

CABINET

20 DECEMBER 2011

SHALDER HOUSE – ADDENDUM REPORT

Portfolio Holder: Councillor David Brake, Adult Services

Report from: David Quirke-Thornton, Assistant Director, Adult Services

Author: Genette Laws, Social Care Commissioning and Voluntary Manager
Rosie Gunstone, Democratic Services Officer

Summary

To set out the final outcome of consultation regarding the options for the future of Shalder House, together with the views of the Health and Adult Social Care Overview and Scrutiny Committee which considered this matter on 15 December 2011.

To also set out the recommendations for Cabinet, as detailed in paragraph 5 of this addendum report.

1. Consultation

- 1.1 The consultation period for Shalder House concluded on 15 December 2011. Since dispatching the Cabinet report on 12 December, the Health and Adult Social Care Overview and Scrutiny Committee has met and officers have received one further completed questionnaire.
- 1.2 The Health and Adult Social Care Overview and Scrutiny Committee discussed the proposal on 15 December and their comments about the proposal are set out in section three of this report.
- 1.3 The additional questionnaire makes the total returned to the council as 11 of the 33 dispatched on 15 November and the 31 believed to have reached the intended people. The views shared in the questionnaire complements the overall findings confirmed in the Cabinet report.
- 1.4 Consultation with staff commenced on 15 November 2011 and concluded on 15 December. At the meeting that commenced the consultation with staff, it was apparent that the team were very passionate about the service that they offered and believed it to be of better quality than the private sector. As part

of the formal consultation, employees received one-to-one meetings with line managers and/or HR officers and were provided with independent support for developing a counter-proposal.

- 1.5 Staff did not submit a counterproposal. An explanation of the reasons for not submitting a counterproposal was provided. The explanation indicated that they had decided against trying to set up as a social enterprise because it was effectively the creation of another care agency, when there are already a number of independent sector agencies available in the market.
- 1.6 The team recognised that it could not continue to operate from Shalder House due to the condition of the building and could not identify an alternative setting that would enable them to deliver a cost-effective service.
- 1.7 The team did not see itself as having a role within the model of extra care sheltered housing being adopted in Medway, as care of this type could easily be met by already established care agencies.
- 1.8 The team reviewed the draft terms of reference for the Medway Multi-Agency Coordination Group and noted the strong commitment between all key partners agencies regarding good integrated working for the benefit of vulnerable adults and their families who have multiple needs and chaotic lives. The team were keen to contribute to the objectives of the group.

2. Diversity Impact Assessment

- 2.1 The diversity impact assessment attached in appendix one relates to service users. Feedback from service users has not changed the conclusions of the diversity impact assessment in the Cabinet report presented on 1 November 2011. Officers are confident that the outcomes achieved at Shalder House will continue to be available in Medway following the recommended closure of Shalder House.

3. Health and Adult Social Care Overview and Scrutiny Committee – 15 December 2011

- 3.1 The Social Care Commissioning and Voluntary Manager updated the Committee on the current position with regards to responses to the consultation with service users, staff and stakeholders in respect of the proposed closure of Shalder House. Letters to 33 former users had been sent out and 10 responses had been received.
- 3.2 While the responses were complimentary about the service which users received at Shalder House, the consensus was that the service users would have preferred to have received assistance to enable them to remain at home rather than having to use Shalder House. Responding to a question she stated that in the event that any service user wanted to take advantage of a similar service to that offered at Shalder House there was spare capacity at Platters Farm. She stated that the referral agency had also been consulted and had not raised any objections.

- 3.3 In answer to a further question it was stated that Shalder House did not meet the decent homes standard and could therefore not be used for housing or temporary accommodation.
- 3.4 Staff had until 16 December 2011 to submit counter proposals to closure but as yet no proposals had been received.
- 3.5 The Chief Finance Officer clarified the financial implications by stating that the money referred to in paragraph 7.3.8 had already been added to the Capital Allowance 'pot'.
- 3.6 The Committee noted the report.

4. Director's Comments

- 4.1 Those that have used the Shalder House service value the difference that it has made to their ability to remain independent within the community.
- 4.2 Medway Community Healthcare has not raised any concerns about the proposals and has managed its referrals during the consultation period without adversely impacting on outcomes for service users.
- 4.3 The council is currently working with NHS Medway to review intermediate care in Medway and in particular to ensure that there is an appropriate balance, and range, of bed-based and non-bed based services.
- 4.4 Officers are confident that the outcomes achieved at Shalder House will continue to be available in Medway if Cabinet agrees to the recommended closure of Shalder House.

5. Recommendations

- 5.1 That Cabinet is asked to consider the comments from the Health and Adult Social Care Overview and Scrutiny Committee as set out in section 3 above.
- 5.2 That Cabinet agrees that officers decommission the service operating at Shalder House from 4 January 2012 with a view to the property becoming vacant in February 2012.
- 5.3 That Cabinet declares Shalder House (as edged black on the attached plan (Appendix 2 to the addendum report)) surplus and delegates authority to the Chief Finance Officer, in consultation with the Portfolio Holder for Finance, to dispose of the site for best consideration.

6. Suggested reasons for decisions

- 6.1 Officers consider that the proposals are desirable because of the reasons set out in the advice and analysis section. Shalder House is a service that supports people that have complex and challenging social and housing needs. The building is not fit for purpose as a sheltered housing scheme and

therefore the decommissioning of the service will enable innovative and more cost effective approaches to delivering tailored support to individuals.

- 6.2 During the service's last inspection by the Care Quality Commission, the service was considered to provide very good care however the fabric of the building was criticised.
- 6.3 Whilst the care is good, it is not cost effective to employ 13 members of staff to support a maximum of 11 service users at any one time. During a period of 52 weeks, 38 people benefited from the service, which indicates that the service operates at an average capacity of about 51%.
- 6.4 The building cannot be made fit for purpose without a substantial investment of capital.
- 6.5 Currently, up to eleven service users can benefit from a site that could accommodate approximately 30 units of accommodation or be redeveloped for other purposes that could benefit the whole local community.
- 6.6 The proposed alternative approach to supporting people into appropriate accommodation and reintegrating into the community can be delivered in a more person centred way by using units within sheltered housing across Medway.
- 6.7 Consultation has confirmed the importance of having services like that, which operates from Shalder House. Officers are confident that services, which deliver similar outcomes, can meet the needs of those that otherwise would have been referred to the service.

Lead officer contact

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Appendix 1

Diversity Impact Assessment

Directorate Children and Adults	Name of Function Shalder House		
Officer responsible for assessment Genette Laws	Date of assessment December 2011	New or existing? existing	
Defining what is being assessed			
1. Briefly describe the purpose and objectives	Decommission the Shalder House service and continue to make available opportunities for rehabilitation.		
2. Who is intended to benefit, and in what way?	The tax payer will continue to fund the needs of future potential service users in more cost effective ways.		
3. What outcomes are wanted?	Cost effective solutions for individuals Opportunity for the local area to benefit from the redevelopment of the site.		
4. What factors/forces could contribute/detract from the outcomes?	<p style="text-align: center;"><u>Contribute</u></p> <p>A range of bed-based and non-bed based services are available to provide the same outcomes in a cost effective way.</p> <p>Good working relationship with Housing to support people with complex housing needs who also require social care support.</p>	<p style="text-align: center;"><u>Detract</u></p>	
5. Who are the main stakeholders?	Employees Service users Rapid Response team (main referring agency) Hospital		
6. Who implements this and who is responsible?	Social Care Commissioning team will facilitate the decommissioning of 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.
	NO	
What evidence exists for this?	Information held on Care Director	
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 vulnerabilities rather than disabilities. Where a person's primary vulnerability relates to a disability, this is met via other services.
	NO	
What evidence exists for this?	Pen pictures of the people that have used Shalder House	
9. Are there concerns that there <u>could</u> be a differential impact due to <i>gender</i>?	YES	The service users of Shalder House 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 <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 <i>age</i>?	YES	Whilst the users of the service are older people, the alternative arrangements will accommodate adults of all ages.
	NO	
What evidence exists for this?	Review of services currently available.	
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.	

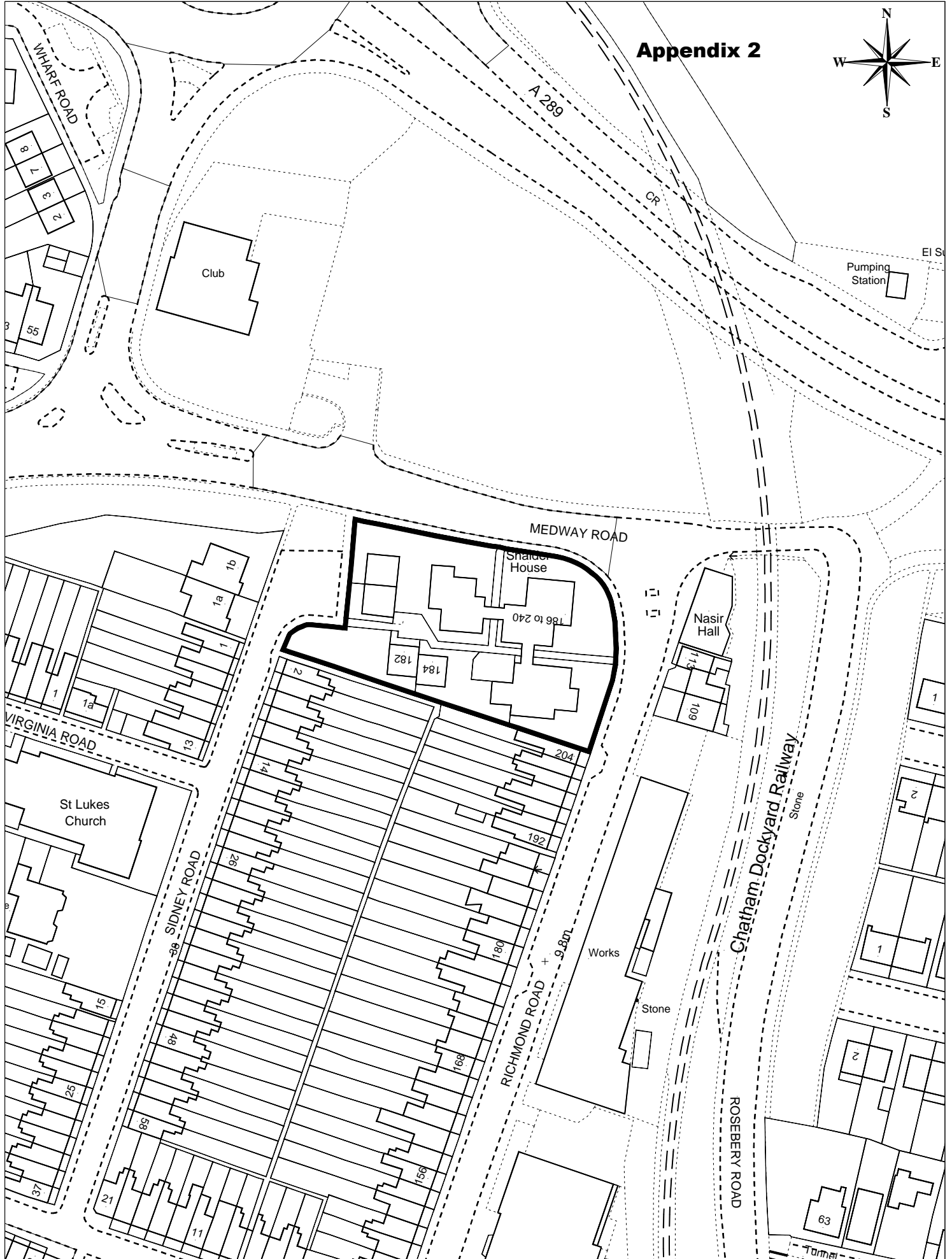
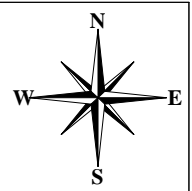
14. Are there any <i>other</i> groups that would find it difficult to access/make use of the function (e.g. people with caring responsibilities or dependants, those with an offending past, or people living in rural areas)?	YES	
	NO	
What evidence exists for this?		
15. Are there concerns there <u>could</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	Shalder House is an accommodation-based rehabilitation service. It is available to anyone from Medway. By using the range of services already available in Medway, the people will continue to achieve the same outcomes.
	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
	NO	
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)	

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 15 Dec 2011	
Signed (service manager/Assistant Director)	Date	

Appendix 2



Shalder House
Medway Road, Gillingham



17/10/11