



DERBY CITY COUNCIL

COUNCIL CABINET
15 JANUARY 2008

ITEM 6

Cabinet Member for Adult Services

Consultation on the closure of Bramblebrook House Residential Home for Older People

SUMMARY

1.1 On 31 July 2007, Council Cabinet agreed to:

- Begin consultation on the closure of Bramblebrook House residential home for older people
- Undertake further work in 2007 / 8 to clarify future options for the remaining seven homes, including the possibilities of mental health resource centres and extra care housing options
- Explore Extra Care Housing for older people as an option for effective use of the adjoining Arthur Neal House and Lois Ellis sites and as part of the expansion of Extra Care in Derby and to agree in principle to use any capital receipt realised for this purpose

1.2 Council Cabinet, at its meeting on 27 November, received feedback on the consultation on the closure of Bramblebrook House Residential Home and agreed that the closure proceed.

1.3 That decision was then called in under the Council's procedures. The Adult Services and Health Commission resolved on 6 December 2007 to ask the Council Cabinet to reconsider its decision on the grounds that the following decision making principles had been broken:

- a proportionality
- b due consultation and advice from officers
- c respect for human rights
- d presumption in favour of openness
- e clarity of aims and desired outcomes
- f a record of what options were considered and giving reasons for the decision or where relevant issues do not appear to have been taken into consideration.

The full minute was reported to Council Cabinet at its 18 December meeting.

1.4 Subject to any issues raised at the meeting I support the following recommendations.

RECOMMENDATIONS

- 2.1 To approve closure of Bramblebrook residential home for older people at the end of May 2008 but to delegate to the Cabinet Member for Adult Services the power to extend this timescale by no more than three months if necessary.
- 2.2 To work closely with individual residents of Bramblebrook House to identify alternative placements that are suitable for them, bearing in mind their neighbourhood links, their friendship groups and their preferences about where services are delivered.
- 2.3 To ensure each affected resident has a key worker based at Bramblebrook to liaise with them, their relatives or carers and the staff at the place the resident transfers to.
- 2.4 To ensure that staff at Bramblebrook House are appropriately supported to transfer to alternative places of work

REASON FOR RECOMMENDATIONS

- 3.1 The decline in demand for residential care for older people, combined with the increase in demand for alternatives like Extra Care Housing, means action is necessary to divert resources to where they will have most long-term impact.
- 3.2 There is enough remaining care home resource in Derby, between the independent sector and the Council's own provision, to cover needs in the long and short term.
- 3.3 The closure of a residential home for older people is very difficult for residents and their families. Care must be taken that further trauma is minimised at this sensitive time, through working closely with them and ensuring their preferences are met wherever possible. If continuity through local links or friendship groups can be maintained this should be a high priority.
- 3.4 Bramblebrook staff have provided an excellent service and engaged extremely professionally in the consultation process. The decision to close Bramblebrook House is by no means a reflection on them, and they must be supported to find alternative opportunities in the Council.



DERBY CITY COUNCIL

COUNCIL CABINET 15 JANUARY 2008

Report of the Director of Corporate and
Adult Services

Consultation on the closure of Bramblebrook House Residential Home for Older People

HISTORY OF THE PROCESS TO DATE

1.1 Cabinet agreed to commence consultation on the possible closure of Bramblebrook Care Home on 31 July 2007. The July 2007 Cabinet report referred specifically to:

- the decrease in the number of residential care placements supported by the council in each of the last 5 years
- the level of vacancies in care homes across Derby, (both Council run and independent sector)
- the need to develop new alternative services to meet older people's needs for the future, specifically Extra Care and Dementia Services
- the factors taken into account in reaching the recommendation about which home to close. These were listed as:
 - a) the locality and community served
 - b) local connections with community services
 - c) alternative residential provision available in the locality
 - d) specialist service focus in the homes
 - e) fabric of the building
 - f) size and value of the land which would be released
 - g) standard of care provided
 - h) range of services provided
 - i) number of service users affected

1.2 The Cabinet report recommended consultation on the possible closure of Bramblebrook House on the basis of consideration of all of our homes against the above factors.

The key determining factors which influenced the recommendation to consult on the possible closure of Bramblebrook were

- Bramblebrook does not provide any specialist services
- There are other care homes in the locality
- Bramblebrook does not have strong community ties or provide community based services

- The potential capital which could be released is the highest of all the homes, with additional value being created by selling the Bramblebrook site at the same time as the Humbleton View site. This would release greater resources for use for older persons' services.

See generally on these factors section 2 below.

- 1.3 Cabinet also agreed to investigate the possibility of developing the current Arthur Neal Care Home into an Extra Care facility and during 2007/08 to develop future proposed directions for the remaining care homes.
- 1.4 The economic background for Adult Social Services (ASS) has been an important issue throughout the process. The ASS budget for 2006/7 was overspent by £1.7m. The 2007/8 budget included 3.5% efficiency savings across all Council services. This amounted to £1.5m for ASS on top of an already overspending budget. The 2007/8 ASS budget included a proposal to reduce residential capacity as one of the savings to achieve the 3.5% savings and balance the budget. In July 2007 when the initial report was considered by Cabinet the ASS budget was projecting an overspend of £3.2m for 2007/8. The Adult Services and Health Commission considered a special Adult Social Services budget report on 29 October 2007.
- 1.5 The consultation process commenced on 1 August 2007 and ended on 29 October 2007. A summary of the consultation process and the views from the same is attached at Appendix 1.
- 1.6 The consultation process included a review of the proposed closure of Bramblebrook by the Adult Services and Health Commission. This review took place on 24 September 2007. The review accepted the case for the proposed closure of one care home, but did not agree that it should be Bramblebrook. The Commission did not identify an alternative home to close in support of their findings.
- 1.7 The outcome of the consultation process was reported to Cabinet on 27 November 2007, with a recommendation that Bramblebrook should close. Cabinet decided to close Bramblebrook but the decision was called in to allow further consideration by the Adult Services & Health Scrutiny Commission.

2 PURPOSE OF THE REPORT

- 2.1 This report provides Cabinet with an update following the November cabinet meeting and in particular provides more information in relation to:
 - the issues raised as part of the call in process;
 - the issues raised by Mr Taylor as part of the consultation process;
 - the issue of whether closure of Bramblebrook would breach any of the residents' rights under the Human Rights Act 1998 or any legitimate expectation that they have that Bramblebrook would be a 'Home For Life';

- 2.2 The proposal to close Bramblebrook was considered at a special Adult Services and Health Commission meeting on 6 December 2007. During this consideration there were a number of points raised concerning the process, which are addressed in this report.

The feedback from the consultation process was reported to Cabinet in November 2007. In addition, this report provides further comments in relation to Mr Taylor's feedback.

If the decision is made to close Bramblebrook it may be legally challenged through Judicial Review. In particular the question of whether residents have a legitimate expectation of a home for life or their rights under the Human Rights Act 1998 are not being respected, has been raised. This report provides information on that question.

It should be noted by Cabinet that many people move out of Council residential care homes on a regular basis when their need levels change, for example into hospital or nursing care homes. In these circumstances individuals do not have the choice of moving with friends or to other Council run homes. The average length of stay for individuals who have moved to nursing care or died over the past 3 years is 2 years and 3 months, in Council run care homes. The average for Bramblebrook is not significantly different at 2 years and 6 months.

2.3 Issues raised through the Call in process:

- 1) That the consultation process itself commenced at too late a stage, beyond the point of proposals being at a formative stage.
- 2) That all relevant information was not made available to interested parties, and that the reasons for the recommendation to close Bramblebrook (as opposed to another home) were not transparent.
- 3) That the consultation process was not wide enough and that residents of other care homes should have been included.
- 4) That the information regarding the Council's need for residential care had been under-estimated or under-reported, and that the increased number of older people in the population indicated that residential care home places should be maintained.
- 5) That the proposals for investment in alternatives were not clearly explained.
- 6) That Bramblebrook is the most efficient care home and hence should not be recommended for closure.
- 7) That no consideration had been given to the alternatives for Bramblebrook, particularly the possibility of developing an Extra Care facility on the site.
- 8) That residents would be seriously adversely affected and that this had not been taken into account.

- 9) That the consultation process had not been meaningful and the decision had been made in advance to close Bramblebrook due to the financial pressures in adult social care.
- 10) The alternatives to the closure of Bramblebrook were not fully explored and reported on.

Each of the above issues are addressed sequentially below.

1. That the consultation process itself commenced at too late a stage, beyond the point of proposals being at a formative stage.

The proposal to close a care home was first developed as part of the budget planning process for 2007/08 in response to the requirement to balance the Adult Social Services budget and make 3.5% additional savings in adult social services. Council agreed a budget for 2007 / 8 on 1 March 2007. This included a reduction in long term care budgets for elderly people of £581k in 07 / 08 and a further £81k in 08 / 09. This achievement of this budget necessitates the closure of a residential home. Following approval of the budget, consideration was then given to which of our eight homes should be recommended for possible closure. Bramblebrook was identified as the most appropriate option and recommended to Cabinet in July 2007. Consultation on the proposal then commenced. The decision was not made and was open to challenge and influence as evidenced by the process which has actually taken place.

2. That all relevant information was not made available to interested parties, that the reasons for the recommendation to close Bramblebrook (as opposed to another home) were not transparent.

The factors which were taken into account in the recommendation to close Bramblebrook are outlined in the July 2007 report to Cabinet and noted in Para 1.1 of this report. The particular factors affecting the choice of Bramblebrook are as follows

- a) Bramblebrook does not have a specialist function. This is relevant for the following reasons:
 - i) In the case of Warwick House and Coleridge House, significant capital investment has been made to facilitate the respective specialisms of Intermediate Care and Dementia Care.
 - ii) In the case of Warwick House and Coleridge House, staff have received particular training and obtained experience to deliver the specialist services. In the case of Warwick House services are delivered jointly with Derby City PCT.
 - iii) In the case of Arthur Neal Home the provision of day services provides a significant community resource. If this home was to close not only residential but also day services would have to be re-provided.
- b) There are other care homes in the locality of Bramblebrook. This was considered relevant because of the desirability of ensuring that there is a reasonable coverage of care homes in a locality. A map of the locality detailing the alternative residential provision within a 2 mile radius of Bramblebrook is attached at Appendix 2. This shows 87 local authority places and 353 Independent sector places.

- c) Bramblebrook does not have a strong community connection. This is relevant in considering the impact of closure on local services and the need to provide services in a specific locality.
- d) The capital savings which could potentially be released by a sale. This was considered relevant because the Council has committed to using the capital released to benefit older people's services for the future, and in particular to invest in extra care and dementia specialist services. If more capital can be released then the opportunities are increased.

The report refers to the question of quality and the standard of care provided. All of our Council run care homes are judged as being of a good standard by Commission for Social Care Inspection (CSCI). There is no reason to believe that any one home provides a significantly different standard of care than another. Comparisons of quality would have been considered relevant if there were differences. However, the view of managers and of CSCI is that they are all comparable; hence quality was ruled out as a way of differentiating one home from another.

The question of efficiency has been raised by the 'call in' process as it is argued that Bramblebrook is our most cost efficient home and efficiency should have been a key factor in determining which home should be recommended for closure.

Efficiency is influenced primarily by the following factors:

- a) Staffing ratios and levels.
- b) Staffing efficiency (economies of scale, sickness absence).
- c) Occupancy levels. (which primarily affect income and unit cost).
- d) Other running costs associated with the home.

Efficiency was not included as a relevant factor in the initial recommendation for the closure of Bramblebrook for the following reasons:

- a) Staffing ratios and levels are the same across all of our homes (except where there are specialist services for example Coleridge Dementia Unit has a staffing ratio of 1: 3/4, instead of the usual 1: 10).
- b) The larger capacity homes do achieve some economies of scale in some of the running costs (for example management costs) but this is marginal. Sickness absence changes year by year. One home can have a particularly high sickness absence due to long term sick leave of a small number of staff, which can then change significantly the following year. We expect all of our homes to work to the same sickness absence management targets.
- c) Occupancy levels – whilst occupancy can indicate popularity it also changes year on year. It is often a case of which vacancies are available at a specific time when an older person needs the placement; it can also be affected by how many vacancies a home has within a short space of time. It is further influenced by how many short stay beds a home has, which will tend to reduce occupancy levels. All these factors make occupancy changeable year on year and between homes. The variability in occupancy year on year is illustrated for each home in the table below.

- d) Supplies / services / maintenance / depreciation / overhead costs – these costs are based on the size of the building, the number of residents and the state of the building. Maintenance can vary from one year to another depending on the timetable of works. The only home in a significantly inferior physical condition to the others is Arthur Neal House, we would expect maintenance costs for the other homes to be broadly comparable over a time period.

The factors which affect efficiency, with the exception of the poor state of repair of Arthur Neal, are comparable across our homes and are changeable year on year.

The overall cost of providing residential care services in 06/07 is indicated in the table below. Warwick House, Coleridge House and Arthur Neal Home are not comparable with the others due to their specialist nature, it would not be comparing like with like. The table below does show that Bramblebrook, in 06/ 07 was the most cost efficient of the five homes that are comparable. This was not considered to be a significant factor in terms of the decision making process on the basis that, as outlined above, this could change year on year. However, in the light of the challenge that efficiency has not been properly considered it is included here for information.

Residential Homes Unit Cost 2006/7

	Brambleb.	Merrill	Arboretum	Perth	Raynesway
Controllable	Spend	Spend	Spend	Spend	Spend
Employees	472261	485619	485588	511086	453511
Premises	21728	42294	29709	27799	22422
Transport Costs	61	54	474	892	134
Supplies & Services	80348	73658	69439	80005	67340
Sub-total	574398	601625	585210	619782	543407
Non controllable					
Maintenance Recharge	37016	48730	44722	28574	36657
Building Dev Environmental Recharge	15214	20029	18382	11745	15067
Service Mgr + Central Budget Recharge	45927	45927	43630	44778	40186
Social Care Support Services Recharge	49757	49125	46409	48036	43215
Sub-total	147914	163811	153143	133133	135125
Total	722312	765436	738353	752915	678532
Depreciation	10155	8388	12380	2541	10760
Notional Interest 3.5%	26079	22260	21665	18008	18830
Total Asset Rental	36234	30648	34045	20549	29590
Beds	40	40	38	39	35
Occupancy	97.4	88.4	92.2	94.5	95.5
Gross Weekly Unit cost £'s	373	432	423	403	406
Occupancy 2005/6	94.3	93.5	96.2	99.3	94.8
Occupancy 2004/5	96.7	93.2	98.3	98.1	93.2

It has been suggested that information has been withheld and the process deliberately obscured. The only information which has been withheld is market sensitive where it is not considered to be in the Council's interests for this to be public, in particular the expected sale price of the land on which each home sits. This information was, however, included in the confidential Cabinet report which is sent to all members of Council.

3. That the consultation process was not wide enough and that residents of other care homes should have been included.

Since the Cabinet proposal was to close Bramblebrook it was decided that the consultation process should focus on Bramblebrook residents, their relatives and staff. Consultation about a possible closure is stressful in itself and we would not wish to place this stress on any individual in the absence of a clear proposal which would directly affect them. The consultation process included individual interviews with all residents, with their relatives as requested.

4. That the information regarding the Council's need for residential care had been under-estimated or under-reported.

The information that the need for residential care is reducing and the judgement that it will continue to reduce has been challenged. The number of residential placements supported by the Council has reduced every year over the past five years. Placement information to date indicates that this reduction is continuing this year. The reduction is shown in the table below.

	2002-3	2003-4	2004-5	2005-6	2006-7	% decrease
Without nursing	725	699	640	545	531	26.8
With nursing	474	495	515	535	457	3.6
Total	1199	1194	1155	1080	988	17.6

Additionally, it is important to note that the Commission for Social Care Inspection has highlighted the need to continue to reduce the use of residential care as a performance improvement objective for the Council. Derby still supports significantly more people in care homes than the best performing Councils. The difference between them and us is the level of intensive home based support services provided, and the availability of alternative housing options for older people, such as extra care.

5. That the proposals for investment in alternatives were not clearly explained.

In the original Cabinet report it was stated that savings would be used to develop alternative services for older people, including

- Dementia care services
- Extra Care housing
- More intensive support at home.

It has been suggested that additional capital is not required to achieve this, and that the donation of land alone would constitute the Council's contribution to an Extra Care development.

Advice from my Housing Division, based on information from the Housing Corporation, is that this is not the case. In order to develop an Extra Care facility the Council requires a registered housing partner (most likely Derby Homes or a Housing Association). The partners will then have to submit an application to the Housing Corporation for “in year funding”. In year funding applications are only likely to be successful if both land and additional capital contribution from the local authority are included.

The development of one or more of our existing residential homes as Dementia Care Specialist Resource Centres will have both capital and revenue implications. The models for such services emphasise the importance of a suitable physical environment for the range of services likely to be provided, including significantly increased day and respite care services. There will undoubtedly be capital requirements, the detail of which is currently being developed. To some extent the design will need to be influenced by the resource availability, however the current buildings will certainly require some capital investment if services are to be re-designed in this way.

Until the completion of further work on the future direction of the remaining Council homes we are unable to be more specific about exactly what will be invested where. However, we are clear that without capital availability the proposal to develop Arthur Neal / Lois Ellis as an Extra Care site is not viable, nor is the potential to re-develop one or more other care homes as Dementia Resource Centres.

It is important to appreciate that Derby is significantly under-provided in both extra care and dementia care facilities. The Council has not been able to provide corporate capital resources to support new developments in these areas.

The revenue savings from a home closure are also relevant. The 07/08 budget requires these savings to be made. The closure of Bramblebrook would generate between £80,067 and £157,259 of revenue savings pa, based on the difference between the cost of providing residential care at Bramblebrook and the cost of purchasing residential level care in the independent sector. This revenue saving will be invested in supporting more older people with intensive support to enable them to continue living at home, and in particular to extend dementia based services including day and respite care

6. That Bramblebrook is the most efficient care home and hence should not be recommended for closure.

This issue is covered in the point above. Based on the 2006/07 information, and comparing Bramblebrook with the 4 other comparable homes the revenue savings per home would be:

Home	Minimum revenue saving £'s pa	Maximum revenue saving £'s pa
Bramblebrook	80,067	157,259
Merrill	180,298	250,357
Perth	131,643	204,665
Raynesway	126,033	192,259
Arboretum	162,255	231,672

The above reflects the difference between the cost to the Council of providing a place in each care home in 2006/7; and what the cost would have been if the care home place had been provided in the independent sector. The minimum saving would be realised if all residents had high dependency needs, the maximum if all residents had standard dependency needs. As referred to earlier, this reflects a snapshot based on 2006/7 only and the detail for each care home will change, depending on particular occupancy and expenditure in that year.

Coleridge provides care over the level we would normally expect to purchase within our higher level independent sector rate.

Warwick provides services which are not currently available in the independent sector, and we would choose to provide intermediate care as an in-house service because of our partnership with the PCT, and the particular importance of this service.

Arthur Neal provides a significant level of day service which we would have to re-provide, ideally in the locality. There would be a significant cost to this.

7. That no consideration had been given to the alternatives for Bramblebrook, particularly the possibility of developing an Extra Care facility on the site.

The following options have been considered as an alternative for Bramblebrook.

a) Sale of the home as a going concern.

Estimates of the likely sale price of Bramblebrook as a going concern have been acquired, and compared to the sale price of the land only (including Humbleton View site). If Bramblebrook was sold to an independent care home provider the advice received is that the Council would realise significantly less in capital receipts that could be achieved by selling Bramblebrook and Humbleton View sites together. In addition, feedback from the vast majority of residents is that they wish to remain in a Council run care home and this would not meet their wishes. Also, this would be likely to be very unpopular with staff, as staff would be transferred to the independent provider via a TUPE transfer. There could be significant implications for them in doing so. This option has been ruled out on the basis that it would have a negative financial impact, a negative impact on staff, the capacity is not needed and it would not meet resident's wishes.

b) Develop Bramblebrook as a site for Extra Care Housing

It has been suggested that the Council could develop Bramblebrook as an Extra Care site by giving the land to the housing partner without contributing any additional capital. Our advice is, despite the potential value of the land, this is unlikely to be achievable. If it was, the provider would seek to make up any shortfall in an increased number of flats for sale at higher prices; hence limiting access for the wider population. There would be no capital receipt with which to develop dementia care resource centres and, additionally, the receipt from the sale of the Humbleton View part of the site is required for investment in modernised learning disability services which would then not be possible.

8. The residents in Bramblebrook would be seriously adversely affected and that this had not been taken into account.

We have been very aware from the outset of the likely impact on residents. Many local authorities, including Derby, and other providers have closed care homes over the years and there is research in this area. The consultation process itself is a stressful time for older people, when the future becomes less certain. If a decision is made to close a home the key priorities in terms of protecting the older person's well-being in this are:

- a) Individual planning, working closely with the older person and their family to identify the right option for them.
- b) Good preparation including visits to the alternative home, meeting staff and having choice over when the move takes place.
- c) Careful, personalised support once the move has taken place, especially in the first few months whilst the older person is growing accustomed to new surroundings.
- d) Moving with friendship groups.
- e) Moving with at least some familiar staff wherever possible.

We have been criticised for not undertaking a formal risk assessment prior to consultation, but this does not mean that we are unaware of the risks, nor that residents needs have been neglected. At this consultation stage it is important that residents are able to voice their opinions and concerns, and that staff are able to support them. This has been the case, and staff at Bramblebrook have been excellent in their support of residents. If the decision is to close Bramblebrook, then a key worker will be allocated to each resident and a risk assessment and care management plan put in place for each resident.

The impact on residents of the proposed closure of any of our homes would be the same. It is impossible to close a home with permanent residents without causing anxiety and distress to those residents. If we had elected to close Coleridge House it would have been potentially more harmful for residents given the particular high level of dementia needs of a group of residents.

The only home which could have been closed with less damaging effect on individuals is Warwick House, which has four permanent residents. The closure of Warwick House would necessitate re-provision and re-investment in intermediate care (£130k investment in 2003/04). The capital receipt would be significantly less, hence offering fewer opportunities for developing new services, and the receipt for the Humbleton View site would also be significantly less as it could not then be sold with Bramblebrook. Altogether, if the Council pursued this option it would be likely to receive significantly less in capital receipts. The capital receipt would be further eroded by the requirement to reinvest in intermediate care elsewhere. The low existing provision of residential intermediate care beds in the city is a major issue. Any action to destabilise this scarce resource in the city is untenable and would interrupt our joint working relationship with the PCT on intermediate care.

9. That the consultation process had not been meaningful and the decision made in advance to close Bramblebrook due to the financial pressures in adult social care.

The process itself demonstrates that the consultation process has been meaningful. Challenges have been received and the proposal referred to the Adult Social Care and Health Commission on two separate occasions.

The proposal to ensure that Bramblebrook residents are able to continue to live in a Council run care home has been agreed as a direct result of the consultation process, as has the agreement to extend the timetable for closure and the commitment to supporting friendship groups to move together.

Financial pressures are a reality and we have been clear from the outset that the financial benefits, both capital and revenue, form the underlying reason for the proposed closure. The decision about which home is not solely based on financial reasons however, it has been stated as a relevant factor in the July Cabinet report and on all occasions subsequently.

10. The alternatives to the closure of Bramblebrook were not fully explored and reported on.

The initial cabinet report does list each of the homes and the factors which are relevant to each.

All of the information which is now available is summarised in Appendix 5 for completeness.

2.4 Issues raised by Mr Taylor – Contribution to the consultation process

Mr Taylor is a relative of a resident at Bramblebrook. He has been highly critical of the proposal to close Bramblebrook and of the consultation process itself. He has prepared a report which is provided as Appendix 4. The following sets out what appears to officers to be the principal points made by Mr Taylor (but councillors will wish to read his report and his letter of 29 December 2007, also at Appendix 4, in full). In the executive summary of his contribution to the consultation process Mr Taylor suggests that Bramblebrook should not be closed because

1. It is the most financially efficient council home with significantly better performance than the others in relation to
 - Length of service of staff
 - Occupancy
 - Overall financial efficiency

Mr Taylor maintains there is no business case for the closure.

2. It is the best in the city, rarely having a vacancy and usually having a waiting list.
3. The number of older people over the age of 85 in the area is going to rise steeply, with a 60% increase in the number within 20 years.
4. There will be growing demand for such facilities as life expectancy increases along with the number of people aged over 85 years; this bald fact cannot be disguised by a policy of avoiding making placements to homes such as Bramblebrook house.
5. The closure of a care home is known to damage the health of residents. A decision to close the home and the consequential enforced removal of residents would put the residents at risk.
6. It is the home of choice for current residents, closure would be contrary to the councils obligation to work with older people around their home of choice.

7. It has a family like community comprising of residents and staff. It is an example of how a healthy, safe and independent community can be achieved through commitment to caring for people.
8. To close it risks serious breach under the Human Rights Act.
9. Closure of the home and sale of the land would be asset stripping of the most callous kind. The council would get the money the vulnerable elderly would pay the price.
10. Closure of a council run care home would create greater demand in the private sector and serve to protect profits made by such homes in the future.

In addition, Mr Taylor makes the following formal objections in his executive summary to the way the process has been handled

- The failure to provide full disclosure of relevant information, despite repeated requests for it ever since the possible closure was announced
- The fallacy of using falling demand as a reason for closing the home. Mr Taylor asserts that the truth is that the council set performance targets to place fewer people in residential care, not that there is any less demand
- The serious inadequacies of the imposed consultation process
- The rejection of a proactive suggestion to form a focus group to enable the consultation process to progress
- The many deficiencies of the options appraisal paper which formed the basis for the cabinet decision to consult on the possible closure
- The unbalanced presentation of information and demonstration of muddled thinking. Any crumb of evidence to support closure is emphasised, and information that may point to the contrary is qualified to nullify its effect
- The insensitivity shown when communicating with residents
- The failure to exhibit behaviour in line with the espoused values

This report addresses other points that Mr Taylor develops in his full report.

1. Bramblebrook is the most financially efficient council home with significantly better performance than the others in relation to

- Length of service of staff
- Occupancy
- Overall financial efficiency /cost per bed

Mr Taylor maintains there is no business case for the closure.

Mr Taylor makes the case for Bramblebrook House as offering continuity for residents as staff at Bramblebrook have the highest average length of service of all our care homes. However, the lowest average length of service in any of our care homes is over 5 years, well in excess of the average length of residence of a resident. This is not therefore a reason to differentiate Bramblebrook from any of the other homes.

Occupancy was high at Bramblebrook in 06/07 It was explained to Mr Taylor that this changes from year to year and therefore has to be considered in this light. The occupancy levels for previous years as referred to earlier illustrate this fact.

Overall efficiency – please see earlier comments.

2. It is the best in the city, rarely having a vacancy and usually having a waiting list

Bramblebrook is a good quality care home, as are our other care homes. The inspection reports from CSCI demonstrate the comparability between homes. Please see a summary of standards met in all our care homes at Appendix 4

3. The number of older people over the age of 85 in the area is going to rise steeply, with a 60% increase in the number within 20 years

The population data is fact. The interpretation about what it means is not. The population has been rising in recent years and the number of people supported by the Council to enter residential care is falling. The majority of people do not consider entering a residential care home as their first choice, more and more people want to stay in their own homes or live in an environment that offers maximum independence. CSCI demand we reduce the number of people we place in the residential sector. This is the challenge in relation to the growing population.

4. There will be growing demand for such facilities as life expectancy increases along with the number of people aged over 85 years; this bald fact cannot be disguised by a policy of avoiding making placements to homes such as Bramblebrook House.

This is a similar point to the population growth point. The experience of staff working in this field is that older people want to stay at home wherever possible. Nationally the number of older people entering care homes is falling in every local authority as expectations and opportunities change. In order for different options to be available for older people in the future we need to invest in their development now.

5. The closure of a care home is known to adversely influence the health of residents. A decision to close the home and the consequential enforced removal of residents would put the residents at risk

There is evidence to suggest that moving to a new care home can potentially place older people more at risk than would otherwise be the case. The Council accepts this. Research evidence suggests any moves must be well planned and well co-ordinated, in these circumstances the risk to individuals will be minimised. We are advocating assigning a worker to each resident to facilitate moves in accordance with best practice. Moving with friends is shown to reduce risk.

This is why the decision to close a care home is such a sensitive and difficult one.

6. It is the home of choice for current residents, closure would be contrary to the Council's obligation to work with older people around their home of choice

The home of choice directive applies to the choice of placement, within the placements available and at the local authority contracted rate. The closure of a care home is not contrary to the choice directive as the council only has the obligation to provide choice within the parameters of what is available, and within the contracted price arrangements. Bramblebrook, if closed, would cease to be an available choice.

7. It has a family like community comprising of residents and staff. It is an example of how a healthy, safe and independent community can be achieved through commitment to caring for people.

Yes, it does, and so do our other care homes.

8. To close it risks serious breaches under the Human Rights Act

Please see section 2.5 below.

9. Closure of the home and sale of the land would be asset stripping of the most callous kind. The Council would get the money the vulnerable elderly would pay the price.

This is Mr Taylor's opinion. The intention is to reinvest in older people's services of the future, whom may be equally vulnerable. The Council has committed to putting the capital and revenues savings into older peoples services and the development of new or extended services.

10. Closure of a Council run care home would create greater demand in the private sector and serve to protect profits made by such homes in the future.

It is significantly more cost effective for the Council to purchase residential care placements through the private sector than to directly provide. In the short term there will be more placements made in the independent sector, and as alternatives become more widely available and more and more people are supported to remain at home this will change again. The fact remains that, if the council does need to provide residential care for an individual, it is more cost effective to do so through the use of an independent sector placement and that 75% of people supported by the Council to live in care homes, live in independent sector care homes.

One advantage of the independent sector, not available in Council care homes, is the higher likelihood that a further move may not be necessary as a result of increased needs, if the placement is in a care home which also provides nursing level care.

The Consultation process;

- The failure to provide full disclosure of relevant information, despite repeated requests for it ever since the possible closure was announced.

Mr Taylor requested land values and the reason why these could not be provided was explained. Mr Taylor again raises this in his submission.

At a meeting with Mr Taylor as part of the consultation process Mr Taylor requested detailed budgetary and staffing information for each of the 8 care homes over the past 5 years. Mr Taylor refers to being told that annual accounts were not available for each of the homes. Mr Taylor was told that this information was not available in this form, and discussion about what information Mr Taylor wished to access and why took place. This was not with an intention to obscure or withhold information, but in order to clarify what Mr Taylor wanted, and draw Mr Taylor's attention to any issues relating to the use of this information. Mr Taylor was provided with budgetary information for each of the homes for 06/07, together with staffing turnover information as requested. This was with Mr Taylor's agreement. Although I am not aware of any specific pieces of information which Mr Taylor considers relevant which have not been provided, I am aware that he continues to believe that information has been either deliberately withheld or should have been available and was not.

- The serious inadequacies of the imposed consultation process

The consultation process has been active and many people have become involved. Individual discussions have been held with all residents and the issue has been debated at length, including through the Adult Health and Social Care Commission.

- The rejection of a proactive suggestion to form a focus group to enable the consultation process to progress

Mr Taylor did make this suggestion and it was not taken up, on the basis that different people have different questions at different times. There were two public meetings held by Councillor Hussain as part of the process, access to individual discussion and considerable opportunity for people to ask questions and contribute to the consultation process.

- The many deficiencies of the options appraisal paper which formed the basis for the cabinet decision to consult on the possible closure

The Cabinet paper is referred to in section one of this report.

- The unbalanced presentation of information and demonstration of muddled thinking. Any crumb of evidence to support closure is emphasised, and information that may point to the contrary is qualified to nullify its effect

This is Mr Taylor's personal view.

- The insensitivity shown when communicating with residents

Mr Taylor suggests that no effort was made for relatives to be with residents when the decision to consult on the closure of Bramblebrook was first communicated. This is the case, but this was not due to insensitivity but logistics. We were aware of the likely distress that this would cause residents therefore we were very careful that the possibility should not be widely known prior to the Cabinet meeting on 31 July, on the basis that cabinet may not have agreed with the recommendation. Following Cabinet it was likely that the decision would become publicly known very quickly as the Cabinet report including the recommendation had gone to all elected members. We therefore considered it imperative that residents heard about the proposals first from senior council staff before the news leaked out. It was therefore decided to meet with all residents on the morning following the Cabinet decision. On the same day all relatives were contacted by telephone so that they could arrange to visit and support their relative. Staff were on hand to support residents.

We do accept that all letters should have been personally addressed and this has been rectified.

In terms of the effect on residents, we would not wish to deny that this is an anxious time and distressing for some. However, staff have supported residents with professionalism and sensitivity.

- The failure to exhibit behaviour in line with the espoused values.

This is Mr Taylor's personal view.

- 2.5 The challenge that any imposed move on the residents would involve a breach of their rights under the Human Rights Act 1998 or a breach of a legitimate expectation that they are entitled to a home for life at Bramblebrook.

In this regard, solicitors acting for residents have set out their representations on these issues in correspondence which is set out in Appendix 3.

(a) Human Rights Act 1998

Article 8(1) of the European Convention on Human Rights (“the Convention”) provides that everyone “has the right to respect for his private life, his home and his correspondence”

Article 8(2) of the Convention provides that interferences are justified only if permitted by law, and if they are measures necessary in a democratic society to meet a pressing social need and are proportionate to the aim being pursued. Legitimate aims include the economic well-being of the country or the protection of the rights and freedoms of others.

Cabinet is advised to proceed on the basis that closure of Bramblebrook may involve an interference with the right to respect for the residents’ home or private life and would need therefore to be justified under Article 8(2): (See the letter of 21 December from the Smith Partnership which sets out references to European Court case law including the recent decision of *Stankova v Slovakia*). In that regard, the courts have accepted that closures based on the need to ensure the effective use of resources to ensure the provision of services for older persons’ generally, in circumstances where all residents will be offered suitable alternative accommodation, is capable of amounting to a justification for the closure: see *R (Phillips) v Walsall Metropolitan Borough Council* judgment 26 April 2001, and *R (Dudley) v East Sussex County Council* judgment 16 April 2003.

In the present case, the justification for closure of a home has been set out above. The justification for selecting Bramblebrook is similarly set out above. All the residents will be provided with suitable alternative accommodation. In the present circumstances, officers consider that the closure of Bramblebrook and the transfer of the residents to alternative accommodation would not breach the residents’ rights under Article 8 of the Convention.

Solicitors for the residents have also raised the issue that the transfer of residents may involve a breach of their right to life under Article 2 of the Convention: see the letter from the Smith partnership dated 29 December 2007. Officers are aware that the possible closure of Bramblebrook will have caused distress and anxiety to individuals and have been conscious to minimise that distress wherever possible, to consult residents and to re-assure them that they will be provided with alternative accommodation. There is no plausible evidence to suggest that the transfer of any residents to alternative accommodation will shorten their life expectancy or that there is real and immediate risk that that would be the case if Bramblebrook closed and the residents were provided with alternative accommodation.

(b) Legitimate expectation of a home for life

Bramblebrook has offered long term care placements for many years. When a resident moves to Bramblebrook s/he is clear that, following any trial period, the intention is that it will become their home and that they will live there (as opposed to staying for a short time) . It is intended that this is the person's home on a long term basis, and indeed for some people this will be for the rest of their life. However, this is not a promise or a guarantee. On entering the home staff reassure people that this is their home now and assist them to feel at home and comfortable within it. This does not imply that there is guarantee that the person will live at Bramblebrook for the rest of their life.

On entering the home no one is told that this is a home for life and that it will be their home for the rest of their life. Indeed, it would not be feasible to make such a promise. Bramblebrook is a residential care home, and as such, if a person's needs increase it can be the case that they can no longer live at Bramblebrook and will need to move to live in a care home with nursing. This is not an unusual occurrence. Over the past 30 months 24 people have moved from Bramblebrook to another care home, almost always a care home with nursing. All residents will know people who have moved for this reason. It is the most common reason for a vacancy occurring at Bramblebrook. There is no written guarantee given to residents that they can stay at Bramblebrook for the rest of their lives.

The assertion made by the Smith Partnership in their letter of 23 November, attached at Appendix 3, is that four residents were assured that Bramblebrook would be their permanent home, and that that is "a snapshot" of the evidence that they have received from the majority of residents. In one case, it is said that, in July 2007, when one particular resident, Betty Bateman, (already living at the home) was upset, a care worker by the name of Gillian reassured her that Bramblebrook would be her home for life and that she would never be asked to leave. All staff are aware that many residents of residential care homes are, unfortunately, required to move to nursing level care as their care needs increase. There is no available evidence to suggest that a lawful promise of a home for life has been given to any resident. Corlette, the home's manager, readily accepts that she may have used phrases like "This is your home now" and "Treat this as your home while you are here", but not that she would have used the phrase "home for life". It has not been possible to confirm what was said. The vast majority of residents signed our terms and conditions, which do not promise a "home for life". They make it clear that residents were given a licence, not a tenancy, and would not acquire the rights of a tenant. They do provide for the agreement to be terminated, although they do not anticipate the closure of the home as being a possible reason for termination.

First, Cabinet should take into account what was said to residents and should taken into account the fact that residents may have assumed that Bramblebrook would be their permanent home. That factor would then need to be weighed against the other factors justifying closure of a home and that home being Bramblebrook. For the reasons set out below, officers do not consider that the residents were promised a home for life. Nonetheless, Cabinet should weigh the case for closure against the interests and wishes of the residents, taking into account what was said to the residents.

Secondly, in certain circumstances, a person may have been promised a home for life, i.e. he or she will have been expressly assured that they will be able to stay at a particular home for as long as they want. The courts have indicated that an assurance of a home for life needs to be clear and unequivocal and the evidence must be convincing. In one of the cases where a closure decision was successfully judicially

reviewed (R ota Bodimeade v LB of Camden) the council's stated policy was "that the homes function as a home for life except where a change in a resident's condition means that this is no longer possible." Their residents' handbook also had a heading: "A Home for Life."

Another successful judicial review (R v Merton, Sutton & Wandsworth Health Authority ex parte Geoffrey P) concerned a long stay hospital for persons with learning disabilities. Most residents had lived there for 20 or 30 years and were, on average "about 40 years old with a mental age of 2 years and would not be able to live without 24 hour protection and supervision." The longest serving resident at Bramblebrook House has been there since November 1998 and he is the only one admitted before 2000. The service users in the case were more vulnerable than residents at Bramblebrook House. One indicator of this was that, even when relocated elsewhere on the same site, "some found this distressing and very unsettling." A consultant psychiatrist at the hospital had told the parents of one of the people placed there that he would have a home for life, and they had acted as a result of his promise. (Although the psychiatrist had since died the court decided it was 90 per cent plus probable that he had offered a home for life). The Chairman of the Parents Staff Association had confirmed in minutes of a meeting that residents had a long term home. A parent present at the meeting understood from this that the residents would have a home for life. A letter to an MP said that residents would not be relocated against their will, or against the will of their families, until the hospital ceased to be financially viable. All of this led the court to find that "the hospital authorities led the families to believe" they "would provide for its residents a home for life."

The evidence produced to us so far in support of the "home for life" argument is not as strong as that in the cases where such a promise has been held to have been given. We consider that no convincing evidence has been adduced to establish that the residents have been given a clear and unequivocal promise that Bramblebrook would be their home for life. Even in the case of Mrs Bateman, where that phrase was allegedly used, it was used by a care worker comforting Mrs Bateman in a time of distress. The statement was not made to persuade Mrs Bateman to give up a home and move to Bramblebrook. There is no evidence that the care worker would have any authority to make promises committing the Council to keeping the home open for so long as Mrs Bateman was alive and wished to live there.

Where a promise of a "home for life" is made, then, according to the Court of Appeal in R v North and East Devon Health Authority ex parte Coughlan "there are at least three possible outcomes. (a) The court may decide that the public authority is only required to bear in mind its previous policy or other representation, giving it the weight it thinks is right, but no more, before deciding whether to change course ... (b) On the other hand the court may decide that the promise or practice induces a legitimate expectation of, for example, being consulted before a particular decision is taken ... (c) Where the court considers that a lawful promise ... has induced a legitimate expectation of a benefit which is substantive ... the court will ... decide whether to frustrate the expectation is so unfair that to take a new and different course will amount to an abuse of power. Here, once the legitimacy of the expectation is established, the court will have the task of weighing the requirements of fairness against any overriding interest relied on for the change in policy."

If Cabinet conclude that the Council have made a promise to any resident that Bramblebrook would be that resident's home for life, then Cabinet will need to take that promise into account. If so, they should be satisfied that it would not be so unfair to the

resident or residents to go back on that promise before they conclude that closure of Bramblebrook is appropriate. Put differently, there should be a legitimate aim justifying departing from that promise and doing so should be a proportionate course of action.

In that regard, officers do not consider that the evidence does establish a promise of a home for life. Cabinet will need to consider if they agree with that assessment.

If Cabinet considers that a promise of a home for life was made (or intends to proceed on that assumption), then officers consider that the oversupply of places in elderly care homes, and the desire to manage resources efficiently and to release resources for use for elderly persons' services does provide a legitimate reason for closure. The closure of Bramblebrook would be proportionate. For the reasons given above, that home is the most appropriate home for closure. Further, and importantly, all residents would be provided with alternative suitable accommodation. In all the circumstances, it is considered that it would not be unfair to close Bramblebrook, even if a promise of a home for life had been made, so long as suitable alternative accommodation is made available. Put differently, that would be a proportionate course of action designed to pursue a legitimate aim.

In addition, it is also noteworthy that no resident has been rushed into finding an alternative home and significant time would be allowed for alternative provision to be chosen by residents, including with friendship groups and alternative Council run accommodation, if the decision to close is taken.

Additional Matters

There is no breach of duty in not making psychological and risk assessments in respect of the effect on the applicants of the transfer to new homes. The general principle is that such assessments may be necessary when deciding on a placement for the resident elsewhere and deciding what home would be suitable for the resident, but not when making the decision on closure.

Consultation on Possible Closure of Bramblebrook

Process and Feedback

1. SUMMARY

In August 2007 we asked all stakeholders for their views on the proposal to close Bramblebrook House care home for older people and reinvest capital receipts in Extra Care Housing and specialist dementia provision.

The Court of Appeal has held that there are four elements to a proper consultation of this sort: “First, that consultation must be at a time when proposals are still at a formative stage. Second, that the proposer must give sufficient reasons for any proposal to permit intelligent consideration and response. Third, that adequate time must be given for consideration and response and finally ... that the product of consultation must be conscientiously taken into account in finalising any ... proposals.”

This report details feedback on the consultation itself. Feedback on the product of consultation is incorporated in the prior reports.

2. PROCESS

- The consultation was “project managed” at a senior level by the Assistant Head of Direct Services for Older People. A consultation plan was developed and monitored regularly.
- The consultation began on 1 August 2007. All residents, all staff and all relatives had been informed by 10am on 2 August 2007.
- Each resident (39), staff member (26) and main involved relatives or friends (42) were given a letter outlining the reasons why the council was consulting on possible closure, reflecting the main themes of the 31st July Cabinet Report. The duration of the consultation period was also specified.
- Once commercially sensitive material had been removed, the full Cabinet Report was made available to all stakeholders from August 22nd. A letter was sent out to each person confirming this.
- Residents, family members and involved friends were interviewed in accordance with their wishes over the first six weeks of consultation and their opinions were recorded.
- Residents were asked whether they would like independent advocacy. A list of those who did was passed on to Age Concern.
- Staff members were offered the opportunity to individually meet with the Service Manager and a senior Human Resources officer. The trade unions were informed. Staff were informed there would be no compulsory redundancy in the event of closure.
- Residents were also given opportunities to discuss the implications of the proposals at Residents Meetings where minutes were noted and circulated.
- A list of Frequently Asked Questions was circulated in writing to all residents, staff members and involved relatives or friends on 5th September 2007, after the first wave of consultation.
- The Cabinet Member for Adult Services attended Bramblebrook on two occasions in the consultation period. The first meeting was focused upon residents. Residents, staff and relatives / friends were invited in advance to the second meeting.
- As part of the proper political process, the Overview and Scrutiny Commission considered the Cabinet decision to consult on the possible closure. They took views from key stakeholders and delivered a report and recommendation on 29th October 2007.

- A survey was also carried out of older people in sheltered housing in Derby; to test out the hypothesis that Extra care Housing was more attractive to them than residential care should their needs begin to increase.

3. FEEDBACK FROM RESIDENTS

Bramblebrook residents were asked whether they agreed that a Council home for older people in Derby should be closed, and if so whether it should be Bramblebrook. The table below represents their responses to these direct statements.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
We should close a council home in Derby	0	0	3	4	31
If so – it should be Bramblebrook	0	0	1	4	34

It is clear from the above that the vast majority of residents and relatives were strongly against closing Bramblebrook and against closing a home at all.

There were frequent comments about the high quality of the home, the excellence of the staff group and the friendships that residents had made since they had moved in.

- “Bramblebrook is a life-saver for me, the staff are superb and I have made many friends. I would be devastated if I had to leave”
- “I have no family, my only friends are here, they are my family. I want to stay here – this is my home”

Some also emphasised their local connections:

- “Not only would I be leaving my friends but it would also make it difficult for my daughter to visit, as she has to rely on public transport”

It was also clear that residents found the proposal to close the home and the consultation process itself extremely stressful.

- “We feel like a bag of refuse that can be thrown anywhere, they are so cruel and wicked for doing this”

Residents, like many other stakeholders, felt that the main motivation for the closure was financial.

- “Bramblebrook is always full and popular, so why close it? The reason is simple – prime building land”

Residents understood that the numbers of older people were increasing. They did not have confidence that community care would absorb the additional service demands, and felt the Council should be increasing residential care rather than decreasing it.

- “As for the myth that older people prefer to remain in their own home with visits from council staff – my relative could tell you it just doesn’t work. It is hardly surprising, given that home helps etc are being cut back”

Smith Partnership Solicitors were instructed by thirty Bramblebrook House residents and raised the following concerns:

- The declining demand for residential care in the city as a whole was immaterial to Bramblebrook House as it was virtually full
- Age Concern had reported there were only 11 unused beds at other care homes in the Mickleover and Littleover areas
- The home was in close proximity to the hospital and therefore convenient for residents with access needs
- The wishes of residents were not sufficiently weighted, especially in view of “the expectation on the part of all our clients, and promises given to some of them, that it would be their home for life”
- “Hardly any other Home provides ‘specialist care’, so Bramblebrook is in no worse position than most other Homes in the area”
- The good condition of the building precluded closure

4. FEEDBACK FROM RELATIVES AND FRIENDS

Relatives and friends also emphasised the high quality of Bramblebrook:

- “Bramblebrook is an excellent quality care home with long standing staff who promote, and are part of, the caring community of the home, and it should remain open for that reason”

There was some strong assertion on the basis of information requested that Bramblebrook was the most efficiently run of all Council care homes:

- “There is no business case for its closure”

Relatives and friends were also concerned for the well-being of residents, and the affect that closure would have:

- “Residents of Bramblebrook are old and frail and should not be subjected to the distress and disruption of moving, which research shows can hasten illness or earlier death”

Several commented that they had not been consulted with properly, either because of the number of opportunities they had to make their view known, or because they felt information was not forthcoming, or because the opportunity to speak with Councillor Hussain came too late in the process.

Other comments reflected the residents’ feedback given above: the increasing numbers of older people that would sustain future demand, the residents’ expectations around their Home of Choice, the perception that financial concerns were paramount.

There were also comments that the Bramblebrook site could evolve into providing the specialist services that it currently lacked: dementia care and Extra Care Housing being given as examples.

- “The lack of specialist services is due to the Council not putting them into Bramblebrook. The Council should do a feasibility study into providing such services”

There was some thought that Bramblebrook could be preserved by the Council selling it as a going concern although doubts were expressed about any guarantee this would bring for the future.

There was also concern that closure “would create greater demand in the private sector and serve to protect profits made by such homes in future”.

5. FEEDBACK FROM STAFF

25 staff made individual consultation appointments. They responded in the main with concern for residents and the stress of the situation.

- "My heart goes out to the residents"
- "I've been through this before. I sat with the very last resident at Rykneld who was awake all night worrying, it was horrible"

There was considerable pride about Bramblebrook:

- "I view Bramblebrook as a flag-ship for Social Services homes. Closure would be a short-term gain for a long-term loss"

Staff were also concerned for their own future:

- "I feel very sad, it's a job I enjoy"
- "I love it, there's such good rapport. I don't want it to close"

There was some feeling that any change ought to seek to benefit older people in some way:

- "If the money raised went directly into older people's services it wouldn't be so bad"

6. TRADES UNIONS

UNISON submitted a series of questions by email that they felt reflected the main issues raised by their members. These were:

- What is going to happen to me?
- Am I going to be made redundant?
- Who will pay my travel costs?
- I would like to know when we carried lots of vacancies at Bramblebrook?
- Is the closure purely money motivated?
- Why are the council being so cruel to up root the elderly?
- Will residents get choices as to where they go?
- When will someone see sense and change their minds?
- Have the committee who are making the decisions visited the home for themselves?

7. FEEDBACK FROM OTHER INTERESTED PARTIES

A total of 41 people sent in letters and one sent an email. All were responded to in writing. Concerns raised were similar in nature to those from residents and family or friends already described.

Age Concern also organised a petition with 4,038 signatures under the heading: "Please sign to support the residents of Bramblebrook House Residential Home in Mickleover. These residents are facing the possible closure of their home by Derby City Council in order that they can sell the land the home sits on".

8. REPORT OF THE ADULT SERVICES AND HEALTH COMMISSION

The Commission considered evidence from a range of individuals including the Cabinet Member for Adult Services, Senior Assistant Director for Adult Social Services, relatives and friends of the residents of Bramblebrook House, Derby Seniors Forum and Age Concern Derby. The Commission also looked at information about population projections, demand for residential care, Adult Social Services eligibility criteria, strategies for addressing the future needs of older

people, the cost differential between Council-run and independent sector care homes and any distinctive features of each of the Council's care homes.

Recommendations made by the Commission on the basis of this evidence were as follows:

- The Commission accepts there is a case for closure of one home but does not believe this should be Bramblebrook as it has recently been modernised and there are other homes in far worse condition
- Should the Council Cabinet decide to close a home, this should not be carried out quickly because closures place a great amount of stress on the residents affected who should be given the time and support they need to find suitable alternative homes
- The Council should retain a strategic level of in-house provision proportion as experience shows that fees in the independent sector can raise dramatically if there is no competition
- There seems to be significant nervousness in people wishing to be placed in the independent sector and therefore Council should work alongside care providers to promote the positive attributes of independent sector

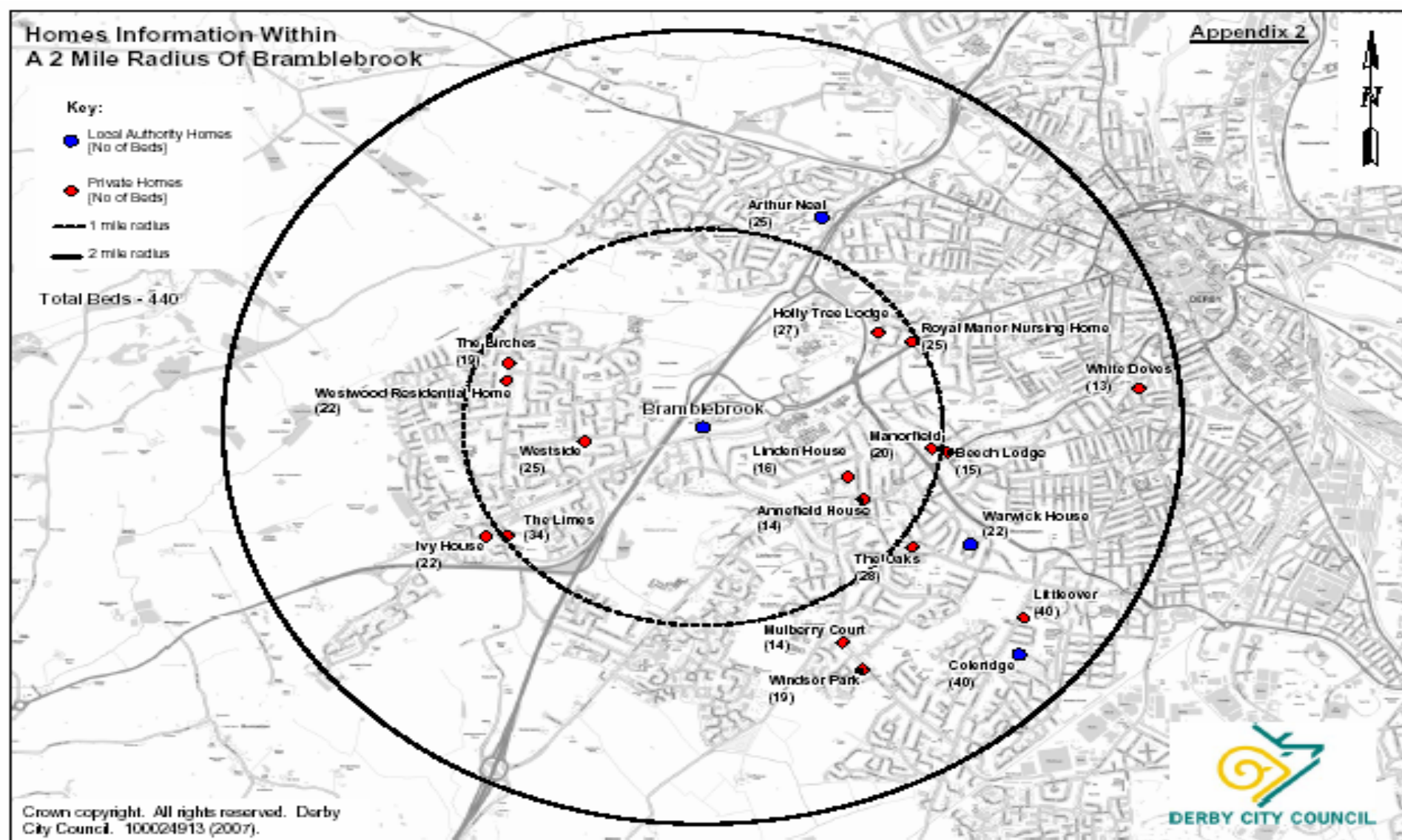
The Commission drew further conclusions which were not stated as recommendations but are nonetheless significant:

- "Evidence shows that older people increasingly want to live independently with dignity. They want en suite facilities, freedom to cook what they like and when they like and to have complete control to their front doors. It was apparent that none of our existing residential homes provide all of these facilities and are therefore not fit for purpose".
- "It is evident from visits to the Councils care homes that more and more people are entering the service with higher levels of needs than in the past".
- National and local evidence shows that dementia is on the increase and our only secure unit has 12 places which is totally inadequate for the scale of the needs in the city. The Council therefore needs to reorganise its services to meet this growing need".
- "The Commission recognises the Council's duty to provide value for money especially as there are significant differences in the cost of provision between in-house and the independent sector. It also feels that we should offer choice between in-house and the independent sector, especially as users seem to have a higher level of confidence in the council run provision".
- "[T]here does not appear to be sufficient vacancies in the combined sectors to cater for all residents, especially in the Council run homes in order to give meaningful choice to the residents".

9. SURVEY OF SHELTERED HOUSING SCHEMES

A survey of residents of sheltered housing was carried out during the consultation period, establishing the factors that respondents most valued about their housing. 51 people aged 55 and upwards were surveyed, the largest proportion being in the 75 to 84 bracket. The opportunity was taken to also ask them to consider their preferred choice of future accommodation, should their needs increase to a level where they could not stay in their current tenancy.

38 people (74%), chose Extra Care and 10 (20%), chose Residential Care. 6% did not make a choice. The main reason for the Extra Care preference was given as the greater independence that it would offer.



Document 8

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Date 25/10/2007
Our Ref SDR\
Your Ref
Please Ask for Simon Richardson

Dear Sir

RE: Bramblebrook House

We have been instructed by the residents listed on the attached sheet to represent them during and after the consultation into the possible closure of Bramblebrook House. We have taken statements from the residents whose names appear in bold and are satisfied that there is a common thread to what all of our clients wish you to take account of as closure is being considered. Please accept the representations which follow as representations on behalf of all of the 30 people listed, which is the overwhelming majority of the residents of Bramblebrook House. We do not know, nor have sought to ascertain, the wishes for their future of the few residents who have not instructed us, but you must not assume that they acquiesce in what your Authority is proposing. You are dealing with a very elderly group of people.

Your Authority delivered a letter dated 1st August 2007 to each resident. That letter sets out why you are considering closure and the factors which you are taking into account. None of our clients have told us that they have been given other reasons or factors and so unless you wish to advise us of additional matters we shall make representations on those set out in that letter.

We will now record each reason and factor and advise you of our clients' comments.

Reasons

- 1- That the Council is supporting fewer people to enter residential care each year

Response – Immaterial to Bramblebrook House. It is virtually full. Neither our clients nor ourselves have seen any evidence to suggest that in the reasonable future there will not be a demand for beds at this facility.

- 2- That more people prefer to stay in their own homes

Response – Ditto

- 3- That there is more residential care capacity in the city than is needed

Response – Ditto. Age Concern have told us that they have contacted all Care Homes in the Mickleover and Littleover area and in total there are only 11 unused beds.



Factors**1-Where the Home is, and whether there are other Homes in the area**

This Home is in an excellent, perhaps unparalleled position, from the point of accessibility to Derby City Hospital, which is a regular venue for several residents, indeed Mr George Coates has to attend the dialysis Unit 3 times a week; and the town centre, which is accessed regularly by residents using the bus which stops at the end of Rough Heanor Road.

It is reasonable to consider whether there are other Homes where residents could be placed, but in circumstances where, as at present, a Home is full, in good condition and meets residents' needs completely, due weight should be given to residents' wishes and the effect upon them of a move from Bramblebrook, particularly given the expectation on the part of all of our clients, and promises given to some of them, that it would be their home for life, and given the close-knit family atmosphere which prevails there (according to the testimony of staff as well as our clients). We are very surprised that you have not included these points as factors in the decision – making process .

2- Whether the Home provides any specialist services which are not available elsewhere

Day care is available next door at Humbleton View. No decision has been made to close it. Hardly any other Home provides "specialist care", so Bramblebrook is in no worse position than most other Homes in the area.

3-The physical state of the building , and the value of the site

We agree that these factors should be taken into account. So far as we are instructed and is evident from our own inspection, the building is in very good condition.

We request you to take the above points into consideration. We also reserve the right to challenge the consultation process itself because firstly you have not indicated you will be taking relevant factors (as above) into account. Secondly, the information you have given to our clients is vague so that they cannot give a full response (eg what comment can they make about the value of the site when nobody has told them what it is worth?). Thirdly, the manner of the process has left clients confused, so that some are literally packing their belongings as if they are about to be evicted. It has left clients distressed, so we have received reports of residents crying and not sleeping. There has been no offer of counselling. There has been no advocacy service offered. Age Concern only heard about your proposals via local radio. The outcome of all of this is that , far from residents thinking they can make representations whilst proposals are at a formative stage, some of them have been led to believe through the way the consultation process has been conducted that they will be moved out.

Please acknowledge receipt and confirm that we will receive a copy of any Report placed before the Council's cabinet, together with the Cabinet's decision with reasons

Yours faithfully



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S3

Document 14



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Date 23/11/2007
Our Ref SDR\KT\Bramblebrook House
Your Ref
Please Ask for Simon Richardson

Dear Sir

RE: Bramblebrook House

We have now been able to obtain instructions to enable us to respond to your letter dated 12 November 2007.

No fewer than twenty-four of the residents have indicated that as a result of things said to them by employees of the Authority, usually staff at Bramblebrook House or a Social Worker, they expected that Bramblebrook would be their home for life.

By virtue of the limited time you have afforded us to obtain further details, it has not been possible to take full statements from all of our clients on this subject but there is a constant theme of expectation that they would not need to move again.

By way of example:-

1. Betty Bateman who is aged eighty-eight came to Bramblebrook House in January 2007. She moved into Bramblebrook House having had a spell at Warwick House, a respite home, and she was in two minds as to whether to return to her home of some fifteen years or to move into an elderly person's home. In particular, she was worried that she would not be able to return to her family home in the event that she got better and did not wish to remain at a large residential home. She informs us that she rang Social Services at St Mary's Gate in Derby and spoke to lady named Heather who confirmed that if she moved to Bramblebrook House it would be on a fully funded and permanent basis, by which she understood once she moved there it would be for good. Having visited Bramblebrook House with one of her daughters and liked it she decided that although she would not be able to return to her family home ever again, at least she would have a very nice home for the rest of her life. Our client also remembers speaking to a lady who she believes was called Poonam, possibly a Social Worker, about her concerns as to what would happen in the future and she says that Poonam gave her a specific assurance that Bramblebrook would be her permanent home. By that she understood it to mean that if she moved to Bramblebrook she could be there as long as she wished. With these assurances having been given she gave up her flat, which she described as a big thing to do as it was sheltered housing and moved to Bramblebrook House.

Our client also recalls that in July 2007 she had a panic attack, which we understand has occurred from time to time and which on this occasion was caused by reminiscences about the loss of her son Colin earlier this year and her husband before that. She was crying and went to see Collette, the acting Manager at Bramblebrook House. She remembers in the course of the

discussion being worried about whether she may be asked to leave because her general health had improved and she was worried as to where she would live if she were asked to leave Bramblebrook, as she had given up her flat. She recalls Collette saying "you are here, this is your home now, you are not worry". Again, by this she assumed that she could remain at Bramblebrook for so long as she wished. On another day, she was similarly upset about the past and a Care Worker by the name of Gillian assured her that Bramblebrook would be her home for life and that she would never be asked to leave. These assurances helped our client a lot and she felt a lot more settled and secure as a result of speaking to these people.

Unfortunately our client's late son cannot give evidence but our client recalls that during the period when she was thinking about coming to Bramblebrook, he rang Poonam to ask her whether the move would be permanent and she said that it would be. Our client remembers meeting a member of staff from the home called Linda on the Monday after she was admitted to Bramblebrook, together with Colin, and being shown a form on which was written something like "permanent fully funded", and again her understanding was, as it has been until the latest news, that she could and would live at Bramblebrook for life.

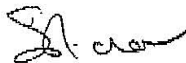
2. Ellen Elyvn Blurton, who is ninety, came to Bramblebrook House on 14 June 2004, and we have taken evidence from her and her son Ian. Ian had lived with our client throughout his life and assisted her in finding a home as she became difficult to care for at home. He met Collette, Manager of the home, and the two of them were impressed with the facilities. There was a vacancy and so our client accepted it on a one month trial initially. She recalls that at the end of the trial a Social Worker by the name of Tim Dawson told her that if she wanted to she could stay and that it would be permanent. Our client and her son have told us that they left that meeting believing that our client would have home at Bramblebrook House for life.
3. George Coates, who is seventy-four, came to Bramblebrook House on August Bank Holiday in, he thinks, 2004. He had previously lived at a number of other care homes which have not worked out for one reason or another. He came to Bramblebrook initially for respite care and he decided that he had had enough with of constant moving from one home to another. He remembers contacting a Social Worker called Helen Clare and he said he wanted to find somewhere which would last him for life near his family in Mickleover. He says that she said that she would look into it and that the next day she called him and said that she had found somewhere which happened to be Bramblebrook. Our client recalls saying to Ms Clare that he was sick of moving "here there are everywhere" and that he asked her if this would be a permanent move to which she answered in the affirmative. He reports that after he had been at Bramblebrook for a few weeks Ms Clare visited him and he recalls thanking her for finding such a nice place for him. He remembers having a long talk with her on the form in the reception area and at the time she assured him that he would be able to live at Bramblebrook forever. He has told us that he has taken it for granted as result of this assurance that Bramblebrook would be his home forever and he says that it has never crossed his mind, until the recent news, that the place may close in his lifetime. He says that it has always been full and vacancies have always been taken up.
4. Nick Carter, who is ninety-four, came to Bramblebrook House about three years ago, moving from his own Council Flat. He recalls that after he had been at Bramblebrook for a few weeks his Social Worker, (whom he thinks was called Mrs Gill), visited him and asked how he was faring. He told her that he had settled in but that he wanted an assurance that he would be able to stay at Bramblebrook permanently. He recalls saying this having had some six years of moving from barracks to barracks within the Army, and he recalls specifically asking Mrs Gill for an assurance that at his time of life he would not be moved on. He has told us that Mrs Gill assured him that he would be able to stay at Bramblebrook forever and he has always assumed that he would be able to stay there for as long as he liked.

The above is no more than a snapshot of evidence that we have received from the vast majority of the current residents. Should we be instructed to issue Judicial Review proceedings against a decision to close Bramblebrook House we shall of course obtain Witness Statements from everybody who has been promised a home for life. At this stage we are supplying you with a flavour of the evidence on this subject and make the general point that when somebody who is very is moved to an old people's home they will expect to live there for the remainder of their days.

Please acknowledge receipt of this letter and confirm that it will be placed before the Council members for consideration in advance of their meeting next week.

Please arrange to let us have a copy of the minutes of the decision in order that we may take instructions from our clients on what if any action is merited after the decision.

Yours faithfully



Simon Richardson

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11/12/2007 10:28

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PAGE 02

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Date 07/12/2007
Our Ref
SDR\KT\Bramblebrook\164549.1
Your Ref
Please Ask for Simon Richardson

Dear Sir

RE: Bramblebrook House

LETTER BEFORE ACTION

We refer to our letter dated 25 October 2007. We continue to be instructed by the residents referred to in that letter.

We have been informed that on 27 November 2007 the Council cabinet made a decision to approve the closure of Bramblebrook House.

The purpose of this letter is to inform you of further instructions received from our clients and of the action that we are taking on their behalf.

It is our clients wish to issue proceedings in the High Court of Justice in London for Judicial Review of the above decision.

The grounds for Judicial Review will be settled by Counsel named Mr Paul Bowen of Doughty Street Chambers in London but broadly it is contended firstly that there was inadequate consultation and secondly that on the merits of the case considered at the cabinet meeting closure should not have been approved.

We have been passed a copy of representations made by Roger Taylor, son of one of our clients Pearl Taylor, dated 24 October 2007 and his comments on the consultation procedure (note his summary of the same on page two of his representations) should be read in conjunction with our letter of 25 October 2007.

It is clear to us that your authority has considered more factors than those three upon which consultation was offered in the letter from Shelia Downey dated 1 August 2007 sent to all residents. The backdrop to this whole process has been the serious deficit in Social Services budget rather than the matters referred to in the letter on 1 August 2007.

We do not accept that due weight was given to the objections to the proposal, being from the entire group of residents and their families and over four thousand signatories to a local petition.

We also do not accept that due weight was given to the recommendations made by the Adult Services and Health Commission.

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PAGE 03

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We have a Public Funding Certificate in this matter to cover our costs and we wish to put you on notice that in the event that when the cabinet reconsiders the decision on 18 December 2007 it ratifies the decision made on 27 November 2007, we will be inviting Counsel to draft Judicial Review proceedings. The Orders that we shall seek will be for declarations that there was not due consultation and that the decision made on 27 November 2007, being irrational, should be quashed. An application for our costs will be made within the Pleadings.

Please acknowledge receipt.

Yours faithfully



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02 JAN 2008

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DERBY CITY COUNCIL CORPORATE SERVICES	
2 - JAN 2008	
FILE REF	
REFERRED TO	

Date 21st December 2007
Our Ref
SDR/SK/Bramblebrook/164549-1
Your Ref
Please Ask for Simon Richardson

Dear Sirs

Re: **Bramblebrook House**

Thank you for your letter dated 14th December, the contents of which we have noted.

Would you please forward to us a minute of the decision reached on 18th December 2007.

You describe our evidence on the "home for life" subject as a snapshot. We may only have given you four specific examples but what is stated in our letter of 23rd November 2007 is typical of what has been mentioned by many residents. We do not propose to detail for you all the evidence on this subject, at the present time. You will know from the decision in the case of *Stankova v Slovakia*, heard in the European Court of Human Rights on 9th October 2007, that article 8 of the Charter of Human Rights protects residents of places which have become their "home", even if they cannot show a promise of a home for life. We suggest that it is unarguable that all of our clients regarded Bramblebrook as their home and we wish to know what regard is being taken of our clients' rights under article 8. Your Authority has moved clients to Bramblebrook who are aged over 100 (for example our client Mrs Emerton). Edith Cureton is aged 90 and has lived at Bramblebrook for nearly 8 years. Winfred Morton, aged 86 has lived there for over 9 years. In circumstances where your Authority has made actual promises, or moved residents in their 90s and above, or cared for elderly people in one home for many years, we submit that such residents have solid protection under the Home Rights Act (see also our comments about Article 2 below) and that your Authority has an obligation to consider those rights.

You have invited us to outline other matters we wish the Council cabinet to consider and so we take this opportunity to enquire to what extent the Council has assessed the likely impact of a move from Bramblebrook upon the residents, in particular the extent to which it will, or may shorten their life expectancy. This raises issues under article 2 and in the light of letters we are aware the Authority has received from local GPs, it does not appear that the Council has carried out appropriate community care assessments dealing with this issue and we hereby request you to carry out these assessments and to take account of them before making a final decision. Again we can give you examples of the effect that the news provided in August has had upon the residents. Betty Bateman has had to consult a psychiatrist over her anxiety and Joan Hallam is one of several residents who have seen their GP because of the same. Emily Sabine has lost 4kg in weight. We could go on, but it is your Authority's obligation to investigate all of these factors and not our task to list them all for you.

A list of partners is available upon request

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We expect your Authority to consider these, and matters previously submitted and take appropriate action, prior to making a final decision.

Yours faithfully



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RECEIVED
03 JAN 2008

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29 December 2007

Robin Constable
Solicitor
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Dear Sirs

Bramblebrook House – Consultation on possible closure

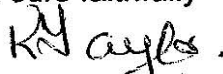
Thank you for your letter dated 14 December 2007. I note that the Council cabinet has not made its decision on this matter.

I submitted my formal response to the above consultation on Wednesday 24 October 2007. I did this in person by handing a copy of my response to Councillor Hussain and Mr Holdridge at Bramblebrook House. I note that you acknowledge having that document. It is my understanding that the contents of that document, and all other material received by the Council during the consultation period, should have been conscientiously considered **before** drafting a paper for the cabinet to consider. It is a matter of fact that a paper proposing the closure of Bramblebrook House was considered and decided upon on 27 November 2007, only for the decision to be called in. I look forward to seeing the revised paper.

You asked me to provide you with details of any other matters, in addition to my formal response, that I wish the Council cabinet to consider. The answer is simple – all relevant matters. Surely the Council officers are aware that it is their duty to ensure that is done. I suggest you refer your question to the Council officers and instruct them accordingly. I look forward to seeing your reaction to each of the breaches of the decision making principles identified by the call in and confirmed by the Adult Services and Health Commission.

In view of the multiple issues involved the immediate withdrawal of the threat of closure is essential to avoid further risk to the Human Rights of the *Bramblebrook House family*, their relatives and friends.

Yours faithfully


R K Taylor

**RESPONSE TO CONSULTATION
ON THE POSSIBLE CLOSURE OF
BRAMBLEBROOK HOUSE**

Roger K Taylor

r.k.taylor@btinternet.com

24 October 2007

Response to consultation on possible closure of Bramblebrook House: R K Taylor

Executive Summary

On 1 August 2007 Derby City Council announced the commencement of consultation on the possible closure of Bramblebrook House. This report is a formal response to that announcement as set out in letters from the Senior Assistant Director to residents (Ref: SD/JHLett101/JMH) and their relatives and friends (Ref: SD/JHLett102/JMH).

This report constitutes formal opposition to the possible closure of Bramblebrook House and formal objection to the manner in which the process has been handled. It provides detailed evidence to oppose the possible closure and an extensive account of the inadequacies of the process used to date.

This report demonstrates that the proposal for possible closure of the home is seriously flawed and that no logical grounds have been put forward to lead to such a proposal. The notion of a need to close any home is called into question, being based as it is on a fallacy of falling demand. The report shows that Bramblebrook House is demonstrably the best, yet bizarrely it is the one singled out by the Council for possible closure.

It records the great concern that no risk assessment was carried out before the Council embarked on its consultation. The failure to assess the risks to the health of the vulnerable residents prior to making the announcement of the possible closure of "their home" is indicative of the disregard shown to the service users which is further illustrated in the report.

The report makes the case for the Council to continue to maintain Bramblebrook House as a residential care home because:

- It is the most financially efficient Council run home with significantly better performance than the others (see Section 4). There is no business case for its closure.
- It is the best in the city, rarely having a vacancy and usually having a waiting list
- The number of people over the age of 85 in the area is going to rise steeply, with a 60% increase in the number within 20 years
- There will be a growing demand for such facilities as life expectancy increases along with the number of people over the age of 85; this bald fact cannot be disguised by a policy of avoiding making placements to homes such as Bramblebrook House
- The closure of care homes is known to damage the health of residents. A decision to close the home and the consequential enforced removal of residents would put the current residents at risk
- It is the "Home of Choice" for current residents; closure would be contrary to the Council's obligation to work with older people around their Home of Choice
- It has a family-like community comprising residents and staff. It is an example of how a healthy, safe and independent community can be achieved through commitment of caring people
- To close it risks serious breaches under the Human Rights Act

Response to consultation on possible closure of Bramblebrook House: R K Taylor

- Closure of the home and sale of the land would be asset stripping of the most callous kind. The Council would get the money, the vulnerable elderly would pay the price
- Closure of a Council run home would create greater demand in the private sector and serve to protect profits made by such homes in future

The report records formal objections to the way that the process has been handled including:

- The failure to provide full disclosure of relevant information, despite repeated requests for it ever since the possible closure was announced
- The fallacy of using "*falling demand*" as a reason for closing a home. The truth is that the Council set performance targets to place fewer people in residential care, not that there was any less demand
- The serious inadequacies of the "*imposed consultation process*"
- The rejection of a proactive suggestion to form a focus group to enable the consultation process to progress
- The many deficiencies of the "Options Appraisal" paper which formed the basis for the cabinet decision to consult on possible closure (see Section 2 and Appendix 1)
- The unbalanced presentation of information and demonstration of muddled thinking. Any crumb of evidence to support closure is emphasised, any information that may point to the contrary is qualified to nullify its effect
- The insensitivity shown when communicating with residents
- The failure to exhibit behaviours in line with espoused "*Values*"

The report acknowledges the scrutiny role exercised by the Adult Services and Health Commission. However the experience gained throughout with the Council employees managing the consultation process, is that meaningful consultation has been prevented by their withholding of essential relevant information. The process has been opaque rather than transparent. Consequently the report raises more questions but with little confidence that answers will be provided.

The only sensible conclusion that can be reached from the evidence is for the immediate removal of the threat of closure. Failure to do so would suggest that the Council is placing the blind pursuit of targets as a greater priority than protecting the well-being, reasonable expectations and rights of the residents and their families.

Response to consultation on possible closure of Bramblebrook House: R K Taylor

1. Introduction

My mother entered Bramblebrook House in October 2005 following the death of my father at the age of 92. They had been married for 64 years and he had been the main carer for a number of years. Mum was faced with the loss of a devoted husband and the recognition that she was unable to live safely at home alone. When I searched for a suitable place for her at that traumatic time, Bramblebrook House was the best home of all that I visited. The care and social interaction there soon enabled her to attain a greater level of independence than she had previously attained in her own home. Family and friends have all remarked on her progress.

Bramblebrook House provides a caring family-like community comprising the residents and staff. It is not an "us and them" relationship but rather a family made up of the residents, carers, domestic staff, catering staff, managers and visitors. Residents are treated with respect and their independence is facilitated and encouraged appropriate to their needs.

It is most regrettable to witness the effect that the announcement of possible closure has had on the *Bramblebrook Family*. The way in which the residents and their families and friends were notified and the subsequent handling of the consultation has caused unnecessary suffering.

2. The case put forward for possible closure

The initial one page letter announcing the commencement of consultation on the possible closure of Bramblebrook House caused us to request all relevant information to justify such a proposal. The version of the cabinet paper (Options Appraisal for Council's Residential Homes for Older People 2007/08), we received some 13 days after our request, is incomplete, **lacks relevant evidence and does not logically lead to the recommendation made**. It is unbalanced in its presentation of information and demonstrates muddled thinking in its consideration of the matter. In short the cabinet paper presents a recommendation to close Bramblebrook House and then seeks to justify it.

Detailed comments on the text of the cabinet paper can be found in Appendix 1. A few examples of the shortcomings are given below.

The cabinet paper is **selective** and **limited** in both the number of options included and in its consideration of the options and factors. Any information that may be used in a way to support a proposal for closure is emphasised to that end; any information that may be seen as weakening the proposal is qualified to nullify its effect. This same trait has been exhibited in discussions and in any provision of information during the consultation process (see later).

The relevance of the location of the homes is given a particular slant in the paper. The presence of three homes in Area Panel 4 is highlighted but one (Warwick House) is not for permanent residents and another (Coleridge House) is geographically closer to Arboretum than Bramblebrook House. The two large housing developments and associated growth in population around Bramblebrook House are neither mentioned nor considered. Links with the locality are misrepresented, giving average distance

Response to consultation on possible closure of Bramblebrook House: R K Taylor

travelled to long term placement as evidence. It ignores the fact that the key for residents is a convenient location to maintain links with family and friends. This makes Bramblebrook House a home of choice for many of its residents rather than being a negative factor. They have chosen to live there, to enable family and friends who live nearby to visit them easily whenever they wish.

The provision of additional services to the community at other homes is emphasised but the potential for such services on and around the Bramblebrook House site (and Humbleton View) is not mentioned, nor is the option explored.

The desire to stay in one's own home is confused with the ability to do so safely. Most people's first preference would be to stay in their own home but for various reasons it can become impractical. For some the passing of time is accompanied by a decline in physical and/or mental capacity to such an extent that it is no longer a safe option.

What little data we have been given, to attempt to support the claim that there is "falling demand" for residential care homes, suggests that the Council has placed fewer people in residential homes during the last three years. This is not surprising as the Council had set performance targets to reduce the number of placements. It is not proof of falling demand but is an example of a self-fulfilling prophesy.

Much is made of enabling "independence" equating that with only being possible within one's own dwelling ("own front door"). In reality, independence can be (and is) encouraged and facilitated within residential care homes (particularly Bramblebrook House). This important fact was acknowledged by Dame Denise Platt, Chair CSCI in November 2005:

"We have seen that, with the right support, people can have independence and choice in care homes."

Much is made of the spare capacity in care homes as a reason for closing a home: yet without spare capacity there is no choice. There needs to be spare capacity to allow choices to be made. Interestingly there have been few vacancies in total in homes in the area throughout the consultation period. So the use of "spare capacity" as a reason for closure has little credence.

Much is made of developing the concept of "Extra Care". It has been described to us in various forms including that of a "small village-like community". The option of trialling such a concept around the Bramblebrook House site whilst retaining the excellent care home is not considered in the cabinet paper.

The cabinet paper uses population data from 2001 showing 4,247 residents over 85 in Derby. Office for National Statistics data has the number at 5,100 in 2008 rising to 7,600 in 2025.

When we asked for the annual accounts for each of the homes we were told that they did not exist. This is hard to believe. Against such a picture of financial management there is little credibility in statements made about the comparisons with independent sector homes. How is it possible to claim they are cheaper in providing the same level

Response to consultation on possible closure of Bramblebrook House: R K Taylor

of service? How is it possible to claim that closing Bramblebrook House will release efficiencies and contribute to restoring financial balance? What does it mean? Such statements must be backed by financial facts.

Requests for information relating to the value of land or plans for each of the sites have been refused repeatedly making it impossible to comment on this aspect.

The option of reducing the number of contracts with independent care homes (21) is not considered.

The option of reducing the administrative in-house overheads is not considered.

3. Omissions in the case put forward for consideration

The wishes of residents (service users) were not considered. See Section 5 later.

The views of staff were not considered. See Section 6 later.

The cabinet did not consider levels of occupancy as a factor in reaching its decision: Bramblebrook House has the highest occupancy levels at over 97% (rarely having a vacancy but usually with a waiting list). The data is given below in Section 4.

The cabinet did not consider relative efficiencies of the homes: Bramblebrook House is the most efficient financially (with lowest expense per bed or service user). The data is given below in Section 4.

The cabinet did not consider the continuity of resident/staff relationships. The average length of service of staff at Bramblebrook House is the highest of all the homes at over 12 years. The data is given below in Section 4.

Why did the cabinet not consider levels of occupancy and relative efficiencies of the homes in reaching its decision to consult on the possible closure of Bramblebrook House?

Does the Council think such factors are unimportant?

How are such omissions reconciled with the claim made in the cabinet paper that closure *will release efficiencies that will contribute to restoring financial balance?*

Response to consultation on possible closure of Bramblebrook House: R K Taylor

4. Derby City Council Residential Care Homes Performance 2006/07

Home	% Occupancy	Exp per bed (£K)	Exp per user (£K)	Staff av lgth (y.m)	Occup ranking	Exp ranking	Cont ranking
Arboretum	94.72	17.061	18.012	5.10	4	2	8
Art Neal	94.8	24.394	25.732	9.11	3	8	3
Bramble	97.37	15.666	16.089	12.1	1	1	1
Coleridge	87.82	20.580	23.434	10.11	7	7	2
Merrill	81.44	16.969	20.836	8.5	8	5	4
Perth	91.74	16.991	18.521	7.9	6	4	5
Raynesway	93.38	17.004	18.209	6.8	5	3	7
Warwick	95.12	21.233	22.322	7.7	2	6	6
Overall	91.66	18.383	20.056				

Notes

1. Ranking scale 1 to 8, where 1 indicates **best** performance ie highest occupancy, lowest cost and longest staff service.
2. Length of service provides an indicator of continuity of staff/service user relationship.
3. It excludes income from service users (see comment below).
4. It excludes all Adult Services and Corporate overheads.
5. Figures derived from data obtained on 20 September 2007 (day 51 of the imposed consultation period).
6. Expense per service user at Bramblebrook House £3967 less than the average. This would amount to a difference of £158.68K per annum (or a difference of £385.72K compared to the most costly) for 40 service users.

The level of financial contribution made by each service user varies depending on their individual circumstances. Nevertheless service user contributions provide a substantial income stream to offset the cost of providing the service. Clearly the higher the number of available places coupled with a high level of occupancy, the greater the income. So Bramblebrook House with its 40 beds and the highest occupancy level almost certainly generates the highest income for the Council. The financial case for closure of Bramblebrook House looks ever weaker at every turn.

5. Service user perspective

In reaching its decision to consult on the possible closure of Bramblebrook House, the cabinet did not consider the residents as a factor. In my view this was a serious omission that invalidates the decision reached. This section considers the plight of Bramblebrook House from the point of view of the residents, often referred to as "service users". It is a personal account based on the privilege of visiting my mother in the home over a two year period.

Mum entered the home in October 2005 after a brief period of respite care at Warwick House. She had lived in Littleover all her life and had just suffered the loss of her devoted husband of 64 years. Dad had been the main carer for a number of years leading up to his death only five days after he was admitted into hospital at the age of

Response to consultation on possible closure of Bramblebrook House: R K Taylor

92. She had poor health and had been registered blind for many years. Suddenly she had the trauma of bereavement and loss of home.

It is impossible for me to imagine what she was going through but it was bad enough for me as the only child. Looking back now, it is hard to put into words those feelings of loss and total inadequacy. In exploring options for Mum's future, I realised that for her nothing could ever replace what she had lost.

My searching of residential care homes was not a happy experience until I visited Bramblebrook House for the first time. I was impressed with the welcome I was given, the empathy extended to me and overall atmosphere of the place. It shone like a beacon against the rest. Not surprisingly Mum was not enthusiastic to go into any home. However she was quickly welcomed into the *Bramblebrook Family*.

The staff placed her close to another resident, Vera, in the knowledge that they had known each other as children growing up in Littleover. Vera looked after Mum in those early days and months. Their friendship became a source of mutual support and as Vera's health declined subsequently Mum did what she could to support her. Sadly Vera is no longer with us.

Soon after Mum entered Bramblebrook House I was surprised to be told that they had given her a Zimmer to use. It was an example of how the home facilitates and encourages as much independence as possible. It was not long before she was able to go unaided between her room, the lounge and the toilet.

Throughout the two years the staff, and by that I mean all that work there in whatever capacity, have played their part in creating a caring community where people are treated with respect. As they go about their duties they provide social interaction that encourages the residents to do likewise. The result is a warm and safe environment, with excellent meals and a family-like community. The threat of closure is not a just reward for all that has been achieved by committed caring people over many years.

Through my regular visits I have got to know several of the other residents, some of whom never have any visitors. I have seen how they, along with all the staff, are all members of the *Bramblebrook family*. The announcement to start consultation on the possible closure of their home has caused much anguish. Despite the best efforts of staff to conduct business as usual, the threat of the loss of their home is proving a source of unnecessary stress and for some it is affecting their health.

For my mother, there are many factors about Bramblebrook House that make it ideal in meeting her needs. Everything to meet her daily needs is on the ground floor and the rooms are light and airy. These factors are particularly important as she has extremely limited vision and she has become more frail in recent months. The absence of steps and a layout to which she has become accustomed, help her to compensate for the lack of sight.

Bramblebrook House is close to her roots, which enables her to receive regular visitors from fellow members of Littleover Baptist Church as well as visits from family and friends. This social interaction and regular reinforcement of links with issues from the locality and the past are particularly important. The loss of such

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regular social interaction would quickly result in deterioration in mental faculties. Similarly, knowing that she is within the area served by the GP practice that she has been with all her life is a vital reassurance. It is significant that the frequency of doctors visits required since she has moved to Bramblebrook House has fallen, reflecting an improvement in general health, as a result of the caring community environment.

Like other residents, Mum enjoys the friendship of staff as well as that of fellow residents. The destruction of such relationships, which would accompany closure of the home, would be harmful. There is no sensible reason to break up the *Bramblebrook family* – the effect on this family would be devastating.

6. Human Rights Act Implications

A further worrying aspect of the Council's failure to consider the service users is the implications for their rights under the Human Rights Act. The implications in respect of their human rights have not been explained. That raises the question as to the extent, if at all, the Council has assessed how residents human rights would be affected. What will the Council do to ensure that the residents' human rights are not eroded, or worse, ignored? The proposed closure clearly has implications in respect of their Article 8 rights to a private and family life and a home, and could at worst affect their Article 2 right to life itself. It would appear that the Council has done nothing to explore or clarify this issue.

7. Staff perspective

The views of staff were not taken into account in reaching the decision to consult on possible closure. Most of the staff have worked there for many years. The caring family-like community is testimony to their dedication and commitment to building relationships and encouraging residents. From the onset, once they had been informed along with the residents on 1 August of the possible closure, they were instructed to "say nothing" about it.

The instruction to "say nothing" speaks volumes about the Council's intentions and general handling of the whole process.

8. Cost benefit analysis

Before embarking on consultation on the possible closure of a residential care home it is reasonable to expect that a cost benefit analysis would be done. In this case a copy of such an analysis was requested on 2 August, but has not been provided. Either such an analysis has not been done or a decision has been made not to disclose it.

Let us consider what factors should be taken into account starting with the costs:

- To current residents and their families/friends
- To future service users
- To the Council

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The threat of possible closure of a care home is known to cause stress and related illnesses for residents and those close to them. The full process through to closure, destruction of the family community and enforced removal can have fatal consequences. Professor David Jolley (a Consultant in the Psychiatry of Old Age) has commented that:

"From common experience, from my clinical experience, and from an informed review of the literature, it is an inescapable truism that relocation is a stressful event and can precipitate problems of mental health, physical health and even bring forth death"

What value has (or will) the Council place on these costs to the current residents and their families?

The cost to future service users will be a reduction in choice and in this case the loss of the best. The ever growing number of elderly people in Derby will be denied the opportunity to join the family community which has proved to be so effective.

The costs to the Council are likely to include those relating to:

- Administration of the consultation process
- Managing the outcome of the consultation
- Legal matters
- Reputation damage
- Higher rates for services in the independent sector in future

Now let us consider the benefits of a closure:

- For current residents and their families/friends – nil
- For future service users – nil
- For the Council – the money coming from sale of the land

Although the Council have repeatedly refused to disclose the value of the land, it is difficult to see how there is a sound business case for its sale. Particularly as it is a one-off benefit against short, medium and long term costs. It appears to be asset stripping of the most callous kind – the Council get the money for the land: the vulnerable elderly pay the price.

The others who would benefit from the closure are, of course, those offering services in the private sector. Ever increasing profits would be gleaned by them; less and less choice would be available for the local service users.

It raises questions that need to be answered by the Council:

1. Has a cost benefit analysis been done? If so make it available.
2. What is the business case for the proposal? Make it available.
3. What value has been placed on a life?
4. Is the aim to close a well run caring Council home in order that inferior ones in the private sector might survive and prosper?

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9. Consultation process

There have been many shortcomings in the way that the consultation process has been conducted. The cabinet paper stated that the “process needs to be managed sensitively to minimise the upset and anxiety for residents and their families”, yet the opposite has been achieved. Examples of the shortcomings are given below.

1. No risk assessment was done prior to the commencement of consultation. In particular the risks to the health and well being of the vulnerable individuals living in the home were not assessed.
2. The Senior Assistant Director arrived at Bramblebrook House on the morning of 1 August 2007 and announced the start of consultation to a gathering of the residents and staff. No attempt was made to invite relatives/friends of residents to be present to support and comfort loved ones.
3. A request by a relative of one of the residents (who just happened to be visiting at the time) for the speaker to speak more loudly, so that residents might hear was ignored.
4. The announcement left some residents in tears. Some staff were still equally upset later that evening.
5. A close friend (whom my mother considers being one of the family and who is one of the named contacts on her Care Plan) was not admitted to the meeting on 1 August, despite arriving at the home before it began. It was suggested that he return after the meeting had ended.
6. The letters from the Senior Assistant Director were impersonal (being addressed to Dear Resident), again displaying insensitivity and lack of respect to the vulnerable residents.

Ever since the announcement to begin consultation there has been a failure to provide full disclosure of all relevant information. Repeated requests for information have been made in writing and orally in discussions but what little has been provided took a long time and without doubt there has not been full disclosure. Proactive suggestions to convene a “focus group” to assist the process were refused. The shortcomings are illustrated below.

1. The Senior Assistant Director demonstrated a marked reluctance to communicate with consultees but eventually agreed to meet me on 29 August, this after I had been told that she was not available until October. At the meeting she again declined the suggestion of a “focus group” to enable the consultation process to progress.
2. Many requests for information have been made – little had been provided until 20 September (Day 51 of the imposed 90 day consultation period when partial answers to some questions tabled on 20 August were received)).
3. Our requests for information are recorded in:
 - Mr Holdridge’s notes of the meeting with Mrs E Taylor on 2 August 2007
 - My letters to Ms Downey dated 6, 13 & 20 August 2007 and 5 September 2007
 - My letters to Mr Holdridge dated 20 & 23 September 2007 and 8 October 2007

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I am not alone in experiencing difficulty in obtaining information. Clearly the consultation was not helped by those responsible taking leave during the consultation and in effect reducing the 90 day period.

The failures to provide information or to reply to requests within 20 days appear to be a violation of the Council's own Freedom of Information Act Policy dated 25 May 2005.

Correspondence received on 8 October 2007 inferred that all my questions had been answered. That was, and still is, far from the case. Reference to the documents above makes this clear. Other correspondence received was inaccurate in its reference to when requests for information had been made and the extent to which they were answered and therefore misleading. It demonstrates inadequacies in the Council's tracking of information and raises questions as to how the Council will be able to demonstrate that it has conscientiously considered comments raised during consultation.

The visit of Councillor Hussain to the home on 24 October 2007 (day 85 of the 90 day imposed consultation period) was the first meeting with the Cabinet Member for Health and Social Care that I had been invited to attend. I understand that he had visited previously when selective invitations were issued. Why did the Cabinet Member responsible for this wait until the 85th day of the consultation period to meet families and friends of residents?

10. The Scrutiny process

At no point did those managing the consultation process volunteer information about the role of the scrutiny committee or even mention its existence. Through my own research I discovered that the Adult Services and Health Commission had a role in scrutinising cabinet decisions on such matters. Further investigation revealed that their next meeting was to be held on 3 September and that the previous meeting had been held on 16 July (and therefore before the cabinet meeting when the decision was made on 31 July). Contact with the coordinator of the commission confirmed the agenda for the September meeting and that it was an open forum.

The *Closure of Bramblebrook House* was an agenda item for the meeting. On the same agenda was the *Derby Older People's Plan*, which only a few days earlier we had been informed was of no relevance to the consultation on the possible closure of Bramblebrook House. It is difficult to reconcile this with the comments made in discussions at the commission meeting, indicating how all the activities are linked.

Consultation on *possible closure* began before the Cabinet decision had been scrutinised by the Adult Services and Health Commission on 3 September 2007. Furthermore the paper to the Commission asked members to give their considered response to *the closure*. So the Commission was not given the opportunity to scrutinise the cabinet decision to *begin consultation on possible closure* until over a month after it had been announced: it was asked to give a considered view to *the closure* two months before the consultation period closed.

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The consultation plan attached to a letter from the Senior Assistant Director (13 August) stated that the consultation period “**could be adjusted** if scrutiny challenges the proposal to consult”. Yet, when asked about it on 29 August, the same director was quite clear that the consultation period would not be changed. Her view was that ample time had been allocated for residents to express their views. This sequence reveals a total disregard of the consultation process, in the minds of those proposing the closure and those taking it forward.

The Commission did not show the same disregard for the matter and decided at its meeting on 3 September to conduct its own review of the subject. Along with others I was invited to contribute to the evidence gathering session on 27 September to assist the review. **At the time of writing I am unaware of the outcome of that review.**

11. Values and Behaviours

Like many organisations the Council department involved has a formalised statement of their values. First among their stated values is that they believe in:

“treating people as individuals with respect and offering service appropriate to their individual circumstances and preferences”

The staff at Bramblebrook House are the embodiment of this, embracing it in their relationship with residents. The same can not be said for the way in which the possible closure of Bramblebrook House has been handled. Those involved have shown little evidence of espousing such values. It is difficult to reconcile the behaviours exhibited in making the initial announcement at the home with *treating people as individuals with respect*. Subsequent correspondence provides further evidence of the failure to display any belief in this simple value in practice.

The current residents enjoy a *service appropriate to their individual circumstances and preferences* so its threatened withdrawal is again at odds with the value the Council claims to believe in.

However there is still the opportunity to restore confidence that the beliefs in these values are genuinely held. The statement goes on to say that the organisation also believes in:

“listening to people and involving them as much as possible in decisions which affect them”

Despite missing opportunities to involve people as much as possible, there is still time to demonstrate that they have been listening during the consultation process. This would be achieved by reaching a decision to keep the home open. The early removal of the threat of closure would be tangible proof that the values exist in practice. The question is - do they believe in these values?

*Response to consultation on possible closure of Bramblebrook House: R K Taylor***12. Considering residential care strategy**

The possible closure of Bramblebrook House is the subject of the consultation but this should not be considered until a clear strategy has been agreed to meet the needs of the current and future elderly populations of Derby. Only after a clear strategy has been developed can the future of any residential care homes be sensibly considered. The following key factors need to be taken into account:

1. The Government's stated aim is for service users, their families and carers to have control of services (rather than bureaucrats and professionals).
2. The elderly population in Derby is going to increase significantly with the number of people over the age of 85 increasing by 60% within 20 years.
3. With the massive increase in numbers of elderly people the demand for residential care homes that enable a level of independence will increase.
4. Sufficient capacity in care homes needs to be maintained to enable a "home of choice" to be selected.
5. The effectiveness of "Extra Care" and its medium to long term effect on demand for residential care is not known.
6. Recent experiences of various "care in the community" initiatives do not inspire confidence that the claimed benefits of "Extra Care" will materialise.
7. A clear rational strategy to meet present and future service user needs is required before any considerations of closures.
8. The views of current and potential future service users are essential in the development of a suitable strategy.

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Appendix 1

Comments on the paper considered by the Council Cabinet on 31 July 2007

A copy of the Council Cabinet paper entitled "*Options appraisal for Council's Residential Homes for Older People 2007/08*" was provided during the course of the consultation. Comments on that paper are given below against reference points in the order in which they appear in the paper.

Page 1:

- Paragraph 1.1: *The demand for residential care is falling* statement is not supported by evidence in the paper. The Council's own performance targets have driven down the number of placements – not demand.
- Paragraph 1.2: *The overall vacancy rate....is increasing* statement is not supported by evidence.
- Paragraph 1.3: The statement is misleading – the profiles presented in the paper are incomplete, selective and limited in presentation.
- Paragraph 2.1: The recommendation can not be derived from objective reasoned consideration of the report contents.

Page 2:

- Paragraph 3.1: *The demand for residential care has been falling* statement is not supported by evidence in the paper. The Council's own performance targets have driven down the number of placements – not demand.
- Paragraph 3.2: This statement is not proven. The effect of "alternative options" is not known. The huge rise in the number of elderly people is likely to increase the need for residential care home places.
- Paragraph 3.3: States that it is "*very difficult to justify funding under-utilised provision*". Bramblebrook House is not under-utilised; it has the highest occupancy levels.
- Paragraph 3.4: Appendix 2 does not contain *all the relevant factors*. Taking into account the factors presented does not logically lead to the recommendation.
- Paragraph 3.5: States that "*The consultation process needs to be managed sensitively*" but this has not been done.
- Paragraph 3.5: Proposes that once consultation begins "*no new permanent residents are admitted to the home*" and that "*residents and their families will be encouraged and supported to visit the alternative residential care homes*". The effect of such actions almost certainly destabilises and erodes the close knit family community of permanent residents. As such they may be seen as undermining the purpose of consultation by changing the status of the home while consultation on its future is in progress.

Page 3:

- Paragraph 1.1: *The demand for residential care in Derby has been falling steadily for several years* statement is not supported by evidence in the paper.

Response to consultation on possible closure of Bramblebrook House: R K Taylor

The Council's own performance targets have driven down the number of placements – not demand.

- Paragraph 1.2: *The fall in demand has resulted in increasing vacancy levels* statement is not supported by evidence.
- Paragraph 1.2: States that *lower occupancy results in poorer value for the Council*. So why make a recommendation to close the home with the highest occupancy and therefore of best value to the Council?
- Paragraph 1.3: Refers to residents exercising their rights for a "Home of Choice". Residents of Bramblebrook House are living in their home of choice.
- Paragraph 1.3: States that there is increasing capacity in the independent sector. Surely this is no reason to close a Council home. Is the aim to ensure greater occupancy of independent homes?
- Paragraph 1.4: Refers to "high quality provision available in the private sector". No objective evidence is given to support this subjective statement. If that is the case it begs the question as to why there is falling demand there. Particularly when the high quality Bramblebrook House has such high occupancy.
- Paragraph 1.4: States that it is "increasingly difficult to justify funding under-utilised provision". Bramblebrook House is not under-utilised; it has the highest occupancy levels.
- Paragraph 1.4: The sentence "Reducing the ... will release efficiencies that will contribute to restoring financial balance" is gobbledegook.
- Paragraph 1.5: The *full appraisal* is not in the appendix as claimed. Nor has it been provided at any time during the consultation period. Key details are not provided. Capital and revenue costs are not given as claimed, nor are possible land receipts.

Page 4:

- Paragraph 1.6: Lists a number of factors to be taken into account. The list is not comprehensive; it omits factors which **should** be taken into account. The nine bullet points are selective, limited and exhibit elements of double counting.
- Paragraph 1.6: Does not explain how the factors are taken into account but produces an unsubstantiated conclusion that Bramblebrook House should be recommended for closure. Requests for an explanation of the method of evaluation, the rationale used and the calculations and results have been refused. So we are told that a list of factors has been taken into account and as if by magic the answer is a lemon! How can the Cabinet be satisfied with an approach which is so clearly flawed? Did the Cabinet not want to take account of such factors as levels of occupancy, relative efficiencies, service user views or the effect closure would have on them?
- Paragraph 2.1: Keeping Bramblebrook House open will not result in worsening occupancy.
- Paragraph 2.2: States that "disinvesting in the independent sector....is not an option because the obligation to work with older people around their Home of Choice". So how can it be an option to close Bramblebrook House which has been and continues to be the Home of Choice for service users?

Response to consultation on possible closure of Bramblebrook House: R K Taylor

- Paragraph 2.3: States that “*All eight homes have been considered equally, as set out in Appendix Two.*” The evidence presented overall in all 16 pages of the paper (including the appendices) does not support the notion that all 8 homes have been considered equally.

Page 5: Appendix 1

- Paragraph 5.1: Mentions the *modernisation programme* for the first time. What is it?
- Paragraph 5.1: Mentions supporting *the Council’s objectives of healthy, safe and independent communities*. How would the closure of Bramblebrook House support that objective? Bramblebrook House houses a *healthy, safe and independent community*, so its closure would destroy the very thing the Council claims to be aiming to create.

Pages 6 to 15: Appendix 2

- There are many instances where information is given undue emphasis because it might be used to support the recommendation: any information which might be used to undermine the recommendation is qualified to nullify its effect
- One of the homes does not meet CSCI registration standards and would require £0.5m investment to achieve it. It also has *many maintenance and upkeep issues*. Yet the paper recommends closing Bramblebrook House which already meets the standards, does not need £0.5m investment and does not have the other problems. Why is that?

Page 16: Section Three

- Presents data from 2001 but the paper’s aim is about meeting service user needs in 2007/08 and into the future. Office for National Statistics data are available for the period and plans for large domestic housing developments around Bramblebrook House are known. Why is this information not presented instead and taken into account in consideration of options?

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24 October 2007

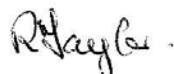
John Holdridge
Assistant Head of Direct Services for Older People
Derby City Council
29 St Mary's Gate
Derby
DE1 3NU

Dear Mr Holdridge

Bramblebrook House – Consultation on possible closure

I enclose my formal response to the above. Please acknowledge receipt by signing and returning the attached form.

Yours sincerely



R K Taylor

Home	Capacity	Factors indicative of possible closure	Factors against possible closure
Arboretum	38	No current specialism. Other homes in locality. No strong community ties	Opposite Morleston Day Centre = possibilities for future development. Effect on residents. Second lowest site valuation.
Arthur Neale	25 + Day Care	Poor state of repair Fewer permanent residents affected	Strong community identity Day Services would need to be re-provided Effect on residents Site large enough for Extra Care development Site fully 'belonging' to older people's services – priority site for older people's services for the future.
Bramblebrook	40	No current specialism No strong community ties No capacity for expansion Potential high capital receipt (highest by considerable margin), with additional value if Humbleton View is sold at the same time.	Effect on residents

Home	Capacity	Factors indicative of possible closure	Factors against possible closure
Coleridge	40	No strong community ties	<p>Larger home – some room for possible change/expansion in future.</p> <p>Specialist home – capital and staffing investment.</p> <p>Particularly potentially damaging effect on residents of move (dementia specialist unit)</p> <p>Third lowest site valuation.</p>
Merrill	40	<p>No current specialism</p> <p>No strong community ties</p>	<p>Effect on residents</p> <p>Capital receipt only ⅓ of joint Bramblebrook / Humbleton View estimate</p> <p>Capacity for future expansion</p>
Raynesway	35	<p>No current specialism</p> <p>No strong community ties</p> <p>No capacity for expansion</p>	<p>Limited care home capacity locally</p> <p>Effect on residents</p> <p>Lowest capital receipt of all homes</p>
Warwick	28 (including 6 intermediate care)	<p>Limited impact on residents (four permanent)</p> <p>No strong community ties</p>	<p>Intermediate Care specialism (£130k investment in 03 / 04) – joint service with PCT</p> <p>Capacity for future expansion</p> <p>Fewer revenue savings (22 beds instead of 25 – 40)</p>

Home	Capacity	Factors indicative of possible closure	Factors against possible closure
Perth	39	No strong community ties	Intermediate care specialism – current capital investment (builders on site) – joint service with PCT). Effect on residents