

The Willows/Discharge to Assess
Consultation Response Document
November 2018

The aim of this document is to confirm the response to the feedback received in the consultation on the proposed closure of The Willows and the move of base for the Discharge to Assess (D2A) service and to confirm what the next steps will be.

This document presents:

- Feedback received from staff, service users and their representatives
- Confirmed team structure
- The next steps in the process
- The support available to staff

1.0 Background information

- 1.1 The consultation covered proposed changes for The Willows and Discharge to Assess services. This included the temporary closure of The Willows care home (options for potentially reopening the service in a different format are due to be scoped by the Transformation Team) and relocating the Discharge to Assess service to the Charles Clore Court extra care sheltered housing scheme in Southcote. It also covered the potential changes to the staff teams (at both the Willows and Charles Clore Court services).
- 1.2 The Council is committed to a comprehensive modernisation programme to transform the delivery and provision of Adult Social Care in Reading, so that the services run by Reading are cost effective, meet the national drivers for the delivery of Adult Social Care and most importantly improve outcomes for people in Reading.
- 1.3 The current staffing establishment for The Willows is designed to meet the needs of a residential care home and a Discharge to Assess service. This includes ancillary staff who support the running of this type of service. The current staffing establishment for Charles Clore Court is set to meet the needs of the approximately 40 people (dependent on occupancy levels- staffing level will vary to meet the level of occupancy).
- 1.4 The consultation ran from 24 September and 25 October 2018, and staff and stakeholders were invited to give their views and feedback on the proposals.

Feedback centred primarily on the following areas:

- Staff queries about the process, potential timelines and the mechanics of running the Discharge to Assess service
- Levels of Staffing in the service
- Concern about closing The Willows and losing the site
- Changes to staff roles

1.5 Feedback received and the management response is provided in more detail below.

2.0 Consultation Process

2.1 The consultation document was sent to staff on 24th September 2018. A meeting with Trade Union representatives was offered on 18th September followed by a launch meeting with both of the staff teams on 24th September, which marked the start of the formal 30 day consultation period. A high proportion of the team attended the consultation launch meetings. Two follow up meetings were held for both staff teams. Staff also gave their feedback via email and 1:1 meetings.

2.2 The consultation was also opened to the public. It was launched on the Reading Borough Council Website alongside a press release.

2.3 The 3 permanent residents at The Willows Care Home (at the time) and their families received written letters about the consultation, alongside telephone calls from and meetings with the service management team. One to one reviews with the residents were also conducted by social workers. Regular users of the respite service were contacted by the management team and also received letters regarding the consultation. People were offered the opportunity to get in touch over the phone, via the mail or email. A comment/query box regarding the consultation was on offer at the service also.

2.4 Residents at Charles Clore Court were contacted by letter regarding the consultation and were offered opportunities to meet with the manager. They too were offered the opportunity to discuss any concerns over the phone, via post and via email.

2.5 Partner organisations were also offered the opportunity to feedback their views. In particular meetings were scheduled between the Council, Berkshire Health Foundation Trust (BHFT), colleagues at the Clinical Commissioning Group (CCG) and the Royal Berkshire Hospital.

3.0 Consultation responses

3.1 A number of constructive questions and comments were offered during the consultation process. All of the feedback was collated following the consultation and is provided at the end of this document, along with the management response. 8 responses were received that did not agree with the principle of moving the discharge to assess service and closing the residential service. Of these:

- 2 responders are staff members at The Willows
- 2 responders were previously employed at The Willows
- 1 an informal carer for a former resident at The Willows
- 1 Health Care professional
- 2 were stakeholders (members of the public, health, voluntary organisation, etc).

Most of the reasons that they gave are linked to the themes below, others were linked to the responder's individual situations.

3.2 Feedback has been summarised here under the following themes:

3.2.1 Level of Staffing

People noted that the proposal would add duties to the staff team at Charles Clore Court, and that this could not be covered by the current staffing numbers.

Response & any changes

As a part of the proposal, there would be additional staffing allocated to the Charles Clore Court site, from the staff team that currently operates at The Willows.

3.2.2 Staff roles

Both of the staff teams offered feedback regarding the proposed change of roles. Some of the staff at Charles Clore Court had previously moved from a residential care environment to an extra care environment and were keen to point out that the work, whilst mostly similar, had some subtle but important differences.

The team at The Willows also stated that there would need to be a change in practise for the staff at Charles Clore Court, to work in an enabling fashion. This would also require training.

Response & any changes

Following the feedback from the staff teams, the management felt that it would be beneficial to phase the integration of the two teams, over a period of three months to allow for the additional training and allow staff to adapt to the new way of working. Staff would initially come across from the Willows as one team and operate separately to the existing Charles Clore Court team. Over the following three month period they would eventually align to one team once all staff were appropriately trained.

3.2.3 Closure of the residential service

There was feedback from a small number of respondents that the local area should not be closing residential care homes, as there is an aging population and there will likely be a need for more beds rather than fewer. There was also one piece of feedback that was linked to the loss of the respite bed that was offered as a part of the residential service. There was concern that the building would also be lost from the Council portfolio.

Response & any changes

In Reading, there are fewer placements being made into residential care services than in previous years. This follows the wishes of older people, who generally wish to live independently for as long as possible. Supporting people to be independent as long as it is safe is also seen as best practice. It also follows improvements in use of community reablement and assistive technology.

The commissioning team are currently able to make placements into residential dementia care homes which are of an appropriate and equivalent quality and in the local area (although this is very occasionally not possible due to need or demand). This is also the case for residential respite for older people.

The commissioning plan for the borough includes an increase in use of Extra Care Sheltered Housing locally. Following a consultation, older people were in favour of more independent living services.

There is currently a review taking place for all of the internal services that the council operates. This review will also look at the future use of The Willows site.

3.2.4 Reduction in the number of beds/flats

The proposal suggested that the Discharge to Assess service will reduce the number of beds. Stakeholders fed back that they were surprised that this was an appropriate course of action, as there is ongoing pressure at the hospital on delayed transfers of care.

Response & any change

Analysis was conducted to look at bed occupancy, uptake and usage for the Discharge to Assess service. The analysis concluded that 4 beds were required which included an allowance for some potential increase in use in the future and at times of pressure.

Based on a desktop analysis of admissions to the Discharge to Assess service in the six months between November 2017 and April 2018 evidence suggests there is a need for no more than 4 beds in total:

- Within the total number of clients admitted to the service, only 9 were deemed to be unable to return home due to the physical environment or risks associated with their level of need.
- There was an average length of stay of 60 days.

- Taken together, this represents 540 days across a 6 month period (9x 60 days)
- Assuming the trend would be consistent across a 12 month period; this would represent 1080 days (18 x 60 days).
- 1 bed offers 365 days availability per annum. Therefore to accommodate the estimated demand for the service (based on the results of the desktop analysis and assuming that those clients able to return home are supported to do so), there is a need for 3 beds (1080 divided by 365).
- As the number of people requiring the service varies over the year (for instance an increased demand during winter pressures), we believe it would be appropriate to secure 4 beds for future provision.

The Discharge to Assess service is supporting people to return to their own homes wherever possible rather than being discharged to alternative bed based reablement, and delayed transfers of care have reduced significantly at the same time. There is therefore a reduction in the need for an alternative bed based reablement service with no associated adverse impact on delayed transfers of care.

There remains a need for bed-based reablement in the exceptional circumstances that people are unable to return home.

In conclusion based on the consultation feedback it is proposed that:

- The Discharge to Assess service is relocated to Charles Clore Court.
- The Willows Residential service is temporarily closed while its long-term future is decided under the review of internal services described above.

4. Governance structure

- 4.1 Reading Borough Council, Berkshire West Clinical Commissioning Group and Berkshire Healthcare Foundation Trust are committed to joint working to ensure communication is clear and transparent.

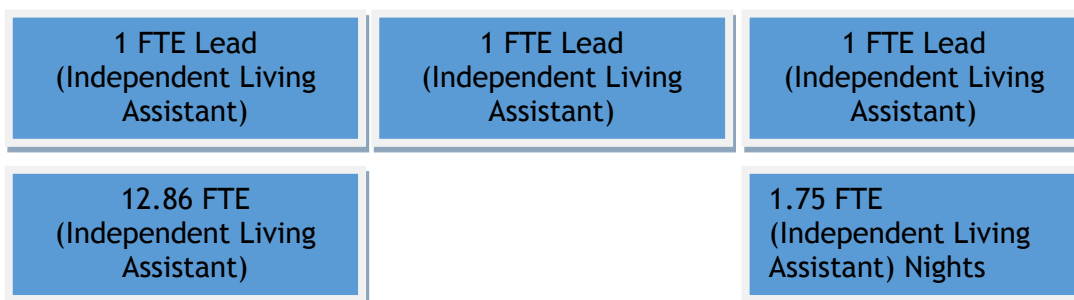
The Reading Integration Board currently oversees the performance of the Discharge to Assess service and this arrangement will continue. The membership of this group comprises senior managers from the Council, Berkshire Healthcare Foundation Trust and Berkshire West Clinical Commissioning Group.

The implementation of the transition will be overseen by the Adult Social Care Transformation Board.

5. Staffing Implications

- 5.1 The proposed structure is outlined below:

1 FTE Registered
Manager



5.2 A summary of the expected staffing implications are outlined in the tables below, subject to final confirmation of the staffing structure:

Table 1: Proposed final staffing structure for Discharge To Assess/Charles Clore Court & the volume of those posts that will be filled by existing staff at Charles Clore Court

Staff role	Total FTE required in new structure	Proposed contribution to the new structure made by existing staff at Charles Clore Court	Positions in new structure remaining available to existing Discharge To Assess staff (following CCC staff's contribution to filling the roles)
Manager	1	0	1
Deputy Manager	0	0	0
Lead ILA (Lead at Willows/D2A)	3	1	2
ILA (Carer at Willows/D2A)	12.86	6.69	6.17
Night ILA (Night Carer at Willows/D2A)	1.75	1.62	0.13
Domestic Cleaning Staff	0	0	0
Cook	0	0	0
Laundry Assistant	0	0	0
Gardener	0	0	0
TOTAL	18.61	9.31	9.3

Table 2: Number of displaced D2A staff roles following allocation of existing staff to positions remaining available in the proposed staffing structure

Staff role	Current FTE at the Willows/D2A	Positions in new structure remaining available to existing D2A staff (following CCC staff's contribution to filling the roles)	Number of displaced D2A staff roles (FTE)
Manager	1	1	0
Deputy Manager	1	0	1
Lead ILA (Lead at Willows/D2A)	3	2	1
ILA (Carer at Willows/D2A)	7.19	6.17	1.02
Night ILA (Night Carer at Willows/D2A)	2.29	0.13	2.16
Domestic Cleaning Staff	3.05	0	3.05
Cook	2.08	0	2.08
Laundry Assistant	0.54	0	0.54
Gardener	0.81	0	0.81
TOTAL	20.96	9.3	11.66

- 5.3 As the table above indicates the proposal would result in 11.66 number of FTE posts no longer being required as part of the new structure. No changes in grades for retained staff are envisaged.
- 5.4 It is highly likely that redeployment into other in-house vacancies will be available for the majority of the care staff and this is factored in when calculating potential redundancy costs indicated below. Redeployment is less likely for the ancillary staff.
- 5.5 The redundancy costs have been estimated on the assumption that the 4.18 FTE displaced care staff are redeployed. The estimated redundancy cost for the remaining posts (7.48FTE) is approximately £136,000. Please note that several staff members have recently left The Willows, and the potential redundancy costs could decrease should that trend continue amongst the affected staff members. However the costs could also increase should it not be possible to redeploy the 4.18 FTE care staff.

6. What happens next?

- This response, and its recommendations, will now be shared at various decision making meetings with the final decision being at Policy Committee on the 14th January 2019.
- Subject to the decision made at this Committee preference letters will be sent to staff which will then inform any potential competitive recruitment process. The outcomes of this will enable us to understand those staff that have been matched to the new structure or have successfully been redeployed.
- Staff that are not redeployed or matched to new roles will be formally at risk and be given notice of redundancy. Notice of redundancy will be given in accordance with terms and conditions, although the last day of service will be determined post Personnel Committee to agree the redundancy.
- The new structure will be in place no later than March 2019.
- Managers and HR will meet with individuals who are at risk.
- To facilitate the closing down of the service, it is estimated that four domestic staff, a handyperson and the administration assistant (alongside the manager) would need to be retained for one month after the closure of the service to assist with closing and securing it.
- We are very conscious that this process will lead to some staff anxiety. Whilst we will make every effort to adhere to the above timetable, it may be subject to variation for reasons beyond our control. If this occurs, we will endeavour to keep delays to a minimum and any changes will be communicated at the earliest opportunity.

7. Support to Staff

It is appreciated that times of change are difficult and the following support is available to employees on an individual basis in addition to the ongoing management support:

- The Employee Assistance Programme is available to provide confidential support and can be contacted free on 0800 282193.
- Trade Unions, if you are a member.
- Learning and Workforce Development offer a range of courses, resources and development options to support employees through change and the interview process. Information can be found on the [L&D Pod on IRIS](#), or you can contact the L&D team by email to training@reading.gov.uk, or by phone to 0118 937 2102 (ext 72102).
- National Careers Service provides free and confidential support with completing application forms and CVs and interview skills. Call 0333 006 2966.

Proposal: To move the Discharge to Assess service from the Willows to an alternative site

Directorate: Adult Care and Health Services

Service: Transformation Team

Name: Paula Johnston

Job Title: Acting Head of Adult Social Care

Date of assessment: November 2018

What is the aim of your policy or new service/ what changes are you proposing?

The 14-bed based Discharge to Assess (D2A) is provided through a partnership between Berkshire Healthcare Foundation Trust (BHFT) and Reading Borough Council (RBC). It is delivered from the Council's 27 bed residential service "The Willows".

The proposed changes for the Discharge to Assess service aim to re-provide the current provision in an alternative premise whilst expanding the ability to provide an increased service at home.

The Discharge to Assess service is delivered from RBC's residential service "The Willows Care Home". A recent assessment concluded that while the D2A service is exceeding many of its targets and supporting strong reductions in delayed transfers of care, several factors may be impacting its value for money:

- D2A utilisation has declined, with occupancy levels ranging from 32% to 90% and averaging at 67%.
- The staffing establishment consequently exceeds demand
- An Occupational Therapist has identified that the host environment does not meet the needs of service users
- Both residential and re-ablement services are provided by the same staff team and has presented a challenge as the emphasis is on long term care, rather than promoting independence.

Who will benefit from this proposal and how?

Our view is that the most appropriate form of reablement is delivered in community-based services rather than a bed-based service. We believe that based on the level of demand we should reduce our best based offer and redirect any released resources to a home based option aligned to the current Community Reablement service.

We believe that it would be more appropriate to deliver the service from an environment closer matched to a service user's home environment, and from an environment better suited to their needs, with a staff team focused on reablement.

What outcomes does the change aim to achieve and for whom

The change aims to deliver better outcomes for the people that use the D2A service. The new environment will be better suited to service delivery, for instance there would be more space for wheelchair users, fewer trip hazards and better accessibility for bariatric service users.

Who are the main stakeholders and what do they want?

The staff currently employed by the Council to provide the in-house service would be affected if the current, provided, service were to move.

The consultation has taken place with the service users and their carer's, as well as staff, to gain their views on the proposal. Consulted groups include:

- **D2A/The Willows staff** – to understand the future of the service and as such, how the proposal will affect their jobs.
- **CCG** – regarding how the proposal will help to meet the Better Care Fund Targets and ensure best value for money from BCF funds.
- **BHFT** – regarding the impact of the proposal on their service offer; BHFT have put forward a plan as a part of the proposal, to offer a service across the community, as well as for D2A service users.
- **CCC staff** – to understand the future of the service and as such, how the proposal will affect their jobs.

Consultation responses are summarised in the Consultation Response document.

Assess whether an EqIA is relevant

How does your proposal relate to eliminating discrimination; promoting equality of opportunity; promoting good community relations?

Do you have evidence or reason to believe that some (age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, and pregnancy and maternity) groups may be affected differently than others? (Think about your monitoring information, research, national data/reports etc)

Yes, short term, whilst the transition takes place.

Any changes to the provision offered by the Council would also affect the carers who have a right to be assessed under the Care Act 2014. This Act gives them the legal right to an assessment and support as they are the carer of someone who is registered as disabled and identified as having a protected characteristic under the Equality Act 2010.

Many of the in-house service's users have a physical disability, often requiring use of a wheelchair or other assistive technology. Under the proposal, there would be scope for replacement services to feature a higher degree of accessibility and support to these clients.

Is there already public concern about potentially discriminatory practices/impact or could there be? Think about our complaints, consultation and feedback.

No

If the answer is YES to any of the above you need to do an Equality Impact Assessment.

If NO you must complete this statement.

An Equality Impact Assessment is not relevant because:

N/A

Signed (completing Officer)

Lewis Willing

Date:

23/11/2018

Signed (Lead Officer)

Melissa Wise

Date:

23/11/2018

Assess the Impact of the Proposal

Consultation

Have you consulted with or do you plan to consult with relevant groups and experts. If you haven't already completed a Consultation forms do it now. The checklist helps you make sure you follow good consultation practice.

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Relevant Groups/ Experts	How were/will the views of these groups be obtained	Date when contacted
All Reading Borough Council employed at The Willows and D2A BHFT and CCG	Staff were invited to respond to the consultation throughout its duration, via several means. A launch meeting with staff on the 25 th September provided an initial opportunity for comments / views. The service manager was also available on request for 1-1 meetings with staff to hear and discuss views. They were also able to complete an on-line questionnaire (with a paper copy also available on request). Service Users and their carers also had the opportunity to contribute to the consultation, which lasted 30 days.	25th September 2018
	Consultation was advertised as part of Transformation Board sign-off processes.	25th September 2018
Frequently Asked Q & A sheet will be made available	A separate consultation was run for the residential and respite service users, alongside all of the staff.	Updated during the consultation, finalised 24th October 2018

Collect and Assess your Data

Describe how this proposal could impact on Racial Groups

The changes will be equally applicable to all regardless of race.

The council has interpreter services available, which would support people with differing communication needs. Written information could also be made available in alternative languages to English.

The level of support would be tailored to the person, so all would have the same experience.

Is there a negative impact | No

Describe how this proposal could impact on Gender/transgender (cover pregnancy, maternity, marriage)

The changes would be equally applicable to all regardless of Gender.

Is there a negative impact | No

Describe how this proposal could impact on Disability

The service user group affected by the potential changes to the Discharge to Assess service are mostly Older People. As such, many will have age related disabilities.

The proposal states that the new environment will be better suited to meeting their needs. There will be space in the bathrooms for OT equipment, and for alterations.

For D2A service users, this will allow people to stay in their own en-suite when bathing at Charles Clore Court, rather than having to travel to a communal bathroom, as is the case currently at The Willows. There will also be an able peer group and more community involvement in their surroundings.

Is there a negative impact | No

Describe how this proposal could impact on Sexual Orientation (cover civil partnership)

The service users for D2A would not be affected.

Is there a negative impact | No

Describe how this proposal could impact on Age

This proposal will affect mostly older people, as they are more frequent users of D2A.

There is potentially a positive effect, as the service environment will be better suited thus providing a higher quality service. There would be wider peer groups for the people that use the service.

The proposal for the D2A service follows the example of other successful councils, with Extra Care being seen to have a positive effect on service users, and also supporting the councils to meet or exceed their Better Care Fund Targets (The D2A service is linked to discharge targets). In everyday terms, the proposal states that the service will continue to offer the same service.

Is there a negative impact	No
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Describe how this proposal could impact on Religion or Belief	
No negative or disproportionate impact has been identified, but person-centred reviews would consider service users' religion or belief and how this may impact on providing the most appropriate (alternative) service for each person amongst providers.	
The proposal states that D2A services will continue to be delivered by a Care Quality Commission registered service and that residential service users would potentially move to a Care Quality Commission registered service, there would be a requirement for the provider to respect your cultural background, sex (gender), age, sexuality (whether you are a lesbian, gay, bisexual or heterosexual person), religion or belief, and your disability, if you have one. As such there would be a continuation of having needs related to Religion and Belief met.	
Is there a negative impact	No

Make a decision

If the impact is negative then you must consider whether you can legally justify it. If not you must set out how you will reduce or eliminate the impact. If you are not sure what the impact will be you MUST assume that there could be a negative impact. You may have to do further consultation or test out your proposal and monitor the impact before full implementation.

Tick which applies (Please delete relevant ticks)

✓
1. Negative impact identified or uncertain
We ensured that the consultation asked service users about how the Council could work with carers/families and service users to minimise anxieties associated with the decision.
We ensured that carers/families and service users were given the opportunity to see and comment on the external services which were offered as an alternative to the in-house service.
We have endeavoured to clarify and reassure carers that service users would not experience a break in service.

How will you monitor for adverse impact in the future?
Service users will receive an annual review, which will enable social workers to assess their needs and how well the service is continuing to meet their needs.

Signed (completing Officer)	Date:
Lewis Willing	23/11/2018
Signed (Lead Officer)	Date:
Melissa Wise	23/11/2018

Proposal: To close The Willows Residential and respite service

Directorate: Adult Care and Health Services
Service: Transformation Team
Name: Paula Johnston
Job Title: Acting Head of Adult Social Care
Date of assessment: November 2018

What is the aim of your policy or new service/ what changes are you proposing?

The Council delivers a 14-bed based Discharge to Assess (D2A) which is provided through a partnership between Berkshire Healthcare Foundation Trust (BHFT). It is delivered from the Council's 27 bed residential service "The Willows".

The proposed changes for the Discharge to Assess service aim to re-provide the current provision in an alternative premise whilst expanding the ability to provide an increased service at home. This change has prompted a consideration of the continued use of the Willows residential home and respite provision. It is proposed that due to low usage and the availability of alternative provision in the community the Willows Residential Home is closed in its current format.

Who will benefit from this proposal and how?

Residential service users will benefit by living in buildings that are more suitable for their need (i.e. buildings that meet Kings Fund guidance for people with dementia).

What outcomes does the change aim to achieve and for whom

The service aims to deliver better outcomes for residential and respite service users. Replacement environments will be better suited to meeting their needs; for instance, other residential services would present environments that allow space for wheelchair users, present fewer trip hazards and allow better accessibility for bariatric service users.

Who are the main stakeholders and what do they want?

The staff currently employed by the Council to provide the in-house service would be affected if the current, provided, service were to close.

The consultation has taken place with the service users and their carers, as well as staff, to gain their views on the proposal. Consulted groups include:

- **D2A/The Willows staff** – to understand the future of the service and as such, how the proposal will affect their jobs.

- **CCG** – regarding how the proposal will help to meet the Better Care Fund Targets and ensure best value for money from BCF funds.
- **BHFT** – regarding the impact of the proposal on their service offer; BHFT have put forward a plan as a part of the proposal, to offer a service across the community, as well as for D2A service users.
- **CCC staff** – to understand the future of the service and as such, how the proposal will affect their jobs.

Consultation responses are summarised in the Consultation Response document.

Assess whether an EqIA is relevant

How does your proposal relate to eliminating discrimination; promoting equality of opportunity; promoting good community relations?

Do you have evidence or reason to believe that some (age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, and pregnancy and maternity) groups may be affected differently than others? (Think about your monitoring information, research, national data/reports etc)

Yes - The proposal is that there will be a closure of the service at The Willows. The Willows has offered respite services to some older people at times of crisis or to support carer's breaks. The uptake of this service is low (3 regular users), with the majority of regular service users now in full time residential care elsewhere. Respite Care for older people is available from a host of providers locally.

There are currently no permanent residents at The Willows residential home, as they have moved to services that are better-able to meet their needs.

The residential and respite service is offered to older people. This cohort of service users receiving respite care are all registered as disabled therefore they will be recognised under the category of 'disability' within the terms of the Equality Act 2010.

Any changes to the provision offered by the Council would also affect the carers who have a right to be assessed under the Care Act 2014. This Act gives them the legal right to an assessment and support as they are the carer of someone who is registered as disabled and identified as having a protected characteristic under the Equality Act 2010.

Many of the in-house service's users have a physical disability, often requiring use of a wheelchair or other assistive technology. Under the proposal, there would be scope for replacement services to feature a higher degree of accessibility and support to these clients.

Is there already public concern about potentially discriminatory practices/impact or could there be? Think about our complaints, consultation and feedback.

No

If the answer is YES to any of the above you need to do an Equality Impact Assessment.

If NO you must complete this statement.

An Equality Impact Assessment is not relevant because:

N/A

Signed (completing Officer)	Date:
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Lewis Willing	23/11/2018
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Signed (Lead Officer)	Date:
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Melissa Wise	23/11/2018
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Assess the Impact of the Proposal

Consultation

Have you consulted with or do you plan to consult with relevant groups and experts. If you haven't already completed a Consultation forms do it now. The checklist helps you make sure you follow good consultation practice.

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Relevant Groups/ Experts	How were/will the views of these groups be obtained	Date when contacted
<p>All Reading Borough Council employed at The Willows and D2A</p> <p>BHFT and CCG</p>	<p>Staff were invited to respond to the consultation throughout its duration, via several means. A launch meeting with staff on the 25th September provided an initial opportunity for comments / views. The service manager was also available on request for 1-1 meetings with staff to hear and discuss views. They were also able to complete an on-line questionnaire (with a paper copy also available on request).</p> <p>Service Users and their carers also had the opportunity to contribute to the consultation, which lasted 30 days.</p>	<p>25th September 2018</p>
	<p>Consultation was advertised as part of Transformation Board sign-off processes.</p>	<p>25th September 2018</p>
<p>Frequently Asked Q & A sheet will be made available</p>	<p>A separate consultation was run for the residential and respite service users, alongside all of the staff.</p>	<p>Updated during the consultation, finalised 24th October 2018</p>

Collect and Assess your Data

Describe how this proposal could impact on Racial Groups	
<p>The changes will be equally applicable to all regardless of race.</p> <p>The council has interpreter services available, which would support people with differing communication needs. Written information could also be made available in alternative languages to English.</p> <p>The level of support would be tailored to the person, so all would have the same experience</p> <p>There are currently no permanent residents in the residential home. This would only affect the 3 regular service users that use the respite service. The change would align the 3 service users with the experience of the other Respite service users in Reading.</p>	
Is there a negative impact	No

Describe how this proposal could impact on Gender/transgender (cover pregnancy, maternity, marriage)	
<p>The changes would be equally applicable to all regardless of Gender.</p>	
Is there a negative impact	No

Describe how this proposal could impact on Disability	
<p>The Service user group affected by the potential changes to the residential service are mostly Older People. As such, many will have age related disabilities.</p> <p>For the people that use The Willows respite service, there will be an improvement in their environment, with a wider peer group. There will be support to access a service that meets the needs of the people, at a service of the equivalent standard.</p> <p>There are currently no service users in The Willows residential service, so this will not affect them.</p>	
Is there a negative impact	No

Describe how this proposal could impact on Sexual Orientation (cover civil partnership)	
<p>No negative or disproportionate impact has been identified for respite service users, but person centred reviews would consider residential service users' sexual orientation and how this could impact on choosing the most appropriate new service for their need.</p> <p>There are currently no service users in The Willows residential service, so this will not affect them.</p>	
Is there a negative impact	No

Describe how this proposal could impact on Age	
<p>This proposal will affect mostly older people, as they are the group that The Willows is</p>	

registered to support.

Respite service users will not be affected, as they will be offered the same service, at an alternative location. The council will support people to find alternative provision at an equivalent service, with equivalent quality.

There will be no effect for residential service users, as there are currently none in the residential service.

Is there a negative impact

No

Describe how this proposal could impact on Religion or Belief

No negative or disproportionate impact has been identified, but person centred reviews would consider residential service users' religion or belief and how this may impact on providing the most appropriate (alternative) service for each person amongst providers.

At The Willows site, currently, the local priest will attend to give Holy Communion on request and annual festivals take place at Easter and Harvest. The team at The Willows/D2A support people and their families to meet their religious and cultural needs on an individual basis.

Any other service purchased on behalf of respite service users would be from Care Quality Commission registered services. These services are requirement for the provider to respect your cultural background, sex (gender), age, sexuality (whether you are a lesbian, gay, bisexual or heterosexual person), religion or belief, and your disability, if you have one. As such there would be a continuation of having needs related to Religion and Belief met.

As the residential service is currently empty, there would be no effect for them.

Is there a negative impact

No

Make a decision

If the impact is negative then you must consider whether you can legally justify it. If not you must set out how you will reduce or eliminate the impact. If you are not sure what the impact will be you MUST assume that there could be a negative impact. You may have to do further consultation or test out your proposal and monitor the impact before full implementation.

Tick which applies (Please delete relevant ticks)



1. Negative impact identified or uncertain

What actions will you take to eliminate or reduce the impact? Set out your actions and timescale?

We ensured that the consultation asked service users about how the Council could work with carers/families and service users to minimise anxieties associated with the decision.

We ensured that carers/families and service users were given the opportunity to see

and comment on the external services which were offered as an alternative to the in-house service.

We have endeavoured to clarify and reassure carers that service users would not experience a break in service, as the local providers will be available to service users and will allow clients to transition between services in a planned, supportive and un-rushed fashion (as has been the case for residential service users who have transitioned from The Willows).

How will you monitor for adverse impact in the future?

Service users will receive an annual review, which will enable social workers to assess their needs and how well the service is continuing to meet their needs.

Signed (completing Officer)	Date:
Lewis Willing	23/11/2018

Signed (Lead Officer)	Date: