

COUNCIL MEETING

Wednesday 18 September 2024

AGENDA ITEM 7 – PUBLIC QUESTIONS SUBMITTED IN ACCORDANCE WITH COUNCIL PROCEDURE RULE 11

1	<p>Question from Helen Plaskitt to the Cabinet Member for Health and Social Care – Councillor Addy</p> <p>“Families were informed of the potential new operators for Castle Grange and Claremont this week (10/09/24). The handout shared at this meeting stated '2 care homes for elderly persons....we're to explore business transfer'. There was no mention of the nature of these homes being Specialist Dementia Care Homes.</p> <p>Can you clarify the terms of transfer, with reassurance that Kirklees local authority is not preparing to loose it's Specialist Residential Dementia Care Service, that the terms of transfer will ensure future Residential Care for those with Dementia and not just the elderly (my husband was 57 when diagnosed with Dementia) as part of a long term plan.”</p> <p><i>Cabinet Member Response</i></p> <p>The terms of transfer have not yet been written, we are seeking cabinet approval to proceed with a transfer, at that point we will be working with legal to work through the terms of the transfer. We will be seeking to continue to provide support to residents with dementia and those already in our care will remain in situ if that’s the choice for them and their loved ones.</p> <p>We did some work with the residential/nursing care market post pandemic with a specialist care consultancy to understand what the future demand for care would look like. In essence, demand for dementia and nursing care would grow and standard residential care demand would fall (particularly as extra care housing opens).</p> <p>This means that it is less likely that a provider would want to move away from dementia care.</p>
2	<p>Question from Helen Plaskitt to the Cabinet Member for Health and Social Care – Councillor Addy</p> <p>“Can you clarify that, in regards to these proposed transfers, if the dementia placements are to be on a commissioned basis that these two care homes would be ring fenced for residents of Kirklees?</p> <p>I ask this because if this is not the case then Kirklees residents with Dementia residential needs in the future could be placed out of area or without this current offer at all, as we are all aware that in regards to specialist dementia residential placements there is a nationwide shortage of affordable provision, which could them lead to Kirklees commissioning unaffordable care and increasing long term costs to all.”</p>

	<p><i>Cabinet Member Response</i></p> <p>We would want any potential provider to be a specialist in dementia care, recognising the needs of the current residents. We are seeking cabinet approval to transfer these homes with the intention that current residents remain in them. We always strive to provide care to people closest to their loved ones and, it's always based on choice if that were within Kirklees we would endeavour to facilitate that.</p> <p>Admissions to the homes are not currently ringfenced to Kirklees residents and this has not prevented access by Kirklees residents.</p>
3	<p>Question from Avalon Rawling to the Cabinet Member for Health and Social Care – Councillor Addy</p> <p>“What analysis will Council Officers conduct to show that privatisation will not cost the Council or residents more now, or at any point in the future, for equivalent standards of care?”</p> <p><i>Cabinet Member Response</i></p> <p>People are financially assessed for their contribution towards the cost of care, whether in council provision or independent/private sector homes, the council tops up the rates against a set fee rate that is paid to providers. The council is currently subsidising the running of our 2 care homes, the costs are significantly higher than the rate paid to providers across Kirklees therefore it isn't anticipated that costs to the council will rise in the future. We have dementia homes in Kirklees that provide good quality care and have CQC ratings of Good.</p> <p>The Council also has robust processes in place to monitor and improve the quality of care and we have a duty to ensure care and support provided to people meets their needs, where quality is not meeting the required standards, we would enact council processes to supporting providers to improve care they provide.</p>
4	<p>Question from Avalon Rawling to the Cabinet Member for Health and Social Care – Councillor Addy</p> <p>“What analysis will Council Officers conduct to reassure the public that people living with dementia who are also of lower economic power will not be financial discriminated against, by way of having access to lower standards of care, or having to move homes or be evicted entirely when their funds are depleted?”</p> <p><i>Cabinet Member Response</i></p> <p>Anyone requiring long term support go through a thorough assessment process which include a financial assessment. The Council uses a financial assessment, also known as a means test, to work out how much people should pay towards their care regardless of whether that is provided in a council run service or an independent sector provision.</p> <p>Service users pay a contribution based on their financial assessment, and in most cases the charge to them is capped in line with their ability to pay through a means test. This is based on people's contribution to pay for their care.</p>

	This, therefore, addresses the issue of access to care for people with limited income and/or savings.
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