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Gloucestershire
COUNTY COUNCIL

Gloucestershire County Council Care Homes in Stroud: Engagement Report

5 July 2019

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1 INTRODUCTION

Background and context

1.1 Introduction

This report provides independent analysis of the outcomes of an engagement exercise by Gloucestershire County Council (GCC) into the future of their care homes in Stroud.

ASV¹ was commissioned to independently facilitate and analyse two engagement events arranged by GCC to explore attitudes among residents, family members and carers into the issues they face keeping care homes open in Stroud.

Two engagement meetings were held on the morning and afternoon of 26th June 2019, these were at:

- Southfield Care Home 10.00 to 11:30 am;
- Wyatt House Care Home 2.00 to 3:30 pm.

There was a strong turnout at each of the engagement events:

- Southfield 40 relatives/carers and residents;
- Wyatt House 35 relative/carers.

In addition, five written submissions were received via email or letter as part of this engagement activity.

All activity undertaken by ASV is conducted in accordance with the market research Society's code of conduct and guidelines. All opinions and statements are reported anonymously unless the respondent has given us direct permission to reproduce their comments, as is the case where letters and emails were received.

¹ ASV is the trading name of ASV Research Ltd

1.2 Background²

Gloucestershire County Council currently own 15 care homes across the county, which since April 2005 have been run by Gloucestershire Care Partnership (GCP). GCP is a joint venture between the Orders of St John Care Trust, a not-for-profit charitable trust providing care for older people, and bpha, a social housing association.

GCP run four care homes in Stroud and Dursley providing 149 care home beds in total, these are:

- The Elms;
- Henlow Court;
- Southfield; and
- Wyatt House.

The Care Quality Commission (CQC) has 25 registered care homes for older people in the Stroud areas providing 964 places. 13 of these homes, including Southfield, are residential care homes offering a total of 326 places. Most care homes try to operate at an occupancy level of between 90- 95% in order to remain financially sustainable. This means that any one time there should be fewer than 96 vacancies in the Stroud area (assuming a 90% occupancy level.) The number of beds and levels of occupancy in GCP homes is:

- The Elms provides 45 nursing and residential beds and an occupancy of 82%;
- Henlow Court provides 40 nursing and residential beds and an occupancy of 95%;
- Southfield provides 34 residential beds and an occupancy of 82%; and
- Wyatt House with 30 nursing and residential beds, specialising in dementia and an occupancy of 93%.

In addition to the levels of occupancy issues including future demand and the physical fabric of the buildings were considered by GCC in their review.

In regard to the future demands of the ageing population in Gloucestershire Evolving Communities were commissioned by GCC to ask older people and the residents of care home provision in the county. Evolving Communities' report highlighted the choice to continue living at home for older people:

'People said that "they would always prefer to stay in their own homes even if their condition deteriorated."

GCC are responding to this change in demand for older peoples' care by working with domiciliary care providers to ensure there is enough high-quality domiciliary care

² Information provided by Gloucestershire County Council as part of their briefing to family/carers (see appendix one for detail)

provision in the county. In the medium term this will lead to a reduction in the need for care home beds.

With regard to the ‘fabric’ of GCP care homes, over the past five-to-ten years there has been an increase in the number of care homes being built in the county and as a result the availability of care home beds has increased in all areas, including Stroud. Many of these new care homes provide both residential and nursing care which can avoid a further move if a resident’s condition deteriorates. In addition, newer care homes offer modern facilities, including en-suite bathrooms, wider corridors and larger bedrooms to accommodate equipment which are widely regarded as a standard requirement today.

GCC has undertaken a review of each of the GCP care homes in the Stroud and Dursley area considering condition and occupancy and as a result is conducting an initial engagement exercise with residents and relatives/carers, the focus of the initial engagement is Southfield and Wyatt house for the following reasons:

- Southfield is being considered for closure due to the fact that it does not provide nursing care. There are two larger GCP residential and nursing homes in the Stroud and Dursley area. In addition, Southfield does not offer the opportunity to be modernised in order to meet future care needs.
- Wyatt House is also being considered for closure due to its physical environment (the ‘fabric’ of the building) no longer being able to meet the needs of dementia residents requiring a care home now and over the medium term.

Of the four GCP care homes those currently excluded from this initial engagement exercise are:

- The Elms has similar occupancy levels to Southfield but there is greater need for nursing care home provision. The Elms being a larger care home is more viable than a smaller care home, therefore closing The Elms is not being considered at this time.
- Henlow Court is a nursing and residential care home and has high levels of occupancy. Henlow Court is the main provider of residential and nursing care for people from the Dursley area consequently it is not being considered for closure.

It should also be clear that the scope of this initial engagement is set by the fact that while there are other care homes in Stroud and Dursley in similar circumstances, these are not owned by GCC and cannot be considered in this exercise.

It is also equally important to state that this engagement is taking place before any final decision has been made about the future of either Wyatt House, Southfield or any of the other GCP care homes in the Stroud and Dursley area.

It is against this overall background that letters were sent from GCC to all the family, carers or advocates listed as the first point of contact for residents of Southfield and Wyatt House. These letters invited them to participate in an initial engagement event at the relevant care home on the 26th of July, the letters were received on the 25th of July.

GCC had separately commissioned ASV to act as independent facilitators of the events to ensure all voices and opinions were heard.

1.3 Report Structure

following this brief introduction the remainder of this report is set out in the following manner:

- **Section Two:** provides an overview covering the key points and themes emerging from discussions at Southfield;
- **Section Three:** provides an overview covering the key points and themes emerging from discussions at Wyatt House;
- **Section Four:** provides a summary of the points made by people unable to attend the engagement sessions, submitted either by letter or email; and
- **Section Five:** provides a summary of the discussions and any conclusions that we can draw from this engagement exercise.

Provided as appendices are the briefing notes sent out to relative/carers and the written submissions received by ASV for consideration as part of this analysis.

2 SOUTHFIELDS

Summary of discussions – morning of 26th June 2019

2.1 Introduction

The engagement group meeting was held at Southfield Care Home, Stroud, between 10.00 to 11:30 am on the 26th June 2019. The group comprised approximately 40 relatives/carers and residents. The meeting was held in the residents' lounge, organised by the care home staff, in addition to the carer/relatives and residents a representative of Gloucestershire County Council and the Orders of St John were in attendance, as observers to the proceedings. The research team from Evolving Communities were also present.

Prior to the meeting commencing those present were asked for permission for the observers to remain in the room, which was given by all present.

The conversation was conducted against a broad semi-directive discussion guide covered the following broad topics, with enough flexibility to allow the participants the opportunity to explore the issues most important to them:

- First impression of the proposals for closure;
- The likely impact of any closure on residents and family/carers; and
- Should any closure decision be made where would the best location be for an alternative home be.

2.2 The discussions

The discussion with residents and family/carers at Southfield was fairly wide ranging and as would be expected emotionally charged around such a sensitive area. The main themes of discussion covered:

- The group's overall impressions;
- The process of engagement;
- The importance of the atmosphere, relationships, and community at Southfield;
- The personal impact of the proposals on residents and their family/carers;
- Issues around the value of the real estate represented by Southfield and any concerns over property conditions;
- Issues around choice and independence for residents;
- Concerns over an apparent lack of empathy from decision-makers to the needs and feelings of both residents and family/carers;
- The importance of continuity of care to both residents and family/carers;
- Concerns over the apparent lack of consideration of the quality of care provided at Southfield; and
- Offering alternative solutions for consideration.

Each of these themes is discussed in turn below.

2.2.1 Overall Impressions

The group discussed their initial impressions of the letter they had received, and any concerns raised. Perhaps the most immediate impact was felt by the residents present who expressed real concerns over the impact of any potential closure Southfield.

‘... it’d be the end of us, perhaps that’s what they want... kill us off a bit early ...’

There was also the feeling that this was a continuation of a tradition of poor treatment by the council spanning the entire lives of many of the residents.

‘... We’ve been pushed around for all our lives and the council have always been in the middle of it...’

The feeling from residents was that the proposals were purely motivated by a desire by the council to save money with little consideration for the impact on the people residents at the home.

‘... Money, money and to hell with people...’

Done deal

The group expressed overall cynicism that this proposal, coupled with the very short notice at which the meeting been called, indicated that the council had made its mind up in advance. Many believing that this was a way to release capital to prop up overstretched budgets.

‘... Is it the house they want other ground were on?’

There was also more pragmatic view that if the orders of St John were struggling financially because of low bed occupancy then these discussions were largely academic as the charity’s business at Southfield is now longer sustainable. In other words, again, the decision has been largely made.

‘... No point saying anything if they’ve made their mind up that the business isn’t sustainable...’

Care at home

The group spent time discussing information in the briefing letter related to people’s desire to stay at home longer. The group recognised that this is predicated on the council putting in place improved/enhanced social care support people staying in their home. However, two points of view emerged, firstly it’s not always possible for people to remain in their home due to advances in their condition, particularly dementia. Alongside this experiences by people in the group of social care were largely inadequate with the belief being that this had not improved and in fact got worse so at the moment the ambition to support people staying at home is just that, which in turn increases demand for facilities like Southfield.

‘... Of course people want to stay at home, but that’s not always possible and people need places like Southfield...’

‘... My mums been here for 18 months, before that care at home shocking... got worse...’

Safety and security

overall the group felt that safety and security offered by Southfield was exceptional, with no concerns that safe and effective care was provided 24-hours a day.

‘... I don’t have to worry about my mum, if she’s fallen, and if she has that she is going to be lying there for hours before I find her...’

In terms of the overall building group felt continued to function appropriately and offer a safe secure location for their loved ones. The collective opinion being that there was little evidence that minimum under occupancy and requirements and some improvements to the building when not good enough reasons to consider closure of Southfield.

‘... I can see no good reason to close, a tiny bit of under occupancy...the building issues are easily fixed if they want...’

2.2.2 The process

the group were unanimous in the opinion that receiving a letter a day before the engagement meeting was not an appropriate approach and did not allow people the opportunity to fully participate in the process. There was also feeling that this disadvantaged people who were working and unable to get the time off.

‘... 24 hours is not enough notice...’

Questions were also asked regarding a very short notice in the context of how long the council had been considering the situation. The view being that the council must have had sight of the options for some time which in turn should have allowed them to provide much longer notice of the meeting.

‘... How long has this been brewing this just hasn’t come out of thin air...’

One participant raised the point of residents who had recently joined the community at Southfield, essentially asking why admissions were not stopped if it was apparent that there would be significant disruption in the near future.

‘... (resident we care for) came in February... If this is been on the cards for some time we could have avoided a very traumatic experience...’

2.2.3 Atmosphere, Relationships and Community

Residents were very clear that being in Southfield had had a very significant impact on improving their condition.

'... I closed down on my brain... And Southfield built me back up to where I am now...'

This was partially attributed to the very strong social relations built up and encouraged at Southfield and concern over the impact this would have on the residents and significantly consideration of the effect on staff.

'... Breaking up a family...'

The relationships with staff cited, particular by residents, as a key factor in the very supportive and positive atmosphere at Southfield.

'... Not staff, they're our friends... take away that. You take away everything...'

Family/carers were very clear that Southfield provided and holistic environments to the benefit of all their residents which is driven by the attitudes of staff and the encouragement to build relationships resident-to-resident.

'... It's not just the building, it's the staff and the friendships you can't rebuild that anywhere else...'

Participants also identified a wider element of community which extended beyond Southfield to include regular and ongoing contact with the outside world. This was felt to provide significant benefits to residents.

'... our church comes in and does the service here once a month...'

'... we have a lady who brings a clothes shop in... everything we need...'

'... even the hairdresser's part of the team...'

2.2.4 Personal Impact

in considering personal impact the residents were particularly concerned and agitated by the proposals, feeling it a major disruption at a time in their lives when they were looking for stability and security.

'...now we're in the twilight of our lives, why should we start again?'

Family and carers were also concerned about the impact that this engagement - about what is at this point in time only the possibility of a closure - is having on residents.

'... for the sake of three or four people my dad has paced up and down the corridors all night because of a letter he received yesterday...'

This concern had deeper roots for family/carers in terms of their views of the potential impact on their loved ones, specifically the likelihood that this would precipitate the

client in their condition which may lead to death earlier than had they stayed in their settled location at Southfield.

'... Moving puts their lives at risk... Had to move mother-in-law two years ago and she died within two weeks...'

'... This their home, to move them put their lives in risk...'

2.2.5 Cost

Participants were significantly concerned that no information was provided on the likely costs of the alternative care beds available in the Stroud district. The view being that this may in fact put the quality of care enjoyed at Southfield out of the reach of the finances of many leading to compromise and poorer care for their loved ones.

'... do we know, for instance, how much more it will cost to go into the elms compared with here...'

2.2.6 Real Estate and Property Condition

There was a consistent feeling that the prime motivation for this engagement was the value of the land currently occupied by Southfield and the potential to realise financial gains for the council from its sale. Some even went as far as suggesting that it was likely that the council had already put plans for the redevelopment of the site in place.

'... They want to build houses and apartments here, I bet they've already got a developer...'

This was further exacerbated by the view that Southfield occupies a prime site which is very commercially attractive.

'... Most expensive road in Stroud...'

2.2.7 Choice and Independence

A clear theme emerged from discussions around choice and independence. When speaking about choice there were two clear differentiations; personal choice for the resident and the choice of care home taken by the family and carers. Alongside this it was felt to be important that the extent of independence enjoyed by residents at Southfield was understood.

Personal choice

Participants in the group reported that residents always have choice of food of activity and whether they want company or to be on their own.

Choice of home

Participants largely described a process of searching for homes which involved looking at other facilities in the Stroud area. None were felt to have offered the quality that Southfield offers. Southfield enjoys an excellent reputation in the district and is held in high regard. In addition, the overwhelming opinion is that Southfield is

excellently run which is most visibly apparent in the maintenance and upkeep of the facility, one participant referred to it passing the ‘smell test’ referring to the prevalence of the smell of urine in other homes.

‘...never heard a bad word said about this place ever...’

‘... We looked at five homes before we found Southfields...this was by far the nicest and cleanest...’

Independence and dignity for residents

The group were very clear in their view that Southfield is an environment in which the care and personal dignity of all residents is paramount.

‘... Allowed to keep their own dignity...’

Residents also expressed the fact that living in Southfield provided them with a degree of independence that they felt they would not enjoy in another care home setting and particularly if the closure lead to them returning home to live with their children.

‘... don’t want to go back to live with our kids... and if the kids were honest they wouldn’t want us either...’

2.2.8 Empathy

participants were particularly vocal the organisers moderators of the group and asking their opinions of how they would feel if they were in their situation.

‘... How would you feel if it was your home closing, and you had to move miles away from your family...’

Faced with this the honest answer from those questioned was that they would feel exactly the same as the participants do, which led to discussion around the need for empathy amongst those making the decision on the future of Southfield. It was felt that the ultimate decision-makers need to really understand the impact and benefits the group felt Southfield offered before making any decision.

‘... come and see how we live... not just for a week...’

Ultimately the group felt that decision-makers were looking at statistics alone and not considering the impact on people of any potential closure Southfield.

‘... Don’t they realise this is people’s home...’

2.2.9 Continuity

The continuity of the care received by residents was an important factor in Southfield’s success, the most regularly cited reason was the high levels of staff retention of the Orders of St John care team, at all levels from caretaker to general manager.

‘... I’ve been coming here two years and it’s mostly the same staff... you don’t get huge turnover here...that’s important, it’s a continuous relationship...’

Alongside the consistency of the care staff, it was also felt to be very important that the visiting team was also consistent. The importance of consistent care from the visiting GP was praised highly, stressing the importance of building a relationship and trust over time, which was felt to be difficult to replicate.

‘... the doctor relationship is great; they’ve got used to it...’

2.2.10 Quality

Whilst quality of care was frequently discussed in terms of the general care delivered by the staff at Southfield, very specific concern was raised over the Care Quality Commission rating of the home more specifically that of other care beds in the district. Just taking the other GCP care home under consideration for a possible closure, participants in the group felt that Wyatt compared very unfavourably with Southfield.

‘...(Southfield) comes out “good” (CQC)... Wyatt has three “needs attention” ...’

There were also practical concerns about the future placement of their loved ones in the event that ultimately it is decided that Southfield does need to close. The opinion was that it was difficult to find care beds in Stroud district with similar CQC ratings, causing real concerns about finding beds and more importantly finding beds that allow family/carers to retain the relationship with their loved ones that they currently do, simply due to additional distances to travel or lacking the means to travel any distance increasing isolation.

‘... If this is good where should we move of family... into a home that’s not good?’

2.2.11 Alternative considerations

the group worked together to develop some ideas as alternatives to closure Southfield, related to:

- Marketing;
- Wyatt House residents; and
- In the worst case working to move residents in a way that protects friendship groups.

Marketing

The group identified that the under occupancy amounted to a maximum of four beds at any one time. The feeling was that Southfield was an undiscovered treasure, with few people being aware of it as a choice for their loved ones. It was suggested, as a

question, that GCP could be more proactive in advertising vacancies encouraging uptake and thereby taking some of the commercial pressures of the Orders of St John.

‘... What are you doing to increase bed capacity... advertise, promote...’

Move Wyatt House residents

The group suggested that the less complex residents of Wyatt House could fill some of the vacancies at Southfield. This was felt to be a possible other commercial solution to the vacancy pressures on the charity, particularly in light of the less favourable CQC rating of Wyatt House. However, the group also recognised that this was far from ideal, and very mindful of the potential impact this would have on family/carers and residents of Wyatt House who were facing very similar circumstances to themselves.

‘... no-brainer... close Wyatt House and move residents, they can take the extra bed here...’

Group moving together to maintain relationships

With a certain sense of fatalism, being mindful that the decision to close Southfield may be inevitable, the group were focused on maintaining some of the sense of community that exists within the home. The group urged the consideration was given to moving residents in groups in such a way that despite it being a new care home the transition could be made slightly less traumatic by having familiar faces around them.

‘...if a group...wanted to move together to maintain their friendship...’

3 WYATT HOUSE

Summary of discussions - afternoon of 26th of June 2019

3.1 Introduction

The engagement group meeting was held at Wyatt House, Stroud, between 2:00 and 3:30 pm on the 26th June 2019. The group comprised approximately 35 relatives/carers and residents.

The meeting was held in the former day care centre in Wyatt House.

In addition to the carer/relatives and residents a representative of Gloucestershire County Council and two from the Orders of St John were in attendance, as observers to the proceedings. The research team from Evolving Communities were also present.

Prior to the meeting commencing those present were asked for permission for the observers to remain in the room, which was given by all present.

As in the previous session at Southfield, the conversation was conducted against a broad semi-directive discussion guide covered the following broad topics:

- First impression of the proposals for closure;
- The likely impact of any closure on residents and family/carers; and
- Should any closure decision be made where would the best location be for an alternative home be.

Enough flexibility was provided in the discussions to allow the participants the opportunity to explore the issues most important to them.

3.2 The Discussions

The group discussion at Wyatt House was entirely with family/carers, residents having severe dementia were unable to participate on their own behalf. As would be expected the meeting was emotionally charged although it has to be said all participants were constructive in their comments despite feelings running high and should be commended for this.

The group's discussions uncovered the following major themes;

- The group's overall impressions;
- The overall lack of confidence in the group through lack of communication and information in the briefing letter received;
- Questions over the assertions that Wyatt House was no longer fit for purpose;
- The views of the group that many residents while in no longer had the capacity to make decisions had made the choice of Wyatt House when they did have such capacity;
- Concerns that the engagement process was in fact wasting time as decisions were inevitable;
- A call from the group for basic empathy to be displayed by decision-makers;

- The importance of trust, relationships and the overall environment to the well-being of residents of Wyatt House;
- Concerns over the stipulation that the building itself can no longer provide best care;
- A discussion of what was perceived as excellent care provided by Orders of St John staff;
- The impact on everyone involved residents, family/carers, and of course the staff at Wyatt House of the proposals; and
- The fundamental issue of the availability of care beds in Stroud versus the opportunity for real choice.

Each of these thematic areas are discussed in turn below.

3.2.1 First Impressions

Not enough notice

The group were particularly vocal in the first instance around their dissatisfaction with the councils approach of notifying them of a meeting to be held next day, by letter, which in some cases was delayed or did not reach the recipient. Generally, the opinion was that this was poor practice and unfair to many.

‘... 24 hours is very unreasonable...’

‘... Poor practice to give 24 hours’ notice...’

Equally, the group were very clear that the residents at Wyatt House did not have the capacity to respond for themselves, due to this being a dementia nursing home. The opinion was that those present with power of attorney for their relatives or loved ones where the only effective voice for the residents. The short notice meant that many people were not able to be present to provide that advocate’s voice.

‘... I feel railroaded...we are the voice of the residents...’

Inconvenient time

Participants felt the timing of the meeting was very inconvenient, setting aside any of the previously discussed considerations in the short notice for the event, a single meeting during an afternoon in the working week was felt to put many people at disadvantage.

‘... A weekend meeting would be useful to allow people to get here...’

‘... I think it’s terrible that the council did it overnight... I work full-time... today is my day off, luckily...’

Those that were able to attend did so due to fortuitous shift patterns, generosity of their employer or by accepting some financial loss in order to ensure their relatives interests were represented at the meeting. Again, the consensus opinion was that this was very unfortunate and unfair.

'... I'm lucky enough to be able to attend, many others haven't, I have a letter here from someone who couldn't make it...'

'... I've had to pay someone to cover my job to be here...'

In addition, participants told of significant travel being involved to ensure they were able to act as advocates for their loved ones. Trips of 2 ½ hours to significantly more were described to achieve this.

'... I drove to Cirencester and back to pick up my father-in-law...and I'll have to do it all over again to take him back so he can be here with me...'

'... I drove from Torquay today to be here...'

Distressing for all

Participants also spoke of the distress this process because for them individually, and for the people they love. One participant, as illustration of this point, spoke eloquently of the concerns they have in disrupting their mothers routine, Tuesday is a regular visiting day, and the meeting occurred at the time usually reserved for that visit, for a person with dementia any change to routine is distressing, in this instance the participant was unsure of how to deal with this, feeling that it put undue and unfair pressure on the residents who are aware their relatives are present but not why they aren't visiting them.

'... When she asks why are you at a meeting... What can I tell my mum? Can you tell me, no!'

Equally, the participants had all chosen specific reasons for the choice of Wyatt House as a destination for care of their loved ones. Many spoke of the journey by which they came to be at Wyatt House, an exercise the group commented on is being a great thing to share. However, the underlying sentiment to this was that in many cases agreements made in the past were felt to be being betrayed which was having significant impact on the emotional well-being of the family/carers present.

'... Before my father died he told me "Don't worry your mother will be safe here" ... until I got a letter last night...how do you think I feel now?'

Not clear on the scope

Returning to the process which the council had chosen to commence the engagement on the potential for future closures of Wyatt House, participants in the meeting felt that it was very unclear. Having short notice to absorb the content of a fairly complex briefing paper many felt that the actual scope of discussions on the considerations for closure were unclear and were causing concerns and, perhaps, undue anxiety.

'... It's not clear from the briefing paper what the scope of this meeting is... I'm a bit in the dark...'

How long has this been going on?

Generally, participants in the meeting were of the view that decisions such as this were not made overnight, and the question was asked how long has the council known about this. This was particularly distressing for people who had recently secured a place for their loved ones at Wyatt House in the belief that it offered the best long-term security and care of all the facilities they had visited.

‘... My dad’s here and he’s only been here for two months, I just cannot quite get my head around them people didn’t know, he’s settled now will have to do all again...’

Excellent care

An overarching sentiment from the group was in relation to the ethos, values and consistency of the care offered to their loved ones, who was recognised faced very challenging circumstances, by all of the Orders of St John care staff. This was, perhaps, perhaps best expressed as pastoral care, describing and holistic approach which addressed the needs of family/carers and residents. The group unanimously felt that this caring environment for outweighed any issues with the fabric or presentation of the building.

‘...this overlooks the pastoral care, I’m greeted personally, the staff know my mum from the cleaner to the centre manager, ... I’d sacrifice a Chesterfield in reception for the level of care...’

‘...the care is more important than a fancy building...you can throw money at anything but that doesn’t mean it gives good value...’

3.2.2 Communication/Not Enough information

The group felt that the process of engagement had largely gotten off on the wrongfoot, simply because of the lack of time allowed to absorb the information related to such a significant event impacting the lives of their vulnerable relatives and loved ones.

‘... Received a letter yesterday for a meeting today, it doesn’t fill me with confidence, I have not started on the right foot...’

In addition, the group were unconvinced that the briefing notes provided all information required, with references of a perception of “cherry picking” the facts and figures to suit the argument and use of selective generalised information, that for some was viewed as misleading.

‘... Blanket figures are quoted...needs to be more detail...’

‘... It doesn’t give occupancy figures for Wyatt House...’

It also became apparent that the group had not fully understood that the main reason for Wyatt House being considered for closure was the fact that the building no longer offered the type of facilities that are fit for the required care of dementia patients now

and in the future. Many felt that the time that they had spent discussing standards of care and occupancy levels at Wyatt House was wasted because that wasn't the key issue, and more importantly that this was not apparent to from information that had been provided to them. This led to those present asking that the council provided a full and comprehensive list of the areas in which Wyatt House was viewed to be deficient.

'... Can you give us a list of the faults in Wyatt House now we found out that that's the reason the council want to close it...'

This also led to consideration of what was viewed as a significant flaw in the engagement process, namely that in the information presented to date there was not a clear and well-argued case for the proposals the council had brought people together to discuss today.

'... Council has to make a rational decision in law, at the moment it seems to be struggling, and if it's struggling it's challengeable...'

In addition, it was felt that the discussion paper itself was misleading talking about options and choices which when considered in more detail were apparently not available to residents and their advocates.

'... It says in the paper that we can choose other GCP homes... what it (also) says is that there is not of enough space to take all the residents...if it's not an option (to go into other OSJ homes) why tell us it is...'

3.2.3 Fit for purpose?

The initial view from participants was that Wyatt House remains fit for purpose, with many saying that despite the council's descriptions of inadequacy in their opinion that the building and the care is totally adequate in their experience. The feeling was that although the building may be tired the care and experience delivered at Wyatt House was exceptional which made it fit for purpose. Participants felt the council should look beneath the cosmetic appearance and understand the importance of the facility to all involved.

'...not the most modern of premise...care for my mum has been outstanding...'

3.2.4 Capacity to make decisions

An abiding theme was the ability of residents themselves to make the choice to move to Wyatt House whilst they retained their capacity to make choices. Again, the group felt that this was a major betrayal to their loved ones' choices, which will lead to disruption in residents lives and significant stress in the lives of those who love and care for them

'... Granddad doesn't have the capacity now...a few years ago, this is when he chose to be here, and this is where chose to die...you can't take that away from him...'

3.2.5 Empathy

Similar to the participants at Southfields, the group at Wyatt House were particular concerned with the ways in which the people delivering the engagement event, both as facilitators and observers would feel if it was their family.

'... How would you feel if it was your family...'

The group also felt that the council decision-makers should not take a final decision on the future of Wyatt House without coming to see the circumstances themselves, to understand intangible facts such as the atmosphere, the care, and the sense of community offered at Wyatt House.

'... How can they make a decision on this without coming down to see these people in beds...'

3.2.6 Trust, relationships and environment

throughout the conversations the participants were very clear that the residents they were acting as advocates for faced particular difficult circumstances due to their condition. Any changes in routine, environment, and people around them caused massive disruption in their lives, resulting in them potentially exhibiting disruptive behaviours, got that. This was felt to be most important in factors such as the external medical support provided to them by the visiting GP, who was universally cited as being excellent.

The loss of this connection, which takes months if not years to build up a relationship of trust, in another setting with a change of care home will in effect result in the family and the resident starting the process all over again.

'... Loss of connection and their orientation...it's easy to overlook the importance of the GP here, who is excellent...'

Importantly, the group also stressed the extent to which the location was incredibly important to maintaining relationships. Specifically the proximity to partners of residents who are equally likely to be frail and elderly and unable to make long journeys, in effect cutting off from contact with their family.

‘... Granddad will lose his family...’

‘... Gran is very poorly we bring her every day, but we won’t be able to make it if Granddad is moved further away...’

3.2.7 The building itself

Once it became apparent to the group that the fabric of the building was a significant issue, again there was universal expression of the opinion that although the building may be tired it was fully functional and meeting the needs of all residents. Participants felt that provision of facilities such as en suite bathrooms were superfluous to the needs of the residents, stating that in many cases to use such facilities would require supervision and in those circumstances a shared bathroom was as adequate.

‘... meet the needs of those here...’

The design of the building described by one participant as a “polo mint” was ideal for the needs of many dementia patients who by the nature of their condition often walked continuously.

‘... meet the needs of people who do walk... no dead ends...’

‘...not here too long but really impressed with the design may be old but it just right for the people here...’

Equally, the statement issued at the meeting by the council representative that the garden was unfit for purpose due to this slope, increasing falls risk, and denying access to outside spaces which is thought essential to modern standards of dementia care, was felt to be new information not included in the briefing sheet. Participants felt this to be something of a diversion as the use of the garden by residents was very low.

‘... This is the first we’ve heard that the garden is unsuitable...’

‘... Residents never go out in the garden... They are supervised at all times...’

The group went on to explore the fact that despite residents not going into the garden that they received stimulation and enjoyment from the fact that all rooms Wyatt House have a view of the green space.

‘... The garden gives so much joy, my mother-in-law talks about the bird she can see from the window all the time...’

Participants were also keen to state that if they had known the garden was an issue they themselves would have picked up tools and volunteered to level space and make it safe for use by residents as deemed by modern standards.

‘... We’d have come in and levelled the garden if we’d known if we’d known it was an issue...’

This led on to discussions of the standards for care homes, and recognition that these apply to newbuilds whereas Wyatt House was built to comply to previous regulations. Participants also expressed concerns over their ability to find places in the Stroud district in care homes that met those standards, with the view being that apart from the most modern facilities most others would not meet these standards.

'... How many of the existing care homes apart from Wyatt House would meet the new standards for width of corridor, surely we would have to level them all...'

3.2.8 Quality of care

Whilst covered implicitly in many of the other things there was very clear and explicit discussion of the benefits of the care offered by the Orders of St John staff. Of particular importance was the fact that the staff did not regularly change, and the retention was important in establishing a routine and relationship for residents of Wyatt House.

'... I've not had a single problem with the staff other care they deliver...'

'... In the larger homes we visited before selecting Wyatt, there was a heavy reliance on agency staff and people coming and going all the time which isn't the type of environment I want my mother-in-law in...'

3.2.9 Impact on everyone

the group discussed the impact the proposed closure may have on them if a final decision was made to close Wyatt House. On the individuals, family/carers, the process of putting their love ones into care of Wyatt House was universally described as traumatic. The participants variously reported that the receipt of the letter about the engagement and any proposals to close Wyatt House had reintroduced stress into their lives that they thought settled with the decision and care provided currently.

'... Stress made me shutdown... it's a bit of a journey here but it's worth it because I know mum is safe...last night I felt all coming back... going to though process again...'

For the residents those advocating on their behalf went to great lengths to stress the challenges they face in their day-to-day life, and the impact any disruption to their routine has on their well-being and behaviour. People spoke of a process taking many months if not years for residents to settle and become accustomed to Wyatt House as their home. The view being that take that away from them by closing the facilities would in effect put them back into a place that was "dark and difficult."

'... sectioned for violence in hospital and it was horrific... doesn't bang the walls any more... it's taken years, but he is happy to see us go now...'

3.2.10 Availability versus choice

A very important theme discussed by the group was the reality of their choice described in the briefing document. Speaking as advocates of the residents and acting in the role of their attorney concerns were raised about the reality of the choices available to them in terms of finding alternative care beds. There was clear concern over the ability of those present to be able to afford to place their loved ones in a facility offering care anywhere near as good as that enjoyed Wyatt House. Ultimately this was felt to limit choice with a detrimental impact on the future placement of residents.

'... difference between availability and choice...as attorney am I going to be able to afford it...'

A very real concern was the extent to which the council had considered the reality of the care beds available to relocate residents in the Stroud district.

'.... where are you proposing to put our families when you forcibly relocated them...'

4 DIRECT SUBMISSIONS

Summary of discussions afternoon of 26th of June 2019

4.1 Introduction

A total of five submissions outside of the engagement meetings were received as part of this exercise.

The authors of the submissions were able to articulate their concerns with great eloquence, and it is recommended that each is read to understand the viewpoints expressed.

We have condensed some of the key themes from that correspondence however Cabinet Members do need to draw the conclusions from individual representations.

4.2 Main themes from correspondence

4.2.1 Personal Impact

The submissions all speak of the personal impact the proposed changes will have for their loved ones of the author.

My father is a resident there and I cannot emphasise enough how catastrophic it would be for his mental and physical health if he were moved.

4.2.2 Costs?

The people providing direct submissions by email or letter or highlight concerns that the presentation of a case for change by the council in regard to the potential for closure of either Southfield or Wyatt House is predicated on a financial basis to greater or lesser extent, scratch that. The respondents all cite alternative means of assessing the value of the facilities offered by both.

4.2.3 Failing the most vulnerable in our society

The submissions cite various evidence from published reports to recent broadcast news articles which highlight the crisis in care in England. The view expressed through this mechanism is that these proposed changes are adding to this crisis and thereby failing the frail and vulnerable elderly in Stroud.

4.2.4 Celebrate excellence

There was a strong message for the council that the care homes in question, particular Southfield, actually offer examples of best practice in social care for the elderly. Instead of discussing closures it was felt the council should be taken the opportunity to celebrate the success and excellence in homes owned by them and operated by partners. This will both promote the concept of excellence in care and

also go some way to increasing demand for care beds at Southfield by raising its profile in the local area.

4.2.5 The impact to the wider health system

a common theme expressed was the potential impact of closure of both White House and Southfield when it is predicted there will be an increased demand for care and dementia nursing beds. It is felt that maintaining these facilities will reduce the impact of “bed blocking” at local hospitals. This of course calls for coordination between health and social care.

4.2.6 The facilities

Particularly in the case of Southfield respondents refute the claims that the premises on not fit for purpose, citing regular upgrades and decoration to maintain what are perceived as high standards in the home.

4.2.7 Inadequacies of care at home

Respondents point to the inadequacy of the statement related to pupils desire to stay home for the cohort who are resident at Southfield and Wyatt House. This group are no longer able to maintain independent living in their own home even with social care. So, while this may be important for the future, this has little relevance to the immediate impact of the closure of these facilities on the current residents.

4.2.8 A done deal?

Concerns were raised that this engagement was in fact communication of what was in effect an already agreed or at least planned in outline decision on the closure of both Southfield and Wyatt House.

‘It also seems that this may be a ‘done deal’ as a rough date for the closure is included in the document. Nowhere does it mention keeping it open!’

5 CONCLUSIONS

Overview of main outcomes

5.1 Conclusions for Consideration

Overwhelming opinion from both care home settings, irrespective of the condition of the building, the difference being at either Southfield or Wyatt is the care provided by the staff of the Orders of St John. It is also important to note that this group are not 'novice' buyers; generally they report trying between three and five care homes before choosing the current residents of their loved ones. Various factors cited including the overall hygiene and cleanliness, the atmosphere, most importantly the consistency of relationship with the staff. OSJ staff are viewed as being invariably friendly, irrespective of their role, providing consistent and excellent care.

This perception of care compares poorly when considered against other homes where participants report rapid changeover of staff, perceptions of difficulties in maintaining relationships with staff and a very high reliance on agency staff, of course this must be recognised as anecdotal but because of the consistency of its expression in both groups it is a factor that many worry will be impossible to replicate if residents are moved to other care home beds. In summary, leadership and management from the Orders of St John is viewed as outstanding leading to continuity of staff and consequential care, people are concerned that this will no longer be available to them, despite assurances in the briefing that other OSJ care beds would be considered as an alternative placement. One resident spoke of the staff as...

'...angels without wings...our friends, or family...'

In terms of the engagement process itself there was overwhelming consensus 24-hours is not long enough period of notice for the meetings called to discuss these proposals with residents and family/carers. In addition, there was widespread criticism of the briefing letter provided to call the meeting. The view expressed being that not enough information is provided as the basis of discussion and in addition it was neither clear nor comprehensive leading to confusion during discussions.

Overall, the feeling was that the quality of care has not been considered as one of the criteria on which these proposed discussions are being discussed. Based on the information provided in the briefing document, the process overlooks CQC scores and more importantly the levels of pastoral care delivered in the GCP care homes.

Participants in the groups were very concerned that their choice would be significantly limited because the other care home beds available in the Stroud district are in settings that CQC do not require improvement against at least one of the areas Safe, Effective, Caring, Responsive, and Well-led.

Serious concerns were expressed over the impact on residents through breaking up friendship networks and resident-to-resident support built up over many months and years. This extended to concern over disrupting the environments of frail and elderly

people many of whom have dementia and in the case of Wyatt House has very complex needs and comorbidities. The anecdotal view from those present at meetings of both locations, based on personal experience with other relatives, was that moving people will lead to earlier death. This extended to the impact on resident's family, many of whom felt that any change in location would remove the remaining connections to their 'old' life and social networks.

The view of most is that the council is not making an effective case for the closures. People generally accepted there may be a valid business case for considering closures the closures, however, with the information provided at short notice the council had not made that case, and people were largely unconvinced.

Likewise any arguments about the unsuitability of the fabric of the buildings, particularly Wyatt House, were not seen to have been made conclusively. Relatives and carers were more than happy to offer their services on a voluntary basis to address many of the issues with the building, for instance to level the garden at Wyatt House to make it safe for residents.

In addition the case made was thought to significantly overlook likely increases in dementia cases and the growing demand on care homes from an ageing population, without providing adequate information on the alternatives for care at home participants in the meeting remained unconvinced that in the medium-term Stroud was oversupplied with beds.

Participants were keen to offer alternatives to the proposed closures including:

- Increased marketing and publicity activity to increase the bed occupancy Southfield;
- Closing Wyatt house and moving residents into Southfield which has a higher CQC rating; and
- Utilising volunteers to address issues with the buildings through applications of their skills and labour.

It was clear that these suggestions were offered from 'front of mind' thinking with participants not having sufficient time to formulate any clear alternatives. However, the groups were very keen to be provided with the opportunity to further explore alternative options to closure with the council.

In terms of the final decision and recommendations to Gloucestershire County Council cabinet there was an overwhelming feeling that any decision needed to involve decision-makers in seeing the conditions at each of the care homes. The tangible but incredibly important elements such as atmosphere, staff attitudes and residents interaction cannot, in the groups' views, be judged solely on statistics and the paper report.

Finally, the groups - while recognising that their own loved ones were at the stage at which care at home was no longer practical - expressed significant reservations over

the current capability of the social care system to provide adequate services in this area. In the view the inadequacy of three 15-minute visit per day to look after frail and elderly people was inadequate. This was particularly felt to be an important factor in the early stages of dementia.

6 APPENDIX ONE: BRIEFING SENT TO RELATIVE/CARERS

Content of letters sent to relatives and carers in advance of engagement meetings

6.1 Introduction

This appendix includes the two briefing papers, sent out as letters to the nominated relatives or carers of residents at the two care homes.

6.2 Southfield Briefing

Introduction

We want to talk to you about a proposal to close Southfield and the likely impact that would have on you if this were to happen. The following information sets out why we need to consider closing Southfield and the information we used to come to that conclusion. We understand that this proposal is likely to cause you some concern but want to reassure you that no decision has been made yet.

Background

The council buys rooms in care homes for older people from providers across Gloucestershire. Most of these care homes are owned by private companies, voluntary organisations or charities.

We currently own (15) care homes in the county and since April 2005 they have been run by Gloucestershire Care Partnership (GCP) - a company set up by the Orders of St John Care Trust - and bpha.

All but one of these homes provides both residential and nursing care. Southfield only offers residential care.

What is the current situation in Stroud?

Information from care providers in the Stroud area indicates that there is a 10 – 15% vacancy level across their homes in the district. Southfield has 34 rooms and the number of people living there has decreased over the last 12 months. There is now an average of 18% vacancies at any one time. Most care homes try to operate at an occupancy level of between 90- 95% in order to remain financially sustainable. The continued level of vacancies at Southfield raises serious issues over its future viability.

There are a number of reasons why occupancy rates have dropped in recent years. Over the past few years, care in the community has increased and is more easily available. Older people have therefore chosen to stay in their own homes and receive social care, rather than choose to go to a residential care home.

We recently asked Healthwatch Gloucestershire and Evolving Communities to ask older people and residents of care homes for people over 65 years of age for their views on care homes provision in the county. The report from Evolving Communities “Shaping future care provision for over 65’s in Gloucestershire” indicated that the choice to live at home is a key issue for older people:

People said that “they would always prefer to stay in their own homes even if their condition deteriorated.”

We are responding to this change in preference by working with domiciliary care providers to ensure there is enough high-quality domiciliary care provision in the county.

Over the past 5-10 years there has been an increase in the number of care homes being built in the county and as a result the availability of care home beds has increased in all areas, including Stroud.

In the Stroud area there is a total of 25 care homes for older people registered with the Care Quality Commission (CQC), providing 964 places. 13 of these homes, including Southfield, are residential care homes offering a total of 326 places.

Many new care homes provide both residential and nursing care which can avoid a further move if a resident's condition deteriorates. In addition newer care homes offer modern facilities, including en-suite bathrooms, wider corridors and larger bedrooms to accommodate equipment which are widely regarded as a standard requirement today.

Southfield was built in the early 1960s and therefore does not have the modern facilities other homes provide, and the design of the building means it would be extremely difficult and costly to make it an effective place to meet increasingly complex care needs.

What information has been used in coming up with this proposal?

In considering the closure of Southfield we have considered a range of factors.

There are four Gloucestershire Care Partnership older people care homes in Stroud and Dursley, providing a total of 149 care home beds. The other three Gloucestershire Care Partnership care homes and their occupancy levels are currently:

1. The Elms with 45 nursing and residential beds and an occupancy of 82%
2. Wyatt House with 30 nursing and residential beds, specialising in dementia and an occupancy of 93%
3. Henlow Court with 40 nursing and residential beds and an occupancy of 95%

We considered the case for closing each of the GCP managed homes in Stroud and Dursley.

- Southfield is being considered for closure due to the fact that it does not provide nursing care. There are two larger GCP residential and nursing homes in the Stroud and Dursley area. Southfield does not offer the opportunity to be modernised in order to meet future care needs.
- The Elms has similar occupancy levels to Southfield but there is greater need for nursing care home provision. The Elms being a larger care home is more viable than smaller care homes, therefore closing The Elms is not being considered at this time.
- Wyatt House is a dementia nursing and residential care home. Wyatt House is also being considered for closure due to its physical environment no longer being able to meet the needs of dementia residents requiring a care home today and over the medium term.

Henlow Court is a nursing and residential care home and has high levels of occupancy. Henlow Court is the main provider of residential and nursing care for people from the Dursley area consequently it is not being considered for closure.

Whilst there are other care homes in the area with similar issues to Southfield, they are not owned by us and therefore we cannot consider them for closure.

The impact of the proposed closure

We know that the proposed closure of Southfield will be unsettling for you, your family and the employees staff who work in the home. As of 6 June 2019, 26 people live at the care home. The Orders of St John Care Trust employs 41 people at Southfield.

Before we make a decision about the future of Southfield we want to talk with you and your family to understand:

- The likely impact on you
- Your thoughts on where you might like to move to, if closure was agreed

If the proposal to close Southfield is agreed we would look to offer you a place in a suitable home in the Stroud area, including at other GCP care homes, if that's what you want.

Hearing from you

We have asked Andy Wright, a person independent from the Council who has experience of discussing these issues, to run a meeting at 10.00am on 26 June 2019 at Southfield. We can discuss the potential closure of Southfield with you and hear what you think.

Evolving Communities have also been invited to the meeting so they can provide the council with an independent report on the views and ideas that are expressed by you and your family.

As well as being at the meeting on 26 June, James Cawley, from our adult social care team, who is leading this process on behalf of the council, will be at Southfield on 1 July between 10.00am and 1.00pm and 3 July between 2.00pm and 5.00pm to discuss the proposal with you. If you would like to talk to James, you can book an appointment with the home's Reception.

James can also be contacted by email, james.cawley@gloucestershire.gov.uk or by calling 01452 583707.

Processes we will be undertaking

In addition to meeting with you, your family and members of staff we will be talking with the Gloucestershire Care Providers Association, who represents care home providers across the county to understand their views on the care home market in Stroud and the impact of the potential closure of Southfield.

The Orders of St John Care Trust will also discuss the proposal with their employees and suggestions and comments from them will help inform the final decision.

When will a decision be made?

Following the meetings with you, your family, employees of OSJCT and once we have the report from Evolving Communities and feedback from Gloucestershire Care Providers Association, a report will be discussed by the County Council's Cabinet when it meets on 24 July.

Before the report is published we will invite you to a further meeting so we can discuss the content and recommendations with you.

What if closure of Southfield is agreed?

If it is agreed to close Southfield, we will work with all residents and their families to ensure that any Social Care Assessment is up to date if needed and to consider where you want to live in the future.

The home would not close before early November and therefore there would be time to ensure any move is well planned and carefully managed to ensure any disruption is kept to a minimum.

6.3 Wyatt House Briefing

Introduction

We want to talk to you about a proposal to close Wyatt House and the likely impact that would have on you if this were to happen. The following information sets out why we need to consider closing Wyatt House and the information we used to come to that conclusion. We understand that this proposal is likely to cause you some concern but want to reassure you that no decision has been made yet.

Background

The council buys rooms in care homes for older people from providers across Gloucestershire. Most of these care homes are owned by private companies, voluntary organisations or charities.

We currently own (15) care homes in the county and since April 2005 they have been run by Gloucestershire Care Partnership (GCP) - a company set up by the Orders of St John Care Trust - and bpha.

All but one of these homes provides both residential and nursing care. Wyatt House provides nursing and residential dementia care.

What is the current situation in Stroud?

Information from care providers in the Stroud area indicates that there is a 10 – 15% vacancy level across care homes in the district. Wyatt House is a small care home with 30 rooms.

Wyatt House was built in the 1960s. Its physical environment is no longer able to meet the needs of dementia residents requiring a care home today and over the medium term.

There are dementia care homes in Stroud that offer modern facilities that can meet the needs of people more appropriately.

We recently asked Healthwatch Gloucestershire and Evolving Communities to ask older people and residents of care homes for their views on care homes provision in the county. The report from Evolving Communities “Shaping future care provision for over 65’s in Gloucestershire” indicated that the choice to live at home as a key issue for older people:

People said that “they would always prefer to stay in their own homes even if their condition deteriorated.”

We are responding to this change in preference by working with domiciliary care providers to ensure there is enough high-quality domiciliary care provision in the county.

Over the past 5-10 years there has been an increase in the number of care homes being built in the county and as a result the availability of care home beds has increased in all areas, including Stroud.

In the Stroud area there is a total of 25 care homes for older people registered with the Care Quality Commission (CQC), providing 964 places. 13 of these homes are residential care homes offering a total of 326 places.

Many new care homes provide both residential and nursing care which can avoid a further move if a resident's condition deteriorates. In addition newer care homes offer modern facilities, including en-suite bathrooms, wider corridors and larger bedrooms to accommodate equipment which are widely regarded as a standard requirement today.

Wyatt House does not have the modern facilities other homes provide and the building cannot be adapted to this higher level. The design of the building means it would be extremely difficult and costly to make it an effective place to meet increasingly complex care needs

What information has been used in coming up with this proposal?

In considering the closure of Wyatt House we have considered a range of factors.

There are four Gloucestershire Care Partnership older people care homes in Stroud and Dursley, providing a total of 149 care home beds. The other three Gloucestershire Care Partnership care homes and their occupancy levels are currently:

1. The Elms with 45 nursing and residential beds and an occupancy of 82%
2. Southfield with 34 residential beds and an occupancy of 82%
3. Henlow Court with 40 nursing and residential beds and an occupancy of 95%

We considered the case for closing each of the GCP managed homes in Stroud and Dursley.

- Southfield is being considered for closure due to the fact that it does not provide nursing care. There are two larger GCP residential and nursing homes in the Stroud and Dursley area. Southfield does not offer the opportunity to be modernised in order to meet future care needs. Southfield is also being considered for closure.
- The Elms has similar occupancy levels to Southfield but there is greater need for nursing care home provision. The Elms being a larger care home is more viable than a smaller care home, therefore closing The Elms is not being considered at this time.
- Wyatt House is a dementia nursing and residential care home. Wyatt House is also being considered for closure due to its physical environment no longer being able to meet the needs of dementia residents requiring a care home today and over the medium term.

Henlow Court is a nursing and residential care home and has high levels of occupancy. Henlow Court is the main provider of residential and nursing care for people from the Dursley area consequently it is not being considered for closure.

Whilst there are other care homes in the area with similar issues to Wyatt House, they are not owned by us and therefore we cannot consider them for closure.

The impact of the proposed closure

We know that the proposed closure of Wyatt House will be unsettling for you, your family and for employees who work in the home. As of 6 June 2019, 27 people live at the care home. The Orders of St John Care Trust employs 47 people at Wyatt House.

Before we make a decision about the future of Wyatt House we want to talk with you and your family to understand:

- The likely impact on you
- Your thoughts on where you might like to move to, if closure was agreed

If the proposal to close Wyatt House is agreed we would look to offer you a place in a suitable home in the Stroud area, including at other GCP care homes, if that's what you want.

Hearing from you

We have asked Andy Wright, a person independent from the Council who has experience of discussing these issues, to run a meeting at 2.00pm on 26 June 2019 at Wyatt House so we can discuss the potential closure of Wyatt House with you and hear what you think.

Evolving Communities have also been invited to the meeting so they can provide the council with an independent report on the views and ideas that are expressed by you and your family.

As well as being at the meeting on 26 June, James Cawley, from our adult social care team, who is leading this process on behalf of the council, will be at Wyatt House on 1 July between 2.00pm and 4.30pm and 3 July between 10.00am and 1.00pm to discuss the proposal with you. If you would like to talk to James, you can book an appointment with the home's Reception.

James can also be contacted by email, james.cawley@gloucestershire.gov.uk or calling 01452 583707.

Processes we will be undertaking

In addition to meeting with you, your family and employees of OSJCT we will be talking with the Gloucestershire Care Providers Association, who represents care home providers across the county to understand their views on the care home market in Stroud and the impact of the potential closure of Wyatt House.

The Orders of St John Care Trust will also discuss the proposal with their employees and suggestions and comments from them will help inform the final decision.

When will a decision be made?

Following the meetings with you, your family, employees of OSJCT and once we have the report from Evolving Communities and feedback from Gloucestershire Care Providers Association, a report will be discussed by the County Council's Cabinet when it meets on 24 July.

Before the report is published we will invite you to a further meeting so we can discuss the content and recommendations with you.

What if closure of Wyatt House is agreed?

If it is agreed to close Wyatt House, we will work with all residents and their families to ensure that any Social Care Assessment is up to date if needed and to consider where you want to live in the future.

The home would not close before early November 2019 and therefore there would be time to ensure any move is well planned and carefully managed to ensure any disruption is kept to a minimum.

Thank You

ASV

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