

By: Oliver Mills, Managing Director, Kent Adult Social Services

To: Graham Gibbens, Cabinet Member, Adult Social Services

Subject: **OUTCOME OF THE FORMAL CONSULTATION ON THE CLOSURE OF CORNFIELDS REGISTERED CARE CENTRE, DOVER**

Classification: Unrestricted

---

Summary: This report considers the proposal to close Cornfields and develop extra care housing on the site and summarises the responses to the consultation. The report asks the Cabinet Member to approve the proposal to close Cornfields and replace with extra care housing.

---

## 1. Background

(1) Kent County Council (KCC) is modernising the way older people are supported and cared for in the county.

(2) On Monday 14 June 2010, Kent County Council's Cabinet agreed for Kent Adult Social Services (KASS) to begin a formal consultation on the future of its Older Person's Service Provision. From Monday 21 June 2010, KASS officers met with staff, service users, relatives, trades unions and other key stakeholders to talk about the proposals.

(3) The full consultation covered 11 of the 16 homes owned and managed by KASS.

<b>The main drivers for the full consultation are:</b>
--

- |  |
|--|
| <ul style="list-style-type: none"><li>• <b>More people are living longer and living with dementia. People rightly expect more choice in care.</b></li><li>• <b>High quality care is a continuing priority. Dignity in care is crucial and more people want care at home.</b></li><li>• <b>Residential care should be in high quality buildings. Some KCC buildings have reached the end of their useful life and don't meet expectations or standards for new builds.</b></li><li>• <b>Good quality care can be commissioned for less money. The private and voluntary sector is set up to care for more people.</b></li></ul> |
|--|

(4) The considerations and options evaluated to determine the proposals for each home included:

- a) The range of alternative local services for older people
- b) The opportunity for developments with partners in the local area

- c) The condition of the buildings and likely capital expenditure required to maintain services
- d) The appropriateness of the design of the buildings for the services delivered and required
- e) The need to release money that is tied in to services that could be used to deliver equivalent services to more people

(5) The proposals combined across Kent will generate savings of £1m in 2011/12 and £1.2m in 2012/13.

(6) This report covers Cornfields in Whitfield, Dover. The proposal in the consultation is for the home to be closed, demolished and the site used to build extra care housing. Cornfields staff and service users have been aware of this proposal since 2008 when outline planning permission was submitted to make sure the site was suitable for this type of development.

(7) The proposed extra care housing scheme is part of a project led by Kent County Council in partnership with five district councils to develop a minimum of 228 units of additional social housing, including 201 extra care housing apartments for older people with smaller blocks for people with mental health problems and younger adults. In 2008, the partnership successfully bid to the Homes and Communities Agency for the funding and the money is still available following the Comprehensive Spending Review in October 2010. Dover District Council and KCC previously delivered 'Buckland Court', a similar scheme, and have identified that this type of development would fit with the local housing strategy and that a need for this type of housing has been demonstrated. The proposed scheme will have at least 20 one bedroom flats and 20 two bedroom flats with a range of communal facilities for the tenants to use and also for the wider community to access. These facilities could include a shop, restaurant, gym, hairdressers and activity room.

(8) Extra care housing is a national model. It is recognised as making a valuable contribution in offering choice for older people who are considering care in later life. It is offered as a choice to those who previously would have only had the option of residential care. Individuals will have tenant status in their own home with their own front door and at the same time will have access to care staff 24 hours a day in an environment that has been built to meet the needs of people with a range of disabilities.

(9) KASS will commission the care contract separately, which will make sure that care staff will be on site 24 hours a day and that individuals have tailored care packages that respond to what their assessment says they need. The two bedroom apartments could accommodate a couple that would have been separated previously, if one needed residential care. This would allow separate sleeping arrangements if necessary and would allow a couple to stay together longer and retain caring roles – with access to support if needed.

(10) Cornfields is a detached 28-bed unit built in 1970 and refurbished in 1995. It offers residential, respite and intermediate care and day care to a maximum capacity of 12 people each day, four days per week. It is freehold and has no known restrictive covenants. It was purpose-built in a residential area in Cranleigh Drive, Whitfield, Dover. The accommodation is on two floors. Shamrock and Rose Lodge wings are on the ground floor. Daffodil and Thistle wings are on the first floor. Each wing has a similar layout with a main lounge/dining area and a small kitchenette. There is a lift between floors providing access around all parts of the building.

(11) Cornfields would not meet the national minimum standards of the Care Standards Act 2000 as regulated by the Care Quality Commission if it were to be built today. There is, however, protection against these standards being applied for as long as significant structural improvements are not required. The building may very soon because of its age require considerable investment to maintain services and meet future needs and expectations.

(12) The unit cost (gross), based on 100% occupancy, for one bed was £741.30 per week for 09/10. The unit cost (gross), based on 100% occupancy, in the day centre was £44.90 per day for 09/10. The annual gross expenditure for 09/10 is £1,082,300 for residential and £108,500 for day care – totalling **£1,190,800**.

(13) Cornfields has four permanent residents (at 18 November 2010). The service offered 10 frail permanent places, 10 frail respite places and eight intermediate care (non-permanent) places. In 2009/10, the building ran at 79% of its residential capacity making the unit cost £944.43 and the day care at 75% of its capacity making the unit cost £60.33.

(14) The maximum charge for individuals accessing the beds in the units is currently capped at £407.92 per week. Everyone that accesses residential and respite services is financially assessed for a contribution towards their care in line with the Charging for Residential Accommodation Guide (CRAG). This means that individuals who have savings of more than £23,250 are charged £407.92 per week and anyone with less than £23,250 is assessed against their means to determine their level of payment. A snapshot undertaken in the summer of 2010 indicated at that time there were 51 people living in the in house residential services being charged £407.92 per week.

(15) KASS has a guide price for the independent sector and can buy services in Dover for £328.65 per week for standard residential care.

(16) The Care Quality Commission (CQC), in its last inspection (2009) rated the service as 'good'. There was positive feedback about the services from both the inspectors and the service users. CQC commented about what Cornfields does well; *"People are supported to return to their own homes if that is their wish. They are given the option to have a short stay to recuperate before returning home and are supported to be as independent as they can."*

(17) Dover commissioning managers recognise that Cornfields offers important intermediate care and respite services. These will need to be provided through the independent sector and, long term, in redevelopments planned in the district with the PCT.

## **2. Consultation Process**

(1) The county council has a duty to undertake formal consultation on any proposed changes to services. The procedure for consultation on modernisation/variation or closure of establishments in KASS was followed as below:

<b>Process</b>	<b>Date Action Completed</b>
Obtained agreement in principle from the Cabinet member for Adult Social Services.	14 June 2010

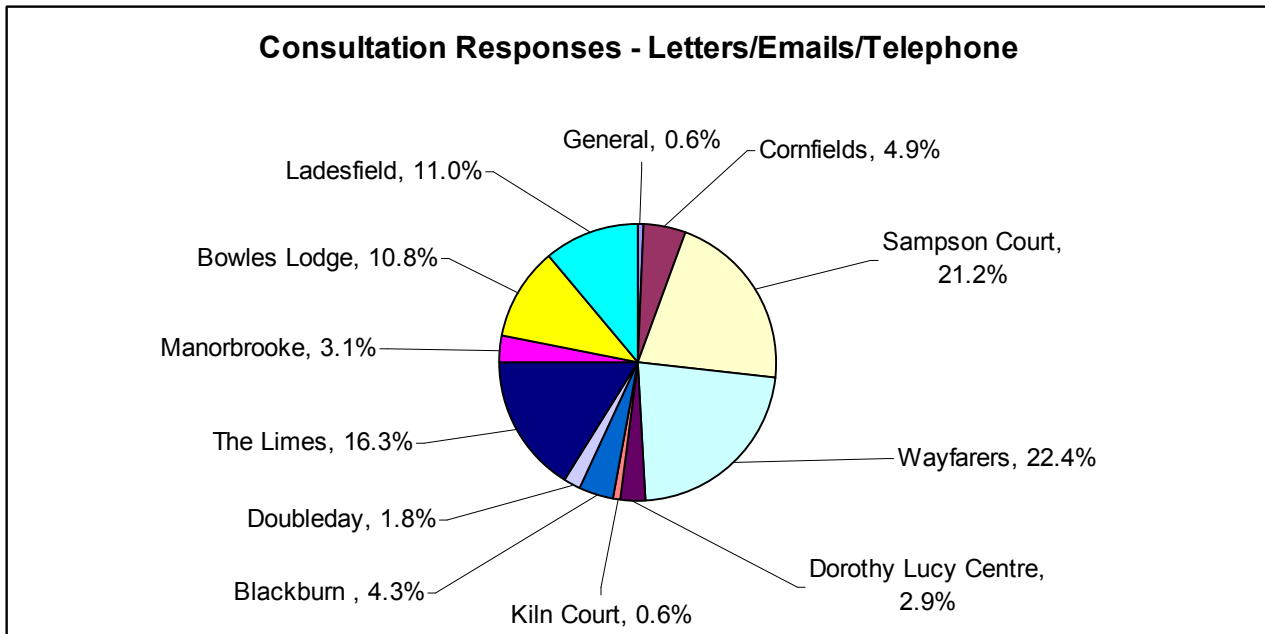
<p>Cabinet member chaired a meeting to discuss the proposals. Information packs were sent to those who were invited and who attended:</p> <p>The Chairman of the Adult Social Services Policy Overview Committee (ASSPOSC)  Vice Chairman  Opposition spokesman  Local KCC member(s)  Elected members  Responsible member of KCC adult social services Strategic Management Team  Heads of Services (updated to reflect new title)  Area Personnel Manager</p>	<p>10 June 2010  10 June 2010  10 June 2010  30 June 2010  14 June 2010  10 June 2010  14 June 2010  14 June 2010</p>
<p>Stakeholders were informed in writing and invited to comment: -</p> <p>Users, relatives and carers  Head of Service  Staff  Trades Unions  Local KCC member(s)  District Council  Parish/Town Council  Relevant NHS bodies  Any other relevant person or organisation and the Local MP</p>	<p>Letter sent 14 June 2010. Consultation period ended 1 November 2010 (19 weeks from 21 June 2010).</p> <p>Summary of meetings and correspondence received as a result of the consultation</p> <p>Informed MP and answered questions</p> <p>Held individual meetings and group meetings with local councillors, county councillors, MPs</p>
<p>Directorate issued a Press Release</p>	<p>The press officer responded to 49 enquiries from the press across the county for all proposals during the consultation period.</p>
<p>A wide range of stakeholder meetings were held</p>	<p>Meetings with staff and union representatives held on 1 July 2010</p> <p>Stakeholder Roadshow held for Cornfields on 18 October 2010</p> <p>Individual meetings with permanent residents and carers offered but not requested for those accessing Cornfields</p>

	<p>Meeting with respite users and carers on 1 July 2010</p> <p>Meeting with day care users/carers on 1 July 2010</p> <p>East Kent Area Management Team Commissioning Board on 6 September 2010 and 1 November 2010</p> <p>Presentation at members' briefing on 26 July 2010 on proposals</p> <p>Presentation to Dover District Voluntary and Community Sector Network on 30 September 2010</p> <p>Presentation to Dover Housing Officers on 1 October 2010</p> <p>Meeting with East Kent MPs on 8 October 2010</p> <p>Meeting with Dover Councillors on 15 October 2010</p> <p>Presentation to Age Concern Collaboration Meeting on 20 October 2010</p> <p>Attended Cornfields staff team meeting on 26 October 2010</p> <p>Adult Social Services Policy Overview and Scrutiny Committee Chair and Vice-Chair visit to Cornfields 27 October 2010</p>
<p>Report to Cabinet member for decision making on the closure/variation proposal.</p>	<p>This report dated 30 December 2010</p>
<p>The Cabinet member or the Chairman of the Adult Services Policy Overview Committee will decide if a meeting between him/themselves, KCC members and consultees is necessary.</p>	<p>In addition to the extensive consultation, these matters will also be discussed at Adult Social Services Policy Overview Committee on 12 January 2011</p>
<p>Instigate any change programme</p>	<p>From January 2011.</p>

(2) The 19-week consultation period for the modernisation of our Older Person's Provision concluded on 1 November 2010. Residents, carers, staff, unions and relevant bodies have been involved with meetings and their views have been considered. Clients and their carers were consulted about the alternative options of service provision.

(3) The overall consultation prompted **490** letters and most related to specific units. A number of letters were copied to the local MP, local councillor, Councillor Gibbens and/or KCC officers. Each letter was responded to either by a standard acknowledgement or a more detailed letter, responding to any queries or inaccuracies in their statements. Of the total number of responses, **4.9%** related directly to Cornfields.

The chart below shows the responses for all units consulted on.



(4) A petition from The Carers of Cornfields was submitted to Cllr Brian Cope on 26 August 2010. This contained 1816 signatures. This prompted a hearing at County Council on 14 October and Cllr Wendy Bowman (Whitfield Parish Council) presented the petition on behalf of The Carers of Cornfields. The petition opposed the closure of Cornfields as signatories strongly disagree that the building has outlived its intended purpose. They said current or future service users would not and could not use ensuite facilities without assistance – and fear that people will have to pay more money for services in future. They state that extra care housing provision will not provide day care or respite services, which are vital services and give carers and relatives a break. The petition repeated some of the views seen in letters from individuals. Attached at Appendix One is the text from the petitioners that was presented at County Council in October. A further 1873 standard letters were submitted as part of the petition.

(5) KCC developed a questionnaire as an additional method for people to contribute to the consultation. This questionnaire was available either by responding directly on line, downloading from the website or through a hardcopy with postage paid.

### 3. Alternative/Replacement Services

(1) Dover commissioners recognise that the services provided at Cornfields are important and would need to be re-provided. Every individual accessing Cornfields will have a full reassessment of their needs and will be supported in accessing alternative services.

(2) The proposal is for Cornfields to be demolished and the site to be used for extra care housing. Private Finance Initiative (PFI) will be used for funding the housing. The project timetable assumes that contract and financial formalities would be completed in October 2011, at which point the site would be handed over and the contractor would secure the site. With these timescales, it is proposed that Cornfields would be closed at the end of September 2011. Staff and service users would move out by that date at the latest. Should Cornfields have little demand and little use, it could be closed sooner. There could be a period of time where Cornfields stands empty while financial and contract matters are concluded. The extra care housing would be open to accept tenants in May 2013, assuming these October 2011 deadlines are met.

(3) Extra care housing has a number of two bedroom apartments allowing a couple to move in that would have otherwise been separated if one person needed residential care. This allows the carer to retain a caring role and also to access 24 hour care, if the individual needs support or to have a short break from caring responsibilities. It also means the individual can stay in their home environment.

(4) The extra care housing facility could provide access to day care services in future. This depends on what alternative services are offered for day care by the independent sector as well as whether day care providers choose to work with the extra care scheme. There is certainly the space and the opportunity to develop some form of day support service. Residents of the scheme will have access to the main lounges and the restaurant. This way they can choose to participate in group activities, remain on their own in their flat or invite people into their flat. They can participate as much or as little as they like. Where there is a risk of isolation, care staff will be aware and will be able to encourage and support people to get involved.

#### **Residential:**

(1) There are currently four permanent residents in Cornfields who will be helped to find alternative services in the independent sector following an updated assessment of their needs, and an analysis of friendship groups, should the proposals be agreed.

Potential Relocation	Client	Residential	OPMH Residential	Nursing	OPMH Nursing	Dual Purpose
Deal			1			
Dover		3				

Vacancy snapshot 28/09/10	Residential	OPMH Residential	Nursing	OPMH Nursing	Dual Purpose
Dover	21	5	0	0	0
Walmer/Deal	9	27			
River	3	0	5	1	0

(2) The town of Dover has 12 residential homes. These offer 313 beds registered for residential and residential Older Persons with Mental Health Needs (OPMHN) use. There are 279 beds in residential homes that are within the KASS band rate of which 275 beds in residential homes that are rated 'Good' or 'Excellent'. These are not vacant beds but it is expected that suitable alternative accommodation for the remaining permanent residents can be readily secured. The national vacancy rate is 9%

(3) Individuals will not be at a financial disadvantage through the proposals. People will be assessed and their needs recorded. Individuals and their families will be offered options to consider that meet the assessed needs of those individuals. KASS will take every reasonable step to secure appropriate alternative accommodation at the best available price.

#### **Respite:**

(3) There are 52 individuals who access the respite services at Cornfields. The home towns of these individuals are shown below.

Current Residence
33 Dover
7 Deal
4 Sandwich
2 Folkestone
5 Canterbury
1 Ashford

(4) Proposals for the future development of respite will be linked to the KASS Respite Strategy currently under review. Commissioners have been liaising with providers in the Dover area regarding expanding the provision of respite beds. There is interest in the Independent Sector and the preferred provision is two small blocks of five, or 10 beds together in one block across the Dover district. Service users will eventually access respite services directly utilising a Personal Budget.

#### **Intermediate Care:**

(5) The definition of Intermediate Care is “Targeted, time-limited services provided on a basis of multi- professional working based on a comprehensive assessment with a planned outcome.”



<b>ICT</b>	<b>Current Residence</b>	<b>Comments</b>
(analysis based on 68 previous service users and 100% occupancy of the beds)	48 Dover 10 Deal 5 Sandwich 1 Folkestone 1 Margate 2 Canterbury 1 Ashford	If the decision is made to close, a phased programme will be implemented where Cornfields beds reduce. Simultaneously, beds within the Independent Sector will be increased for Intermediate Care.

(6) Dover commissioners are having ongoing discussions with the independent sector to develop intermediate care in their services. One bed is already purchased in the independent sector. The independent sector has confirmed that they are interested in developing services and therefore Dover commissioners are confident that this can be re-provided.

#### **Day Care:**

<b>Day care</b>	<b>Current Residence</b>	<b>Transport</b>	<b>Early indications</b>
(analysis based on 27 service users)	17 Dover 8 Deal 1 Sandwich 1 Folkestone	27 Taxi	8 people have respite at Cornfields

(7) Booked day care is as follows:

Monday 12  
Tuesday 10  
Wednesday 11  
Thursday 12

The actual attendance rate is 67% as at 22 November 2010.

(8) Work is underway with Age Concerns and other Independent sector providers to expand existing day care provision within realistic travelling distance of existing service users home addresses and with a view to opening up the centres at different times, including weekends. New opportunities are being explored in relation to the longer term provision of day care, including expanded use of personal budgets to enable people to access opportunities in more individual ways.

(9) Local commissioners are confident, given the range and volume of day services in the Dover area, the day service users can be re-provided with a suitable alternative service.

#### **4. Alternative Proposals**

(1) An Evaluation Panel met on 15 November 2010 to review all alternative proposals that had been submitted. The panel had representation from Commissioning, Finance, Contracting and Standards, Provision and Personnel.

(2) There were two proposals; one was the response from Unison covering all of the proposals and one was from an independent sector provider.

(3) Unison's feedback called on the county council to withdraw its proposals and retain its role as a direct provider of social care. This has been considered as an alternative proposal and evaluated by a panel of KASS officers. Unison reports that there is extreme difficulty identifying vacancies in independent sector homes of a satisfactory standard. It does not think specialist services should be provided in an untested market and believes KCC should remain a direct provider in order to help set high standards. The comments from Unison state that the buildings are fit for purpose and that quality of care should be considered above the fabric of the building. Unison argues that reducing council provision reduces choice and that "attrition rates for residents remain high for enforced moves". Unison argues that KCC's cost comparisons with the independent sector have not been made like-for-like and do not take into account transaction costs.

(4) The proposal from Unison is largely asking to maintain the status quo, which does not enable KCC to address the four key reasons for change and therefore is not an option that KCC can support. In response to Unisons issues, the panel made the following observations:

- KCC will retain control of the market as a key purchaser of care and standards.
- There are vacancies in homes rated 'good' or 'excellent' in the independent sector.
- The proposal for the specialist enablement beds at The Limes is for them to be provided at Gravesham Place which has previous experience of this service.
- The buildings will require the investment of significant capital funding that KCC does not have access to – and the long term future of the services could be more uncertain, possibly resulting in emergency closure rather than planned closure.
- There is no statutory duty to directly provide residential care. KCC should be directing resources to further enhance the quality monitoring and contract management responsibilities it has in commissioning services – and providing personal budgets for people who meet KASS eligibility criteria.
- It is KCCs stated long term intention to focus on undertaking a commissioning role with services provided by a plurality of independent sector providers.
- Where moves are necessary, KCC has considerable experience of carefully and successfully moving older people. Each case will be managed and supported on an individual basis to ensure their personal needs are met at an appropriate pace for the individual.
- It is acknowledged that purchasing intermediate care/enablement beds in the independent sector would require a premium above guide price however commissioners are confident they could purchase these beds in the independent sector at less than half the gross unit cost of an in-house enablement bed.

(5) A further alternative proposal was received from an independent provider known locally who has a good track record of delivering care services in the area. The alternative proposal is for the provider to buy Cornfields and continue the use as a residential home. To date, only a letter has been received registering interest. Further information was requested and has not yet been received. It is therefore not known whether the purchase would include an operational service or an empty building. KASS needs more services developed for those who are requiring nursing care and dementia services and Cornfields would not, as it is, be a suitable environment for this. Given the large number of residential care beds in Dover, standard residential care (general frailty) at this location would not be needed by commissioners. The priority remains that the site is used for extra care housing to provide additional choice for people in Dover. The Project

Executive Board agreed that this proposal was not viable and therefore should not be recommended.

## 5. Issues raised during the consultation

### a) Letters/Emails

(1) **Cornfields meets the needs of the residents. It may not have all the modern facilities but these are not missed by the residents. Extra care housing is not a good alternative.** KASS recognises that current residents would prefer to retain the services as they are rather than experience the proposed change. However, in future people will expect modern facilities, such as ensuite, in residential care.

The Care Quality Commission, the body that enforces the care standards, would expect to see improvements to its fabric to meet the national minimum standards over time. In order for Cornfields to meet the minimum standards the following would be necessary:

- increase the size of each bedroom from 10 square metres to a minimum of 12 square metres of usable floor space;
- install ensuite facilities that include at least a toilet and wash hand basin in each room.

It is possible that extra care may not be a suitable alternative for those currently in residential care, however for people on the cusp of residential care, this is an additional choice. The extra care housing services will provide 24 hour care for tenants/residents in their own apartments when they need it and have additional facilities such as a gym and a shop. The care currently provided at Cornfields is of a good standard, although it is increasingly difficult to carry out in an ageing residential care home. The remaining residents and their relatives are being given choices about alternative local care home places of equal standard or higher ('good' or 'excellent' rated homes).

(2) **Cornfields provides a vital and valuable service to vulnerable people and their carers by way of respite and day care. Friendships have been made through day care.** Respite services will be commissioned, initially as block contracts to make sure this important service is retained. There will be respite services for those who currently access Cornfields. Longer term, there is a wider strategic review of respite beds being carried out by KASS to make sure of value for money and increased occupancy of the commissioned beds.

All individuals accessing day care have had the opportunity to talk with a project officer to confirm their needs and wants from a day care service. The places people travel from have been taken into account, along with any identified friendship or interest groups. Patterns of needs have been incorporated into the plans for providing services to those individuals.

It is recognised that day care and respite are crucial services for people to maintain their independence and relationships with carers or relatives at home. Both will be essential parts of the services commissioned in future.

(3) **Cornfields provides intermediate care services that are considered integral by the PCT to commissioning for the Dover district.** Under the proposal, a proportion of the revenue for these beds will be made available for re-provision either in the independent sector or as part of an Intermediate Care Strategy with the Dover GPs' Practice Based Commissioning Group. In the Whitfield/Buckland area, there are currently development plans for two additional care homes, one with 80 beds and one with 60 beds. Commissioners are meeting with the developers to influence the provision for longer term

commissioning. In terms of immediate replacement services for Cornfields, there is interest from the independent sector in re-providing this.

(4) **People cannot afford services from the independent sector.** Throughout the consultation, KASS has consistently said that no one currently using the services would be put at a financial disadvantage if there are moves to alternative services. The only exceptions to this would be if needs have changed. This would also be the case if Cornfields remained operational. For those individuals who are not full cost, their charge will remain the same as they are means tested and their contribution is assessed against their income. Cornfields is not registered with CQC for nursing care so, if an individual was assessed as having nursing needs, they would be supported to move on. This is a change of assessed need. Project officers will be working with the individuals and their families to secure alternative permanent accommodation that meets their needs. If there is a difference in the cost (if they are full cost), KASS will pay the reasonable difference. In an extra care housing setting, people would have their own tenancy so would be required to pay rent and service charges (for the vast majority of the tenants, Housing Benefit would be accessed). In addition, each person's care package would be individually assessed and a charge would be made if appropriate after means testing. This is done in the same way that KASS carries out a financial assessment for domiciliary care.

(5) **The closure will provide increased pressure, distress and worry on the residents, carers and relatives.** It is acknowledged that the change proposal has inevitably worried residents, carers and relatives. KASS has allocated a dedicated project officer to work with those individuals currently supported by services at Cornfields to make sure that a consistent approach is taken. The officer will work with the individuals and report to case managers to provide an update on each individual's circumstances. The project officer has worked previously as a care manager assistant for a number of years and has experience of working closely and sensitively with people in times of uncertainty. Some relatives of service users have expressed a concern that there could be a devastating affect on individuals who move from being settled and happy. Members of KASS staff would work at the pace of the individual and their family, providing help and support to find and secure alternative accommodation that meets the individual's assessed needs. KASS has to routinely move individuals all of the time because of changes in levels of need. This could be from one home that no longer meets the needs of the individual to another (for instance if they develop dementia or have nursing needs that the first home is not registered to respond to). KASS has many years of experience in carefully and successfully helping older people to move. Each case will be managed and supported on an individual basis to ensure personal needs are met at an appropriate pace for the individual.

(6) **Why is Cornfields not being refurbished with the money secured for its proposed replacement?** The money that has been secured for extra care housing is PFI funding from central government. Bids were made to provide services that were known to be needed and housing is one of these, especially adapted housing. We know that people want to remain at home for as long as possible and extra care housing allows this. Independent sector providers are able to access money that local governments cannot and they are responding to the growing needs of residential, specialist residential and nursing provision for older people. KCC does not have access to the significant capital funding that would be needed to refurbish these services to the level that would be required by the CQC. The PFI money can only be used for extra care housing.

(7) **Cornfields offers a quality service which is not matched by the independent sector.** The independent sector is regulated by the Care Quality Commission in the same way that Cornfields is regulated and to the same standards. Cornfields received a 'good' rating when it was last inspected in 2009. There are other 'good' and 'excellent' homes in the Dover district. Homes in the independent sector are monitored by KASS through individual reviews of service users, contract reviews through contract and performance monitoring, Safeguarding monitoring and investigation of complaints.

On 2 October, a separate consultation event was undertaken by MORI attended by 75 people who were looking at the county council's priorities. A case study was used for the future of older person's services. Feedback from the individuals was that older people's accommodation should be a priority and it was less important who provided the services as long as KCC retained a role in making sure of quality.

b) Questionnaire:

(8) A questionnaire was developed in August and distributed in September. It was designed as an additional method to generate feedback not only from key stakeholders but also members of the general public. The Questionnaire asked questions both about the proposal and what was important to people in the future should they need to access support services. There were a number of opportunities for people to enter free text in addition to answering the questions. Key areas of feedback from the Questionnaires received on the Future of Older Person's Provision were:

(9) **The proposals:**

42% of people, when asked what they thought of the proposals, answered they had mixed views with 24% responding they thought it was a bad idea and 15% that it was a good idea. In the free text field the greatest number of comments (31) acknowledged that planning for the future was a good idea with 27 people saying they were against the proposal because of the disruption to the clients. Other common comments included support for extra care housing, emphasising the importance of day care and concerns about the quality of care in the independent sector.

(10) **Should KCC run its own homes?**

59% of respondents stated that the council should continue to run its own homes with 20% disagreeing. The largest number of comments wanted to know why KCC homes cost double the price KCC can buy it in the independent sector. 22 recommended that KCC should review staff contracts and KCC processes to reduce the cost. Other comments included concerns about the quality of care in the independent sector. 8 people criticised the question as leading.

(11) **On what basis should KCC make the decision about the proposals?**

80% thought quality of care as an essential factor, 75% continuity of care for the residents, and 47% felt keeping some homes in the management of KCC was essential. Fewer people thought value for money (175) and freeing up resources to care for more people (132) were essential although these issues were considered very important by 41.5% of respondents.

(12) **Thinking about the future**

When asked about their preferred choice of how they would like to receive care most people wanted to be able to live at home for as long as possible followed by a situation similar to extra care housing.

The most important issues to people considering moving into a care home were trained and friendly staff, home cooked nutritious food and being with ones partner. Other factors that were important to people were to remain a respected member of their local community treated with respect and able to exercise choice and control and the ability to have pets.

The top five things that people rated as essential or very important to them when they were older were:

1. help and support available when needed
2. a safe and secure environment
3. being able to maintain links with family, friends and local community
4. ability to remain as independent as possible with own routine and choices
5. accessibility (no steps etc)

## 6. Personnel implications

(1) Issues raised by members of staff related to redeployment opportunities, redundancies and support for staff through the consultation process. From 14 June 2010 all staff vacancies in the Registered Care Centres, learning disability provision and the Enablement service were only being offered on a temporary basis to maximise any opportunities for the redeployment of existing staff. Staff will be offered one-to-one meetings with a personnel officer and their union representative and the opportunity to receive skills training to enable them to continue their employment within Kent County Council, where possible. Redundancies, where possible, will be kept to a minimum.

(2) Special arrangements will be put in place to give members of staff an opportunity to apply for posts while continuing to support service users until the service has closed. Those who are not successfully redeployed into these posts will be offered support to help them to secure alternative employment. The Redundancy & Redeployment procedure would be followed and people will be offered Priority Consideration status once they are at risk of redundancy in order to help them find work in KCC.

(3) The staffing information for Cornfields as at 23 November 2010 is as follows:

Head count	No. of contracts	No. of Permanent Contracts	No. of Temporary Contracts	No. of Fixed Term Contracts	No. of Full Time Contracts	No. of Part Time Contracts	No. of Relief Contracts	FTE
56	62	61	1	0	2	47	13	29.95

## 7. Summary

(1) The proposal for Cornfields to be closed, demolished and be replaced by extra care housing is recommended. The individuals accessing the services will all receive a reassessment and be offered an alternative service at no financial disadvantage.

(2) The need for extra care housing in the Dover district and the ability to access PFI funding to secure modernised services for older people in Whitfield remains a priority for commissioners and partners.

(3) If Cornfields were to remain open, it would require significant investment and any major refurbishment would probably need residents to move out while works took place.

(4) There is an active and thriving social care market in Dover at a cost and quality appropriate for the county council. The market is also responding and there is growth in terms of new provision planned for the district. The market is responding to the greater needs of people with dementia.

(5) If the decision is taken for Cornfields to close, the land value of the site will be part of the PFI contract and the site will be leased to the successful contractor. In April 2011 full planning applications for the extra care housing will be submitted.

(6) A proportion of the revenue previously used for the operation of Cornfields will be used for the Dover locality to offer services to more older people.

(7) An initial screening as part of the Equality Impact Assessment was undertaken prior to the consultation on the modernisation proposals. This identified the need for a full Equality Impact Assessment to be undertaken on each proposal, which has now been done. The assessment confirms that the proposals can be delivered in a way that adequately takes account of the individual needs of existing residents and of other service users.

## **8. Recommendations**

(1) The Cabinet Member is asked to **consider** the contents of this report and **agree** that Cornfields should close in September 2011 and for the site to be used for extra care housing. Should the recommendation not be agreed, the future of Cornfields will need to be revisited and further consultation undertaken on any revised proposal.

**Margaret Howard**  
**Director of Operations**  
**01622 696763 (7000 6763)**  
[margaret.howard@kent.gov.uk](mailto:margaret.howard@kent.gov.uk)

### *Background Documents*

- Government White Paper 'Our Health, Our Care, Our Say' – January 2006
- National Dementia Strategy – February 2009
- Active Lives for Adults 2006-2016
- Closure/Variation Policy for the closure/variation in the service use of a Social Services Establishment
- A Vision for Adult Social Care: Capable Communities and Active Citizens
- Think Local, Act Personal: Next Steps for Transforming Adult Social Care
- Locality Commissioning Strategy

## CORNFIELDS – PETITION NOTES FROM PETITIONERS

The Carers at Cornfields, the residents, families, friends, Whitfield residents and general public submit this letter in support of our petition.

The reasons given for the demolishing and rebuilding of Cornfields is that it is an old building that has out lived its purpose and Kent County Council can no longer guarantee a top quality service to the clients. We strongly disagree with this.

The proposal to replace Cornfields with Extra Care Housing will leave a large gap in the services currently provided. Clients may have a nice new apartment with en-suite facilities, but unfortunately to a majority of the residents and many future clients this will be of no use. They require assistance readily available to enable them to use such facilities. These new establishments will no longer provide this unless residents are willing to pay extra. Residents of Cornfields have this care on hand 24 hours every day.

Also these new extra care facilities will not provide Day Care a lifeline too many that are housebound, or Respite Care a vital service which gives home carers and relatives a much needed break.

Has additional costs to the clients been taken into account? Evidence shows many older persons will not be able to afford to live in these new homes. Nor will they be able to afford private day care or respite care. Care Homes in the area providing the same facilities as Cornfields are very few and have limited spaces available and their costs are much higher. Clients would have to apply for benefits putting a further burden on the taxpayer.

Kent County Council says any additional costs will be met but in the current economic climate this cannot be guaranteed. We are told funding has been secured for these projects and cannot be used for any other purpose.

The regulations concerning facilities such as en-suite apply to new build only. Why does the funding have to be used for a new build? Why can it not be used to refurbish existing facilities enabling Cornfield to continue to function as it does now providing the excellent care and service that the clients expect and receive?

Has a survey been undertaken on the cost of replacement against refurbishment using the secured funding?

The current situation has already caused much distress.

The needs of the residents must come first.

So why are these needs and views of the residents, carers, families, and public being ignored? It is stated that these changes have be bought about because older people have spoken of their wishes for the future.

None of those who signed out petitions and letters has been asked questions on the subject of the Future Care of the Older Person.

So how was this information obtained? Was a survey undertaken? If so where are the documented results?

Sadly we have found that older people perceive that these new Extra Care

**Facilities will only provide them with their greatest fears Isolation and Loneliness.**