

Name of meeting: Cabinet

Date: 26 September 2023

Title of report: Proposed Closure of Castle Grange and Claremont House residential care homes.

Purpose of report: To seek Cabinet approval to enter into formal consultation to close Castle Grange and Claremont House residential care homes and provide care through other care homes instead.

<p>Key Decision – A key decision is an executive decision to be made by Cabinet which is likely to result in Council spending or saving £500k or more per annum, or to have a significant positive or negative effect on communities living or working in an area comprising two or more electoral wards. Decisions having a particularly significant effect on a single ward may also be treated as if they were key decisions.</p>	<p>Yes</p> <p>If yes give the reason why</p> <p>significantly affecting more than 2 wards and expenditure/savings over £500k</p>
<p>Key Decision - Is it in the <u>Council's Forward Plan (key decisions and private reports)?</u></p>	<p>Key Decision – Yes</p> <p>Private Report/Private Appendix –No</p>
<p>The Decision - Is it eligible for call in by Scrutiny?</p>	<p>Yes</p>
<p>Date signed off by <u>Strategic Director</u> & name</p> <p>Is it also signed off by the Service Director for Finance?</p> <p>Is it also signed off by the Service Director for Legal Governance and Commissioning?</p>	<p>Signed off by Richard Parry on 15 September 2023</p> <p>Signed off by James Anderson – Head of Accountancy on behalf of Isabell Brittain Service Director for Finance on 15 September 2023</p> <p>Signed off by Julie Muscroft on 15 September 2023</p>
<p>Cabinet member portfolio</p>	<p>Cllr Ramsay – Health and Social Care</p>

Electoral wards affected: Heckmondwike, Newsome

Ward councillors consulted: Cllr V Kendrick, Cllr S Hall, Cllr A Butt, Cllr S Lee-Richards, Cllr A Cooper, Cllr K Allison

Public or private: Public

Has GDPR been considered? Yes

1. Summary

- 1.1 The strategic aim for social care services is to support people to remain in their own homes and as independent as possible for as long as possible. This is reflected in the significant expansion in reablement and home care capacity and delivery across Kirklees and the Council's investment in services such as the new build dementia day service at Knowl Park House.
- 1.2 In some areas of social care, the Council is a significant provider of services, typically where there are fewer alternative providers. Examples of this include dementia day services and day services and respite for people with a learning disability. These are all areas where the Council has been making significant capital investments.
- 1.3 In other areas of social care, there are a wide range of providers and the council provides only a small part of the total provision. Examples of this include residential and nursing home care where the vast majority of provision is not provided by the Council and the independent sector has a comprehensive service offer, supported by the Council and the NHS in conjunction with the local care association.
- 1.4 This report seeks approval in principle, subject to formal public and staff consultation, for the Council to withdraw from the long stay residential care market and focus its direct care delivery in other parts of the care market, particularly those areas where there are fewer providers and options for people. Current users of Castle Grange, Newsome, and Claremont House, Heckmondwike would continue to receive a residential care service but through independent sector care homes instead.
- 1.5 This proposal would involve consulting with the residents and families about re-assessing their needs in order to provide suitable alternative accommodation in independent sector care homes, of which there are 57 in Kirklees providing care for older people.
- 1.6 It would also involve consulting with staff and unions around the service reprovision and include consultation with the wider body of care providers to ensure a seamless and safe transition of current service users into alternative accommodation.

2. Information required to take a decision

Long Term Residential Homes (Castle Grange, Claremont House)

- 2.1 Castle Grange in Newsome and Claremont House in Heckmondwike are the only 2 remaining Council owned and run long stay residential care homes in Kirklees.
- 2.2 Each establishment has capacity for 40 beds, however currently there are only 46 residents across all 80 beds.
- 2.3 Should, Cabinet give approval to withdraw from the services and for the care to individuals to be provided elsewhere following a consultation process, these 46 residents and their families / carers would be allocated a dedicated assessor to support them to find alternative suitable residential accommodation.
- 2.4 It is proposed that, if this report is approved, no further admissions are taken in these establishments from the date of the Cabinet meeting.

- 2.5 There are currently approximately 128 staff (93.5 FTEs) across both establishments, primarily grade 5 support workers (see affected staff numbers / grades below).

Claremont House/Castle Grange Staffing			
Job Role	Grade	Number of Staff	FTE
Registered Manager	13	2	2
Deputy Manager	9	6	6
Team Coordinator	7	22	16.897
Activity Coordinators	6	2	1.622
Support Worker (Days)	5	43	33.415
Support Worker (Night)	5	21	14.438
Domestic Staff	3	23	12.33
Handy Person	2	2	1.622
Cook	5	4	3.188
Business Support	5	3	2

- 2.6 Vacancies that currently exist or that will be held as they arise in a number of the Council's other care services including Moorlands Grange and Ings Grove House. The planned expansion of reablement capacity will also create redeployment opportunities.
- 2.7 The gross expenditure budget for 2023-24 including potential pay award are £1,980,000 for Claremont House and £1,973,000 for Castle Grange totalling £3,953,000.
- 2.8 In addition, there are recurrent costs associated with the operation of the building (utilities etc) and with the overall operation of the service (HR, payroll, IPC etc). This provides a total annual operating cost (including both frontline costs and overheads) to the Council for these services of £4,946,000.
- 2.9 Alternative placements for the equivalent of 80 beds (based on 100% occupancy of 80 beds) in the independent sector would cost the Council £3,610,000. This is £1,336,000 less than the current Council costs above.
- 2.10 Alternative placements for the equivalent of 76 beds (based on 95% occupancy of 80 beds) in the independent sector would cost the Council £3,430,000. This is £1,516,000 less than the current Council costs above.
- 2.11 The current average occupancy rate of older people's care homes in Kirklees is 87%. Alternative placements for the equivalent of circa 70 beds (based on 87% occupancy of 80 beds) in the independent sector would cost the Council £3,141,000. This is £1,805,000 less than the current Council costs above.
- 2.12 Note that the above are based on revenue expenditure only. Potential closure would also:
- Negate planned capital expenditure across both homes of £550,000.
 - Raise potential capital receipts for the Council to the value of £8,346,000 (based on 2019 Asset Register Valuations).

Consultation

- 2.13 If, following the formal consultation process, Cabinet approves withdrawal from the homes, the properties will be passed to corporate assets for a decision on best use of the assets to support with wider Council priorities which could be re-purposing or disposal
- 2.14 It is proposed to start the formal public and staff consultation process of 12 weeks immediately following the call-in period following the Cabinet meeting, with a view to returning to Cabinet in January 2024 for a final decision.
- 2.15 If Cabinet approve the closure in early 2024, it is proposed to start the reprovision process for residents currently at Castle Grange and Claremont House shortly afterwards.
- 2.16 Expected impact/ outcomes, benefits & risks (how they will be managed)
- **Impact** – the stage 1 Integrated Impact Assessment shows this may have a short term negative affect on the residents, their families and on staff.
 - **Benefits** – the benefits to this proposal include the ability, through redeployment, to reduce the use of agency staffing in Council care services by filling vacancies and to provide both revenue savings and also one-off capital receipts. It may also support the independent sector where a number of residential homes have vacancies.
 - **Risks** – impact of potential moves to existing residents, reputational risk of moving vulnerable residents.

3 Implications for the Council

3.1 Working with People

All relevant stakeholders will be consulted as part of the formal consultation process.

3.2 Working with Partners

We will collaborate with all relevant partners to ensure the best outcomes possible for all concerned.

3.3 Place Based Working

These establishments support residents from the whole of the Kirklees community.

3.4 Climate Change and Air Quality

No impact.

3.5 Improving outcomes for children

No impact.

3.6 Financial Implications for the people living or working in Kirklees

Depending on where they live and where current residents move to, families of residents may see a change in travel costs to visit their relatives.

3.7 Other (eg Integrated Impact Assessment/Legal/Financial or Human Resources)

It is noted that some staff, many of which are Grade 5, may be deployed to alternative jobs which may be further from their homes and therefore incur some additional travelling costs. Disturbance allowances are payable.

The Care Act 2014 imposes a general duty on local authorities to promote an individual's well-being (section 1 Care Act 2014).

Local authorities had a duty to provide residential accommodation for adults who were in need of care and attention not otherwise available to them under section 21 of the National Assistance Act 1948. This was repealed and replaced by a duty to meet needs for care and support (section 18 Care Act 2014). Section 19 of the Care Act 2014 gives a local authority the power to meet needs for care and support, where it is not under a duty to do so. Unlike the National Assistance Act 1948, the Care Act 2014 does not specify separate duties for the provision of residential and non-residential care. Section 8 of the Care Act instead gives examples of the different ways that a local authority may meet needs under section 18, and the list includes "accommodation in a care home or premises of some other type" (s8(1)(a)), or "care and support at home or in the community" (s.8(1)(b)).

An assessment of needs must be carried out where it appears to the local authority that a person may have needs for care and support. The assessment must identify whether the adult has any needs for care and support. If there are, the assessment must state what those needs are. (Section 9(1), Care Act 2014.) A Local authority must also assess any carer (current or prospective) where it appears they may have need for support. Section 10(1) Care Act 2014.

After assessing what the needs of an adult or carer are, a Local Authority must consider whether the needs meet the eligibility criteria for a provision or service (section 13(1), Care Act 2014). The criteria does not specify the types of care and support that a Local Authority must provide to meet eligible needs. Prior to any individual moving accommodation, their needs assessment and care and support plan should be reviewed. In offering alternative accommodation the Local Authority should have regard to the Care and Support and After-care (Choice of Accommodation) Regulations 2014.

The council has a market shaping duty under section 5 of the Care Act 2014 and must exercise its duties in accordance with the Department of Health Care and Support Statutory guidance (2016)

The Council is required to carry out a non-statutory consultation process regarding proposals to reconfigure services and to carefully consider responses before reaching any decision regarding reconfiguration of care services.

The consultation process should be in line with criteria laid out in R v Brent LBC Ex parte Gunning [1985] and endorsed by the Supreme Court in R (Moseley) v Haringey LBC [2014].

The criteria are:

1. The duty to act fairly.
2. The requirement of fairness is linked to the purpose of the consultation.
3. The features of the consultees are relevant in deciding the degree of specificity required in the information provided.
4. Where the proposals involve the denial of a benefit, fairness demands will be higher.

5. Where there are no statutory restrictions on the content of the consultation, fairness may require that interested stakeholders be consulted on preferred option and also rejected options. Consultation in this case will be non-statutory.

Article 8 of the Human Rights Act 1998 - right to a private and family life, may be engaged. Following completion of the consultation, the council will need to ensure the needs of residents have been properly assessed and individual service user reviews in line with the Care Act 2014 will be carried out.

The council must comply with its Public Sector Equality Duty in section 149 Equality Act 2010. An Equality Impact Assessment (EIA) of the proposed options is advisable. The Council when exercising its functions must have "due regard to the need to":

- (a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- (b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- (c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Section 149(7) sets out 7 protected characteristics namely: age, disability, gender reassignment; pregnancy and maternity, race, religion or belief, sex or sexual orientation. It follows that age and disability will be most relevant in taking decisions about the future of the Council's care homes and an EIA will show how the proposals impact on people.

4 Consultation

This report seeks approval to enter into a formal consultation process.

5 Engagement

Following formal consultation, all stakeholders will be engaged in delivery of changes as appropriate.

6 Next steps and timelines

- 6.1 Subject to Cabinet approval, a formal consultation process will take place from October to December 2023 and the results of this exercise will be brought back to Cabinet in early 2024 for final decision.

7 Officer recommendations and reasons

- 7.1 To approve this report and delegate authority to the Service Director Learning Disability and Mental Health to agree the scope and terms of the 12 week consultation and to commence the consultation process relating to the proposed closure of castle Grange and Claremont House dementia residential care homes and report back to Cabinet on the outcome of this.
- 7.2 To approve the recommendation to cease further admissions to the establishments, until the formal consultation process is complete and Cabinet have made a decision on the back of the proposals following consultation.

7.3 To receive a further report at the January Cabinet meeting reporting back the findings of the consultations and for final decision.

8 Cabinet Portfolio Holder's recommendations

Local Authorities are chronically underfunded and none more so than Kirklees Council. The Institute of Fiscal Studies, 15th August 2023 estimates that Kirklees gets £69 per person less than the national average. If we assume that there are circ. 438,000 people who live in Kirklees that leaves us approximately £30m per year short compared to average. The current government has failed for years to address the need for a Fair Funding solution, and this has led to the significant financial challenge that the council now faces. The need to produce a balanced budget in February requires us to look at all options.

In addition, Adult Social Care is chronically underfunded, the reasons include growing demand, increased complexity of care needs and increases in the cost of care. The government has failed to address this lack of funding and even when comparatively small amounts of additional funding are made available, they have been insufficient to bridge the gap and are often short-term for specific issues e.g., discharge from hospital.

Therefore, it is important we concentrate our service offer on those services that we as a council believe are essential for us to provide, bearing in mind the choice available by other providers.

In this case we can see that even if both Care Homes were full, they would still cost the Council significantly more than it would for us to provide funding for these residents in the Independent Sector. Therefore, whilst it is a very difficult decision there is no choice in this challenging financial environment but to approve this report to allow officers to enter a formal consultation process and this to be reported back to Cabinet by January 2024 for final decision.

9 Contact Officer

Saf Bhuta, Head of In-House Provision, Adult Services.

10 Background Papers and History of Decisions

None.

11 Service Director Responsible

Michelle Cross, Service Director, Learning Disability and Mental Health.