

**MINUTES OF A MEETING OF THE SCRUTINY COMMISSION FOR HEALTH ISSUES
HELD AT THE COUNCIL CHAMBER, TOWN HALL
ON 1 NOVEMBER 2012**

Present: Councillors B Rush (Chairman), J Maqbool, J Stokes, D McKean, D Harrington, N Shabbir and A Sylvester

Also present David Whiles, LINks Representative
Alex Hall, Youth Council Representative
Matthew Purcell, Youth Council Representative
Councillor Fitzgerald, Cabinet Member for Adult Social Care
Councillor J Davidson, Representing the Liberal Democrats Group Leader

Officers Present: Terry Rich, Director of Adult Social Care
Tim Bishop, Assistant Director Strategic Commissioning
Paul Stevenson, Interim Head of Adult Social Care Finance
Paulina Ford, Senior Governance Officer
Marie Southgate, Lawyer

1. Apologies

Apologies for absence were received from Councillor Lamb and Councillor Sharp. Councillor Maqbool was in attendance as substitute for Councillor Lamb and Councillor Harrington was in attendance as substitute for Councillor Sharp.

2. Declarations of Interest and Whipping Declarations

Councillor Maqbool declared that one of the Care Homes was in her ward.

3. Proposed Closure of Greenwood House and Welland House

The Chairman introduced the item and advised that five people had registered to speak at the meeting. The Chairman addressed the audience and read out the procedure for how the Commission would hear from speakers in the audience and the order in which the item would be dealt with. The Chair also advised that since receiving the papers the Committee had requested a further financial breakdown and this would be explained by the Director of Adult Social Care during the meeting.

The Cabinet Member for Adult Social Care was then invited to introduce the report which asked the Commission to consider, challenge and comment on the Cabinet report which had recommended to Cabinet the proposed closure of two care homes: Greenwood House and Welland House. The Cabinet Member for Adult Social Care explained the reasoning behind the recommendation to close the two homes that had been put forward to Cabinet.

The Assistant Director Strategic Commissioning informed the Commission that the Older Peoples Accommodation Strategy set out the need for accommodation for the medium term. It built on the previous strategy, reviewed local data and demographics and projections of need. The aim was to enable as many old people in Peterborough to maintain their independence and be able to live in accommodation which was of high quality. The Assistant Director Strategic Commissioning went through the strategy highlighting the key points and spoke about the reasoning behind the proposal to close Greenwood House and

Welland House. The closure of the homes would reduce financial implications and allow investment in a new dementia facility. Members were informed of the wide range of support that would be given to residents, families of residents and staff throughout the consultation process and if the homes were to close. Support would be given to residents on an individual basis to support their needs. Members were assured that alternative day care and respite care would continue to be provided to meet the individual needs of the service users.

The Director of Adult Social Care provided further financial information which consisted of the following:

- Breakdown of costs for the closure of both homes and when the break-even point would be.
- Breakdown of redundancy costs
- Costs of moving people to new accommodation (permanent, respite or day care)
- Costings of the proposed new Dementia Resource Centre
- Residential Care Home Budgets

The Chair invited members of the public to address the Commission.

Donna Bennett, Peri Night Care Assistant at Welland House and Greenwood House and a member of UNITE made a statement which included the following:

- The services that the two care homes provided were specialist services that were not met in the private sector.
- It had been stated that there was up to 60 places a week available in the private sector but they did not offer the type of places required by the service users of the two homes.
- Peterborough older people population projections showed that there would be an increase from 1686 people to 1882 people by the year 2015 in Peterborough suffering from dementia. This would increase to 2142 people by the year 2020.
- The money in the Adult Social Care budget should be used to build a state of the art building that would facilitate all the services that the current homes offered.
- Welland House provided a home to clients with dementia and should remain open until a new facility was built.

Richard Reeves, wife attended Welland House made a statement which included the following:

- Wife who was 65 had alzheimer's and dementia for the past six years and attended Welland House for respite care and to have a bath. She was safe, secure and well looked after there.
- The carers at Welland House were one of the Councils biggest assets.
- Better accommodation was needed and therefore recommend a newly built home and also a specialist dementia unit.
- Other care homes provided universal services and did not give the same type of specialist care provided at Welland House.

Sylvia Robins, mother was a resident at Welland House made a statement which included the following:

- Mother had been a resident at Welland House for 3 1/2 years and 4 years at the day centre before that.
- Worried about moving her mother as she felt Welland House was her home and was used to her surroundings and carers. It was known that a lot of elderly people died when moved from long term accommodation.

Marie Scales, mother aged 98 was a resident at Welland House made a statement which included the following:

- Mother resident at Welland house for just over 4 ½ years where she received the best possible care in Peterborough. All of her needs had been met in a most professional manner and she considered her carers to be her family.
- One of the reasons given for the closure of the homes was that they did not meet the Care Quality Commission Standards. Having looked at other homes in the private sector it appeared that not every home in the private sector had private facilities.
- Providing respite care at home was not the answer.
- What had happened to the £6m that was previously set aside to build a new care home?
- Peterborough had a constant demand for dementia services and if a new build was to be considered then part of it should be dedicated to dementia services.
- There were no homes in the private sector offering specialist dementia care.

John Toomey, Unison Regional Officer made a statement which included the following:

- Felt that the report was full of hollow promises.
- The new dementia resource centre would be of little use at 2.00am in the morning when a person with dementia was causing problems for their family at home.
- It was wrong for Peterborough City Council to spend £2m making caring staff redundant.
- The homes were the last of the public resources in terms of care and the Council wants to get rid of them.
- There was a higher turnover of staff in the private sector care homes because of low pay and because they can not do the job that they want to do because they were constantly being squeezed.
- Do not take the decision to close the homes and use the £2m redundancy money to build a state of the art home.

The Chair thanked the speakers for attending the meeting and for their comments and statements.

Observations and questions were raised and discussed including:

- Why were new residents continuing to be taken into the homes when the proposal was to close them? *Members were informed that no new permanent residents had been accepted into the homes however short term respite and day care continued to be provided.*
- What happened to the petition presented to council requesting a referendum and what was the response to it. *Members were informed that the report had acknowledged all petitions that had been received. This had been responded to in that it was considered that having a referendum was not the appropriate route to go and the legal consultation should be directly with those affected by the proposals.*
- One of the reasons given for the closure of the homes was that they had not met the Care Quality Commission Standards which inferred that the council was bound by legislation to close them. Was this correct? *Members were advised that the original legislation did apply to all homes but that was subsequently changed and now only apply to new homes.*
- Was the financial modelling based on the full capacity of Welland House including the King Fisher Wing? *Members were advised that the figures were based on the homes being fully occupied.*
- Members pointed out that the costs included in the report for refurbishment of the two homes did not add up and appeared to be incorrect. *Members were informed that there had been an error in the way the figures had been presented and that it would be corrected before the report was presented to Cabinet. It should have read £4,300,000 not £931,800.*

- The report stated under the Trade Union Feedback section “that residential staff previously based at the Peverils and the Croft had received a written commitment that new homes would be built to replace these facilities, once they closed.” It also stated that the letter had been provided by UNITE. This letter had not been provided in the report. *Members were informed that a copy of the letter was within the separate pack which had been made available for all Members to see. The letter however did not prevent an employer from future consultation about employment.*
- Members commented that they had seen a copy of a Residential Rag which had talked about the future of Residential Homes which had been published in January 2011. This publication had mentioned that the Council’s capital programme had set aside funding to rebuild the homes but this had not been a letter. Members wanted to know if this publication was what was being referred to as the ‘letter’.
- Councillor Fitzgerald responded that he had seen the letter which had been written some time ago and circumstances had since changed. The letter had not expressly stated the council’s position. At the time of the letter being written the homes were the responsibility of the NHS. There were currently no care homes that specialised in dementia and the £6.5m could be used to build a specialist dementia centre.
- Members wanted to know if the council were legally committed to follow through on a commitment made by another organisation which in this case was the NHS. *The Legal Adviser stated that legal advice could not be given on the matter unless she was in possession of the letter.*
- The Director of Adult Social Care advised that no legal undertakings had been given to build new care homes when the services were transferred back to the Council.
- Members sought clarification on how many of the private care homes had private facilities. *Members were advised that approximately 80% of them had private facilities.*
- Members sought clarification as to what respite at home was. *Members were advised that it provided an option for a carer to go into the home of the older person while the family carer went away. Evidence had shown that for some people it had proved a better option than the older person having to go into a home for respite care as this often caused confusion.*
- Members sought clarification on the proposed new dementia resource centre verses the current care package. *Members were informed that a full specification had not been produced yet but it was envisaged that it would provide a comprehensive day care facility which would replace the day care facility that Welland House currently provided. This would be focused around people with dementia. It would also provide assisted bathing and a broader range of services including support for carers.*
- If Greenwood House closed first what would happen to the people currently receiving day care provision there. *Members were informed that there was enough capacity at Welland House and at other providers of day care within the city.*
- Members sought assurance that there would be no more than two moves for the residents requiring day care once Greenwood House was closed. Members also sought assurance that the residents moving would be supported by the current staff. *Members were informed that the day care staff would be moving with the day care users as they were not subject to the same consultation around their jobs as the residential care staff. There would be individual assessments of those current day care centre users to look at the best options for them. For some people that might mean a series of moves.*
- Will you have commissioned enough day care provision in the other homes by the time Welland and Greenwood House close? *Members were advised that there was provision in the existing capacity at other homes to accommodate people receiving day care at Greenwood House when it closed. By the time Welland House closed sufficient interim spaces will have been commissioned but the new dementia resource centre would not be up and running by then.*
- The Cabinet Member for Adult Social Care clarified that when the new dementia resource centre was commissioned it did not mean that all other services disappeared. The new dementia resource centre was an additional investment in day care and respite care.

Those people currently attending Greenwood House and Welland House may not go to the new centre because they may not want to move again.

- How many residents and day care users were there in Greenwood House and Welland House? *Members were advised that there were 2 remaining permanent residents at Greenwood House and 27 remaining permanent residents at Welland House. There were 12 beds used for interim care at Greenwood House and across the two there was the equivalent of 9 beds in terms of the weeks of respite care. There were 18 day care users at Greenwood House and 24 day care users at Welland House.*
- A member of the Youth Council wanted to know why the £6m was not going to be used to build a new care home and was concerned that with regard to the new dementia resource centre that a Private Finance Initiative (PFI) was going to be used. *Members were informed that no PFI would be used. Places for the permanent residents would be purchased in the same way as the other 90% of the people that were currently being supported. A very small proportion of elderly people in Peterborough were in the council run care homes. The £6M that the council indicated could be made available in its capital programme for investment in care homes was not free money. It would either have to be borrowed or if it was available in the bank it would have to forgo the interest it would have earned on it. £6M would cost the council £400,000 per year to use.*
- Members wanted to know if there was any guarantee in place that if the service was handed over to the private sector today that the service would remain at the same level in the future. *Members were informed that the majority of Adult Social Care was already being delivered by the independent sector. The role of the Local Authority was to commission the care and to manage the market. The task was to ensure that the providers of the care adhered to the standards. This would be done in a variety of ways; the Care Quality Commission who was the regulator, the councils contracting team who regularly reviewed compliance of contracts. The Care Managers also undertook regular reviews. It was not a case of handing over a service to the independent sector but a continuation of purchasing care from the independent sector and holding them to account for the way in which they delivered that service on behalf of the council.*
- Could the council assure Members that the independent sector would provide good care? There had been many instances quoted of abuse and bad care in the independent sector. *The Director for Adult Social Care acknowledged that there had been instances in the media where providers had failed in the delivery of care. There was no guarantee that this would not happen again in either the public or private sector in the future. It was therefore important to have systems in place to monitor, regulate and oversee the care providers.*
- Regarding the rates charged in the independent care homes. What would happen if they all got together and decided to raise their rates? What would the financial impact be on the Local Authority? *Members were advised that there were laws against raising the rates. The majority purchaser of care in Peterborough was the Local Authority and therefore had a significant influence over admission rates and their business. The Local Authority negotiated with the care home sector the rates that would be paid and the circumstances in which extra would be paid if needed. The purchasing power of the Local Authority was the biggest guard against rates rising. The ceiling rate was set on an annual basis.*
- Councillor Davidson felt that the report needed more clarity and transparency.
- Current census data showed an increase in older people population aged between 74-84 of 300 more than the original mid-year 2011 data and 300 more for aged 85+ population totalling an additional 600 older people. Had the report been remodelling to include this new data? *Members were advised that the model was continually being remodelling to include the new data and projections had shown a continued increase in the older people's population.*
- Was Welland House a specialist provider for dementia sufferers? *Members were advised that it was registered to take people suffering from dementia but not a specialist provider. Staff at Welland House had received training to assist them to deal with dementia.*

- How many care homes in the independent sector were registered to take people suffering with dementia? *Members were informed that there were approximately 8 or 9 homes that were specifically registered to take people with dementia in the city.*
- What support are you providing to the people who are being made redundant? *Members were advised that the Unions had been consulted as to how staff could be best supported through the process. All staff affected had attended a 1:1 meeting where a series of options had been discussed on an individual basis. Opportunities of redeployment within the council had been explored where possible. If the homes were to be closed a package of support would be put together including help with CV writing and interview techniques.*
- What was the Shared Lives Scheme? *Members were informed that the Shared Lives Scheme was a service provided by individuals and families in their own home who wanted to offer a vulnerable person a short break, day care or long term care.*
- If the proposals to close the homes went forward when would Greenwood House close? *Members were advised that if the proposal to close the homes was approved and had been through the democratic process then Greenwood House would probably close before Christmas.*
- What contingency plans do you have in place should those staff at risk of redundancy decide to leave before the homes close. *Members were advised that all the staff at risk of redundancy would need to stay on until their redundancy date which would have been agreed with individuals to receive their redundancy payment. If they resigned and left before they were made redundant they would not receive their redundancy payment. It was therefore unlikely that they would leave before their date of redundancy.*
- How long would staff be retained to support residents in their move to new accommodation? *Members were advised that staff could not be retained and placed in another care home after the council homes were closed. Key workers would support and assist people in their moves prior to the move taking place.*
- A member of the Youth Council noted that it would take £5.4M to build a new care home and that net savings would be £1.5M. Would this therefore equate to a short to medium term deficit of £4M. *The Director of Adult Social Care advised that the recommendation was not to build a new care home. There was no justification to spend the £5.4M to build a new care home because there were sufficient places in existing care homes for the residents. To build and staff a new 86 bedded home and to pay the capital financing costs would end up with an average cost of £900 per week per bed which was twice as much as purchasing the same care in the independent sector.*
- Members sought clarification that the ICT migration from the NHS platform over to the PCC ICT system had been completed and that the difficulties that had been in place had been resolved and had not impacted on the information in the report. *Members were assured that the ICT issues had not impacted on the recommendations made within the report and that all ICT issues would be resolved within the following week.*
- Members commented that the consultation pack which had included all responses to the consultation had not been made available for Members to see as had been initially indicated that it would be. *Members were advised that the dossier containing all the consultation responses could not be left in public areas as it contained personal information. Members could request to see the information through Tim Bishop. Members were unhappy that they had not been advised of this prior to the meeting.*

The Chair asked the Committee to take a vote with regard to the recommendations put forward in the report. A vote was taken and recorded as follows with regard to the following recommendations:

Recommendation 1

That Cabinet approves the closure of Greenwood House and Welland House care homes and that all current permanent residents are provided with suitable and appropriate offers of alternative accommodation that meets their assessed needs and choice at no additional cost to the resident;

The Committee voted in favour of recommendation 1 (4 in favour, 3 against)

Recommendation 2

That Cabinet affirms that there should be no loss of access to day care, respite or interim care for current service users as a result of these closures providing the Commissioning of respite care and day care is in place before the closure of the homes.

The Committee voted unanimously in favour of recommendation 2.

Recommendation 3

That Cabinet endorses the commissioning plans to secure: a) alternative interim care beds in the independent sector; b) replacement respite care facilities; and c) interim and long term day facilities including a dementia resource centre. The respite care and day care should not be on an interim basis and permanent contracts should be in place before the closure of the homes to avoid moving the clients more than once.

The Committee voted unanimously in favour of recommendation 3.

Recommendation 4

That the Cabinet Member for Adult Social Care reports back on: progress with a) progress with closure; and b) progress with commissioning plans for replacement services in March 2013.

The Committee voted unanimously in favour of recommendation 4.

RECOMMENDATIONS

The Commission recommends the following to Cabinet:

1. That Cabinet approves the closure of Greenwood House and Welland House care homes and that all current permanent residents are provided with suitable and appropriate offers of alternative accommodation that meets their assessed needs and choice at no additional cost to the resident;
2. That Cabinet affirms that there should be no loss of access to day care, respite or interim care for current service users as a result of these closures providing the Commissioning of respite care and day care is in place before the closure of the homes.
3. That Cabinet endorses the commissioning plans to secure: a) alternative interim care beds in the independent sector; b) replacement respite care facilities; and c) interim and long term day facilities including a dementia resource centre. The respite care and day care should not be on an interim basis and permanent contracts should be in place before the closure of the homes to avoid moving the clients more than once.
4. That the Cabinet Member for Adult Social Care reports back on: progress with a) progress with closure; and b) progress with commissioning plans for replacement services in March 2013.

The Commission further recommend the following:

5. That if the decision is taken to close Greenwood House and Welland House and permanent residents are moved to alternative accommodation in the private sector that an audit of the new accommodation takes place on a quarterly basis during the first year

and then on an annual basis. The audit reports to be presented to the Scrutiny Commission for Health Issues with the quarterly Adult Social Care performance report.

6. That if the decision is taken to close Greenwood House and Welland House that key staff are retained for a suitable period of time after the closure to ensure the safe resettlement of residents into their new homes.
7. Given the lessons learnt and the assessments that have now taken place it is recommended that the good practice established during this consultation be continued going forward as established practice. That a review is undertaken of all older people who are currently in receipt of respite care and day care under Adult Social Care.

4. Date of Next Meeting

Tuesday 13 November 2012

The meeting began at 7.00pm and finished at 9.45pm

CHAIRMAN