

CABINET

29 NOVEMBER 2011

MEDWAY COUNCIL'S VISION FOR COMMISSIONING AND PROVIDING ADULT SOCIAL CARE SERVICES IN MEDWAY

Portfolio Holder: Councillor David Brake, Adult Services

Report from: Rose Collinson, Director, Children's and Adult Services

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Summary

The purpose of this report is to seek agreement from Cabinet to consult on the future of Balfour Day Centre, Robert Bean Lodge, Platters Farm Lodge and Nelson Court.

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

This paper sets out the reasons and the timetable for undertaking consultation and engagement on the proposal.

1. Budget and Policy Framework

- 1.1 The Balfour Day Centre, Robert Bean Lodge, Platters Farm Lodge and Nelson Court are provided by the council and therefore a matter for Cabinet. This decision is within the budget and policy framework.
- 1.2 The Cabinet is asked to accept this report as urgent to enable consultation to commence at the earliest opportunity.

2. Background

- 2.1 The council owns and provides services from the following four Adult Social Care services
 - (a) The Balfour Day Centre. The consultation will focus 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 will focus 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 will focus 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 will focus on the proposal for the care service to be outsourced to an independent provider.
- 2.2 Medway Council is responding to the Government's Vision for a modern system of Adult Social Care built on seven principles:
 - 2.2.1 **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.
 - 2.2.2 **Partnership:** care and support delivered in a partnership between individuals, communities, the voluntary and private sectors, the NHS and councils.
 - 2.2.3 **Plurality:** the variety of people's needs is matched by diverse service provision with a broad market of high quality service providers.
 - 2.2.4 **Protection:** there are sensible safeguards against the risk of abuse or neglect. Risk is no longer an excuse to limit people's freedom.
 - 2.2.5 **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.
 - 2.2.6 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.
 - 2.2.7 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.
- 2.3 Competition can provide the impetus of choice for service users and carers, and increasing innovation amongst providers. 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. Medway Council is working with the Institute of Public Care, Oxford Brookes University to develop an Adult Social Care market strategy with high quality care at its heart in line with public expectation, by March 2012.

- 2.4 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.
- 2.5 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:
 - 2.5.1 Balfour Centre is a day centre that supports adults with disabilities. The number of people using the service is falling and the number of people choosing Personal Budgets is rising. Therefore the unit cost of the service is increasing and the independent sector offers more cost effective and personalised alternatives. There are currently 108 Service Users with an average daily attendance of 34 Service Users (as of October 2011). 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%.
 - 2.5.2 Access to community facilities such as leisure services and adult education with specially adapted facilities including *Changing Place* toilets is now available in Medway. 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.
 - 2.5.3 Robert Bean Lodge (36 beds) and Nelson Court (28 beds) provide residential care for older people with dementia. Both sites have day care facilities. Platters Farm Lodge (43 beds) is an accommodation based intermediate care facility. It also provides on-site day care. The care provided is of a high quality. 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.
- 2.6 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. Even if the Council are able to demonstrate cogent reasons for the proposals (e.g. as set out in paragraph 2.5) 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. The Cabinet, as decision makers, will consider all that

information and assessment when making decisions regarding these services.

3. Options

3.1 The consultation will look at the future of each service with all stakeholders including existing service users, carers, staff and the agencies that refer into the respective services.

3.1.1 Balfour Day Centre

3.1.1.1 **Do Nothing**

The number of people attending the day centre is falling. This is mainly due to the personalisation agenda, which has encouraged choice and raised expectations from Service Users and carers. The day centre is becoming increasingly expensive to run when benchmarked against other providers of daytime opportunities for support. Moreover there is a need to move away from day centres to daytime opportunities relating to getting working age adults, where appropriate, into employment, volunteering, training or education.

3.1.1.2 Outsource as per Health and Adult Social Care Overview and Scrutiny Committee recommendation in 2008

The recommendation was that the Balfour Day Centre should be outsourced to a third sector organisation. Officers considered this option with others and concluded that this was only viable if the numbers were maintained and investment maintained. However, the government's national targets relating to personalisation: 7% in 2009/10 and 30% in 2010/11 has meant that people have exercised their choice in relation to day activities and the number of people attending the Balfour Day Centre has fallen.

Third sector organisations are responding positively to the personalisation agenda and therefore are ensuring that the services offered are personalised and financially sustainable. The Balfour Day Centre, due to its size, is predicated on high attendance numbers which makes personalised activities – and meaningful outcomes - more difficult to achieve.

Given that the number of attendees is falling and the day centre is therefore becoming more expensive to run, it would not be appropriate to outsource the service, which is considered to be financially unsustainable given changes in the sector locally..

3.1.1.3 Outsourcing through open competition

Officers considered this option with others and concluded that this was only viable if the numbers were maintained and investment maintained. However, the government's national targets relating to personalisation: 7% in 2009/10 and 30% in 2010/11 has meant that people have exercised their choice in relation to day activities and the number of people attending the Balfour Day Centre has fallen.

Whilst open market competition will provide more certainty about achieving best value, the issues relating to a falling number of attendees and therefore the day centre becoming more expensive to run will cause the tendering opportunity to be an unattractive proposition.

3.1.1.4 **Decommission**

The number of people attending the Balfour Day Centre is falling. This is mainly due to the personalisation agenda, which has encouraged choice and raised expectations from service users and carers. The day centre is becoming increasingly expensive to run when benchmarked against other providers of daytime opportunities for support.

Personal Budgets would be allocated to service users based on eligible needs and agreed outcomes. The process of agreeing outcomes will encourage active discussions about choices.

Having considered the above options, officers recommend that the option of decommissioning be consulted upon.

3.1.2 Robert Bean Lodge, Nelson Court and Platters Farm Lodge

3.1.2.1 **Do Nothing**

The bed price for each service is very expensive compared to that of the independent sector. The previous publication of ratings by the Care Quality Commission demonstrates that comparable quality of care can be achieved at a less expensive price.

As these are in-house services they are only available to those with eligible needs that are supported by the council. By moving these services into to the independent sector, this will make the services available to the wider community and in particular those people who fund their own care known as self-funders. The council has an interest in supporting self-funders through market facilitation.

3.1.2.2 **Decommission**

Decommissioning the services at Robert Bean Lodge and Nelson Court will cause the sector locally to lose an important supply of good quality care in Medway which is required at this time to respond to the demographic pressures of an aging population. Equally the need for intermediate care in Medway is currently under review with an expectation that there is a need for more opportunities to access rehabilitation rather than less.

3.1.2.3 Outsourcing through open competition

The previous publication of ratings by the Care Quality Commission demonstrates that comparable quality of care can be achieved at a less expensive price. The council contracts with many providers in Medway who deliver high quality care at significantly lower cost and they remain sustainable.

Having considered the above options, officers recommend that the option of outsourcing be consulted upon.

4. Advice and analysis

- 4.1 In 2010/11, Medway Council spent 21% of its Older People residential care budget, £4.3 million, on in-house services; the bed capacity represents 3% of the market. In the same year, 91% of the day care budget, £613,799, was spent on in-house services for people with disabilities.
- 4.2 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.
- 4.3 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.
- 4.4 Officers have 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. Good information, advice and guidance available in Medway supports Service Users to obtain the services they want.
- 4.5 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.

5. Risk Management

Risk Complaints from Service Users and family carers at the Balfour Day Centre	Poor communication could lead to a poor relationship between the council and the Service Users and carers.	Action to avoid or mitigate risk Ensure that we appropriately consult and communicate with all service users and carers, and provide clear information. Ensure that decision takers take into account all relevant factors and comply with all legal requirements.
Complaints from Service Users and carers at the residential care services	Service Users and carers may be concerned about maintaining the quality of service and the long term plans for the care homes.	Ensure that we appropriately communicate and consult with Service Users and carers, to provide reassurance that demonstrates the council's mechanisms for managing quality assurance and due diligence in relation to sustainability. Ensure that decision takers take into account all relevant factors and comply with all legal requirements

6. Consultation

- 6.1 The Council's legal requirements as to consultation are set out below.
- 6.2 Consultation periods are suggested to ensure that the council can undertake a thorough consultation process.
- 6.3 The Balfour Day Centre, Robert Bean Lodge and Nelson Court are suggested for 60 days consultation given the significance for Service Users at the Balfour Day Centre and the fact that Robert Bean Lodge and Nelson Court are the homes of over 60 residents. Officers want to ensure that there is sufficient time to undertake a thorough consultation process and obtain all views, comments and suggestions.
- 6.4 Platters Farm Lodge has a transient (temporary) population of up to 43 people at any one time and therefore consultation is scheduled for 30 days. This timescale is different to the other services because it is not people's home.
- 6.5 Consultation will also include this paper being presented to the Health and Adult Social Care Overview and Scrutiny Committee on 26 January 2012.

- 6.6 In developing consultation paperwork for these services, FAQ information will be included to ensure that the key messages about why the services need to change is explained in a transparent and clear way.
- 6.7 The consultation process will further inform the Diversity Impact Assessment for each service in the attached appendices.
- 6.8 Consultation will involve engagement with all those affected by the proposals. Correspondence will be made available in easy read versions. The consultation materials will also be published on the council's website and made available to Medway's Local Involvement Network which brings together people and organisations with an interest in health and social care services.
- 6.9 Consultation will also include fully assemble consultation meetings at the residential care services and day centre so that people can share with officers their views, comments and suggestions.

6 Legal, Financial and HR implications

6.1 Legal

- 6.1.1 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.
- 6.1.2 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.
- 6.1.3 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.

- 6.1.4 Protected characteristics, as defined in the 2010 Act, are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 6.1.5 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.
- 6.1.6 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 if such engagement (together with other equality information the local authority has) in assessing the equality impact of the proposals.
- 6.1.7 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 postaward information (i.e. a requirement to send a Contract Award Notice to the Office of Publication of the OJEU).
- 6.1.8 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).
- 6.1.9 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.

6.2 Financial

- 6.2.1 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.
- 6.2.2 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.
- 6.2.3 It is estimated that the options for outsourcing the residential care services will deliver a saving in the region of £1.1m pa.
- 6.2.2 In addition to this, it is estimated that decommissioning the Balfour Day Centre and reproviding services through Personal Budgets and alternative services, would save a further £200,000 pa.

6.3 Human Resources

6.3.1 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. In most cases, any staff assigned to that undertaking will be transferred on mainly the same terms and conditions to the new provider.

6.3.2 Where a provision is closed without being transferred to a new provider it is likely that the staff will be redeployed or redundant. 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 redundancy procedure and comply with the general principles of fairness.

8. Recommendations

8.1 That officers commence a consultation process with Service Users, family carers, staff and stakeholders in respect of the proposals and report the outcome to Cabinet on 14 February 2011.

9. Suggested reasons for decisions

- 9.1 Officers consider that the proposals are desirable because of the reasons set out in the options and advice and analysis sections of this report.
- 9.2 Consultation with Service Users, carers, staff and other key stakeholders will ensure that the council has a clear understanding about the views of those with an interest in the service, understanding and mitigating any potential adverse impact and ensuring that the appropriate option is presented to Cabinet for a decision.
- 9.3 In particular, benchmarking of Robert Bean Lodge, Nelson Court and Platters Farm 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
- 9.4 The number of attendees at the Balfour Day Centre is falling. This is mainly due to the personalisation agenda, which has encouraged choice and raised expectations from service users and carers. The centre is becoming increasingly expensive to run when benchmarked against other providers of daytime opportunities with support.

Lead officer contact details

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Background Papers: None

Appendix 1

Diversity Impact Assessments

Directorate Children and Adults		e of Function ur Day Centre			
Officer responsible for assessment			Date of assessme	nt New or existing?	
Genette Laws			November 2011	existing	
Defining what is beir	ng asse	ssed			
1. Briefly describe th		Decomr	nission the Balfour D	Day Centre	
purpose and objective	ves				
0.14/1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		Th - (- formed the consent and	
2. Who is intended to benefit, and in what	_			o fund the needs of current and s in more cost effective ways	
benefit, and in what	way:		vide the same or bet		
		•			
3. What outcomes ar	е	More ch	oice and control for	people with eligible needs.	
wanted?		Cost eff	ective solutions for i	ndividuals and the council.	
		0000			
4. What factors/force)e		Contribute Detra		
could contribute/det	_	A responsive		<u>Detract</u> Severe weather may lead to a	
from the outcomes?		independent sector		delay in the programme in	
		An improved process of		terms of consultation or	
		An improved process of understanding people's		implementation.	
		needs and agreeing			
		meaning	gful outcomes		
5. Who are the main		Service	users		
stakeholders?		Carers			
			Employees		
		Keierra	agencies		
6. Who implements t	his	Social C	are Commissioning	team will facilitate the	
- I			consultation and will be responsible for implementation of		
Assessing impact			sion by Cabinet.		
7. Are there concern	s that		There is no signif	icant over-representation of a	
there <u>could</u> be a differential		minority ethnic group.			
impact due to racial groups?		? NO	-		
What evidence exists for		Infor	mation held on Care	Director	
this?					
O Are there core	a 4la a4		The comitee is the	olamad for popula with	
8. Are there concern there could be a diffe			The service is designed for people with disabilities – not just physical disabilities but		
more <u>coala</u> se a ann	o o i i i i i i		diodollido 110t j	act physical alcabillios but	

impact due to disability?		also loarning disabilities. There are sixteen
impact due to disability?	NO	also learning disabilities. There are sixteen people with learning disabilities.
What evidence exists for this?	Information from the in-house service monitoring arrangements.	
9. Are there concerns that there could be a differential impact due to gender?		The service users of the Balfour Day Centre reflect the gender profile of people that receive care and support from Adult Social Care
impact due to gender.	NO	dare and support from readit coolar care
What evidence exists for this?		
10. Are there concerns there could be a differential impact		There is no information to indicate this nor refute it.
due to sexual orientation?	NO	
What evidence exists for this?	The m	onitoring of sexual orientation is a challenge for uncil.
11. Are there concerns there could be a have a differential		There is no information to indicate this nor refute it.
impact due to religion or belief?	NO	
What evidence exists for this?	The m	onitoring of religion is a challenge for the council.
12. Are there concerns there could be a differential impact		
due to people's age?	NO	
What evidence exists for this?		ation from the in-house service monitoring lements and Care Director.
13. Are there concerns that there <u>could</u> be a differential impact due to <i>being trans-</i>	No	There is no information to indicate this nor refute it.
gendered or transsexual?	NO	
What evidence exists for this?	The monitoring of transgender or transsexual is a challenge for the council.	
14. Are there any other 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)?	NO	
What evidence exists for this?		1
15. Are there concerns there could be a have a differential		

discrin	due to <i>multiple</i> ninations (e.g. ity <u>and</u> age)?	NO			
	hat evidence exists for Please see above				
	Со	nclusion	s & recommendation		
impact questic	uld the differential is identified in one 7-15 amount to				
	eing the potential for eimpact?	NO			
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group? Or another reason?					
Recom	mendation to proceed to	a full im	pact assessment?		
NO	Please see comments a consultation.		•	med by the outcome of	
NO BUT 					
YES	Give details of key person responsible and target date for carrying YES out full impact assessment (see DIA Guidance Notes)				
	Antion	alam 4a m	naka Minar madifiaatian		
Outcon			nake Minor modification n date of completion)	Officer responsible	
		(,	,	
Diam	ng ahead: Reminders fo	n 41: -			

Date of next review

Areas to check at next review (e.g. new census information, new legislation due)			
Is there another group (e.g. new communities) that is relevant and ought to be considered next time?	No		
Signed (completing officer/s		Date	
Genette Laws, Social Care Co	mmissioning and	November	
Voluntary Sector Manager		2011	
Signed (service manager/As	sistant Director)	Date	

Directorate Children and Adults		Name of Function Nelson Court, Robert Bean Lodge			
Officer responsible for	r assess	sment	Date of assessme	ent	New or existing?
Genette Laws			November 2011		existing
Defining what is being	ng asse	essed	<u> </u>		
			ce services		
benefit, and in what way? needs verificien the grow			The allocated budget for people with adult social care needs will be used in a more cost effective way so that the efficiencies realised form the outsourcing can help assist the growing numbers of people calling on the council for support.		
3. What outcomes an wanted?	re	Better use of resources for people with adult social care needs and in particular those living with dementia. To maintain, and where possible, improve the good outcomes currently being delivered.			ing with dementia. e, improve the good
from the outcomes? effecti		A respon	Contribute nsive and cost independent	dela tern	Detract vere weather may lead to a say in the programme in a sof consultation or lementation.
5. Who are the main stakeholders?		Service users Carers Employees Referral agencies			
6. Who implements t and who is responsi		Social Care Commissioning team will facilitate the consultation and will be responsible for implementation of the decision by Cabinet.			

Assessing impact			
7. Are there concerns that there could be a differential impact due to racial groups?	There is no significant over-representation of minority ethnic group.		
impact due to racial groups:	NO		
What evidence exists for this?	Information held on Care Director		
8. Are there concerns that there could be a differential impact due to disability?	YES	The service is designed for people with frailties and disabilities who are living with dementia.	
impact and to diodomity.	NO		
What evidence exists for	Pen pictures of those that are resident at the service		

this?		
9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i> ?	¥ES	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?		
10. Are there concerns there could be a differential impact	YES	There is no information to indicate this nor refute it.
due to sexual orientation?	NO	
What evidence exists for this?	The m	
11. Are there concerns there could be a have a differential	YES	There is no information to indicate this nor refute it.
impact due to religion or belief?	NO	
What evidence exists for this?	The monitoring of religion is a challenge for the counc	
12. Are there concerns there could be a differential impact	YES	The service is designed for older people.
due to people's age?	NO	
What evidence exists for this?	Information from the in-house service monitoring arrangements	
13. Are there concerns that there could be a differential	YES	There is no information to indicate this nor refute it.
impact due to being trans- gendered or transsexual?	NO	
What evidence exists for this?		nonitoring of transgender or transsexual is a nge for the council.
14. Are there any other groups that would find it difficult to access/make use of the function (e.g. people	YES	
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 could be a have a differential impact due to <i>multiple</i>	YES	Brief statement of main issue
discriminations (e.g. disability and age)?	NO	
What evidence exists for this?	Please	e see above
	<u> </u>	

Conclusions & recommendation		
16. Could the differential impacts identified in questions 7-15 amount to there being the potential for adverse	YES	
impact?	NO	
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group? Or	YES	Not applica ble
another reason?	NO	
Recommendation to proceed to a full impact assessment?		-
NO	Please see comments above which will be further informed by the outcome of consultation over 60 days.	
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)	

	Action plan to make Minor modification	ons
Outcome	Actions (with date of completion)	Officer responsible
		•
Planning ahead: Remin	ders for the next review	,
Date of next review		
Areas to check at next		
review (e.g. new census information, new	5	
legislation due)		
iogisiation due		

No		
ervice manager)	Date November	
g aa	2011	
sistant Director)	Date	
	ervice manager) mmissioning and	ervice manager) mmissioning and Date November 2011

Directorate Children and Adults	Platters Farm	Name of Function Platters Farm Lodge Intermediate care service			
Officer responsible for assessment		Date of asses	sment	New or existing?	
Genette Laws		November 20	11	existing	
Defining what is being					
Briefly describe the purpose and objection		Outsource Platters Farm Lodge			
benefit, and in what way? we ef		The allocated budget for people with adult social care needs will be used in a more cost effective way so that the efficiencies realised form the outsourcing can be reinvested in other services such as prevention.			
3. What outcomes as wanted?	To m	Better use of resources for people with social care needs. To maintain, and where possible, improve the good outcomes currently being delivered.			
4. What factors/force could contribute/det from the outcomes?	ract A res	effective independent de		Detract evere weather may lead to a lay in the programme in terms consultation or implementation.	
5. Who are the main stakeholders?	Care Empl	ce users rs oyees ral agencies	'		
6. Who implements to and who is responsi	ble? and v	Social Care Commissioning team will facilitate the consultation and 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> ?	¥ES	There is no significant over-representation of a minority ethnic group.	
puot duo to ruoidi groupo:	NO		
What evidence exists for this?	Information held on Care Director		
8. Are there concerns that there could be a differential impact due to disability?	¥ES	The service is designed for older people with frailties and disabilities who are in recovery.	
,	NO		
What evidence exists for	Pen pictures of those that are resident at the service		

	1			
this?				
9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i> ?	YES	Social Care		
What evidence exists for this?				
10. Are there concerns there could be a differential impact due to sexual orientation?	YES NO	There is no information to indicate this nor refute it.		
What evidence exists for this?	The monitoring of sexual orientation is a challenge for the council.			
11. Are there concerns there could be a have a differential impact due to religion or	YES	There is no information to indicate this nor refute it.		
belief? What evidence exists for this?	NO The m	onitoring of religion is a challenge for the council.		
12. Are there concerns there could be a differential impact due to people's age?	YES	The service is designed primarily for older people.		
What evidence exists for this?	Information from the in-house service monitoring arrangements			
13. Are there concerns that there <u>could</u> be a differential impact due to <i>being trans-</i>	YES	There is no information to indicate this nor refute it.		
gendered or transsexual? What evidence exists for this?	The monitoring of transgender or transsexual is a challenge for the council.			
14. Are there any other groups that would find it difficult to access/make use of the function (e.g. people	YES			
with caring responsibilities or dependants, those with an offending past, or people living in rural areas)?	NO			
What evidence exists for this?		District and the state of the s		
15. Are there concerns there could be a have a differential impact due to multiple discriminations (e.g.	YES	Brief statement of main issue		
disability <u>and</u> age)? What evidence exists for	NO Please	e see above		

this?						
Conclusions & recommendation						
16. Could the differential impacts identified in questions 7-15 amount to	¥ES					
there being the potential for adverse impact?	NO					
17. Can the adverse impact be justified on the grounds of promoting equality of opportunity for one group?	Yes	Not applicable				
Or another reason?						
Recommendation to proceed t	o a full im	npact assessment?				
consultation over 30 c		hich will be further informed by the outcome of				
What is required to NO ensure this complies BUT with the requirements of the legislation? (see DIA Guidance Notes)?						
Give details of key person responsible target date for carryi YES out full impact assessment (see DIA Guidance Notes)	ng					
		to make Minor modifications				
Outcome Acti	ons (with	n date of completion) Officer responsible				
Planning ahead: Reminders for the next review						
Date of next review	ior the I	next review				

Areas to check at next review (e.g. new census information, new legislation due)			
Is there another group (e.g. new communities) that is relevant and ought to be considered next time?	No		
Signed (completing officer/		Date	
Genette Laws, Social Care Commissioning and		November	
Voluntary Sector Manager		2011	
Signed (service manager/Assistant Director)		Date	