

AGENDA FOR HEALTH SCRUTINY

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To: All Members of the Health Scrutiny Committee

Councillors : J Grimshaw, S Haroon, M Hayes, T Holt (Chair), K Hussain, C Tegolo, S Walmsley, C Birchmore, R Brown, J Lewis and T Pilkington

Dear Member/Colleague

You are invited to attend a meeting of the Health Scrutiny Committee which will be held as follows:-

| | |
|-----------------------------|---|
| Date: | Thursday, 22 July 2021 |
| Place: | Council Chamber, Town Hall, Bury, BL9 0SW |
| Time: | 6.00 pm |
| Briefing Facilities: | If Opposition Members and Co-opted Members require briefing on any particular item on the Agenda, the appropriate Director/Senior Officer originating the related report should be contacted. |
| Notes: | |

AGENDA

1 INTRODUCTIONS

2 APOLOGIES FOR ABSENCE

3 DECLARATIONS OF INTEREST

Members of Health Scrutiny Committee are asked to consider whether they have an interest in any of the matters on the agenda and if so, to formally declare that interest.

4 MINUTES OF THE PREVIOUS MEETING *(Pages 5 - 8)*

The minutes from the meeting held on 13th April 2021 are attached for approval.

5 PUBLIC QUESTION TIME

Questions are invited from members of the public present at the meeting on any matters for which this Committee is responsible.

6 MEMBER QUESTION TIME

A period of up to 15 minutes will be allocated for questions and supplementary questions from members of the Council who are not members of the committee. This period may be varied at the discretion of the chair.

7 COVID-19 UPDATE

Lesley Jones, Director of Public Health to provide a verbal update at the meeting.

8 ADULT CARE ANNUAL COMPLAINTS REPORT FOR 2019 - 2020 *(Pages 9 - 28)*

Adrian Crook, Director of Adult Social Services and Community Commissioning to present the Adult Care Annual Complaints Report 2019-2020 to the Committee. Report and presentation attached.

9 PROPOSED SAVING OPTIONS FOR ADULT SOCIAL CARE: OUTCOMES OF THE PUBLIC CONSULTATION *(Pages 29 - 164)*

Adrian Crook, Director of Adult Social Services and Community Commissioning to present the proposed saving options for Adult Social Care: Outcomes of the Public Consultation report to the committee. Report and appendices attached.

10 MENTAL HEALTH UPDATE *(Pages 165 - 170)*

Kez Hayat, Commissioning Programme Manager to present an update on

mental health. Presentation attached.

11 URGENT BUSINESS

Any other business which by reason of special circumstances the Chair agrees may be considered as a matter of urgency.

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Minutes of: HEALTH SCRUTINY COMMITTEE

Date of Meeting: 13 April 2021

Present: Councillor S Smith (in the Chair)
Councillors D Gunther, S Haroon, T Holt, K Hussain,
C Tegolo, R Walker and S Walmsley

Also in attendance: W Blandamer, L Jones, Dr Schryer and I Mello

Public Attendance: No members of the public were present virtually at the meeting.

Apologies for Absence: Councillor A Simpson

HSC.001 APOLOGIES FOR ABSENCE

Apologies for absence submitted from Councillor A Simpson (as Cabinet Member).

HSC.002 DECLARATIONS OF INTEREST

No declarations of interest were submitted.

HSC.003 PUBLIC QUESTION TIME

There were no pre submitted questions and no Members of the public were in virtual attendance at the meeting.

HSC.004 MINUTES

The minutes of the meeting held on the 2 March 2021 were submitted for approval.

It was agreed:

That the minutes be approved as a correct record.

HSC.005 MATTERS ARISING

There were no matters arising from the minutes.

HSC.006 COVID UPDATE

Lesley Jones, Director of Public Health provided the committee with a verbal update and the latest information related to Covid 19.

A presentation was given setting out the latest statistics on the number of deaths and positive cases in the borough along with information on the vaccine programme.

An update was provided in respect of vaccination rates that had been administered.

Questions and comments were invited from the Committee and the following issues were raised:

- In response to a question from Councillor Hayes, it was confirmed that a GM bid had been made in respect of self isolation funding.
- Councillor Holt highlighted the issue of staff fatigue within the health and social care sector. Lesley Jones highlighted the priority being placed on staff wellbeing within the Council and Health Service.
- In response to a question concerning variants, it was reported that variants were constantly being discovered and monitored with the ability to tweak vaccines if necessary.
- With regard to the issue of long covid, Lesley Jones reported that a local needs assessment had been started in respect of the issue.
- The Chair, Councillor S Smith, highlighted the issue of transmission being driven by those in low paid insecure employment who were reluctant to self isolate.

It was agreed:

That the update be noted.

HSC.007 UROLOGY RECONFIGURATION – NCA SINGLE SERVICE MODEL

Will Blandamer, Executive Director of Commissioning, submitted a report providing an update in respect of plans to develop a single service model for urology Services. A GM Model of Care (MoC) for Benign Urology was developed through the Improving Specialist Care (ISC) programme. A hub and spoke configuration for the delivery of Benign Urology Services has been endorsed by the Greater Manchester (GM) Joint Commissioning Board (JCB), though implementation has been delayed due to COVID-19.

The report highlighted that North Manchester General Hospital (NMGH) is currently the main delivery site for North East Sector (NES) inpatient Urology Services, servicing patients from Bury. Through the Pennine Acute Hospital Trust (PAHT) and NMGH disaggregation, responsibility for the majority of the NES Urology Service will transfer to Manchester Foundation Trust (MFT) in April 2021.

Around 80% of this activity is from Bury, Oldham and HMR. Currently 1 in 5 new patient pathways ends in an operation and a minority of these require an in-patient stay. In anticipation of the GM MoC being approved, and as a response to the imminent disaggregation, the NCA clinical Urology teams at Salford and Pennine have developed a vision and MoC for a single Urology Service across the NCA footprint.

The MoC will minimise patient movement between providers along their pathway. By delivering a patient's journey from referral through diagnosis to treatment within NCA Locality Care Organisation's (for those not requiring an in-patient stay), only a small number will require an inter-provider transfer, thus reducing administrative inefficiencies and maximising patient safety through continuity of care.

The report outlined the following key features of this NCA model:

- A single comprehensive Benign Urology Service delivered within the NCA.
- 'Hub and Spoke' delivery model –
 - Oldham and Salford as inpatient hubs and Rochdale and Bury as spokes.
 - Virtual corridors running from Bury to Salford and Rochdale to Oldham.
- Single workforce within two integrated functional teams – NCA West & NCA East.
- A disaggregation of the activity from North Manchester, which will align to MFT, and the activity for Bury, Oldham, Salford and HMR which will align to the NCA.
- Expansion and enhancement of clinic & diagnostic capacity at each site in the form of Urology Investigation Units (UIUs) - increasing local access to Urology Services.

It was reported that a three phased implementation of the NCA MoC is proposed. The final end-state MoC for the NES, includes decommissioning of NES services at NMGH and having a full hub services operational at Royal Oldham Hospital (ROH) site. Bury CCG commissioners are working closely with colleagues across the NCA footprint, through the Urology Reconfiguration Programme Board, to ensure the endorsed model delivers high quality and accessible services for patients.

The proposal to move to a full hub service operational at ROH will mean that based on the Bury geography some patients that currently access services at NMGH may have to travel further e.g. patients in the South of the borough. However, having a single Urology Service managed by one provider, will facilitate an improved service integrated in one place therefore creating a more efficient pathway.

During discussion of this item, Councillor Walmsley raised the issue of issuing antibiotic prescriptions to women and the effects this has on health inequalities, disadvantaging poorer families who inevitably have to pay for a second dose. Dr Schryer acknowledged the concerns over costs to those with recurrent infections and agreed to look into the issue and provide a response to Councillor Walmsley.

It was agreed:

1. That the proposed changes to the current MoC for the delivery of Benign Urology Services across NCA be noted.
2. That the benefits of a single Benign Urology Service delivered by NCA for continuity of care for Bury patients be noted.
3. That the joint work of commissioners and providers across the NCA footprint through the Urology Reconfiguration Board, to ensure high quality, person centred, accessible care for patients be noted.

HSC.008 VOTE OF THANKS

On behalf of the Committee, Councillor Holt thanked the Chair, Councillor Stella Smith, for her hard work and commitment during her time as Chair. Tributes were paid to all retiring Councillors including Councillors Walker, Gunther, Kersh and S Smith.

COUNCILLOR S SMITH

Chair

(Note: The meeting started at 7.00pm and ended at 8.05pm)



**ANNUAL COMPLAINTS REPORT
APRIL 2019 – MARCH 2020**

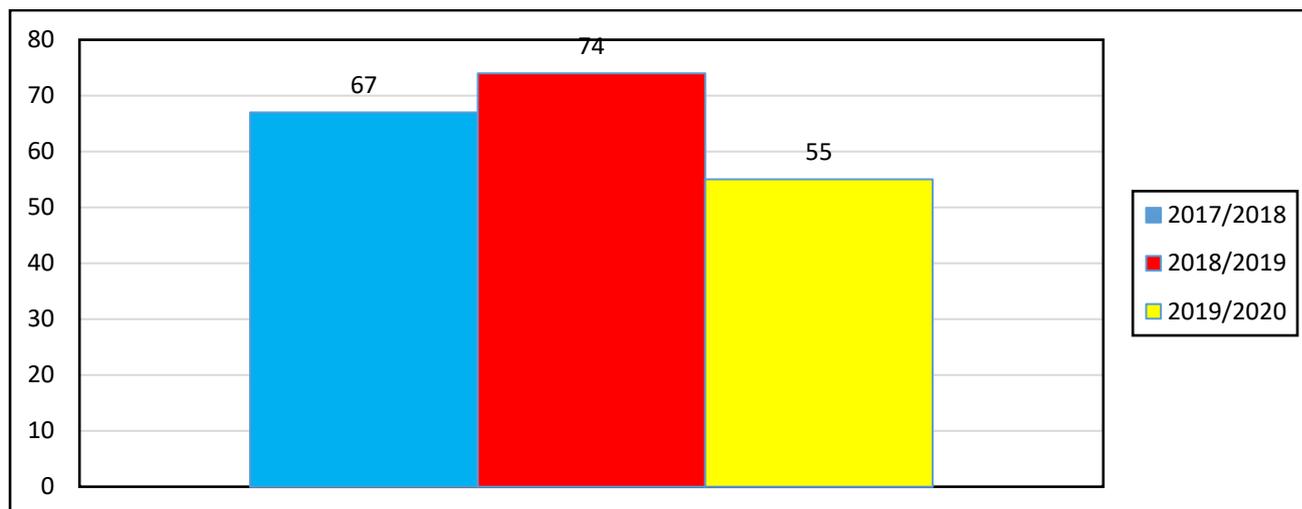
ADULT SOCIAL CARE SERVICES

1.0 PURPOSE AND INTRODUCTION

- 1.1 It is a statutory requirement to produce an Annual Complaints Report relating to Adult Social Care Complaints, received by the Corporate Core Department, Bury Council.
- 1.2 This report is to provide members of Health Scrutiny Committee with details of information relating to Adult Social Care Services.
- 1.3 The report relates to the period 1st April 2019 – 31st March 2020, and provides comparisons between previous years, as well as detailing the nature, scope and scale of some of the complaints received.

2.0 BACKGROUND

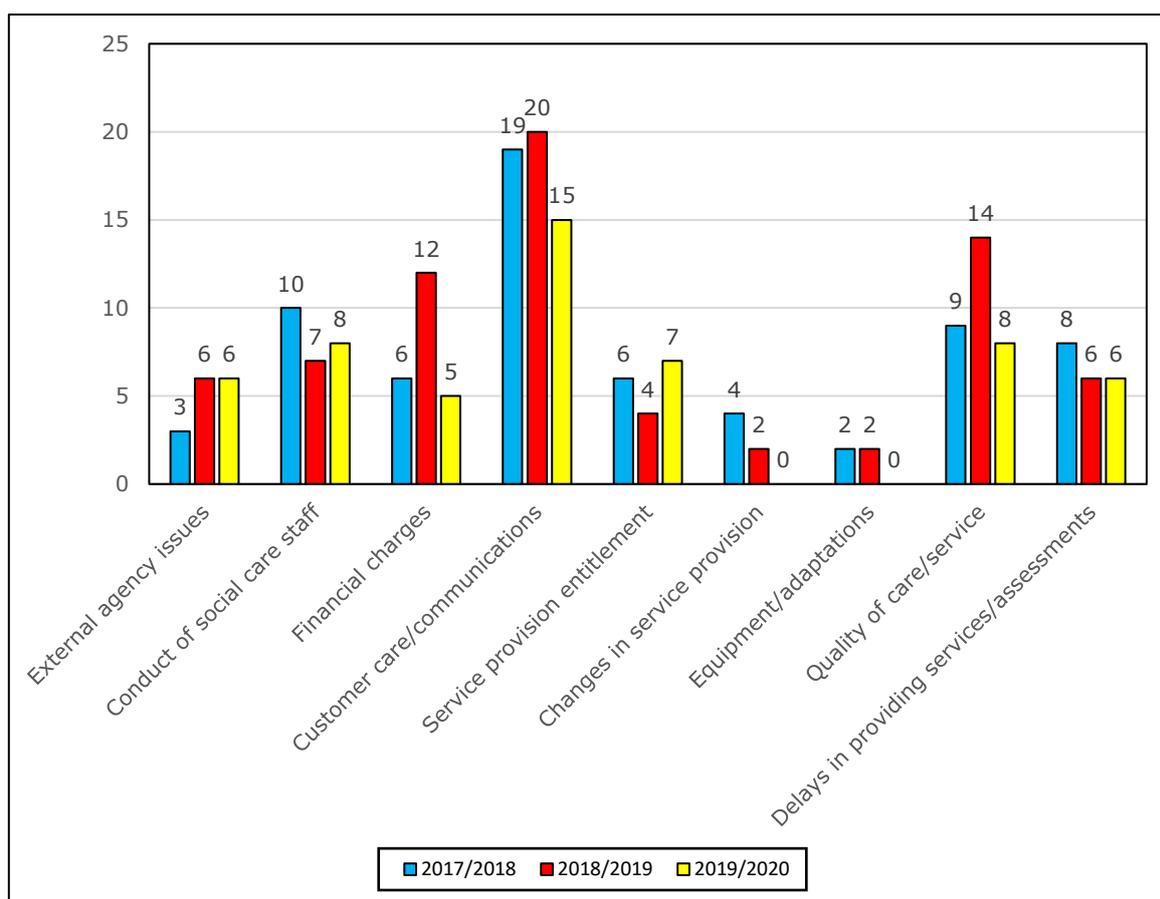
- 2.1 The council is required to operate a separate Statutory Complaints and Representations procedure, in accordance with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 which was laid before Parliament on the 27th February 2009 and came into effect on 1st April 2009. From 1st April 2009 there has been a single approach to dealing with complaints to ensure consistency in complaints handling across health and social care organisations. This procedure is based on the Department of Health's guidance, 'Listening, Responding and Improving' which supports the statutory requirements for the handling and consideration of complaints. Its intention is to allow more flexibility when responding to complaints and to encourage a culture that uses people's experiences of care to improve the services provided by Bury Adult Care Services.
- 2.2 The complaints mentioned in this report typically relate to issues where customers, their families or carers feel that the service they have received have not met their expectations. In these cases, the Council will always have endeavoured to resolve any concerns or dissatisfaction before a formal complaint has been received. Complaints, therefore, usually arise when the customer does not agree with the Council's interpretation of events or, in some cases, where policy delivers an outcome which they do not agree with.
- 2.3 Within the regulations which govern the complaints process, the Council adopts a flexible approach which prioritises local resolution. However, where complainants remain dissatisfied, they have the option to take their case to the Local Government & Social Care Ombudsman.
- 2.4 Members of Parliament cannot make a complaint on behalf of a constituent using the statutory process. However, MP's can raise a 'Concern' on behalf of a constituent with the Council and these are then managed accordingly.
- 2.5 The Complaint Procedure is not intended for dealing with allegation of serious misconduct by staff. These are covered by and dealt with through the Council's separate disciplinary procedures.

DATA ANALYSIS OF COMPLAINTS RECEIVED**3.0 ADULT SOCIAL CARE COMPLAINTS**

- 3.1 The total number of complaints received in 2019/2020 has slightly reduced from the previous two years - 67 in 2017/18 and 74 in 2018/2019. Therefore, although the way services are being delivered has changed significantly and service pressures have increased for the department, the figure for 2019/2020 indicates that customers have complained less about the services they have received.
- 3.2 The number of complaints received should also be considered in context with the number of people actually having direct contact with Adult Social Care Services (excluding their relatives, friends or carers who might make complaints on their behalf). The number of people to have direct contact with Adult Social Care Services during 2019/2020 was 6,637. It is positive that the proportion of people wanting to make a complaint about the services they have received from the department is relatively low at 55. This reflects that 99% of direct contacts meet service user expectations in relation to service delivery and outcome and do not give cause for complaint.
- 3.3 As would be expected when dealing with complaints from predominantly vulnerable groups, the majority of complaints received are made by a family member, advocate or solicitor of a service user, rather than the service user themselves.

| | Total Number of Complaints | Total Number of Complaints raised on behalf of a service user | % |
|------------------|-----------------------------------|--|----------|
| 2017/2018 | 67 | 45 | 67% |
| 2018/2019 | 74 | 53 | 72% |
| 2019/2020 | 55 | 40 | 73% |

4.0 NATURE OF COMPLAINTS

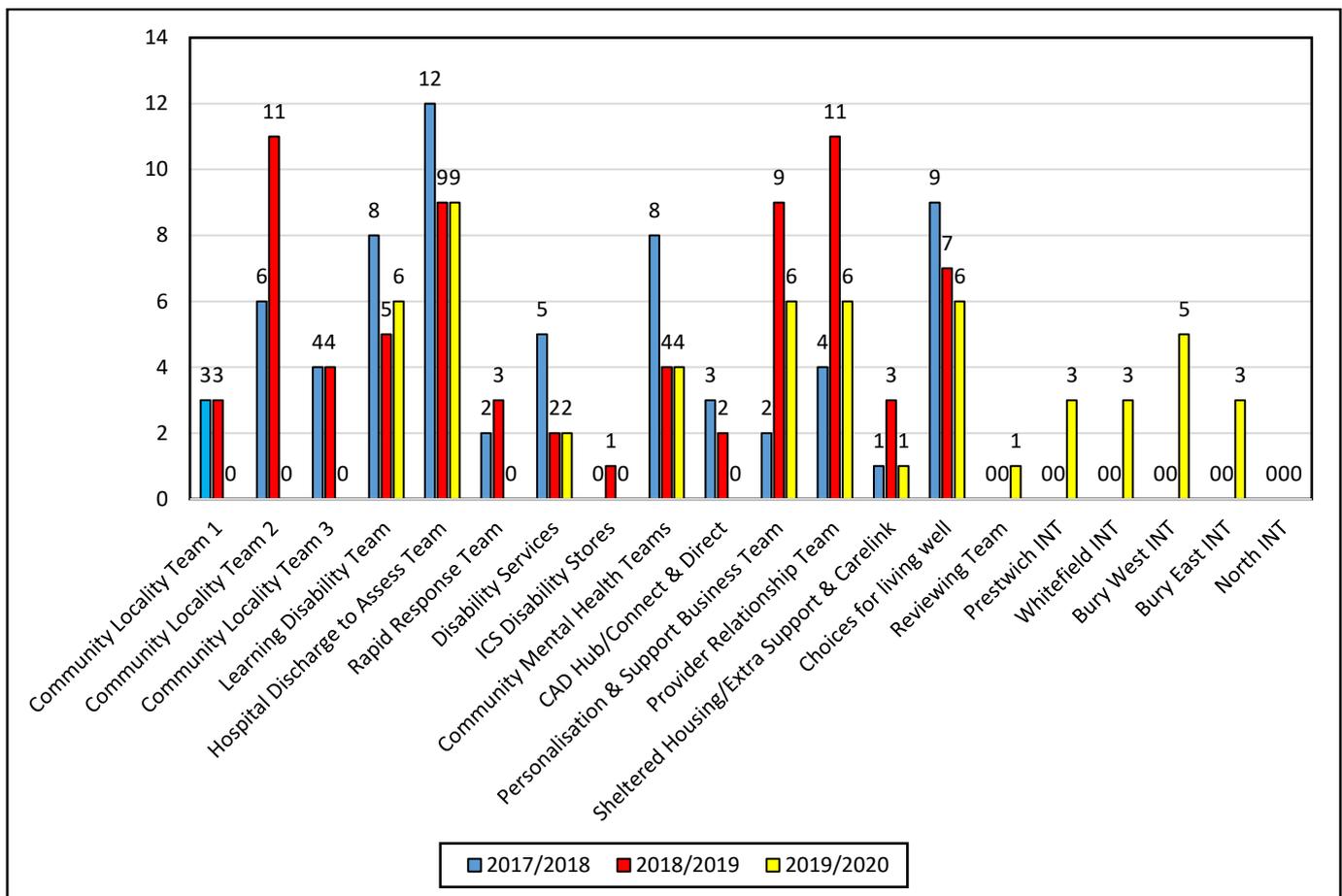


4.1 In general there has been a decrease on the most common nature of complaints 'customer care / communications', 'financial charges' and 'quality of service' from the previous years. Although Customer Care and Communications remains the areas customers are most dissatisfied with, there has been no increase or decrease in complaints relating to external agencies and the delays waiting for provision of services and the start of assessments. There has been an increase in complaints related to the conduct of social care staff, and service entitlement.

4.2 During the period 2019/2020 although the number of complaints has been slightly reduced it has shown an increase in complaints being upheld/partially upheld. Of the 55 complaints received only 12 were not upheld. In all cases where complaints are received, learning is drawn from the comments received and the subsequent investigation.

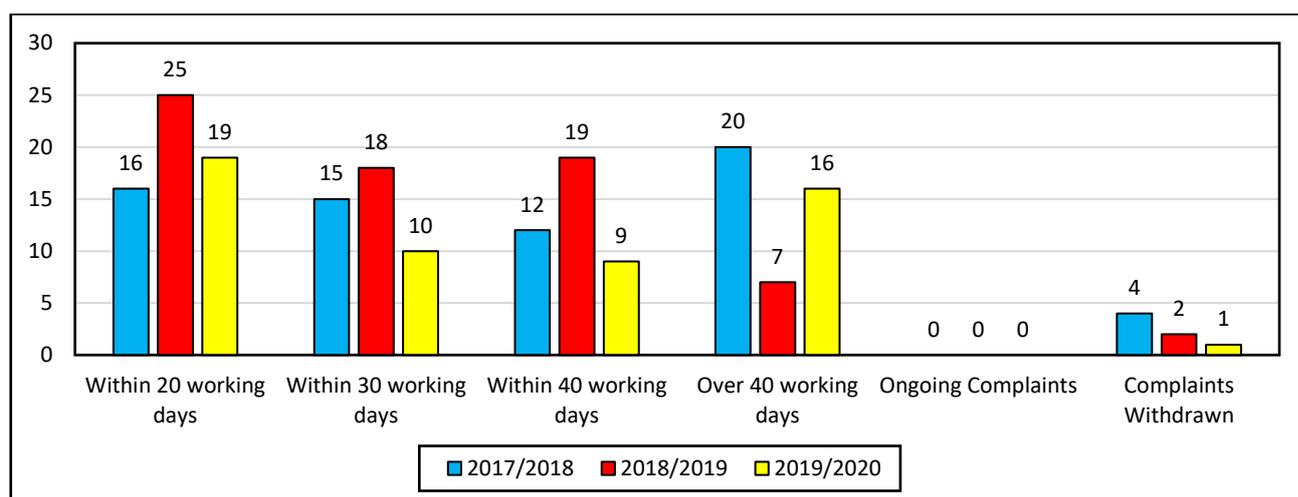
| | Total Number of Complaints Received | Complaints Upheld/Partially Upheld | Complaints Not Upheld | Complaints Withdrawn |
|------------------|--|---|------------------------------|-----------------------------|
| 2017/2018 | 67 | 27 (40%) | 36 (54%) | 4 |
| 2018/2019 | 74 | 39 (53%) | 34 (46%) | 2 |
| 2019/2020 | 55 | 42 (76%) | 12 (22%) | 1 |

5.0 COMPLAINTS PER TEAM



- 5.1 The Bury Local Care Organisation (LCO) was officially launched on 1st April, 2019 as part of the Integration of health and social care Bury transformation plan. This means services will coordinate and deliver using a more joined up approach with less need for people to repeat their story or have too many different professionals being involved in their lives.
- 5.2 Also as part of the transformation plan Bury have brought together their community Social Work and District Nursing teams into 5 new Integrated Neighbourhood teams (INT's), who will work closely together to deliver more joined up care support. This has replaced the previous Community Locality Team 1, 2 and 3 and as a result, like-for-like comparison of complaints received by the current neighbourhood teams is not overall.
- 5.3 In comparison with previous years, the overall number of complaints has decreased this year to 55 from 74 in 2018/2019 and 64 in 2017/2018. The report highlights no significant increase in complaints from a particular service or team, which again is a positive reflection given the level of change and re-organisation of services within the Department over the last year.
- 5.4 All complaints are considered in terms of the learning that they can provide on how to improve the services we provide and help us to make sure our staff are trained to give the correct advice and support.

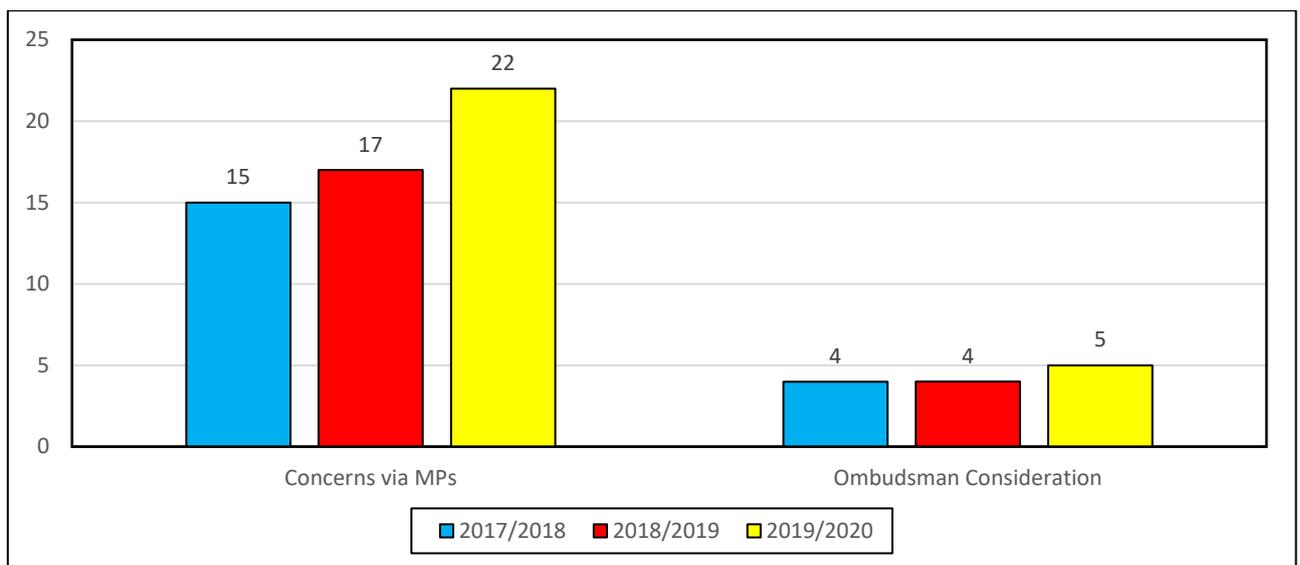
6.0 TIMESCALES



- 6.1 Whilst there are no statutory timescales with which the department must comply in responding to complaints, it is acknowledged that when someone has made a complaint, it is important to both them and the Department to resolve the matter as soon as possible in an effective and efficient manner and, wherever possible, to the satisfaction of the complainant. The aim, therefore, is to send a written response to a complaint within 20 working days. The complainant will be advised of this by the Complaints Team. If a response within the 20 working day timescale is not possible the complainant will be advised of any delay, the reason for the delay and provided with a new response date. For more complex complaints which involve different service areas, 3rd party organisations, for example NHS providers, timescales will exceed the 20 working days.
- 6.2 It is for the council and complainant to agree how the complaint will be handled, the likely duration of the investigation and when the complainant can expect to receive a response.
- 6.3 In 2019/20 19 (34%) of complaints were responded to within the 20 working day timescales, 35 (64%) of complaints were responded to outside of the 20 working day timescales, 16 (29%) of those were over 40 working days. Complaints responded to over 40 working days is a significant increase from the previous year. This is likely due to the complexity of the complaint where several departments or other organisations have been party to all or some of the complaint subject areas, complex and involved collation of information required from a number of different services areas. These can often result in increased response times.
- 6.4 Of the 16 complaints responded to over 40 working days 6 of those delays were as a result of the Covid-19 crisis. At the beginning of 2020 the Covid-19 pandemic had an effect on receiving and responding to complaints. The Local Government Social Care Ombudsman's office advised they still expected local authorities and care providers to respond appropriately to any complaints they received during that time, but understood that they may look different to the normal arrangements.

- 6.5 The response to the Covid-19 pandemic disrupted services and staff were deployed to meet priority needs. New and existing complaints were unfortunately subject to delay, this was to allow staff to cover urgent and priority work to meet the demand.
- 6.6 Of the complaints responded to outside of the 20 working day timescales all complainants were kept updated on the delay, the reason for the delay and provided with a new response date.

7.0 MP CONCERNS AND LOCAL GOVERNMENT SOCIAL CARE OMBUDSMAN CONSIDERATIONS / ENQUIRIES



- 7.1 As has been previously mentioned, concerns raised on behalf of constituents by Members of Parliament are recorded separately. There has been a year-on-year increase in the number of MP concerns raised, with 22 logged in 2019/2020.
- 7.2 In 2018, the Council introduced the Councillors Casework system. The Councillors Casework system is now managed within the contact centre, currently using email to request a casework enquiry and using spreadsheets to manage the casework. It should therefore be noted Councillors enquiries are no longer recorded and reported on within this report.
- 7.3 If a complainant remained dissatisfied with the Council’s final decision they can approach the Local Government and Social Care Ombudsman (LGSCO). The number of complaints referred to the LGSCO has remained stable, at 5 cases being considered. It is important to note that most complaints are resolved satisfactorily, and are not referred to the LGSCO. Of those that were referred the Council has been found to have acted appropriately in 2 cases, 1 case being considered as premature and referred back to the council for investigation, 1 case ongoing and 1 case the ombudsman found fault and recommended financial remedy.

8.0 COMPLIMENTS

8.1 In addition to complaints received, the department also records the number of compliments.

| Total number of Compliments received 2018/2019 | Total number of Compliments received 2019/2020 |
|--|--|
| 207 | 212 |

| Service Area | 2018/2019 | 2019/2020 |
|---|-----------|-----------|
| Community Locality Team 1 | 2 | 0 |
| Community Locality Team 2 | 3 | 0 |
| Community Locality Team 3 | 1 | 0 |
| Hospital Discharge to Assess Team | 8 | 6 |
| Choices for Living Well – Intermediate Care Reablement/Killelea | 122 | 165 |
| Sheltered Housing /Carelink / Support at Home | 1 | 0 |
| ICES Disability Stores | 4 | 2 |
| Learning Disability Team | 0 | 2 |
| Community Mental Health Teams | 1 | 1 |
| CAD Hub/Connect & Direct | 1 | 7 |
| Personalisation and Support Business Team | 2 | 5 |
| Rapid Response Team | 20 | 7 |
| Disability Services | 10 | 8 |
| Older Peoples Staying Well Team | 32 | 14 |
| Prestwich INT | 0 | 0 |
| Whitefield INT | 0 | 5 |
| Bury East INT | 0 | 0 |
| North INT | 0 | 2 |
| Bury West INT | 0 | 0 |

8.2 In 2019/2020 there has been a slight increase to 212 compliments when compared with the 2018/19 figure of 207. There are some areas where the number of compliments received have decreased notably from 2018/19, for example the Rapid Response Team and Older Peoples Staying Well Team. Team Managers have been contacted and encouraged to record and share all compliments received.

8.3 Compliments received relating to individual members of staff are acknowledged in writing to the sender by their Manager and the member of staff is sent a personal thank you card by the Executive Director. A copy is also placed on the individual's personnel record.

8.4 Below are some examples of positive feedback we received from people receiving a service:-

- *"As a family we would like to take this opportunity to thank all involved and for the empathy, excellent communication throughout in prioritising Ms X's holistic views and working to return her home as soon as possible"* **Whitefield INT.**
- *"Want to say a big thank you for all the help over the last 2 weeks. You will never know how much difference you have made at a very stressful time and it is truly appreciated"* **Hospital Social Work Team.**
- *"Thank you for all your help in finding appropriate residential care. You acted very quickly and efficiently but also with compassion and understanding and we are very grateful and relieved to know mum will be safe and in a caring environment"* **Discharge to Assess Team.**
- *"Thank you, you could not have been nicer. It was very considerate of you in making the appointment later in the morning. You put me at ease and explained what would be happening"* **Disability Services.**
- *"Wanted to convey their gratitude on the O/T's superb attitude and detailed assessment. They wanted to express their gratitude and make sure that all appropriate people are aware of the fantastic work she is doing"* **CAD Hub – Blue Badge Assessment.**
- *"I feel I must write to thank the team responsible for my care and rehabilitation and also the team working on my behalf in the background. I can't express my gratitude enough for all the good work that has taken place from all parties concerned with my recovery. I was particularly touched by the efforts put in to the Christmas and New Year festivities for the residents at Killelea"* **Choices for Living Well – Killelea IMC.**
- *"Thanks for seeing my mum this morning and spending time to carefully document her health and social care needs. We found your support extremely helpful".* **Older People's Staying Well Team.**

9.0 LEARNING FROM COMPLAINTS

- 9.1 While complaints highlight where customers are dissatisfied with the services they have received, they are also beneficial in helping to develop lessons learned so any mistakes are not repeated and also to improve services.
- 9.2 Examples of action taken in response to investigation findings to improve services:

| Complaint | Lessons Learnt |
|---|--|
| Quality of service provided by finance section, Personal budget delays and confusing application form. | The Financial Assessment Form and all associated letters and Factsheets were reviewed, refreshed and revised in February 2020. |
| Communication issues regarding not being informed of home care charges. | Senior manager attended team meeting to speak about the importance of communication, especially relating to financial charges in relation to the care received. |
| Care agency incorrect submission of care hour claims. | Care at Home review has started with contractual amendments being made to ensure appropriate compliance with Electronic Care Monitoring requirements. In the interim, Provider Relationship Officers will now be actively downloading visit reports from each provider and scrutinising to ensure they have been completed appropriately and are in line with Care at Home contract. |
| Why a referral was made for an extra care scheme when the care and support needs were too high and could not have been met within the scheme. | The panel deciding applications for Extra Care Schemes in the borough had no written criteria, as a result of this we are writing one, including terms of reference and an appeal process. |

10.0 SUMMARY AND CONCLUSIONS

- 10.1 Despite rising demands, pressures and expectations of the services from customers, the number / proportion of complaints received in each of the last two years has remained stable showing a slight reduction in 2019/2020.
- 10.2 Similarly, the number of concerns escalated to Members of Parliament and local councillors has remained stable.
- 10.3 Positively, to date the number of complaints escalated to the LGSCO has remained stable with only 1 of the 5 cases deeming the Council has been at fault.
- 10.4 Overall, and despite increased pressures on services, it is positive that the proportion of people who have made a complaint to the Council's Adult Social Care Department about the services they have received from the department has remained low over the last 12 months.

In 2018/19 - 7,293 people received a short or long term service or had some form of contact with the Connect and Direct (CAD) hub with a request for support, with 74 complaints equating to 1.02%.

In 2019/20 - 6,637 people received a short or long term service or had some form of contact with the Connect and Direct (CAD) hub with a request for support, with 55 complaints equating to 0.83%.

- 10.5 The Council will continue to seek to learn from complaints, concerns and compliments raised with them.
- 10.6 New ways of working with the formation of Integrated Neighbourhood Teams and more integrated partnership working with Health colleagues will also provide new opportunities to improve and develop service delivery.
- 10.7 Complaints and compliments provide valuable information to the department on how well it is performing, where resources need to be used, and where improvements need to be made. Details of all complaints, concerns and compliments are provided to senior officers on a monthly basis, enabling them to identify any trends or issues within the services they are responsible for.

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ADULT SOCIAL CARE SERVICES

ANNUAL COMPLAINTS REPORT APRIL 2019 – MARCH 2020

PRESENTED BY:

ADRIAN CROOK

DIRECTOR ADULT SOCIAL SERVICES AND COMMUNITY COMMISSIONING

REPORT PRODUCED BY:

LOUISE CARROLL

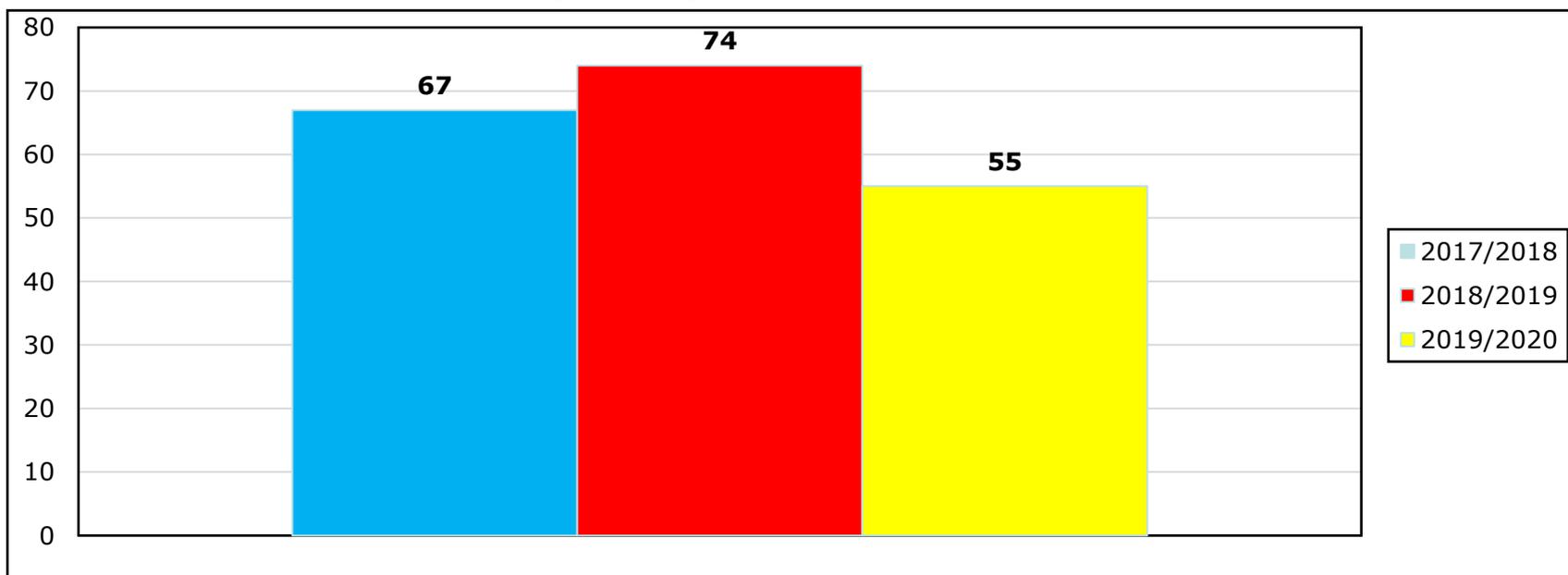
ADULT SOCIAL SERVICES CUSTOMER COMPLAINTS COORDINATOR

PURPOSE AND INTRODUCTION

- It is a statutory requirement to produce an Annual Complaints Report relating to Adult Social Care Complaints, received by the Corporate Core Department, Bury Council.
- This report is to provide members of Health Scrutiny Committee with details of information relating to Adult Social Care Services.
- The report relates to the period 1st April 2019 – 31st March 2020.

COMPLAINTS RECEIVED

Despite rising demands, pressures and expectations of the services from customers, the number / proportion of complaints received has remained stable showing a slight reduction in 2019/2020.



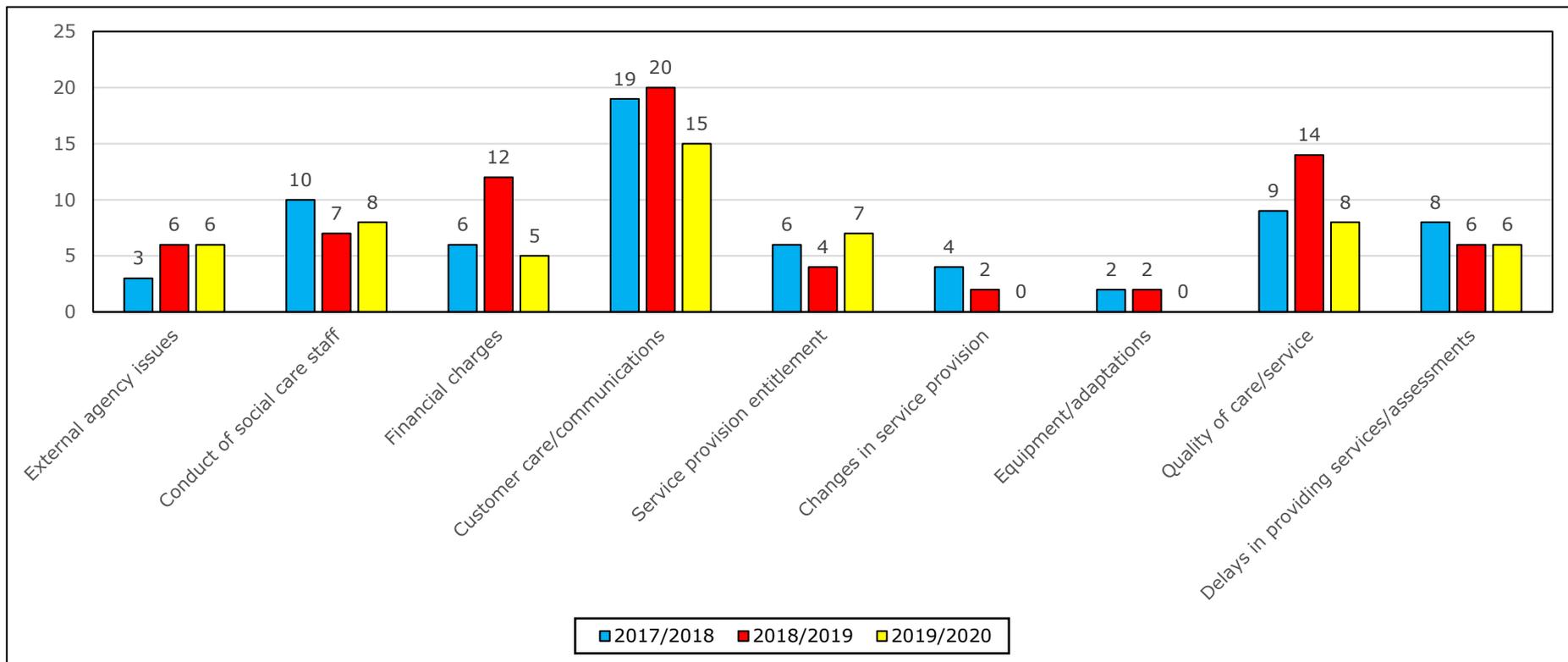
NATURE OF COMPLAINTS

In general there has been a decrease on the most common nature of complaints 'customer care / communications', 'financial charges' and 'quality of service' from the previous years.

While complaints highlight where customers are dissatisfied with the services they have received, they are also beneficial in helping to develop lessons learned so improvements can be made.

Senior manager have been attending team meetings to speak about the importance of communication, especially relating to financial charges in relation to the care received.

NATURE OF COMPLAINTS



Local Government & Social Care Ombudsman

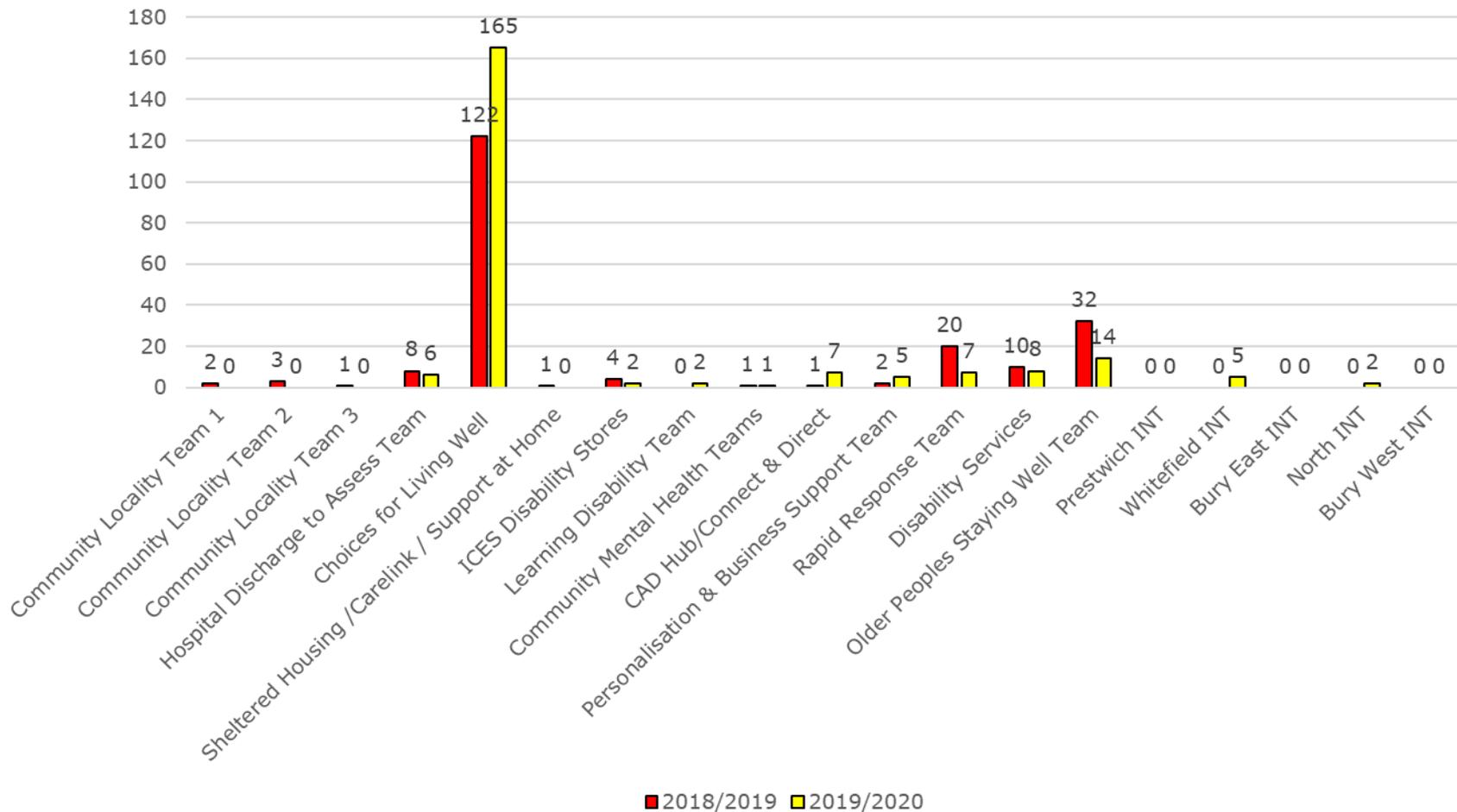
Within the regulations which govern the complaints process, the Council adopts a flexible approach which prioritises local resolution. However, where complainants remain dissatisfied, they have the option to take their case to the Local Government & Social Care Ombudsman.

Positively, to date the number of complaints escalated to the LGSCO has remained stable with only 5 of the 55 complaints received being investigate by the LGSCO.

COMPLIMENTS

As a department we also record compliments. We are always pleased to hear from people using our services who want to compliment a particular member of staff or the service they received.

| Total number of Compliments received 2018/2019 | Total number of Compliments received 2019/2020 |
|---|---|
| 207 | 212 |





| | |
|-----------------------|-----------------|
| Classification | Item No. |
| Open | |

| | |
|--|---|
| Meeting: | Cabinet |
| Meeting date: | 21 July 2021 |
| Title of report: | Proposed Saving options for Adult Social Care: Outcomes of the Public Consultation |
| Report by: | Councillor Andrea Simpson Health and Wellbeing |
| Decision Type: | Key Decision |
| Ward(s) to which report relates | All Wards |

Executive Summary:

Due to the significant financial challenge facing the Local Authority, Adult Social Care has proposed savings schemes totalling £12.4million. Understandably as a large proportion of the Adult Social Care budget is spent on our arm's length provider Persona Care and Support Limited, this contract must be reviewed and reduced to help achieve the savings. The current savings requirement for Persona Care and Support Limited is £2.5m over the next two financial years. Given some of the proposals may have a direct impact on current and future customers of Persona Care and Support Limited, a public consultation was undertaken. This report outlines the details, findings, and recommendations of the public consultation.

Recommendations following consultation

Proposal 1 – day care

- As proposed reduce the number of unused places in the day care service. Close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy.

Proposal 2 – short stay/ respite

- As proposed reduce the number of unused places in the short stay service, closing Spurr House leaving Elmhurst open for short stay care.

Proposal 3 – all age disability services

- As proposed further explore a multigenerational disability assessment and care management service and if co-production indicates bring forward an options paper

1. Introduction

- 1.1 As a result of the reductions in public spending and the impact of the recent pandemic, Bury Council must reduce its spending significantly over the coming years. The council's overall aim is to keep providing the current level of service but find less expensive and better ways of doing this.
- 1.2 Over the next three years Adult Social Care (ASC) propose to make savings of just over £12 million out of the current ASC budget of £52 million. This will be achieved in a number of ways: looking at what and how ASC buy care and support for those who need it, transforming services and working towards a multi-generational disability service.
- 1.3 As a large part of the Adults Social Care budget (£12,393,409 per annum) is spent on Persona Care and Support Limited (Persona), this contract has had to be reviewed and reduced to help achieve the savings. The current savings target for Persona is £2.5m over two financial years 2021/22 and 2022/23, which equates to just over 20% of the Persona budget. Adults Social Care are working with Persona to address the consequences of the financial challenge
- 1.4 Given some of the proposals may have a direct impact on current and future Persona customers, a public consultation was undertaken. This report outlines the details, findings, and recommendations from the public consultation.

2. Background

- 2.1 Persona provides several services supporting people with learning disabilities, dementia and physical disabilities. Services provided include day care, supported living, extra care, respite and shared lives. As described due to the challenging financial situation, Bury Council are working with Persona to reduce the Persona contract by £2.5 million over the next 2 years. To achieve the savings required it has been proposed to change some services, develop new ways of working to realise efficiencies, and in some cases, reduce or close services, especially those that are no longer used or needed.
- 2.2 Persona services are paid for with a block contract for a specified amount of capacity, this proposal intends to reduce the capacity that is no longer used and reduce the value of the contract accordingly. The volume of service provided to service users who already receive it will not change, the location may.
- 2.3 Whilst the focus is on minimising any impact on customers and staff as far possible, given the size of the savings it was recognised that proposed savings may have some form of impact on existing customers, potential customers, and staff. Therefore, the proposals went out to public consultation to understand the views of those people who may be impacted both now and in the future.
- 2.4 The public consultation focussed on five elements.

- Reduce the number of unused places in the day care services, close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy.
- Reduce the number of unused places in the short stay residential care service, close Spurr House leaving Elmhurst open for short stay residential care.
- Develop a multigenerational disability service therefore providing one assessment and care management service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability and offering seamless transition to adulthood.
- Questions about participants use of Adult Social Care transport to inform future policy development.
- An opportunity for people to suggest any alternative saving suggestions they may have.

3. Consultation Process

- 3.1 A six-week public consultation was undertaken starting Monday the 24th May 2021 concluding on Friday 2nd July 2021. Several methods were used to try to maximise the opportunity to capture views of people who use Persona services, their families and carers, our partners, along with the public and future users.
- 3.2 A detailed letter and survey (see appendix 1, consultation materials), including a return freepost addressed envelope, was sent to all of Persona's 701 customers. These were either handed to the individual or posted to their home address.
- 3.3 The consultation information and survey were published on the Council's engagement and consultation website 'One Community'. This site can be accessed by anybody as a guest and has 3,323 people registered on the site. Those who were registered on the One Community site to be informed of consultations of this nature (1557 people) received a notification alerting them of the consultation. (See appendix 2 One Community Report).
- 3.4 A dedicated email address strategicplanning@bury.gov.uk was available for people to share views and comments and a council officers telephone number was available to contact for any queries.
- 3.5 A council press release was issued on the 24th May which you can read [here](#) The consultation was also published on all the council's social media platforms.
- 3.6 Information on the consultation launch was shared with all local councillors, all of our social care workforce, all care providers who themselves employ

over 5,000 staff, all Persona staff, all of our voluntary sector and faith alliance partners and a wide range of stakeholders and via several engagement networks.

- 3.7 Healthwatch Bury supported the process by signposting people to the consultation, publicising the consultation on their website, with their members and through their mailing list. They also answered any questions about the consultation process, offered support to take part and they also hosted a public consultation session.
- 3.8 Age UK Bury contributed to the consultation on behalf of their members.
- 3.9 Bury People First were commissioned to offer support to people with a learning disability their family and carers. This included creating an easy read version of the consultation letter and survey, signposting their over 300 members to the consultation, supporting individuals who required it on a one-to-one level and they ran three public consultation sessions.
- 3.10 A council led public consultation session was open to anyone to attend and advertised as above.
- 3.11 Due to the Covid-19 social distancing requirements, and to keep everyone as safe as possible, the public consultation sessions were held online, via Microsoft teams or Zoom. See the table below for information on the public consultation sessions.

3.12 **Table 1. Detail of the public consultation sessions**

| Session Number | Date | Time | Target Audience | Organisation who arranged the session | Number in attendance |
|----------------|---------------------|----------------------|-----------------------------------|---------------------------------------|----------------------|
| 1 | Wednesday 9th June | 10:30am – 12:00 noon | People with a learning disability | Bury People First | 36 |
| 2 | Wednesday 9th June | 6:30pm – 8:00pm | Family members and carers | Bury People First | |
| 3 | Wednesday 16th June | 10:30am – 12:00 noon | People with a learning disability | Bury People First | |
| 4 | Wednesday 23rd June | 1:00pm – 2:30pm | Open to anyone | Healthwatch Bury | 7 |
| 5 | Monday 28th June | 2:00pm – 3:30pm | Open to anyone | Bury Council | 6 |
| Total: | | | | | 49 |

- 3.13 Alongside the consultation survey returns, 7 people shared their views via email, 3 of those were staff.

- 3.14 49 people attended one of the five online public consultation sessions. Despite efforts to recruit participants and advertise the event widely only 7 people attended Healthwatch Bury session, the majority were staff or providers. (For the Healthwatch Bury feedback report see appendix 3). Despite efforts to recruit participants and advertise the event widely only 6 people attended the council session, 4 identified as staff or providers. (For the council led session feedback report see appendix 4).
- 3.15 The Bury People First Session was well attended with 36 people with a learning disability attending to share their views some of those people received one to one support from Bury People First. (For the Bury People First feedback report see appendix 5).
- 3.16 A total of 174 responses were received using one of the available methods.
- 3.17 Persona staff were also able to engage in the consultation. Persona employ 98 staff across the services the proposals relate to. (36 in Spurr House, 39 in Elmhurst, 12 in Pinfold and 11 in Grundy).
- 3.18 The survey was hosted on the One Community site. 236 people visited the site and 85 people contributed 117 times. This means that several of the same people on the same device visited the survey a number of times to answer the questions repeatedly. It is not possible to identify why someone choose to answer the questions repeatedly. Of the 85 contributors 4 registered online and 81 chose to remain anonymous. Members of the workforce can contribute online, and it is not possible to identify who the 81 who chose to remain anonymous are.
- 3.19 It is very difficult even with large amounts of publicity to get members of the public to engage with consultations on the provision of adult social care. In a recent consultation undertaken the NHS regarding changes to Intermediate Care services 286 people visited the site but only 29 went on to contribute or attend any engagement sessions, therefore 174 responses is a higher number than usual for this type of consultation.

4. **The responses to the consultation**

4.1 The consultation survey included a range of questions where the respondent was asked to say either yes, they agreed with a proposal or no they did not agree with a proposal, plus free text boxes for other comments and suggestions.

4.2 **Responses to Proposal 1 – Day Care Services**

4.3 This question asked *“We propose to reduce the number of places of day care which the Council buys from Persona. Before the Covid19 pandemic, the day care service consistently had a number of places which were not used. Removing the unused places will enable better value for money. For existing day service customers there is no suggestion that the amount of support currently received will reduce in any way as a direct result of this proposal. The proposal is focussed on removing unused places. However, in order to provide best value, we propose to combine the older people’s day service and to provide it from one location (Grundy). This is because the reduced number of places can be accommodated in one venue, which will mean lower running costs. The two sites being considered are Grundy and Pinfold Lane, only Grundy is large enough to accommodate all older people’s day service customers. In short, the proposal is: to reduce the number of unused places in the day care service, close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy. If this proposal is agreed, the dementia day service would have its own secure area at Grundy and be refurbished to be ‘dementia-friendly’.”*

4.4 For the yes/no question the result is show below.

| Question | Yes | No | Not answered |
|--|---------------|---------------|--------------|
| Proposal 1: Persona Day Care | | | |
| Do you agree with the Councils proposals for Day Care service? | 31 (30.1%) | 72 (69.9%) | 14 |

4.5 It can be seen that the feedback from the consultation is negative. We know that only 85 devices were used to submit this feedback 117 times. This indicates that one or more people answered the same question repeatedly and this must be taken into account when weighing up the value of this feedback.

4.6 Concerns that were raised in the other sessions and in the free text comment sessions in relation to this proposal were centred around demand for day care post covid. There was anxiety that the pandemic had suppressed demand and the council would be closing day care capacity that was needed when the pandemic ended especially with a growing and ageing population.

4.7 It is important to understand this proposal is not about closing the day care services, instead removing places which historically (pre covid) had not been

used. This is despite promotion of the service and social care staff offering day care as part of people's support.

- 4.8 Data shows a reduced demand and usage of day care provision across the period 2018 - 2020 before any impacts generated from the Covid-19 pandemic were experienced where we had to suspend day care for a while.
- 4.9 The original Persona contract was for 70 places per day at Grundy and 40 places per day at Pinfold Lane (3300 customer hours). In 2020 this was reduced to 50 places at Grundy and 30 places at Pinfold Lane (2400 customer hours). Data analysis of the period up to March 2020 indicates showed attendance had dropped further to 33 places per day at Grundy and 22 places at Pinfold Lane. There is sufficient capacity at Grundy to accommodate up to 70 users and can easily accommodate 55 when taking into account the need to deliver a separate dementia environment.
- 4.10 The second key theme from feedback was a concern about dementia provision. Over the years Pinfold day care centre has been recognised as a day care facility for those with dementia, the building and staff have been developed to support those with dementia in the best way possible. Therefore, concerns were raised that changing the facility from Pinfold to Grundy may have a detrimental impact on some of the customers with dementia as routine and consistency is important.
- 4.11 The proposal made clear if agreed and Pinfold was closed and service within moved to Grundy, the dementia day service would have its own secure area at Grundy and be refurbished to be 'dementia-friendly'. This would include moving any equipment and furniture, supporting, and developing staff ensuring they have the skills to support dementia customers, and as far as possible provide consistency in service delivery, just in another building.
- 4.12 Alongside the two key themes from feedback there were one or two comments regarding the concern of having to travel further to Pinfold than Grundy.
- 4.13 The Grundy site is near the town centre and equally accessible from all parts of the borough. The Pinfold site is in the south of the borough. It is 3.3. miles from Grundy and 10 minutes away. As Grundy is central many who attend Pinfold from the centre or north of the borough will experience shortened journeys but it is accepted some who attend from the south may have a journey 10 minutes longer.
- 4.14 When consulting with day care users who had a learning disability it was clear that day care is very important providing a place to develop friendships and meet other people. The users stated they hadn't accessed day care as much during the covid pandemic, some customers saying they wanted to go on less day care and do other things instead, such as volunteer, get a job or undertake other activities and some people weren't aware they could say no to day care.

- 4.15 Data shows usage of Persona Day care for people with a learning difficulty in the two years before the covid pandemic declining consistently over time. This trend has not reversed since this day care was restarted and usage remains lower than pre-pandemic levels. This proposal is to remove places that are no longer used and reduce the value of the block contract accordingly. Everyone with a learning disability who accesses day care can continue to do so.
- 4.16 No alternatives were made to this proposal
- 4.17 **It is our recommendation post consultation that the council reduce the number of places of day care which the Council buys from Persona which are currently not used and relocates older persons day care from Pinfold to the Grundy site to ensure the service is cost effective and delivers value for money.**
- 4.18 No other alternatives were made to this proposal.
- 4.19 **Responses to Proposal 2 –Short Stay and Respite Services**
- 4.20 This question asked "*We propose to reduce the number of places of short stay which the Council buys from Persona. Before the Covid19 pandemic the short stay service consistently had a number of places which were not used. By removing that unused capacity, it will enable better value for money. Short stay is where customers will stay for a period of time up to 6 weeks as either a break from their normal place of care, to provide carers or family members a break from caring or because a person may need some short term support to recuperate. On occasion people stay longer than the 6 weeks and we are keen to prevent that from happening, as there are alternative options for those people who need care for longer than 6 weeks. We are going to change our approach to managing short stay to ensure people don't stay longer than 6 weeks and as a result we will need less beds from short stay. Currently there are two Persona buildings that offer short stay care, these are called Spurr House and Elmhurst. Both buildings have been considered in detail taking account of the number of beds that are needed, the quality and longevity of the building, the unit cost of each facility and the likely investment costs needed to keep and maintain the building. Based on this it is proposed that Spurr House would be the building to close, leaving Elmhurst open for short stay care. This proposal will ensure that one building remains open to offer short stay care for our customers. The service offered will not change, however the location where a person goes to for short stay care may change for some people.*"
- 4.21 For the yes/no question the result is show below.

| Question | Yes | No | Not answered |
|--|---------------|---------------|--------------|
| Proposal 2: Persona Short Stay Facility | | | |
| Do you agree with the Councils proposals for reducing short stay beds? | 25 (22.7%) | 85 (77.3%) | 7 |
| Do you agree with the Councils proposals to close Spurr House? | 25 (22.3%) | 87 (77.7%) | 5 |

- 4.22 It can be seen that the feedback from the consultation is negative. We know that only 85 devices were used to submit this feedback 117 times. This indicates that one or more people answered the same question repeatedly and this must be taken into account when weighing up the value of this feedback.
- 4.23 Concerns that were raised in the other sessions and in the free text comment sessions in relation to this proposal were centred around demand for respite care post covid. There was anxiety that the pandemic had suppressed demand and the council would be closing respite capacity that was needed when the pandemic ended especially with a growing and ageing population.
- 4.24 It is important to understand this proposal is not about closing the respite care service, instead removing places which historically (pre covid) had not been used.
- 4.25 To alleviate the concern re suppressed demand, it should be noted that pre covid there had historically been a high number of unused short stay/ respite beds, despite various promotion and sign posting to the service. The block contract is currently for 62 beds (27 at Elmhurst and 35 at Spurr House). Data for the period 2018/19 and 2019/20 shows a trend of declining occupancy at both units. In the period February 2019- February 2020 the average number of beds required was 48 across both sites. Our reconfigured intermediate care services have reduced demand further for emergency short stays and where we do use the beds the residents are staying less than 6 weeks. This is further reducing the demand for these beds and shows 27 beds at Elmhurst will be sufficient to meet demand.
- 4.26 Two comments referenced a historic covenant on the land that Spurr House sits. On investigation in 1975 a transfer of land from Manchester City Council to Bury Council was awarded with the requirement that the land was used for an 'aged persons hostel'. The covenant is attached to land not the service or current building, it is possible to have a restriction on land lifted, although there are no guarantees. The covenant does not prevent the current short stay or respite service being removed from Spurr House and delivered from Elmhurst. Although the future use of the land would need to take the existing covenant into account.
- 4.27 One item of feedback from one person suggested looking for alternative ways of finding the saving but made no suggestion. Another suggested running a marketing campaign to fill up the beds.

- 4.28 Data from prior to the pandemic clearly shows over capacity in the respite/short stay block contract with only 48 beds being required. With changes to our intermediate care services we have now reduced the length of stay of people in emergency short stay beds to 21 days, this reduces the demand for beds further and only 27 are required for respite and short stays.
- 4.29 Following unlocking demand for respite and short stay has not returned to pre-pandemic levels and demand continues to decline, this is in line with our strategic intent to support more people in their own home. It is legally required to offer choice for care home accommodation so it would not be appropriate to divert people from their choice in the independent sector to Persona, especially being aware that the cost of supporting someone in a Persona care home bed when the homes are full is £20 per person per night more expensive than the independent sector.
- 4.30 **Our recommendation post consultation is to decommission the unused over capacity in the short stay contract with Persona Care and Support Ltd. This will see Spurr house close and short stay and respite provided from Elmhurst.**
- 4.31 **Response to Proposal 3 – developing an all-age service for people with a disability.**
- 4.32 *This question asked "We currently have two separate services for people with learning disabilities: one for children and young people, and one for adults. Our aim is to provide one service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability. Therefore, you would not have to move from children and young people service to adult's service when you turned a certain age, as the proposal would remove the need to hand over or transfer between the two services. This would take some time to implement, so, in the meantime, we will focus on making the transition from children and young people to adult services at an earlier age, ideally at 13 or 14. This will enable more appropriate support of the individual and their family to be put in place"*
- 4.33 This proposal related to the social work teams supporting those people with a disability working differently, as one multigenerational team therefore preventing the need for customers to have to transition between the two teams; a children with disability team and the adults teams.
- 4.34 It is apparent from the feedback in the sessions, comments and answers to questions that this was not communicated well with respondents interpreting the question as a proposal to change the care provided, rather than assessment and care management by social workers, to one service. It can be seen from the question above that we did not make it clear that the proposal only related to the social work assessment and care management teams.

4.35 For the yes/no question the result is show below.

| Proposal 3: Developing an all age disability Service | | | |
|--|---------------|---------------|----|
| Do you agree with the Councils proposals to develop an all age disability service? | 32 (36.4%) | 56 (63.6%) | 29 |
| | | | |

4.36 It can be seen that the feedback from the consultation is negative. We know that only 85 devices were used to submit this feedback 117 times. This indicates that one or more people answered the same question repeatedly and this must be taken into account when weighing up the value of this feedback.

4.37 We can also see from the feedback in the sessions, a review of the question and where comments were made that this proposal was not communicated well and this also must be taken into account.

4.38 The overview feedback from the sessions delivered by Bury People First was a clear preference for an all age service saying, 'everyone likes the idea of an all age disability team'. Comments included going to one place is a good idea, it makes it easier moving from children to adult services and a clear desire to be involved in making it happen.

4.39 There were numerous comments recognising the transitions process could be smoother, more supportive, start sooner and reviewed to prevent crisis from developing for customers and families or carers. A recommendation the time of transition should not be solely dependent on age but on the individual and their needs. Therefore, commencing at a time that was best fit for the person and their family/ carers.

4.40 Contributors to the consultation stated that the needs of children and adults were different and the care they required different due to the different conditions and different laws and regulations.

4.41 **Our recommendation post consultation is the council continues to explore if benefits can be delivered by bringing assessment and care management services that support both Children and Adults closer together to deliver seamless transition to adulthood and a multigenerational approach to supporting people with disabilities.**

4.42 We will explore this further as part of our transformation programme within Bury's Integrated Care Delivery Collaborative. It is clear that this work needs to be co-produced with children and adults with disabilities and their families, a principle that our Integrated Care Delivery Collaborative has already adopted, once complete an options paper will be presented to strategic commissioning board and cabinet.

4.43 **Response to Transport Questions**

4.44 In Bury we are currently reviewing our transport requirements in order to develop an updated policy. This question did not propose any changes to provision or policy but sought views on people's current use of transport. **It therefore has no recommendation, but the responses will be used to inform policy development and options for consideration will be bought back at a later date.**

4.45 In this question we asked "*Some customers receive transport to and from care settings as part of their package of care. If you receive transport as part of your care package we would like to hear your thoughts on the transport provided. If you do not receive transport then please circle not applicable or leave blank.*"

4.46 The responses to these questions are found in the following table

| Question | Yes | No | Not answered | |
|--|---------------|---------------|----------------|--------------|
| Element 5: Transport | | | | |
| Please note for the fifth element included a third option of 'not applicable' | Yes | No | Not Applicable | Not answered |
| Do you receive transport as part of your care package? | 21 (21%) | 18 (18%) | 61 (61%) | 17 |
| Do you pay for transport with your direct payment? | 17 (18.9%) | 14 (15.6%) | 59 (65.6%) | 27 |
| Do you receive a benefit that funds or contributes towards a vehicle? | 10 (11.4%) | 26 (29.5%) | 52 (59.1%) | 29 |
| If transport was not available to you would you have another means of transport to get to your care setting? | 15 (17.2%) | 23 (26.4%) | 49 (56.3%) | 30 |
| If a bus type vehicle was not available for transport would you consider sharing a taxi with other customers? | 12 (13.8%) | 23 (26.4%) | 52 (59.8%) | 30 |
| If a bus type vehicle was not available for transport would you consider sharing a 'lift' with other customer's family or carer? | 12 (14.1%) | 25 (29.4%) | 48 (56.5%) | 32 |

4.47 Response to request for Alternative Savings proposals

4.48 Finally, respondents were asked to propose alternative savings options

4.49 Three themes emerged although the number of comments received was small.

4.50 The first key theme was again although an understanding that the Local Authority had to achieve savings, a plea to look elsewhere for savings, instead protecting and investing in services that support the most vulnerable people in society, however no suggestions were made on other services to look at. This proposal does not see services received by people reduced, it sees the unused capacity in a block contract reduced and the contract value reduced accordingly minimising the impact of delivering savings on the most vulnerable.

4.51 The second theme appeared to be a perception from respondents that the council management were paid generously and could structures be rationalised to help deliver savings. Although not part of these proposals it should be understood there have already been many service rationalisations and reviews within the council.

4.52 The third theme was linked to investing more and working closely with the voluntary, community and faith sector. Encouraging people to volunteer and reviewing how volunteers might help compliment service delivery, not replacing jobs, but working alongside paid staff to help reduce overall costs and deliver better services. Developing community services, community hubs and building community pride, enabling residents to help care and support one another.

4.53 Whilst these suggestions are appreciated, they would not deliver the amount of savings required and neither would they ensure the council did not continue to pay for capacity within a block contract that was not needed or used.

5. Recommendations

5.1 The recommendations to Cabinet are as follows:

5.2 Proposal 1 – day care

As proposed reduce the number of unused places in the day care service. Close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy.

5.3 Proposal 2 – short stay/ respite

As proposed reduce the number of unused places in the short stay service, closing Spurr House leaving Elmhurst open for short stay care.

5.4 Proposal 3 – all age disability services

As proposed further explore a multigenerational disability assessment and care management service and if co-production indicates bring forward an options paper

Community impact/links with Community Strategy

Throughout the consultation feedback, there was a recognition of ensuring personalised support tailored to individual needs and aspirations, supporting people to live in their own homes, with increased choice and control and more community lead services and support, this fits well with the Adult Social Care vision.

The call for an increased amount of community support and services, building the Voluntary Community and Faith sector, encouraging volunteering, along with involving customers, public and wider stakeholders in the decision-making process and designing of services is centric to the 'Lets Do It' strategy.

Equality Impact and considerations:

Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, 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.*

The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.

| | |
|--------------------------|---|
| Equality Analysis | <p>Several equality analyses have been undertaken these include:</p> <ul style="list-style-type: none"> • An equality analysis for proposal 1: Persona Care and Support Limited Savings: Proposed Day Care savings (see appendix 6) • An equality analysis for proposal 2: Persona Care and Support Limited Savings: Proposed short stay facility savings (see appendix 7) • An equality analysis for proposal 3: Developing an All Age Disability Service (see appendix 8) • An equality analysis for the public consultation (see appendix 9) |
|--------------------------|---|

Assessment of Risk:

The following risks were highlighted during consultation and will be mitigated as below:

| Risk / opportunity | Mitigation |
|---|---|
| Future demand for Day care services increase post covid | <ul style="list-style-type: none"> • There are six other commissioned or grant funded day care provisions in Bury with capacity. • A wide range of community sector services that offer an alternative to day care • Prior to covid, intelligence and data show historic and continuous number of day care places were not used. • If demand increased additional day care places could be commissioned. |
| Future demand for short stay/ respite services increase post covid | <ul style="list-style-type: none"> • New ways of working will ensure customers do not stay beyond six-weeks in respite/ short stay as there is alternative provision for long term care. • Across the care service there are currently over 250 empty beds and therefore additional capacity to utilise should demand increase. • The usage data for Persona short stay/ respite in the two years before the covid pandemic showed a trend of declining occupancy at both buildings. |
| Change or inconsistency for people with dementia | <ul style="list-style-type: none"> • Ensuring a dedicated 'dementia friendly' area at Grundy. This would include moving any equipment and furniture, supporting, and developing staff ensuring they have the skills to support dementia customers, and as far as possible provide consistency in service delivery, just in another building. • The service would work with customers, their family and carers to transition as best as possible from one building to another. |
| Ensuring staff have appropriate skills and knowledge to support customers with dementia or other specialist needs | <ul style="list-style-type: none"> • Proficient training programme for staff to support and develop skills and knowledge relevant to the role and service. • Embedding the ASC vision in social care working practice and related services. • Embedding the 'Let's do it' strategy through all Bury services, provision and programmes. |
| Land covenant on the land Spurr House sits for an 'aged person hostel' | <ul style="list-style-type: none"> • The covenant does not prevent the current short stay or respite service being removed from Spurr House. • The impact an existing covenant has on the land should be considered when reviewing future use of the land, it does not apply to the building or the service provided within it. |
| Savings proposals are not agreed and therefore not achieved | <ul style="list-style-type: none"> • Savings would need to be found from elsewhere in ASC if these are not agreed. • The savings generated from these proposals involve decommissioning provision that is not used and enables the retention of services that are used. |

Consultation: as described throughout the report a six-week public consultation was undertaken and this report highlights the outcomes and recommendations from the consultation exercise.

Legal Implications:

Cabinet is being asked to decide on the arrangement in the borough for the provision of services for adults with care and support needs. Bury Council will reduce the Persona contract by £2.5 million over the next 2 years. It has been proposed to change some services and develop new ways of working to realise efficiencies, and in some cases, it could mean the potential reduction or closure of services.

Section 1 of the Care Act 2014 (Promoting individual well-being) requires the Council when exercising its care and support functions in respect of an individual, to promote the individual's wellbeing. "Well-being", in relation to an individual, means that individual's (a) personal dignity (including treatment of the individual with respect); (b) physical and mental health and emotional well-being; (c) protection from abuse and neglect; (d) control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided); (e) participation in work, education, training or recreation; (f) social and economic well-being; (g) domestic, family and personal relationships; (h) suitability of living accommodation; and (i) the individual's contribution to society.

In exercising its care and support function in the case of an individual, the Council must have regard to, amongst others, a) the individual's views, wishes, feelings and beliefs; b) the importance of preventing or delaying the development of needs for care and support or needs for support and the importance of reducing needs of either kind that already exist; c) the importance of the individual participating as fully as possible in decisions relating to the care and support. The Department of Health and Social Care ("DHSC") has issued statutory guidance ("CSSG") under the Care Act 2014 ("the Act") which the Council must have regard to in exercising its function under the Act.

Section 2 of the Act (preventing needs for care and support") requires the Council to "provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will" contribute towards preventing, delaying or reducing individuals" needs for care and support, or the needs for support for carers. In performing this duty, the Council must have regard to, amongst others, the importance of identifying services, facilities and resources already available in the Council's area and the extent to which the Council could involve or make use of them in performing that duty. The CSSG at paragraph 2.1 provides that "It is critical to the vision in the Care Act that the care and support system works to actively promote wellbeing and independence and does not just wait to respond when people reach a crisis point. To meet the challenges of the future, it will be vital that the care and support system intervenes early to support individuals, helps people retain or regain their skills and confidence, and prevents need or delays deterioration wherever possible.

Section 5 of the Act (Promoting diversity and quality in provision of services) requires the Council to promote an efficient and effective market in services for

meeting care and support needs with a view to ensuring service users (a) has a variety of providers and services to choose from; (b) has a variety of high-quality services to choose from; and (c) has sufficient information to make an informed decision about how to meet the needs in question. This is often referred to as the duty to facilitate and shape the market for care and support. The CSSG provides at paragraph 4.2. "The Care Act places new duties on local authorities to facilitate and shape their market for adult care and support as a whole, so that it meets the needs of all people in their area who need care and support, whether arranged or funded by the state, by the individual themselves, or in other ways. The ambition is for local authorities to influence and drive the pace of change for their whole market, leading to a sustainable and diverse range of care and support providers, continuously improving quality and choice, and delivering better, innovative and cost-effective outcomes that promote the wellbeing of people who need care and support.

The CSSG acknowledges the budgetary challenges faced by local authorities and changes in service commissioning and provision may be needed. At paragraph 4.5 the CSSG provides "At a time of increasing pressure on public funds, changing patterns of needs, and increasing aspirations of citizens, together with momentum for integrated services, joint commissioning, and choice for individuals, it is suggested that fundamental changes to the way care and support services are arranged may be needed, driven through a transformation of the way services are led, considered and arranged. Commissioning and market shaping are key levers for local authorities in designing and facilitating a healthy market of quality services.

In addition paragraph 4.27 of the CSSG provides " Local authorities should commission services having regard to the cost-effectiveness and value for money that the services offer for public funds".

The Council must ensure that there is sufficiency of provision "in terms of both capacity and capability – to meet anticipated needs for all people in their area needing care and support – regardless of how they are funded (paragraph 4.42 of the CSSG).

The Council is required to ensure choice in local provision and providers. At paragraph 4.37 of the CSSG "Local authorities must encourage a variety of different providers and different types of services. This is important in order to facilitate an effective open market, driving quality and cost-effectiveness so as to provide genuine choice to meet the range of needs and reasonable preferences of local people who need care and support services."

There is a common law duty on the Council to consult with service users, carers, providers, employees and other stakeholders that are likely to be affected by these proposals for the provision of adult social care services in the borough. The consultation must take place at a time when the proposals are still at their formative stages. The Council must provide the consultees with sufficient information to enable them properly to understand the proposals being consulted upon and to express a view in relation to it. The information must be clear, concise, accurate and must not be misleading. The consultees must be given adequate time to consider the proposals and to respond.

The Council must give genuine and conscientious consideration to the responses received from the consultees during the consultation before making its final decision

on the proposals. The report summarises the views and key themes received from the consultation and the appendices set out the responses from services users, carers, family members and other stakeholders.

As part of its decision-making process, the Council must have "due regard" to its equalities duties. Under Section 149 Equality Act 2010, the Council in exercise of its adult care and support functions, must have "due regard" to the need to eliminate unlawful discrimination, advance equality of opportunity between persons who share a protected characteristic and those who do not, foster good relations between persons who share a relevant protected characteristic and persons who do not share it in order to tackle prejudice and promote understanding.

Financial Implications:

To deliver a balanced budget over the medium term the Council is utilising c.£27m of reserves over the period 21/22 -22/23 (incl) and delivering a £21.4m efficiency & service reduction saving programme over the period 21/22- 24/25 (incl) of which c£12.3m is allocated specifically to Adult Social Care budgets.

Given the scale of the financial challenge faced by the Council, the successful delivery of the Council's savings programme is critical in delivering a balanced budget over the medium term. The proposed £2.5m saving target assigned to Persona is not only c.20% of the actual 20/21 expenditure activity relating to Persona Care and Support Limited (Para 1.3) but is also c.20% of the Adult Social Care £12.3m 3 year savings programme

Consequently, the non-delivery or partial delivery of the £2.5m saving proposal would be a material risk to the council meeting its planned medium term financial strategy.

. The report sets out the 3 recommended options to achieve the £2.5m savings however the 3 options are not quantified financially or analysed with regards to how much each option will contribute towards the £2.5m target or whether they will achieve the target in full.

Formal monitoring of the £2.5m savings programme will be required to ensure that the savings are on track to be delivered and in the event that this is not the case, the financial impact of non-delivery will need to be managed within existing Adult Social Care budgets

Report Authors and Contact Details:

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h.ashall@bury.gov.uk

0161 253 7927

Adrian Crook, Director of Adult Social Service and Community Commissioning

Background papers:

- Council Budget Setting Report – February 2021
<https://councildecisions.bury.gov.uk/documents/s26060/FINAL%20Full%20Council%20Consolidated%20Budget%202021-22%20final%20for%20publication.pdf>

Please include a glossary of terms, abbreviations and acronyms used in this report.

| Term | Meaning |
|---------|--------------------------------------|
| ASC | Adult Social Care |
| VCF | Voluntary Community and Faith Sector |
| Persona | Persona Care and Support Limited |

Proposed Adults Social Care Budget Saving options

Tell us what you think

Please return your completed form in the pre-paid envelope provided, no later than Friday 2nd July 2021. Alternatively you can complete the form online on the One Community website at <https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings> or email your feedback to strategicplanning@bury.gov.uk. Thank you.

What the council proposes for adult social care

As a result of the reductions in public spending and the impact of the recent pandemic, Bury Council has to reduce its spending significantly over the coming years.

The council's overall aim is to keep providing the current level of service, but find less expensive and better ways of doing this.

Over the next three years we propose to make savings of just over £12 million out of our current adult social care budget of £52 million. We want to do this in a number of ways: looking at what and how we buy care and support, transforming services and working towards an all age disability service.

Persona Care and Support Limited - Saving Proposals

Some of the proposed savings are to be achieved by our Local Authority Trading Company, Persona Care and Support Limited (Persona). Persona provides a number of services supporting those with learning disabilities, dementia and older people. Services range from day care, supported living, extra care, respite and shared lives. Due to the challenging financial situation, Bury will reduce the Persona contract by £2.5 million over the next 2 years. This is part of a much larger programme of savings which affects a number of services across Bury.

To achieve the savings required it is proposed to change some services and develop new ways of working to realise efficiencies, and in some cases it could mean the potential reduction or closure of services. Every effort will be made to minimise the effect of these changes on customers and staff.

Proposal 1: Persona Care and Support Limited Savings: Proposed Day Care savings

We propose to reduce the number of places of day care which the Council buys from Persona. Before the Covid19 pandemic, the day care service consistently had a number of places which were not used. Removing the unused places will enable better value for money.

For existing day service customers there is no suggestion that the amount of support currently received will reduce in any way as a direct result of this proposal. The proposal is focussed on removing unused places. However, in order to provide best value we propose to combine the older people's day service and to provide it from one location (Grundy). This is because the reduced number of places can be accommodated in one venue, which will mean lower running costs. The two sites being considered are Grundy and Pinfold Lane, only Grundy is large enough to accommodate all older people's day service customers.

In short, the proposal is: to reduce the number of unused places in the day care service, close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy. If this proposal is agreed, the dementia day service would have its own secure area at Grundy and be refurbished to be 'dementia-friendly'.

Please tell us what you think about the Councils proposal for Persona Care and Support Limited Day Care service.

Q1. Do you agree with the Councils proposals for Day Care service?
(Please circle the applicable answer)

Yes / No

Q2. Do you have particular areas of concern about the Persona Day Care service proposal? Do you have ideas of how these concerns could be reduced? (Please answer in the space provided)

Q3. Do you have an alternative idea that you would like to be considered? (Please answer in the space provided)

Q4. What is important to you about day care? (Maybe think about what you want day care to be, look like or provide for you now or in the future.) (Please answer in the space provided)

Proposal 2: Persona Care and Support Limited Savings: Proposed short stay facility savings

We propose to reduce the number of places of short stay which the Council buys from Persona. Before the Covid19 pandemic the short stay service consistently had a number of places which were not used. By removing that unused capacity it will enable better value for money.

Short stay is where customers will stay for a period of time up to 6 weeks as either a break from their normal place of care, to provider carers or family members a break from caring or because a person may need some short term support to recuperate. On occasion people stay longer than the 6 weeks and we are keen to prevent that from happening, as there are alternative options for those people who need care for longer than 6 weeks. We are going to change our approach to managing short stay to ensure people don't stay longer than 6 weeks and as a result we will need less beds from short stay.

Currently there are two Persona buildings that offer short stay care, these are called Spurr House and Elmhurst. As we do not need the number of beds we currently have for short stay, then we do not need both buildings. Only having one building will mean that overall costs will be reduced and therefore savings can be achieved.

Both buildings have been considered in detail taking account of the number of beds that are needed, the quality and longevity of the building, the unit cost of each facility and the likely investment costs needed to keep and maintain the building. Based on this it is proposed that Spurr House would be the building to close, leaving Elmhurst open for short stay care.

This proposal will ensure that one building remains open to offer short stay care for our customers. The service offered will not change, however the location where a person goes to for short stay care may change for some people.

If this option is agreed, arrangements would be put in place to minimise any disruption to customers who may, at the time of closure, be using either facility.

Please tell us what you think about the Councils proposal for Persona Care and Support Limited short stay service.

Q5. Do you agree with the Councils proposals for reducing short stay beds? *(Please circle the applicable answer)*

Yes / No

Q6. Do you agree with the Councils proposals to close Spurr House? *(Please circle the applicable answer)*

Yes / No

Q7. Do you have particular areas of concern about the Council's proposals for Persona short stay service? Do you have ideas of how these concerns could be reduced?

(Please answer in the space provided)

Q8. Do you have an alternative idea that you would like to be considered? (Please answer in the space provided)

Proposal 3: Developing an All Age Disability Service

We currently have two separate services for people with learning disabilities: one for children and young people, and one for adults.

Our aim is to provide one service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability. Therefore, you would not have to move from children and young people service to adult's service when you turned a certain age, as the proposal would remove the need to hand over or transfer between the two services.

This would take some time to implement, so, in the meantime, we will focus on making the transition from children and young people to adult services at an earlier age, ideally at 13 or 14. This will enable more appropriate support of the individual and their family to be put in place.

We also need to reduce placements outside of Bury, therefore we will work with partners to improve local opportunities for education, housing and respite care, enabling people to remain part of their local community. Achieving this will generate savings as care packages will be more suitable and encourage independence, choice and control for our young adults.

Q9. Do you agree with the Councils proposals to develop an all age disability service? *(Please circle the applicable answer)*

Yes / No

Q10. Do you have particular areas of concern about the proposals for an all age disability service/ team? Do you have ideas of how these concerns could be reduced?

(Please answer in the space provided)

Q11. If you could design services in Bury for people with a learning disability what would they look like? (Please answer in the space provided)

Alternative Savings Suggestions

We would like to know your views on whether you have suggestions where the Council could make savings elsewhere, therefore please use the box below to make any suggestions or thoughts you might have.

Q12. Do you have suggestions where the council could make savings elsewhere? (Please answer in the space provided)

Transport

In Bury we are currently reviewing our transport policy. Some customers receive transport to and from care settings as part of their package of care. If you receive transport as part of your care package we would like to hear your thoughts on the transport provided. If you do not receive transport then please circle not applicable or leave blank.

Q13. Do you receive transport as part of your care package? (Please circle the applicable answer)

Yes / No / Not applicable

Q14. If you do not receive transport as part of your care package please describe how you get to and from your care setting.

Q15. Do you pay for transport with your direct payment? *(Please circle the applicable answer)*

Yes / No / Not applicable

Q16. Do you receive a benefit that funds or contributes towards a vehicle? *(Please circle the applicable answer)*

Yes / No / Not applicable

Q17. If transport was not available to you would you have another means of transport to get to your care setting? *(Please circle the applicable answer)*

Yes / No / Not applicable

Q18. If a bus type vehicle was not available for transport would you consider sharing a taxi with other customers? *(Please circle the applicable answer)*

Yes / No / Not applicable

Q19. If a bus type vehicle was not available for transport would you consider sharing a 'lift' with other customer's family or carer? *(Please circle the applicable answer)*

Yes / No / Not applicable

Q20. Thinking about the transport service you use, please tell us what you think of it? Could anything be improved or changed?
(Please answer in the space provided)

Thank you for taking the time to share your thoughts with us today.

Please return your completed form in the pre-paid envelope provided, no later than Friday 2nd July 2021. Alternatively, you might want to complete the form online on the One Community website at <https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>

Your feedback will be used to formulate the recommendations which will go through to the Council Cabinet meeting for decision (proposed for July 2021). The outcome of these savings proposals will be published on the One Community website <https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings> following the cabinet meeting for you to view. As we will not be writing to you individually following the consultation you do not need to supply us with any personal details.

Thank you.

Proposed Adults Social Care Budget Saving options

Tell us what you think

What the council proposes for adult social care



As a result of the reductions in public spending and the impact of the recent pandemic, Bury Council has to reduce its spending over the coming years.

The council's aim is to keep providing, but find less expensive and better ways of doing this.

Over the next three years we propose to make savings of just over £12 million out of our current adult social care budget of £52 million.

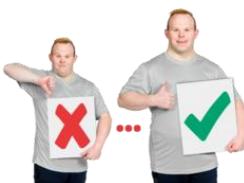
Proposal means that this is our idea and suggests what the budget savings could be.

We want to do this in a number of ways:

looking at what and how we buy care and support



transforming services.





working towards an all age disability service.

Persona Care and Support Limited - Saving Proposals



Some of the proposed savings are to be achieved by Persona Care and Support Limited (Persona).

Persona provides a number of services supporting those with learning disabilities, dementia and older people.



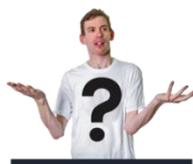
Services range from day care, supported living, extra care, respite and shared lives.



Due to the financial situation, Bury will reduce the Persona contract by £2.5 million over the next 2 years. This is part of a much larger programme of savings which affects a number of services across Bury.



To achieve the savings, it is proposed to change some services and develop new ways of working. It could mean the possible reduction or closure of some services.



Every effort will be made to minimise the effect of these changes on customers and staff.

Proposal 1: Persona Care and Support Limited Savings: Proposed Day Care savings



We propose to reduce the number of places of day care which the Council buys from Persona.

Before the Covid19 pandemic, the day care service had places which were not used.

For existing day service customers, the amount of support currently received will not reduce in any way as a direct result of this proposal.



The proposal is focussed on removing unused places. We propose to combine the older people's day service and to provide it from one location (Grundy).

This is because the reduced number of places can be accommodated in one venue, which will mean lower running costs.



The two sites being considered are Grundy and Pinfold Lane, only Grundy is large enough to accommodate all older people's day service customers.



The proposal is: to reduce the number of unused places in the day care service, close Pinfold Lane Centre at Grundy.



If this proposal is agreed, the dementia day service would have its own secure area at Grundy and be refurbished to be 'dementia-friendly'.



Please tell us what you think about the Councils proposal for Persona Care and Support Limited Day Care service.



Q1. Do you agree with the Councils proposals for Day Care service?

| | |
|--|---|
| <p>Yes</p>  | <p>No</p>  |
|--|---|

| | |
|---|---|
|  | <p>Q2. Do you have any concerns about the Persona Day Care service proposal?</p> |
|---|---|



Do you have ideas of how these concerns could be reduced?



Q3. Do you have an idea that you would like to be considered?



Q4. What is important to you about day care?



(think about what you want day care to be, look like or provide for you now or in the future.)

Proposal 2: Persona Care and Support Limited Savings: Proposed short stay facility savings



We propose to reduce the number of places of short stay which the Council buys from Persona.

Before the Covid19 pandemic the short stay service had a number of places which were not used.



Short stay is where customers will stay for a period of time up to 6 weeks as either a break, to provide carers or family members with a break from caring or because a person may need some short term support to recuperate.

Sometimes people stay longer than the 6 weeks and we're keen to prevent that from happening, as there are alternative options for those people who need care for longer than 6 weeks.



Currently there are two Persona buildings that offer short stay care, these are called Spurr House and Elmhurst. As we do not need the number of beds we currently have for short stay, then we do not need both buildings.



Only having one building will mean that costs will be reduced and therefore savings can be achieved.

Both buildings have been considered in detail. It is proposed that Spurr House would be the building to close, leaving Elmhurst open for short stay care.



This proposal will ensure that one building remains open to offer short stay care for our customers. The service offered will not change, however the location where a person goes to for short stay care may change for some people.

If this option is agreed, arrangements would be put in place to minimise any disruption to customers who may, at the time of closure, be using either facility.



Please tell us what you think about the Councils proposal for Persona Care and Support Limited short stay service.



Q5. Do you agree with the Councils proposals for reducing short stay beds?

| | |
|--|---|
| <p>Yes </p> | <p>No </p> |
|--|---|



Q6. Do you agree with the Councils proposals to close Spurr House?

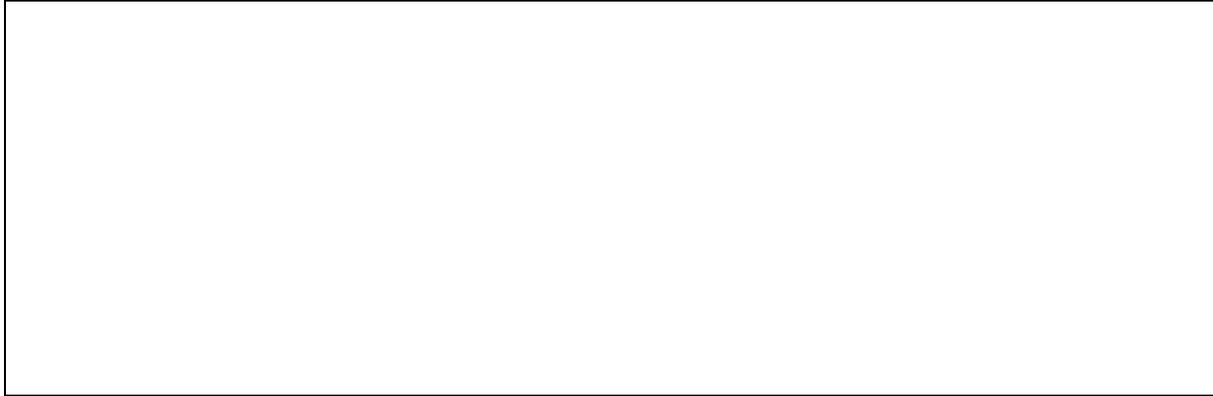
| | |
|--|---|
| <p>Yes </p> | <p>No </p> |
|--|---|



Q7. Do you have any concerns about the Council's proposals for Persona short stay service?



Do you have ideas of how these concerns could be reduced?



Q8. Do you have an idea that you would like to be considered?



Proposal 3: Developing an All Age Disability Service



We have two separate services for people with learning disabilities: one for children and young people, and one for adults.

Our aim is to provide one service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability.



This would take some time to implement: so, in the meantime, we will focus on making the transition from children to adult services at an earlier age, ideally at 13 or 14. This will enable more appropriate support of the individual and their family to be put in place.

We also need to reduce placements outside of Bury.

We will work with partners to improve local opportunities for education, housing and respite care, enabling people to remain part of their local community.



Achieving this will make savings as care packages will encourage independence, choice and control for our young adults.



Q9. Do you agree with the Councils proposals to develop an all age disability service?

| | |
|--|---|
| <p>Yes </p> | <p>No </p> |
|--|---|

| |
|--|
| |
|--|



Q10. Do you have any concerns about the proposals for an all age disability service/ team?



Do you have ideas of how these concerns could be reduced?



Q11. If you could plan services in Bury for people with a learning disability, what would they look like?

Other Savings Suggestions



We would like to know your views on where the Council could make savings elsewhere. Please use the box below to make any suggestions or thoughts you might have.



Q12. Do you have suggestions where the council could make savings elsewhere?

Transport

In Bury we are reviewing our transport policy.

Some customers receive transport to and from care settings as part of their package of care.

If you receive transport as part of your care package, we would like to hear your thoughts on the transport provided.

If you do not receive transport then please circle not applicable or leave blank.





Q13. Do you receive transport as part of your care package?

| | | |
|--|---|-----------------------|
| Yes  | No  | Not applicable |
|--|---|-----------------------|



Q14. If you do not receive transport as part of your care package, please describe how you get to and from your care setting.

| |
|--|
| <p>Q14. If you do not receive transport as part of your care package, please describe how you get to and from your care setting.</p> |
|--|



Q15. Do you pay for transport with your direct payment?

| | | |
|--|---|-----------------------|
| Yes  | No  | Not applicable |
|--|---|-----------------------|



Q16. Do you receive a benefit that funds or contributes towards a vehicle?

| | | |
|---|--|------------------------------|
| <p>Yes </p> | <p>No </p> | <p>Not applicable</p> |
|---|--|------------------------------|



Q17. If transport was not available to you, would you have another means of transport to get to your care setting?

| | | |
|---|--|------------------------------|
| <p>Yes </p> | <p>No </p> | <p>Not applicable</p> |
|---|--|------------------------------|



Q18. If a bus type vehicle was not available for transport, would you consider sharing a taxi with other customers?

| | | |
|---|--|------------------------------|
| <p>Yes </p> | <p>No </p> | <p>Not applicable</p> |
|---|--|------------------------------|



Q19. If a bus type vehicle was not available for transport, would you consider sharing a 'lift' with other customer's family or carer?

| | | |
|--|---|-----------------------|
| Yes  | No  | Not applicable |
|--|---|-----------------------|



Q20. Thinking about the transport service you use, please tell us what you think of it?

Could anything be improved or changed?



Thank you for taking the time to share your thoughts with us today.



Please return your completed form in the pre-paid envelope provided, no later than Friday 2nd July 2021. Alternatively



you might want to complete the form online at:

<https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>



Your feedback will be used to make the recommendations which will go to the Council Cabinet meeting for decision (proposed for July 2021).

The outcome of these savings proposals will be published on the One Community website:



<https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>

Thank you.





Our Ref ASC savings options: Persona
Date 24 May 2021
Please ask for Hayley Ashall
Direct Line 01612537927
E-mail strategicplanning@bury.gov.uk

Dear Customer

Subject: Proposed savings options in adult social care

Introduction

We are writing to let you know about proposals by Bury Council to reduce spending on adult social care in the coming years.

Before any decisions are made, a period of consultation will begin on Monday 24th May 2021 – and we are inviting you to read the proposals and give us your views.

What is being proposed?

A number of potential saving options are being proposed for Persona Care and Support Limited. Persona provides a number of services supporting those with learning disabilities, dementia and older people. Services range from day care, supported living, extra care, respite and shared lives.

These options are outlined in the survey which is attached to this letter. More details are on the One Community Website <https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>

Why are you informing me of this?

We are writing to you because you, or someone you care for, currently receives a service commissioned by Bury Council and delivered by Persona.

If this is not the case, we apologise. Please let us know and we will amend our records.

Do I have to take part?

No, the consultation is completely voluntary. However, your views are important as they will be taken into consideration when the council makes a decision on these proposed changes.

Will my feedback remain confidential?

Yes, your answers will be treated in the strictest confidence and will not be used other than for this purpose. You do not have to give us your personal details, and the anonymised results of the consultation will be published on the One Community website <https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>. All responses will be held and stored within data protection guidelines and the council's privacy policy.

How do I take part?

You can give us your views in a number of ways:

Online: Visit the One Community website <https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings> and follow the instructions to complete the survey.

Email: You can respond to this consultation by emailing your thoughts to strategicplanning@bury.gov.uk

By post: We have included a survey with this letter. You can fill it in and return it using the enclosed prepaid envelope or write to: ASC Savings Options for Persona Care and Support Limited, Bury Council, 3 Knowsley Place, Duke Street, Bury, BL9 0EJ.

At public meetings: We will be holding a number of public meetings – details below. Due to the Covid-19 social distancing requirements, and to keep everyone as safe as possible, these meetings will be held online, via Microsoft teams. To attend one of them, please contact the organisation arranging the session and they will send you an invitation.

Public Meeting Information

Session 1 – Wednesday 9th June (10:30am – 12noon)

This is a session for people who have a Learning Disability and is organised by Bury People First.

To attend the session: Please contact Bury People First using details below.

Email: kim@burypeoplefirst.org

Tel: 0161 705 4342 or 07939 127811

Session 2 – Wednesday 9th June (6:30pm – 8:00pm)

This is a session for family members or those that care for someone with a Learning Disability and is organised by Bury People First.

To attend the session: Please contact Bury People First using details below.

Email: kim@burypeoplefirst.org

Tel: 0161 705 4342 or 07939 127811

Session 3 – Wednesday 16th June (10:30am – 12noon)

This is a session for people who have a Learning Disability and is organised by Bury People First.

To attend the session: Please contact Bury People First using details below.

Email: kim@burypeoplefirst.org

Tel: 0161 705 4342 or 07939 127811

Session 4 – Wednesday 23rd June (1:00pm – 2:30pm)

This is a session for anyone to attend who may want to share their views. This session is organised by Healthwatch Bury.

To attend the session: Please contact either Andrea or Annemari at the Healthwatch Bury office using the details below.

Email: info@healthwatchbury.co.uk

Tel: 0161 253 6300

Session 5 – Monday 28th June (2:00pm – 3:30pm)

This is a session for anyone to attend who may want to share their views. This session is organised by Bury Council.

To attend the session: Please either send an email using the address below or leave a voicemail on the below telephone number, providing your name, telephone number and email address.

Email: strategicplanning@bury.gov.uk

Tel: [0161](tel:01612536885) 253 6885

Where can I get support?

If you need help to take part in the consultation, or have any questions about the proposals, please speak with either Bury People First on 0161 705 4342 or Healthwatch Bury on 0161 253 6300. We can provide a translation of this information into any language that you require, and copies in Braille or large print on request.

What will happen with the results of the consultation?

The results will be included in a final report which the Council will use to make an informed judgement on whether to implement the proposals. The results of the consultation will be published on the One Community website <https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>

Consultation deadline

Taking part in the consultation is voluntary, but we would appreciate having your views on the proposals. The closing date for submitting your response is **Friday 2 July 2021**. Submissions received after this date will not be included in the consultation results.

Yours sincerely



KAT SOWDEN

Managing Director

Persona Care and Support Limited



JULIE GONDA

Director of Community Commissioning (DASS)

Bury Council



ADRIAN CROOK

Assistant Director – Adult Social Care

Bury Council

Bury Council

Proposed Adults Social Care Budget Saving options

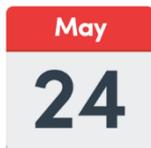


Introduction

We are writing to let you know about proposals by Bury Council to reduce spending on adult social care in the coming years.



Before any decisions are made, a period of consultation will begin on Monday 24th May 2021 – and we are inviting you to read the proposals and give us your views.



What is being proposed?

A number of potential saving options are being proposed for Persona Care and Support Limited. Persona provides a number of services supporting those with learning disabilities, dementia and older people. Services range from day care, supported living, extra care, respite and shared lives.





These options are outlined in the survey which is attached to this letter. More details are on the One Community Website.



<https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>

Why are you informing me of this?



We are writing to you because you, or someone you care for, currently receives a service commissioned by Bury Council and delivered by Persona.



If this is not the case, we apologise. Please let us know and we will amend our records.

Do I have to take part?



No, the consultation is completely voluntary. However, your views are important as they will be taken into consideration when the council makes a decision on these proposed changes.

Will my feedback remain confidential?



Yes, your answers will be treated in the strictest confidence and will not be used other than for this purpose.

You do not have to give us your personal details, and the anonymised results of the consultation will be published on the One Community website:

<https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings> .



All responses will be held and stored within data protection guidelines and the council's privacy policy.

How do I take part?

You can give us your views in a number of ways:



Online: Visit the One Community website

<https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>

and follow the instructions to complete the survey.





Email: You can respond to this consultation by emailing your thoughts to strategicplanning@bury.gov.uk



By post: We have included a survey with this letter. You can fill it in and return it using the enclosed prepaid envelope, or write to,

ASC Savings Options for Persona Care and Support Limited, Bury Council, 3 Knowsley Place, Duke Street, Bury, BL9 0EJ.

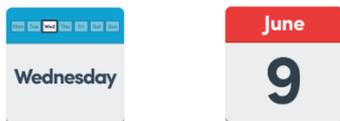


At public meetings: We will be holding three public meetings – details below.

Due to the Covid-19 social distancing requirements, and to keep everyone as safe as possible, these meetings will be held online, via Zoom.

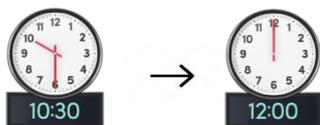


To attend one of them, please contact the organisation arranging the sessions and they will send you an invitation.



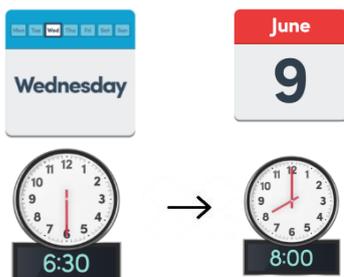
**Session 1 – Wednesday 9th June
10:30am – 12noon**

This is a session for people who have a Learning Disability, their family and carers, and is organised by Bury People First.



**Session 2 – Wednesday 9th June
6:30pm – 8:00pm**

This is a session for family members or those that care for someone with a Learning Disability and is organised by Bury People First.



**Session – Wednesday 16th June
10:30am – 12noon**

This is a session for people who have a Learning Disability and is organised by Bury People First.



Bury People First office using the details below.



Email: kim@burypeoplefirst.co.uk



Tel: 0161 705 4342

Where can I get support?



If you need help to take part in the consultation, or have any questions about the proposals, please speak with



Bury People First



Tel: 0161 705 4342



We can provide a translation of this information into any language for you on request.

What will happen with the results of the consultation?



The results will be included in a final report which the council will use to make an informed judgement on whether to implement the proposals.

The results of the consultation will be published on the One Community website

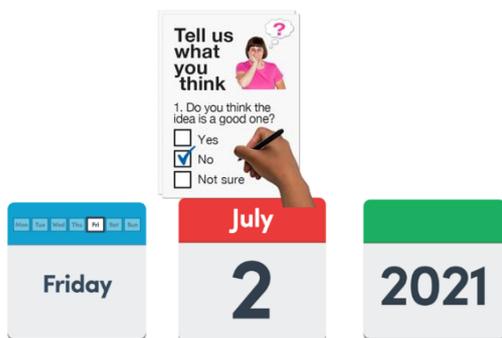
<https://www.onecommunitybury.co.uk/asc-proposed-persona-care-and-support-ltd-savings>



Consultation deadline

Taking part in the consultation is voluntary, but we would appreciate having your views on the proposals.

The closing date for submitting your response is **Friday 2 July 2021**. Submissions received after this date will not be included in the consultation results.



Yours sincerely

JULIE GONDA

Director of Community Commissioning
Bury Council

KAT SOWDEN

Managing Director
Persona Care and Support Limited

ADRIAN CROOK

Assistant Director – Adult Social Care
Bury Council

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Project Report

16 May 2021 - 05 July 2021

One Community

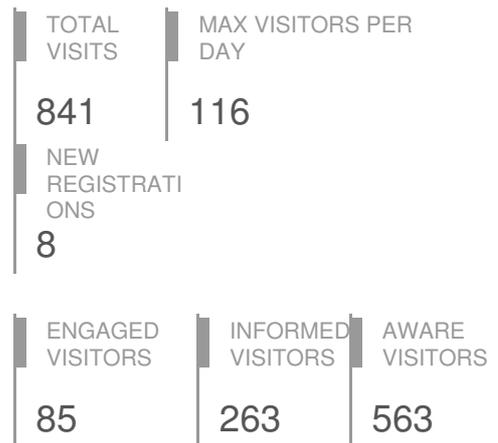
Adult Social Care: Proposed Persona Care and Support Ltd savings



Visitors Summary

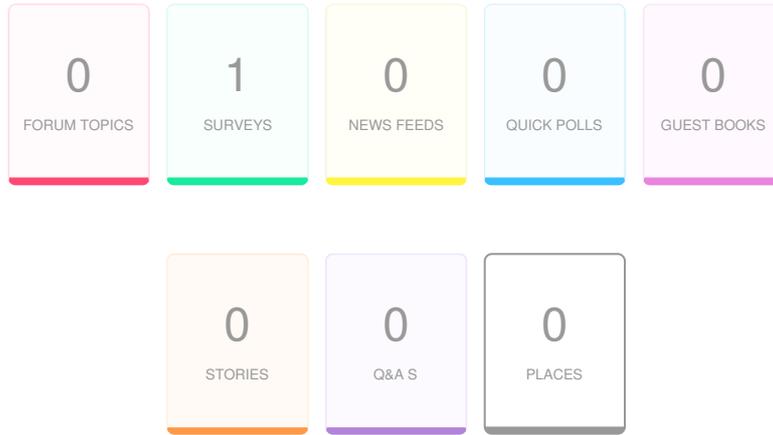


Highlights



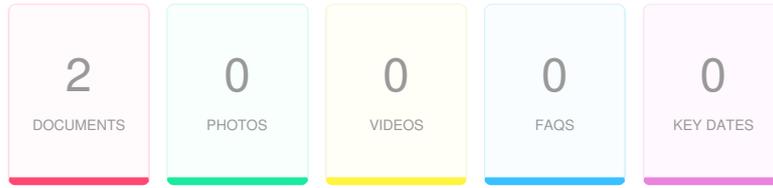
| Aware Participants | 563 | Engaged Participants | 85 | | |
|---------------------------------|--------------|-----------------------------|------------|------------|-----------|
| Aware Actions Performed | Participants | Engaged Actions Performed | Registered | Unverified | Anonymous |
| Visited a Project or Tool Page | 563 | | | | |
| Informed Participants | 263 | Contributed on Forums | 0 | 0 | 0 |
| Informed Actions Performed | Participants | Participated in Surveys | 4 | 0 | 81 |
| Viewed a video | 0 | Contributed to Newsfeeds | 0 | 0 | 0 |
| Viewed a photo | 0 | Participated in Quick Polls | 0 | 0 | 0 |
| Downloaded a document | 73 | Posted on Guestbooks | 0 | 0 | 0 |
| Visited the Key Dates page | 0 | Contributed to Stories | 0 | 0 | 0 |
| Visited an FAQ list Page | 0 | Asked Questions | 0 | 0 | 0 |
| Visited Instagram Page | 0 | Placed Pins on Places | 0 | 0 | 0 |
| Visited Multiple Project Pages | 186 | Contributed to Ideas | 0 | 0 | 0 |
| Contributed to a tool (engaged) | 85 | | | | |

ENGAGEMENT TOOLS SUMMARY



| Tool Type | Engagement Tool Name | Tool Status | Visitors | Contributors | | |
|-------------|---|-------------|----------|--------------|------------|-----------|
| | | | | Registered | Unverified | Anonymous |
| Survey Tool | Proposed Adults Social Care Budget Saving options | Archived | 236 | 4 | 0 | 81 |

INFORMATION WIDGET SUMMARY



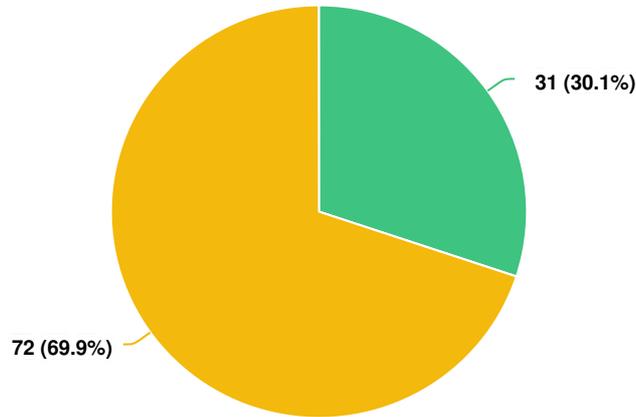
| Widget Type | Engagement Tool Name | Visitors | Views/Downloads |
|-------------|--|----------|-----------------|
| Document | How to get involved and Public Meeting Information.pdf | 68 | 118 |
| Document | The Councils Revenue and Capital Budgets 21-22 and the Medium Term ... | 15 | 20 |

ENGAGEMENT TOOL: SURVEY TOOL

Proposed Adults Social Care Budget Saving options

| | | |
|---------------------|------------------------|--------------------------|
| Visitors 236 | Contributors 85 | CONTRIBUTIONS 117 |
|---------------------|------------------------|--------------------------|

Do you agree with the Councils proposals for Day Care service?



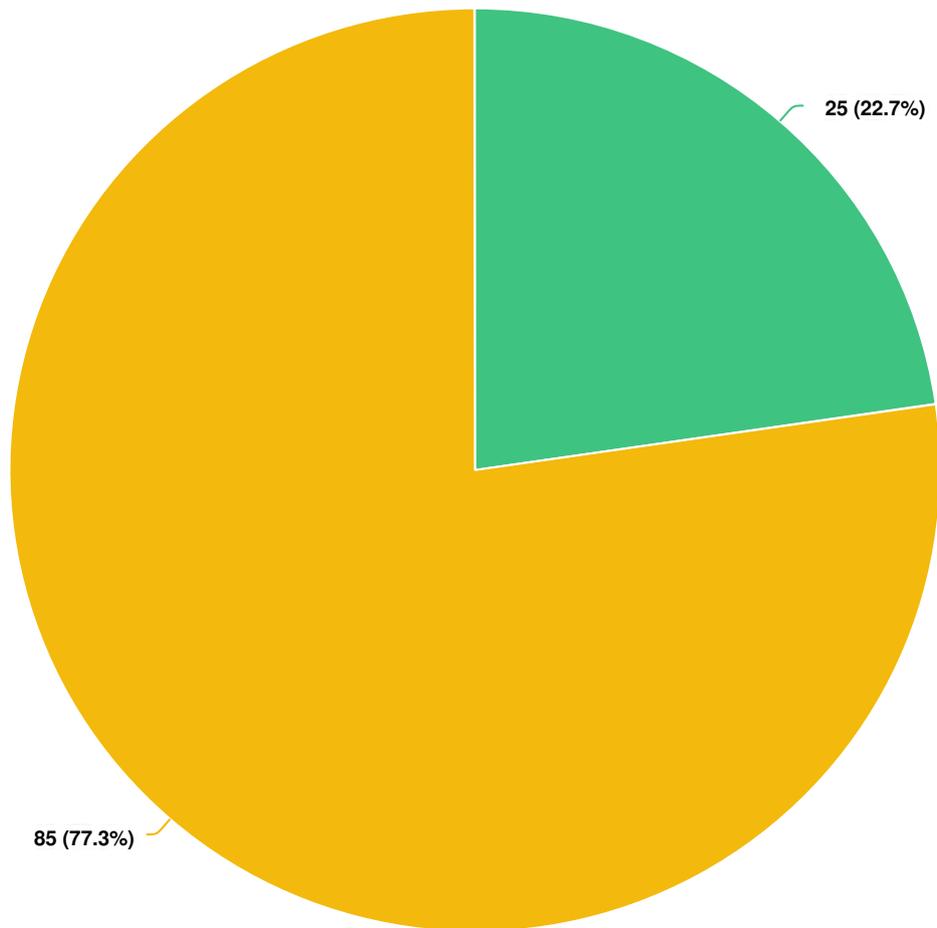
Question options

- Yes
- No

Optional question (103 response(s), 14 skipped)

Question type: Radio Button Question

Do you agree with the Councils proposals for reducing short stay beds?



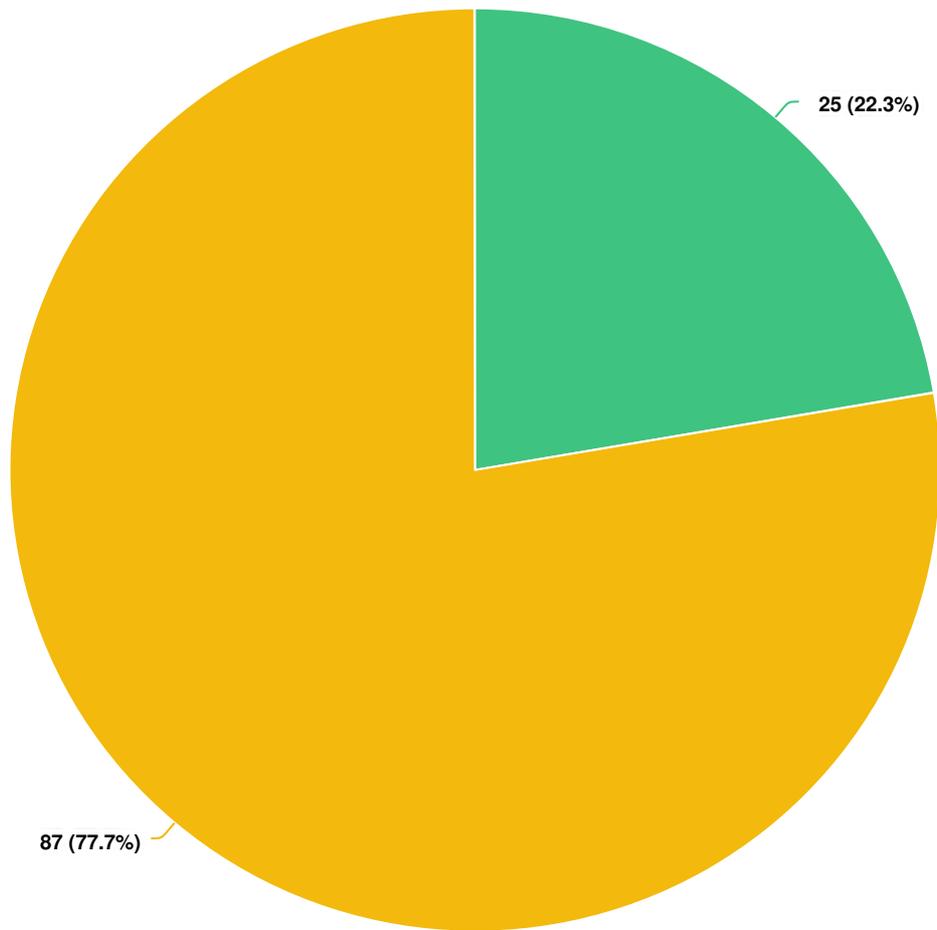
Question options

- Yes
- No

Optional question (110 response(s), 7 skipped)

Question type: Radio Button Question

Do you agree with the Councils proposals to close Spurr House?



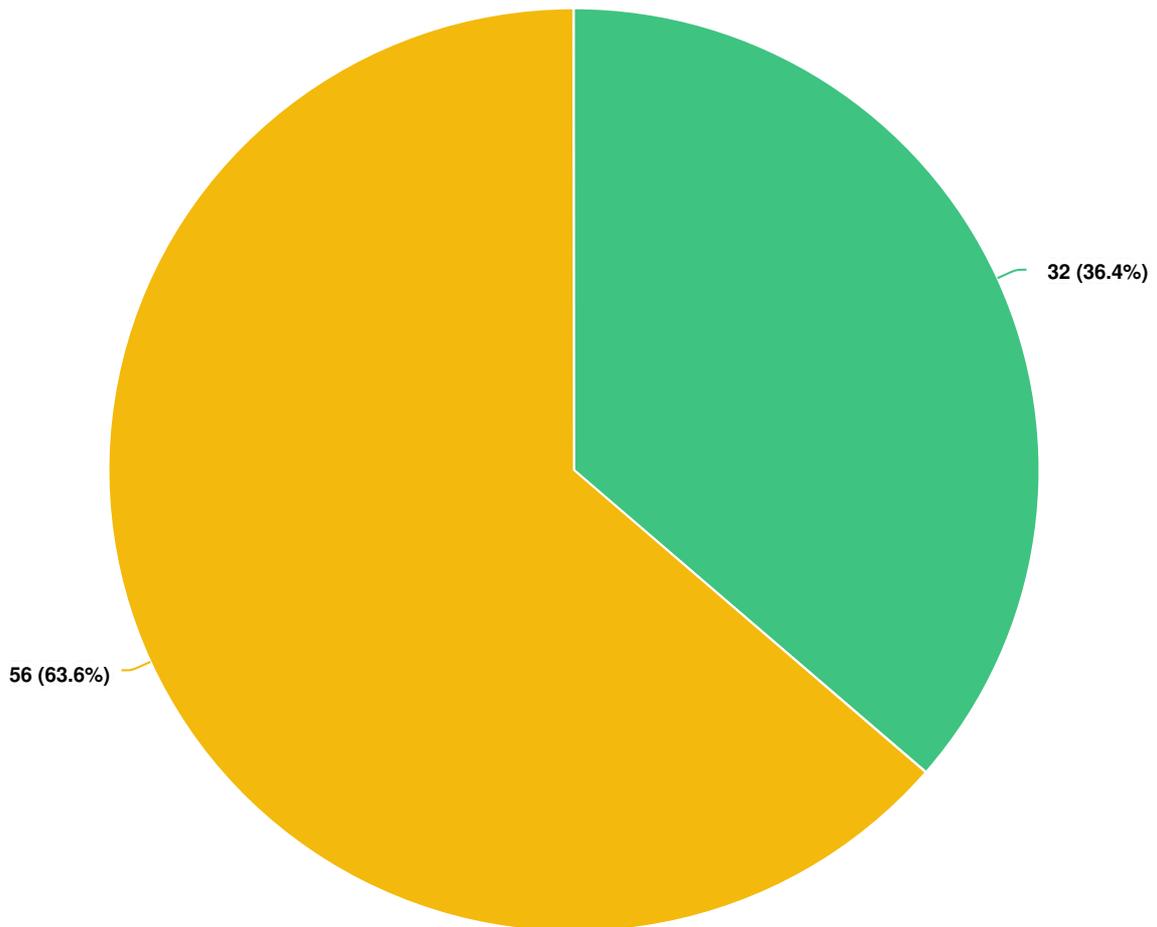
Question options

- Yes
- No

Optional question (112 response(s), 5 skipped)

Question type: Radio Button Question

Do you agree with the Councils proposals for all age disability service?



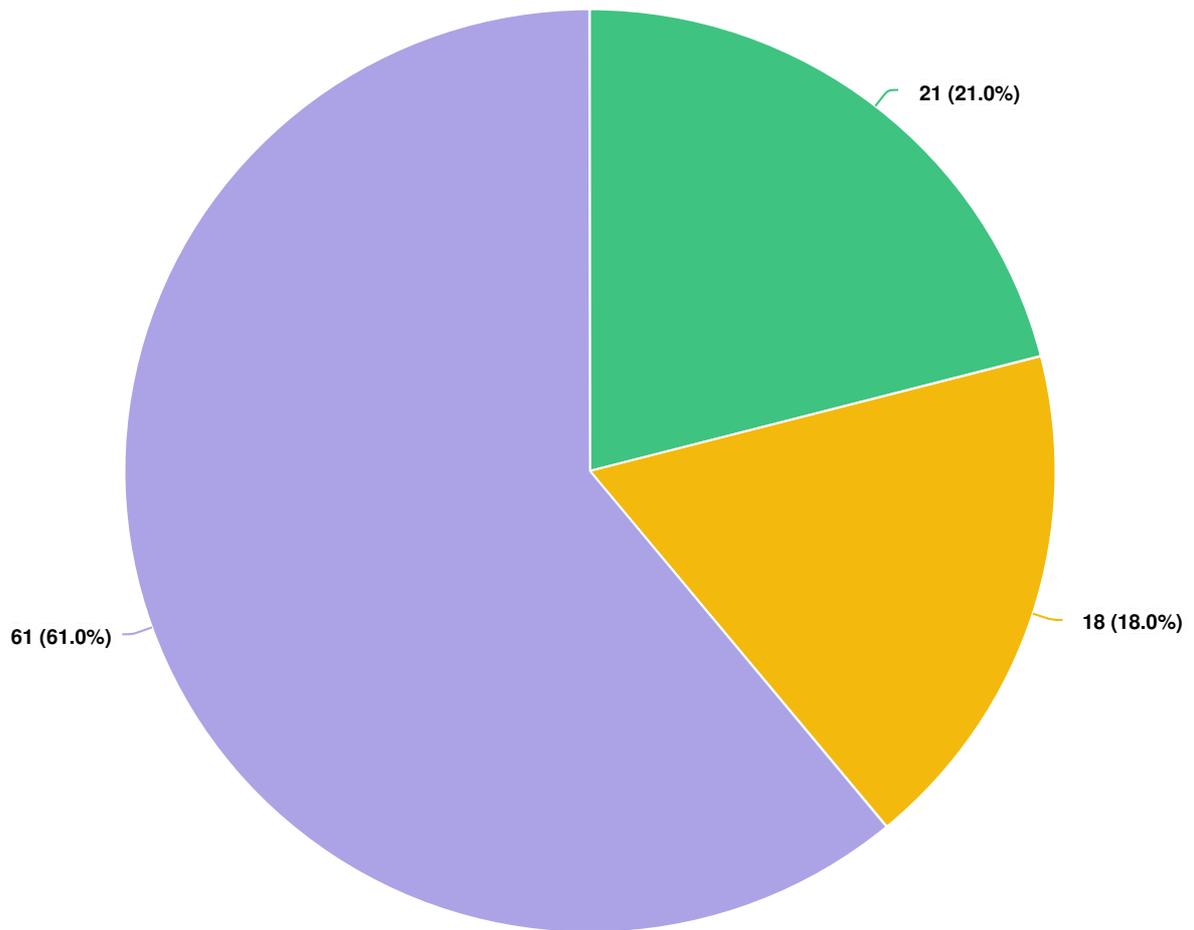
Question options

- Yes
- No

Optional question (88 response(s), 29 skipped)

Question type: Radio Button Question

Do you receive transport as part of your care package?



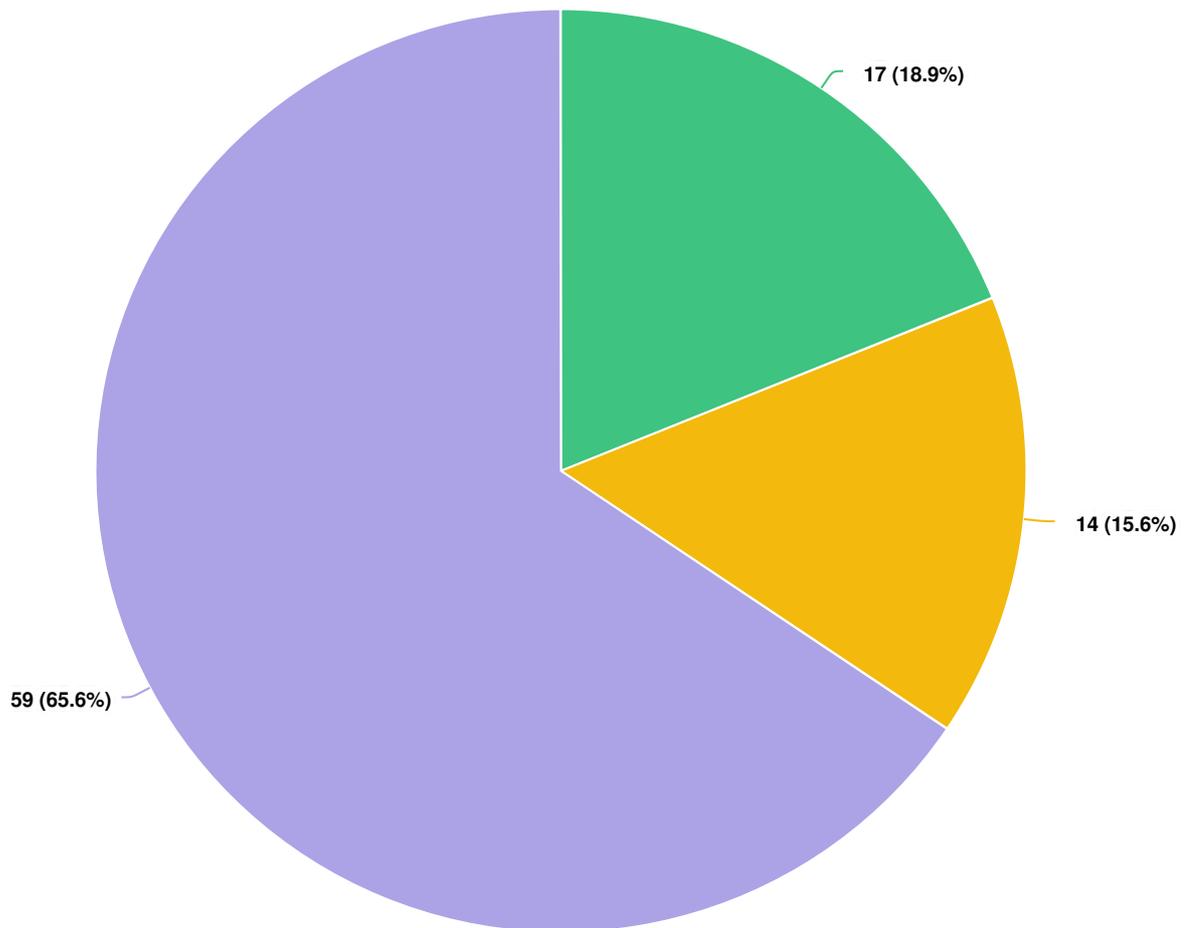
Question options

- Yes
- No
- Not applicable

Optional question (100 response(s), 17 skipped)

Question type: Radio Button Question

Do you pay for transport with your direct payment?



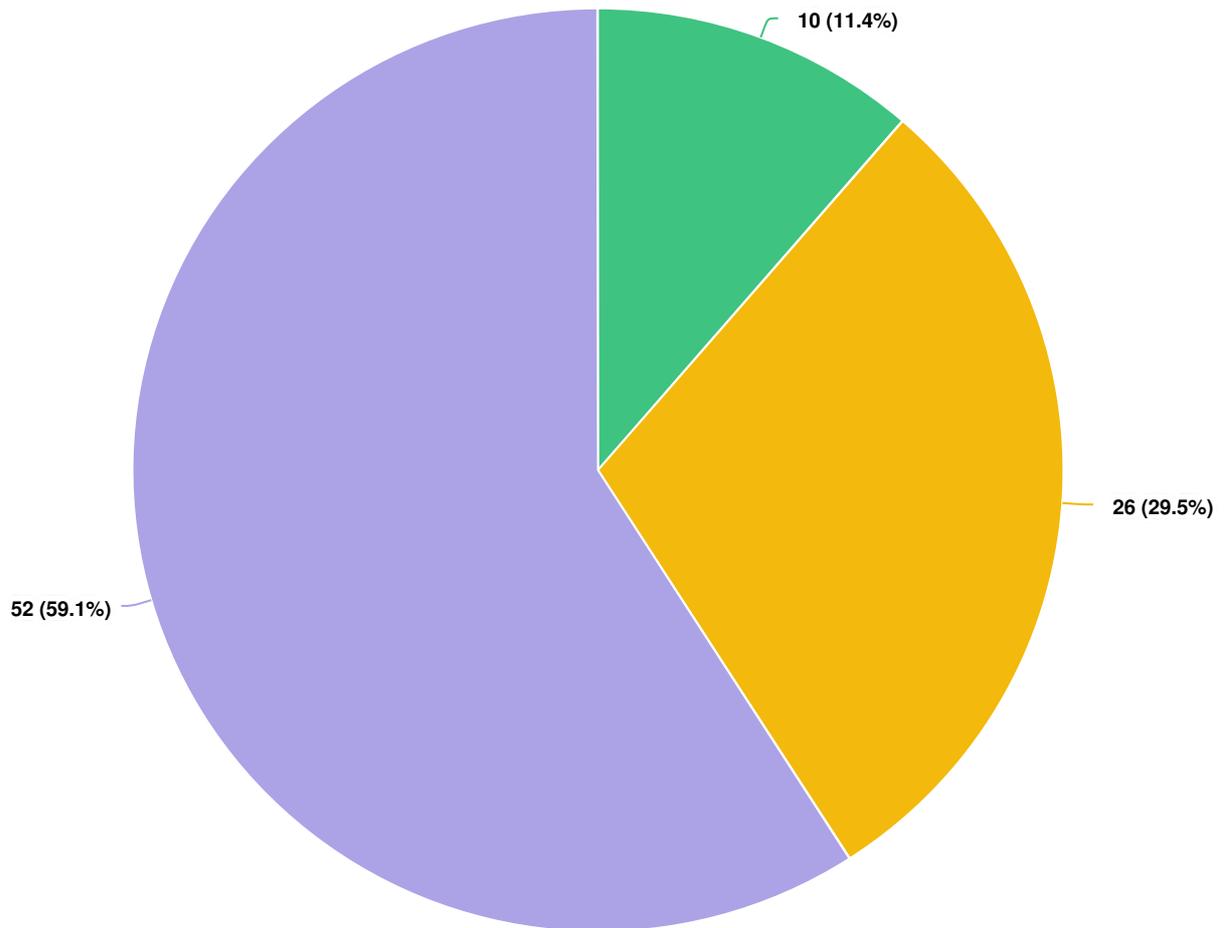
Question options

- Yes
- No
- Not applicable

Optional question (90 response(s), 27 skipped)

Question type: Radio Button Question

Do you receive a benefit that funds or contributes towards a vehicle?



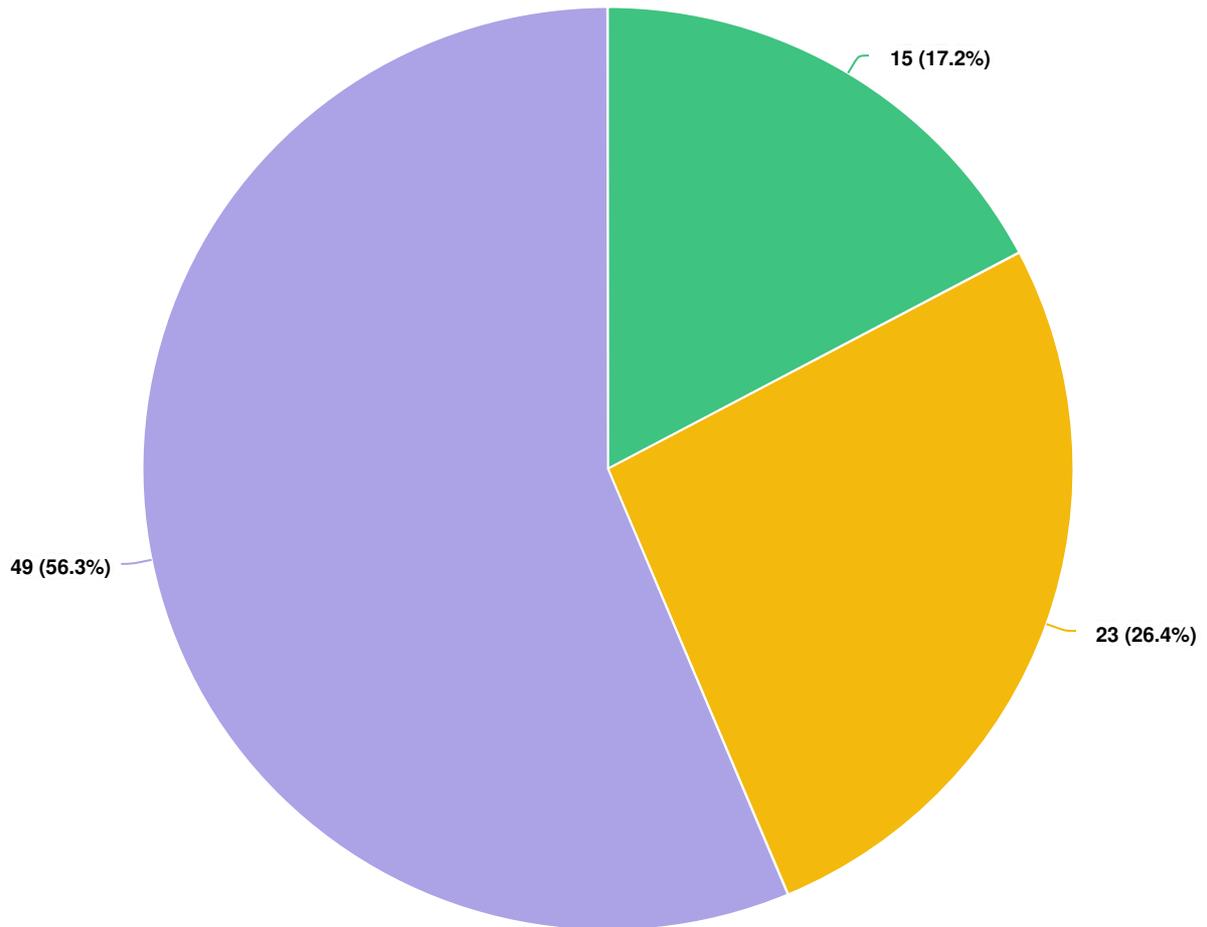
Question options

- Yes
- No
- Not applicable

Optional question (88 response(s), 29 skipped)

Question type: Radio Button Question

If transport was not available to you would you have another means of transport to get to your care setting?



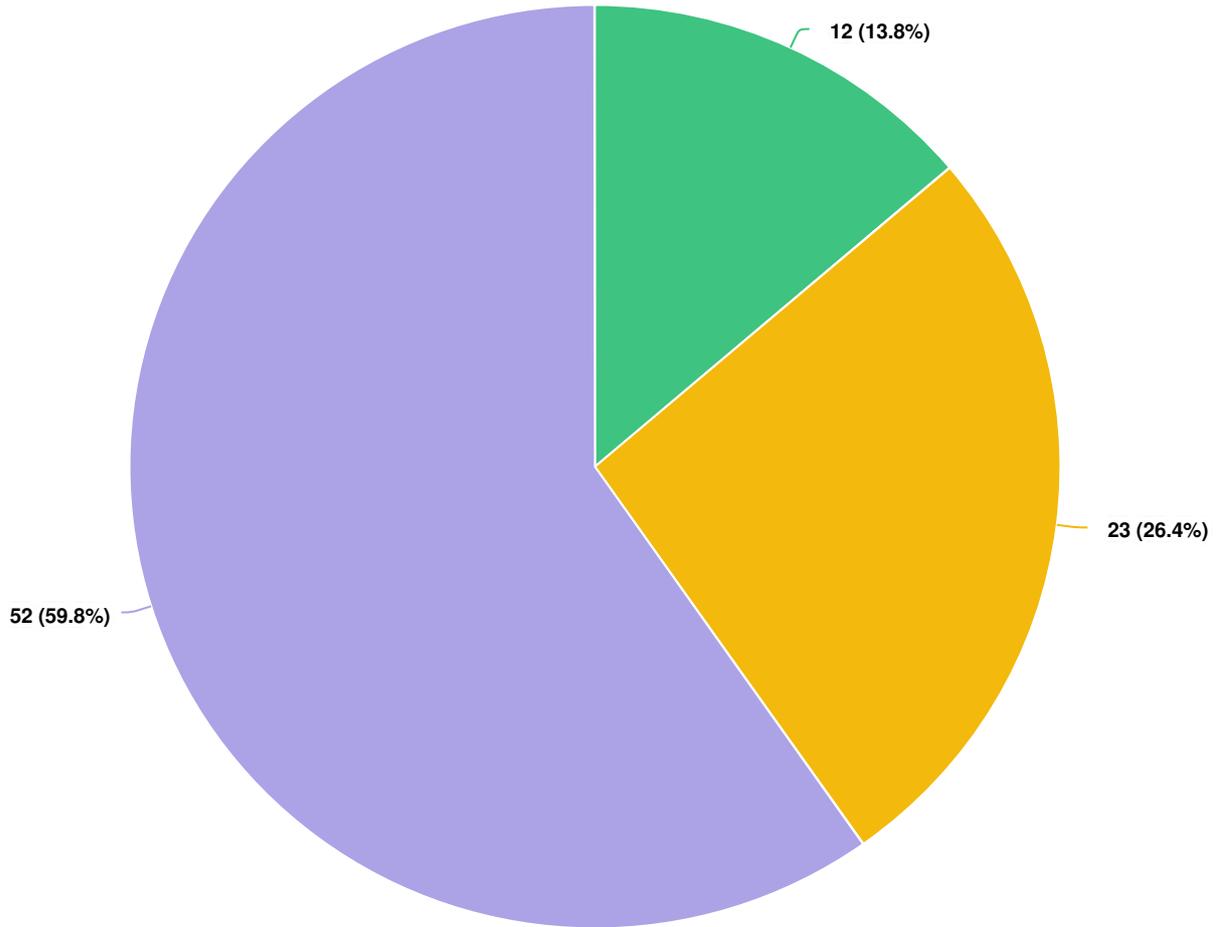
Question options

- Yes
- No
- Not applicable

Optional question (87 response(s), 30 skipped)

Question type: Radio Button Question

If a bus type vehicle was not available for transport would you consider sharing a taxi with other customers?



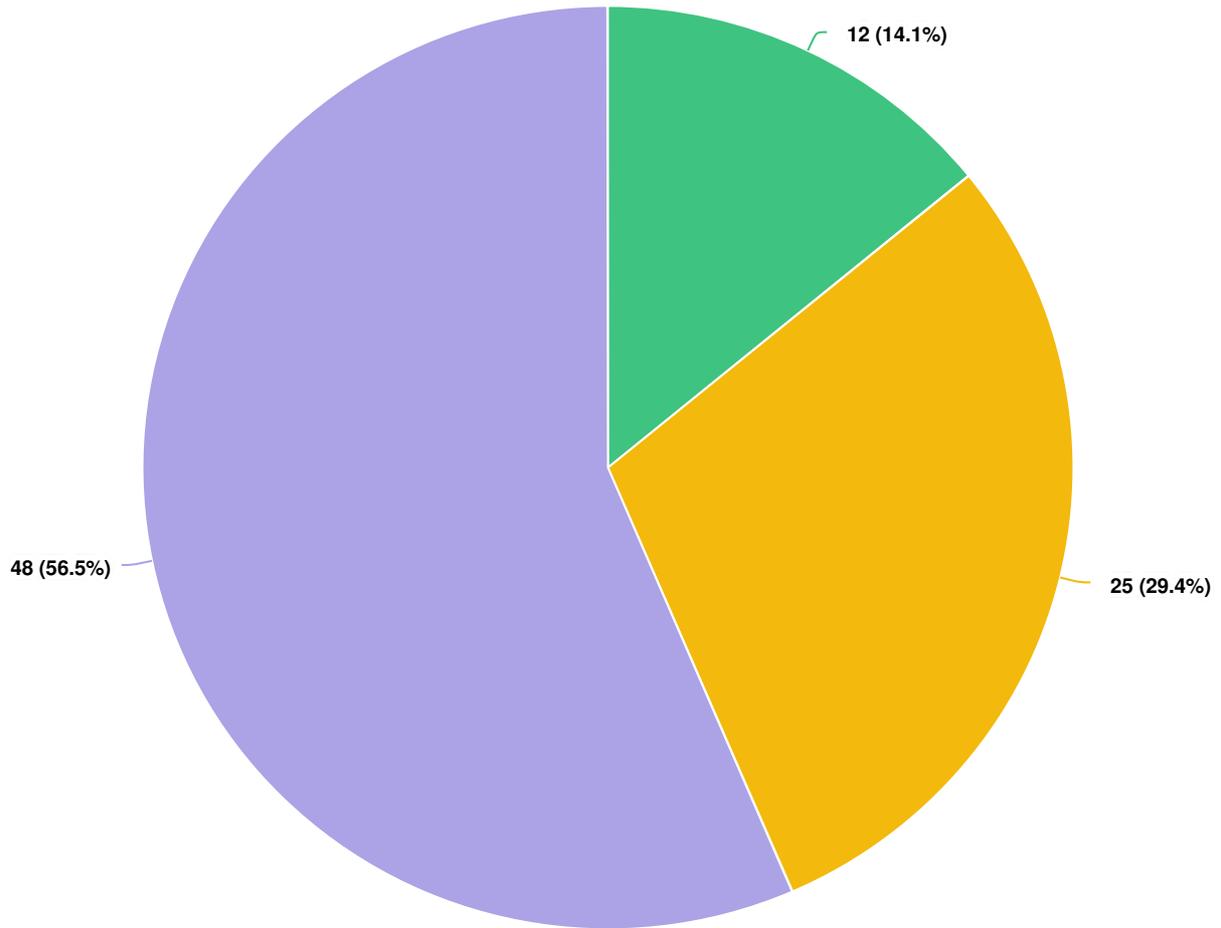
Question options

- Yes
- No
- Not applicable

Optional question (87 response(s), 30 skipped)

Question type: Radio Button Question

If a bus type vehicle was not available for transport would you consider sharing a 'lift' with other customer's family or carer?



Question options

- Yes
- No
- Not applicable

Optional question (85 response(s), 32 skipped)

Question type: Radio Button Question

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Focus Group report

Report of the information gathered in the focus group held to discuss the adult social care cost saving proposals.

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Introduction to Healthwatch Bury

This report has been produced by Healthwatch Bury. The Healthwatch network consists of 152 Healthwatch organisations across each of the local authority areas in England. It also has a national body called Healthwatch England based in London. We are all independent organisations who aim to help people get the best out of their local health and social care services, whether it's improving them today or helping to shape them for tomorrow.

Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience. We are the only body looking solely at people's experience across all health and social care in Bury. As a statutory watchdog, our role is to ensure that local decision makers put the experiences of people at the heart of their care so that those who buy (commissioners) and provide our services (NHS Trusts, GPs, the voluntary sector and independent providers) can benefit from what Bury people tell us.

Our reports on various elements of health and social care in Bury can be found on our website at the following link: healthwatchbury.co.uk or by contacting us directly using the details on the back cover.

Executive Summary

The focus group included mainly providers of social care services, including carers, although some participants did not indicate their status and could be service users, family or some other relation to the process.

The session was led to look at the main proposals of the consultation, then allowing for any further comment around the consultation in general. No position was taken by any of the staff facilitating the session and no judgement of anything people said. Simple rules were laid out for participants to ensure anyone that wished to be heard was given their chance and not be interrupted, and that all should be respectful of one another.

The responses from the group were noted, and most were eager to voice their thoughts, opinions and experiences, although some were less forthcoming.

Below are our records of what was said, as well as questions that were asked for which participants wanted to have answered. We have committed to share any answers that are returned to us. We have attempted to capture the sentiment from each contributor and report them succinctly rather than relaying verbatim as there would be too much to transcribe.

Day care centre proposal

Attendee A: Really concerned about the first proposal. People are not receiving the services they need.

Attendee B: My clients use Persona facilities. COVID-19 pandemic has put people off from going to day care centres.

People are still getting diagnosed with dementia but due to the pandemic can't plan their care package as usual and therefore numbers of people who require the day care service appear lesser than they actually are. If this facility closes there will be more people who can't access the services. There will be a problem in 2 years when people need facilities to go to. Bury MBC might be saving money short term but will cost more long term. Have they got an alternative to day care?

The COVID-19 pandemic is hiding the real numbers of service users as it is making people scared of using the services.

Attendee C: Pinfold Day Centre and Grundy Day Centre are both well used. Grundy Day Care Centre will not be big enough to accommodate these people who use the services. People are shutting themselves away during the pandemic, but will need the services once again after thing return to normal. Dementia sufferers need support, I really feel for them. I don't know what the answer is.

Questions posed:

What is the criteria used to limit the numbers that can use the day care centres?

Has Bury MBC got an alternative to day care?

Short-stay proposal

Attendee B: Our clients require short stay services and have also been underused due to COVID-19. Patients will end up in different care homes and there will be an extra cost attached to this.

Attendee D: In the long run the Council will end up using private homes for people who need Spurr House. Reducing the beds is not an answer.

Questions posed:

What are the 'special arrangements' going to be, will they be adequate?

An all age disability service

Attendee B: I am a registered CQC provider and it costs money to provide for over 18s but costs a lot more money to provide services for children's services. There is a different legislative framework for children and young people. Children's sector is too costly for adult service providers to adapt and train-up to.

Attendee A: Concerned about this proposal because special skills needed for children and young people, I don't think it's a good idea.

Attendee D: You need specific and different skills and qualifications to deal with children compared to adults etc. So their care will need to be provided by different people anyway - what is the point of bringing the service together.

Alternative Options

Attendee A: Alternative option would be to get rid of more managers of departments. Spend less on management and bureaucracy.

Attendee B: There are different ways of providing care in different boroughs. What is the comparison with the rest of the Greater Manchester? How many social workers and social worker managers per head? How much are short stay prices per head? Where does Bury fall within this and where is the evidence we are not already cut the most?

Attendee C: Spurr House/Elmhurst can't advertise for places and let other providers know what's available, so of course it looks like they are not being used enough. They could easily be full with the demand that is out there. There needs to be more connectivity.

Attendee D: Back in 2011 when the council was closing other care homes due to savings. Where have those savings gone? We were assured that was all the cutting that would be necessary to care, now this?

Attendee A: There are different contracts and services. Are we getting good value for our money or are we paying for other borough residents?

Attendee B: Covid is just hiding the real demand, post pandemic, this arrangement will end up costing far more as the private profit making sector will be providing and the council will still have to foot the bill.

Transport

Attendee A: I am really concerned. We were trying to get people who have mobility allowance to day centres, where will they go now?

Any other comments

Attendee A: I am really concerned. Day centres are underused because of the pandemic. What will be the waiting list for the service once the pandemic is over?

Attendee D: We took people in to free up NHS beds. Elmhurst is a smaller bed service. In the long run it will affect the bigger picture. It will cause suffering, unemployment and people being stuck at home. It is bigger than saving money.

Attendee B: Is the Bury MBC consulting with private care homes?

Attendee C: As far as Spurr House is concerned, it has a lot of history behind it. Fred Spurr offered the home to the local community. What will happen to Spurr House when it gets closed? Do local people know what it will mean to them?

Attendee D: I'm a carer and that is why I have heard about this consultation. Does Bury MBC not have a duty to let local people know about the consultation? Not everyone are online, needs more promotion than social media.

Attendee A: Does community own Spurr House? Is it legal to close it and what will happen to the building?

Attendee C: This will have an impact on people in the future when looking after their family members.

Questions posed:

Is the Bury MBC consulting with private care homes?

What will happen to Spurr House building when it gets closed?

How has the consultation been promoted to people who are not online?

Does community own Spurr House?

Is it legal to close it and what will happen to the building?

Additional feedback

After the focus group, we received an email from a person that had attended the focus group but had not contributed to the discussion. Shared below is a summary of what they said, with some details changed or removed to protect their identity.

“As only three areas were covered in the online meeting, am I right in thinking that all the required savings will be made from the current short stay, day care and learning disability facilities?

My partner has carers twice a day - no mention was made of these agencies. We make a contribution towards the costs of this service, which was means-tested. In April the cost was increased - only noticeable when the invoice came for payment. Is the Council proposing to sneak in further increases ? The April increase was more than the increase in our state pensions.

On a completely different matter - if the Council would like to achieve considerable savings which affect vulnerable people, why is it still dithering to make a decision regarding the future of the Civic Centres, all of which have been losing money for years. Their closure will not affect those in need, or indeed huge numbers of Bury residents.”.

Contact us

If you require this information in an alternative format, please contact our office via the details below.



Healthwatch Bury CIC

St Johns House

1st Floor

155 - 163 The Rock

Bury BL9 0ND

Healthwatchbury.co.uk

Tel: 0161 253 6300

Email: info@healthwatchbury.co.uk

Tweet: [@healthwatchbury](https://twitter.com/healthwatchbury)

Find us on Facebook

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Companies House number 08886952.

Registered in England and Wales.



Adults Social Care Public Consultation

Proposed budget savings options – public consultation session

Monday 28th June 2021 2:00pm

Summary of the session

Position overview

As a result of the reductions in public spending and the impact of the recent pandemic, Bury Council has to reduce its spending significantly over the coming years.

The council's overall aim is to keep providing the current level of service, but find less expensive and better ways of doing this.

Over the next three years we propose to make savings of just over £12 million out of our current adult social care budget of £52 million.

We want to do this in a number of ways: looking at what and how we buy care and support, transforming services and working towards an all age disability service.

Some of the proposed savings are to be achieved by our Local Authority Trading Company, Persona Care and Support Limited (Persona).

Persona provides a number of services supporting those with learning disabilities, dementia and older people.

Services range from day care, supported living, extra care, respite and shared lives. Due to the challenging financial situation, Bury will reduce the Persona contract by £2.5 million over the next 2 years.

This is part of a much larger programme of savings which affects a number of services across Bury.

To achieve the savings required it is proposed to change some services and develop new ways of working to realise efficiencies, and in some cases it could mean the potential reduction or closure of services.

Every effort will be made to minimise the effect of these changes on customers and staff.

Introduction

- An overview of the session was provided.
- Explained this was an opportunity for all to feedback with thoughts, suggestions on the proposals and any alternative ideas.

Proposals were described using the narrative from the consultation survey document and feedback was asked for from attendees on each proposal/element. This is described below:

- **Proposal 1: Persona Day Care**
 - No comments received.

- **Proposal 2: Persona Short Stay Facility**
 - Attendee comment - This proposal, it says 'never full'. However, we (Spurr House) are the biggest bedded service which is on average, 80% full. Would it not be of benefit to keep the biggest property open? This proposal is looking for quick savings, which long term will have a catastrophe impact on other services, will cut jobs, impact on people's mental health.

 - Attendee comment - A previous meeting to this consultation highlighted that a covenant is attached to Spurr House with restrictions on what the building can be used for. What is the plan for the building long term? If you cannot do anything with the building, what are you going to do with it?

 - Attendee comment - The service responds quickly to accommodate referrals from Rapid Response and respite for families. If people will have to access private care homes, what happens if they do not meet the criteria.

 - **Response:** Eligibility of short stay care and long-term/residential care is different. Bury have providers to meet all needs.

 - Attendee comment - During 2011 another building, Redcliffe closed. It was reported in the Manchester Evening News that under the plans, money would be reinvested into Spurr House for a specialist dementia centre. This never happened.

 - Attendee comment - There has been an increase in Council Tax. During a recent meeting with an M.P. I was advised the percentage towards social care has increased – why are we still making savings?

 - **Response:** Council Tax covers lots of services. In social care, the needs are increasing. We do not want to make savings, however, this proposal is based on the intelligence we have. We welcome everyone's suggestions on where the Council could make savings.

 - Attendee comment - I hope a lot of people go against this proposal. It feels the decision has already been made. A tender for care at home has recently gone out, is this because the Council are looking at using care at home more? Could this proposal of care at home not be offered to Persona?

- **Response:** Explained what the care at home provision is and advised the Council are legally bound to go out to tender. This tender is not connected to this consultation. Persona could put a bid in for the care at home tender if they choose to. Reiterated this consultation is a proposal and no decisions had yet been made. To feed into the process, people can express their views, comments and feedback through
 - the online survey hosted on One Community
 - hard copy and return via post
 - Email or by telephone
 - Bury People First session and support
 - Healthwatch session and supportAll responses will be pulled together and put forward in a report. It will be the Council's Cabinet decision

- Attendee comment - Is there anyway for people who do not have social media to get a hard copy of the survey?

- **Response:** Outlined the methods to engage with the proposal, along with Healthwatch and Bury People First have 1:2:1 sessions to support people.

- Attendee comment - Is there any way for the deadline to be extended?

- **Response:** No, the public consultation runs for six weeks, advice had been taken form Legal Services. Numerous methods including sending out 701 customers letter and survey, using one community, social media, press release, notifying councillors, care providers, various networks and wider stakeholders to try and alert people to the consultation. Advised people do not have to complete all of the survey, only the questions/ sections that are applicable to them.

- **Proposal 3 – Developing an all aged disability service – slide 6**
 - Attendee comment - I have concerns on the huge differences of children / adults supporting needs. There needs to be the expertise for each age.

 - **Response:** This proposal is exploring back office function teams working together not losing the specialism with opportunity for individuals transitioning earlier if it is right for the person.

 - Attendee comment - Why not look at the third sector / charities to widen the opportunities for a better service for people. There is nothing in Bury. Bury needs to look and identify good practices in other areas and learn how to replicate this work.

- **Response:** The VCFA are an infrastructure organisation in Bury. Working with the third sector is a great solution and way to provide a range of services and support to people in their local community.
- Attendee comment - This is a matter of values – we need to protect vulnerable people. I urge others on the call to put pressure on local politicians and M.P. What they are going to do to get Bury the funding that is required. Bury Council does its best in difficult circumstances, services will get worse if not adequately funded.
- Attendee comment - Protecting buildings due to an emotional attachment is not right, when it's a way to keep service going it might be a good thing. You need to enter into partnership with the VCFA and need to look at services.
- Attendee comment - Transition experiences defined by families is that it is a nightmare. If got right, this could be an improvement to the system. An all aged service could be a good thing.
- Attendee comment - There are lots of examples of incredible services, who are ahead of their time. Bury only look at in-house or larger organisations. It is time to look at innovated services and person-centred ways for people.
- Attendee comment - The culture you can't work in partnership due to procurement / commissioning governance needs to be looked at – 'working differently'. Along with the low pay of front line staff.
- Attendee comment - Cuts in the name of giving independence has resulted in people living isolated/lonely lives – why are they battling the system. Also shortage of resources. This is a much bigger picture.
- Attendee comment - Procurement – why does no body talk to the suppliers? I have seen the care at home tender and do not think it is good.
- Attendee comment - The proposal for an all aged service worries me – CQC cover adults and OFSTED cover children – how would the service work?
- **Response:** To be clear this proposal is looking at internal processes that shape and support the service provision eg our children and young people and adults social care teams coming together to work differently. More focussed on the individual and joint working together.
- Attendee comment - There needs to be an offer for people outside the care packages, along with looking at the cost of care packages in Bury.

- Attendee comment - The reserve pots of money in Bury Council should be brought forward and used.
 - **Response:** Using reserves would only be a one-off short term measure not a long term solution. We would still need to look at longer term proposals to maintain the level of savings required.
 - Attendee comment - By utilising the reserves money to advertise will fill up the empty beds – PR route to promote the service.
 - Attendee comment - Why are there empty beds? Could these not be filled if the people who needed them were given them?
 - Attendee comment - Newspaper articles are highlighting failings in the private care sector.
 - **Response:** Bury do not work with providers who are inadequate, we have a strong quality assurance framework and work with care providers to be the best they can be. If people have a personal budget, they have choice in who they use.
- **The Transport policy**
 - No comments received.
 - **Alternative savings suggestions**
 - No comments received.

Session Close

Closed with thanks. People encouraged to complete consultation as outlined. Advised again no decisions have been made. Recommendations will go to Cabinet using the feedback received to shape the recommendations. Council meetings and papers are public, and decisions are available to the public on Bury Councils website. Outcomes will be published on One Community after the July Cabinet.

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Bury Council Consultation

Proposed Adults Social Care Budget Saving options



Bury Council asked Bury People First to talk to people with learning disabilities about the council proposed budget savings.

How did we do this?



- We used the easy read Bury consultation questionnaire.



- We organised three meetings.



- We talked to individuals.



In total, 36 people got involved and told us what they think.



We received feedback from people with learning disabilities who use provider services via the staff, but we don't know the numbers of people who expressed an opinion.

What people said:



Persona Care and Support - Saving Proposals



Proposal 1: Persona Care and Support Savings: Proposed Day Care savings



- The day service closure is for older people, not people with a learning disability.



- Some people are worried that if they close day services for older people, they will close day services for people with a learning disability.



- Some people said they didn't know you can say no to going to the day centre.



- Some people said they like going to the day centre to see friends.



- Some people stopped going to day services during the lockdown and now don't want to go back.



- Some people said they have to go to the day service as there are no staff at home during the day.



- Some people want to go to the day service less and do other things in other places.



- Some people said they don't know what the options are for the things they can do during the day.



- Some people would rather find a job or volunteer than go to the day service.



- Some people said their only choice is going to the day service or volunteering in a charity shop. They want to know what the other options are.



- One person talked about their personal budget, and other people didn't know about this option.



- Some people said they had no choice about going to the day centre.



- What about people with lots of needs? How are they going to get the help they need?



- Persona has a friendships group – will this stop?



- What if people are upset about the closure of a day centre and decided to stay at home – will they be lonely?



- Lots of people said it would be better if they could do different things each day.



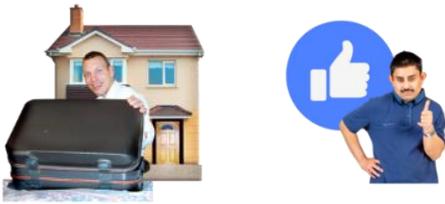
- Lots of people said you have to pay for day services, and they can't afford it.



- One person said, "I don't go to day services anymore. I have been helped to do different things on different days."



Proposal 2: Persona Care and Support: Proposed short stay facility savings



- Some people have used respite services and said they are very good with lots of activities.



- One person said they stayed at Elmhurst when their mum was in hospital, and it was ok but a bit like staying in a hospital.



- Do you have to go to respite? Can you go on holiday instead?



Proposal 3: Developing an All Age Disability Service



- Everyone likes the idea of an all age disability team.



- Going to one place is a good idea.



- It makes it easier moving from children to adult services.



- Can we be involved in making it happen?

Other Savings Suggestions:

Transport



- Some people are worried as it can be difficult to get to the day services.



- Not all buses are accessible.



- The buses can be crowded.



- Taxis are expensive.



- I want to learn how to travel independently.



- Some people said that parents don't like them travelling on the bus?



- Not everyone can get a car via PIP.



- Ring and Ride can be late or early.



If you could plan services in Bury for people with a learning disability, what would they look like?



- Lockdown made people think about things differently.



- Easy read information about support, transport, respite options.



- Information about personal budgets.



- More support to become an independent traveller.



- More support to get a job or to volunteer (not just volunteering in a charity shop).



- We want to choose a support provider.



- We want to speak up about hate and mat crime, so we feel safe when we go out.



- Learn how to speak up for yourself.



- We need groups so we can speak up about what we like and don't like.

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EQUALITY ANALYSIS

This Equality Analysis considers the effect of Bury Council/ Bury CCG activity on different groups protected from discrimination under the Equality Act 2010. This is to consider if there are any unintended consequences for some groups from key changes made by a public body and their contractor partners organisations and to consider if the activity will be fully effective for all protected groups. It involves using equality information and the results of engagement with protected groups and others, to manage risk and to understand the actual or potential effect of activity, including any adverse impacts on those affected by the change under consideration.

| SECTION 1 – RESPONSIBILITY AND ACCOUNTABILITY | |
|--|---|
| <i>Refer to Equality Analysis guidance page 4</i> | |
| 1.1 Name of policy/ project/ decision | Proposal 1: Persona Daycare To reduce the number of unused places in the day care service, close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy. If this proposal was agreed, the dementia day service would have its own secure area at Grundy and be refurbished to be 'dementia-friendly'. |
| 1.2 Lead for policy/ project/ decision | Adrian Crook, Director of Community Commissioning, OCO |
| 1.3 Committee/Board signing off policy/ project/ decision | Community Commissioning Team Meeting and Innovation and Savings program governance meetings |
| 1.4 Author of Equality Analysis | Name: Hayley Ashall Role: Strategic Lead, Integrated Commissioning, Carers, Physical Disability and Prevention Contact details: h.ashall@bury.gov.uk |
| 1.5 Date EA completed | 21.01.21 (reviewed July 2021) |

| SECTION 2 – AIMS AND OUTCOMES OF POLICY / PROJECT | |
|--|---|
| <i>Refer to Equality Analysis guidance page 5</i> | |
| 2.1 Detail of policy/ decision being sought | Data shows demand and usage of day care provision over the past 24 months (including before any impacts generated from the Covid-19 pandemic), indicates there is an oversupply of day care places. As these places are paid for as part of the Persona contract, to remove this unused excess capacity would generate a saving. As the number of places would be reduced, the proposal would be to close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy. If this proposal was agreed, the dementia day service would have its own secure area at Grundy and be refurbished to be 'dementia-friendly'. |
| 2.2 What are the intended outcomes of this? | If the proposal is agreed: <ul style="list-style-type: none"> Removal of unused day care places, therefore generating a removal of unrequired places and release a saving. |

| | |
|--|--|
| | <ul style="list-style-type: none"> • To close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy. • Dementia day service would have its own secure area at Grundy and be refurbished to be 'dementia-friendly' |
|--|--|

SECTION 3 – ESTABLISHING RELEVANCE TO EQUALITY & HUMAN RIGHTS

Refer to Equality Analysis guidance pages 5-8 and 11

Please outline the relevance of the activity/ policy to the Public Sector Equality Duty

| General Public Sector Equality Duties | Relevance (Yes/No) | Rationale behind relevance decision |
|--|--------------------|---|
| 3.1 To eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by Equality Act 2010 | Yes | <p>Care Act 2010, outlines a clear requirement for processing assessment of need. The Care Act assessment is undertaken to understand if a client requires services such as daycare. This ensures, equal opportunities, dignity, inclusion also promotes independence and building on strengths.</p> <p>Day care placements will continue to be provided on the basis of assessed need. Performance monitoring of contracts regularly takes place and Social Workers, and families / carers /advocates give feedback.</p> <p>In addition, the Council monitors data on placements made to ensure that there is fair access to all that meet the eligibility criteria.</p> |
| 3.2 To advance equality of opportunity between people who share a protected characteristic and those who do not. | Yes | <p>The care act criteria promotes equality despite a person’s background, beliefs or any protected characteristic.</p> <p>Placements are based on a person’s individual need and offers opportunities for people to live as independently a life as possible including in the wider community.</p> |
| 3.3 To foster good relations between people who share a protected characteristic and those who do not | Yes | <p>The Day care service is open to all. However the LD day service is aimed at those with a learning disability. The older person’s day services is aimed at those over 50 years. The proposal considers how these groups of people could be brought together and also considering how links with wider community groups would be beneficial to customers. This fosters a good relationship between people who share a protected characteristic and those who do not.</p> <p>In addition, day care services support people with disabilities to live within the community thus</p> |

| | | |
|---|--|--|
| | | making sure that disability is accepted and understood by the wider community. Bury Council work with Provider's to ensure that they provide appropriate services to disabled people on a contract and service specification basis and monitoring of service delivery. |
| 3.4 Please outline the considerations taken, including any mitigations, to ensure activity is not detrimental to the Human Rights of any individual affected by the decision being sought. | | |
| The list of Human Rights have been explored and this proposal does not have a detrimental impact on any area specified. | | |

| SECTION 4 – EQUALITIES DATA | | | |
|---|-----------------------|---|---|
| <i>Refer to Equality Analysis guidance page 8</i> | | | |
| Protected characteristic | Outcome sought | Base data | Data gaps (to include in Section 8 log) |
| 4.1 Age | Yes | Provider and care record collates the client's data including age. Part of this service is age specific as aimed at supporting the older generations. | |
| 4.2 Disability | Yes | Provider and care record includes data on any disability as this is a service to support those who may have a disability. Over 21,224 people in Bury have a limiting long-term illness, health problem or disability equating to 11.24% of our resident population, compared to 18.8% of the population of England and Wales (Census 2011) | |
| 4.3 Gender | Yes | Provider and care record collates the client's data including gender. | |
| 4.4 Pregnancy or Maternity | No – Not applicable | | No – Not applicable |
| 4.5 Race | Yes | Provider and care record collates the client's data including race. BAME population 20,028 (Census 2011) Bury has a Black, Asian and Minority Ethnic (BAME) population of around 10.8% | Limited information on smaller and emerging communities in Bury |

| | | | |
|---|---|---|-------------------------|
| | | compared to 14.7% of the population of England and Wales (2011 Census). | |
| 4.6 Religion and belief | Yes | Provider and care record collates the client's data including religion or belief. Census 2011 responses: Christian (62.7%, nationally 59.3%), Muslim (6.1%, nationally 4.8%) and Jewish (5.6%, nationally 0.5%). 18.6% identified as having no religion | |
| 4.7 Sexual Orientation | No – Not applicable | There is currently no national or local data on sexual orientation. However, estimates provided by the LGBT Foundation and Stonewall that between 5% and 7% of the population identify as Lesbian, Gay or Bisexual nationally. | No – Not applicable |
| 4.8 Marriage or Civil Partnership | Yes | Provider and care record collates the clients data including married/ spouse details etc. The Census 2011 showed those married as 70,088 and those in a registered same-sex civil partnership status as 253 in Bury | |
| 4.9 Gender Reassignment | No – we don't believe this is currently being collated. | There is currently no national or local data on gender identity. | To be reviewed |
| 4.10 Carers | Yes | Provider and care record collates the clients data including whether the person is a carer or supported by a carer Stats in Bury: 19,954 - Census 2011 294 carers registered with the Bury Carers Hub | |
| 4.11 Looked After Children and Care Leavers | Yes | If the client has transferred from children's services in particular and below the age of 25 we will record if they are a LAC | |
| 4.12 Armed Forces personnel including veterans | No – we don't believe this is currently being collated. | | Specific question being |

| | | | |
|---|--|---|--|
| | | | asked in 2021 census To be reviewed |
| 4.13 Socio-economically vulnerable | No– we don't believe this is currently being collated. | 15,700 Housing benefit / Council Tax support claimants NOMIS Claimant Count: 8,135 (October 2020) 356 people whom the council has a homeless duty Data is collected by BCSN and reported through to Bury Council and GM Humanitarian Aid Group regarding no. of people asking for financial support, advice and food parcels. C. 900 Food parcels distribute per week through Bury Community Support Network (Nov 2020-Feb 2021) | To be reviewed |

SECTION 5 – STAKEHOLDERS AND ENGAGEMENT

Refer to Equality Analysis guidance page 8 and 9

| | Internal Stakeholders | External Stakeholders |
|--|---|---|
| 5.1 Identify stakeholders | Customers using the services Carer and family of customer Workforce | Potential future users of the service Members of the public |
| 5.2 Engagement undertaken | Workforce engagement Provider engagement | N/A |
| 5.3 Outcomes of engagement | The engagement has shaped the current and future care provision | |
| 5.4 Outstanding actions following engagement (include in Section 8 log) | Public consultation is required to understand views on this proposal. This would include existing customers, their carers and family, potential future customers, providers, public and wider stakeholders. | Public consultation is required to understand views on this proposal. This would include existing customers, their carers and family, potential future customers, providers, public and wider stakeholders. |

SECTION 6 – CONCLUSION OF IMPACT

Refer to Equality Analysis guidance page 9

Please outline whether the activity/ policy has a positive or negative effect on any groups of people with protected inclusion characteristics

| Protected Characteristic | Positive/ Neutral Negative/ | Impact (include reference to data/ engagement) |
|--------------------------|-----------------------------------|--|
| 6.1 Age | Positive & | <u>Older People Day service</u> |

| | | |
|----------------------------|---------------------|--|
| | Negative | <p>Negative: If the places are reduced and therefore there is a change in venue for delivery of service. This change of venue and or staff delivering service may generate a negative impact on a client in terms of change and or a venue further away/ longer travel, although still within the Bury area.</p> <p>Positive:</p> <ul style="list-style-type: none"> • Changing venue may impact positively on a client as closer to home and or preferred venue. • Bringing groups together may increase a social connectivity. • Change in staff may generate benefits or an individual in terms of increased social connectivity, may prefer new member of staff and new activities. • Opportunity to meet other likeminded individuals. • Potential development to link into local community groups may bring further positive opportunities and experience for clients of the service. • If proposals are agreed then this would continue a day care service provision for customers to use. |
| 6.2 Disability | Positive & Negative | <p><u>Learning Disability Day service or older people with a disability</u></p> <p>Negative: If the places are reduced and therefore there is a change in venue for delivery of service. This change of venue and or staff delivering service may generate a negative impact on a client in terms of change and or a venue further away/ longer travel, although still within the Bury area.</p> <p>Positive:</p> <ul style="list-style-type: none"> • Changing venue may impact positively on a client as closer to home and or preferred venue. • Bringing groups together may increase a social connectivity. • Change in staff may generate benefits or an individual in terms of increased social connectivity, may prefer new member of staff and new activities. • Opportunity to meet other likeminded individuals. • Potential development to link into local community groups may bring further positive opportunities and experience for clients of the service • If proposals are agreed then this would continue a day care service provision for customers to use. |
| 6.3 Gender | None | |
| 6.4 Pregnancy or Maternity | None | |
| 6.5 Race | None | |
| 6.6 Religion and belief | None | |
| 6.7 Sexual Orientation | None | |

| | | |
|--|---|---|
| 6.8 Marriage or Civil Partnership | None | |
| 6.9 Gender Reassignment | None | |
| 6.10 Carers | Positive & Negative | <p>Negative: If the cared for experiences negative impacts then the carer may have to deal with those negative impacts. Creating an increased need for support from the carer increasing the pressure on them. The proposal will impact upon those carers who may access the respite service provision if the cared for can no longer access/or does not wish to access a change of venue.</p> <p>Positive: If there are positive impacts on the cared for this may impact the care positively to and may lead to a reduced need for input to the cared for's care and support. If proposals are agreed then this would continue a day care service provision, which provides a break for carers.</p> |
| 6.11 Looked After Children and Care Leavers | None | |
| 6.12 Armed Forces personnel including veterans | None | |
| 6.13 Socio-economically vulnerable | None | |
| 6.14 Overall impact - What will the likely overall effect of your activity be on equality, including consideration on intersectionality? | Positive & Negative, this will be dependent on the individual. The staff at persona will support the clients and carers of those clients as best as possible and ensure any change is well detailed and planned in order to mitigate any negative impact created. | <p>However, given the removal of surplus places has been evidenced by the lack in demand, removing empty spaces should not have an impact on any individuals. There are also 6 other commissioned/ grant funded day care services with capacity and a wealth of voluntary community and faith sector services which offer alternatives to day care.</p> |

SECTION 7 – ACTION LOG

Refer to Equality Analysis guidance page 10

| Action Identified | Lead | Due Date | Comments and Sign off (when complete) |
|--|---------------|---------------------|---|
| 8.1 Actions to address gaps identified in section 4 | | | |
| None that will have an impact on this proposal | | | |
| 8.2 Actions to address gaps identified in section 5 | | | |
| Public consultation will be undertaken | Hayley Ashall | 24.05.21 – 02.07.21 | Public consultation has been undertaken and the results have informed recommendations included in a cabinet report on the 21.07.21. |

| 8.3 Mitigations to address negative impacts identified in section 6 | | | |
|---|----------------------|---|--|
| If the proposals are agreed, support clients to manage a change of venue. This will be done where appropriate on a 1:1 basis and will depend on the individual needs so that planned respite can be continued to meet the individual's needs. This will be planned, open and transparent conversation and where possible undertaken over time to minimise any impact. | Persona team manager | To be started following agreement of savings proposal if agreed | |
| Carers / family members to be involved in the assessment and transfer process. All carers to be made aware of their rights to a Carers Assessment, along with information on the Bury Carers Hub. | Persona team manager | To be started following agreement of savings proposal if agreed | |
| Support clients to manage a change of staff. This will be done where appropriate on a 1:1 basis and will depend on the individual needs. This will be planned, open and transparent conversation and where possible undertaken over time to minimise any impact. | Persona team manager | To be started following agreement of savings proposal if agreed | |
| 8.4 Opportunities to further inclusion (equality, diversity and human rights) including to advance opportunities and engagements across protected characteristics | | | |
| To consider how the day care services can link in to broader community groups | Persona team manager | Throughout 2021 - 2022 | |

| SECTION 8 - REVIEW | | | |
|--|------|-------------------|---------------------------------------|
| <i>Refer to Equality Analysis guidance page 10</i> | | | |
| Review Milestone | Lead | Due Date | Comments (and sign off when complete) |
| Review EA after public consultation | HA | July 2021 | Reviewed 07.07.21 |
| Review EA after Cabinet paper July 2021 | HA | July/ August 2021 | |

EQUALITY ANALYSIS

This Equality Analysis considers the effect of Bury Council/ Bury CCG activity on different groups protected from discrimination under the Equality Act 2010. This is to consider if there are any unintended consequences for some groups from key changes made by a public body and their contractor partners organisations and to consider if the activity will be fully effective for all protected groups. It involves using equality information and the results of engagement with protected groups and others, to manage risk and to understand the actual or potential effect of activity, including any adverse impacts on those affected by the change under consideration.

SECTION 1 – RESPONSIBILITY AND ACCOUNTABILITY

Refer to Equality Analysis guidance page 4

| | |
|--|--|
| 1.1 Name of policy/ project/ decision | Proposal 2: Persona short stay/ respite To reduce the number of unused places in the short stay service, close Spurr House leaving Elmhurst open for short stay care. This proposal would therefore ensure that one building remained open to offer short stay care for customers. The service offered would not change, however the location where a person goes to for short stay care may change for some people. |
| 1.2 Lead for policy/ project/ decision | Adrian Crook, Director of Community Commissioning, OCO |
| 1.3 Committee/Board signing off policy/ project/ decision | Community Commissioning Team Meeting and Innovation and Savings program governance meetings |
| 1.4 Author of Equality Analysis | Name: Hayley Ashall |
| 1.5 Date EA completed | Role: Strategic Lead, Integrated Commissioning, Carers, Physical Disability and Prevention |

SECTION 2 – AIMS AND OUTCOMES OF POLICY / PROJECT

Refer to Equality Analysis guidance page 5

| | |
|--|---|
| 2.1 Detail of policy/ decision being sought | Data indicates there is an over-supply of short stay beds. The block contract is currently for 62 beds (27 at Elmhurst and 35 at Spurr House). Data for the period 2018/19 and 2019/20 shows a trend of declining occupancy at both units. The evidence indicates a number of customers stay beyond the 6 week period which the contract specifies should be the maximum term in the facilities. There are several reasons for this, if these were resolved and customers stayed as specified no longer than 6 weeks then the number of beds required for this time period would be reduced. As a result, it is proposed the most cost effective and efficient way to address the over-capacity would be to reduce the number of unused beds and consolidate short stay to one site (Elmhurst) and to therefore close the other site (Spurr House). |
| 2.2 What are the intended outcomes of this? | If the proposal is agreed: |

| | |
|--|---|
| | <ul style="list-style-type: none"> • To reduce the number of unused places in the short stay service. • Close Spurr House leaving Elmhurst open for short stay care. • The service offered would not change, however the location where a person goes to for short stay care may change for some people. • Commitment to ensure customers do not stay longer than six weeks in short stay or respite. |
|--|---|

SECTION 3 – ESTABLISHING RELEVANCE TO EQUALITY & HUMAN RIGHTS

Refer to Equality Analysis guidance pages 5-8 and 11

Please outline the relevance of the activity/ policy to the Public Sector Equality Duty

| General Public Sector Equality Duties | Relevance (Yes/No) | Rationale behind relevance decision |
|--|--------------------|---|
| 3.1 To eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by Equality Act 2010 | Yes | Care Act 2010, outlines a clear requirement for processing assessment of need. The Care Act assessment is undertaken to understand of a client requires services such as respite. This ensures, equal opportunities, dignity, inclusion also promotes independence and building on strengths. Placements will continue to be provided on the basis of assessed need. Performance monitoring of contracts regularly takes place and Social Workers, and families / carers /advocates give feedback. In addition, the Council monitors data on placements made to ensure that there is fair access to all that meet the eligibility criteria. |
| 3.2 To advance equality of opportunity between people who share a protected characteristic and those who do not. | Yes | The care act criteria promotes equality despite a person’s background, beliefs or any protected characteristic. Placements are based on a person’s individual need and offers opportunities for people to live as independently a life as possible including in the wider community. |
| 3.3 To foster good relations between people who share a protected characteristic and those who do not | Yes | The respite service is open to all including self-funders. The nature of respite means that this could be a short term solution for someone who has a one off operation, illness or for someone who feels they need a break from usual care setting and therefore open to those with a long term illness or disability. Having a respite facility open to all fosters a good relationship between people who share a protected characteristic and |

| | |
|--|--|
| | <p>those who do not. In addition, the service support people with disabilities to live within the community thus making sure that disability is accepted and understood by the wider community.</p> <p>Bury Council work with Provider's to ensure that they provide appropriate services to disabled people on a contract and service specification basis and monitoring of service delivery.</p> <p>All Provider's must evidence of how they will treat Service Users with respect and dignity, and create an environment free from discrimination, bullying and harassment for Service Users and staff.</p> |
| <p>3.4 Please outline the considerations taken, including any mitigations, to ensure activity is not detrimental to the Human Rights of any individual affected by the decision being sought.</p> | |
| <p>The list of Human Rights have been explored and this proposal does not have a detrimental impact on any area specified.</p> | |

| SECTION 4 – EQUALITIES DATA | | | |
|---|---------------------|--|---|
| <i>Refer to Equality Analysis guidance page 8</i> | | | |
| Protected characteristic | Outcome sought | Base data | Data gaps (to include in Section 8 log) |
| 4.1 Age | Yes | Provider and care record collates the client's data including age. | |
| 4.2 Disability | Yes | <p>Provider and care record includes data on any disability as this service is available to those who may have a disability.</p> <p>Over 21,224 people in Bury have a limiting long-term illness, health problem or disability equating to 11.24% of our resident population, compared to 18.8% of the population of England and Wales (Census 2011)</p> | |
| 4.3 Gender | Yes | Provider and care record collates the client's data including gender. | |
| 4.4 Pregnancy or Maternity | No – Not applicable | | No – Not applicable |

| | | | |
|--|---|--|--|
| 4.5 Race | Yes | <p>Provider and care record collates the client's data including race. BAME population 20,028 (Census 2011)</p> <p>Bury has a Black, Asian and Minority Ethnic (BAME) population of around 10.8% compared to 14.7% of the population of England and Wales (2011 Census).</p> | <p>Limited information on smaller and emerging communities in Bury</p> |
| 4.6 Religion and belief | Yes | <p>Provider and care record collates the client's data including religion or belief. Census 2011 responses: Christian (62.7%, nationally 59.3%), Muslim (6.1%, nationally 4.8%) and Jewish (5.6%, nationally 0.5%). 18.6% identified as having no religion</p> | |
| 4.7 Sexual Orientation | No – Not applicable | <p>There is currently no national or local data on sexual orientation. However, estimates provided by the LGBT Foundation and Stonewall that between 5% and 7% of the population identify as Lesbian, Gay or Bisexual nationally.</p> | No – Not applicable |
| 4.8 Marriage or Civil Partnership | Yes | <p>Provider and care record collates the clients data including married/ spouse details etc</p> <p>The Census 2011 showed those married as 70,088 and those in a registered same-sex civil partnership status as 253 in Bury</p> | |
| 4.9 Gender Reassignment | No – we don't believe this is currently being collated. | <p>There is currently no national or local data on gender identity</p> | To be reviewed |
| 4.10 Carers | Yes | <p>Provider and care record collates the clients data including whether the person is a carer or supported by a carer</p> <p>Stats in Bury: 19,954 - Census 2011</p> | |

| | | | |
|---|---|---|--|
| | | 294 carers registered with the Bury Carers Hub | |
| 4.11 Looked After Children and Care Leavers | Yes | If the client has transferred from children's services in particular and below the age of 25 we will record if they are a LAC | |
| 4.12 Armed Forces personnel including veterans | No – we don't believe this is currently being collated. | | To be reviewed Specific question being asked in 2021 census |
| 4.13 Socio-economically vulnerable | No – we don't believe this is currently being collated. | 15,700 Housing benefit / Council Tax support claimants NOMIS Claimant Count: 8,135 (October 2020) 356 people whom the council has a homeless duty Data is collected by BCSN and reported through to Bury Council and GM Humanitarian Aid Group regarding no. of people asking for financial support, advice and food parcels. C. 900 Food parcels distribute per week through Bury Community Support Network (Nov 2020-Feb 2021) | To be reviewed |

SECTION 5 – STAKEHOLDERS AND ENGAGEMENT

Refer to Equality Analysis guidance page 8 and 9

| | Internal Stakeholders | External Stakeholders |
|--|---|--|
| 5.1 Identify stakeholders | Customers using the services Carer and family of customer Workforce | Potential future users of the service Members of the public |
| 5.2 Engagement undertaken | Workforce engagement | N/A |
| 5.3 Outcomes of engagement | The engagement has shaped the current and future care provision | |
| 5.4 Outstanding actions following engagement (include in Section 8 log) | Any new customers would transfer to the one site and not the site to close, therefore enabling a reduced need for one site. However, some customers may need to be transferred during stay. | Public consultation is required to understand views on this proposal. This would include existing customers, their carers and family, potential future customers, providers, public and wider stakeholders. |

| | | |
|--|---|--|
| | Public consultation is required to understand views on this proposal. This would include existing customers, their carers and family, potential future customers, providers, public and wider stakeholders. | |
|--|---|--|

SECTION 6 – CONCLUSION OF IMPACT

Refer to Equality Analysis guidance page 9

Please outline whether the activity/ policy has a positive or negative effect on any groups of people with protected inclusion characteristics

| Protected Characteristic | Positive/ Neutral Negative/ | Impact (include reference to data/ engagement) |
|--------------------------|-----------------------------|--|
| 6.1 Age | Positive & Negative | <p>There is a higher probability that those of an older age will use the service due to age related illness, disability or frailty.</p> <p>Negative: Some customers will regularly use a respite facility, if they use the facility proposed to close, this change may have a negative impact on them. Also changes in service may mean a change in staff managing/ running the service. The change may create anxiety, the location or building may not be as preferred to them or further to travel to get there. However, both sites are in Bury and the service offer would continue.</p> <p>Positive:</p> <ul style="list-style-type: none"> • Changing venue may impact positively on a client as closer to home and or preferred venue. • Change in staff may generate benefits or an individual in terms of increased social connectivity, may prefer new member of staff. • One facility with more people in it may mean better opportunity for social connectivity. • If proposals are agreed then this would continue a short stay/ respite service provision for customers to use. |
| 6.2 Disability | Positive & Negative | <p>There is a higher probability that those with a disability may use the service for regular respite.</p> <p>Negative: Some customers will regularly use a respite facility, if they use the facility proposed to close, this change may have a negative impact on them. Also changes in service may mean a change in staff managing/ running the service. The change may create anxiety, the location or building may not be as preferred to them or further to travel to get</p> |

| | | |
|--|--|--|
| | | <p>there. However, both sites are in Bury and the service offer would continue.</p> <p>Positive:</p> <ul style="list-style-type: none"> • Changing venue may impact positively on a client as closer to home and or preferred venue. • Change in staff may generate benefits or an individual in terms of increased social connectivity, may prefer new member of staff. • One facility with more people in it may mean better opportunity for social connectivity • If proposals are agreed then this would continue a short stay/ respite service provision for customers to use |
| 6.3 Gender | None | |
| 6.4 Pregnancy or Maternity | None | |
| 6.5 Race | None | |
| 6.6 Religion and belief | None | |
| 6.7 Sexual Orientation | None | |
| 6.8 Marriage or Civil Partnership | None | |
| 6.9 Gender Reassignment | None | |
| 6.10 Carers | Positive & Negative | <p>Negative:</p> <p>If the cared for experiences negative impacts then the carer may have to deal with those negative impacts on the cared for. Creating an increased need for support.</p> <p>The proposal will impact upon those carers who may access the respite service provision if the cared for can no longer access/or does not wish to access a change of venue.</p> <p>Positive:</p> <p>If there are positive impacts on the cared for this may impact the carer positively to and may lead to a reduced need for input to the cared for's care and support by wanting to use the respite facility more frequently providing a carer break.</p> <p>If proposals are agreed then this would continue a short stay/ respite service provision, which provides a break for carers.</p> |
| 6.11 Looked After Children and Care Leavers | None | |
| 6.12 Armed Forces personnel including veterans | None | |
| 6.13 Socio-economically vulnerable | None | |
| 6.14 Overall impact - What will the likely overall effect of your | Positive & Negative, this will be dependent on the individual. The staff at persona will support the clients and carer of those clients as best as possible and ensure any | |

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| activity be on equality, including consideration on intersectionality? | <p>change is well detailed and planned in order to mitigate any negative impact created.</p> <p>However given the service will continue just in one site rather than across two sites. Also that this facility is short term use. It is felt that the impact can be mitigated by working with clients and planning any closure sufficiently.</p> |
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SECTION 7 – ACTION LOG

Refer to Equality Analysis guidance page 10

| Action Identified | Lead | Due Date | Comments and Sign off (when complete) |
|---|----------------------|---|---|
| 8.1 Actions to address gaps identified in section 4 | | | |
| None that will have an impact on this proposal | | | |
| 8.2 Actions to address gaps identified in section 5 | | | |
| Public consultation will be undertaken | Hayley Ashall | 24.05.21 – 02.07.21 | Public consultation has been undertaken and the results have informed recommendations included in a cabinet report on the 21.07.21. |
| 8.3 Mitigations to address negative impacts identified in section 6 | | | |
| If the proposals are agreed, support clients to manage a change of venue. This will be done where appropriate on a 1:1 basis and will depend on the individual needs. This will be planned, open and transparent conversation and where possible undertaken over time to minimise any impact, so that planned respite can be continued to meet the individual's needs | Persona team manager | To be started following agreement of savings proposal if agreed | |
| Carers / family members to be involved in the assessment and transfer process. All carers to be made aware of their rights to a Carers Assessment, along with information on the Bury Carers Hub | Persona team manager | To be started following agreement of savings proposal if agreed | |
| If the proposals are agreed, support clients to manage a change of staff. This will be done where appropriate on a 1:1 basis and will depend on the individual needs. This will be planned, open and transparent conversation and where possible undertaken | Persona team manager | To be started following agreement of savings proposal if agreed | |

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| over time to minimise any impact. | | | |
| 8.4 Opportunities to further inclusion (equality, diversity and human rights) including to advance opportunities and engagements across protected characteristics | | | |
| N/A | | | |

| SECTION 8 - REVIEW | | | |
|--|------|-------------------|---------------------------------------|
| <i>Refer to Equality Analysis guidance page 10</i> | | | |
| Review Milestone | Lead | Due Date | Comments (and sign off when complete) |
| Review EA after public consultation | HA | July 2021 | Reviewed 07.07.21 |
| Review EA after Cabinet paper July 2021 | HA | July/ August 2021 | |

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EQUALITY ANALYSIS

This Equality Analysis considers the effect of Bury Council/ Bury CCG activity on different groups protected from discrimination under the Equality Act 2010. This is to consider if there are any unintended consequences for some groups from key changes made by a public body and their contractor partners organisations and to consider if the activity will be fully effective for all protected groups. It involves using equality information and the results of engagement with protected groups and others, to manage risk and to understand the actual or potential effect of activity, including any adverse impacts on those affected by the change under consideration.

| SECTION 1 – RESPONSIBILITY AND ACCOUNTABILITY | |
|--|---|
| <i>Refer to Equality Analysis guidance page 4</i> | |
| 1.1 Name of policy/ project/ decision | Proposal 3: Develop an all age disability service To develop an all age disability service therefore providing one service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability. Therefore, clients would not have to move from children and young people service to adult's service when they turned a certain age, as the proposal would remove the need to hand over or transfer between the two services. |
| 1.2 Lead for policy/ project/ decision | Adrian Crook, Director of Community Commissioning, OCO |
| 1.3 Committee/Board signing off policy/ project/ decision | Community Commissioning Team Meeting and Innovation and Savings program governance meetings |
| 1.4 Author of Equality Analysis | Name: Hayley Ashall |
| 1.5 Date EA completed | Role: Strategic Lead, Integrated Commissioning, Carers, Physical Disability and Prevention |

| SECTION 2 – AIMS AND OUTCOMES OF POLICY / PROJECT | |
|--|--|
| <i>Refer to Equality Analysis guidance page 5</i> | |
| 2.1 Detail of policy/ decision being sought | <p>The longer term vision for Learning Disabilities (LD) services in Bury is an all age service, this would remove the need for transitions as it would be one smooth pathway despite age. However, whilst an all age service vision and new ways of working is developed there is still an immediate need to undertake transitions planning, focused on those young people transitioning to adults services.</p> <p>Current practice for managing transitions in Bury is inefficient, therefore there is an identified need to look at those transitioning from Children & Young People at an earlier age, ideally around the age of 13/14 years.</p> <p>This approach will provide one service for all customers whatever their age, concentrating on the needs and strengths of the</p> |

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| | individual, not their disability. Enabling more appropriate support of the individual and family/ carers, better management of expectations and potentially a phased reduction in support packages (where appropriate). |
| 2.2 What are the intended outcomes of this? | <p>If the proposal is agreed:</p> <ul style="list-style-type: none"> • To Provide one service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability. • Review and develop the transitions service in Bury. |

SECTION 3 – ESTABLISHING RELEVANCE TO EQUALITY & HUMAN RIGHTS

Refer to Equality Analysis guidance pages 5-8 and 11

Please outline the relevance of the activity/ policy to the Public Sector Equality Duty

| General Public Sector Equality Duties | Relevance (Yes/No) | Rationale behind relevance decision |
|--|--------------------|---|
| 3.1 To eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by Equality Act 2010 | Yes | <p>Care Act 2010, outlines a clear requirement for processing assessment of need. The Care Act assessment is undertaken to understand of a client requires services such as respite. This ensures, equal opportunities, dignity, inclusion also promotes independence and building on strengths.</p> <p>Removing barriers and reducing disadvantages experienced by people's diverse demographic</p> |
| 3.2 To advance equality of opportunity between people who share a protected characteristic and those who do not. | Yes | <p>The care act criteria promote equality despite a person's background, beliefs or any protected characteristic.</p> <p>System remodel to better meet the needs of people from diverse groups and those recognised as vulnerable</p> |
| 3.3 To foster good relations between people who share a protected characteristic and those who do not | Yes | <p>Individuals with a learning disability are under the disabled protected characteristic. Working in a person-centered way and support clients to transition at an early age for better planning, management and support will be a benefit to clients, their family, and carers. Involving clients, their family, and carers at the earliest stage possible and through out the care journey fosters positive relationships.</p> <p>System redesign to be more equitable for all, through undertaking transition process in a person centered way with Personalised conversations to</p> |

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| | | encourage and enable those from protected groups to participate in public life and increased opportunities within their communities |
| 3.4 Please outline the considerations taken, including any mitigations, to ensure activity is not detrimental to the Human Rights of any individual affected by the decision being sought. | | |
| The list of Human Rights have been explored and this proposal does not have a detrimental impact on any area specified. | | |

| SECTION 4 – EQUALITIES DATA <i>Refer to Equality Analysis guidance page 8</i> | | | |
|---|---------------------|--|---|
| Protected characteristic | Outcome sought | Base data | Data gaps (to include in Section 8 log) |
| 4.1 Age | Yes | Provider and care record collates the client's data including age. | |
| 4.2 Disability | Yes | All clients affected by this work will have a disability, as they will be accessing the Learning Disability Service. | |
| 4.3 Gender | Yes | Provider and care record collates the client's data including gender. | |
| 4.4 Pregnancy or Maternity | No – Not applicable | | No – Not applicable |
| 4.5 Race | Yes | Provider and care record collates the client's data including race. BAME population 20,028 (Census 2011) Bury has a Black, Asian and Minority Ethnic (BAME) population of around 10.8% compared to 14.7% of the population of England and Wales (2011 Census). | |
| 4.6 Religion and belief | Yes | Provider and care record collates the client's data including religion or belief. Census 2011 responses: Christian (62.7%, nationally 59.3%), Muslim (6.1%, nationally 4.8%) and Jewish | |

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| | | (5.6%, nationally 0.5%). 18.6% identified as having no religion | |
| 4.7 Sexual Orientation | No – Not applicable | There is currently no national or local data on sexual orientation. However, estimates provided by the LGBT Foundation and Stonewall that between 5% and 7% of the population identify as Lesbian, Gay or Bisexual nationally. | No – Not applicable |
| 4.8 Marriage or Civil Partnership | Yes | Provider and care record collates the clients data including married/ spouse details etc The Census 2011 showed those married as 70,088 and those in a registered same-sex civil partnership status as 253 in Bury | |
| 4.9 Gender Reassignment | No – we don't believe this is currently being collated. | There is currently no national or local data on gender identity | To be reviewed |
| 4.10 Carers | Yes | Provider and care record collates the clients data including whether the person is a carer or supported by a carer Stats in Bury: 19,954 - Census 2011 294 carers registered with the Bury Carers Hub | |
| 4.11 Looked After Children and Care Leavers | Yes | If the client has transferred from children's services in particular and below the age of 25 we will record if they are a LAC. | |
| 4.12 Armed Forces personnel including veterans | No – we don't believe this is currently being collated. | | To be reviewed Specific question being asked in 2021 census |
| 4.13 Socio-economically vulnerable | No – we don't believe this is currently being collated. | 15,700 Housing benefit / Council Tax support claimants NOMIS Claimant Count: 8,135 (October 2020) | To be reviewed |

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| | | 356 people whom the council has a homeless duty | |
| | | Data is collected by BCSN and reported through to Bury Council and GM Humanitarian Aid Group regarding no. of people asking for financial support, advice and food parcels. C. 900 Food parcels distribute per week through Bury Community Support Network (Nov 2020-Feb 2021 | |

SECTION 5 – STAKEHOLDERS AND ENGAGEMENT

Refer to Equality Analysis guidance page 8 and 9

| | Internal Stakeholders | External Stakeholders |
|--|---|---|
| 5.1 Identify stakeholders | Customers using the services Carer and family of customer Workforce | Potential future users of the service Members of the public |
| 5.2 Engagement undertaken | Bury People First Engagement through the co-production network over the past 12 – 18 months Workforce engagement | N/A |
| 5.3 Outcomes of engagement | The engagement has shaped the proposal | |
| 5.4 Outstanding actions following engagement (include in Section 8 log) | Public consultation is required to understand views on this proposal. This would include existing clients, their carers and family, potential future clients, providers, public and wider stakeholders. | Public consultation is required to understand views on this proposal. This would include existing clients, their carers and family, potential future clients, providers, public and wider stakeholders. |

SECTION 6 – CONCLUSION OF IMPACT

Refer to Equality Analysis guidance page 9

Please outline whether the activity/ policy has a positive or negative effect on any groups of people with protected inclusion characteristics

| Protected Characteristic | Positive/ Neutral Negative/ | Impact (include reference to data/ engagement) |
|--------------------------|-----------------------------------|---|
| 6.1 Age | Positive | A one all age system approach, improved preparedness providing the right help at the right time for individuals in the process of transitioning from a young person to adulthood leading to a more enjoyable and fulfilling adult life. |

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| | | There may be some disruption, mainly in the short term, to individuals and their families/carers. However, overall this work is anticipated to impact individuals positively by improving independence, supporting individuals in gaining and maintaining employment, providing the right help at the right time and reducing the intrusiveness of care. |
| 6.2 Disability | Positive | <p>A one all age system approach, improved preparedness providing the right help at the right time for individuals in the process of transitioning from a young person to adulthood leading to a more enjoyable and fulfilling adult life.</p> <p>All social worker reviews will continue to be completed in line with the Care Act. They will involve the individual, their carer and families and providers. They will continue to take the views and aspirations of the individual and their carers/families into account ensure that eligible needs are identified and met through the support plan.</p> <p>Working closely with providers to ensure that their models of support promote independence and progression.</p> |
| 6.3 Gender | None | |
| 6.4 Pregnancy or Maternity | None | |
| 6.5 Race | None | |
| 6.6 Religion and belief | None | |
| 6.7 Sexual Orientation | None | |
| 6.8 Marriage or Civil Partnership | None | |
| 6.9 Gender Reassignment | None | |
| 6.10 Carers | Positive | <p>A one all age system approach, improved preparedness providing the right help at the right time for individuals in the process of transitioning from a young person to adulthood leading to a more enjoyable and fulfilling adult life.</p> <p>Many of the people affected by this redesign will have a carer. Increases in independence and quality of care for individuals could have a beneficial impact for carers in terms of peace of mind and seeing the person they care for achieve better life outcomes.</p> <p>As stated in the 'Age' section, there could be some disruption or dissatisfaction, especially in the short term, for carers who are happy with the current model of provision.</p> |
| 6.11 Looked After Children and Care Leavers | None | |
| 6.12 Armed Forces personnel including veterans | None | |
| 6.13 Socio-economically vulnerable | None | |
| 6.14 Overall impact - What will the likely overall effect of your activity be on equality, including consideration | Positive | An all age vision therefore removing the need for transitions overtime will provide positive impacts on communities and service users in that the work will be undertaken in a person centered way, a move of social care practice towards more Personalised conversation and strength and asset based working. Supporting clients to live independently with choice and control in their local community. Also where |

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| on intersectionality? | <p>possible designing/ redesigning services in co-production and involving people with LD their family and carers at every opportunity.</p> <p>Work to be undertaken with education establishments to understand gaps in provision to better accommodate the educational needs for those with LD and or MH to remain in borough through improved education and housing opportunities and support.</p> <p>To carry out reviews of care plans and ensure that eligible care needs will continue to be met. As part of the work, increased scrutiny will be given to reviews to ensure that they are effective and robust and take into account initiatives being developed in the community, with staff given extra support and training in person-centered practice and developing independence for people.</p> <p>Work will also take place with providers to ensure that they are delivering value for money and supporting the independence and / or progression of people. The development of other services, support and community-based assets will also contribute to this agenda.</p> |
|-----------------------|--|

| SECTION 7 – ACTION LOG | | | |
|--|---------------|---------------------|---|
| <i>Refer to Equality Analysis guidance page 10</i> | | | |
| Action Identified | Lead | Due Date | Comments and Sign off (when complete) |
| 8.1 Actions to address gaps identified in section 4 | | | |
| None that will have an impact on this proposal | | | |
| 8.2 Actions to address gaps identified in section 5 | | | |
| Public consultation will be undertaken | Hayley Ashall | 24.05.21 – 02.07.21 | Public consultation has been undertaken and the results have informed recommendations included in a cabinet report on the 21.07.21. |
| 8.3 Mitigations to address negative impacts identified in section 6 | | | |
| N/A | | | |
| Social workers will continue to take carers/families views into account as partners in care and ensure compliance with the Care Act by making sure carers/families receive information and advice on their rights to a Carers Assessment along with signposting to The Bury Carers Hub | Adrian Crook | | |
| 8.4 Opportunities to further inclusion (equality, diversity and human rights) including to advance opportunities and engagements across protected characteristics | | | |
| N/A | | | |

SECTION 8 - REVIEW*Refer to Equality Analysis guidance page 10*

| Review Milestone | Lead | Due Date | Comments (and sign off when complete) |
|---|------|-------------------|---------------------------------------|
| Review EA after public consultation | HA | July 2021 | Reviewed 07.07.21 |
| Review EA after Cabinet paper July 2021 | HA | July/ August 2021 | |

EQUALITY ANALYSIS

This Equality Analysis considers the effect of Bury Council/ Bury CCG activity on different groups protected from discrimination under the Equality Act 2010. This is to consider if there are any unintended consequences for some groups from key changes made by a public body and their contractor partners organisations and to consider if the activity will be fully effective for all protected groups. It involves using equality information and the results of engagement with protected groups and others, to manage risk and to understand the actual or potential effect of activity, including any adverse impacts on those affected by the change under consideration.

| SECTION 1 – RESPONSIBILITY AND ACCOUNTABILITY | |
|--|--|
| <i>Refer to Equality Analysis guidance page 4</i> | |
| 1.1 Name of policy/ project/ decision | ASC proposed savings consultation Due to the significant financial challenge facing the Local Authority, Adult Social Care has proposed savings schemes totaling £12.4million. Understandably as a large proportion of the Adults Social Care budget is spent on our arm’s length provider Persona Care and Support Limited, this contract must be reviewed and reduced to help achieve the savings. The current savings for Persona Care and Support Limited is £2.5m over the next two financial years. Given some of the proposals may have a direct impact on current and future customers of Persona Care and Support Limited, a public consultation is required. This EA outlines the process for the public consultation and details. |
| 1.2 Lead for policy/ project/ decision | Adrian Crook, Director of Community Commissioning, OCO |
| 1.3 Committee/Board signing off policy/ project/ decision | Community Commissioning Team Meeting and Innovation and Savings program governance meetings |
| 1.4 Author of Equality Analysis | Name: Hayley Ashall |
| 1.5 Date EA completed | Role: Strategic Lead, Integrated Commissioning, Carers, Physical Disability and Prevention |

| SECTION 2 – AIMS AND OUTCOMES OF POLICY / PROJECT | |
|--|--|
| <i>Refer to Equality Analysis guidance page 5</i> | |
| 2.1 Detail of policy/ decision being sought | The ASC proposed savings consultation includes three proposals and two elements: Proposal 1: Persona day care services, proposing to reduce the number of unused places in the day care service, close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy. If this proposal was agreed, the dementia day service would have its own secure area at Grundy and be refurbished to be ‘dementia-friendly’. |

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| | <p>Proposal 2: Persona short stay facilities, proposing to reduce the number of unused places in the short stay service, close Spurr House leaving Elmhurst open for short stay care. This proposal would therefore ensure that one building remained open to offer short stay care for customers. The service offered would not change, however the location where a person goes to for short stay care may change for some people.</p> <p>Proposal 3: all age disability service. To develop an all age disability service therefore providing one service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability. Therefore, clients would not have to move from children and young people service to adult’s service when they turned a certain age, as the proposal would remove the need to hand over or transfer between the two services.</p> <p>The fourth element in the consultation is an opportunity for people to suggest any alternative saving suggestions they may have.</p> <p>The fifth element in the consultation are questions relating to the current review of the ASC transport policy and therefore an opportunity to understand the views of those clients who access transport as part of their care package. Whilst also providing a picture of how people who do not have access to transport via a care package get to and from a care setting.</p> |
| <p>2.2 What are the intended outcomes of this?</p> | <p>If the proposal is agreed:</p> <p>Proposal 1 – Persona day care</p> <ul style="list-style-type: none"> • Removal of unused day care places, therefore generating a removal of unrequired places and release a saving. • To close Pinfold Lane Centre and relocate the dementia day service to a designated area at Grundy. • Dementia day service would have its own secure area at Grundy and be refurbished to be ‘dementia-friendly’ <p>Proposal 3- Persona short stay/ respite</p> <ul style="list-style-type: none"> • To reduce the number of unused places in the short stay service. • Close Spurr House leaving Elmhurst open for short stay care. • The service offered would not change, however the location where a person goes to for short stay care may change for some people. • Commitment to ensure customers do not stay longer than six weeks in short stay or respite. <p>Proposal 3 – All age disability service</p> <ul style="list-style-type: none"> • To Provide one service for all customers whatever their age, concentrating on the needs and strengths of the individual, not their disability. |

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| | <ul style="list-style-type: none"> Review and develop the transitions service in Bury. <p>Alternative saving ideas</p> <ul style="list-style-type: none"> Explore ideas people may have. <p>Transport</p> <ul style="list-style-type: none"> Understand the views of those clients who access transport as part of their care package. Whilst also providing a picture of how people who do not have access to transport via a care package get to and from a care setting. |
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| SECTION 3 – ESTABLISHING RELEVANCE TO EQUALITY & HUMAN RIGHTS <i>Refer to Equality Analysis guidance pages 5-8 and 11</i> | | |
|---|--------------------|--|
| Please outline the relevance of the activity/ policy to the Public Sector Equality Duty | | |
| General Public Sector Equality Duties | Relevance (Yes/No) | Rationale behind relevance decision |
| 3.1 To eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by Equality Act 2010 | Yes | <p>Section 1 of the Care Act 2014 (Promoting individual well-being) requires the Council when exercising its care and support functions in respect of an individual, to promote the individual’s wellbeing. "Well-being", in relation to an individual, means that individual's (a) personal dignity (including treatment of the individual with respect); (b) physical and mental health and emotional well-being; (c) protection from abuse and neglect; (d) control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided); (e) participation in work, education, training or recreation; (f) social and economic well-being; (g) domestic, family and personal relationships; (h) suitability of living accommodation; and (i) the individual's contribution to society.</p> <p>In exercising its care and support function in the case of an individual, the Council must have regard to, amongst others, a) the individual's views, wishes, feelings and beliefs; b) the importance of preventing or delaying the development of needs for care and support or needs for support and the importance of reducing needs of either kind that already exist; c) the importance of the individual participating as fully as possible in decisions relating to the care and support. The Department of Health and Social Care (“DHSC”) has issued statutory guidance (“CSSG”) under the Care Act</p> |

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| | <p>2014 (“the Act”) which the Council must have regard to in exercising its function under the Act.</p> <p>Section 2 of the Act (preventing needs for care and support”) requires the Council to “provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will” contribute towards preventing, delaying or reducing individuals” needs for care and support, or the needs for support for carers. In performing this duty, the Council must have regard to, amongst others, the importance of identifying services, facilities and resources already available in the Council's area and the extent to which the Council could involve or make use of them in performing that duty. The CSSG at paragraph 2.1 provides that “It is critical to the vision in the Care Act that the care and support system works to actively promote wellbeing and independence and does not just wait to respond when people reach a crisis point. To meet the challenges of the future, it will be vital that the care and support system intervenes early to support individuals, helps people retain or regain their skills and confidence, and prevents need or delays deterioration wherever possible.</p> <p>Section 5 of the Act (Promoting diversity and quality in provision of services) requires the Council to promote an efficient and effective market in services for meeting care and support needs with a view to ensuring service users (a) has a variety of providers and services to choose from; (b) has a variety of high-quality services to choose from; and (c) has sufficient information to make an informed decision about how to meet the needs in question. This is often referred to as the duty to facilitate and shape the market for care and support. The CSSG provides at paragraph 4.2. “The Care Act places new duties on local authorities to facilitate and shape their market for adult care and support as a whole, so that it meets the needs of all people in their area who need care and support, whether arranged or funded by the state, by the individual themselves, or in other ways. The ambition is for local authorities to influence and drive the pace of change for their whole market, leading to a sustainable and diverse range of care and support providers, continuously improving quality and choice, and delivering better, innovative and cost-effective outcomes that</p> |
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| | | promote the wellbeing of people who need care and support. |
| 3.2 To advance equality of opportunity between people who share a protected characteristic and those who do not. | Yes | The care act criteria promote equality despite a person's background, beliefs or any protected characteristic. System remodel to better meet the needs of people from diverse groups and those recognised as vulnerable |
| 3.3 To foster good relations between people who share a protected characteristic and those who do not | Yes | The public consultation provides people who share a protected characteristic to share their views, thoughts and opinion on the proposals. |
| 3.4 Please outline the considerations taken, including any mitigations, to ensure activity is not detrimental to the Human Rights of any individual affected by the decision being sought. | | |
| The list of Human Rights have been explored and this proposal does not have a detrimental impact on any area specified. | | |

| SECTION 4 – EQUALITIES DATA | | | |
|---|-----------------------|---|--|
| <i>Refer to Equality Analysis guidance page 8</i> | | | |
| Protected characteristic | Outcome sought | Base data | Data gaps (to include in Section 8 log) |
| 4.1 Age (Please note this detail will not be requested as the consultation responses are anonymous). | Yes | Provider and care record collates the client's data including age. There may be some barriers associated with age to prevent people from responding to the consultation. | |
| 4.2 Disability (Please note this detail will not be requested as the consultation responses are anonymous). | Yes | Provider and care record includes data on any disability as this service is available to those who may have a disability. There are a number of sensory, learning and physical disabilities which could impact on a person's ability to engage. There is also a need to hear the views of disabled people in order to ensure services are not shaped in ways that are detrimental to them. Over 21,224 people in Bury have a limiting long-term illness, health problem or disability equating to 11.24% of our resident population, | |

| | | | |
|---|---------------------|--|---------------------|
| | | compared to 18.8% of the population of England and Wales (Census 2011). | |
| 4.3 Gender (Please note this detail will not be requested as the consultation responses are anonymous). | Yes | Provider and care record collates the client's data including gender. It is not considered likely that there are specific barriers to responding to the consultation related gender. | |
| 4.4 Pregnancy or Maternity (Please note this detail will not be requested as the consultation responses are anonymous). | No – Not applicable | It is not considered likely that there are specific barriers to responding to the consultation related to pregnancy or maternity. | No – Not applicable |
| 4.5 Race (Please note this detail will not be requested as the consultation responses are anonymous). | Yes | Provider and care record collates the client's data including race. There are a number of issues BME groups may face which may make it harder for them to respond to the consultation. This could include language barriers and cultural barriers BAME population 20,028 (Census 2011) Bury has a Black, Asian and Minority Ethnic (BAME) population of around 10.8% compared to 14.7% of the population of England and Wales (2011 Census). | |
| 4.6 Religion and belief (Please note this detail will not be requested as the consultation responses are anonymous). | Yes | Provider and care record collates the client's data including religion or belief. It is not considered likely that there are specific barriers to responding to the consultation relating to religion and belief. Census 2011 responses: Christian (62.7%, nationally 59.3%), Muslim (6.1%, | |

| | | | |
|--|---|---|---------------------|
| | | nationally 4.8%) and Jewish (5.6%, nationally 0.5%). 18.6% identified as having no religion | |
| 4.7 Sexual Orientation (Please note this detail will not be requested as the consultation responses are anonymous). | No – Not applicable | It is not considered likely that there are specific barriers to responding to consultation related to sexual orientation. There is currently no national or local data on sexual orientation. | No – Not applicable |
| 4.8 Marriage or Civil Partnership (Please note this detail will not be requested as the consultation responses are anonymous). | Yes | Provider and care record collates the clients data including married/ spouse details etc. It is not considered likely that there are specific barriers to responding to consultation related to a person's marital/civil partnership status The Census 2011 showed those married as 70,088 and those in a registered same-sex civil partnership status as 253 in Bury | |
| 4.9 Gender Reassignment (Please note this detail will not be requested as the consultation responses are anonymous). | No – we don't believe this is currently being collated. | It is not considered likely that there are specific barriers to responding to consultation related to gender reassignment There is currently no national or local data on gender identity | To be reviewed |
| 4.10 Carers (Please note this detail will not be requested as the consultation responses are anonymous). | Yes | Provider and care record collates the clients' data including whether the person is a carer or supported by a carer There is also a need to ensure carers are given the opportunity to put forward their views to ensure services are not shaped in ways that are detrimental to them. Stats in Bury: 19,954 - Census 2011 294 carers registered with the Bury Carers Hub | |
| 4.11 Looked After Children and Care Leavers (Please note this detail will not be requested as | Yes | If the client has transferred from children's services in particular and below the age of 25 we will record if they are a LAC. | |

| | | | |
|---|---|--|--|
| the consultation responses are anonymous). | | There may be some barriers associated with age to prevent people from responding to the consultation. | |
| 4.12 Armed Forces personnel including veterans (Please note this detail will not be requested as the consultation responses are anonymous). | No – we don't believe this is currently being collated. | It is not considered likely that there are specific barriers to responding to consultation related to Armed Forces personnel incl. veterans | To be reviewed Specific question being asked in 2021 census |
| 4.13 Socio-economically vulnerable (Please note this detail will not be requested as the consultation responses are anonymous). | No – we don't believe this is currently being collated. | Socio-economic disadvantage may affect a person's likelihood to respond to the consultation 15,700 Housing benefit / Council Tax support claimants NOMIS Claimant Count: 8,135 (October 2020) 356 people whom the council has a homeless duty Data is collected by BCSN and reported through to Bury Council and GM Humanitarian Aid Group regarding no. of people asking for financial support, advice and food parcels. C. 900 Food parcels distribute per week through Bury Community Support Network (Nov 2020-Feb 2021) | To be reviewed |

SECTION 5 – STAKEHOLDERS AND ENGAGEMENT

Refer to Equality Analysis guidance page 8 and 9

| | Internal Stakeholders | External Stakeholders |
|--|---|---|
| 5.1 Identify stakeholders | Customers using the services Carer and family of customer Workforce | Potential future users of the service Members of the public |
| 5.2 Engagement undertaken | N/A | N/A |
| 5.3 Outcomes of engagement | N/A | N/A |
| 5.4 Outstanding actions following engagement (include in Section 8 log) | Public consultation is required to understand views on the ASC savings proposals. This would include existing | Public consultation is required to understand views on the ASC savings proposals. This would include existing |

| | | |
|--|---|---|
| | clients, their carers and family, potential future clients, providers, public and wider stakeholders. | clients, their carers and family, potential future clients, providers, public and wider stakeholders. |
|--|---|---|

SECTION 6 – CONCLUSION OF IMPACT

Refer to Equality Analysis guidance page 9

Please outline whether the activity/ policy has a positive or negative effect on any groups of people with protected inclusion characteristics

| Protected Characteristic | Positive/ Neutral Negative/ | Impact (include reference to data/ engagement) |
|----------------------------|-----------------------------------|---|
| 6.1 Age | Positive | <p>The public consultation provides people of all ages an opportunity to share their views on the proposals outlined.</p> <p>There may be some barriers associated with age to prevent people from responding to the consultation.</p> <p>The consultation gives consideration to using non-traditional methods in order to target both older and younger people, and digitally challenged. i.e. online and hard copy of survey, telephone option, email option, third party support 1:1 support, live presentation of consultation through sessions to aid people to take part.</p> |
| 6.2 Disability | Positive | <p>The public consultation provides people with a disability an opportunity to share their views on the proposals outlined.</p> <p>There are a number of sensory, learning and physical disabilities which could impact on a person's ability to engage. There is also a need to hear the views of disabled people in order to ensure services are not shaped in ways that are detrimental to them.</p> <p>The consultation uses methods to eliminate barriers to disability. i.e. Individual correspondence to people who currently use the services, online and hard copy of survey, telephone option, email option, third party support, 1:2:1 support, live presentation of consultation through sessions to aid people to take part.</p> |
| 6.3 Gender | Positive | <p>The public consultation provides people of any gender an opportunity to share their views on the proposals outlined.</p> |
| 6.4 Pregnancy or Maternity | Positive | <p>The public consultation provides people who are pregnant or have maternal/ paternal responsibility an opportunity to share their views on the proposals outlined.</p> |
| 6.5 Race | Positive | <p>The public consultation provides people of any race an opportunity to share their views on the proposals outlined.</p> <p>There are a number of issues BME groups may face which may make it harder for them to respond to the consultation. This could include language barriers and cultural barriers</p> <p>The consultation gives consideration to using non-traditional methods in order to remove barriers from participating.. i.e. online and hard copy of survey, telephone option, email option, third party support</p> |

| | | |
|---|----------|---|
| | | 1:2:1 support, live presentation of consultation through sessions to aid people to take part.. |
| 6.6 Religion and belief | Positive | The public consultation provides people of any religion or beliefs an opportunity to share their views on the proposals outlined. |
| 6.7 Sexual Orientation | Positive | The public consultation provides people of any sexual orientation an opportunity to share their views on the proposals outlined. |
| 6.8 Marriage or Civil Partnership | Positive | The public consultation provides people who are married or in a civil partnership an opportunity to share their views on the proposals outlined |
| 6.9 Gender Reassignment | Positive | The public consultation provides people who have undergone or undergoing gender reassignment an opportunity to share their views on the proposals outlined. |
| 6.10 Carers | Positive | The public consultation provides carers an opportunity to share their views on the proposals outlined. We have worked at removing barriers to contribute by contacting directly people accessing the services, online and hard copy of survey, telephone option, email option, third party support, individual 1:2:1 support, live presentation of consultation through sessions to aid people to take part. |
| 6.11 Looked After Children and Care Leavers | Positive | The public consultation provides looked after children and care leavers an opportunity to share their views on the proposals outlined. The consultation gives consideration to using non-traditional methods in order to target both older and younger people, and digitally challenged. i.e. online and hard copy of survey, telephone option, email option, third party support 1:2:1 support, live presentation of consultation through sessions to aid people to take part. |
| 6.12 Armed Forces personnel including veterans | Positive | The public consultation provides armed forces personnel including veterans an opportunity to share their views on the proposals outlined. |
| 6.13 Socio-economically vulnerable | Positive | The public consultation provides those who are Socio-economically vulnerable an opportunity to share their views on the proposals outlined. Socio-economic disadvantage may affect a person's likelihood to respond to consultation or engagement. We have worked at removing barriers to contribute by online and hard copy of survey, telephone option, email option, third party support, individual 1:2:1 support, live presentation of consultation through sessions to aid people to take part. |
| 6.14 Overall impact - What will the likely overall effect of your activity be on equality, including consideration on intersectionality? | Positive | Positive - The public consultation provides any person an opportunity to share their views on the proposals outlined. We have worked at removing barriers to contribute by online and hard copy of survey, corresponding directly with people using the services, telephone option, email option, third party support, individual 1:2:1 support, live presentation of consultation through sessions to aid people to take part. Separate E.A.s for the proposals have been undertaken to understand the potential effects of the specific proposal by assessing the impacts on different groups both external and internal. |

SECTION 7 – ACTION LOG*Refer to Equality Analysis guidance page 10*

| Action Identified | Lead | Due Date | Comments and Sign off (when complete) |
|--|---------------|---------------------|---|
| 8.1 Actions to address gaps identified in section 4 | | | |
| None that will have an impact on this proposal | | | |
| 8.2 Actions to address gaps identified in section 5 | | | |
| Public consultation will be undertaken | Hayley Ashall | 24.05.21 – 02.07.21 | Public consultation has been undertaken and the results have informed recommendations included in a cabinet report on the 21.07.21. |
| 8.3 Mitigations to address negative impacts identified in section 6 | | | |
| N/A | | | |
| 8.4 Opportunities to further inclusion (equality, diversity and human rights) including to advance opportunities and engagements across protected characteristics | | | |
| N/A | | | |

SECTION 8 - REVIEW*Refer to Equality Analysis guidance page 10*

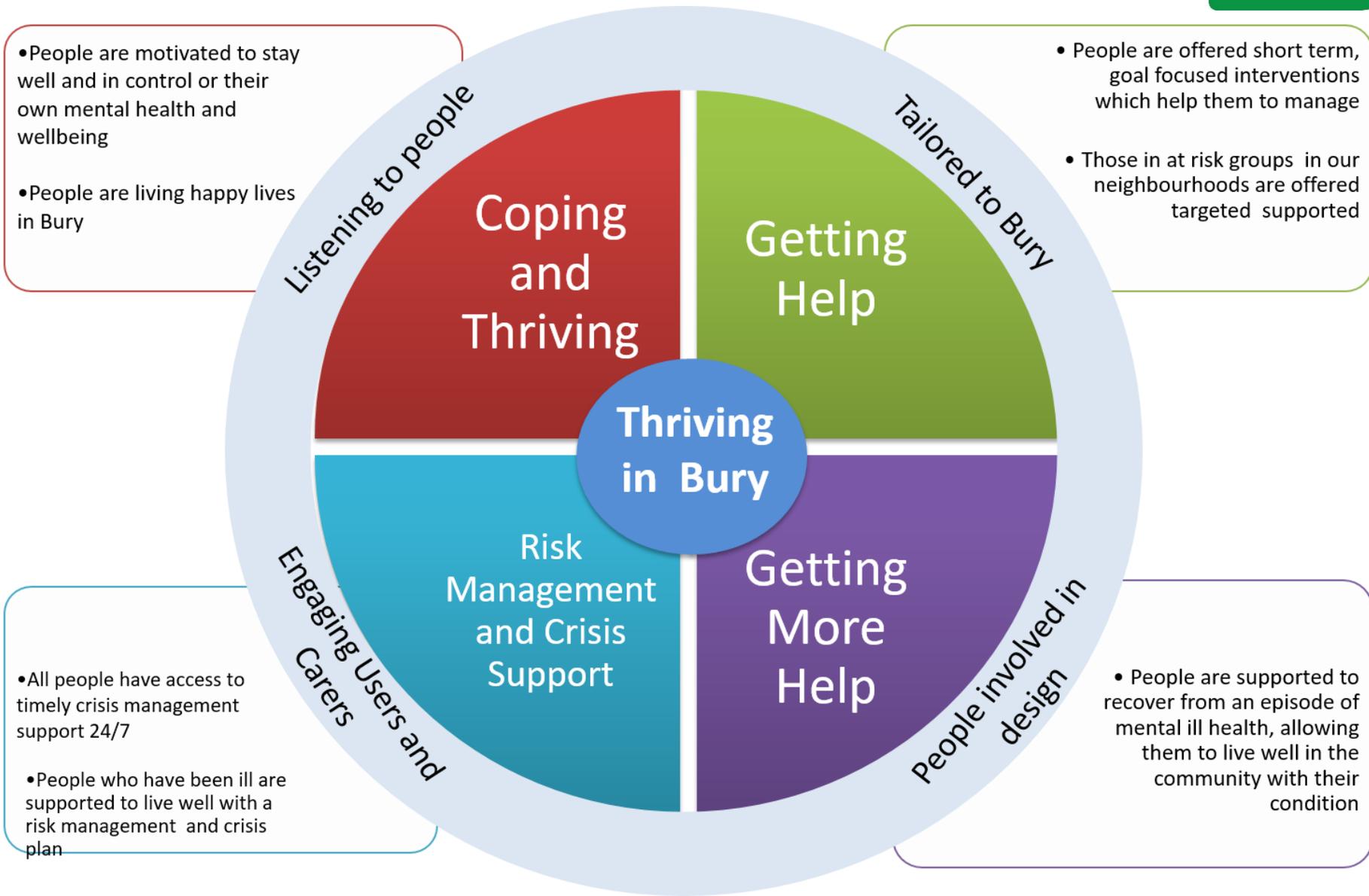
| Review Milestone | Lead | Due Date | Comments (and sign off when complete) |
|---|------|-------------------|---------------------------------------|
| Review EA after public consultation | HA | July 2021 | Reviewed 07.07.21 |
| Review EA after Cabinet paper July 2021 | HA | July/ August 2021 | |

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**Bury Health
Scrutiny
Committee**

update July 2021





Thriving in Bury progress in 2020/21. . .

Developed the **Thriving in Bury** brand and mental wellbeing comms plans



Developed a 12 month **mental health education and development programme**

Launched **Bury Peer Led Crisis Service** on 12th April 2021, delivered by BIG
Mon, Thu and Fri 6pm-11pm.
29 referrals received to date



"Feeling so much better knowing you're here"
"Longest conversation I've had in years"
"Gives me the space to talk about how I feel without being analysed"
"I was a bit anxious after I shared so much but slept better for it and am ok now"



The Bury Getting Help Line supported **422** people with their mental wellbeing and provided person centred resources pack



Mobilisation of the **Urgent Emergency Care by Appointment Service** operational 7 days per week from 8am – 9pm. Based at Fairfield General Hospital, direct referrals from GP's.

A review of **Community Mental Health Team** led to a number of changes to improve operations and links with wider pathways.

Launched **digital services**, Silver Cloud therapy is now offered with support from Healthy Minds therapists in Bury



The Creative Living Centre made **1424** welfare calls during



Launch of the **PCFT 24/7 Crisis Helpline**

Bury Mental Health Transformation Programme Plan 2021/22

Population Mental Wellbeing (Coping & Thriving)

- Targeted communication plan that motivates people to look after their wellbeing.
- Robust offer of support for family and friends supporting those with mental health issues.
- Establish a local Connect 5 training network, to cascade the knowledge and strategies for good mental wellbeing
- Suicide Prevention
- Drug & Alcohol
- Homelessness

Primary & Community MH Transformation

- Further develop the mental health support offer in Integrated Neighbourhood Teams
- Developing model for community mental health transformation with key stakeholders & to better understand locality need
- Scope Mental Health Hub with VCSE partners services as part of LWM
- Establishing and integrating the PCN MH roles
- **Community MH Team Redesign including PD, Rehab, ED pathway, DTOC**
- **Promoting access to Psychological therapies and integrate with LTC**

Improving access to support in a crisis

- **Refreshed 24/7 helpline** and integrate into local services
- Community Crisis Peer Support Service – broaden offer
- Open Access VCS Crisis Support linked to Neighbourhoods & LWM
- **MH Liaison** – Review gap & Link with UEC by appointment/Rapid Response service
- **Out of ED urgent appointments**

Improving care for those with highest needs

- **Therapeutic Inpatient Care**
- **Home Treatment Teams (Moving to CORE Fidelity)**
- **Section 136 Suite Review**
- **Rehab**
- **Individual Placement Support**
- **MH Specialist Placements**

Other key developments

- **Perinatal** and Parental Infant MH
- **Adult Eating Disorders**
- Learning Disability, **Autism and ADHD provision**
- Younger adults model
- All Age Trauma informed model

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Single Tangible Strategy

Innovative use of resources and new Investment

Lived Experience and Co-production

Collaborative Leadership, Management, Governance

Transformation Learning Forum

Mental Health Pressures

System Pressures

- Greater Manchester changes – moving towards ICS and locality priorities
- Workforce / capacity
- Key Interdependencies not progressing at the same pace
- Financial challenges to meet national & local priorities

Service Pressures

- Increase in CYP A&E presentations
- Increase in post covid demand i.e. Healthy Young Minds, Healthy Minds, Community Mental Health
- Managing waiting lists i.e. Dementia Service, Healthy Minds

Working across the system to review options
to mitigate pressures and determine the required level of investment

