Cabinet – 17 December 2014

Outcome of Consultation of Future of Fallings Heath

Portfolio: Councillor D Coughlan – Social Care

Related portfolios: None

Service: Social Care and Inclusion

Wards: All

Key decision: Yes

Forward plan: No

1. Summary

- 1.1 This report describes the outcome of the consultation on the future of Fallings Health and the subsequent consideration of the options that were the subject of the consultation, which aimed to deliver improved outcomes for disabled people and their carers.
- 1.2 There is analysis and feedback on the main options included in the consultation. There is a proposal arising from the review to improve the model of service delivery of respite and support to disabled people, through the retention of the current 8 beds at Fallings Heath, with significant improvements.
- 1.3 There is also a recommendation to review all in-house social care services during 2015 to consider the wider implications of the new legislation (the Children and Families Act and the Care Act 2014) in meeting the new entitlements to social care for carers and for people meeting their own needs.

2. Recommendations

- 2.1 That the Fallings Heath residential respite service is retained with increased occupancy rates, and effective measures that reduce costs as set out in option A to continue to operate Fallings Heath as an in-house service with more efficiencies.
- 2.2. That a strategic review of a range of social care services for people with disabilities is carried out during 2015 which will examine options for meeting eligible Walsall people's social care needs more effectively.

3. Report detail

- 3.1 The Cabinet in July 2014 approved a recommendation that Council run services for people with disabilities within the Social Care and Inclusion Directorate be reviewed during 2014/15 and 2015/16, to ensure they are operating efficiently and to ensure they are compliant with the guidance and principles of new legislation, for instance the Care Act 2014. This report focuses upon the review and consultation of the Fallings Heath service as the first in this approach.
- 3.2 The review on the future of Fallings Heath and the outcomes of this consultation are shown in Appendix 1. The key concerns raised included the following:
 - A shortfall in the immediate availability and choice of alternative provision to Fallings Heath residential respite service to all users and carers;
 - The need for up to date and consistent social work reviews of users' needs and their carers' support;
 - The excellence of the service and staff at Fallings Heath;
 - The potential for increased take up of the service from Walsall users and carers, and those between 14 and 25 years.
- 3.3 Fallings Heath was originally a purpose built local authority residential unit for adults with learning disabilities which opened in the 1980's with 13 beds which were used for both long stay and respite care residents. In recent years the transfer of long stay residents to community settings has meant that it is no longer used for long stay residents and this, together with low occupancy levels in the respite care beds, has meant that the unit cost for the service has become too high when compared to the cost of equivalent services in the private sector.
- 3.4 Over the last two years, access to the building has been improved so that people with physical disabilities, sensory disabilities and autism can be supported in addition to people with learning disabilities. The unit now consists of three wings: two 4 bed respite care units which can be provided as gender specific if required; and a separate 5 bed unit which is currently unused and would require further capital expenditure to meet CQC registration standard.
- 3.5 Fallings Heath is viewed by users and carers as a high quality service, and has good CQC inspection reports. However, the low level of occupancy (57%) and subsequent high costs meant that the Council has needed to review the future of the service.
- 3.6 The review approved by Cabinet considered five broad options as follows:
 - Option A: Continue to operate Fallings Heath as an in-house service with more efficiencies
 - Option B: Outsource the service to a third party as a going concern
 - Option C: Evaluate the establishment of an Arms Length Management Organisation (AMLO) for all provider learning disability services with Fallings Heath as a test case for this option
 - Option D: Scope the establishment of a Community Interest Company (CIC)
 - Option E: Re-provide the service via alternative services in the market

- 3.7 The feedback from carers and users was that Fallings Heath provides essential respite care and that some alternative ways of delivering respite care (such as Shared Lives, and peripatetic support in user and carers' own homes), while more cost effective, would not be able to meet all the needs of current service users and their carers in the short term. Carers and users acknowledged the high costs of the service and the need for Walsall Council to reduce its budgets but favoured a model that enabled Fallings Heath to be retained in a cost effective way.
- 3.8 As a result of this feedback from the consultation, the Council has examined option A in some detail, and identified a variety of ways in which the occupancy levels for respite care at Fallings Heath can be increased, thereby reducing the overall unit cost. This could be achieved by marketing the availability of the service more systematically to all eligible and appropriate adults with complex needs who have personal budgets, and carers; by making information about the service available to those young people and their carers with social care personal budgets under the new 14-25 years provisions of legislation; and by offering crisis respite support within the unit as well as planned respite care.
- 3.9 As the overall review of all Council provided services for people with learning disabilities, physical and sensory disabilities and autism continues there may then be further changes to the service model, each of which would require a further period of consultation. The aim is to extend the service review during 2015 and draw up further proposals with appropriate consultation for the Cabinet.
- 3.10 Consideration of option B whereby the service is outsourced have been scoped and analysed. The reduction in residential respite service in other Councils means there are few external providers for whom such an offer is realistic. Externalisation of the service outside Walsall Council would mean that TUPE could apply leading to disruption and change without any financial benefit. This option is therefore not recommended at present.
- 3.11 Consideration of option C and D to develop an ALMO, or CIC to take the service outside the Council has been given serious attention. Staff and managers in commissioning and the in-house service have been involved in examining other Councils that succeeded in delivering these changes. Whilst still a possibility in the medium term, the development time and business case would take at least 18 months, and this is therefore not an option for decision at this time. Meanwhile, all in-house services will move towards a unit cost basis for Personal Budgets from April 2015.
- 3.12 The Joint Commissioning Unit has examined alternatives to the services provided at Fallings Heath and found that there is a limited range of alternative suppliers within the market at present which are more cost effective and can deliver within Walsall. These include Shared Lives, which is being expanded and is taken up by some users and carers. However this is not an option for everyone. Residential respite within a short distance of Walsall is very limited in availability, and is either subsidised by charitable donation or is a mixture of long stay and respite care to absorb cost of voids. The market would require a time period to develop the alternative services which could be in the region of 12 to 18 months. Therefore the savings and the outcomes for users and carers are unlikely to be met by this option.

4. New legislative requirements in social care:

- 4.1. The Care Act 2014 places a new duty on Councils to asses carers needs in their own right, and subject to meeting eligibility criteria, meet those needs with services that ensure their wellbeing, and ability to work, and have a social and family life. The Fallings Heath service is therefore a key local service that would be needed to meet these new duties, especially if the local care market in the near future is inadequate to meet needs and choice. Whilst Shared Lives and other types of respite and support are being developed to meet this requirement, the feedback from consultation indicates the need to retain the Fallings Heath service.
- 4.2. The Care Act 2014 also places a new duty on Councils to asses all residents' social care needs and if asked, arrange/provide against those even where those users or carers have means to do so themselves. Although national research indicates that the increased demand from this will probably be gradual, it does mean that a small growth in demand of respite services can be anticipated and this would help ensure there was a greater take up of the service in Fallings Heath.
- 4.3. The Children and Families Act 2014 places new duties on Councils to integrate assessments of health, education and social care needs of those between 14 and 25 years of age with special educational and disability needs (SEND). Family/carers from this group were consulted in this review and indicated that there may be some demand for the Fallings Heath service that could be anticipated.
- 4.4. There are a wide range of other requirements in the new legislation for information, advice, preventative services, as well as those to meet eligible needs. These requirements include personal budgets, promoting the wellbeing of users and carers, and the personalised lifelong or long term care planning with those with conditions that are long term. These requirements therefore challenge the way this Council delivers and commissions services, including the in-house social care services, which is the subject of a wider review of all such services recommended in this report.

5. Risk management

- 5.1 The option appraisal indicates there is a substantial risk of not fully meeting the needs and choices of individuals and their carers via option E. There is also a financial risk of replacement costs being higher than the current cost of provision. The proposed Council's budget plans for 2015/16 and beyond is unlikely to meet the target required by option E.
- 5.2. There are risks in the length of time and capacity to deliver options B or (outsourcing) or Options C or D (Arms Length Management Organisation or social enterprise), in a way that would improve the take up and efficiency necessary for a cost effective service. Both options can be further considered, if a sustainable and viable business case can be developed within the wider review of in-house services recommended.

5.3. The financial risks of delivering efficiencies, increased take up and other improvements to Fallings Heath, are covered by the other savings outlined that contribute to the recommended option A (see 6 below).

6. Financial implications

- 6.1 A number of options for the future of respite provision have been consulted on, with Option A, continuing to provide respite at Fallings Heath but seeking to deliver this more efficiently, being identified as the most viable option to consider further. As the other options considered prior to consultation have now been identified as being undeliverable in the immediate timescale, no further financial models have been produced for these options.
- The total controllable budget for Fallings Heath for 2014/15 is £828k, with saving proposals of £260k for 2015/16 and a further £20k for 2016/17 included within the Councils Draft Revenue Budget. If approved this would leave a remaining controllable budget of £548k for the service by 2017/18. The service currently hosts 8 respite beds (therefore a total potential number of respite nights available of 2,920 per year), however for the financial year 2013/14 the actual level of occupancy has been identified at 57% (1,664 nights), with an associated unit cost of £497 per night.
- 6.3 This is significantly higher than the average cost of £250 per night that is delivered via external market providers (based on figures provided via commissioning). The Joint Commissioning Unit have indicated that there is currently insufficient capacity within the external respite market within Walsall to provide services that will meet all needs of users and carers currently receiving a service from Fallings Heath, nor the anticipated increase after April 2015.
- Increasing the occupancy to 80% from the current 57% would require Fallings Heath to deliver an additional 672 nights respite care, and this is deliverable within the services current operational budget. A saving could be achieved by a combination of reducing the current usage of externally commissioned respite care nights. Not paying the cost of externally commissioned respite care (672 nights x £250 per night = £168,000 per annum) would deliver a saving which combined with the income generated from charging for a proportion of additional respite nights, would contribute to the overall savings target for Fallings Heath. There is, however, an entitlement for those people who are currently using their personal budget to purchase a service from elsewhere if they choose, and it is therefore is risk that the full £168,000 may not be realised from this approach. The full inhouse social care service review would need to take account of a shortfall in that event in 2015/16.
- 6.5 If the increase in occupancy is achieved there would still be a shortfall against the savings targets set out above of £92k for 2015/16 and £20k for 2016/17. Other options would therefore need to be reviewed to deliver the remaining balance and allow Fallings Heath to continue to operate within the reduced budget available. This could include a review of staffing structures within the service with the aim of reducing overall staffing costs and bringing unit costs more closely in line with respite services provided in the external market. To

deliver a further £112k of savings would require the reduction of approximately 7 full time equivalent posts. The service would need to undertake further work to identify a revised structure and liaise with the Care Quality Commission to ensure that this would still deliver an acceptable level of care.

6.6 A further £100k saving proposal regarding a review of internal respite services remains undelivered for the 2014/15 financial year and will be included as such within the directorates forecast position. This saving will be included within the 2015 strategic review of in-house provider services with options recommended to deliver this along with further saving proposals put forward in future years.

7. Legal implications

The consultation with stakeholders and service users has considered the implications of each of the options and alternative models. TUPE would apply if the service was to be externalised to the private sector. There does need to be consideration of the implications of the Care Act 2014 as it is implemented from April 2015.

8. Property implications

None based on recommendations in this report. There may need to be consideration of changing the suspended 5 bedded facility so that it has more flexible use in the future as part of the broader review of in-house services.

9. Health and wellbeing implications

Families/carers and service users have strongly expressed the well-being benefits from the service being retained and the positive impact on carers through respite care of a facilitated break from caring.

10. Staffing implications

Efficiencies will lead to different ways of working within the range of the proposed 8 bed respite service delivery. Appropriate staff consultation would follow the cabinet's decision.

11. Equality implications

Equality impact assessments have been completed relating to the 5 options that formed the basis of the consultation.

12. Consultation

A detailed account of the process, and engagement, and feedback from the consultation is in **Appendix 1**.

Background papers

The Care Act 2014-11-14
The Children and Families Act 2014

Appendices

1 Appendix 1 consultation feedback

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Councillor Diane Coughlan Portfolio Holder for Social Care

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4 December 2014

Executive Director

Keith Skerman

4 December 2014

Day Opportunities and Employment - Provider Services

Report on Fallings Heath – Residential Short Breaks / Respite

Consultation Feedback

1.	Background			
1.1	The Executive Director of Adult Social Care and Inclusion was given Cabinet approval (July 2014) to review Fallings Heath House Residential Respite Service and to consult with service users and carers upon a range of options in order to facilitate the development of improved outcomes for those using the service.			
1.2	A minimum twelve week consultation process commenced on 29 th July 2014 with service users, carers, staff (briefings) and other stakeholders in relation to the options available.			
1.3	Initially carers were invited to six informal information sessions at Falling Heath on 29 th , 30 th July and 1 st August 2014 to discuss the pending consultation process and establish an effective way to gather their thoughts and comments.			
1.4	 Carers agreed to the following actions: A questionnaire to be circulated to all families and carers that would clarify the options available to them and the person they cared for. The questionnaire would also identify; gender, nature of disability, ethnicity, demand for respite services, use of alternative respite services, importance of residential respite services and quality, etc. A public consultation event comprising of Senior Social Care Managers and representatives from the Joint Commissioning Unit. An alternative provider market place event to reassure and enable Carers to make informed choices of the availability of other providers offering respite services. A public event with the Executive Director of Adult Social Care and Adult Social Care Portfolio Holder present to answers questions and to provide feedback on the review. 			
2.	Questionnaire Feedback - including additional data gathered as part of the consultation process			
2.1	52 questionnaires were circulated to carers and families. The total number of responses received by the closing date of 7th September 2014 was 29,			

	representing a 56% response rate.				
2.2	Taking account of the low respondent base (29), preference has been given to providing the number of respondents rather than quoting percentages as this can be misleading. Almost all respondents were willing to engage in further discussions and provided their contact details at the end of the questionnaire.				
2.3	Since the beginning of the consultation process it has been established that there are 43 adults currently using Fallings Heath for bed based short breaks.				
	 This encompasses the following classifications: 19 male service users 24 female service users 10 service users including, 6 male and 4 female from Asian background (equating a total of 21%) 10 male service users who have a dual diagnosis of both a learning disability and autism. 3 female service users who have a dual diagnosis of both a learning disability and autism. 2 male service users who have a diagnosis of multiple sclerosis and cerebral palsy. 7 female service users who have a diagnosis of multiple sclerosis and cerebral palsy, cerebral palsy spastic quadriplegia, spina bifida, acquired brain inquiry and chromosome abnormality. 12 female service users who have a diagnosis of learning disability. 9 male service users who have a diagnosis of learning disability. 				
2.4	 Reasons for utilising short breaks at Fallings Heath consist of the following: 14 service users access short breaks due to families taking holidays. 16 service users access short breaks due to carer breaks where carers remain at home. 3 service users access short breaks for both reasons. 				
2.5	 Level of Dependency – incorporating high, medium or low levels of personal care requirements are as follows: 19 service users are considered to have high needs, personal care, challenging behaviour. 15 service users considered to have medium needs, personal care plus prompts, some challenging behaviour. 9 service users considered to have low needs, personal care prompt only. 				
2.6	Over the year most demand for respite care at Fallings Heath equates to 14 nights and over. A breakdown is shown in the table below:				

- 3 respondents accessing the service for between 6 to 14 nights a year.

 11 respondents accessing the service for between 15 to 30 nights a year.

 10 respondents accessing the service for between 31 to 50 nights per year.

 3 respondents accessing the service for 50 plus nights per year.

 2 were unable to respond.
- **2.7** Question Options for providing residential respite care at Fallings Heath, select two options:

Option A Service continuation with efficiencies - **25** respondents.

Option B Third Party takeover - 2 respondents.

Option C Arms Length Management Company - 5 respondents.

Option D Community Social Enterprise - 3 respondents.

Option E Falling Heath Closes with switch to alternative provision - **2** respondents.

2.8 Importance of residential respite care services:

Respondents' thoughts on the relative importance of aspects of residential respite care for carers show that they find overall that all aspects in the list are as broadly of equal importance. Almost no respondents stated that the aspects listed were not important.

In terms of aspects that are considered to be very important were having access to quality care delivered by skilled staff and in a friendly, welcoming, safe and personal environment, that is flexible and affordable basically sums up what carers value as most important aspects of respite care.

2.9

Aspects of residential respite care	Very Important	Important	Total
Quality of care	27	2	29
Skilled staff that understand the service users needs	27	2	29
Safe and secure environment	26	3	29
Welcoming environment	24	5	29
Friendly, approachable staff	24	5	29
A service that is flexible to needs	23	6	29
Affordability	22	6	28
Respite available when required	22	7	29
Access to personal space	22	7	29
Opportunity for service users to mix	19	9	28
Day / overnight stay options	18	10	28
Can cancel at short notice without penalty	16	13	29
Close to home	16	11	27

2.10	When asked what else is important to them as carers, respondents tended to reiterate the importance of the person they care for being happy, being in a home from home environment where carers feel it is safe and where they have trust and confidence in the care that will be received.		
2.11	Alternatives to residential respite care - when asked about their views on alternatives to residential respite care the response was as follows: Have used alternative provision: 3 used sessional activities away from the home through the employment of Personal Assistants. 3 used replacement care in the home through the employment of Personal Assistants. 3 used holidays and short breaks. No respondents used private residential care.		
2.12	Respondents would consider using the following: 3 sessional activities away from the home through Personal Assistants. 3 replacement care in the home through Personal Assistants. 13 used holidays and short breaks. 3 respondents would consider using private residential care. 5 Shared Lives. However, some respondents would not favour or would not utilise any of these options.		
3	Public Consultation Event 18 th September 2014 held at St Paul's The Crossings		
3.1	The consultation event was designed to share the outcomes from the six informal information sessions, the findings from the questionnaire and provide information that carers had requested in relation to personal budgets (what are they, how might they work) and expand on the Joint Commissioning Units proposals of alternative respite options. The overall aim was to assist carers to explore alternatives.		
3.2	People present at the event were: Peter Davis, Head of Community Care, Andy Rust, Head of Joint Commissioning, Richard O Brien, Head of Access, Assessment and Care Management, Gary Mack, Head of Provider Services. Also present were Service Managers, Project Officers, work shop facilitators and independent advocates that represented a strong presence from the Adult Social		

	Care Directorate.			
3.3	Approximately forty carers attended the event with a mixture of individual carers, families, service users and carers involved in the transition process from Children's Services to Adult Care Services.			
3.4	Below are the summarised views of Carers:			
	 High levels of satisfaction with the Fallings Heath Service. Minor criticism of Fallings Heath Service. Suggestions as to how Fallings Heath could increase usage and increase occupancy, particularly the introduction of day services. Widespread view that the Provider Market is poor and inadequate. Belief that Fallings Heath has not been promoted by Social Workers hence "false" low occupancy. Demand for Respite care is being overlooked. Criticism of Social Workers: failure to regularly review care packages, lack of knowledge particularly around Learning Disabilities and infrequent contact and availability. Scepticism about Personal Budgets levels, process and desirability. Concern over governance and fairness of the council's savings program. Apprehension about any transition to alternatives providers Alternatives to Fallings Heath not clearly understood (Options B-E) Lack of awareness of Shared Lives. 			
3.5	There was also an underlying uncertainty whether their views would affect the Council's decision. There was a suggestion of a breakdown of partnership between carers and the directorate in particularly with Access, Assessment and Care Management.			
4	Services User Consultation on 30th September and 7 th October 2014			
4.1	Service users were able to attend independently facilitated consultation sessions with Mencap Group Advocacy Service. Five male and six female service users attended.			
4.2	An Easy Read Consultation Process was used as a basis for the consultation sessions; however, service users were also encouraged to talk in general about their experiences and views.			

4.3	Feedback is detailed in the table below:				
	11 customers have only the highest praise for the service provided at Fallings Heath.				
	11 customers do not wish to see the service close.				
	11 wish to continue to use Fallings Heath as their respite provider in its current form.				
7 expressed a wish to be engaged in more activities both inside, but particularly outside of Fallings Heath					
	7 quoted lack of accessible transport as the main reason they are not able to engage in community activities.				
4.4	Lessons learnt:				
	Feedback was not presented in a way that supported the overall analysis of carers and service user views, as Easy Read Documents were used to feedback to colleagues with little data linked to the questions posed.				
	It is probable that participants were not fully aware of all options available for consideration.				
5	Joint Commissioning Provider Market Event on 1st October 2014				
5.1	Fourteen respite / short breaks providers attended the event. Fallings Heath and Shared Lives were also represented.				
5.2	36 carers attended the event, with 15 Social Care staff also in attendance. The representation being mainly from Access Assessment and Care Management, Joint Commissioning and Provider services.				
5.3	A questionnaire was distributed to customers, carers, professionals and others, following a consultation event regarding short breaks services at Fallings Heath.				
	Feedback was received and collated from respondents described in the categories above, the numerical column denotes the number of respondents who answered the specific question asked.				
	There are a number of evaluation documents still outstanding which will need to be collated and included once they are received.				
5.4	From the questionnaires received 10 responses confirmed that the respite/short break services were meeting their needs, 4 responses stated that they were not meeting their needs and 2 responses gave no opinion.				

	Т			
5.5	ionnaires received the responses confirmed that the following short break services are used:			
	4	Dhysical Dischility		
	4	Physical Disability		
	9	Learning Disability		
	1	Sensory Disability		
	4	Mental Health		
	4	Autism		
	2	Dementia		
	2	Older People and Vulnerable Adults		
	3	Long-standing illness		
	2	Terminal illness		
1		Alcohol or drug dependency		
	<u> </u>	, needler or drug dependency		
5.6	Below are the summarised views of all respondents to the other questions asked, the numerical column denotes the number of respondents: Q. Overall, how satisfied or dissatisfied are you with the respite/short break service available?			
		We haven't received any services in the last 12 months		
	5	I am extremely satisfied		
	5	I am quite satisfied		
	1	I am neither satisfied nor dissatisfied		
	3	I am quite dissatisfied		
		I am very dissatisfied		
		I am extremely dissatisfied		
5.7	Q. Have you used any of the support services listed below in the last 12 months?			
		Support or service allowing you to take a break from caring at short notice or in an emergency		
		Support or service allowing you to take a break from caring for more than 24 hours		
		Support or service allowing you to take a break from caring for more between 1 and 24 hours (eg, a sitting service)		
		Personal Assistant		
		Equipment or adaptation to their home (such as a		
		wheelchair or handrails)		
		Lifeline Alarm		
5.8	Q. Do you feel	there is a need for the following types of services?		
	15	Information and advice		
	10	Support from carers groups or someone to talk to in		
	10	Support from surers groups of someone to talk to in		

	confidence			
	9 Training for carers			
	7 Support to keep you in employment			
5.9 Q. In the last 12 months, have you found it easy or difficult to find inform and advice about support, services or benefits?				
	I have not tried to find any information or advice in the last 12 months			
	2 Very easy to find			
	4 Fairly easy to find			
	4 Fairly difficult to find 3 Very difficult to find			
	[
5.10	Q. If you found it difficult, please tell us why and what can we do to make it easier for you to find information.			
	Comments include the following:			
	 I think if it was a dedicated website for information for all agencies and companies. "one site where you could have links to all" Website, leaflets, better trained Social Workers Information given freely without internet access I called adult social care about respite and they gave me a list of care homes which did not include the council's own respite home – Fallings Heath. To add to the confusion they did list a Fallings Heath but it was a private one. Social Workers don't know what it available. Apart from school it is hard to find out what service options are available for young people. Lack of Social Workers As a QSW I am able to provide information and advice to service users and carers but the provision for MH is not comprehensive. Personal budgets are determined but the provision is lacking. People need to be more aware of the fantastic services that are available in Walsall!!! People don't know half of the services exist!!! 			
5.11	Q. If you did manage to find the information or advice, how helpful was it? 1 Very helpful 9 Quite helpful Quite unhelpful Very unhelpful			
5.12	Q. If you found the information and advice you received unhelpful, please tell us why and what can we do to make it more helpful to you?			
	I found Option for life excellent			

Time gap in waiting for services. Carers at the Crossing are very good, they came to my home with information. Very limited information available 5.13 **Q.** In your experience, what is working well in Walsall? Comments include the following: Very Little Carers Centre and help given to that Fallings Heath respite care home • Care support from Sevacare. However, real lack of true communication and honesty from Social Workers needs to improve vastly. Access to resources information and advice support groups, websites. Fallings Heath respite care is excellent. Equipment loans service works Short breaks seem to be working well for me. My daughter uses short breaks regularly and she seems to enjoy the break. As a QSW in Walsall (mental health) the provision of services to provide respite is limited to one provider. Unsure Fallings Heath 5.14 Q. If you feel that we should be spending the money in a different way, please tell us what we could do differently. Comments include the following: Help people who do not want to use computers. Not known Stop wasting money on such things as the Art Gallery! More options to provide respite to service users with MH problems would be helpful. More respite placements are necessary since the closure of Broadway North Centre for respite Put an Option For Life in Walsall More short breaks, respite services Final Consultation Event on 14th October 2014. 6 6.1 The Executive Director of Adult Social Care Services, Keith Skerman and the Portfolio Holder for Adult Social Care Services, Councillor Diane Coughlan, were present at the event to answer questions. 6.2 30 carers attended this session which gave an opportunity for people to once again understand the background to the review of bed-based respite services, the options being considered and the timescale for the final decision.

6.3	It was reiterated at the event that no decision had yet been made and that this is now likely to take place at Cabinet in February or March 2015 rather than December 2014 as originally stated.					
6.4	Keith Skerman outlined some of the alternative respite arrangements available in the Borough, including Shared Lives and referenced the Provider's event that had been held in Beechdale.					
6.5	The event enabled people there to have the opportunity to ask questions or raise concerns.					
	The main issues highlighted were as follows:					
	 Access to Social Workers and consistency of same contact Importance of keeping familiar routine and retaining respite that works for the service users and their families Fears that closure has already been decided Belief among families that Fallings Heath has not been properly promoted and advertised Desire to retain Fallings Heath Perception that there is no alternative provision that will meet the needs of service users as well as Fallings Heath does Concern over the transition process for children moving into adult services The session was very interactive and enabled all participants to speak if they wished to do so. There was an opportunity at the end of the session for people to continue to talk to Councillor Coughlan and Keith Skerman. 					
7	Conclusion of the Consultation Process at Fallings Heath to date					
	Conclusion of the Consultation Process at Fallings Heath to date					
7.1	The consultation process took place over a twelve week period which commenced on 29 th July until 14 th October 2014.					
	The process involved meetings with service users, carers, staff (briefings) and other stake holders.					
	Six informal information sessions were arranged to discuss the pending consultation process.					
	Actions agreed were as follows:					
	 Questionnaire to be distributed to all families and carers clarifying the options available. 					

- A public consultation event alternative provider market place would also be arranged.
- The consultation process being culminated in a public event with the Executive Director of Adult Social Care and the Adult Social Care Portfolio Holder present to answers questions and to provide feedback on the review.

Report completed by

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28th October 2014



Equality Impact Assessment (EqIA) for Policies, Procedures and Services

Proposal name	Options Review Fallings Heath – Short Breaks Short Breaks Service for Adults with Learning Disabilities, Physical Disabilities and Sensory Impairments.		
Directorate	Social Care and Inclusion		
Service	Provider Services		
Responsible Officer	Michael Hicklin		
EqIA Author Karam Kaur			
Date proposal started	May 2014	Proposal commencement date (due or actual)	Dec 2014

1	What is the purpose of the proposal?	Yes / No	New / revision
	Policy	Yes	revision
	Procedure		
	Internal service	Yes	
	External Service	Yes	Revision
	Other - give details		

Option A. Current Managers and Staff of the Fallings Heath service identify new ways of reducing costs to end the need for subsidy;

Option B. A Third Party provider takes over Fallings Heath facility and identifies ways to manage it as a independent business;

Option C. Fallings Heath managers and staff set themselves up as a **ALMC (Arm's Length Management company)** with limited council control and flexibility to re-design services as a self sufficient business:

Option D. Fallings Heath managers and staff convert the Falling Heath service into a **Community Social Enterprise** outside of council control as a self sufficient not for profit organisation (option C could lead to option D);

Option E. Fallings Heath Closes but each service user and carer is supported to use their direct payments/personal budgets to arrange their own replacement Short Breaks care package from a range of alternate care providers.

2 What are the intended outcomes, reasons for change? (The business case)

Due to the significant under use of Fallings Heath Short Breaks Service, it has become apparent that we need to review all our options going forward as the current service model is not sustainable. Providing services that are cost effective to the organisation and value for money for the service users are some of the dilemma's that we are faced with. An example of this is the fact that service users are paying £100 per night under the current charging system, but the cost to the Authority is £438. This clearly illustrates that the service is heavily subsidised therefore reducing capacity to invest in further improvements. Another example of some of the current pressures which have contributed to this review is that most referrals come during the summer months which can create pressure on the service and subsequently reduce flexibility, which can lead to disappointment for service user's and carers. At other times of the year nearly 40% of beds can remain unoccupied. The "notional" nature of personal budget income streams in effect prevents the service increasing occupancy by reducing real unit costs.

With the combination of financial pressures and reduced occupancy it has become necessary to explore the options of sourcing this service out to other local providers in the Independent Sector, or operating different models of service delivery as identified in options C and D above. The aim is to enable service user's to have more choice and control about future service provision without the entire burden being placed on statutory services.

The options for future service provision are identified above, and the comprehensive consultation agenda which includes formal and in-formal meetings with service users will influence how future Short Breaks services will be provided.

Managers and staff at Fallings Heath Short Breaks service who have been instrumental in maintaining the very high quality standards that are reflected in recent audit reports, will also be encouraged to express their ideas and interests in the options identified for future Short Breaks provision. This is because of their expertise and in-depth knowledge of the service users and how their needs can be met. Options C and D will enable managers and staff to have more autonomy regarding service delivery and making improvements, which would benefit service users.

It is expected that as people begin to access Short Breaks via their personal budgets, a proportion will choose alternative provision (support for family holidays, other residential providers, or the use of a Personal Assistant within their own home). Local Independent service providers will be encouraged to express their views on the future of Short Breaks services and Fallings Heath Short Breaks facility, so that there is as much information as possible to all interested parties who may be affected.

It is also anticipated that creating more options for service user's will stimulate the independent sector due to the increase in demand for Short Breaks, alongside increased usage of Shared Lives Scheme and alternative provision through personal budgets. If future Short Breaks provision is provided by a range of providers it will mean carers will have more choice, and opportunity.

A selection of options would be in the best interests of the service users so that they can make informed choices, and it will also reduce dependency on statutory services.

3	Who is the proposal potential likely to affect?		
	People in Walsall	Yes / No	Detail
	All	No	
	Specific group/s	Yes	Adults 18yrs plus with Profound Multiple Learning Disabilities, Physical Disabilities and Sensory Impairments.
	Council employees	Yes	Employees may be at risk of redundancy if Fallings Heath is de-commissioned
			Employees, changes to terms and conditions if externalised
			Employees, changes to terms and conditions if TUPE was to be implemented
	Other	Yes	Carers of User Group; Potential changes to provider of Short Breaks / Short Breaks Care.
			Transport required to access alternative service provision outside of the Walsall boundary.
			Impact managing challenging behaviours due to changes in normal routines.
			Carer's may feel under more pressure to provide support, where they cannot meet the costs of buying into alternative services.
			Financial pressures of paying service providers who may charge more
			Impact on family unit if carers / service users are unable to purchase sufficient Short Breaks.

4 Summarise your evidence, engagement and consultation.

The proposal to review Fallings Heath Short Breaks service would enable Provider Services to make essential target savings that they have been asked to attain. This is part of a wider savings agenda and where money saved from outsourcing can be reinvested in other area's which remain key functions for the Authority, so that the quality and efficiency of these services can be improved. The current economic climate has meant that the Authority needs to define what it has a statutory obligation to provide and what is optional.

The service user's attending Fallings Heath Short Breaks service have protected characteristics as defined in the Equality Act, and therefore a comprehensive consultation process will ensure that they are signposted to correct that can meet their needs

The composition of Service user's attending Fallings Heath Short Breaks Service consist of:

• 50 Service users currently on the books

- All service users have one or more disabilities
- 12 Service user's from Ethnic backgrounds
- 28 Female and 24 Male
- Ages are: 18 25 = 5 / 26 40 = 15 / 41 55 = 23 / 55 + = 7;
- 34 Service users have got Individual Budgets although some of these may need to be reviewed.

Nearly all service user's live at home and therefore the impact on the dynamics of the family would need to be assessed during any period of transition as part of the consultation process.

Most of the carer's are immediate family members, and composition is made up of:

- Lone carer's
- Elderly Carer's
- Working Carer's
- Carers with childcare responsibilities

The service user's present a range of diverse needs that need to be met to ensure their experience in a Short Breaks Service is enjoyable. Some of the conditions service user's may present are:

- Downs
- Autism
- Physical Disabilities
- Learning Difficulties
- Behaviours that Challenge
- Dementia

The above information makes us aware of the diversity of the service user's, and therefore the impact of change is likely to have a substantial effect on service user's and carer's, if not managed sensitively, with the necessary support mechanisms are in place.

There will be phased timetable of events to ensure that all target audiences have been reached, and a variety of communication aids and expert facilitators will be utilised to support the consultation with service user's and carers to ensure their views are heard in relation to the future service provision.

Care and Assessment teams will be available to provide additional support and advice on any questions or concerns regarding how future service can be provided and paid for, and the impact this has on individuals affected. This will include information on all the options identified.

As well as formal planned consultation events, there will also be 1-1 meetings offered to ensure that everyone has a voice and is listened to. These will take place at times and locations suited to needs of service user's and their carer's.

Every effort will be taken to ensure service users are fully supported and experts will be called in as required to facilitate this process to ensure it is fair and equitable such as Advocacy support services.

As well as face to face meetings, information will be available electronically, and there will be printed versions to suit the needs of individuals (large print, Braille, Makaton)

The Consultation Process will be lead by Senior Officers from Walsall Council and supported by Managers and staff at Fallings Heath Short Breaks Service.

It is anticipated that some carer's may require a lot of support as any impact on the service user's may cause stress and disruption on the rest of the family. Carer's may also find it difficult to support service user's during the period of transition from one service to another, as well as the added risk that some carer's may want to give up their caring responsibilities, which would mean the Council would have to fund the full cost of all Care. Support from the Carer's Councils will also be available to support and to make sure Carer's are aware of their right to Assessments where there are unmet needs.

Carer's may also be concerned about relationships and friendships that service users may have established during their stay at Fallings Heath Short Break Service as they may believe that it would be difficult to replicate elsewhere. Therefore it will be important to carer's to understand how relationships and friendships will be encouraged and supported if the future if Fallings Health Short Break service is not a viable option.

The full impact will be determined as the consultation process commences, and we begin to gather all the information about what service users want, and what managers and staff who are interested in options C and D can realistically deliver.

The positive impact will be relating to work undertaken to find the best alternatives and personal outcomes for service users affected. This process will enable service users to consider options not previously discussed which may have better longer term benefits.

Individual assessments on service users have been carried out by the Care and Assessment teams to determine each customer's allocation of Short Breaks service; however this will be reviewed as part of the consultation process to ensure they continue to reflect the needs and circumstances of the service users.

A minimum twelve week consultation process commenced on 29th July 2014 with service users, carers, staff (briefings) and other stakeholders in relation to the options available.

Initially carers were invited to six informal information sessions at Falling Heath on 29th, 30th July and 1st August 2014 to discuss the pending consultation process and establish an effective way to gather their thoughts and comments.

Carers agreed to the following actions:

A questionnaire to be circulated to all families and carers that would clarify the options available to them and the person they cared for. The questionnaire would also indentify; gender, nature of disability, ethnicity, demand for respite services, use of alternative respite services, importance of residential respite services and quality, etc.

A public consultation event comprising of Senior Social Care Managers and representatives from the Joint Commissioning Unit.

An alternative provider market place event to reassure and enable Carers to make informed choices of the availability of other providers offering respite services.

A public event with the Executive Director of Adult Social Care and Adult Social Care Portfolio Holder present to answers questions and to provide feedback on the review.

Below are the summarised views of Carers:

- High levels of satisfaction with the Fallings Heath Service.
- Minor criticism of Fallings Heath Service.
- Suggestions as to how Fallings Heath could increase usage and increase occupancy, particularly the introduction of day services.
- Widespread view that the Provider Market is poor and inadequate.
- Belief that Fallings Heath has not been promoted by Social Workers hence "false" low occupancy.
- Demand for Respite care is being overlooked.
- Criticism of Social Workers: failure to regularly review care packages, lack of knowledge particularly around Learning Disabilities and infrequent contact and availability.
- Scepticism about Personal Budgets levels, process and desirability.
- Concern over governance and fairness of the council's savings program.
- Apprehension about any transition to alternatives providers
- Alternatives to Fallings Heath not clearly understood (Options B-E)
- Lack of awareness of Shared Lives.

Services User Consultation on 30th September and 7th October 2014;

Service users were able to attend independently facilitated consultation sessions with Mencap Group Advocacy Service. Five male and six female service users attended.

An Easy Read Consultation Process was used as a basis for the consultation sessions; however, service users were also encouraged to talk in general about their experiences and views.

Feedback below:

- 11 customers have only the highest praise for the service provided at Fallings Heath.
- 11 customers do not wish to see the service close.
- 11 wish to continue to use Fallings Heath as their respite provider in its current form.
- 7 expressed a wish to be engaged in more activities both inside, but particularly outside of Fallings Heath
- 7 quoted lack of accessible transport as the main reason they are not able to engage in community activities.

Detailed consultation feedback available (appendix 1)

5	How may the proposal affect each protected characteristic or group? The affect may be positive, negative or neutral.			
	Characteristi c	Affect	Reason	Action needed Y or N
	Age	No	No foreseen impact	N
	Disability	Negative	Difficulty in getting access to specialist services and staff who offer Short Breaks accommodation for service user's with complex needs. Potential break in	Y

	Gender reassignment	No	continuity of service (new location, unfamiliar staff, problems with transitions, which for some clients (autism spectral or presenting difficult challenging behaviour) may be disproportionately distressing and disruptive.		
	Marriage and civil partnership Pregnancy and maternity	No No			
	Race Religion or belief	Negative Negative	Difficulty in getting services that are culturally sensitive to the needs of all its users. Potential break in continuity of service (new location, unfamiliar staff, problems with transitions, which for some clients (autism spectral or presenting difficult challenging behaviour) may be disproportionately distressing and disruptive. Difficulty in getting services that are able	Y	
	Sex	Negative	to cater for the needs of all its users May be issues of intimate care for users that will need to be gender sensitive. Alternate providers may not be able to consistently deliver this. Potential break in continuity of service (new location, unfamiliar staff, problems with transitions, which for some clients (autism spectral or presenting difficult challenging behaviour) may be disproportionately distressing and disruptive.	Y	
	Sexual orientation	No	No foreseen impact	N	
	Other (give detail) Further information		he above details are specific to service user's who use eath Short Breaks service 2014-2015		
6			ner proposals to have a cumulative ups? If yes, give details below.	No	
7	Which justifiable actions suggest you take? (B		e evidence; engagement and consultation ne applies)		
	A No major chang	ge required			

		Adjustments needed to remove barriers or to better promote equality.
	В	Option A. Current Managers and staff of the Fallings Heath service identify new ways of reducing costs to end the need for subsidy;
	С	Continue despite possible adverse impact. Option B. A Third Party provider takes over Fallings Heath facility and identifies ways to manage it as a independent business;
		Option C. Fallings Heath managers and staff set themselves up as a ALMC (Arm's Length Management company) with limited council control and flexibility to re-design services as a self sufficient business;
		Option D. Fallings Heath managers and staff convert the Falling Heath service into a Community Social Enterprise (CSE) outside of council control as a self sufficient not for profit organisation (option C could lead to option D);
		Option E. Fallings Heath Closes but each service user and carer is supported to use their direct payments/personal budgets to arrange their own replacement Short Breaks care package from a range of alternate care providers.
	D	Stop and rethink your proposal

Now complete the action and monitoring plan on the next page

Action and	Action and monitoring plan			
Action Date	Action	Responsibility	Outcome Date	Outcome
All Dec 14	Option A. Identify new ways of reducing costs whilst maintaining an accessible service. Option B. Procure new provider who ensures suitable service Develop options to ensure continuity of service, cultural, disability related, gender, transition etc. Communication of specialist services and staff who offer Short Breaks accommodation for service user's with complex needs			
	Option C. Establish ALMC that continues suitable service Develop options to ensure continuity of service, cultural, disability related, gender, transition etc.			

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Communication of specialist		
services and staff who offer		
Short Breaks accommodation		
for service user's with complex		
needs		
Out on D		
Option D.		
Establish CSE that continues		
suitable service		
Develop options to ensure		
continuity of service, cultural, disability related, gender,		
transition etc.		
transition etc.		
Option E.		
Develop options to ensure		
continuity of service, cultural,		
disability related, gender,		
transition etc.		
Communication of specialist		
services and staff who offer		
Short Breaks accommodation		
for service user's with complex		
needs		

Update to E	Update to EqIA		
Date	Detail		