included writing to existing service users, carers and families, Medway Council Members, Medway Members of Parliament, Medway LINK, NHS partners and Social Care staff. It also included presentations to the Health and Adult Social Care Overview and Scrutiny Committee, on 26 January 2012 (see Appendix 1). In addition a total of five consultation meetings were held as part of the listening exercise.
- 5.3 **In terms of the Fairer contributions policy**, 283 completed questionnaires were returned and one person was referred for independent advocacy support so that they could share their views. Three items of correspondence were received including letters and emails, in addition to the petitions referred to in paragraph 9.6. There were seven consultation meetings held as part of the listening exercise with 104 attendees at the meetings.

- 5.4 **In terms of the Major Adaptations policy**, 298 completed questionnaires were returned and one person was referred for independent advocacy support so that they could share their views. Eleven items of correspondence were received including letters and emails, in addition to the petitions referred to in paragraph 9.6. There were seven consultation meetings held as part of the listening exercise with 104 attendees at the meetings.
- 5.5 The Diversity Impact Assessment presented in the report to Cabinet on 29 November has been updated to reflect the views shared as part of the consultation process, see Appendix 3.

6 Advice and analysis – Fairer contributions policy consultation

- 6.1 The key messages that people told us were:
- 6.1.1 People felt that those who can afford to pay for care should pay.
- 6.1.2 A minority of people felt that charging was a tax on being disabled and questioned the cost/benefit of charging.
- 6.2 In preparing this report, officers identified the need to complete a full impact assessment for this proposal. See Appendices 3 and 5. The full impact assessment will enable Cabinet to give due regard to the issues in determining the changes in policy and also the issues which need to be addressed if the decision was made to adopt the proposed changes. Paragraphs 6.5 to 6.8 set out the mitigations that could be put in place should the decision be made to amend the policies.
- 6.3 In considering the potential impact of this proposal on service users, carers and their families, research was undertaken about the changes of such policies elsewhere and in particular in relation to people with mental health needs.
- 6.4 Cabinet should also consider the potential differential impact of making both a decision to close the Balfour Day Centre and a change the fairer contributions policy at the same time and therefore the DIA in appendix three identifies the need for a full impact assessment for this specific group.
- 6.5 The introduction of charging to a specific group with disabilities, people with mental health needs, means that a full diversity impact assessment was undertaken to assess the potential impact and to identify how any potential impact on this group can be mitigated if the proposal to change the policies is made.
- 6.6 The council collected £9 million in 2010/2011 at a cost of less than £300,000.
- 6.7 Although not raised by people during the consultation period, all the attendees of the Balfour Day Centre from Medway may be affected at the same time by the proposed change in the Fairer Contributions Policy. This will be carefully monitored as part of the individual assessments that take

place as part of the needs assessment, support planning and financial assessment.

7 Advice and analysis – Major Adaptations policy consultation

- 7.1 Some people expressed concern about the length of time that it takes for a DFG funded adaptation to take place – sometimes two to four years - and then in taking the initiative the service user or carer can not claim the money retrospectively.
- 7.2 Some people expressed concern about the assumption that an adaptation adds value and therefore needed to be repaid. There was a view that some adaptations led to a reduction in the property’s value and the owner had to pay to have the adaptations taken out so that they could recover that value for resale. In response to this matter the Disabled Facilities Grant is never reclaimed in these circumstances but only the additional funding from Social Care.
- 7.3 Whilst it is recognised that occasionally adaptations devalue a property usually those costing over the maximum DFG of £30,000 are extensions, which do add value. Service Users do have a choice as to whether to go ahead with the adaptations and may wish to consider other alternative such as moving house.
- 7.4 Comments have been received relating to the difficulties disabled people face financially. There are some concerns that they would be required to repay a loan, which they could not afford.
- 7.5 In most cases Service Users do not need to borrow further funding as the DFG provides all the finances required towards the adaptations. Those on income related benefits would qualify for a full grant. There would be flexibility in terms of the length of the loan repayment period for any Service Users who do receive this additional loan facility.
- 7.6 Some concerns have been raised regarding the ownership of the property and the responsibility to repay the loan. Should funding support be required where an assessed contribution towards the grant is needed the Service User can decide whether to accept an offer of financial support or explore alternatives eg re housing.

8. Risk management

Risk	Description	Action to avoid or mitigate risk
People may be disproportionately and adversely impacted by the proposal	Some groups with protected characteristics may be disadvantaged – either knowingly or unknowingly by the proposed changes to the policies	A full consultation process has informed a diversity impact assessment that may lead to reasonable adjustments being identified.

9. Director's comments

Fairer contributions policy

- 9.1 The income generated from fairer charging for non-residential services, £9 million last year, enables the council to maintain fair access to care at Substantial and Critical.
- 9.2 The proposed changes to this policy will ensure that all people with eligible needs are treated equally but there is a recognition that some groups that will be financially assessed for the first time may be disproportionately and adversely impacted by the changes if reasonable adjustments are not put in place.
- 9.3 The personalisation agenda is such that the current approach to charging in relation to services rather than a personal budget will perpetuate an output-led rather than an outcomes-focused approach to adult social care.
- 9.4 Officers are confident that the implementation of the proposed changes can be successfully implemented if a measured and sensitive approach is taken, as described in the full impact assessment.

Major Adaptations policy

- 9.5 The Disabled Facilities Grant is an important source of funding that enables people to stay in their own homes. The proposed Adaptations Policy means that more people will be able to afford to access this grant, which is means tested and limited at £30,000.
- 9.6 Given that this is a discretionary service, the importance of recycling the money that would be deployed through this policy is an important part of ensuring that this is a sustainable offer.
- 9.7 Given that this policy is about providing people with more options so that they can take advantage of the DFG, this proposal does not require a full diversity impact assessment because it is a service that people can opt into.

10. Financial and Legal implications

10.1 Financial

- 10.1.1 If the fairer contributions changes are implemented there will be an increase in income as all service users means tested as liable for charging would contribute to their Personal Budget and other services. This would bring 1,400 Service Users into the contributions arrangement. This includes 491 Service Users who only receive day care and up to 700 Mental Health Service Users not subject to S.117. The change in policy would also bring transport in scope which would result in contributions for transport or fewer people using council transport. The financial benefit is estimated to be in the region of up to £1m.

10.1.2 The threshold for means testing is proposed to remain the same at £23,500. Fee levels are set by Full Council each year as part of the budget setting process and are not affected by this proposal.

10.1.3 The DFG proposal will result in a greater level of income being collected from the loans. The table below shows the income that would be collected under the current and proposed policies. This is based on a sample of 16 cases over the past three years. The loans are interest free and the increase in income is a direct result of placing legal charges on properties.

Current Policy	14,918
New Policy	146,563

10.2 Legal

10.2.1 When considering making changes to service provision, the decision maker needs to comply with its obligations as to equalities under the Equality Act 2010. In essence this requires decision makers to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

Protected characteristics, as defined in the 2010 Act, are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

Having due regard to the above needs involves:

- removing or minimising disadvantages suffered by people due to their protected characteristics.
- taking steps to meet the needs of people from protected groups where these are different from the needs of other people.
- encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

In order to comply with its equality duties, the Council is required to engage with service users, representative groups, staff and unions and to use the information and views gathered as a result of such engagement (together with other equality information the local authority has) in assessing the equality impact of the proposals.

10.2.2 Where any consultation is undertaken it must be undertaken at a time when proposals are still at a formative stage; it must include sufficient reasons for particular proposals to allow those consulted to give intelligent consideration and an intelligent response; adequate time must be given for this purpose;

and the product of consultation must be conscientiously taken into account when the ultimate decision is taken.

11. Recommendation

Fairer Contributions Policy

- 11.1 That Cabinet notes the issues identified in the full Diversity Impact Assessment (as set out in Appendix 5) and agrees to the Fairer Contributions Policy as set out in this report being adopted.
- 11.2 That Cabinet recommends to Full Council that the policy be adopted and the implementation plan as set out in the full DIA for the Fairer Contributions Policy.

Major Adaptations Policy

- 11.3 That Cabinet agrees to the Major Adaptations Policy as set out in this report being adopted in Medway.

12. Suggested Reasons for Decision

Fairer Contributions Policy

- 12.1 The proposed changes to this policy will ensure that all people with eligible needs are treated equally but there is a recognition that some groups that will be financially assessed for the first time may be disproportionately and adversely impacted by the changes if reasonable adjustments are not put in place.
- 12.2 The personalisation agenda is such that the current approach to charging in relation to services rather than a personal budget will perpetuate an output-led rather than an outcomes-focused approach to adult social care.
- 12.3 The completion of a full diversity impact assessment, which takes into account the information gathered from the consultation process as well as intelligence gathering by officers, demonstrates that any disproportionate and adverse impact can be mitigated against.

Major Adaptations Policy

- 12.4 The policy will enable people to proceed with adaptations that are in excess of the £30,000 limit of the DFG so that they can live independently in their own home.

Lead officer contact details

FAIRER CONTRIBUTIONS POLICY

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ADAPTATIONS POLICY

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Background papers

- Fairer Charging for Home Care and Other non-residential services 2002
- Capital and Revenues Budget 2011/12 at <http://democracy.medway.gov.uk/mgConvert2PDF.aspx?ID=7088>

Appendix One

Extract of the record of the meeting from the Health and Adult Social Care Overview and Scrutiny Committee meeting held on 26 January 2012

Discussion:

The Social Care Commissioning and Voluntary Sector Manager gave a presentation illustrating the background to the proposed changes to the council's policies on charging contributions for non-residential Adult Social Care services and Disabled Facility Grant for adaptations.

The Service Manager, Physical Disabilities, then gave a presentation on the proposals with regard to the Disabled Facility Grant. She explained that the review was to ensure that the system is as fair as possible and sustainable in the future. She explained that in a few complex cases the Disabled Facility Grant was not enough to enable people to make the alterations needed to their homes because they are means tested or the adaptations cost more than the grant available. In cases where additional financial support was needed the Council was looking into the possibility of offering an interest free loan in such cases on the understanding it would be repaid when the home was no longer needed by the disabled service user or their family.

Members questioned officers on both reports and sought clarification on a number of issues.

Some Members felt that more should be done in the way of checking the feasibility of making these changes particularly as there were often structural reasons why houses could not be adapted extensively. There was also concern around the ability of some people to be able to repay and, what was perceived to be, a possible unfairness of putting a charge on a property, which would affect other family members.

The view was expressed that widening access to adaptations should not be used as an argument to close establishments such as the Balfour Centre as it was not possible to replicate the social element involved. Officers then explained that the proposals in relation to fairer contributions for fairer access to services were not connected with the proposals under consideration relating to the decommissioning of the Balfour Centre or the outsourcing of Linked Services Centres.

A proposal was made that the Cabinet should be asked to reconsider the proposal and look at how to use the Council's assets more effectively to move quickly to the provision of purpose built accommodation to meet the needs of disabled people using private investors and with affordable rents. On being put to the vote this proposal was lost.

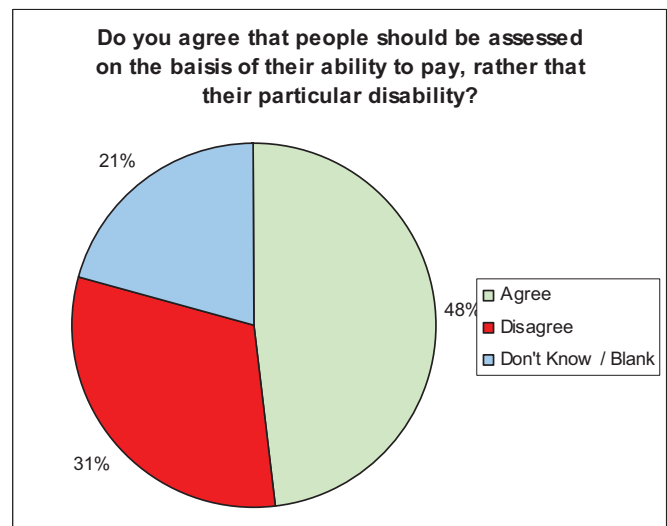
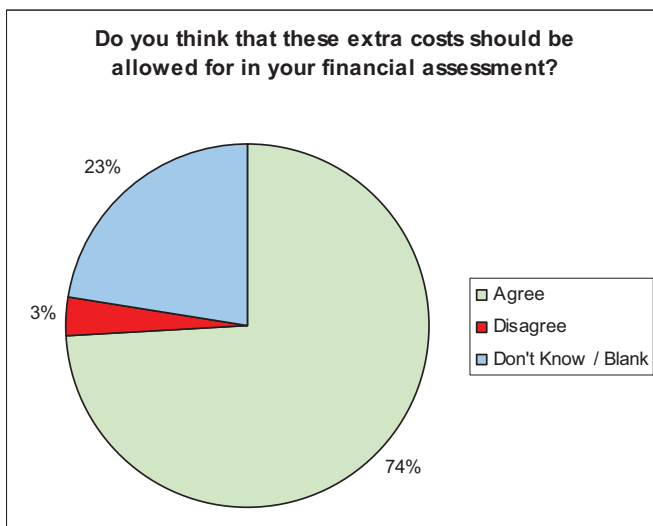
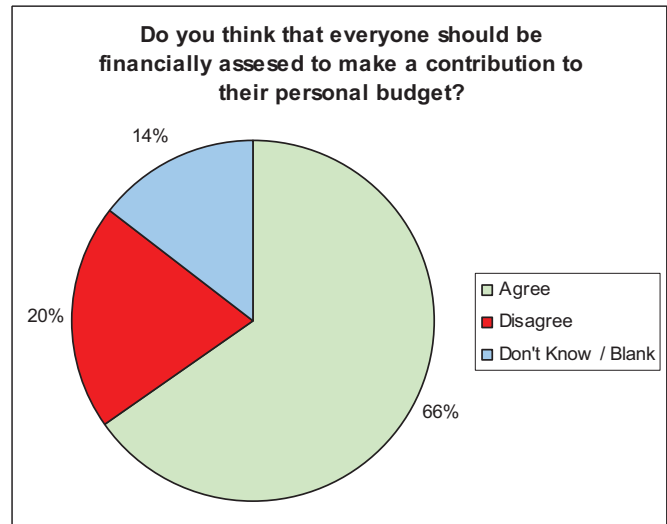
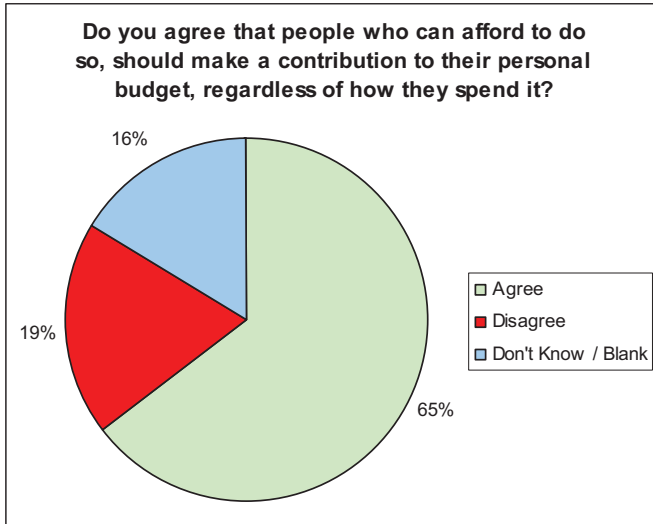
Some Members of the Committee then expressed support for the Cabinet's proposals, which would enable people to retain their independence but it was suggested that the Cabinet should also consider ways to increase the provision of purpose built accommodation.

Decision:

It was agreed to recommend the Cabinet to consider the comments made at the meeting and to investigate the possibility of building specially adapted houses for people with a disability.

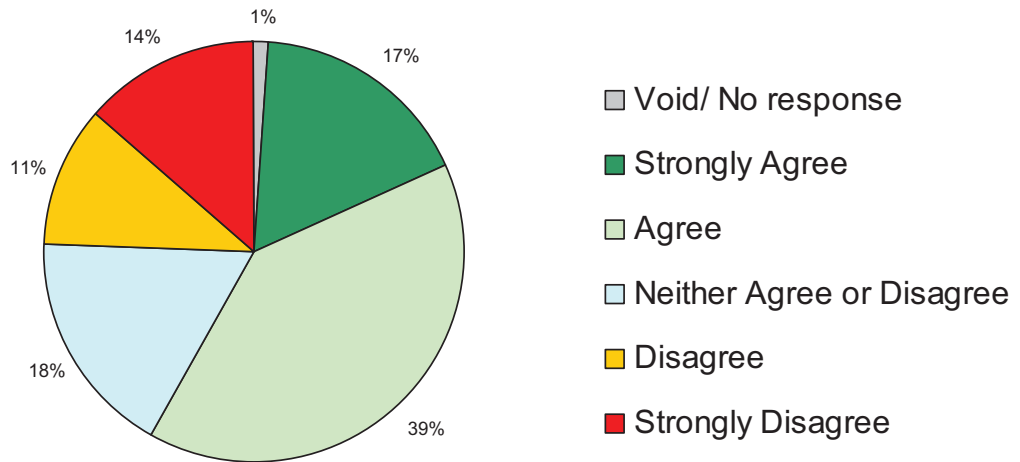
Appendix Two

Analysis of the Fairer Contributions questionnaire

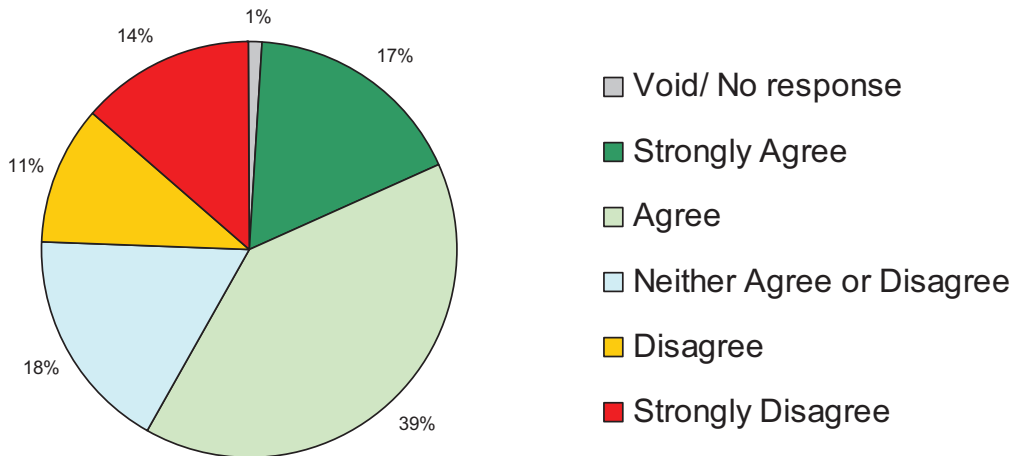


Analysis of the Major Adaptations Policy questionnaire

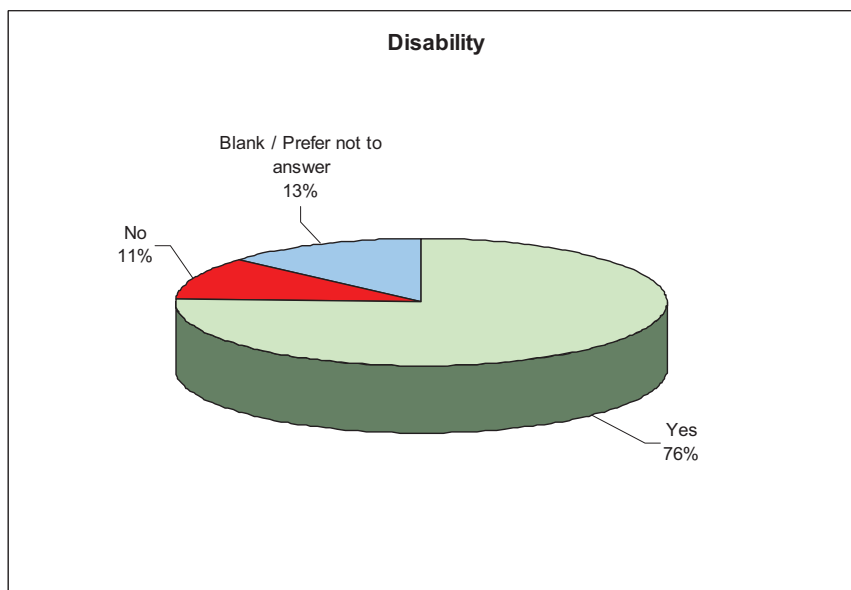
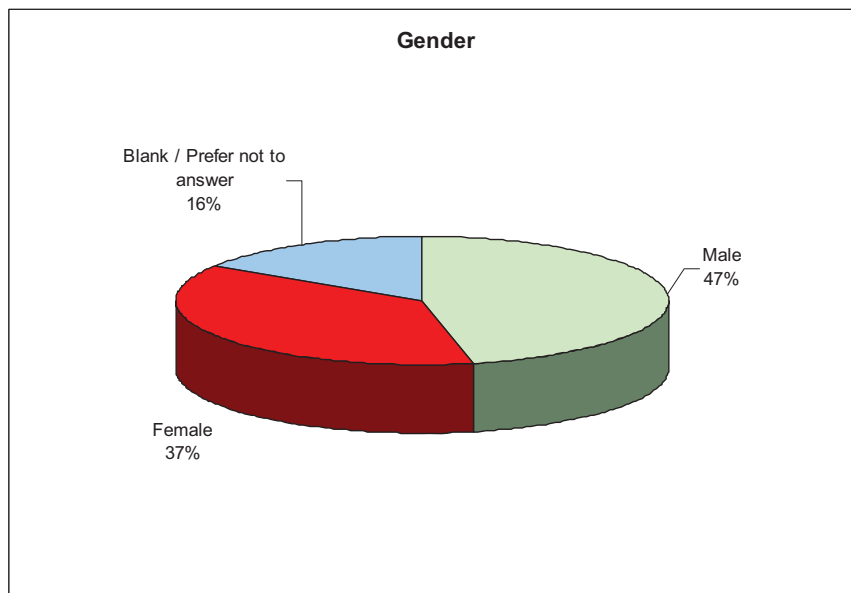
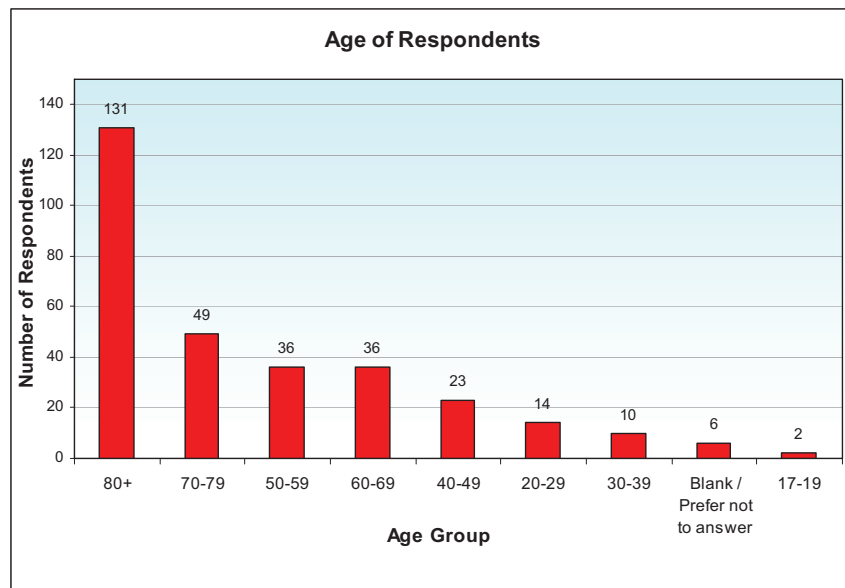
Q1. It is reasonable for the Council to loan money to service users for alterations to their homes, which they repay over time, at a level they can afford

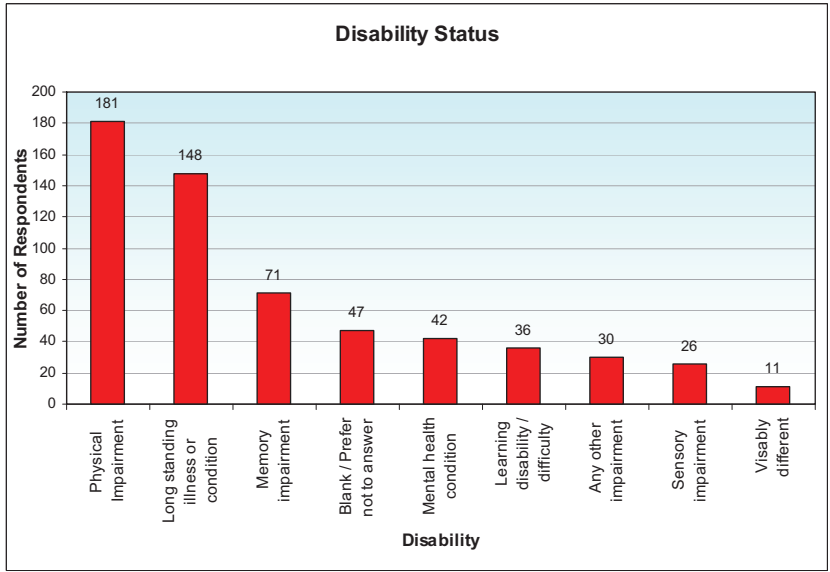
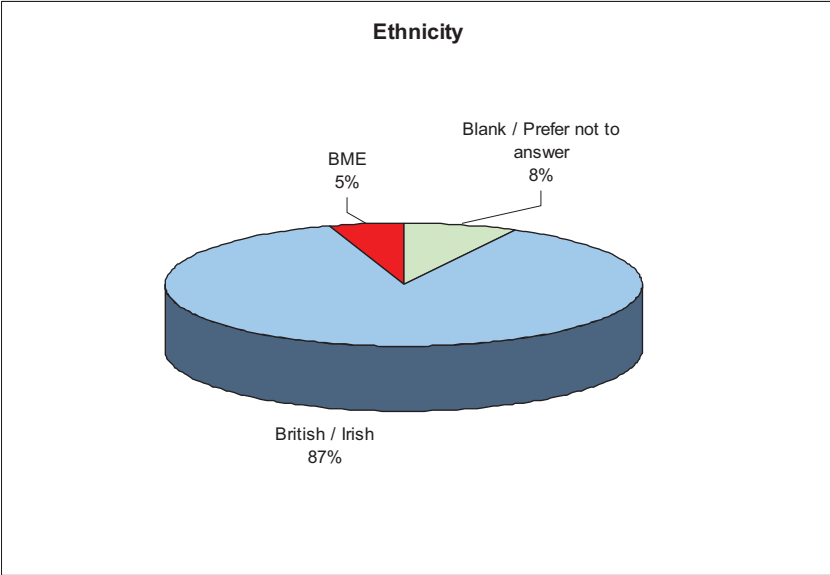
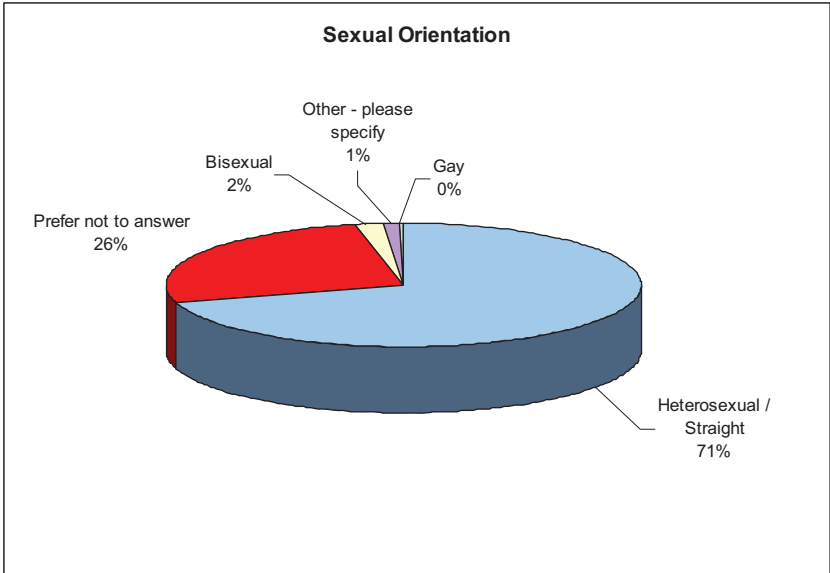


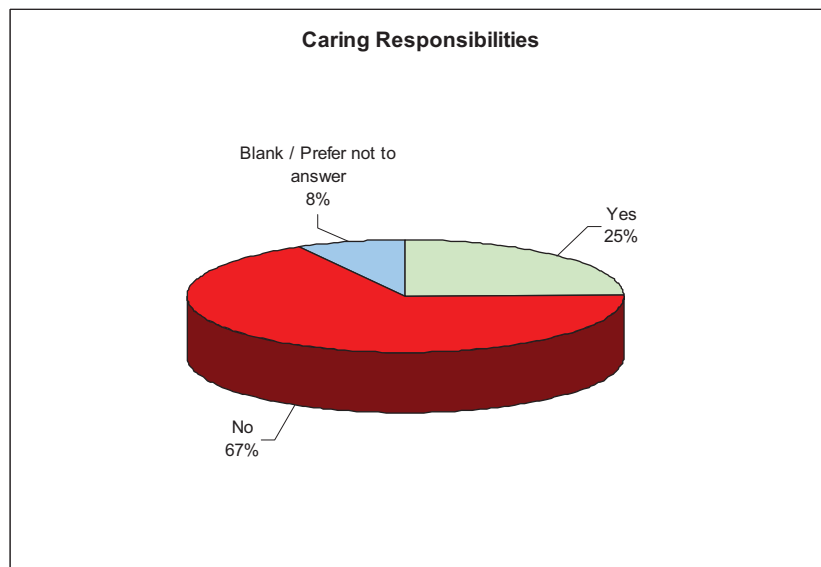
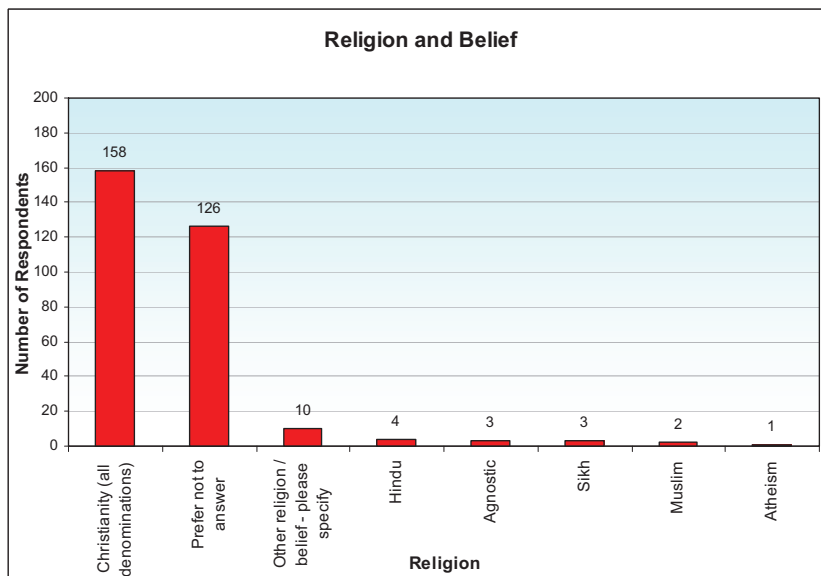
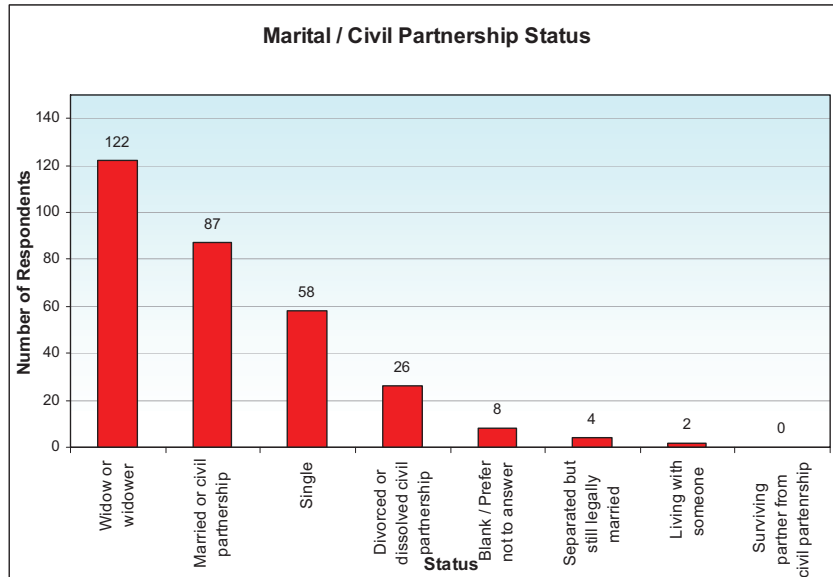
Q2. It is reasonable that where the cost of the home alterations are over the maximum Disabled Facilities Grant, the Council loan the money on the understanding it will be repaid when the home is no longer needed by the service user or their family



Analysis - Equalities Monitoring Information







Appendix Three

Diversity Impact Assessment: Screening Form

Directorate	Name of Function or Policy or Major Service Change		
Children & Adults	Changing Medway's Fairer Charging policy for adult social care non-residential services to Fairer Contributions		
Officer responsible for assessment	Date of assessment	New or existing?	
Genette Laws	February 2012	New	
Defining what is being assessed			
1. Briefly describe the purpose and objectives	The proposals will mean that changes need to be made to the current charging policy, contributions by service users will have to be assessed differently with personalisation.		
2. Who is intended to benefit, and in what way?	The changes will ensure that all service users of adult social care will be financially assessed in a fair and equal manner. This will address the current system which results in some service users being charged depending on the type of service they access, rather than their financial circumstances.		
3. What outcomes are wanted?	This contributes to the transformation of Medway's personalisation of adult social care by financially assessing the personal budget of an individual with eligible needs rather than assessing the financial value of services. It ensures equal treatment of all people with eligible needs regardless of their diagnosis.		
4. What factors/forces could contribute/detract from the outcomes?	Contribute Clear communication and consistent application of the policy	Detract Lack of consultation with service users	
5. Who are the main stakeholders?	Service users and carers of adult social care.		

Assessing impact																																										
7. Are there concerns that there <u>could</u> be a differential impact due to <i>racial groups</i> ?	NO	This policy will be based financial circumstances and should not have any disproportionate impact on any particular racial group. The table below shows the ethnicity of the service users impacted by these proposals.																																								
What evidence exists for this?	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Ethnicity</th> <th style="text-align: right;">Total</th> </tr> </thead> <tbody> <tr><td>White - British</td><td style="text-align: right;">1986</td></tr> <tr><td>Asian or Asian British - Indian</td><td style="text-align: right;">67</td></tr> <tr><td>Not stated - Refused</td><td style="text-align: right;">29</td></tr> <tr><td>White - Any other White background</td><td style="text-align: right;">26</td></tr> <tr><td>Any other ethnic group</td><td style="text-align: right;">25</td></tr> <tr><td>Chinese</td><td style="text-align: right;">22</td></tr> <tr><td>White - Irish</td><td style="text-align: right;">20</td></tr> <tr><td>Asian or Asian British - Any other Asian background</td><td style="text-align: right;">16</td></tr> <tr><td>Asian or Asian British - Pakistani</td><td style="text-align: right;">6</td></tr> <tr><td>Black or Black British - African</td><td style="text-align: right;">6</td></tr> <tr><td>Mixed - White and Asian</td><td style="text-align: right;">5</td></tr> <tr><td>Black or Black British - Any other Black background</td><td style="text-align: right;">4</td></tr> <tr><td>Black or Black British - Caribbean</td><td style="text-align: right;">4</td></tr> <tr><td>Mixed - White and Black Caribbean</td><td style="text-align: right;">3</td></tr> <tr><td>Mixed - Any other mixed background</td><td style="text-align: right;">2</td></tr> <tr><td>Mixed - White and Black African</td><td style="text-align: right;">2</td></tr> <tr><td>Asian or Asian British - Bangladeshi</td><td style="text-align: right;">1</td></tr> <tr><td>Not stated - Information not obtained</td><td style="text-align: right;">1</td></tr> <tr><td>Grand Total</td><td style="text-align: right;">2225</td></tr> </tbody> </table>		Ethnicity	Total	White - British	1986	Asian or Asian British - Indian	67	Not stated - Refused	29	White - Any other White background	26	Any other ethnic group	25	Chinese	22	White - Irish	20	Asian or Asian British - Any other Asian background	16	Asian or Asian British - Pakistani	6	Black or Black British - African	6	Mixed - White and Asian	5	Black or Black British - Any other Black background	4	Black or Black British - Caribbean	4	Mixed - White and Black Caribbean	3	Mixed - Any other mixed background	2	Mixed - White and Black African	2	Asian or Asian British - Bangladeshi	1	Not stated - Information not obtained	1	Grand Total	2225
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8. Are there concerns that there <u>could</u> be a differential impact due to <i>disability</i> ?	YES	<p>The groups currently subject to financial assessment do not include people with mental health needs (about 500 in number) and the proposed policy change would see them subject to financial assessments for the first time. However, this policy will mean that people with Mental health issues are treated in the same way as people with different disabilities.</p> <p>In addition, people using the Balfour Centre (over 100 people) may be subject to further change in terms of the council changing the way in which it discharges it duty to ensure that people can participate in the community. Should these proposals be adopted Balfour attendees will receive individual assessments to support them in identifying how best their needs can be met in the future.</p> <p>The table below sets out the numbers of people who are potentially impacted on who are older, or have a physical or learning disability.</p>																																								
What evidence exists for this?	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Category</th> <th style="text-align: right;">Total</th> </tr> </thead> <tbody> <tr><td>OP</td><td style="text-align: right;">1590</td></tr> <tr><td>PD 18-64</td><td style="text-align: right;">393</td></tr> <tr><td>LD 18-64</td><td style="text-align: right;">242</td></tr> <tr><td>Grand Total</td><td style="text-align: right;">2225</td></tr> </tbody> </table>		Category	Total	OP	1590	PD 18-64	393	LD 18-64	242	Grand Total	2225																														
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9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i>?	YES	The gender profile for people that are subject to charging demonstrates an over-representation of women, because they are over represented in this client group.
What evidence exists for this?	Gender	Total
	Female	1447
	Male	778
	Grand Total	2225
10. Are there concerns there <u>could</u> be a differential impact due to <i>sexual orientation</i>?	NO	We do not have monitoring information in relation to sexual orientation but as the proposed changes relate to introducing fairer eligibility criteria it is not expected to disproportionately impact on any group.
What evidence exists for this?		
11. Are there concerns there <u>could</u> be a have a differential impact due to <i>religion or belief</i>?	NO	
What evidence exists for this?		All groups are currently charged depending on the type of service they access this is just a different mechanism for charging based on financial assessment
12. Are there concerns there <u>could</u> be a differential impact due to people's <i>age</i>?	YES	The age profile for people that are subject to charging demonstrates an over-representation of older women. The gender profile for people that are subject to charging demonstrates an over-representation of women, because they are over represented in this client group.
What evidence exists for this?	Age Group	Total
	18-34	205
	35-44	97
	45-54	166
	55-64	170
	65-74	311
	75-84	564
	85-94	631
	95+	81
	Grand Total	2225
13. Are there concerns that there <u>could</u> be a differential impact due to <i>being transgendered or transsexual</i>?	NO	
What evidence exists for this?		All groups are currently charged depending on the type of service they access this is just a different mechanism for charging based on financial assessment
14. Are there any <i>other</i> groups that would find it difficult to access/make use		If yes, which group(s)?

of the function (e.g. people with caring responsibilities or dependants, those with an offending past, or people living in rural areas)?	NO	
What evidence exists for this?		
15. Are there concerns there <u>could</u> be a have a differential impact due to <i>multiple discriminations</i> (e.g. disability <u>and</u> age)?	YES	
What evidence exists for this?		<p>People with disabilities that use the Balfour Centre may be subject to two changes if Cabinet decides to close the Centre and implement the proposed changes. The council will provide individual support to these people to ensure that are duty to discharge appropriate care is maintained.</p> <p>The groups that are subject to financial assessments are older women given that the majority of clients of adult social care are older people and women – both of these protected characteristics are over-represented in terms of this policy because of their over representation in the client group.</p> <p>Additionally, working age adults with functional mental health needs will be financially assessed for the first time if the decision is taken to amend the</p>
Conclusions & recommendation		
16. Could the differential impacts identified in questions 7-15 amount to there being the potential for adverse impact?	YES	
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group? Or another reason?	YES NO	Please explain N/a
Recommendation to proceed to a full impact assessment?		
YES	<p>The groups that are subject to financial assessments are older women given that the majority of clients of adult social care are older people and women – both of these protected characteristics are over-represented in terms of this policy.</p> <p>Additionally, working age adults with functional mental health needs will be financially assessed for the first time if the decision is taken to amend the policy.</p>	
Action plan to make Minor modifications		
Outcome	Actions (with date of completion)	Officer responsible

Planning ahead: Reminders for the next review		
Date of next review		
Areas to check at next review (e.g. new census information, new legislation due)		
Is there <i>another</i> group (e.g. new communities) that is relevant and ought to be considered next time?		
Signed (completing officer/service manager) Genette Laws, Social Care Commissioning and Voluntary Sector Manager	Date	
Signed (service manager/Assistant Director)	Date	

Appendix Four

Revised DIA Screening form for major adaptations charging policy

Directorate	Name of Function or Policy or Major Service Change		
Children & Adults	Changes to the major adaptations charging policy		
Officer responsible for assessment	Date of assessment	New or existing?	
Jackie Challis/Amanda Dean	3/2/12	New	
Defining what is being assessed			
1. Briefly describe the purpose and objectives	The new charging policy for major adaptations is required to ensure that where additional funding above that provided by the Disabled Facilities Grant (DFG) is required there is a fair and equitable system for providing loans and repayment.		
2. Who is intended to benefit, and in what way?	Service Users and their families who require additional funding beyond the DFG will benefit from this change, as it will enable them to remain independent within their own homes..		
3. What outcomes are wanted?	The charging policy will ensure that there is equity in the system for loaning monies where the DFG is insufficient.		
4. What factors/forces could contribute/detract from the outcomes?	Contribute This enables Service Users who require additional funding to remain within their own homes	Detract Concerns about ability to repay the loan or the property being devalued by an adaptation.	
5. Who are the main stakeholders?	Service users of adult social care who require home adaptations where additional funding beyond the Disabled Facilities Grant is needed.		

Assessing impact		
7. Are there concerns that there <u>could</u> be a differential impact due to <i>racial groups</i>?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all racial groups in the same way .	
8. Are there concerns that there <u>could</u> be a differential impact due to <i>disability</i>?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i>?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
10. Are there concerns there <u>could</u> be a differential impact due to <i>sexual orientation</i>?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
11. Are there concerns there <u>could</u> be a have a differential impact due to <i>religion or belief</i>?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
12. Are there concerns there <u>could</u> be a differential impact due to people's <i>age</i>?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
13. Are there concerns that there <u>could</u> be a differential impact due to <i>being transgendered or transsexual</i>?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
14. Are there any <i>other</i> groups that would find it difficult to access/make use		If yes, which group(s)?

of the function (e.g. people with caring responsibilities or dependants, those with an offending past, or people living in rural areas)?	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
15. Are there concerns there <u>could</u> be a have a differential impact due to <i>multiple discriminations</i> (e.g. disability <u>and</u> age)?		Brief statement of main issue
	NO	
What evidence exists for this?	The policy applies to all groups in the same way.	
Conclusions & recommendation		
16. Could the differential impacts identified in questions 7-15 amount to there being the potential for adverse impact?		Brief statement of main issue
	NO	
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group? Or another reason?	YES	Please explain
	NO	N/a
Recommendation to proceed to a full impact assessment?		
NO	This function/ policy/ service change complies with the requirements of the legislation and there is evidence to show this is the case.	

Action plan to make Minor modifications		
Outcome	Actions (with date of completion)	Officer responsible

Planning ahead: Reminders for the next review		
Date of next review		
Areas to check at next review (e.g. new census information, new legislation due)		
Is there <i>another</i> group (e.g. new communities) that is relevant and ought to be considered next time?		
Signed (completing officer/service manager)	Date	
Jackie Challis and Amanda Dean, Service Managers for Physical Disability Services		
Signed (service manager/Assistant Director)	Date	

Appendix Five

Full Diversity Impact Assessment – Fairer Contributions policy for non-residential services

Directorate Children and Adults – Learning and Caring	Name of Service Change/Policy/Function Changes to the fairer contributions policy so that financial assessments are applied to value of the personal budgets rather than services and that all people with eligible needs are financially assessed.			
Officer responsible for assessment Genette Laws, Social Care Commissioning and Voluntary Sector Manager		Assessment date 10 February 2012	New or existing? New	
Identify potential issues and factors				
1. In regard to which groups are there concerns that there <u>could</u> be a differential impact?	Race	Religious belief	Trans-gendered or transsexual	
	Disability	Age	Other (specify)	
	Gender	Sexual orientation	Carers	
2. What differential impact do you think there <u>could</u> be on this/these group(s)?	This policy together with the proposed closure of the Balfour Centre may lead to service users at that Centre not choosing to pursue an alternative. This in turn may impact on carers who are therefore less likely to have a break from their caring responsibilities.			
Map existing data				
3. What existing evidence do you have for this - e.g. take-up, complaints?				
Information/ data	When collected	Source	Strengths of data (e.g. up-to-date)	Gaps
People felt that those who can afford to pay for care should pay.	12 December 2011 to 9 February 2012	Questionnaires, correspondence and information from consultation meetings	Up to date and in a variety of formats to triangulate the views shared	None due to a full consultation process taking place
Equalities monitoring data for people using the service	February 2012	Care Director – the council's electronic social care record system	Collated in February 2012	There is insufficient information in relation to sexual orientation or religious belief to either support or refute concerns about adverse impact.
4. What are implications of the gaps in evidence (e.g. people with visual impairments do not know	There are no implications in relation to the gaps identified because the personalised approach to assessment means that any needs in relation to sexual orientation or religious belief would be identified, respected and supported.			

about council services)?		
5. What is the key question you want answered, and by whom.		What do service users, their families and carers think about the proposal to change the fairer contributions policy and, in particular, what, if any, are the concerns?
Formal Consultation		
6. Are there any experts/ relevant groups who you could approach to ask their views on the issues?	YES	Please list:
	NO	Officers have met with MULO (Medway User Led Organisation), the Physical Disability Partnership Board and the Mental Health User-led Organisation
7. Have you discussed your consultation request with Research and Review?	YES	
	NO	
8. Describe in detail the views of the relevant groups/experts on the issues.		
<ol style="list-style-type: none"> 1. People felt that those who can afford to pay for care should pay. 2. A minority of people felt that charging was a tax on being disabled and questioned the cost/benefit of charging. 		
9. What options, alternatives or reasonable readjustment(s) have been considered?		
<ol style="list-style-type: none"> 1. Although not raised during the consultation period, all the attendees of the Centre from Medway may be affected by another proposed change in Adult Social Care relating to Fairer Contributions Policy. 2. People with mental health needs will be assessed for the first time in terms of financial assessment and therefore the involvement of social care professionals, health professionals and their families in the implementation of the policy so that service users and their carers are appropriately supported to understand the process and manage any anxieties. 		
Conclusion and recommendations		

10. In your own words, briefly state what changes (from the customers' point of view) are reasonable adjustments to make access fair.

In order to ensure that the proposed changes to the policy takes into account reasonable adjustments, from the customer's perspective, would be to:

1. Ensure that a clear communications and implementation plan is in place. In particular, clarity about the timetable of implementation.
3. Day service charges will not be applied for one year. This will minimise the potential impact of people reducing their attendance at day service due to the charges for these services and in turn impacting on the wellbeing of carers.
2. Involvement of social care professionals, health professionals and their families in the implementation of the policy so that service users and their families and carers are appropriately supported to understand the process and manage any anxieties.

Target setting

Outcome	Actions (with completion dates)	Measure of progress
Clear communication and respectful implementation	If decision is made to close the centre by Cabinet, letters to service users and their families following the decision by Cabinet to close the Centre – with clarity about how the decision would be implemented. (By 16 February 2012) Coordination between health and social care professionals with service users with mental health needs and their families and carers (By 29 February 2012)	Reporting to DMT by the Service Manager for the Centre Plan for coordination to be presented to DMT by the Service Manager for Mental Health Social Care Services.
Signed (officer responsible for achieving above DIA actions) David Quirke-Thornton, Assistant Director for Adult Social Care		Date
Signed (completing officer/service manager) Genette Laws, Social Care Commissioning Manager		Date
Signed (service manager/Assistant Director) David Quirke-Thornton, Assistant Director for Adult Social Care		Date