

Mr Kevin Helmore
303 Torquay Road
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TQ3 2EY

2nd May 2016

Dear Chris,

BAY TREE HOUSE

I am sending this out by letter and e mail to you and by e mail to other interested parties.

I do hope that you and your colleges found our meeting on the 28th April to have been informative for you and I would like to thank you all for taking the time to attend as your participation was very much appreciated by users of Bay Tree House (BTH) who were in attendance.

Please would you present this letter for consideration by the Overview and Scrutiny Board on the 18th May.

I think that it would have been very self evident from the meeting that at this moment in time the majority of users of BTH have not yet been successful in obtaining alternative respite provision within the private sector. For most Parent/Carers and their cared for, they are looking to obtain overnight bed based respite provision that is comparable to the service which they already receive from BTH. A couple of families have found alternative provision suitable to their needs with companies such as Shared Lives. However, this still leaves in excess of 30 families who are hoping to find suitable provision in one of the only two private providers who have so far put themselves forward for consideration as a respite provider within Torbay. Of these only one provider, Burrow Down in Paignton, is currently operating a respite service and the other provider, Renaissance (St John Ambulance Site) is coming to the end of their construction of a new three bed unit attached to the side of an existing supported living establishment.

Firstly, with regards to Burrow Down, it has been established that a few families are currently in the process of having tea time visits by their cared for, in order to familiarise them with Burrow Down and as part of their transition process to become user's of their respite service. For many of the Learning Disabled at BTH a gradual transition period will need to take place in order that a successful transfer to an alternative provider can take place. As previously stated Burrow Down is an established respite provider who has a four bed roomed bungalow within the grounds of their facility where they provide residential

care and day services for LD clients and they already have a number of respite clients on their books.

As stated, the only other alternative respite provider is Renaissance who are currently in the process of constructing a new three bed respite centre in Torquay and it is hoped that this will be completed in May and subject to successful staff recruitment and training they may be operational sometime in June. So, potentially, allowing for a suitable transition period for those users from BTH who chose to transfer to Renaissance there is the probability that they will require a number of months beyond the June deadline to enable them to successfully change providers.

The Parent/Carers of the users of BTH have been presented with a total lack of choice regarding the selection of an alternative provider for their cared for as there has only ever been two bed based respite options available within Torbay. At the time of the consultation one of these providers Renaissance, was only a set of plans from which it was felt to be unreasonable to expect Parent/Carers to make a commitment to place their cared for into the care of an inexperienced respite provider (though we accept they have a very good record regarding residential living). During the consultation two other providers outside Torbay were suggested. ROC at Newton Abbot who has a two bed flat that can be used for respite but if overnight support and care is needed then one of the flats would have to be available for use of a care worker to sleep over. The other provider was Hannah's who are based on the old college site at Seale-Hayne and they have adapted some of the student dormitories into residential lets (Holiday lets) some of which have been adapted for wheelchair use but would not be suitable for respite use by the service users from BTH as there is no care worker provision on the site and therefore you would have to bring a care worker with you.

The one area which we did not have the opportunity to discuss on the 28th, which is the one of greater importance to my mind, is whether or not there is sufficient bed capacity within the private sector to accommodate the number of bed spaces required by the users of BTH. Currently there are eight beds available at BTH and this provision is to be split between Renaissance and Burrow Down. However, it is my understanding from what Steve Honeywill (Care Trust) said at the meeting that it is their intention to block book two beds at Renaissance for the year plus reserving 100 bed nights in the third room as an emergency bed (though we will need to establish how long this will be for, one year, two years etc). Therefore it is my interpretation that there will in fact only be two beds available for use at Renaissance for BTH clients giving a potential bed availability of 730 nights.

It must therefore be assumed that it is anticipated that Burrow Down can absorb the remaining required number of bed nights but I have grave concerns that they do not have the spare capacity. As stated, they have four beds which equates to 1460 available bed

nights per year and if they are currently functioning at 50% occupancy this would leave 730 spare nights or, if it is 60% occupancy rate then there would only be 584 spare nights but a 70% rate would only leave 430 nights, so potentially allowing for 730 nights at Renaissance plus 50% (730) gives a total of 1460 nights, but a 60% rate reduces it to 1314 nights or a 70% rate reduces it to 1168 nights. Because I was not privy to the number of respite vouchers allocated to each user of BTH I could only make an approximate calculation based on figures quoted by Parent/Carers during the consultations and those suggested that there was a wide difference in the number of nights allocated based upon the assessed needs and these ranged from the low twenties to in excess of 70 nights. I have based my calculation on an average of 40 nights for 38 users which equates to a potential requirement of 1520 nights. Whilst I accept that I do not have access to either the actual rate of occupancy at BTH and knowledge of the total number vouchers issued each year, I do consider that my basic calculations give grave concerns that there is not sufficient spare capacity within the private sector to adequately provide for the users from BTH. We must base the nights required on the actual number of short break vouchers issued to each family and not the number of breaks taken as we must always be providing sufficient capacity to allow each family to use the full number of their respite nights allocated to them.

There is no capacity to allow for any growth in the number of clients requiring bed based respite. I understand that a couple of new users went on the books of BTH during 2015 and it is not unreasonable to anticipate that there will be a further increase in new user's in 2016. In addition, we have anecdotal evidence from other Parent/Carers that it is their intention to seek an increase in the number of vouchers allocated to them as they feel that in some cases they have been undersubscribed.

Consideration must also be given to usage patterns as, quite naturally, most usage of respite night's takes place at the end of the week and the weekend period. It seems quite clear, given the potential number of user's, including those already using Burrow Down, that the more popular respite nights will be drastically oversubscribed. A number of users and their Parent/Carers may no longer be able to have respite that is suitable to the needs of their family and they will be forced into taking unsuitable early or midweek breaks.

The other concern is that because the limited number of available bed spaces is being reduced from eight at BTH to two at Renaissance and an unknown number at Burrow Down, possibly two beds or less(allowing for 50% occupancy) then dependant on which unit you have chosen to use for your respite it may be a case that the user may be no longer be able to have an extended break of more than a couple of days simply because some other users always book the same days each week (as this option has always been available to them at BTH) and this booking would potentially block any ability for Parent/Carers to book a week's holiday as there is the probability that there would not be the availability of

a continuous seven nights stay for their cared for. This was always the benefit of scale with BTH that having eight beds within one unit they had the flexibility to accommodate their regular weekly users and those requiring an extended respite period.

In conclusion I would firstly stress that despite assurances during the consultation that there were other independent providers who were just waiting to learn of the closer of BTH before making themselves known, no alternative providers have to our knowledge come forward and we are therefore handicapped as a group in having only two private providers who have engaged with the trust. Because one provider is not yet operational we cannot be expected to commit to them until such time as they can present themselves as a viable option. Even when a choice has been made there must be sufficient time allowed for a transition period to take place in order for the service users to adjust to a new provider. We would ask that if the closer of BTH is to take place then an extension beyond the 30th June must be required to allow Parent/Carers to make their selection and for an appropriate transition period to take place for the service users to successfully transfer to the new provider, assuming that adequate bed spaces can be found for them.

In addition, I would ask that my concerns regarding the actual capacity to provide bed nights within the private sector is fully investigated as I have grave concerns that there is insufficient capacity to provide for the user's from BTH or to allow for any potential future growth in need. My basic calculation shows that the number of short break vouchers currently allocated to BTH users equities to approximately 1500 bed nights and that the number of spaces available between the two providers suggest that there is a large shortfall between nights required and those available.

Whilst I acknowledge that the decision has been made to close BTH I still feel that there is a failure within the private sector to match the standards of provision with regards to availability of bed nights and flexibility to meet the needs of the service users currently provided by BTH. In view of the assurances given during consultation that the ability to provide short breaks within the private sector would not adversely affect the users of BTH it does seem clear that this is not the case and that they and their Parent/Carers will be collectively affected by the transfer of provision to the private sector. I would therefore ask that the decision to close BTH is revisited.

Yours Sincerely,

Kevin Helmore
Spokesperson for Save Bay Tree House