

## Summary of Surrey County Council older people's homes: summary of consultation feedback and response

### 1. Introduction

A fuller report is available on Surrey County Council's website <http://new.surreycc.gov.uk/social-care-and-health/care-and-support-for-adults/get-involved/cabinet-to-decide-on-future-of-councils-older-peoples-homes>

This is a high level summary of the consultation responses to the four options outlined in the consultation on the future of the six homes and the comments that people made in relation to them. There was also an opportunity to make suggestions other than the four options and these are also included.

The four options in the consultation were:

Option 1 - Stay 'as is'

Option 2 - Extend and refurbish or redevelop the home

Option 3 - Sell or lease the home to another provider

Option 4 - Support residents to move to another appropriate service and close the service

### 2. The consultation feedback overall

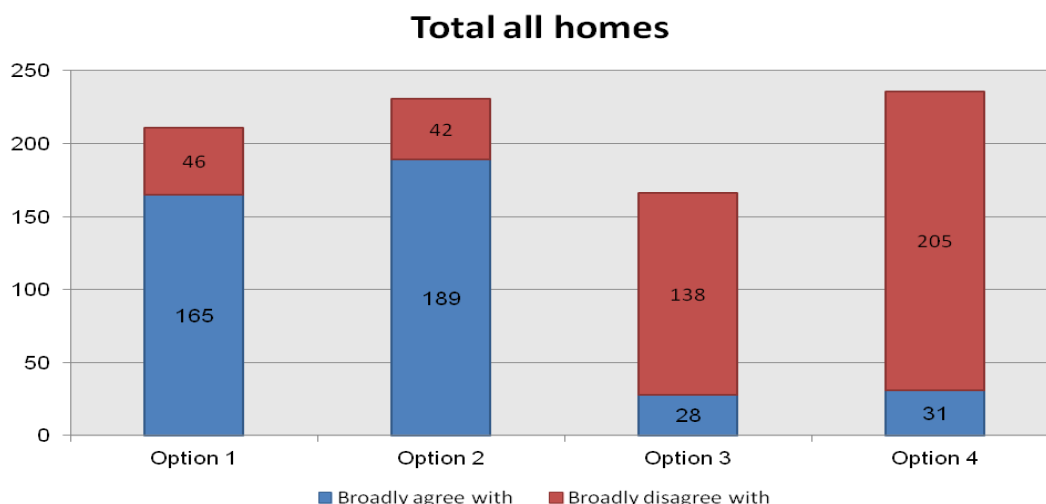
A total of 143 responses were received through the "Surrey Says" website. 196 paper questionnaires were received. 131 responses were received through email / letter/ phone call from individuals and organisations, making a total of 470. Meetings were held with individuals using the services, their relatives or next of kin, staff and other stakeholders.

The biggest single group of respondents were relatives/friends and carers of those using the homes services. The second biggest group were staff at the homes.

Some people chose to comment on all of the homes as a group, while most people chose to comment on a specific home.

Graph A below reflects the total number of people responding to the consultation, regardless of which home they commented on, who broadly agreed or disagreed with each option.

**Graph A:**



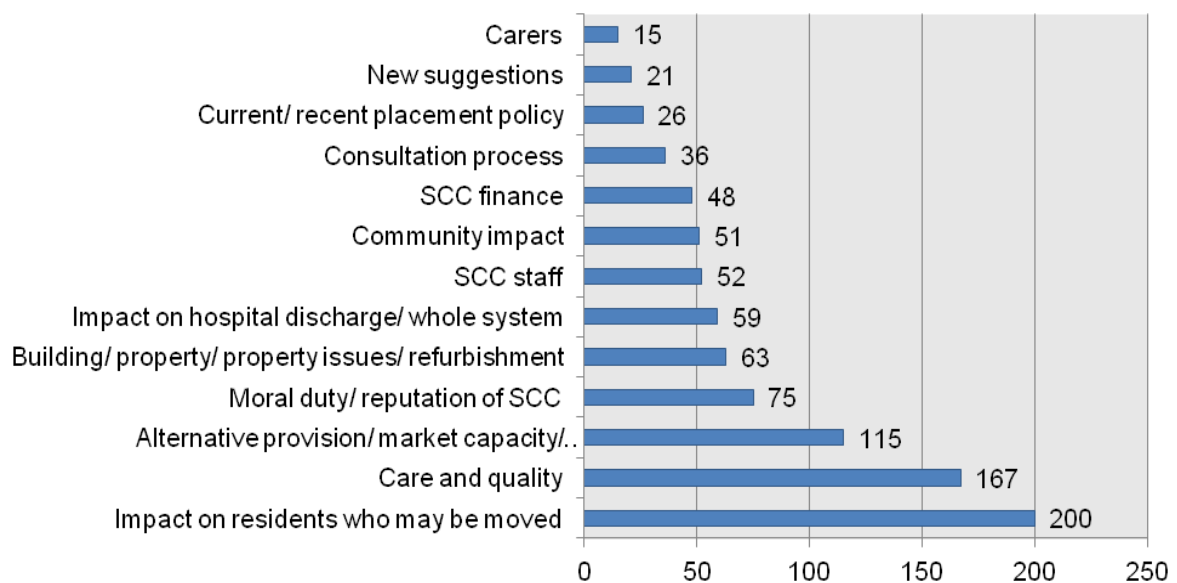
It should be noted that 'Broad agreement or Broad disagreement' has been inferred from the comments made in relation to each option.

Free text comments received during the consultation were thematically coded, and their relative frequency is listed below.

Graph B below shows the total number of comments relating to each 'theme'.

### Graph B

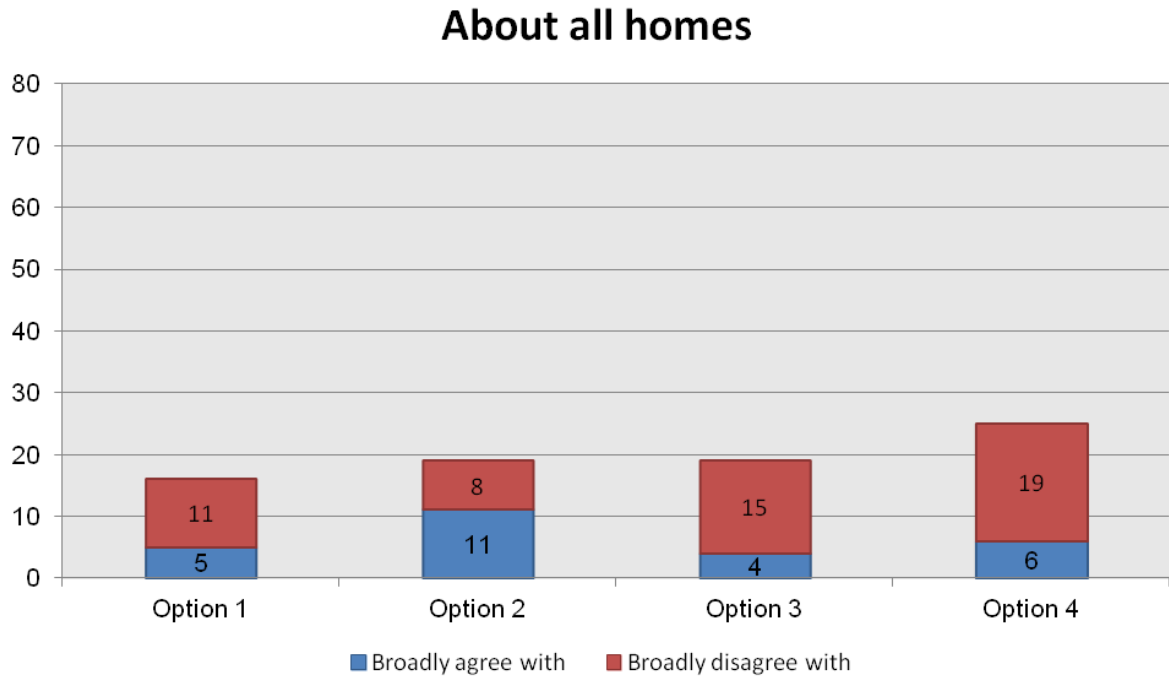
## Themes expressed in free text comments - Total comments



3. What people said when commenting about all of the homes and not a specific home.

Graph C below shows the number of people, who responded about all of the homes, who broadly agreed or disagreed with each option.

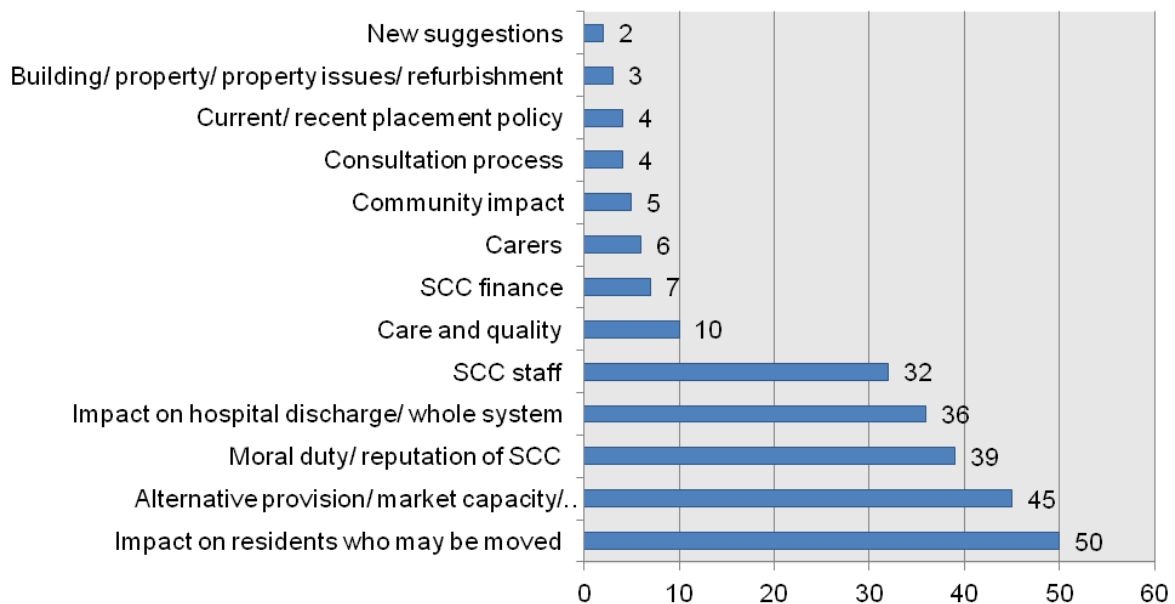
**Graph C**



Graph D below shows the number of comments relating to each 'theme'.

**Graph D**

### Themes expressed in free text comments - All



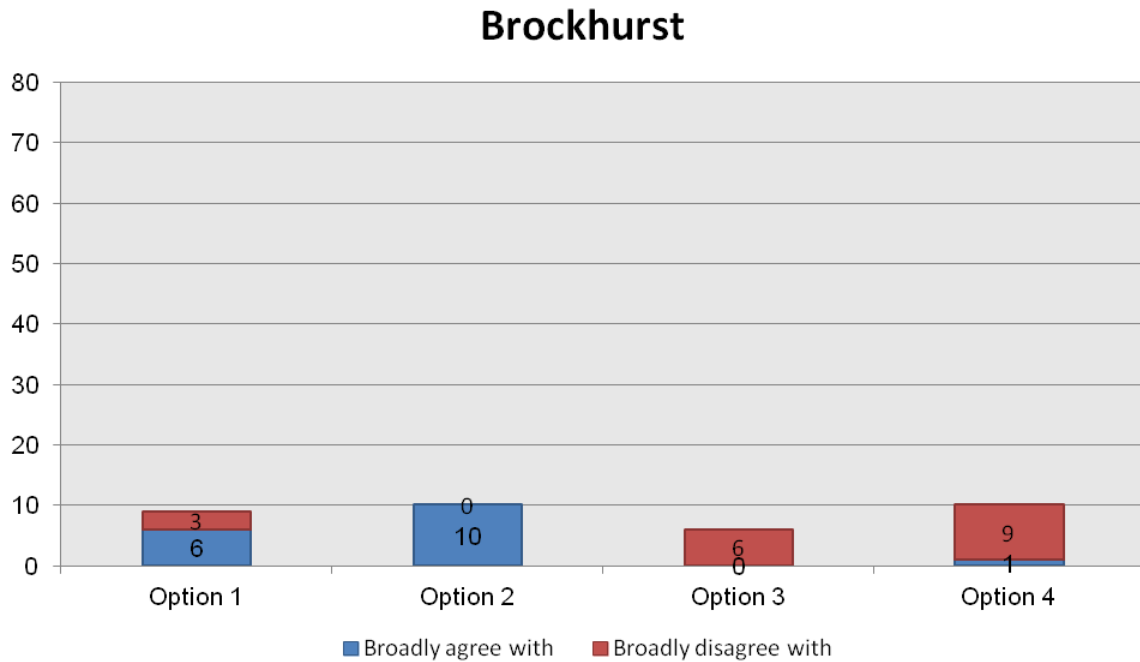
Below is a small example of the comments made in relation to each option.

<b>Option</b>	<b>Example Views/comments</b>
<b>1</b>	The need for property improvements is recognised, and expressed disappointment that there had been insufficient investment to support the provision of these beds, given that this would reduce capacity for the increasing and ageing demographic
<b>1</b>	With reference to care and quality - one respondent supportive of this option referred to the CQC "Mums test" – they would prefer a small friendly home and care quality being more important than ensuite facilities. Another also referred to the "Mums test" saying relatives are happy for their relatives to be living at the Surrey County Council home because of the high quality of care at the Surrey County Council care homes
<b>2</b>	The consultation did not detail an option of extending or redeveloping one or more of the sites in a phased approach. It was also suggested that property improvements that maximised the use of the current plots with multi floor options rather than the current single storey facilities.
<b>2</b>	Disagreement was on basis of capital costs too high
<b>3</b>	As regards the property it was suggested that no other provider would want the homes it would just transfer the problem - easier to knock down and rebuild; not an attractive investment opportunity, at least not for social care might be redeveloped for other uses
<b>3</b>	One organisation supported this option – it would allow modernisation of transferred properties at new provider expense and the Council could then specify future specialist bed requirements, avoids redundancy costs and reputational damage, retain/increase capacity, and some capital receipts
<b>4</b>	People expressed concerns about potential stress and trauma of moving people, which should be carried out with a lot of professional help and support
<b>4</b>	Concern expressed for specialist services provided within Surrey County Council homes e.g. respite, day care, and cancer care.
<b>Other possible options</b>	Donate homes to a charity and let them lease the buildings at no cost provided the charity covers running costs. If the charity closes the home in future give the property back to Surrey County Council
<b>Other possible options</b>	Create space by maximising current plots and consider multi floor options, homes not at capacity so this could be done. Explore option of selling to another provider after redevelopment.
<b>Other possible options</b>	Feedback was received from a provider who would be interested in exploring how they could work with Surrey County Council to use all sites in future to continue to provide a model of residential care for older people.

4. What people said when commenting about Brockhurst.

Graph E below shows the number of people, commenting about Brockhurst, who broadly agreed or disagreed with each option.

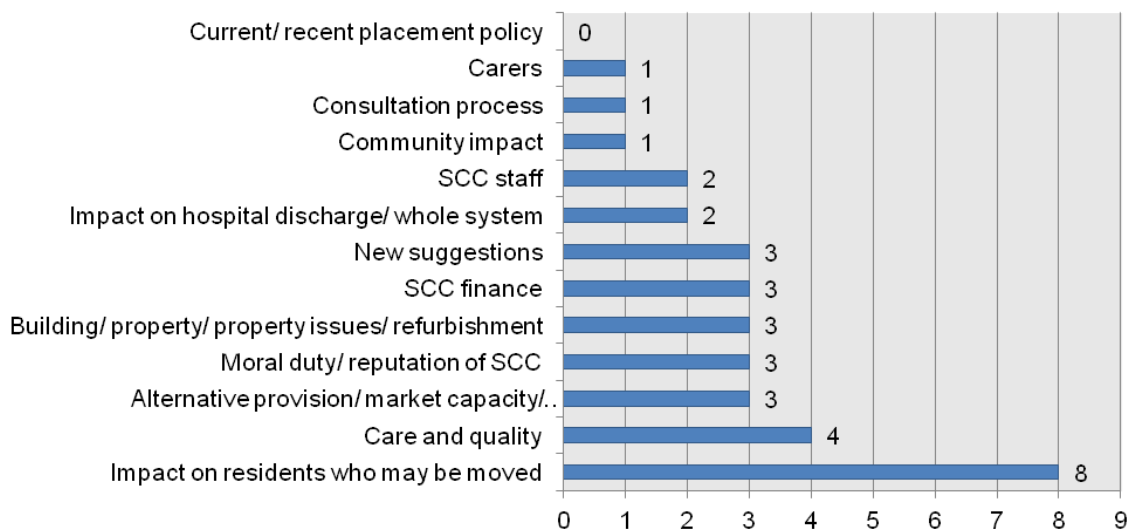
**Graph E**



Graph F below shows the number of comments relating to each 'theme'.

**Graph F**

### Themes expressed in free text comments - Brockhurst



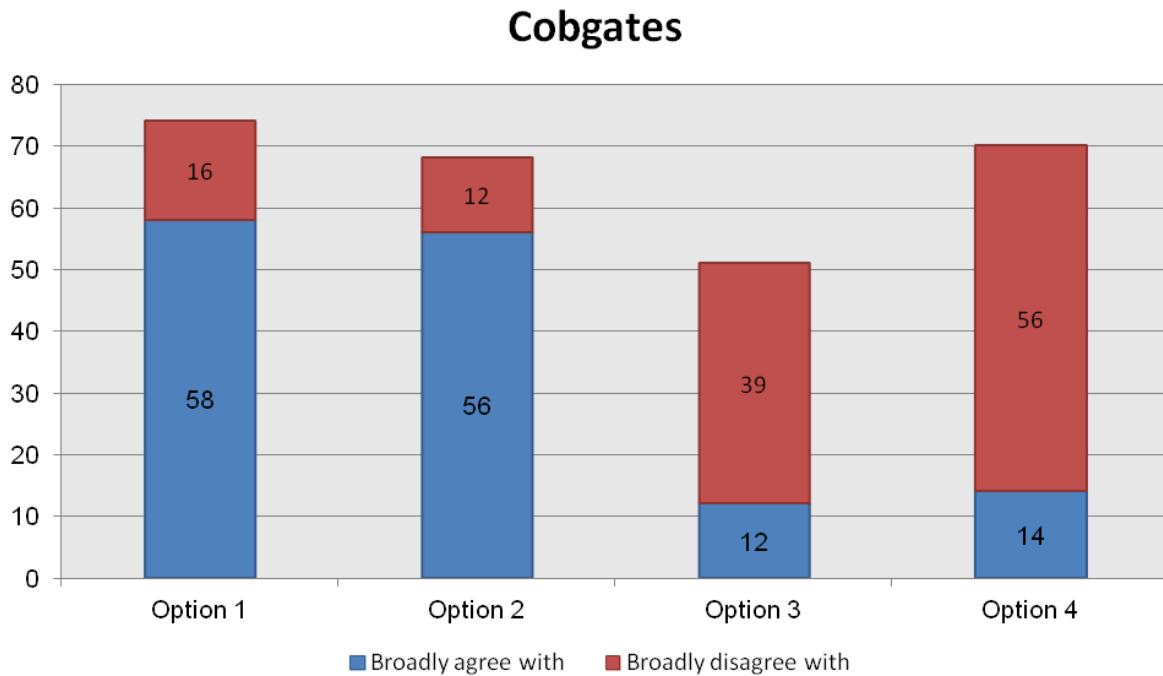
Below is a small example of the comments made in relation to each option.

<b>Option</b>	<b>Example Views/comments</b>
<b>1</b>	Respondents generally challenged the Surrey County Council case for improving the building and bathroom facilities, though one respondent acknowledged the rooms are small and another that homes can't run if they become "inadequate" in the eyes of CQC.
<b>1</b>	Comments were made about alternative provision and market capacity , suggesting that private care homes are sometimes more "choosy" about who they will look after, they may refuse to admit people with complex needs and can be expensive.
<b>2</b>	This would be a long term investment which would be expensive but fairer. Others said it would be cheaper than moving residents to a new home and would be less unsettling, it was also said that people will continue to need care homes as living alone can be lonely.
<b>2</b>	As regards the building, one respondent was concerned about whether the existing building footprint could sustain redevelopment. Others noted the home had already been refurbished, others said Surrey County Council had not maintained the homes properly and now residents were being "penalised".
<b>3</b>	Other providers would have the same challenges as Surrey County Council so this option would not be viable. Another thought if chosen this option would increase the cost to residents
<b>3</b>	Some homes are located near a hospital and are suitable therefore for respite and reablement, lack of which might impact negatively on the wider health and social care system. In this context concern for the impact on carers was also mentioned.
<b>4</b>	One respondent described their own negative personal experience three years ago and was supportive of the option to close
<b>4</b>	This would cause trauma, upset and confusion, it could be stressful and residents could end up in a worse home. Respondents were concerned that people with dementia might take a long time to get orientated in a new place.
<b>Other possible options</b>	one respondent referred to the need for more day centres – possibly to use Brockhurst as a day centre, and that ASC can struggle to move temporary residents into permanent placements as they are not always available, and that private homes often release self-funded clients once their money runs out.
<b>Other possible options</b>	Consolidate two redeveloped care home sites and sell the other four. Also suggested was that bedrooms could be knocked together to make larger rooms.
<b>Other possible options</b>	An organisation identified that they would like to develop extra care on the site.

5. What people said when commenting about Cobgates

Graph G below shows the number of people, commenting about Cobgates, who broadly agreed or disagreed with each option.

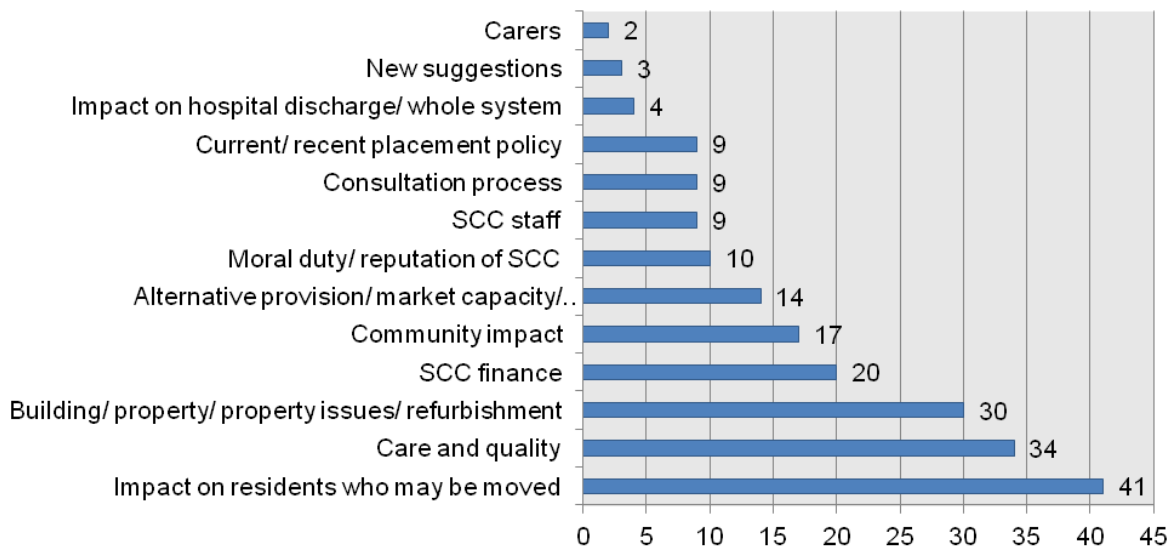
Graph G



Graph H below shows the number of comments relating to each 'theme'.

Graph H

### Themes expressed in free text comments - Cobgates



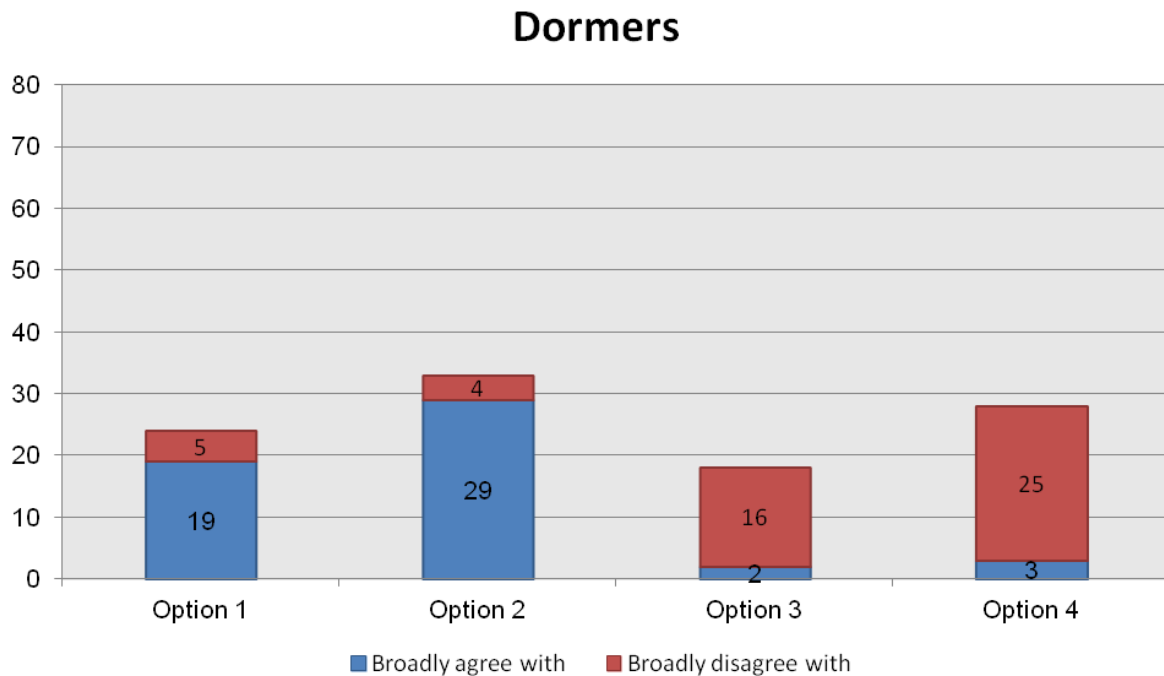
Option	Example views/comments
1	There was concern expressed about the impact on residents, of any decision to close, and queries about how this would be managed; residents would find a move “traumatic”. Residents had made friends and regard Cobgates as their home. There was concern that those with dementia would be further confused and display more challenging behaviour if they were moved and unsettled
1	The home is close to town and this is valued for ease to access for relatives, as well as taking residents into town.
1	One person suggested that the building is not “fit for purpose” and should not stay open. Another thought the building had a “foreboding feeling” and should not stay open
2	Favoured option as Cobgates meets needs for emergency respite, permanent care, memory clinic, drop-in centre. It appeared that some respondents thought Cobgates was specialist dementia facility or that it provided nursing care and should be kept for those purposes
2	Some disagreed with this option mostly on the grounds of the impact on residents – it would be too disruptive.
3	The Council should keep direct provision, it has operational competence and must protect against future situations in which it may be “at the mercy of the market” ie pay higher prices.
3	One respondent said it would be a better option than closure but were concerned that a private provider would not be as flexible with the range and type of provision offered.
4	Closing the home and finding other services for people is the best option for residents who deserve to spend their years in caring comfortable and pleasant surroundings
4	The view was expressed that it was ‘done and dusted’, foregone conclusion; thoughts and feelings of staff and residents not considered
4	A number of staff expressed the challenges they face in delivering suitable care in the current environment
<b>Other possible options</b>	Feedback was received from a provider who would be interested in exploring how they could work with Surrey County Council to use the site in future to provide an alternative care model for the elderly in Farnham
<b>Other possible options</b>	Creation of private beds to generate income, open a day centre at Cobgates for people with dementia to support carers to have respite and also generate income. Consider providing rehabilitation.



6. What people said when commenting about Dormers

Graph I below shows the number of people, commenting on Dormers, who broadly agreed or disagreed with each option.

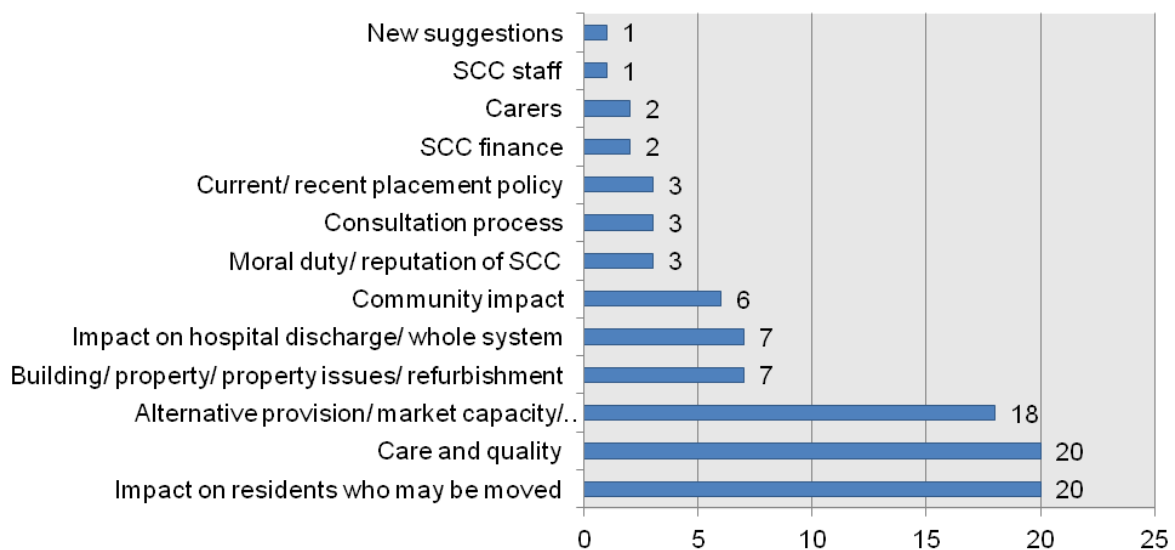
Graph I



Graph J below shows the number of comments relating to each theme.

Graph J

### Themes expressed in free text comments - Dormers

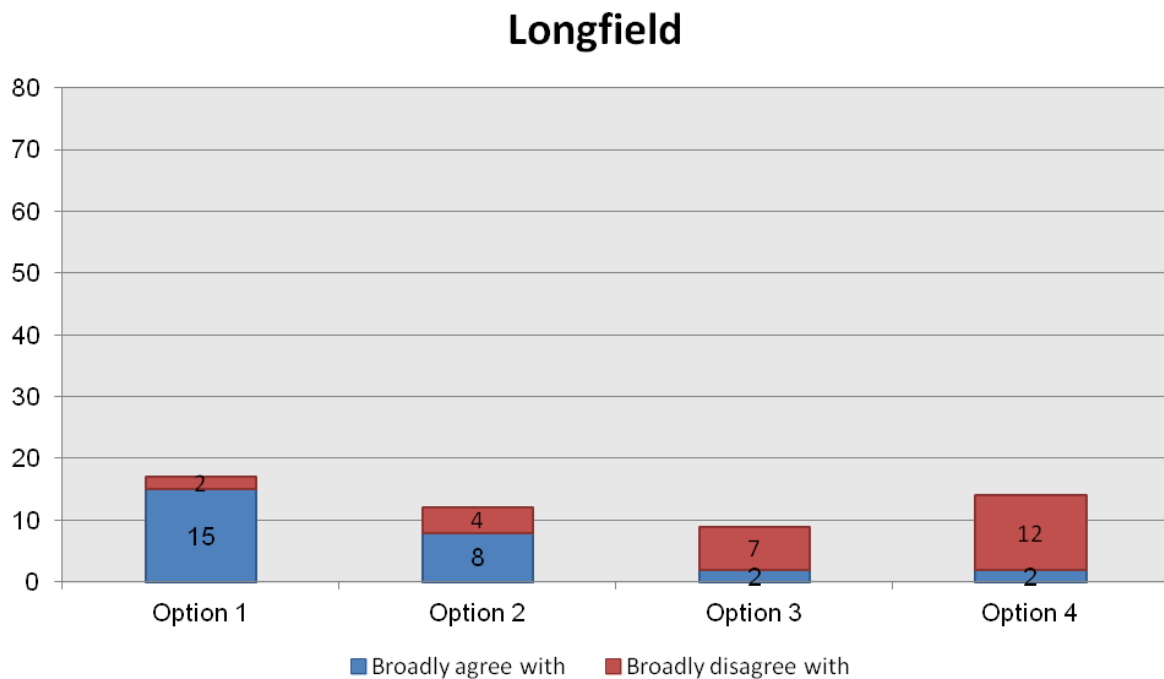


<b>Option</b>	<b>Example views/comments</b>
1	Reference was made to market capacity, including specialist provision (St Catherine's) and increasing demand in future. There was concern for the impact on residents should they be moved, that people with dementia would be particularly affected and the excellent quality of care provided at Dormers would be lost.
1	Respondents acknowledged a lack of space, but thought that current client's needs were met and thought that the respect, care and loyalty of the staff was more important than the property issues. The needs for hoists in every room was challenged, and suggested that Dormers was purpose built for residential care, but had taken on more people needing nursing care. If kept for residential care it would be OK.
2	Some respondents acknowledged that the property needed improvements to support safer moving and handling, with suggestions about knocking rooms together, and repairing gutters which might be related to the subsidence problem. Perhaps an extra storey could be built.
2	Additional space could be created by maximising the current plots and considering multi storey options instead of the current single storey.
3	It was suggested that one home be put out to tender to test what happened
3	Providers would essentially have the same problem and would have increased costs as a result, so there would be no long term advantage.
4	There was concern for Dormers as a community facility that enabled carers to keep full time work whilst their person is in day care, as well as respite care – with a view to permanent admission when needed. Others were concerned about carers having to go further to visit.
4	Concern about this option was expressed on the grounds of the impact on the community, the residents, future needs, with the demographics being ageing and increasing, and the impact on whole systems including acute hospitals.
<b>Other possible options</b>	"The site must be used ethically when Dormers is demolished. If I had the money I would build a new small Hospice on the site. "
<b>Other possible options</b>	A comment on Dormers and Park Hall together: Suggested additional space could be created by maximising the current plots and considering multi storey options instead of the current single storey.
<b>Other possible options</b>	Feedback was received from a provider who would be interested in exploring how they could work with Surrey County Council to use the site in future to provide an alternative care model for the elderly in Caterham.

7. What people said when commenting about Longfield

Graph K below shows the number of people, commenting about Longfield, who broadly agreed or disagreed with each option.

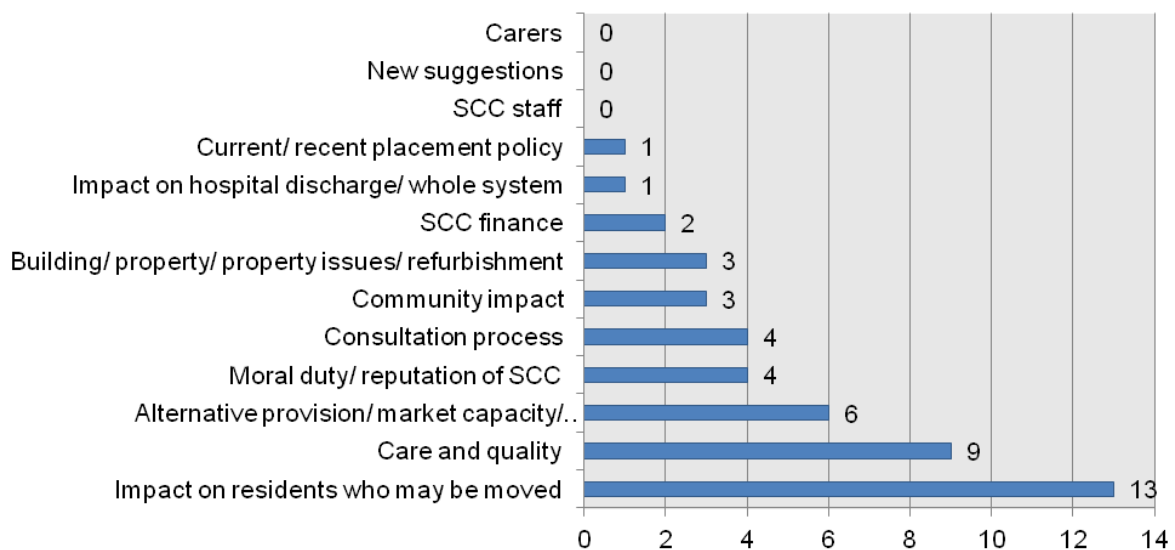
**Graph K**



Graph L below shows the number of comments relating to each 'theme'.

**Graph L**

### Themes expressed in free text comments - Longfield

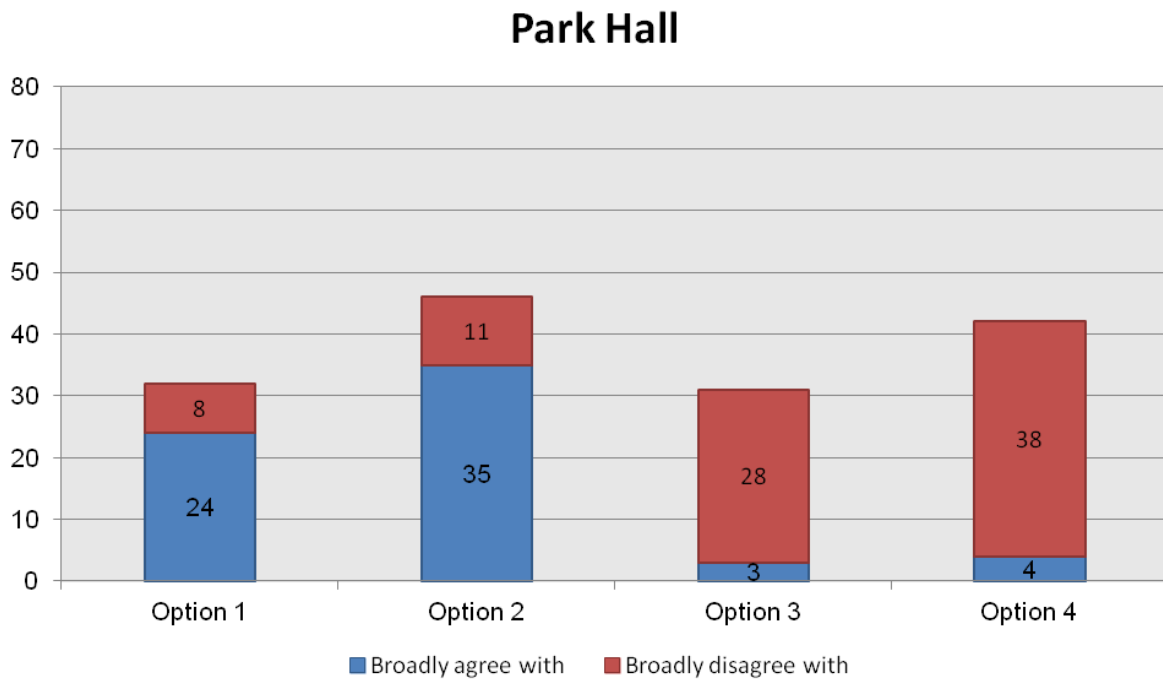


<b>Option</b>	<b>Example views/comments</b>
1	Most residents have advanced dementia with limited quality of life, but the atmosphere is one of comfort and security, this is more important than facilities.
1	"Wait until all the residents have passed away"
2	The building would have to have extra storeys.
2	This is a good option for the local community.
3	Residents with dementia would be spared trauma of being moved
3	A new provider wouldn't provide emergency respite.
4	Clients from each home should be moved together with familiar faces.
4	This is the worst option for residents and families especially when people have dementia.
<b>Other possible options</b>	Buy land near to existing homes by selling the current sites.
<b>Other possible options</b>	Longfield staff should visit residents in their new homes until they are settled.
<b>Other possible options</b>	Feedback was received from a provider who would be interested in providing an alternative care model for the elderly in Longfield.

8. What people said when commenting about Park Hall

Graph M below shows the number of people, commenting about Park Hall, who broadly agreed or disagreed with each option.

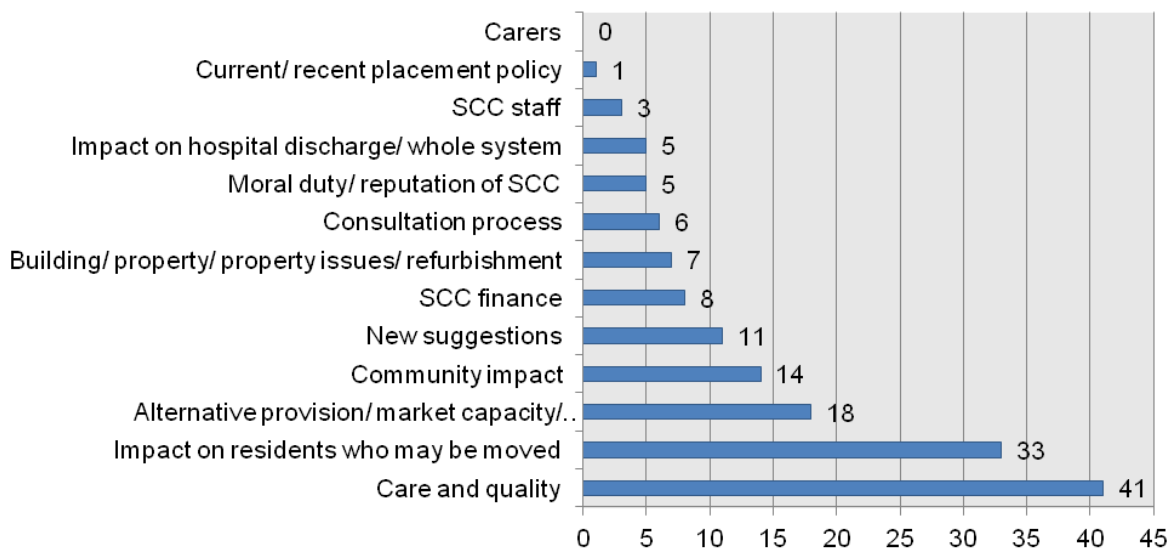
Graph M



Graph N below shows the number of comments relating to each 'theme'.

Graph N

### Themes expressed in free text comments - Park Hall

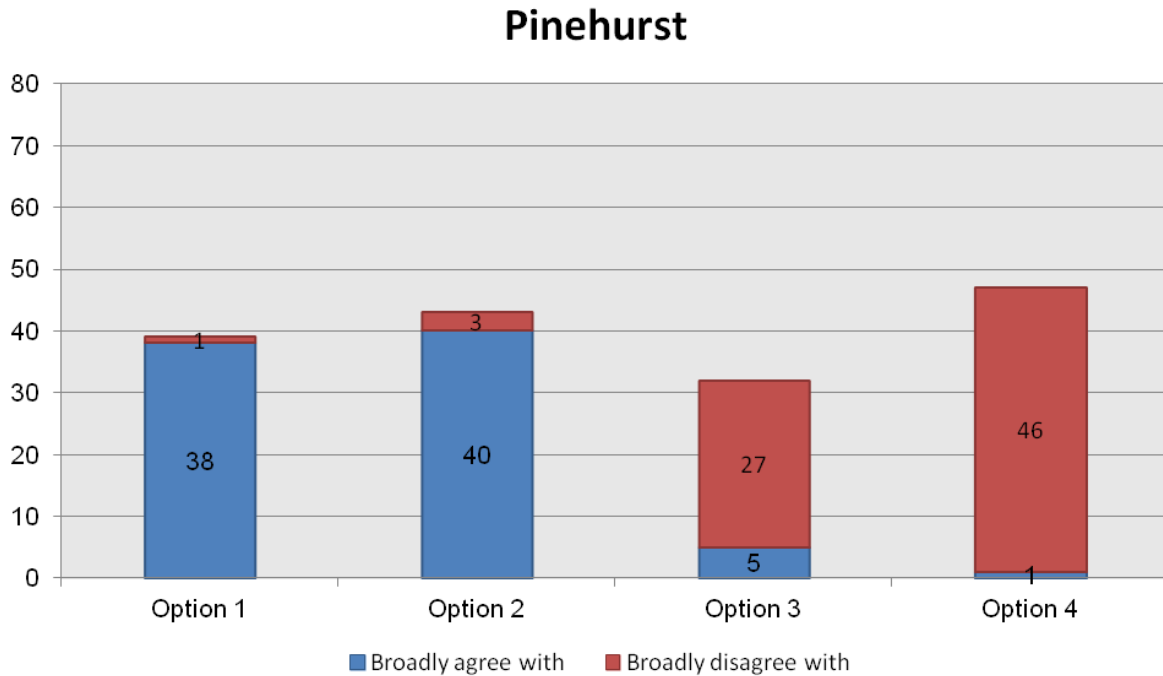


<b>Option</b>	<b>Example views/comments</b>
<b>1</b>	Park Hall has offered residents opportunity to live in small “family” units and to bring in people from the community who are isolated to help them stay at home. This is a standard of care not seen in the independent sector very often. There are so many bad homes. Park Hall is a good one. People value the community environment, and the range of services offered.
<b>1</b>	“The environment, care and understanding of the needs of people with LD and dementia is below the standard expected”
<b>2</b>	Redevelop the site to enable residents to have ensuite, greater privacy, extend day care / respite – latter is valuable resource
<b>2</b>	My relative was at Park Hall and one unit was closed much of the time for subsidence – also in other Reigate properties. Council / insurers did very little to remedy. Upgrading not needed, high quality care and activities more important than state of the art.
<b>3</b>	Would also cause stress because residents know current staff
<b>3</b>	Would support if the staff get “tupe’d across”, if the new provider can do the refurbishment
<b>4</b>	A respondent said this was their preferred option but would need to be done carefully to avoid deterioration in residents abilities
<b>4</b>	Many Park Hall residents have already been moved from their homes to hospital and then Park Hall. People with Dementia take time to adjust. They now trust staff and feel secure, and have friends. It would be too stressful to move them, many are over 90.
<b>Other possible options</b>	Take in private clients, explore local authority trading company option or open as a community centre for people with dementia.
<b>Other possible options</b>	Update and refurbish Park Hall and Pinehurst, move people from other homes into them.
<b>Other comments</b>	A small number of relatives expressed they had explored a range of alternative provision in the area, and were not satisfied that the alternatives are as good as Park Hall in environment or quality of care.

9. What people said when commenting about Pinehurst

Graph P below shows the number of people, commenting about Pinehurst, who broadly agreed or disagreed with each option.

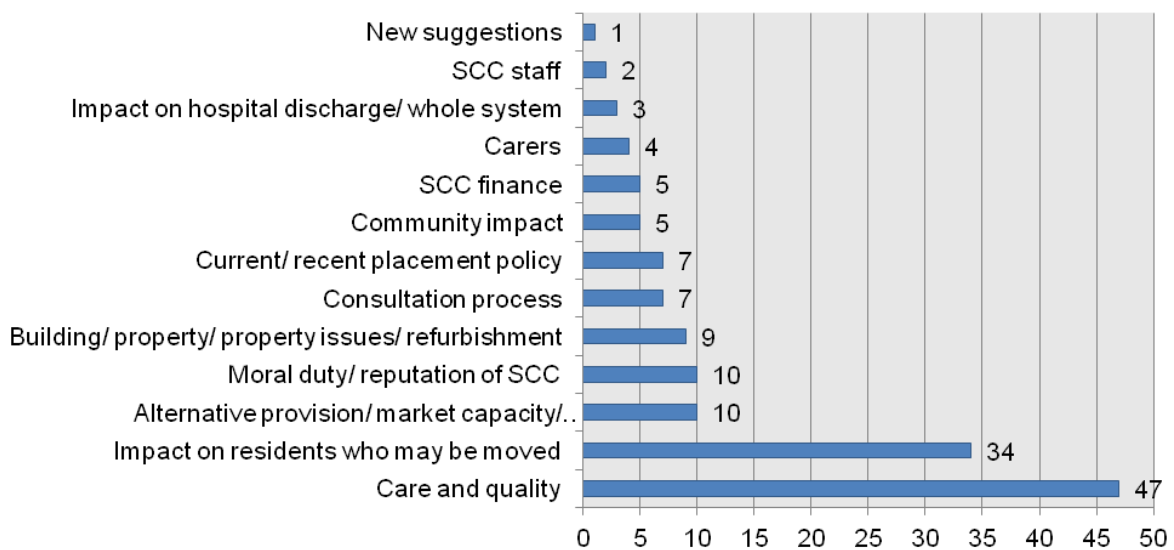
Graph P



Graph Q below shows the number of comments relating to each 'theme'.

Graph Q

### Themes expressed in free text comments - Pinehurst



<b>Option</b>	<b>Example views/comments</b>
1	Disagree that Pinehurst is beyond its lifespan – plenty of space to expand.
1	Pinehurst has local connections which mean that close by is a good surgery and there is also transport into town for visitors and family
1	There is concern about potential impact on carers of closure as they are dependent on day time and respite care offered, which supports them to maintain their caring roles.
2	A figure of £3.9m to improve sluices bathrooms and toilets is small amount for a much needed service that provides excellent care.
3	Other providers would not provide such good care, we do not want to use them. There is also not enough local capacity.
3	Concern was expressed regarding this option of the impact on residents, especially those with Dementia
4	This option will only be for permanent residents not for those using day care which is a life saver for my relative.
4	Many people are not “complex” enough to go into nursing care but who do not have the family support to help them at home. The homes meet this need.
<b>Other possible options</b>	Extra-care housing is now available in 8 out of the 11 Boroughs and Districts in Surrey but not in Surrey Heath. Has the Council considered targeting the future use of the Pinehurst space towards private residential housing schemes that include extra-care housing? It would increase the housing options to people within Surrey Heath and provider greater equality of provision across the County.
<b>Other possible options</b>	There remains a need for urgent and emergency provision (eg where private care home immediately closes)- this is easier to do within County provision. More people have dementia, day care extends how long people can stay at home. Pinehurst has a wonderful day unit and it could take more who would benefit.



## **Summary of themes and concerns expressed in the consultation and Surrey County Council responses to them**

The majority of respondents said they understood, or partially understood, why the future of the care homes was being reviewed. A large majority also said they understood the reasons why Option Four (closure) was the council's preferred option. Comments suggested that most disagreed with the council's preference. Options Two (extend/refurbish or redevelop) and One (keep services as they are) received the most support.

Respondents were invited to say which of a list of features of a good quality care home they thought were the most important. Feeling safe, being treated with respect, and helpful and caring staff were considered the most important features. These preferences were also reflected in the main themes and issues raised by respondents. These are summarised below, together with the council response.

### **1.a. Impact on Residents Who May Be Moved**

Many respondents expressed concern that, if closure goes ahead, there would be a detrimental effect – physically, emotionally and socially - on current residents, as well as their families, when being moved to alternative services. Some thought this may result in death for the resident. Some cited research that the impact would be greater for those with dementia, and gave suggestions on how to mitigate e.g. support from staff to help the person settle. Others said that we should wait for residents to pass away within the Surrey County Council home, and not move anyone until the home was then empty. There was also concern that moving to alternative provision would affect the ability of family members and friends to keep in contact, for example if they had further to travel (especially for those who don't drive).

### **1.b. Surrey County Council response**

The welfare of residents will be the primary consideration in the event of any home closure. It would be approached in a planned and carefully managed way over a period of time, and in line with national best practice guidance. This would include the involvement of residents, families, friends and staff from the closing home.

Each resident and their family will be supported by a Social Care Practitioner who will assess individual needs and discuss preferences, and help to choose an appropriate alternative service. This will take into account specific issues such as long standing friendships. The council have experience of achieving this with previous home closures. Where appropriate other care professionals including health staff and GPs will be involved, as will staff from the closing home, who as far as possible will support each resident's transition into an alternative service.

It is acknowledged that there are risks with moving any person, including planned moves. The council has a lot of experience of moving people out of homes as it is part of core business, for example, as care needs change, if a resident is moved to a home that is more local to family and in an emergency situation.

Residents without the capacity to understand the decisions relating to the changes, who do not have the support of family or an attorney, will be supported by an Independent Mental Capacity Advocate (IMCA) with decisions required in selecting and moving to a suitable alternative service.

The council will ensure the person moves with their personal possessions to help their surroundings feel more familiar and consistent as soon as possible when they move. The

council acknowledge dementia affects every individual differently and uniquely and will support people using best practice guidance appropriately.

Best practice does not recommend leaving someone in a care home as the last remaining resident. A home becomes less appealing the fewer residents that live there. In addition there are challenges with operating a home that is emptying, including a depleting workforce.

### **2.a. Care and Quality**

Many people commented on the excellent care and good quality service delivered at Surrey County Council homes. They said this was more important than buildings and facilities, and that it was important to recognise and value the caring and respectful relationships that had developed between staff and residents, at the homes.

Many people expressed concerns that a similar quality of care cannot be delivered by providers within the independent care sector. It was felt that staff are not as well trained, there is higher turnover, and that the council is not as well able to regulate quality in the independent sector. Some respondents quoted media coverage of failing care homes in the independent sector, and some talked of their personal experience.

### **2.b. Surrey County Council response**

The council is proud of the level of care its staff provides to residents. However the quality of care would be improved in more suitable buildings, including larger room sizes to allow for moving and handling, where necessary. Maintaining the quality service will become more difficult in the future without addressing the challenges the buildings present.

Surrey County Council's Adult Social Care Commissioning Strategy for Older People 2011 – 2020 identifies shifting demographic pressures and changes in the complexity of needs to be met. Care environments must be safe and effective and facilitate high quality care, now and in the future. Dignity in care is itself a marker of quality that the council seeks to commission.

Any required consideration of alternative placements for individuals will be informed by assessment information and conversations with individuals, their families and others important in their care, to establish their needs and preferences

All residential and nursing care provision, regardless of who provides it, is subject to the same Care Quality Commission (CQC) standards and inspection. The council is committed to quality services which deliver dignified care across all sectors. Support Plan reviews and any safeguarding activity also provide an oversight as to the quality of care provided. Learning from safeguarding is disseminated with providers through forums and Surrey Safeguarding Adults Board.

A "task and finish" group is currently working to ensure that high standards of care are maintained across Surrey through the sharing of information received from the public and professionals. The council work to assist any provider that may be experiencing difficulty in achieving and maintaining adequate standards of care and to ensure that residents are safe and treated with dignity by providers.

The Surrey Skills Academy invests in training for the local care market. This includes specialist training such as dementia care and safeguarding as well as managerial skills. Regular care home fora are held for best practice sharing and information provision, and to ensure that training offers are focussed on what the market needs. There is a good take up of this training across the market within Surrey.

CQC guidance is focussed on delivering dignity in care and the current facilities within the homes do not support this. The challenge is about adequate privacy and access to facilities when needed, and for appropriate infection control.

All 6 homes are currently compliant with care home regulations in terms of 'environmental standards', in line with the dates they were constructed, although there was an historical non-compliance issue in respect of adequate infection control in one of the homes which has since been addressed. This related to the equipment and where sluice facilities were sited. This remains a challenge across the homes.

It is true that from time to time there are media reports highlighting examples of poor practice, and there have been a handful recently involving homes in Surrey. In these few cases the CQC were involved and are only a fraction of the number of independent care homes in Surrey. The media tend to focus more on homes where things go wrong, and never report on the vast majority of homes without such issues; thus creating a distorted picture.

### **3.a Alternative Provision, Market Capacity and Demographic Issues**

Some people commented that Surrey has an increasing and ageing demographic, and that there will be more people living with dementia and it's associated health and social care needs in future. There was concern that closing Surrey County Council care homes would have a negative impact on the market's capacity to meet current and future demand.

Respondents were concerned about market capacity with reference to residential care homes generally, and also homes offering good dementia care. Other specialist services were also a matter of concern; including planned and unplanned respite care, local respite care (so that the residents own GPs could attend), day care that caters for people with dementia and people with personal care needs. There was concern about continuing provision for services currently visiting Surrey County Council care homes, including district nurses, chiropodists, hairdressers, local GPs, and the specialist hospice services currently located at one care home. There was recognition of the value of the Surrey County Council home as a community resource that met social care needs locally, with some additional services such as a "pop-in" support group, or memory clinic.

It was noted that some homes are located near an acute hospital and able to support with hospital transfer. There was some concern expressed about the capacity of other providers to receive new admissions from hospital swiftly, as well as the provision of reablement services to support people leaving hospital, thus impacting on "whole systems".

Any reduction in these additional services would impact negatively on carers.

### **3.b. Surrey County Council Response**

There are 6490 residential care beds currently registered across the county (as at 29/01/15). In the past year 263 residential care placements and 857 nursing placements have been arranged in the independent sector and 905 block contract beds have had high utilisation. There have been 295 respite spot placements made in the independent sector. During the 3 month of consultation this year there has been 68 residential and 197 nursing spot placements arranged in the independent sector. In addition to these placements, there will have been many more people who fund their own care entering residential care homes in the independent sector during these times. This means that in most places, at most times, there is the capacity needed to meet the demand of council funded clients.

Between March 2012 and January 2015 the trends in Surrey show a net gain of 455 registered residential and nursing beds, with over 200 additional nursing and residential beds due to be available by the summer of 2015. In addition, there has been a growth in extra care schemes, and plans to develop additional schemes.

91% of the council placements into residential care homes are made with the independent sector, with the remaining 9% in the council's residential care homes for older people. The council has been successful in working with the independent sector care market to source residential care at agreed rates in line with our Adult Social Care Commissioning Strategy for Older People 2011 - 2020. When negotiating with providers the council aims to commission at these rates, but there may be circumstances related to the needs of specific individuals where a different rate is agreed.

The Adult Social Care Commissioning Strategy for Older People 2011 – 2020, and supporting Market Position Statement for Older People's services, outlines Surrey County Council's vision as to what services it needs to commission to ensure services provided deliver dignified and flexible solutions and meet future needs in appropriate settings including the community. The council is continually revising its commissioning plans to address emerging trends and legislative changes, including the Care Act, to encourage the care market to develop services in areas where supply may not meet local demand.

A list of registered care homes was made available within the Supplementary Information published on the council's website in December. It gives a snapshot of alternatives on the given date and has been amended. The council has ongoing conversations with the residential and nursing care market, so there is scope for this list to grow further.

Should a decision be taken to close one or more of the six homes specific work with the local care market around available options and agreeable rates will be undertaken. This will be informed by conversations with individuals, their families and others important in their care to establish needs and preferences when considering alternative provision. If individuals are interested in alternatives outside Surrey, there will be the opportunity to discuss this during assessment conversations with care practitioners.

Surrey County Council continues to work closely with Clinical Commissioning Groups (CCGs) and local providers to ensure commissioned services, which meet current and future needs, are flexible, including evening and weekend services to help prevent hospital admissions and facilitate early hospital discharges.

The importance of day care services for those who use them, specifically on a frequent basis is recognised. Commissioning analysis has identified potential alternative services, and suitable plans to develop further options. Any commissioning of alternatives will be informed by conversations with individuals, their families and others important in their care to establish needs and preferences.

Due to changing needs around day opportunities, and to meet future needs, a day opportunities tender will be published late Spring/early Summer 2015, which is likely to result in new flexible alternatives being available. This will seek flexible community day opportunities across Surrey, and is likely to provide viable alternatives for people using council residential home day care services.

Block contracts are in place for day opportunities within residential care homes as part of our residential homes block contracts. Grant arrangements support District and Borough day services to enable meeting of personal care needs, and in areas where personal care needs cannot be met in these services, discussion is underway as to how this may change. Maps

indicate a wide range of community provision which may meet the needs of some currently using in-house services.

At present there is a noted gap for day opportunities meeting the needs of those with dementia and with personal care needs. This will be addressed through the steps noted above.

Surrey County Council has been the landlord for the arrangement with St Catherine's hospice day service for over five years. The importance of the service in the area is recognised. During the consultation the council have been talking with St Catherine's and East Surrey CCG around potential alternatives should the Dormers property close. All parties have been committed to identifying a local solution should this be needed, and there is a potential alternative property for St Catherine's day hospice service in early stages of planning.

#### **4.a Reputation and responsibilities of Surrey County Council**

Some respondents expressed a view that Surrey County Council has a duty to continue to directly provide residential care for older people, and that by closing its homes it was therefore neglecting its duty to meet care needs in this way. Others saw the council as the provider "of last resort", being able to respond flexibly to emergencies. It was also said that the Surrey "brand" is trusted and respected by Surrey people.

#### **4.b Surrey County Council Response**

Surrey County Council (like other councils) is looking at more effective ways of providing services, including reviewing its role as a direct provider of services. The council's statutory requirements are to assess needs and secure provision for those eligible for services. Council run homes across England have closed or are closing. Councils are not as free to operate commercially as independent providers.

Social Care Practitioners will continue to support people who use services regardless of who their service provider is.

As a responsible provider the council need to address the environmental shortcomings of its buildings. The independent market has already developed the more modern facilities necessary to provide the level of care required in future. The council's homes are not in a position to be able to meet these new standards.

#### **5.a Refurbishment, Property and Land Issues**

Many respondents consider the current buildings to be adequate, and do not agree with the council's position that considerable refurbishment, extension, or redevelopments are needed. It was noted that some of the buildings were less than 30 years old. Such comments generally related to meeting current needs and there was little feedback on whether the buildings need redevelopment to meet future needs.

It was suggested that independent consultants might have "vested interests", and that the council was not sufficiently independent. Some thought that the review of options for development of the homes, and the scale of investment needed, was flawed and inflated.

Views were expressed that there should be a retained focus on providing residential care (for which it is felt the current environments are suitable) and that nursing care needs should be met elsewhere. Smaller scale works were suggested such as knocking through walls to

create bigger spaces. It was generally expressed that individuals do not need ensuite toilet facilities, or an increased ratio of bathroom facilities.

There was a consistent expression of views that the council should consolidate its provision, and use capital from selling some properties to invest in retaining and developing other properties. There has been a suggestion that the best homes should be retained.

Across all homes, there is a small measure of recognition of the challenges the environments present to dignified care delivery which meets current and anticipated needs, and as such acceptance of the council's position that investment does not deliver the best way of meeting older people's needs going forward.

Where people acknowledged that the homes need considerable work to continue to meet current and future needs, it was mostly felt that such investment should be made by the council.

### 5. b. Surrey County Council response

The council continues to maintain each home in accordance with normal industry practice and requirements. Each home is routinely inspected by CQC who independently validate ongoing compliance with requirements. As well as undertaking regular maintenance the council undertook improvements in 2011/2012 to the interior of each home in particular renewal of floor coverings and redecoration of all residents' bedrooms and communal areas.

At the time of construction each building reflected current standards and guidance, and they continue to be compliant with these standards having regard to the date of construction. Changes in requirements for residential care and guidance mean that the configuration, layout and spatial provision is inappropriate going forward as it compromises the council's ability to deliver dignified and appropriate care in a suitable environment.

In line with the council's long term strategic vision, it is more appropriate to consider other models of service delivery.

Although the council has considered opportunities to undertake major remodelling to meet current day standards these have not been progressed because these works would (a) result in a significant reduction in the Home's capacity primarily owing to the need to provide larger bedrooms with en suite facilities and (b) entail temporarily relocating residents as the nature and extent of the remodelling work will require closure for approximately 18 months.

Work was undertaken in 2012, by Holbrow Brookes and Knight Frank, who are independent health care property specialists. This work provided estimates of refurbishment and rebuild costs. The figures were later reviewed to account for inflation and planned work already undertaken. The council would incur significant extra cost in commissioning another estimate or further reviewing these costs.

Short term capital maintenance requirements at **Brockhurst** include:

- replacement of aged boiler plant
- replacement of heating distribution system
- replacement of hot and cold water pipework distribution due to brown water issues
- new pager system

There are additional issues with Brockhurst including

- unsuitable open staircase



- encapsulated” or in “good condition” asbestos presence. There is no risk to residents, staff or visitors and this is reviewed routinely in accordance with legal requirements. If the building was significantly refurbished and/ or altered specialist removal would be necessary
- unreliable lift, with size and layout and control functions which do not reflect those of a modern day compliant lift. A modern replacement lift is required.
- rooms cannot easily accommodate large equipment such as hoists to support people who may need them in the future.

Short term capital maintenance requirements at **Cobgates** include:

- replacement of aged boiler plant
- replacement of hot and cold water distribution pipework due to brown water and poor pressure
- replacement of heating pipework distribution
- new pager system
- complete the programme of window replacement
- replace flooring throughout
- internal redecoration
- replacement of flat roof

There are additional issues with Cobgates including

- unsuitable open staircase
- old lift, with size and layout and control functions which do not reflect those of a modern day compliant lift. A modern replacement lift is required.
- encapsulated” or in “good condition” asbestos presence. There is no risk to residents, staff or visitors and this is reviewed routinely in accordance with legal requirements. If the building was significantly refurbished and/ or altered specialist removal would be necessary
- rooms cannot easily accommodate large equipment such as hoists to support people who may need them in the future.

Short term capital maintenance requirements at **Dormers** include:

- replacement of aged boiler plant
- replacement of aged hot water plant
- replacement of heating distribution pipework
- replacement of hot and cold water distribution pipework due to brown water and poor pressure
- structural repairs/rebuild to Day Room
- new pager system
- lift refurbishment
- repairs to boundary fence

Note: subsidence issue at Dormers is not due to the state of the downpipes and gutters.

There are additional issues with Dormers including

- unreliable lift, with size and layout and control functions which do not reflect those of a modern day compliant lift. A modern replacement lift is required.
- encapsulated” or in “good condition” asbestos presence. There is no risk to residents, staff or visitors and this is reviewed routinely in accordance with legal requirements. If

the building was significantly refurbished and/ or altered specialist removal would be necessary

- rooms cannot easily accommodate large equipment such as hoists to support people who may need them in the future.

Short term capital maintenance requirements at **Longfield** include:

- external redecoration
- internal redecoration including replacement floor coverings
- replacement of aged boiler plant
- likely to need to replace heating distribution system following boiler plant replacement due to higher system pressures used in modern equipment
- replacement of hot and cold water system due to poor flow and reported discolouration of water
- replacement of windows to south and south west elevations
- replacement of internal doors
- old electrical distribution – rewire

There are additional issues with Longfield including

- unsuitable open staircase
- unreliable lift, with size and layout and control functions which do not reflect those of a modern day compliant lift. A modern replacement lift is required.
- significant area of the building is not accessible to people
- encapsulated” or in “good condition” asbestos presence. There is no risk to residents, staff or visitors and this is reviewed routinely in accordance with legal requirements. If the building was significantly refurbished and/ or altered specialist removal would be necessary
- rooms cannot easily accommodate large equipment such as hoists to support people who may need them in the future.

Short term capital maintenance requirements at **Park Hall** include:

- replacement of aged boiler plant
- replacement of paving
- window and rooflight repairs and refurbishment
- redecoration
- ventilation

There are additional issues with Park Hall including

- as this is a newer building, which has required less maintenance and replacement to date, some of the major expenditure required (such as boiler replacement) will be required within two years

Short term capital maintenance requirements at **Pinehurst** include:

- replacement of aged boiler plant
- redecoration
- ventilation

There are additional issues with Pinehurst including



- as this is a newer building, which has required less maintenance and replacement to date, some of the major expenditure required (such as boiler replacement) will be required within two years

Longer term, significant refurbishment works are needed in all of the homes. The extent of the works required is detailed in the supplementary information, available on the council's website.

### **6.a Impact on the Whole Health and Social Care System**

There was some concern, including from health partners, that effective patient flow, essential to support the delivery of best care for all in the health and social care system as a whole, may not be maintained if the council run homes are closed. In turn, this might mean delays in patient transfer from hospital, potentially compromising care available to other patients in the acute sector at a time when the population is ageing.

There was also concern from partners about additional services provided at some care homes. Specific mention was made of day care, as well as community therapeutic services and reablement beds which are currently provided in some of the homes, and which have a role in supporting people in the community and their carers.

### **6.b Surrey County Council response**

The council continues ongoing work with Clinical Commissioning Groups (CCGs) and local providers to understand and secure the availability of commissioned services which meet current and future needs, and which are flexible to help prevent hospital admissions and facilitate timely hospital discharges.

### **7.a Surrey County Council Staff**

The quality of care delivered by the council's staff was highlighted frequently in relation to all the homes. There was concern that closure of homes would have an impact on staff in terms of their employment, as well as reduce employment options in the communities where the homes are currently located.

Some respondents also expressed their concern that there would be a loss of well-trained (Surrey County Council) staff to the care market.

### **7.b. Surrey County Council response**

The council is proud of the level of care its staff provides to residents. There is also a good team of volunteers who support the homes in many ways.

Should a decision be taken to close any home, the preferred option would be to redeploy as many staff as possible within the council. There has been investment in the workforce and their skills and capabilities are valued. There cannot be a guarantee of redeployment for all staff who want this, but the council seeks to retain them for as long as possible. A staff consultation will take place on the future of staff employment if any home is going close. Should redeployment not be possible there will be support for staff to access other employment opportunities.

### **8.a Community Issues and Impact**

Some respondents commented on the care home being part of their local community, and others referred to a particular care home being a "community asset". For example, at

Cobgates, visitors had relatively easy access to the home from the town, and were also able to take residents into the town to access its amenities. Other respondents stressed the importance of any future use of the property being for social care or provision for older people.

### **8.b. Surrey County Council response**

The importance of the homes to the local community, and the range of services they provide is acknowledged. The future of each property has not been addressed as part of the consultation. A decision regarding the future of the service is necessary first. Once a decision is taken, options for the future use of each property will be considered.

The council intends to carry out further work to explore opportunities for suitable alternative adult social care provision in line with the needs and outcomes of the local community, which would also provide alternative employment opportunities.

### **9.a Surrey County Council Finance and Costs**

Many people were concerned that independent sector provision is more costly. This would impact on individuals who fund their own care or who make a financial contribution, as well as the council's costs increasing. In addition, it was felt that without their own care provision, Surrey County Council would be less able to negotiate favourable rates with the market, now and in the future.

Other respondents considered that the Surrey County Council fee level is too low, which affects the ability to secure choice of provision. It was also suggested that low fee guidance rates create unsustainability in the independent sector.

Some people reflected that any savings made through the closure of homes would only be short term for Surrey County Council. Considerations include a potential fall in standards, and the long term cost of the council "picking up the pieces".

Some suggested that the council had an undisclosed underlying motive for closure e.g. the sale of the properties and subsequent receipt of income. A number of views were given that any proceeds from potential sale of the properties should be reinvested in social care provision for local people.

Some respondents criticised a perceived lack of detail provided in the financial modelling behind the recommended options.

### **9.b. Surrey County Council response**

All current residents will have been financially assessed to determine any contribution required. Surrey County Council has a Paying for Care booklet which outlines the charging policy and options for funding care. It is not envisaged that there would be any financially adverse impact on affected individuals as a result of any decisions made in relation to this Cabinet report.

Commissioners within localities have ongoing relationships with local providers, and already actively negotiate with providers. The council is able to purchase at reasonable rates, and aims to commission residential care at fee guidance rates. The rate that is paid for each placement will be based on the individual circumstances of each person and there will be instances where different fees are agreed.

Surrey County Council in house provision only accounts for small percentage of residential care provision in Surrey. 91% of placements the council funds are in the private sector. Local authority placements only accounts for approximately 44% of the overall residential care market in Surrey as the majority of residents fund their own care. Therefore closure of the council's homes will not have a significant impact on its ability to commission residential care in the market.

Further financial information was made available in the supplementary information published on the council website in December, including the likely investment costs. The cost of investment required in Surrey County Council homes exceeds the cost of alternative provision in the long run.

The council has shared all of the information it is able to. Detailed information about our costs is commercially sensitive. Disclosing this could have a negative impact on future negotiation with providers.

The future of the property is out of the scope for the current proposals and consultation, as a decision regarding the future of the service is necessary first. Potential proceeds from the sale of the land are not the reason for looking at the future of the homes. Should a decision be made to close any home, further work will be undertaken to consider how properties and their sites may be used to support the future adult social care needs in Surrey.

### **10.a The Consultation Process**

Many respondents said that a decision had already been made by the council, and therefore the consultation process was not truly open and meaningful, and would not influence the decision making process. Further clarification was asked for on the next stages of the process.

People wanted to be involved in considering the options before the consultation.

There was some concern expressed for people who lacked capacity, as to how they were being helped to engage in the process.

### **10.b. Surrey County Council response**

In the absence of a statutory duty to consult, the council has applied common law principles that have been clearly established in case law. It is satisfied that the consultation process meets those principles. As is clear in the consultation material, the council has a preferred option. However no decision has been taken and the outcome of the consultation process is not a foregone conclusion. The views expressed by those who have responded during the extended consultation period will be made known to the individual Cabinet members responsible for making the final decision.

It was recognised that some individuals affected by the consultation may not have the mental capacity to participate. Surrey County Council followed guidance to ensure mental capacity was considered. Residents took part in an initial discussion with senior home staff. If the resident did not appear to have mental capacity to engage in the consultation, the Team Manager for each home undertook a Mental Capacity Assessment. Records of these discussions and assessments are kept in the resident's personal file. There was a desire to avoid distress for someone by making attempts to consult if it was clear they were unable to do so. Residents with partial or fluctuating capacity were supported by care staff and / or

relatives to support the resident with person centred tools and conversations. Relatives and next of kin were engaged fully for their opinions on behalf of all those accessing a service.

### **11.a Surrey County Council Placement Policy**

A small number of people suggested a decision had been taken to “run down” the homes before the consultation, to suggest lack of demand.

### **11.b. Surrey County Council response**

New permanent admissions to each of the homes for older people were stopped in August 2014. This is due to difficulties staff face supporting people with dignity within the constraints of the properties. Staffing levels were not reduced to enable focus on delivering the best quality service possible for the residents.

Annex 2 highlights a reasonably consistent level of occupancy for the 18 months prior to the consultation.

The homes have continued to support planned respite stays and definite short term admissions for example for bed based reablement provision where this service operates. Additional services operating from a number of the care homes such as day care have continued.

### **12.a Issues Affecting Carers**

Respondents told us of the value of respite and day care (where it is provided) to enable individuals to live at home, and carers to keep caring (and to have a life outside of caring). It was pointed out that such services help people to stay at home in the community for longer, before admission to residential care.

Respondents also said their relative used respite and day care at a particular home, with a view to ease of transition into a familiar residential care home later on when their needs had increased.

### **12.b Surrey County Council response**

The council acknowledges the importance of respite and day care services for carers. Commissioning analysis has identified potential alternative services. Any commissioning of alternatives will be informed by assessment of individuals, including their families and others important in their care to establish needs and preferences. The needs of the carer will also be assessed and taken into consideration as part of the process.

Due to changing needs around day care, and to meet future needs, a community day opportunities tender will be published late Spring/early Summer 2015, which is likely to result in new flexible alternatives being available.

### **13.a New Suggestions**

- Current plots should be maximised by considering additional storeys or other expansion, and that residents could be moved temporarily, either into empty wings, or from one home to another whilst being refurbished.
- The Anchor contract be considered for potentially being brought back “inhouse”.
- The homes be leased, at no cost to a charity to operate,

- That Surrey County Council work in partnership with the private sector, or that Surrey County Council consider service re-provision and other options with partners, to enhance capacity for people with nursing needs.
- That income could be raised or money saved by taking self-funders, by leasing space in care homes for additional local community services to use, exploring opportunities for volunteers and community organisations to help.
- Develop one or more homes as a specialist dementia care day service.
- Develop a specialist home and services for people with learning disabilities and dementia.
- Investigate becoming a Local Authority Trading Company.
- Build a new home on specific sites on “spare land” (various sites were quoted, none council land)

Surrey County Council also received a small number of expressions of interest from other organisations in opportunities to work in partnership or develop properties for extra care housing or alternative services.

### **13.b Surrey County Council response**

Should a decision be made to close any of the homes, a separate piece of work will be undertaken to review any alternative use. The council cannot provide nursing care.

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