

**APPENDIX 1**



**MODERNISATION OF RESIDENTIAL CARE AND DAY  
CARE FOR OLDER PEOPLE**

**AN ANALYSIS OF CONSULTATION BY  
RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL**

**Practice Solutions Ltd**

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April 2019

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## 1. Introduction

- 1.1 This Report provides an initial analysis of findings from the consultation on Rhondda Cynon Taf County Borough Council's (the Council) proposals to modernise the residential care and day care services it provides itself to older people. This report covers the consultation undertaken 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 and through a public consultation exercise.
- 1.2 The views expressed in this report directly represent the views of those attending the series of consultation meetings and responding to the consultation with the public.

## 2. Background and Rationale

2.1 The need to modernise and continually improve Adult Social Care Services is a published key priority for Rhondda Cynon Taf Council. A number of factors have influenced the development of this policy including:

- Welsh Government Policy – including the Social Services and Wellbeing (Wales) Act 2014 and Regulation and Inspection (Wales) Act 2016
- Cwm Taf Regional Plan 2018 to 2023 (specifically chapter 5)

2.2 The Council developed its Strategy to modernise accommodation options for older people and deliver extra care housing 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.

2.3 An independent review of residential and day care services for older people was commissioned in 2018 and undertaken by Practice Solutions Ltd, Abercynon. In the light of the independent Report, the Council's Cabinet agreed at a meeting on 19 November 2018 that officers should, for Residential Care:

- Initiate a 12-week public, resident and staff consultation on future options for the Council's Residential Care Homes. The three options being considered by the Council and the subject of the consultation were:

**Option 1:**

Continue with existing arrangements

**Option 2:**

Phased closure of council Care Homes, with residents moving to Extra Care or the independent sector

**Option 3: (The Council's preferred option)**

Retain a level of provision of Residential Care Homes which are focussed 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.

#### For Day Care Services

- Initiates a 12-week public and staff consultation on the options regarding the future of the Council's day service provisions for older people. The two options being considered by the Council and the subject of the consultation were

#### **Option 1:**

Continue with existing arrangements

#### **Option 2: Preferred Option**

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

### 3 Consultation Methodology

3.1 The Council's Research and Consultation Unit developed in liaison with Practice Solutions Ltd, a comprehensive methodology to implement the Cabinet decisions on a 12-week consultation on modernising residential care and day care services. Almost all of the meetings were attended by Senior members of Council staff including the Group Director and Director of Adult Services

3.2 The aim of the consultation was to gather as many views as possible from interested stakeholders to inform the Council in its decision making as to the future structure of residential and day services for Older people in Rhondda Cynon Taf. The consultation was planned to take place over a period from 14 January to 8 April 2019. 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
- "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 their families

3.3 Practice Solutions Ltd, Abercynon, were commissioned to undertake an independent consultation with residential and day service staff, care home residents and their families and day centre users. These events were designed to provide more information about the proposals for change and give an opportunity for discussion and debate in group sessions. Members of the Council's Senior Adult Social Services Management Team - including the Group Director (Director of Social Services) and Director for Adult Services - attended the events to ensure the details of the proposed changes were reflected and queries answered directly. Details of the events held during the period from 14 January to 8 April 2019 including the numbers of people attending each event is set out below.

<b>Week</b>	<b>Date</b>	<b>Venue</b>	<b>No of Attendees</b>
Week 1 Staff	22nd Jan	Abercynon Leisure Centre	19
	23rd Jan	Ystrad Sports Centre	16
	24th Jan	Llantrisant Leisure Centre	19
	25th Jan	Sobell Sports Centre	15
Week 2	28th Jan	Parc Newydd	14
	29th Jan	Pentre House	18
	30th Jan	Tegfan	26
Week 3	4th Feb	Ystrad Fechan	20
	5th Feb	Bronllwyn	20
	6th Feb	Cae Glas	13
	7th Feb	Clydach Court	16
Week 4	12th Feb	Dan Y Mynydd	6
	13th Feb	Ferndale House	25
	14th Feb	Garth Olwg	19
Week 5 - Staff	19th Feb	Troed Y Rhiw	33
Week 6	25th Feb	Bronllwyn- staff	4
	26th Feb	Riverside-Pontypridd	20
	26th Feb	Tonyrefail	
	27th Feb	Ferndale	15
	27th Feb	Bronllwyn	30
	28th Feb	Trecynon	
	28th Feb	Ferndale - staff	3
Week 7 - Additional Dates - Staff	7th March	Ty Elai	2
Week 8- Additional Dates -Staff	11th March	Llantrisant Leisure Centre	0
	14th March	Aberdare	3
Public Consultation Events	All "drop in" 2- 8pm	Ystrad Leisure Centre	6
		Llantrisant Leisure Centre	8
		Aberdare Leisure Centre	6

## 4. Summary

4.1 This consultation on modernising care home and day care services run by the council has been completed over a 3-month period and covered all of the relevant Council settings in which care and support is currently provided. It has engaged a significant number of care home residents, day centre service users, families and staff members as well as members of the public – i.e. including those who are most directly interested in the changes proposed. It is clear that people feel passionately about the services they or their relative receive and the staff provide.

4.2 Whilst recognising the changing and ageing society in which we live and the need for services and facilities to be modernised for the future, there was a dominant response from all groups. It was telling the Council how very much they appreciated the care and support currently provided and that they wanted to maintain continuity and the least change as was possible. As could be expected, there was resistance to closure of facilities and a call for existing facilities to be improved where feasible.

4.3 A summary of the main themes that emerged in the consultation covers:

- 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 sector 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.



## 5 Care Home Residents and their Relatives

5.1. Events were organised at each of the 11 Council run Care Homes for residents and their relatives. They were all well attended by both residents and relatives. Following a short presentation from Practice Solutions Ltd to set the scene an “open question and answer” session was undertaken on each occasion. The main themes that emerged in discussion were:

### Comments made by family members and residents

- Despite reassurances to the contrary, there were concerns that decisions have already been made on home closures, *“it is cut and dried, tell me this is not the case”*.
- Residents and relatives said that they needed reassurance regarding closing of any homes and the timescales involved and that the residents assessed need would be “honored” and that the need for residents to live under uncertainty would be mitigated.
- Concerns were raised about choice and who makes the final decision whether a move is needed – some relatives and residents were worried a decision would be taken out of their hands.
- Concerns were expressed about moving existing residents to new locations and the impact that would have, particularly those with dementia. Some people could have to move again to an environment they don’t know in a different district not near their homes. A common theme raised was that if anything needed to change then the change must be gradual taking into account residents needs and individual’s reaction to change. Some residents have moved in the last 3 years and it would be seen as unacceptable to move them again. *“I wouldn’t want to be alive if I had to move again”*
- Concerns were raised by relatives for the future employment of the staff at a number of events who regarded them and the care they gave highly.
- There was 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 the particular care home closed. A repeated comment was that people and friendships made are more important than the buildings.

*I’m 99 in a day or two, don’t do anything to me.... Can I stay?*

*“Why make changes when they are all happy here, I’ve had a second chance of a life here”.*

*“I understand that things need to move forward, but my Mum would hate to leave here. This place is an absolute haven, staff are amazing here in the centre”.*

*“Care is wonderful, everything is well organised, can’t find fault with it”.*

*The staff are like family, a lot of people here haven't got a family who visit.*

*"The care my mother receives at the residential care home is superb. If it's not broke why try and fix it"*

*"We're all here because we've got a relative here. The staff are excellent, the residents worship the staff"*

*It would be lovely for this building to be modernised but at the heart of this is the staff. You feel like you're coming home because of the staff.*

- The "Butterfly" Dementia model of care was praised by relatives whose kin had dementia; it was seen as a positive and successful approach that could be replicated more widely.
- Some relatives were unclear as to why there was not enough demand for places in Council homes with an ageing population, publicity about "bed blocking" and increasing levels of dementia.
- Some residents might be assessed as not having complex needs but their families thought that extra care isn't the right place for them and that they'd be much happier in a residential home. For these people the only perceived options could be in the private sector.

*"A lot of older people will probably say that they would like to try and live more independently but realistically they won't be able to cope."*

- 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 and appropriate information provided on the specifics of the proposals. The criteria being used for any closure must be made clearly known and understood.
- Concerns were raised by some relatives about the emphasis on the requirement for modern facilities having en suite facilities in every room.

*"Some residents would not want or could not use their own facilities unaided".*

- There were also comments supporting en suite facilities as protecting the resident's dignity rather being "wheeled down the corridor" to use the bathroom. Also, it was recognised that the next generation of residents would expect en suite facilities as the norm.
- Concerns were raised about the rationale for commencing a temporary restriction on placements into the Council homes and whether this would just exacerbate the problem of unused capacity. *Is this just a plan to run homes down by reducing numbers so they're not a viable option to keep open?* The explanation provided for this policy was generally accepted.

- The operation of the assessment panel that decides if a person needs to go into residential care was questioned by some. Examples were given where the process took too long or the rationale for the decision was unclear. The suggestion was made that financial issues for the Council were leading to fewer people entering care homes. There were also examples given of where this had worked well.
- Where specific cases and circumstances were raised, the presence of the Group Director and Director of Adult Services was helpful as conversations with those people were able to be had following the meetings.

### **Geographic Location**

- There was strong commenting on the need to look carefully at the geographic location of Extra Care Housing and any homes that would provide for people with complex care needs including dementia. It was felt important that residents still had access to facilities in their locality so that family and friends could continue to visit. There were strong views that each of the Valleys is a Community in its own right and with its own identity, and that any future decisions should reflect the needs of each of those communities.
- The case for including provision in the Rhondda Fach valley was made passionately. The locations chosen should not create longer journeys for families and staff, particularly where Public Transport was difficult.

### **Complex Care**

- There was uncertainty about what “complex care” means in the consultation papers and how that would be defined and affect the decision-making process as to what level of service would be provided to individual people and recognition that it would be a crucial factor in determining where they/their relative would be placed. There was explanation about how the definition would be used in determining individuals care needs. It was made clear that people need to see the complexities of the “professional narrative” expressed in plain language.

### **Concerns that this was about financial savings.**

- The impact of austerity and the pressures on Council budgets were well understood and this led a number of relatives to express concerns that despite the investment in Extra Care, that the potential decommissioning of Council run care homes was all about saving money. There were also worries expressed about transferring some people to Private Sector homes and the loss of control and possible higher fees that could mean for relatives.

### **Continuity of care.**

- There were concerns expressed about the continuity of care being disrupted where individuals needed to be transferred. Residents had built up strong relationships with and trusted care staff who supported them. This was seen as particularly relevant where a resident was assessed as not having complex care needs and where lower intensity of support might result. More explanation of the processes that would be put in place to manage continuity of care was requested

### **Concerns about private sector.**

- There were some concerns about care being transferred to the private market as a result of the plans being consulted about. The public image of private care homes and their alleged poor reputation for providing low quality care as well as their strong profit motives were all mentioned as reasons for retaining Council run homes. Examples were given of where this had been experienced and related issues such as poor care, smells, a lower level of staffing and short notice closures. There were worries that the private sector would “cherry pick” the residents who were easier to care for leaving less choice for those with more significant care needs. The financial implications for any individuals moving into a private care home need further explanation. The experience of Council run care homes was much better than private care homes.

### **Extra Care**

5.2 There was a generally positive response to the Council’s investment in 300 Extra Care beds and the higher standards of environment and facilities they provided. However, this was a new concept for many of the relatives and residents and a range of issues were raised about the operation of Extra Care, the living conditions, care provided and costs etc. The main common issues raised were:

- A number of relatives supported the development of extra care as an important alternative option for the current and next generation and praised the Council for looking ahead. It was the implications for their relatives in care homes now where most concerns were raised.
- More information about the concept of Extra Care and why it is beneficial was needed. Examples of where and why it has worked elsewhere in Wales, what were its limitations etc. was requested. The offer of visits to an extra care facility was positively received. The statement that couples could be accommodated together was welcomed.
- The location and the timescales for the extra care facilities being built and opened was seen as crucial information to publicise and in particular ensuring different parts of the Council area had an extra care facility within reasonable travelling distance. The lack of a plan to build a facility in Rhondda Fach was criticized – Porth was considered to be outside of the valley.

- The staffing arrangements generally for extra care was raised including numbers and grades and in particular the availability and terms and conditions of staff who were providing domiciliary care. The experience of private sector home care staff on minimum wage, with a high turnover of staff and no continuity for individuals receiving support was not wanted by relatives for Extra Care. The explanation that Council or Third Sector staff would provide care was generally well received.
- The regime in extra care facilities should be made clear including availability of communal dining, help with laundry, help alarm calls, staff on duty at night, managers in post, GP arrangements, decoration of flat, own furniture etc.
- The extent to which an individual needed to be independent to live in an extra care facility was questioned and how particular needs such as help with medication, early stage dementia etc. would be capable of being managed as well as the person safeguarded. Concern about pressure on residents to run their own households were voiced. *“My mother would not be safe in extra care, she can’t boil a kettle herself, and how can she be expected to cook for herself.”*
- The proposed partnership with the not for profit organisations for running extra care facilities and providing the in-house care was explained including what the benefits of this model are for residents but further information was requested by some respondents.
- It was suggested that there is potential for loneliness and isolation to exist in extra care homes where individuals could remain all day in their own flats. Measures and activities must be available to ensure a good quality of life and a community-based environment created and the “ethos” that existed in the care homes replicated.
- The anticipated age range and care needs of residents in extra care was a concern and how a balanced community of people would be created including how far people from the locality would be included
- The financial implications of moving into extra care for residents were a concern for some including the charging arrangements for home care, communal costs, own budget management etc. The rules on savings levels, income from pensions, benefits etc. and how that compared to care homes were explained

## Alternative Proposals

- The Council should Invest in the current homes in phased approach to up-grade them and to add in en-suites to avoid the upset of closing and changes for residents.

*“As the Council are investing £50m for extra care can’t a percentage of this be used for modernisation instead? Most already have good facilities here like laundry, hair salon. There’s not so much of a difference already to extra care”.*

- Unoccupied beds should be utilised more for respite care which is essential for carers and more provision is needed.
- Focus on a good geographical spread for homes providing complex care across the whole of the area and ensure that the level of care is appropriate and environment modernised.
- Re-develop existing care homes by making less bedrooms, but with en-suite and other improved facilities
- Make smaller extra care homes and keep the existing residential homes.
- Combine 2 extra care homes planned and make an investment in an existing home, and allow more residential care homes to stay open.

## 6 Residential Care Services – Staff

6.1. A total of 7 events were held for residential care staff at venues across the Council area to consult them on the proposals for modernising services. Following a short presentation from Practice Solutions Ltd to set the scene an “open question and answer” session was undertaken on each occasion. The main themes that emerged in discussion were:

### General Comments from staff

- Despite reassurances to the contrary, a consensus amongst some staff had formed that the decisions about the future of the care homes had already been taken. The consultation process had led to feelings of anxiety and uncertainty for staff regarding their residents. It was unsettling time for everyone. Managers time has, quite rightly, been taken up reassuring residents, family members.
- Whilst 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.

*“We are talking about the current generation that are being looked after, but we need to be concerned that they are being overlooked while planning for the future”.*

- Option 2 and 3 were seen by staff member as options that will mean closures for some or all Residential homes and they were concerned to have firm information about the timelines for decisions, particularly where a home closure was involved.
- There was some 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 and within the Councils budgets. However, the feasibility of modernising homes with en-suite facilities and a smaller number of bedrooms should be examined.
- There was some agreement that society's expectations of a care home are changing and higher quality of facilities are sought but a common comment was that the current cohort of residents are generally content with the homes (their home) and for example, en-suite facilities were not a high priority for them.

*“They (the residents) want to stay local and don't like change, these (care homes) have been their own homes for so long”.*

- Staff were in agreement that there is capacity in the market in the area but that quality of life and care was important to residents and needed to be assured if privately run homes were substituted for Council homes.

## Potential Residential Care Home Closures

- There were concerns expressed that the temporary halt to new entrants introduced by the Council 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. Staff in Ferndale House in particular were worried that the home would close and this had been fueled by rumors on social media. This was very upsetting for staff and families and the community.
- It was considered essential that residents in all homes were given a meaningful choice if their home was to be closed and that the timescales for decommissioning homes should be made widely available. It would not be possible to place most current residents back into their own home as many had already sold them and in any case, they were unable to look after themselves.
- It was seen as important that plans for the transition for residents were drawn up that minimised the levels of disruption and managed the emotional impacts for them. There should be assurances given that married couples will be allowed to stay together
- The need for Residential homes providing care for those with complex and specialist care needs will always be required and there must always be a provision available including some run by the Council. There should be clear criteria drawn up for deciding the number, location and facilities required for care home retained by the Council under option 3.
- Managers found themselves in a difficult position to provide an opinion on a way forward as they are there to support their own home but know that the homes and services do need modernising.

## Geographical locations of proposed facilities

- The proposed sites for the 5 new Extra Care housing complex have been identified (Mountain Ash, Porth, Aberaman, Treorchy and Pontypridd) however there are other suitable sites which should be considered. Staff from Rhondda Fach made strong representations that a facility either care home or extra care should be available in their valley e.g. The Rest Assured factory site in Pontygwaith. The residents in Ferndale House want to stay in their valley where they have strong links with the community.
- Concerns from staff were expressed about any re-location of residents that may be needed and the logistics of a move causing upset to vulnerable older people. Residents had already moved from their own home – some also had a care home move as well - and any future moves should be minimised so that a “double move” was not necessary.
- The location of any facilities – extra care or care home – needed careful and balanced consideration. A sufficiency of nursing, complex care, extra care and day care was needed in each sub area of the Council area Relatives of residents are



getting older and expecting them to travel longer distances should be avoided. Not everyone can drive and some relatives were dependent on public transport. Many members of staff also live local to the site of their care home and walk to work; having to travel would cut into their personal time and increase expenses.

- Care homes work closely with a range of local stakeholders such as local pharmacists, GP surgeries, dentists etc. and re-location would require availability of these support services reasonably near at hand.

### **Complex care and Respite**

- Whilst the role of assessment was well understood, there was a call for clarification on the general criteria that would be utilised to determine whether an individual had complex care needs or not. Explanation was provided that this included for example, people who are bed bound, and/or i. have dementia, ii. where manual handling was needed, iii. require feeding or iv. have complex medication regimes. The opinion was voiced that many of the current residents would fall into this category
- The predicted increase in the numbers of people with Dementia must be taken into account in determining the provision of Council run care homes for complex care needs, as well as levels of frailty. In particular the numbers of people with a Learning Disability surviving longer than their parents and needing complex care had to be taken into account.
- The Butterfly model had been successfully introduced in a few homes and should be implemented more widely. It was claimed to be easier to put into practice in the case of dementia, but the frail and very elderly find it more difficult

### **Independence of people receiving care**

- There was recognition that in some homes, services and support are making people too dependent and de-skilling them, whereas in the future the aim should be to make people independent whether in a care home or extra care. There is a need to future proof what is delivered and for the culture to be changed over time.

### **Human Resource issues**

- Staff raised a number of questions about their own employment by the Council as a result of services being modernised:
  - What are the shift patterns of staff in extra care? Would all the shifts on offer be 12-hour shifts?
  - Would those who currently have contracts have them transferred to work in extra care?
  - Would the current staff employed by RCT have the first option to go and work at the extra care facilities?
  - Would the extra care staff be employees of RCT?
  - What are the staffing arrangements for the extra care in Aberaman?
  - Are the current employees guaranteed to keep their jobs?
  - Will the current employed staff have options around redundancy?

- Will current hours be reduced due to the reduction in residents and the current 'block' of residents entering the care homes?
  - What would happen to staff members if their place of work closes?
  - Would any the proposed extra care homes be staffed by current RCT Care employees?
  - Would staff be offered different roles within care facilities in the future if wanted
- In general terms there was concern for their future employment and income and a call for honesty and openness and more information from the Council regarding their jobs and conditions of service and for the involvement of Trade Union representation to continue.

### **Extra Care**

*"It's not just about the care - it's about the facility as well - it's positive that the concept (Extra Care) is looking to improve the lives of people but it's an area of uncertainty for many (staff and residents)"*

### **Timescales**

- There was a need for greater clarity and as much certainty as possible about the timescales for developing and opening Extra Care housing facilities and any decisions about which care homes might close as a result. Information at an early stage to counter "rumors" was essential.

### **Private/Third sector**

- There was a need for greater clarity from reading the consultation papers as to what private sector involvement there would be in the development proposals. There was a lack of appreciation about the scope and nature of third sector "not for profit" organisations and how they differed from private care companies.
- Further details about how the Extra Care development is being funded between the Council and the Third Sector was requested, as well as information about how each would be involved in managing, staffing and running services.

### **Financial Concerns for Extra Care**

- Residents and their families needed to know what the costs and financial implications are for moving to Extra Care accommodation. This included charging for domiciliary care, rental, utility and other accommodation costs and how these interacted with the benefits system. Comparisons with the current costs and charging arrangements would be helpful for residents in different situations/categories of funding their care. Money management skills may be an issue for some residents.

## Staffing

- It was seen as important that the extra care facilities are run by experienced care staff and that a quality service is provided at least to the excellent standard currently provided by Residential Care staff. The right staffing levels and management regime was central to achieving that.

## Concerns for Residents

- It is good that staff, residents and their families have the opportunity to visit an Extra Care facility before any decision impacting on them are made. Discussions with the staff and residents at the Ty Heulog site would be advantageous. This needed to be arranged fairly soon to allay any unnecessary fears.
- There needed to be clear information made available about the process and timing for resident's care and other needs to be assessed and suitability judgements made in respect of placement in extra care or complex care. Individuals needed to be offered meaningful choice.
- There were concerns that Extra Care would not be suitable for a number of current residents *"Some residents cannot do basic tasks, open doors for themselves, cook a meal on their own, they would not be able to walk (unaided) to the facilities' or restaurant"*
- Staff felt that Extra Care facilities would need to ensure plans were in place to avoid isolation and loneliness – residents staying in their flats – and to build a "homely" and inclusive culture that existed in the care homes and where resident's confidence and condition were improved.

## Extra Care Services and Facilities

- Staff said they needed a better understanding about the concept of Extra Care and its benefits and examples of how it has worked elsewhere to the benefit of people receiving care and support.
- Further information was requested about the services and facilities that would be available in the Extra care housing facilities:
  - What are the additional facilities above that currently provided in Council care homes?
  - Would there be a carer on hand to help people to the toilet?
  - Will extra care provide for people with learning disabilities or dementia?
  - What level of disability do those who are currently in extra care have?
  - Does extra care provide respite?
  - What are the care needs of those going into extra care and is there an age limit to qualify?
  - Are there people already waiting to go into the proposed facilities
  - Did any of the residents in Ty Heulog move there from a residential care home?

- What would be the availability of primary care services – doctors, nurses, physios etc.

### **Positives - Extra Care Housing**

- The facilities and quality of environment offered by Extra Care was seen as very positive and the move forward to meet the changing expectations of older people welcomed. *“I would be happy to see my own parents in an Extra Care Facility”*
- Extra Care is capable of more than care homes and these facilities encourage independence and socialisation but it is important that to get right the mix of age and care needs of residents. These new facilities should also be operated alongside and complimentary to other accommodation and care provision.
- The inclusion of respite and family rooms for those travelling from distance was welcomed. There was a need to get the local community “on board” with the development of Extra Care through awareness raising.

## 7 Summary of Day Care Services Consultation

7.1 Two events were organised at each of the Council Day Centres, one for service users and relatives and separate meetings for staff. They were both well attended. Following a short presentation from Practice Solutions Ltd to set the scene an “open question and answer” session was undertaken on each occasion. The main themes that emerged in discussion were

### Day Centre Service Users and their Families

#### Future of 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. Greater clarity was needed 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.

*“if it closed, dad says he’d become so withdrawn he wouldn’t want to live”*

#### Value of the Day Centres

- The Day Centres are seen as valuable assets that provide much needed care and support. For the majority of people this is the only way to meet others, socialise and get the support they need. The centres are relied upon to enable people to be able to continue to live at home. There should be investment in the existing facilities to make them even better.
- Friendships have been formed at the Centres that would not be possible to maintain if the service was withdrawn. Some people had been helped to mix with others and to socialise by the staff and this had made a significant difference to their lives. The relationships that staff had built up with the Centre users was exceptional and critical to the high standards of care.
- Families also relied on the Day Centres for care and support to be provided to their relative so that employment could continue and wages earned. Examples were given of families welcoming the day centre support, which provided part of the mix of care their relative received alongside family (unpaid) care and paid domiciliary care. This enriched their relatives lives but also allowed them to contribute to society through working or volunteering. The Centres often provided that essential ingredient in the management (“juggling”) of their relatives care that made the arrangements acceptable.

*“What most of us want for our family members with memory issues is continuity; it’s what they get here. They like to continue to go to the same place, change can be very upsetting for them*

- The Day Centres are also seen as providing a preventative service as they help maintain independence and avoid the need for placement in a care home for some. It was seen as a false economy to reduce these services as people would decline and they would end up needing a higher level of and more expensive care and support. For people with dementia or memory loss the Centres were often the only familiar places they enjoyed and were irreplaceable.
- The Tonyrefail Day Centre was already providing exceptional care and support which matched the type of service being aspired to. With more investment it could be further improved and become a centre of excellence.

### **Accessing Day Centre services/ assessments**

- 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. This was contrasted with the statement in the consultation document about usage of Day Centres declining; this was due to Council reducing capacity for financial reasons, it was alleged, rather than any under use by residents and their families.
- Better communications and clearer information about the criteria for access to a Day Centre and for support was needed in a modernised day service that included Community Hubs. Visits to the facilities before placement started was requested by some service users/families. A more timely and responsive process involving fewer people and a key social worker was requested.

### **Dementia**

- Concerns were raised that Day Centres would in future focus on those with more complex needs including dementia. If a higher number of places were dedicated to people with dementia, families wondered how that would work on a practical basis mixing with other people who had capacity but had physical care needs.
- The question was raised about looking after people with other conditions e.g. neurological conditions, learning disability, brain injuries etc. and whether they could also be provided with care and support at the Day Centres.

### **Loneliness and isolation**

- The Day Centres were seen as providing one solution to combating isolation and loneliness and help to get through difficult experiences in people's lives. The staff were praised for their role in providing this emotional support as well as encouragement to participate in activities. They also played an important role in rehabilitation "getting people back on their feet" in life when they first come into a Day Centre and assessing and planning to meet a range of complex problems.

## **Staff**

- 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.

## **Transportation and Location**

- The transportation to the current and future day centre facilities was seen as vitally important. For those with physical disabilities it was often the only means of getting to the Centre. Whilst some people used Public Transport, this was problematic and something of a struggle for those using walking aids. Taxis were used by some but that depended on levels of income as it was expensive.
- The location of the Day Centres was seen as an issue to get right for the future. If facilities were not in reasonable travelling distance, it would be difficult for the families to travel if reliant on public transport. For service users travelling a substantial distance from their homes to the centre by Centre mini bus would be uncomfortable and eat into their time at the day centre.

## **General Questions**

- Intergenerational programmes with children in the facilities to work alongside older people to undertake activities would be beneficial for both groups and help develop community ethos at the Centres.
- The consultation will reveal different opinions from people who have a stake in the homes and centres at the moment as opposed to those thinking of the future, the Council needs to take a balanced response.
- The statement that no decisions had been taken was viewed with some skepticism and opinions that phased de-commissioning means closure.

## Day Centre Staff

7.2 The main themes raised in events for Day Centre Staff were:

### Community Hubs

- There were rumors and uncertainty about the function and operation of the new Community Hubs and how they would fit in with Day Centres who are looking after older people with more complex needs. Further information and discussion with staff were requested. *“I don’t think that staff members can visualise what it’s all going to look like”.*
- The timetable for deciding the location and opening of the new Community Hubs and details of staffing arrangements, impact on the role and number/location of Day Centres, jobs and conditions of service etc. all needed to be made clear. The consequences for the future provision for their clients attending the Day Centres was a priority concern for staff because of their level of need and vulnerability and how they do not cope well with change.

*“The people who visit Bronllwyn, although they have a choice of where to sit, they sit in the same seat, a new person will come in and ask if they are sat in someone’s seat. Familiarity is a comfort to them.”*

- Community Hubs are important but are not suitable for Service Users that come into the Day Centres who have more complex needs which change. Disability transport was also essential for Day Centre users.

### Dementia

- With an increase of people with Dementia in Society and needing Day Care, staff wanted to know how far they would need to become experts in the condition and what training and skills development they would receive. The Butterfly Project was mentioned as an approach they had heard about and some staff had experience with.

### Modernisation

- 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 and those who had visited Talbot Green had been impressed with it.

*“if my mother ever had to go into care it’s the type of place, I would like her to go”*

- The new facilities would be welcomed if they can offer more space and more choice of activities. Currently staff in some centres were restricted on activities for example there was not enough room for carpet bowls



## **Location**

- The importance of the location of Day Centres, Extra Care and Community Hubs in the future was a critical issue for staff. Issues around transport and logistics of providing day care were influenced by the location of the Day Centre.
- 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. Rumors persisted about the closure of the care home and day centre despite statements by the Council that no decisions had been taken. Because staff live locally and could walk into work there was a guarantee of continuity of service and good links with the local community.

## **Assessment and Care Management**

- It was suggested that the Assessment and Care Management for people using Day Centres needed to be revisited. The need to offer more flexibility in what was provided to meet the “What Matters to me” requirement was evident, for example when additional days/support were required. The need to go back for Panel agreement for minor changes in the care plan was felt to be unnecessary and caused delays.
- Pre assessment had been introduced into the day centres successfully to assess when clients should come into the centre and the support needed but greater clarity was required on conducting the review processes i.e. not over the telephone.
- Day centres were still not regulated by Care Inspectorate Wales and this was considered detrimental.

## **Flexibility of Day Centres**

- A more flexible approach to opening times for Day Centres was needed in the future e.g. 9am – 10 pm and on weekend and for respite services. This would increase demand for Day Centre support particularly from Carers of people with complex needs. This was supported by a detailed written submission from the Trade Union during the consultation period.
- Intergenerational programmes operated in some Day Centres with great benefits and should be built on across the Council area e.g. young people showing older people how to use iPad.

## **General Comments**

- Concern that the Council had already made their decision despite reassurance to the contrary
- Specific rumor is that one of the day centres would be closing in July
- A need to consider that the Valley communities are different
- Lots of Day centres had closed in the past – conflicting with consultation which appeared to be putting community services back in place

## Public Consultation

8.1 The Public Consultation period ran for 12 weeks from the 14<sup>th</sup> January to the 8th April 2019 and was undertaken by the Council's Consultation Unit. The questionnaire was designed by the Consultation Unit in liaison with Practice Solutions Ltd and members of senior Adult Social Services staff. It was promoted online and through social media and a paper copy was sent to all of the key stakeholders, including, residents, service users, relatives and staff. Paper copies were also available at the events in the homes and day centres, as well as the public events and on request through a dedicated contact number. A freepost address was also provided. A dedicated email address was set up. 372 responses to the Residential Services questionnaire were received and 125 responses to the Day Care Services questionnaire were received as follows.

8.2 For Care Homes, 33.5% of respondents to the questionnaire were members of the public, 26.9% were relatives of the residents, 24.2% were staff and 8.5% were residents. For Day Care, 26% of respondents were users of the service, with 38.4% of respondents being relatives, 16.8% members of the public and 8.8% staff.

8.3 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. A comprehensive analysis of the questionnaire and written responses received has been produced by the Council's Consultation Unit and is available at Appendix 3 (i). The Executive Summary of the Report is set out below.

### Residential Care

#### **Preferred Option 3: Retain a level of provision of Residential Care Homes which are focussed on providing complex care and respite.**

- 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.
- Members of the public were more likely to agree with the preferred option 3 than other respondents, with 56.7% of the public in agreement. 39.5% of staff respondents were in agreement, with a fairly high 29.1 % unsure. 44.2% of relatives agreed with the preferred option, with 40% disagreeing.

The comments received on the preferred option 3 can be summarised under a number of key themes;

- **Geographical Location (n =15)** - There was concern about the geographical provision of residential care and that the Council must ensure that there are sufficient places in local areas across RCT.
- **Rhondda Fach (n=30)** - Although there were comments in relation to specific homes and areas, this theme was most prevalent for the Rhondda Fach area, where a number of comments were made highlighting the need for provision in this area.
- **Support for Option 3 (n=62)** - There were a number of comments in support of the Councils preferred option.
- **Concerns about impact of change on residents (n=38)** - concerns about the impact change could have on current residents.
- **Disagree – No changes to current model (n=28)** - These comments largely focused on the current care provided to relatives and residents own satisfaction with the homes.
- **Concerns over private sector / Extra Care (n=36)** - concerns over the level of care provided by extra care facilities. There were also a number of comments concerning the level of care provided by the Private Sector.
- **Recognition change is needed – Re-invest in current homes (n=21)** - a change is needed. However, these focused-on reinvesting in the current homes in RCT and suggested that the provision should be extended
- **Need more information (n=20)** - Some respondents suggested that there was a lack of information provided that made it difficult to make a decision.
- **Praise for current homes (n=17)** - Throughout this section there were comments made praising the care and service provided by the councils' current residential homes and the staff that work there.

**Respondents were asked what impact option 3 would have upon themselves or their family if it was to go ahead.**

- **Impact on Resident (n=100) – Impact on Relative (n=52)** - There were concerns that they would find it difficult to cope with change and this could have a negative impact on their health and well-being. Alongside this, there were concerns about the impact the proposals could have on relatives
- **Impact to Staff (n=52)** - The prospect of potential job losses was highlighted as an area of concern for staff with effects on their financial circumstances.

**Option 1 – Continue Existing arrangements – Do Nothing**

- 46.5% of respondents stated that they agreed that this should be the preferred option.
- **Change is needed (n=64)** - agreement that there needed to be a change to the current system. There was a recognition that to do nothing would not benefit future generations and showed agreement for the preferred option
- **Change needed – Modernise current homes (n=44)** - often caveated with the preference that the homes would not be closed.
- **No change is needed (n=46)** - the current homes were suitable as they were and were meeting the needs of current residents.
- **No Change - Don't like change / Disruption (n=23)** - potential disruption any changes to the current provision may lead to and the effect this would have on residents and their families.
- **No change- Care is good (n=27)** - Coupled with the above theme, there were a number of comments made giving praise to the high level of care

**Option 2 – 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.**

- 82.9% of respondents said that this should not have been the preferred option.
- **Disagreement with Option 2 (n=78)** - there was a need for some level of council run residential care homes to remain as an alternative to private sector homes.
- **Disruption to residents (n=62)** - Similar to the proposals with Option 3, there were a number of comments made opposing option 2 based on the potential disruption any closures or move would have on current residents.
- **Concerns about Private Sector (n=29)** - There were also a number of comments made concerning the level of care provided by the Private Sector.

**Respondents were given the opportunity to provide any other comments or provide alternative proposals or suggestions.**

- **Modernise current buildings (n=20)** - the current residential care homes should be modernised.
- **Modernise current buildings- Rhondda Fach suggestions (n=29)** - There were a number of suggestions for a new build home to be built on land identified in Pontygwaith as well as other sites identified as suitable.
- **Agreement with proposal- Change is needed (n=23)** - In favor of modernization of facilities and the provision of choice to residents.
- **Disagreement with proposals (n=26)** - There were comments made against the preferred option.
- **Concerns about staff / jobs (n=7)** - Once again there were further comments made regarding the future of jobs within residential homes.

**Day Care Services**

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

- 53% of respondents disagreed with the preferred option.
- **Disruption for service users (n=22)** - Current attendees of the centres commented how they are satisfied with the current service and it meets their needs
- **Need more information (n=14)** - There were concerns that the level of detail regarding the preferred option was not sufficient
- **Praise for current Day Centres (n=14)** - In general there was praise for the services provided, the staff and the level of care received.
- **Agree with proposal (n=10)** - There was some support for the preferred option in comments that stated the proposals could open up more opportunities to people within the community to access services.
- **Agree with change – Day Centres to remain open (n=12)** - in support of a change to modernise the current system however they were opposed to closing the day centres
- **Disagree with proposal (n=9)** - the service is of benefit to users currently and uncertainty over the proposed benefits of any changes to the system.

**Respondents were asked what impact option 2 would have upon themselves or their family if it was to go ahead.**

- **Impact on service user (n=52)** - potential impact on the service user would be detrimental to their health and well-being.
- **Impact on relatives (n=28)** - The respite that is afforded to relatives whilst family members attend the day centre was evidently an important factor and comments indicated that this was a vital service in ensuring they were able to continue with their caring responsibilities at home.
- **No Impact (n=12)** - the proposals would have minimal or no impact
- **More information needed (n=9)** - Some respondents felt that the proposals did not provide enough information to be able to make a judgement on the options.
- **Impact to Staff (n=7)** - possible impact and changes would have on staff.

**Option 1 - Alternative Options – Continue Existing Arrangements – Do Nothing**

- Respondents were asked if option 1 should have been the preferred option. 48.3% of people agreed and 36.4% disagreed with the proposal to do nothing.
- **Agree- No need to change (n=35)** - the service is currently meeting the needs of its users and therefore no change is required.
- **Disagree – Change needed (without closing day centres) (n=22)** - There were suggestions made to modernise the current day centres and amend opening hours

This report was produced for the Council by:

Practice Solutions Ltd

Abercynon

April 2019