

### Key Themes from the Consultation and the Council's Response

The table below summarises the key themes from the consultation feedback and the Council's response.

Theme	What we are doing/will do in response
<p><b>Concerns around the single site Option 2</b></p> <p>Carers raised significant concerns in relation to Option 2 (to expand Kentish Road and deliver most of the residential respite from this one site). The main concerns associated with this were:</p> <ul style="list-style-type: none"> <li>- Loss of choice</li> <li>- Poor access and increased transport costs for people living on the East of the city</li> <li>- Reduced availability of respite at prime times, e.g. weekends, holidays, due to too many people using one service</li> <li>- Ability to meet future demand for respite</li> <li>- Loss of the option of a smaller more intimate service with a calmer environment</li> <li>- The ability of one provision to meet everyone's needs - one size does not fit all</li> </ul>	<p>We are recommending that Option 2 is not progressed.</p>
<p><b>Service Quality and Service User Experience</b></p> <p>Carers highlighted the importance of having services which are provided in a "personalised", "caring and intimate", "family from home", "flexible" way. Good communication was cited as particularly important. Many highlighted that they were concerned these would be lost if the Council took on the running of the services.</p>	<p>Kentish Road is currently rated as good by CQC across all domains but we recognise the importance of working with our carers to continuously improve our services.</p> <p>To respond to feedback from the consultation, we have committed to working with carers through the Carers' Co-production group to co-produce quality standards for the Council's direct care services, seeking views on current provision, what matters most to carers and what good looks like; in order to build confidence in services. This could also include working with carers to engage them in the ongoing monitoring of quality and performance of direct-care services. This work will have dedicated project management and business support and we will work with our Human Resources colleagues regarding the cultural shift that carers have highlighted is necessary.</p>
<p><b>Continuity and Consistency of staff and Staff Sickness</b></p> <p>The importance of continuity and consistency of staff was highlighted several times and concerns raised that Council services don't provide this. People referred to there being high use of agency staff.</p>	<p>We are reviewing the issues raised with regard to consistency of agency staff as the service have worked hard to develop a consistent pool of agency staff, some of whom have worked within the service since 2018. There are 7 agency workers within the service, 2 of whom have been working at Kentish Road for 7 years, 1 for 2 years, 1 for 18 months, 2 for 1 year and 1 for 6 months.</p> <p>There are plans in place to recruit additional staff to ensure a full complement of core staff within Kentish Road. With a full complement of core staff in place to</p>

	<p>deliver a 1:3 staffing model across 6 core beds there will also be much less need to use agency staff.</p> <p>With regard to staff sickness, the Council's Human Resources and Occupational Health teams are working closely with the service to address current sickness, ensuring that the Council's absence management policy is followed. Currently Kentish Road has 2 staff on long-term sick. There are currently no staff off on short-term sick.</p>
<p><b>Wider enrichment activities</b></p> <p>People have told us how much they value the provision of enrichment activities during a respite stay, including taking service users out into the community, providing skills development and offering activities which increase people's mental health and wellbeing.</p>	<p>At Kentish Road we also understand the importance of providing enriching and meaningful activity opportunities during respite stays. As part of our care planning process, we ask what activities individual enjoy and what goals they may be working towards. This includes identifying if there are any skills they would like to develop, which we can then support with during their stays, e.g. meal preparation, making beds, money management etc. Using our electronic care management system (Person Centred Software) we are able to monitor progression with individuals' skills development or goals.</p> <p>We have a vast range of activities, games and resources available for in-house activities, including arts and crafts supplies, puzzles, games, electronic gaming equipment, and interactive projector, karaoke machine and a sensory room. We also work with individuals in planning day trips and community-based activities during weekends, or if people do not attend day activities or work during their respite stays. We plan our activities, based on who is staying and what we know they may enjoy, whilst being flexible to changing these as required.</p>
<p><b>Medication</b></p> <p>Some people were concerned about medication errors.</p>	<p>We have robust medication management policies in place at Kentish Road which staff are trained in and required to follow. Anyone administering medication is required to complete annual training and their competency to safely administer medication is assessed annually, by a team member with the relevant skills to do so. The registered manager closely monitors and completes regular audits on medication practices.</p> <p>If an error or discrepancy occurs, in line with our duty of candour, they are always reported and investigated to establish how the error happened. This can include referrals to safeguarding and notification to CQC where required. Our approach is to be open and transparent.</p> <p>Because this was raised in the consultation, we are currently looking into the number of errors in more detail to understand if Kentish Road has a higher rate of medication errors than other services, including those outside of the Council, and whether there are additional actions we need to take.</p>
<p><b>Impact on the health and wellbeing of service users from moving to a different service and Transition planning</b></p> <p>People voiced concerns around the emotional and mental health impact of moving people</p>	<p>As a result of this feedback about the move, we have extended the current contracts for the period 1 April to end June to enable a longer transition period and will work closely with providers to jointly manage the</p>

<p>from a provision where they are settled to an unfamiliar setting and service. They have told us that their loved ones find change difficult to understand and cope with.</p> <p>They have also told us that they are very anxious about moving away from a familiar environment, away from staff who know and understand their loved ones and have cared for them for many years, and the impact that this might also have on behaviours.</p> <p>(NB. The recommended option of expanding Kentish and delivering the majority of residential respite across two sites (Kentish Road and Way Ahead) will mean that up to 11 people will transition from Rose Road to Kentish Road.)</p>	<p>transition, which could involve a further extension if required.</p> <p>We have committed to working with each person who is impacted by a move, their carers and professional network to develop a detailed, person-centred transition plan. This will include working with the current service provider to ensure that the needs of each client are fully understood, ensuring that details regarding person centred care and support plans are shared to maintain a cohesive, consistent approach to care delivery and our staff are trained and fully cognisant in supporting each person's needs.</p> <p>Accessible language will be used to communicate the changes to clients and their families/carers.</p> <p>Additionally we will commission further advocacy support from our advocacy provider, The Advocacy People, to support people through the process if they would find this helpful.</p> <p>The transition will be gradually managed with opportunities to get to know staff and visit premises beforehand. This can include short visits, lunch / tea visits or overnight stays, depending on the needs and wishes of the individual and their families.</p> <p>We will try to ensure, wherever possible, that existing friend groups are maintained and supported</p>
<p><b>Financial Information</b></p> <p>There were several requests for the detailed cost analysis information that underpinned the proposals</p>	<p>Owing to commercial sensitivity, given the procurement of Inclusive Lives in which this service falls, we have not been able to provide a detailed cost breakdown. This is because we need to avoid the risk of distorting competition or creating an undue advantage for certain bidders. However this information will be available to Cabinet and Overview and Scrutiny Committee members to scrutinise to inform their decision making.</p> <p>Below is a summary of the main reasons for how the proposals reduce the costs:</p> <ul style="list-style-type: none"> <li>- Having a single service rather than two separate services (in the case of Weston Court and Kentish Road provision). A single provider model of delivery across two sites will also enable economies of scale in terms of management and back-office costs.</li> <li>- Internal operational efficiencies - operating our 1:3 staffing model across a larger number of beds (i.e. 6 core beds under option 1 as opposed to the current 4 core beds) is much more cost effective than operating a 1:3 staffing model across 4 core beds as there will often be a need to provide additional staff at times when all 4 beds are utilised.</li> <li>- Through only using external provision for those people whose complexity requires the level of support and expertise available there (noting that Rose Road's bed night cost is higher to reflect its higher staffing ratio)</li> </ul>

	<ul style="list-style-type: none"> <li>- Full utilisation of available capacity at Kentish Road and Weston Court reduces the cost per bed night as it spreads our costs across a broader number of nights.</li> </ul>
<p><b>Concerns around the cost effectiveness of current Council provision</b></p> <p>Some people challenged how the in-house proposals could be more cost effective, given the current and previous costs of delivering Kentish Road</p> <p>(NB. There was an FOI in 2022 for 2018/19 - 2022/23 figures and a further FOI for 2023/24 figures in January 2025. The 2023/24 figures showed gross expenditure on Kentish Road to be £842,429 with capacity to provide 1,800 nights a year and usage of 1,283 nights in that year. The unit is staffed to provide 4 regular beds and 1 emergency bed for 360 days per year. Cost per night in 23/24 therefore would appear to be £468.02 based on the capacity provided or £656.61 based on actual usage)</p>	<p>We have investigated these figures to understand why they appear so high and have identified the following factors:</p> <ul style="list-style-type: none"> <li>- the Kentish Road costs in the FOI include additional 1:1 staffing support provided above the core staffing to support individual clients who need a higher staffing ratio. External providers would charge this separately to the core cost per night and so we are not comparing like for like. Going forward these additional 1:1 staffing costs are being charged to a separate budget in the same way as they are for the external providers' additional staffing.</li> <li>- Kentish Road has been carrying a number of vacancies pending the Adult Social Care Restructure and already mentioned above there have been 3 staff on long-term sick leave. These have been covered by agency staff which does impact on costs. Going forward we will be fully recruiting to the core staffing structure which will reduce the need to use agency. We are also taking active measures to reduce sickness within the service.</li> <li>- The current model of 1:3 staffing across 4 beds also does not provide any economies of scale for Kentish Road as there will often be a need to provide additional staff at times when all 4 beds are utilised.</li> </ul>
<p><b>Ability of Kentish Road to meet the needs of people moving from Rose Road</b></p> <p>Some carers have told us they would be concerned that Kentish Road would not be able to safely meet the needs of their loved ones.</p> <p>Examples that were given included the need for higher staffing levels to manage complex behaviours, administration of complex medication, epilepsy management and other medical care.</p>	<p>We would like to reassure people that Kentish Road staff have a comprehensive training offer with all core staff having completed mandatory training in line with the national Care workforce pathway for adult social care. Staff training is reviewed on a regular basis and additional training is provided where appropriate to meet any specific health or communication needs. On an individual level, staff will have regular and consistent supervision and personal development reviews to ensure they remain confident, skilled and competent within their roles.</p> <p>Kentish Road currently already supports individuals with more complex care needs including people with epilepsy, who may require administration of buccal medications, people who require enteral peg feeds, for nutrition and/or the administration of their medications and support with incontinence including self-catheterisation for urination.</p> <p>Where individuals require nursing care, we work closely with community nursing teams to ensure continuity of this care during their respite stays.</p> <p>With regard to those individuals who would transfer to Kentish Road under the proposals, the service would work with the existing provider to understand their needs and how they are currently being met, ensuring that details regarding person centred care and support plans</p>

	<p>are shared. This will include a detailed risk assessment. Staff training and competencies will be considered as part of this. Additionally, consideration could be given to any care technology or equipment that could support someone's care. Kentish Road has access to a range of care technology that can also be used to support the safe care of clients in the least restrictive way. This includes video monitors in individual rooms, movement sensors, epilepsy sensors and falls alarms which also support people's independence, privacy and dignity.</p> <p>Where necessary and on the basis of assessed need, additional 1:1 staffing will also be put in place.</p> <p>Since the consultation, we have updated our costings to take account that some of the people who would transfer to Kentish Road from Rose Road will need additional 1:1 staffing levels.</p>
<p><b>Wider Respite Offer (non residential options being developed through Inclusive Lives)</b></p> <p>Some people have told us that they disagree with the wider range of respite options being developed through Inclusive Lives (which is a commissioning/tendering approach) to develop the market to offer more flexible and personalised service options, which include sitting services, a new social wellbeing service and more outreach options and that they didn't think this reflected carers' views.</p> <p>(NB. Details of this wider offer were included as part of the wider context and officers made it clear when this was raised during the consultation that there is no intention to replace residential respite or require anyone to change their current allocation or move from residential to a non-residential option).</p>	<p>A range of stakeholder groups such as the Learning Disabilities Partnership Board, Learning Disabilities Carers Co-production Group and the Southampton Parent Carer Forum have been actively involved in co-designing these future services which aim to deliver increased flexibility (times/venues/ support), increased use of inclusive environments, and a strengthened approach to skills and independence.</p> <p>Having heard the points raised by the consultation about these services, we will continue to work with carers through the above groups to test these proposals for non residential options but also we are seeking to increase the number of carers engaged in these groups to ensure that we are hearing a broader range of voices. We will therefore be asking carers to let us know if they would be interested in being part of this co-production work if they are not already involved.</p>
<p><b>Bookings beyond March and June 2025</b></p> <p>Concerns were raised about the ability for carers to pre-plan and book respite post 31 March as commissioners had asked that bookings were paused owing to the consultation and expiry of current contracts on 31 March 25.</p>	<p>Having heard the concerns about this from carers at the meetings, we since took the decision to extend bookings until 30 June 2025, and confirmed to carers in our letter of 13 December that we would revisit this after a decision is made about future provision of respite at Cabinet and it is clear which option we are going with.</p> <p>It is still our intention to open bookings beyond 30 June 2025 after the January Cabinet meeting.</p> <p>We have said to carers that if they have specific concerns or particular circumstances to contact us directly and we will do our best to accommodate these on a case-by-case basis.</p>
<p><b>Option 3: to keep the Weston Court Service as it is now</b></p> <p>Some carers have asked that we add an Option 3 to renew the contract with Way Ahead for Weston Court</p>	<p>We have explained that as the contracts are coming to an end, the Council would be required to run a procurement if the decision was to continue providing the Weston Court through an external provider.</p> <p>In response to the strong preference from some carers for the Weston Court service to continue to be delivered by a private provider, we have included this as an option within</p>

	<p>the Cabinet report for Cabinet to consider. We have shown that this option would still deliver savings for the Council.</p>
<p><b>Sufficient Capacity to meet future demand</b></p> <p>Some people wanted to know whether our proposals will deliver sufficient respite to meet current and future needs and that people will still get their full allowance of respite</p>	<p>We have continued to test our analysis of demand and capacity for overnight residential respite care throughout the consultation period. This has included looking at how many people may need care in the future as well as those children and young people who will transition to adult services over the next 4 years.</p> <p>Our final proposals have been based on a modelled increase in demand of 6% over the next 4 years and we have retested both Options 1 and 2 against this assumption.</p> <p>Our recommended Option 1 (to expand Kentish road and deliver the majority of residential respite from Kentish road and Weston Court) will increase the overall nights available for respite. Currently we provide/commission 3,391 nights a year. The recommended Option 1 delivers 3600 nights a year which (along with the estimated 200 nights a year we envisage continuing to commission for more complex clients) is an increase of 409 nights from the current capacity we have across Weston Court, Rose Road and Kentish Road. It is also sufficient to meet our assessment of the level of demand over the next 4 years.</p> <p>One of the reasons we are not recommending Option 2 (i.e. to deliver all respite from Kentish Road), is that our further demand analysis has shown that, whilst it could meet demand over the next two years, there would be a reasonable risk of it not doing so in further years.</p>
<p><b>Booking systems</b></p> <p>Some carers have raised queries in relation to how bookings are and will be managed across the different sites, which in turn has raised questions in terms of ensuring that there is equity e.g. how it is decided who gets what respite particularly in relation to peak times like weekends and Summer holiday months. Will people have to book months or years in advance?</p>	<p>Through this process, we have learnt that allocation and access has not always been applied to a set structure.</p> <p>We have therefore committed that they will work with carers through the co-production group and other forums like the SEND Parent Carer forum and Learning Disability Partnership Board to develop guidance on allocations and equitable access.</p>
<p><b>Capacity and resource within the Council to manage the transition and changes to services</b></p> <p>Some people have queried whether the Council has the capacity to effectively and safely manage the changes to services as well as the transition for those people who are impacted.</p>	<p>We have resourced additional project management support from our internal Projects and Change Team and lined up support from the Council's Human Resources to support us with implementing the changes. This includes the work we have committed to do with carers around reviewing current provision and co-producing quality standards for the service, the work to review booking systems and improvements in relation to sickness and agency use.</p>