

EQUALITY IMPACT ASSESSMENT – MODERNISATION OF RESIDENTIAL AND DAY CARE SERVICES

1. INTRODUCTION

The Equality Act 2010 places a General Duty on public bodies, which includes a statutory requirement to undertake Equality Impact Assessments (EIAs). Under the Public Sector Equality Duty (PSED), in carrying out their public functions public bodies are required to give due regard (i.e. give appropriate weight) to the need to:

- Eliminate unlawful discrimination harassment and victimisation;
- Advance equality of opportunity between people who share a relevant protected characteristic and those who do not;
- Foster good relations between people who share a relevant protected characteristic and those who do not.

In proposing changes to community services, Local Authorities should have particular regard to Principle 18 of the United Nations Principles for Older Persons, (part of the LA duties under the Social Services and Well-being (Wales) Act 2014) which states that older people should be treated fairly regardless of age, gender, racial or ethnic background, disability or other status, and be valued independently of their economic contribution to society.

This full EIA addresses the requirement under the Equality Act 2010 to publish an assessment of impact in order to be transparent and accountable i.e. the Council's consideration of the effects that their decisions, policies or services have on people on the basis of the defined 'protected characteristics'. Whilst deprivation does not constitute a 'protected characteristic' it is relevant because people from protected groups are more likely to experience it and because there are such high levels of deprivation in our local communities, which are among the most deprived in Wales.

The need for the collection of evidence to support decisions and for engagement mean that the most effective and efficient impact assessment is conducted as an integral part of policy development and service re-design, with the assessment being commenced at the outset. These will help to eliminate discrimination, tackle inequality, develop a better understanding of the community, and target resources effectively. The Duty to undertake EIAs is in the context of these Council proposals, there in particular to support older people who may face 'double' or 'multiple' discrimination on the grounds of age and for example disability or sexual orientation or ethnicity.

2. THE CONTEXT - RESIDENTIAL AND DAY CARE MODERNISATION

The expectations of legislation, regulators, society and most importantly service users themselves, as to what is demanded from residential care and day care has changed over the last decade and will shift significantly further in the next few years to come. Accommodation has to meet higher standards and offer dignity and privacy including en-suite facilities that we all expect in our lives now. Also, the experience of life in a home or day services must be more shaped to improve our well-being and quality of life and our own preferred outcomes as well as engage us and offer more choice and control in decisions affecting us.

In determining its strategy and policies for Adult Social Services the Council has decided to review its residential and day services (including day centres) alongside its housing and care support to examine the options to best meet the needs and well-being of its older population now and in the future within its available and planned resources. The Council developed its Strategy to modernise accommodation options for older people and deliver extra care housing places in Rhondda Cynon Taf which was approved by Cabinet in November 2016 and gave a commitment to review and reshape the care market to:

- Increase the options available for people needing accommodation with care and support; and
- Deliver a viable alternative for people who are able to remain independent with support.

Alongside development of early intervention and prevention and care and support services in local communities, the Cabinet agreed in September 2017, a £50m investment plan to develop, in total, 300 extra care beds across the Council's area to deliver modern accommodation options for older people. The Council are implementing these plans with an Extra Care facility opened in Llantrisant, 2 others being built in Aberaman and Pontypridd and plans progressing for 3 other facilities in strategic locations at Porth, Treorchy and Mountain Ash.

An independent review of residential and day care services for older people was commissioned in 2018 and undertaken by Practice Solutions Ltd, Abercynon, in order to determine future opportunities for service delivery in line with the Council's strategy for accommodation for older people and provision of extra care. The main findings of the review were to recommend the following preferred options:

- Phased decommissioning of all the Council's care homes as part of planned programme of transformation in line with the implementation of the Council's extra care development programme and Cwm Taf care home market position.

- Phased decommissioning of the Council's day services as part of a planned programme of transformation in line with the proposed new service model.

The rationale for these conclusions included the declining use of the Council's care homes with available unfilled places increasing and impacting on the cost efficiency of homes. Significantly, whilst the standard of care in Council run homes was regarded highly, there was an obvious deficit observed against the published benchmarks for the environment in care homes because of the outdated accommodation currently in use. The telling example of this is the lack of availability of en-suite facilities in nearly all rooms. In respect of Day Services, the evidence from the review strongly supported the findings of the draft Council Day Services Strategy which calls for: "a greater need for flexible, more inclusive provision and more efficient means of delivering services in the community for eligible service users and carers".

In the light of the independent review, the Council's Cabinet agreed at a meeting on 21 November 2018 that officers should:

- initiate a 12-week public, resident and staff consultation on the future service delivery model for the Council's Residential Care Homes and specifically on their proposed alternative preferred option that the Council retains a level of provision of Residential Care Homes which are focused on providing complex care and respite. The level of provision retained would be based on a determination of the market share and need required in each of the Rhondda, Cynon and Taf geographical areas;
- on commencement of the consultation process a policy to restrict admissions to the Council's internal Residential Care Homes, was introduced, other than in exceptional circumstances where an appropriate alternative placement that can meet the assessed need is not available. This is in order to minimise any potential impact on service users until such time as the Cabinet considers the results of the consultation exercise and any decision it may take in relation to the proposal;
- initiates a 12-week public and staff consultation on the options regarding the future of the Council's day service provisions for older people and specifically on the proposed preferred option, of a phased decommissioning of the Council's day services as part of a planned programme of transformation in line with a proposed new service model.

3. RESIDENTIAL CARE PROPOSALS

The Council's agreed policies are leading to service models for the delivery of care for older people which have an emphasis on supporting older people to remain at home longer. There will, however, remain a need for specialist residential and nursing care provision for those

individuals whose needs require this level of support, for example, people with dementia as part of the overall spectrum of support necessary to support the needs of our community.

Implementation of the Council's Strategy to modernise accommodation options for older people is expected to result in further reductions in care home admissions (currently the highest proportionately in Wales) as a key objective of the strategy is to replace residential services with extra care housing and deliver more effective services with better outcomes for residents.

However residential care homes dealing with more complex needs such as dementia occupy an important position in the spectrum of services commissioned and provided for older people by Rhondda Cynon Taf Adult Social Care. Residential care homes offer an important choice for people who are not able to stay living in their own homes due to their complex needs and will continue to play an important part in Rhondda Cynon Taf's modernisation of Adult Social Care Services.

Refocusing internal provision so that it focuses on complex care, and residential respite, would allow the Council to provide better services and care for its residents. It would also provide market certainty for the external market surrounding the commissioning of standard residential care but still be commissioned to provide complex care if they choose to access it in the external market.

By concentrating its resources on fewer discreet specialisms, the Council would ultimately provide a better service for residents in Rhondda Cynon Taf with complex needs because it would be in a position to upskill staff to better meet these needs and consequently provide a higher quality service. If the Council no longer focus on the delivery of standard residential care it would need fewer beds to deliver a service that focuses on residential reablement, respite and complex needs based on current demand and projected future growth in demand.

4. DAY CARE PROPOSALS

In respect of people with complex care needs there remains a need and demand for more comprehensive day care services in modernised Day Centres providing for example personal care, nutritional support, physiotherapy, cognitive therapy, stimulating activities etc. The new approach for Day Centres will need to ensure operational effectiveness and financial viability. The average number of people registered at the current 5 Core Day Centres has fallen significantly over the past 5 years from an average of 494 people per week (in 2011/12) to an average of approximately 180 (as at September 2018) - a fall of almost 60%.

The development of extra care housing schemes will also provide opportunities to create community hubs and provide facilities and services in flexible spaces in the community more suitable for the delivery of day services for older people than currently is the case in traditional day centre facilities. Such opportunities to create community hubs and reduce the need for traditional older people day centres are therefore being reviewed as part of the extra care development programme.

The new service model would enable the transformation of the service to provide enhanced day opportunities and to contribute to the development of a day service better able to meet the changing needs and aspirations of the older people of Rhondda Cynon Taf. In order to secure an appropriate range of both care and day opportunities, in line with differing preferences and needs, a continuum of provision is required. This would include care and support for the most vulnerable older people.

This proposal for day services for older people is to refocus internal provision on complex care and no longer deliver care for non-complex needs. Less capacity would, therefore, be needed by refocusing day centres on higher dependency complex/dementia care and increasing the offer of activities and community contribution through an expanded range of services and local area co-ordination. Again, shaping the service in this way supports the key principles of prevention and early intervention by ensuring those with lower needs can access Community Hubs and those with complex needs are supported by Day Centres to remain at home for longer as well as provide much needed respite for carers.

The proposed new service would allow Rhondda Cynon Taf Council to provide a specialist service for those with complex needs, ultimately providing better care for its residents because again it would be able to up skill our staff to concentrate on providing this specialist service in a way that it is currently more difficult to do because of the range of complex and non-complex needs. It is proposed the new model of service should have the following key elements as illustrated in the diagram below:



Flexible services which would enable a person to access a community hub and then move to universal services or vice versa should be enabled as part of the support planning process. However, in the development of the new service model, it has been recognised that planned development and investment in universal service provision and in Community Hubs and extra care housing would help to better reflect the patterns of actual choice people are now making and create capacity to change. Day Care for those with complex and specialist needs remain an important part of the service model but are delivered more effectively in a focussed and targeted manner. This has the same advantages as highlighted above for residential care i.e. better services, higher quality outcomes for services users, release of capacity for lower level preventative approaches.

5. UNDERSTANDING THE DEMOGRAPHIC PROFILE

Gender

Women are expected to live longer than men so may need more access to services if they become increasingly frail. Women are more dependent on public transport and the importance of providing locally based care services within community settings as far as possible is an important element of our service plans.

The profile of residents/day centre users shows a large majority are female which indicates the need to take account of differing needs of male residents in, for example, achieving a good quality of life.

In respect of staff, for residential care, there are 472 females and 40 males, whilst in Day Centres there are 32 females and 6 males.

Age

The age profile of our population is similar to Wales but with slightly higher proportions of children under 5 years old and in the 20-44-year age group and slightly higher proportions of people aged 60 and over.

Current projections in the Cwm Taf Population Assessment see a rise in the total resident population of Cwm Taf (80% of whom live in Rhondda Cynon Taf) to 298,600 by the year 2033. This is primarily due to an increase in the older population. By 2030, the number of people over 65 years will increase by 30.4% and people over 80 years by 71.3%. The number of residents aged 75 years and over is projected to rise from 23,300 (7.9% of total population) in 2013 to 37,100 (12.4% of total population) in 2033.

Overall, our population is living longer and the increase in elderly population is likely to result in an increase in the prevalence of chronic

conditions such as circulatory and respiratory diseases and cancers. The proportion of the population aged over 75 who live alone is higher in Rhondda Cynon Taf than other parts of Wales. All these factors will have implications for the number of people who may need care and support.

The Cwm Taf Population Needs Assessment says:

“The services we commission to support our older citizens and their carers are often already stretched. It has been estimated that if these services simply increase to keep pace with demographic change, this will result in a near doubling of care costs by 2026. We know that we have to adopt a new approach to use our resources as wisely as possible”

The age profile of the staff in our Residential Homes is nearly 60% over 50 years old and this raises issues for the stability and capacity of the work force in the medium term. It may also mean that some members of staff will want to take the opportunity of any service changes to take retirement. Our approach to work force planning and the close involvement of the Trade Union in engagement about these proposals will take these factors into account and ensure transparency and fairness.

Disability

The Cwm Taf Population Needs Assessment suggests that there are around 3,280 people in Rhondda Cynon Taf with a physical or sensory disability in the Region. However, it has been contended that this figure is substantially under-estimated because of the resistance to formal diagnosis and all that entails.

People who have a disability are twice as likely as people without a disability to have no access to a car (Office for Disability Issues 2009). Disabled people are also less confident in using public transport because of physical access issues but also because of staff attitudes (Framework for Action on Independent Living 2012). This is therefore an issue in respect of on-going and future transport arrangements at Day Centres and for location of care homes for visiting purposes where a proportion of relatives will also be disabled.

The numbers of people with sensory impairments will increase with age. Such people may have difficulty accessing services and participating in activities that promote their health and wellbeing or social inclusion as well as maintaining independent living in their own homes with support from Day Centres. It will also mean that increasing numbers who have complex care needs will have a sensory impairment

Physical and sensory disability is also highly prevalent amongst residents of care homes and users of Day Centres and it is therefore

an important factor to take into account in modernisation of these services, particularly in relation to access but also how care and support is provided on a day to day basis and the equipment provided. Regular training for staff and use of up to date equipment wherever possible ensures the needs of people with disabilities are met.

Health

In relation to Rhondda Cynon Taf. Public Health Wales say (2017):

“Rhondda Cynon Taff has a health profile that is largely worse than the Welsh average. The majority of small areas in Rhondda Cynon Taff are deprived compared with the average for Wales however, there are some pockets of relative non-deprivation. There is a growing older population that will impact on the demand for health services in the future.”

“Rhondda Cynon Taff has a poor life expectancy for males and females, poor educational attainment and worse alcohol consumption and obesity levels compared with the Wales average. It also has a worse rate than Wales for premature death from heart disease.”

The data from Public Health Wales shows that for Rhondda Cynon Taf female and male life expectancy, mental health, high body mass index, death from all causes, death from heart disease and cancer are all significantly worse than the Wales average. Analysis of this information would suggest that these adverse factors are likely to mean additional pressures on social services and an on-going need for provision to deal with complex care needs in old age both in day services and in accommodation with care.

Ethnicity

Cwm Taf has lower representation from ethnic groups other than white than Wales as a whole. However, in Rhondda Cynon Taf there are Polish, Portuguese and Czech people living in the local community and their access issues, along with those from an ethnic minority background, will need to be considered in terms of language issues and availability of transport to care settings. However small the number of care home residents and day centre users from an ethnic minority background, their language and cultural needs will need to be catered for.

In respect of Residential Care Homes, 2 members of staff have classified themselves as Asian and 1 as “other”. In Day Centres, 2 members of staff have declared their ethnicity as “other”. The recruitment of staff to these services will endeavour to increase the number of people who are not White in the Social Services Workforce with the aim to match at least the % of people from an ethnic minority in the local population.

Actions in our Strategic Equality Plan demonstrate the Council's commitment to encouraging a more diverse workforce.

Marriage and Civil Partnership

The number of people who are married or in a same-sex civil partnership living in Rhondda Cynon Taf is the same as for Wales as a whole.

For the majority of people, including older people, losing a long-term partner as a result of bereavement can be a life changing event that has a significant impact on their health and wellbeing and on potentially their care needs.

These factors need to be taken into account in delivering residential and day care services e.g. accommodating married couples together in care homes, visiting arrangements for people in care, emotional support, advocacy, complimentary care planning for couples receiving day care, respite, need for care on death of spouse.

Religion

There is a lower representation in every religious group in Cwm Taf than is seen in Wales as a whole. Higher than average proportions of the population stated that they had no religion.

However, it is important that services take cultural needs into account in providing a good quality of life for those in care homes or receiving day care support and that this is integrated into the operation of the care homes and day centres. People must have a choice in whether or how they observe their religious beliefs.

Sexuality and transgender

Research by Travis and Argosy (2011) on LGBT+ Older Adults in Long Term Care found the following good practice should be adopted in Care Homes:

- Assess overall readiness to care for LGBT+ in welcoming and safe environments that recognize LGBT history, culture, challenges, and strengths.
- Understand variations and nuances in the “coming out” processes for LGBT+ older adults.
- Honour LGBT+ partners and families of choice.
- Respect the diversity within the LGBT+ community.
- Know protections and legal rights for LGBT+ residents in long-term care facilities.

Some evidence suggests lesbian, gay and bisexual and transgender people, are perhaps more likely than other groups to face hostility and misunderstanding, and are more likely to experience poor mental health.

The Isolation to Integration report found that gay men and lesbians are at greater risk of becoming lonely and isolated as they age because they are more likely to live alone and have less contact with family. They are more likely to find it difficult to take the decision to go to a Day Centre or move into residential care and to maintain their identity and independence in the new setting.

It is also recognised that these groups find it particularly difficult in how they access services and their dignity and respect must be protected in receiving care in both care home and community settings.

Through good systems as well as training and awareness raising with staff the Council will ensure that these issues are handled sensitively and effectively and responses to these needs are automatically part of the way care and support is provided

Deprivation

Rhondda Cynon Taf has areas of significant deprivation and far too many people still experience poor health. The County includes socio-economically deprived areas, with concentrations of low levels of employment and educational attainment. These factors, along with other aspects of the physical environment, impact on the lifestyles of people living in the area. In 2010, over 40% of the populations of Rhondda and Cynon Valleys and Merthyr Tydfil lived in the most deprived areas of Wales.

Higher levels of deprivation are evident in every category compared with the rest of Wales and this has implications for access to transport and health generally. This is likely to have a knock-on effect in respect of the levels and trends of people with complex care needs who over time would need support from the Council through its modernised services. Whilst it is not possible to predict with any accuracy how that translates to numbers of people, it is probably fair to say that the levels of support required by people with complex care needs will not be reduced and may rise.

Unpaid Carers

The 2011 census shows that 12.5% or 29640 people in Rhondda Cynon Taf provide care to a family member, friend or neighbour. It is probable that the number of Carers 8 years on is even higher. Of those Carers that we know about, the Census shows a total of 9389 Carers provide a significant level of support - over 50 hours of care per week. This has increased by 7% in Rhondda Cynon Taf since the 2001

Census. The needs of unpaid carers now have to be taken into account formally under the new provisions for cares in the Social Services and Well-being (Wales) Act 2014 including delivery of support where required following assessment. The proposals for modernisation of day care services will in particular need to consider the implications of these new duties on the Council. This is particularly relevant in Day Centres and provision of respite care. The RCT Carers Strategy and Implementation Plan will play a central role in responding to these requirements.

Welsh Language

In Cwm Taf, 12.3% of adults and 8.9% of children are able to speak Welsh. The proportion of those who are able to understand, speak and/or write Welsh varies within this. It is possible that the elderly or confused may prefer or need to communicate in Welsh and every effort will be made to accommodate this in line with the “More than Just Words” Strategy for Social Care in Wales. We are ensuring as far as we can, Welsh speakers receive care services in their first language, using existing skills and resources and for example providing staff training to improve their Welsh. We are committed to delivering the ‘Active Offer’ required by Welsh Government Guidance (i.e. providing a service in Welsh without someone having to ask for it) and are providing help and support to our staff to achieve this aim.

In respect of staff in Residential Care Homes we know that 20 are Welsh speakers and 243 are not. A further 249 did not provide information. This suggests about 4% of care home staff speak Welsh. In respect of Day Centres 6 members of staff speak Welsh, 48 do not and a further 62 did not provide information. This suggests that about 5% of day centre staff speak Welsh.

In respect of Welsh speaking staff members in the 11 Residential Care homes and the 5 day care services, our records show the following:

Residential Services

4 x Level Three

6 x Level Four

9 x Level Five

This represents 3.6% of the overall Residential Services workforce.

Day Care Services

1 x Level Four.

This represents 2% of the overall Day Care Services workforce.

To help increase the supply of Welsh speakers in our Workforce:

All advertised roles (since 01/2018) now include Welsh Language Level 1 as an essential criterion on JD's. - See [current advert here](#) for a ‘Casual Care / Domestic Assistant’ at Parc Newydd Care Home. If you

download the Job Description, you will see this policy decision in action.

If individuals do not hold Welsh Language Level 1 skills then they are not barred from applying, they simply need to attend a corporate Welsh language session which lasts 2 hours, and provides them with the basics to achieve level 1 on the Council's framework.

The Council's Welsh Language Skills framework is available to view [here](#).

Training is made available to care staff:

Staff who wish to progress from Level 1 are offered corporate training via our internal tutor, or signposted to an external provider in the community (whose delivery times may better suit the individual).

Residential Services have received bespoke sessions, tailored to the needs of their Welsh speaking residents, for example at Pentre House, during October and November 2018 delivered by our in-house tutor.

Pentre House received 3 sessions and 14 members of staff attended, they all achieved advance Level 1 (which means they met the corporate Level 1 requirements, but also had additional tutoring on specific work-related phrases).

In addition, all Welsh Speaking staff on a level 4 and 5 (fluent on the Council's Welsh Language Skills Framework) receive a corporate lanyard with the 'Welsh speaker' logo on it. This raises awareness amongst staff and residents of their linguistic abilities (increases use of the Welsh Language).

All Council's Social Services are mandated to record the language preference of all who use their services, at their first point of contact. This will be important if as a result of these modernisation proposals some services are transferred to the Private Sector. We will need to consider when decisions about the future are known, how to respond as there is a possible reduction in Welsh Language Skills of staff in changes to the delivery models which could result in fewer staff being employed by the Council.

The Caring Through Welsh mobile application is due to be rolled out to all Children and Adults Service staff who use a handset during their day-to-day jobs, to help and support staff to increase their use of Welsh during the working day. The app is specifically targeted at care staff in Local Authorities and Health Boards and has voice clips for hundreds of regular phrases and questions.

Human Rights

At its most basic, care and support offer protection of people's right to life under Article 2 of the European Convention by ensuring their most fundamental physiological needs, such as eating, taking medication, getting up in the morning and going to bed at night are met. But for those who require it, and those with whom they share their lives, the availability and organisation of care and support also determines whether they enjoy a number of other important human rights including freedom from inhuman and degrading treatment (under Article 3 of the Convention) and the right to respect for private and family life (under Article 8). These rights are underpinned by some important human rights principles: dignity, autonomy and respect which have to be taken into account in delivering residential and day services.

The United Nations Principles for Older Persons and Convention on the Rights of Disabled People are also both enshrined in Welsh legislation (the Social Services and Well-being (Wales) Act 2014 and related Code of Practice). The Council therefore have a duty both at the general level of Human Rights and at the specific client services level to be able to demonstrate that it has given due regard to these Conventions and Principles, have taken action to codify them against service delivery policies and procedures and ensure staff receive training on them. Essentially, the Council is able to demonstrate how it has had regard to the UN Principles when making decisions about identifying an individual's needs and providing services to meet those needs.

6. **EQUALITY PROFILE OF STAFF WHO MAY BE AFFECTED BY THESE PROPOSED CHANGES**

It is important that if as a result of these proposals staff are required to relocate or work differently, their personal characteristics and circumstances are taken into account, particularly if their journey is more difficult or their work pattern changes e.g. their age and family commitments. The statistics show that.

We will need to consider the implications of any new service models for our staff. It is important that if staff are required to relocate or work differently, their personal characteristics and circumstances are taken into account, particularly if their journey is more difficult or their work pattern changes e.g. their age and family commitments. Appropriate organisational change policies should be taken into account in dialogue with Trade Union Side.

There are approximately 550 staff with 512 staff working in residential (and 38 in day care). The age profile of staff is predominantly over 50 years old with only 226 or 41% under that age. There are also a wide range of circumstances of staff to be taken into account e.g. approaching retirement, caring for children/elderly relatives, couples

working in these facilities, single house-holders, dependence on the employment etc. The impact on other protected characteristics of staff are covered above in the relevant section.

7. THE ENGAGEMENT EXERCISE

Research (Robinson, Glasby and Allen 2013) about utilising best practice in local authority decommissioning of social care services contended that:

- Difficult decommissioning decisions require strong leadership and wider stakeholder engagement and support.
- Having supporting evidence and information was integral to successful outcomes
- A clear transparent decision-making process was important for legitimisation of decisions.

Methodology and Responses

A comprehensive independent consultation exercise was undertaken on the proposals for change between 14 January, and 8 April 2019 with care home residents and day care service users, relatives of both groups, Council staff directly involved in service delivery. Additionally, the Council undertook a public consultation exercise.

The main features of the approach to consultation were:

- Letter and Information pack sent to a database of all Council Care Home Residents/relatives (11 homes)
- 5 Day Care centres (approx. 180 users) letter/information pack sent to all current users/families.
- Presentations and Question and Answer Sessions at all Council run Care homes and Day Centres for residents, day services users and families. 7 events for consultation with staff, some attended by the Trade Union representative
- Almost all of these meetings were attended by Senior members of Council staff including the Group Director and Director of Adult Services
- “Frequently Asked Questions” sheets available at events
- Information Pack also contains Questionnaire to be returned to Council
- Easy Read version of Information pack produced
- Consultation by the Council with a wide range of stakeholders
- Dedicated consultation email address and free post facility
- “Have Your Say” Public Consultation on Council’s Web Site
- Public “Drop in” Events at 3 venues 2-8 PM
- Advocacy service promoted and available to all service users and families

As part of this engagement, the use of social media and other communication mechanisms were also used.

A detailed Consultation Analysis report was produced in April 2019 following the engagement feedback. This highlighted the following areas that respondents feel are important to them and which have therefore to be considered in developing proposals for service modernisation:

- A common theme across all the consultation events was that the quality of care and support provided and the contribution and commitment of staff was regarded very highly.
- Whilst there was general recognition about the need to improve care facilities for the future, in each case – Care Home or Day Centre – no one wanted theirs to be de-commissioned.
- Reassurance was sought regarding closing of any homes and more information about the process that would be followed to determine any future decision.
- The higher standards of environment and facilities provided by Extra Care were welcomed and advice was given on a range of practical issues about the operation of Extra Care, staffing, care and support provided, the living conditions, care provided and funding, costs etc. The offer of visits to an extra care facility was positively received. The statement that couples could be accommodated together was welcomed
- The determination of the location of care facilities for the future was seen as of critical importance and that residents still had access to a range of facilities in their locality to meet their changing needs so that family and friends could continue to visit or be involved. Residents and centre users wanted to continue to live in their chosen community and to “age in place”.
- Staff equally saw the importance of location in relation to care options, support services, transportation, resident/service user wellbeing, travel to work etc. Strong representations were made by residents, families and staff for Rhondda Fach to continue to have a facility in their community. It has to be said that this was true of all the Homes and Centres visited but was particularly emphasised in Rhondda Fach.
- Clarity was sought about what the term “complex care” means in the consultation papers and requests for a more detailed explanation and transparency about how the definition would be used in determining individuals care needs.

- There were concerns about care being transferred to the private market as a result of the plans being consulted about. The view expressed by some attendees was that Council run care homes were much better than private care homes. The financial implications for individuals moving into a private care home were a worry for some i.e. more expensive potentially and uncertainty about fee levels.
- Greater clarity was sought about how the Day Centres would focus on complex needs and compliment the role of the new Community Hubs. More information about how any change would be achieved was requested alongside details of the transitional arrangements for any service user/family who may be affected.
- A range of Human Resources issues were raised by staff on the implications of the proposed changes and there was a call for honesty and openness and more information from the Council regarding their jobs and conditions of service.
- It was recognised that more people with dementia would in the future need care and support both in the community and in residential care and that it was important to provide them with appropriate responses. A common theme both in care home and day centre consultations was the need to achieve a workable mix and arrangements with people who did and did not lack capacity and a community ethos developed in all locations.
- A common theme in care home and day centre consultations were concerns raised by families about information available, care assessment, its interface with the Decision Panel, its flexibility, and timeliness. Greater clarity about how the process should work is required.
- In respect of the Public Consultation 372 responses to the Residential Services questionnaire were received and 125 responses to the Day Care Services questionnaire were received.
- Written responses were received in addition to the questionnaire responses and discussions at the various meetings. For residential care there were 19 responses and 9 for Day Care.
- For residential care 47.3% of respondents agreed with the Council's preferred option to retain a level of provision of residential care homes which are focused on providing complex care and respite. Only 34.9% disagreed with the Council's preferred option and the others unsure.
- For the preferred option of Phased decommissioning of the Council's day services as part of a planned programme of

transformation 53% of respondents disagreed with the preferred option.

Where the issues raised were not appropriate to be dealt with through these proposals or were linked to specific operational delivery of services, we have passed the information to other relevant officers to inform their actions and plans.

8. **POTENTIAL POSITIVE AND NEGATIVE IMPACTS IDENTIFIED**

Positive:

- Standard of Care provided in Council-run Care Homes and Day Centres was highly regarded
- Extremely positive comments were made about the quality of the staff, their dedication and the high standard of the care and support as well as the food provided.

Care Homes

- It was contended that if there are any closures planned in the future, relatives and residents must be part of any decision-making process and to be consulted again.
- General recognition about the need to improve care homes for the future but in many cases the current arrangements were praised and residents and relatives did not want to see their particular care home closed.
- Society's expectations of a care home are changing and higher quality of facilities are sought.
- Staff generally agreed that the buildings aren't fit for purpose, many wanted to keep their residential home open and for them to be modernised.
- Appreciation that it may not be financially viable to refurbish all existing Residential homes and that the homes needed to operate on a sound resource basis.
- The case for including provision in the Rhondda Fach valley was made passionately.
- The "Butterfly" Dementia model of care was praised by relatives whose kin had dementia

Day Centres

- The Day Centres are seen as valuable assets that provide much needed care and support
- The new facilities for Day Services would be welcomed if they can offer more space and more choice of activities.
- Families relied on the Day Centres for care and support to be provided to their relative so that employment could continue and for respite from heavy caring responsibilities
- As a staff group there was recognition that things needed to change and day services should be modernised.
- There was a positive response to the proposals for new Extra Care housing facilities with some Day Centres included
- Calls for the extended hours of day services to include evenings and weekends to better meet the needs of individuals.

Negative:

Care Homes

- Concerns about the temporary halt to new entrants meant that homes are being earmarked for closure and that the numbers of residents would reduce so the homes are no longer financially or operationally viable.
- concerns about care being transferred to the private market as a result of the plans being consulted about.
- There were concerns expressed about the continuity of care being disrupted where individuals needed to be transferred.
- There was uncertainty about what “complex care” means in the consultation papers and how that would be defined and affect the decision-making process.

Day Centres

- In each case strong concerns were raised about the possible closure of Day Centres and the detrimental effects that would have for the people cared for and for the staff.
- There were rumours and uncertainty about the function and operation of the new Community Hubs and how they would fit in with Day Centres.

- The level of detail regarding the preferred option for Day Centres was not sufficient.
- There was strong concern expressed about the situation in the Rhondda Fach where the Day Centre was attached to the Residential Home and there were no alternatives for older people available in the Valley.
- Community Hubs are important but are not suitable for Service Users that come into the Day Centres who have more complex needs which change.
- Concerns were raised about restrictions on gaining access to Day Centre support only through full assessments by a social worker and decision by a Panel.

9. **PLANS TO ALLEVIATE ANY NEGATIVE IMPACT**

In respect of Care Homes:

- A temporary halt on admissions to Council care homes has been implemented.
- Comprehensive assessment of all individuals impacted and their care and well-being needs.
- Revisions to care plans as required.
- Gradual implementation of proposals to coincide with availability of alternative care options including Extra Care and private sector places.
- Close engagement of residents and their families on an on-going basis including provision of further information and advice, supported by a Communications Plan.
- Development of dialogue with Private Care Sector about current and future provision.
- An area by area analysis of demography, public health, transport/travel, care provision and support services to influence final decisions on local delivery structures.

In respect of Day Care:

- Comprehensive assessment of all individuals impacted and their care and well-being needs.
- Revisions to care plans as required.
- Gradual implementation of proposals to coincide with availability of alternative care options including Extra Care and Community Hubs.
- Close engagement of service users and their families on an on-going basis including provision of further information and advice.

- An area by area analysis of demography, public health, transport/travel, care provision and support services to influence final decisions on local delivery structures.

10. **MITIGATION**

We will implement an Action Plan to mitigate the negative impacts on services users that have been identified, including:

- Develop a clear service delivery model for each of the 3 main areas within the Council boundaries and accompanying rationale encompassing private care homes, Council care homes, extra care and Day Care Centres and Community Hubs.
- Take account of concerns raised in initial consultation e.g. transition impacts on residents and on centre users, comparative costs for individuals, transport, travel distances, community cohesion, staffing issues, availability of support services etc.
- Develop a clear implementation plan with timescales that is co-ordinated with the planned opening of new extra care and community hub facilities as well as any other modernisation to be undertaken to achieve the desired service model.
- Consult further on implementation of agreed area service models with services users, their families, representative bodies and the public.
- Instigate a dialogue with the local private sector care market as how best to maintain stability and ensure availability of sufficient capacity for standard and more complex residential care in the short and medium term. Compliance with the duty to develop a market oversight regime introduced by the 2016 Act would be an outcome of the process. Updating and changes to the Rhondda Cynon Taf Care Home Market Position Statement would also be required.
- Utilise best practice guidance in the re-provisioning of social care to ensure the appropriate level of support for individuals whose care and/or location is impacted by the modernisation proposals is tailored to their needs and in liaison with families.
- Older people's health, safety and protection during a period of transition to the new care model or setting are of central importance and Rhondda Cynon Taf will ensure each individual is given a personalised approach and care plan in ensuring the best possible outcomes are achieved. This will involve the families of the residents/service users. Advocacy and representation are seen as important services that will be made available to help service users express their views.

- The supply of a well-motivated, high quality and qualified workforce is essential to the current and future provision of these care services. Therefore, a transparent process of engagement with staff and their Union representatives will be undertaken throughout the transition period to the new service model.
- An overall implementation communications plan to ensure there is effective information, advice, assistance and advocacy available that mitigates the stress and anxiety for individual care clients, families and staff, any modernisation plan like this will create

11. **SUMMATION – GENERAL DUTY**

Due Regard to 3 elements of general equality duty

This Equality Impact Assessment is representative of a real attempt to address the following questions:

Does this service change help to eliminate discrimination?

There is no perception that the way services are currently provided is in any way discriminatory. Indeed, both residential and day services are highly praised by respondents to the engagement. The changes will help to ensure that in the future that there continues to be no discrimination in the way services are provided by providing additional skills training to staff supporting people with complex care and widening the scope of support to people with lower care needs in the community

Does this service change help promote equality of opportunity?

These changes will result in more equitable responses for people living in the Council area as a whole by improving the quality and quantity of early intervention and prevention services. It will also improve service responses for those in residential and day centres by providing modernised facilities and staff who can focus on and be trained more effectively those with complex care needs

Does this service change help foster good relations between people possessing the protected characteristic and those that do not?

Staff will be better trained to meet individual needs and where services are also designed to meet them, this can minimise problems for and between people. By the Council focussing its efforts on complex care it will result in a more level playing field for people in the community with protected characteristics in accessing support.

12. MONITORING ARRANGEMENTS

The impact of the proposals will be closely monitored and careful consideration will continue to be given to the points highlighted in this equality impact assessment at each stage of the decision-making process.