

Residential care for older people in Hampshire

Responses to the consultation 29 July – 18 October 2013

Residential care for older people in Hampshire: responses to the consultation

Executive summary

The 'Residential care for older people in Hampshire consultation' sought the views of stakeholders and the general public on the proposal to close four residential care homes – Bulmer House, Cranleigh Paddock, Deeside and Nightingale Lodge – and Cranleigh Paddock Day Centre so that Hampshire County Council can instead invest in Extra Care assisted living on these sites or nearby in the local area. In order to inform future planning, views were also sought regarding services intended to help older people to continue to live independently in a home of their own. The consultation was launched on 29 July 2013 and closed on 18 October 2013. Responses received up to 23 October have been included in this report.

A wide range of stakeholders were informed about the consultation, including residents' next of kin, residents who had the capacity to understand the consultation, Age Concern Hampshire, Age UK, Carers Together, Princess Royal Trust for Carers, GP surgeries, Clinical Commissioning Groups, respite users, day service users (Masters House, Cranleigh Paddock Day Centre, Bulmer House Day Centre), local district and borough councils, local MPs, and local councillors. The consultation was also widely advertised. 23 meetings took place where a presentation on the consultation was made or the consultation was discussed with Council representatives. This included 10 public meetings.

The consultation questionnaire was given ethical approval by Hampshire's Research Development and Governance Panel. It was published online on Survey Monkey via dedicated web pages, and copies of the questionnaire were made available in paper and alternative formats, such as Large Print. Paper copies of the consultation questionnaire were sent to the next of kin of all residents. All residents with capacity to take part in the consultation were offered the opportunity to do so with advocates asking the consultation questions. Advocates were available to all residents.

Responses submitted by letter, email and petition were also accepted.

Responses

- Petitions were received objecting to the proposed closure of the following homes:
 - Bulmer House – 36 signatures.
 - Cranleigh Paddock – 1,719 signatures, 904 of which were on standard letters objecting to the proposed closure of the home.
 - Deeside – 7,301 signatures, of which 979 were on standard letters.

- 282 people submitted a consultation questionnaire.
- 274 people completed the first question in the questionnaire. Almost 83% were against closing the four homes to invest in Extra Care assisted living, with the majority describing their attitude as 'strongly against'. Almost 8% were in favour of the proposals.
- Where respondents have a connection to a particular home, this has been indicated below for information. This does not necessarily mean their feedback applies to only that home. Some respondents described themselves as connected to more than one home and some described themselves as unconnected to any of the homes, **hence the numbers below do not necessarily add up to the totals given.**
- Over 80% of respondents who described themselves as connected to one or more of the homes were against the proposals, with attitude strongest in relation to Deeside:
 - Bulmer House (BH) – 86% against (64% strongly against).
 - Cranleigh Paddock (CP) – 85% against (80% strongly against).
 - Deeside (D) – 87% against (81.5% strongly against).
 - Nightingale Lodge (NL) – 79% against (58% strongly against).
- 38 people who responded identified themselves as residents. Whilst advocates spoke to all residents who wanted to speak with them, not all residents had the capacity to make an informed decision about taking part in the consultation. Hence only feedback from residents who had the mental capacity at the time the advocates spoke to them was submitted by advocates to be included amongst the consultation responses in this report. The majority, 87%, said they were against the proposals (60.5% strongly against).
 - Connected to BH – 4 against, 8 strongly against, 1 not sure.
 - CP – 1 neither in favour nor against, 3 strongly against, 1 not sure.
 - Deeside – 1 against, 9 strongly against.
 - NL – 1 strongly in favour, 1 neither in favour nor against, 5 against, 4 strongly against.¹
- 98 people identified themselves as a family member or carer of a resident. 96 answered the first question. 82% were against the proposals (73% strongly against).
 - BH – 2 neither in favour nor against, 4 against, 18 (75%) strongly against.
 - CP – 1 in favour, 4 neither in favour nor against, 1 against, 21 (75%) strongly against.
 - Deeside – 1 strongly in favour, 2 neither in favour nor against, 1 against, 20 (77%) strongly against.

¹ One resident described themselves as connected to two of the homes, hence the numbers here add up to 39 instead of 38.

- NL – 1 in favour, 2 neither in favour nor against, 3 against, 11 (65%) strongly against.²
- Half of the respondents had heard of Extra Care assisted living.
- 39% of respondents were in favour of spending more on Extra Care assisted living and less on traditional residential care homes to meet the future needs of people. However it is significant that three-quarters of these people did not want the four homes to close, i.e. they did not want these particular homes sacrificed for Extra Care assisted living. 38% were against spending more on Extra Care assisted living and less on traditional residential care homes.
- 248 letters and emails were received. The majority of letters and emails received that presented views on the proposals were against the proposals.
- Key concerns raised in both public meetings and in smaller meetings with residents/stakeholders included the following: the impact to the health and wellbeing of residents if they had to move from their home and a worry about where they would be placed instead; strong support for keeping the homes open and positive feedback about the care they provided; concern about how the County Council would meet the needs of the increasing numbers of older people in the future, especially those with dementia, if they closed existing facilities, with a strong feeling that residential care would continue to be needed; and that Extra Care assisted living would not suit the majority of the four homes' current residents. There were also a range of questions asked about the consultation and decision-making processes.

Key themes (points most commonly made) from questionnaire answers, letters and emails

- The most common viewpoint was that the homes should not be closed because 'they work' and are very good. Many considered them a valuable resource to the local community. Particular features highlighted were the cleanliness, safety and security, homeliness, activities, gardens and most particularly, the quality of care, including dementia care, provided by dedicated and trained staff who have strong relationships with the residents.
- There was a similarly large response arguing that there has been too little consideration of the residents, their choices and wishes, and the impact moving might have on them. The majority of residents who took part said they were happy in their home and did not want to move. There was a strong opinion from other respondents that residents are happy where they are. There was concern that moving would have a negative impact on the health of frail elderly residents, and in many cases might hasten death. There was marked concern for the wellbeing of residents with dementia, because they find it very difficult to cope with change.

² Some family members and carers did not describe themselves as connected to a particular home, and some described themselves as connected to more than one home, hence the numbers here add up to 92 rather than 96.

People stressed the need for continuity of staff – familiar faces who understand the individual residents – and place.

- There was a strong view that residential care homes are still needed for people with dementia and others, such as those frail elderly who cannot live independently but do not need nursing care. It was argued that residential care should not be an either/or option with Extra Care assisted living – that both are needed. People said Council-run homes are needed because they are accountable and provide good quality, affordable care. Some said that changing demographics mean more care homes are needed rather than fewer.
- Many people wrote that Extra Care assisted living and independent living are not suitable for most of the residents and people like them: people who largely need care 24 hours a day, seven days a week, could not safely live independently and need human contact and company. It was argued that this group would need more care than can actually be provided through care packages and would be at risk and socially isolated in Extra Care assisted living. Many gave the view that Extra Care assisted living is not suitable for people with dementia. Some suggested there is a lack of consideration of people with dementia in the proposals – and that, by closing these homes, the Council is abandoning them in favour of less vulnerable people.
- Many felt that the reasons given for closure relating to the costs of modernisation are not good enough. A few expressed the view that costs had been overestimated or that options had not been costed out properly. Many said that the homes are fit for purpose and meet the needs of current residents: en suites are not needed and the rooms are big enough. Many residents and their relatives, though not all, said they were happy with the facilities. It was argued that the facilities as they stand suit those residents who have dementia. Several said the benefits of these smaller homes, such as quality of care and homeliness, outweigh some of the drawbacks of having elderly buildings.
- Many people considered there to be a lack of suitable alternative accommodation locally. There was concern that residents would be moved to different villages or towns, making it difficult or impossible for relatives and friends to visit. This concern was marked from relatives and friends who live nearby or use public transport. There were also concerns about the quality of care and standards in homes that had been identified as possible alternatives – particularly Oakridge and Forest Court.
- Respondents suggested a range of alternative options to the proposals. These included: keeping one or all of the homes open; building Extra Care assisted living elsewhere; retaining and refurbishing the homes to bring them up to modern standards; retaining Bulmer House, Cranleigh Paddock and Nightingale Lodge and building Extra Care assisted living in the grounds; incorporating residential and nursing units into the Extra Care assisted living schemes; keeping the homes open until residents die or move on; and building new replacement residential care homes before closing the old ones.

Points made about individual homes (in addition to the key themes above)

Bulmer House

- People said that Bulmer House was built with the intention that it would be a resource for the local community. They said the community have contributed to it.
- It was argued that there is a lack of alternative homes in the area – and there is a risk that residents will have to move far away and be socially isolated
- It was suggested that the Bulmer House site is not suitable for Extra Care assisted living as it is too isolated.
- There was concern that day centre would be lost.
- Suggestions for alternative options to closing the home included:
 - Keep Bulmer House open.
 - Keep Bulmer House open and build Extra Care assisted living on the site as well.
 - Rebuild one wing to bring the home up to modern standards.
 - Sell Bulmer House as a going concern to a private provider. Let them refurbish it gradually and possibly build Extra Care assisted living on the site as well.
 - Build a replacement for Bulmer House on a site further out of the town.
 - Keep the home open until residents die or move on.

Cranleigh Paddock

- People said Cranleigh Paddock should be retained because there is a need for specialist dementia care home in the area.
- They argued that it was purpose-built.
- People pointed out that Lyndhurst is supposed to be a ‘dementia friendly community’ – they felt that closing the home would contradict the ‘dementia-friendly’ ethos.
- It was suggested that there is a lack of other options for respite in the area.
- People argued that Forest Court and other homes are not appropriate alternatives – the care would be insufficient for people with advanced dementia and quality of life poorer.
- It was suggested that, if residents have to move from Cranleigh, they should be moved together and the staff should be moved to the new home with them.
- Suggestions for alternative options to closing the home included:

- Keep Cranleigh Paddock open.
- Put in step down beds to make it more viable.
- Get a Government grant to upgrade it.
- Add an extension to make the rooms bigger.
- Build a new Cranleigh Paddock at Stocklands and move residents and staff there.
- Build Extra Care assisted living at Stocklands and leave Cranleigh as it is.
- Keep the care home and add Extra Care assisted living to the site as well.
- Make Extra Care assisted living at Cranleigh Paddock a combined specialist dementia Extra Care assisted living facility similar to the one in Eastleigh.
- Keep Cranleigh Paddock open until the residents die or move on.
- There was concern about the proposed closure of Cranleigh Paddock Day Centre, largely from Day Centre attendees. People wrote how important it is to maintain their independence, give their carer a break, how it contributes to their wellbeing, and stops them from being completely housebound or socially isolated. They did not want it to close and there was a view that it should be considered separately from the care home as the day centre part does meet their needs. It was suggested that it could be run independently. Attendees did not want to be separated from their friends and the staff by being sent to different services. Some said they would choose Cranleigh over any other service and that it was better than certain other day centres.

Deeside

- People said that many of the residents at Deeside have dementia. There was concern that there would not be enough alternative places suitable for residents in the locality.
- They argued that Oakridge is too big and institutional to suit Deeside residents and it does not have enough places for the residents.
- Suggestions for alternative options to closing the home included:
 - Keep Deeside open.
 - Keep it open and get a new boiler and double glazing.
 - Keep it open for dementia patients.
 - Keep it open until the Oakridge extension is finished.
 - Keep it open until the residents die or move on.
 - Move the staff of Deeside with the residents to Oakridge, allowing a period where there is over staffing, if necessary, to help the residents with the transition.

Nightingale Lodge

- People said that Nightingale Lodge is younger than Fleming House (a home the Council is retaining), much the same in its facilities, and has been redecorated.
- Staff said they love working there and want to stay working there with their colleagues.
- It was indicated that, if people have to move, it would be important to make sure they are placed together with their friends.
- People argued that Fleming House is not a suitable alternative – they said it is too far for relatives to visit and would be isolating for residents.
- Suggestions for alternative options to closing the home included:
 - Keep Nightingale Lodge open.
 - Keep Nightingale Lodge open and build Extra Care assisted living on the Register Office site instead.
 - Add a new wing to bring it up to standard – on site or using adjoining sites (i.e. Masters House, Register Office). Possibly also add a nursing wing.
 - Sell Romsey Register Office site on the open market (not in a private deal with Nightingale Surgery) and use the money to extend Nightingale Lodge. Buy other land for Extra Care assisted living.
 - Keep Nightingale Lodge open and build Extra Care assisted living in the garden.
 - Build a new Nightingale Lodge on one of the Council's other sites in Romsey before the Extra Care assisted living is built.
 - Keep it open until Abbotswood is built and secure places for residents and future residents there.
 - Keep it open until the residents die or move on.

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Introduction

The 'Residential care for older people in Hampshire consultation' sought the views of stakeholders and the general public on the proposal to close four residential care homes – Bulmer House, Cranleigh Paddock, Deeside and Nightingale Lodge – and Cranleigh Paddock Day Centre so that Hampshire County Council (HCC) can instead invest in Extra Care assisted living on these sites or nearby in the local area. In order to inform future planning, views were also sought regarding services intended to help older people to continue to live independently in a home of their own.

How the consultation was undertaken

The consultation was launched on 29 July and closed on 18 October 2013. Responses received up to 23 October have been taken into account in this report.

A wide range of stakeholders were informed about the consultation, including residents' next of kin, residents who had the capacity to understand the consultation, Age Concern Hampshire, Age UK, Carers Together, Princess Royal Trust for Carers, GP surgeries, Clinical Commissioning Groups, respite users, day service users (Masters House, Cranleigh Paddock Day Centre, Bulmer House Day Centre), local district and borough councils, local MP's, and local councillors. The consultation was also widely publicly advertised. 23 events or meetings, including 10 public meetings, took place where a presentation on the consultation was made and/or the consultation was discussed with Council representatives.

The consultation questionnaire was given ethical approval by Hampshire's Research Development and Governance Panel. It was published online on Survey Monkey via dedicated web pages, and copies of the questionnaire were made available in paper and alternative formats, such as Large Print. Paper copies of the consultation questionnaire were sent to the next of kin of all residents and given to a range of organisations at the consultation events. All residents with capacity to take part in the consultation were offered the opportunity to do so, with advocates asking the consultation questions. Advocates were available to all residents.

Feedback to the consultation was also accepted in the form of letters, emails and petitions.

After 23 October, all of the consultation responses received were collated and analysed by the Adult Services Research Manager, a trained researcher who works to promote the rights, safety, dignity and wellbeing of service users and

carers and is unconnected to the four residential care homes and Extra Care assisted living.³ People's comments were analysed using 'content analysis'.⁴ This involved identifying manifest themes (overt messages) using the inductive method (i.e. themes were drawn by looking at what people said).⁵ Latent themes were not analysed as this would have involved a lot of interpretation by the researcher and could have resulted in people's points being misconstrued.

Who responded to the consultation?

- 248 letters and emails were received. The majority of letters and emails received that presented views on the proposals were against the proposals. Letters and emails were mainly from individuals or families, but also some organisations including local voluntary organisations, a parish council, a district council, a town council and private care providers.
- Petitions were received objecting to the proposed closure of the following homes:
 - Bulmer House – 36 signatures.
 - Cranleigh Paddock – 1,719 signatures, 904 of which were on standard letters objecting to the proposed closure of the home.
 - Deeside – 7,301 signatures, of which 979 were on standard letters.
- 23 public and private events and meetings took place with relatives, the public and other stakeholders variously in attendance.
 - Bulmer House Consultation Event for Public and next of kin (NOK) – 15 August
 - Deeside Consultation Event for Public and NOK – 21 August
 - Nightingale Lodge Consultation Event for Public and NOK – 27 August
 - Cranleigh Paddock Consultation Event for Public and NOK – 29 August
 - Bulmer House Consultation Event for Public and NOK – 5 September
 - Deeside Consultation Event for Public and NOK – 10 September

³ Rachel Dittrich, member of the national Social Care Research Ethics Committee
<http://www.srec.org.uk/index.asp>.

⁴ For some brief information on content analysis see
http://researchskills.epigeum.com/courses/53/course_files/html/course_files/qualitative_6_3.html
or http://www.psychology.soton.ac.uk/researchmethods/lectures/media/2007-10-29/qual_lecture3.ppt.

⁵ For a brief description of the inductive method, see
<http://www.socialresearchmethods.net/kb/dedind.php>.

- Nightingale Lodge Consultation Event for Public and NOK – 18 September
 - Briefing of the 5 Hampshire Clinical Commissioning Groups – 18 September
 - New Forest Access Group – 24 September
 - Cranleigh Paddock Consultation Event for Public and NOK – 25 September
 - Romsey Forum – 26 September
 - Hampshire Older Persons Forum – 27 September
 - Romsey Older Persons Forum – 27 September
 - ‘Save Bulmer House’ Meeting – 30 September
 - Cranleigh Paddock relatives meeting – 2 October
 - Basingstoke and Deane over 55s Forum – 7 October
 - Petersfield Community Forum – 9 October
 - Cranleigh Paddock Public Meeting – 10 October
 - Basingstoke Disability Forum – 14 October
 - Deeside Public Meeting – 14 October
 - West Clinical Commissioning Group Clinical Team Meeting – 17 October
 - Joint Older Persons Well Being Steering Group – 17 October
 - Basingstoke and Deane Borough Council Housing and Environment Overview and Scrutiny Committee – 17 October
- 282 people submitted a consultation questionnaire. Some were from organisations, including voluntary organisations and private businesses. 38 people who responded identified themselves as residents of the homes. Whilst advocates spoke to all residents who wanted to speak to them, not all residents had the capacity to make an informed decision about taking part in the consultation. Hence only feedback from residents who had the mental capacity at the time the advocates spoke to them was submitted by advocates to be included amongst the consultation responses in this report. 98 people identified themselves as family members or carers of residents. More details about questionnaire respondents can be found below under the chapters for Questions 3 and 4 and Section 3 of the questionnaire.

What people told us: please note

Where numbers of people who made a particular comment are given, they should be treated with caution – quantifying people’s views necessitates a degree of interpretation. Furthermore a few respondents made more than one consultation response (e.g. completed an anonymous questionnaire and wrote a letter), in which case their point might be recorded as the view of more than one respondent. Nonetheless the numbers have been included where they may perhaps usefully give some indication of commonality of feeling amongst respondents. This is important because answers to the ‘tick box’ questions do not give the full picture regarding people’s views. Where respondents have a connection to a particular home, this has been indicated for information. This does not necessarily mean their comments apply to only that home. Some respondents were connected to more than one home and some were unconnected to any of the homes, hence these numbers will not always add up to the totals given.

What people told us: petitions

Petitions were received objecting to the proposed closure of the following homes:

- Bulmer House – 36 signatures.
- Cranleigh Paddock – 1,719 signatures, 904 of which were on standard letters objecting to the proposed closure of the home.
- Deeside – 7,301 signatures, of which 979 were on standard letters.

The Bulmer House petition read: “Save Bulmer House. We the undersigned believe our senior citizens deserve quality in-house care, not a means for profit making for private organisations. Hampshire has over £400 million in reserves; we would prefer it spent the money to bring the home up to standard.”

The Cranleigh Paddock petition read: “Save Cranleigh Paddock specialist dementia unit. We the undersigned believe our senior citizens deserve QUALITY IN-HOUSE CARE, not a means for profit making for private organisations. Hampshire has over £400 million in reserves; we demand it spends the money to bring our home up to standard.” The standard letter (Appendix B) objecting to the proposed closure of Cranleigh Paddock praised the home as:

- providing a safe, caring, happy and homely environment for vulnerable dementia patients;
- meeting CQC standards; and
- providing easy access to families.

It suggested that, if the home were to be closed, the residents would be sent to homes that are not familiar to the residents and would not be near to their relatives.

The Deeside petition read: “Save Deeside Care Home, South Ham, Basingstoke. We the undersigned believe our senior citizens deserve quality residential care homes. Hampshire has over £400 million in reserves. DO NOT let Hampshire County Council close this home.” The standard letter (Appendix C) objecting to the proposed closure of Deeside said that:

- care homes like Deeside provide an important service for people who have needs, are vulnerable, and who cannot live independently for many reasons, but do not necessarily require full nursing care;
- such homes are needed in their community; and
- Extra Care assisted living schemes are not appropriate for many people in Deeside and neither are nursing care homes.

What people told us: questionnaire responses

Section 1: The proposed home closures

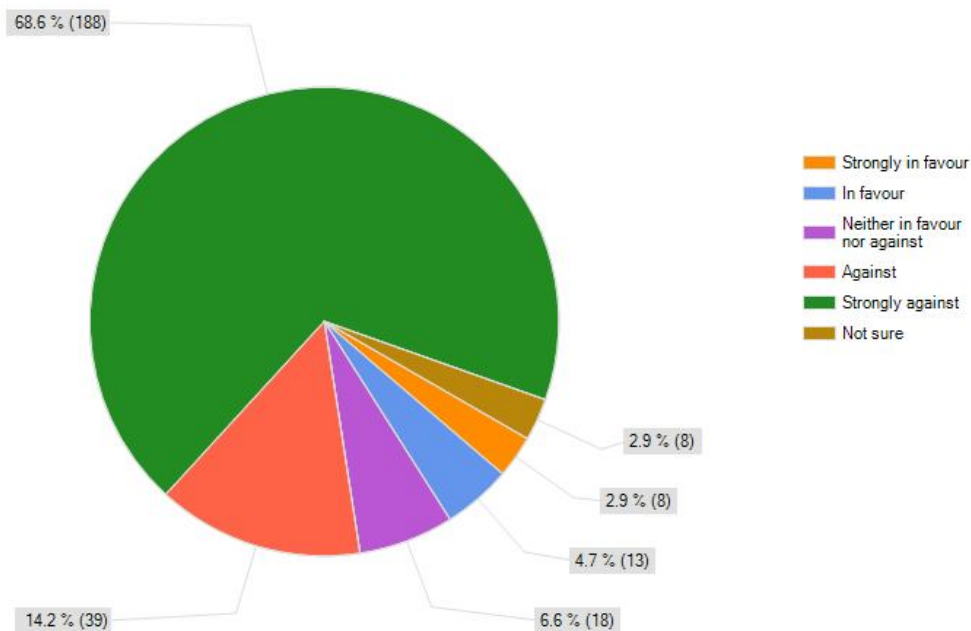
Question 1.

The County Council is proposing to close four residential homes – Bulmer House, Cranleigh Paddock (including the older people’s day centre), Deeside and Nightingale Lodge – so that it can instead invest in Extra Care assisted living on these sites (Cranleigh, Bulmer and Nightingale) or nearby in the local area (Deeside). How would you describe your attitude to this proposal?

274 people completed the first question in the questionnaire.

- Almost 83% (227 people) were against closing the four homes to invest in Extra Care assisted living, with the majority describing their attitude as ‘strongly against’. Almost 8% (21 people) were in favour of the proposals.

The County Council is proposing to close four residential homes - Bulmer House, Cranleigh Paddock (including the older people’s day centre), Deeside and Nightingale Lodge - so that it can instead invest in Extra Care assisted living on these sites (Cranleigh, Bulmer and Nightingale) or nearby in the local area (Deeside). How would you describe your attitude to this proposal?



- Over 80% of respondents who described themselves as connected to one or more of the homes were against the proposals, with attitude strongest in relation to Deeside:

- Bulmer House (BH) – 86% against (64% strongly against).
 - Cranleigh Paddock (CP) – 84% against (79% strongly against).
 - Deeside (D) – 87% against (81.5% strongly against).
 - Nightingale Lodge (NL) – 82% against (60% strongly against).
- 38 people who responded identified themselves as residents. The majority, almost 87%, said they were against the proposals (61% strongly against).
 - BH – 4 against, 8 strongly against, 1 not sure.
 - CP – 2 neither in favour nor against, 3 strongly against.
 - D – 1 against, 9 strongly against.
 - NL – 1 strongly in favour, 1 neither in favour nor against, 5 against, 4 strongly against.

195 people gave reasons for their answer choice. The key themes (most frequently made comments) from people's answer choices were as follows.

- The most common comments expressed concern about the residents of the four care homes (total=55; connected to BH=13; CP=14; D=13; N=15). It was clear that many people felt that, in proposing to close four care homes and invest in Extra Care assisted living, there had been too little consideration of the residents.

“They have got their own homes and they don't care about us.” (D resident)

- In particular, there was great concern about the impact the proposals would have on frail vulnerable elderly care home residents. It was felt that the proposals do not take into account the psychological and emotional stress it could cause residents if they are forced out of their home. It was suggested that moving them is likely to be detrimental to their health and wellbeing (total=39; BH=10; CP=11; D=9; N=11).
 - Three people said they were concerned that residents would die as a result of moving.
 - Two said their family members who are residents are extremely worried about moving.
 - 22 highlighted that older people, particularly those with dementia, find it hard to move and cope with change – they need continuity and routine for their wellbeing – so they may deteriorate and their behaviour could become more challenging if the homes are closed and they are forced to move.
 - Nine were concerned about the impact upon bonds residents have with other residents, staff and pets in the homes (BH=1; CP=3; D=4; NL=2).

- A resident of Nightingale Lodge spoke about having to move previously and was distressed at the prospect of moving again. Two other respondents, one connected to Nightingale Lodge and one connected to Deeside, also mentioned residents who have already had to move from previous care homes.
- Two stated that residents should be allowed to end their days in the home.

“Very happy with the care being provided for my mother at Cranleigh. Very worried about how the moving will affect my mother’s health and state of mind.”

“It would be bad for [name] to move because she is very emotionally happy at Nightingale Lodge. She lives near her family. The staff are excellent carers who have really got to know [name] and her needs. A move would probably end her life.”

“I also worry that moving and displacing elderly people, many of whom are confused, would severely affect their health and wellbeing. There is a great deal of evidence that this is the case and I think it would be very wrong of the Council to ignore such evidence.” (BH)

“There is a need to take into account the needs of the confused elderly who are already living at Bulmer House. It can be very unkind to change their surroundings when that is their only grasp on reality.”

“My mother has been in Bulmer House for five years. She considers that her home now. She is 89 years old and feels safe and secure with the people and carers she knows. The thought of her having to move is making her ill with worry and she will not survive a move, of that I am sure.”

“A lot of residents do not have any family and they have bonded with staff and built good relationships which make them feel safe.” (D; NL)

“I love my job, and I love the residents. I have two homes, the one I live in with my own family and the one I go to, to look after my `other family`. To see it close would be heart breaking for everyone who works there and also to the elderly people who put their trust in county when they chose Deeside to live in in the first place.”

“Hopefully what friends she has made and staff will go with her which I understand to be Forest Court.” (CP)

“He has made friends at Deeside and he does not want to move”.

“I would feel more reassured if she moved with other residents that she knew rather than on her own.” (D)

“She had to give up her cat when she moved in and that was heart-breaking. She is very attached to the cats at Deeside and wants them to go with her.”

- 27 residents commented that they did not want their home to close, they did not want to move and/or that they were very happy in their home (BH =9; CP=1; D=10; N=7).

“I don’t want to move from here. It’s good, comfortable, good food, good bed and they take care of us here. I feel safe here. Everyone can join in so you don’t feel lonely.” (NL resident)

“I think it’s a disgrace. I love it here and I think it’s a shame it is moving and I don’t think it should close.” (D resident)

“I like living here. I like my room, the food and the staff... I don’t want to move and I am a little bit worried about it. I don’t think it should close. There is nothing I do not like about the home.” (D resident)

“Why [close it] if people are happy. I am happy here; I think everyone else is as well.” (BH resident)

“They should definitely keep it open... I dreaded coming to a care home but really like it here.” (BH resident)

“I don’t want to move. I’ve been here for 14 years. I’ve done my end of life plan. My wishes were to have my ashes put under the magnolia tree in the front. If they close I will have to change my plan. I don’t feel another home will be the same. I fear starting all over again because I thought I was here for life.” (D resident)

- Specific points raised included:
 - Four said they did not want the change and upheaval that closure would bring – they did not want to be uprooted (BH=1; D=3).
 - Breaking of bonds. Three expressed particular concern about the impact closure would have on relationships/friendships they have at the home (BH=1; D=2). One from Deeside talked about their attachment to the cats at the home.
 - Three at Deeside said they felt that they were going to be forced to move.
 - Three at Deeside said they had been at the home a very long time – one 14 years, another 28 years.
 - Individuals were concerned that they might be sent to live further from their family (N=1) and were anxious to know how much room they might have in a different home (D=1).
 - A few people highlighted aspects of their home that they thought needed improving (gardens at Deeside, small rooms at Bulmer House, sometimes the staff attitude at Bulmer House) but they were happy overall and did not want their home to close.

“Who is that person who says we’ve got to move? I have strong feelings but will they take any notice? You’ve got to settle down again if you move. It gives me nightmares.” (D resident)

“I’ve got a partner, can she come with me? I don’t know what I’ll do without her.” (D resident)

- Similarly 21 other people who were either against the proposals, or neither for nor against, wrote that residents are happy and did not want to move, or that they are very settled there (BH=5; CP=4; D=5; NL=8). They highlighted that being settled is something very important for those residents with dementia. Two said that the residential homes had been home to the residents for many years – as many as 28 years – so it would be wrong to move them.

“After several spells in hospital and a care home my uncle hated he is now settled. This has taken 18 months. He has been at Deeside since Christmas and is happy - only to be now moved again. That is just not right.”

“My husband is in Bulmer House and is very happy there and I am strongly against closure of a perfectly good home where all residents live happily together.”

“I think it is extremely unkind to evict them from their home, some residents have lived there for 28 years.” (D; NL)

“I don’t believe moving people of their age is good. It will cause many residents to become more confused and stressed. This has been their home for many years.” (CP)

- The second most common reason people gave for being against the proposals was that the homes, or one particular home, are very good (total=49; respondents connected to BH=11; CP=18; D=12; NL=8). People described the homes as ‘a proven system’ with good or exceptional standards and levels of care, safe, secure, small and homely, clean and caring. People praised the gardens at Cranleigh Paddock and Deeside. They explained how the pets at Cranleigh Paddock and Deeside improved residents’ quality of life. They also wrote about the new kitchen at Deeside, and the self contained units and colour-coding at Cranleigh Paddock and the fact that it is all on the ground floor. People spoke about aspects of the homes that make them stand out as special, such as attention to individual needs, activities and laughter and excellent dementia care. Three people said they were better than private homes because of the activities, facilities, staff and dementia care (BH=1; D=1; CP=1). Nine said that the high quality of care provided at the homes outweighed any deficit in the home’s facilities (BH=2; CP=4; D=1; NL=2).

“I understand the need for Extra Care housing, but to sacrifice these good well run homes would be a shame.” (CP)

“My mother suffers from dementia and benefits greatly from the care and situation at Cranleigh Paddock. It is on the ground floor, all on one level and she

is able to move about freely, making use of the lovely garden. This helps a great deal in terms of gentle exercise and reminiscence. She has become used to the care workers and the level of familiarity is important to her."

"The care and support were never at fault. Cleanliness and attention to detail was always to the fore... the friendly environment gave a warm homely feeling to the residents and families visiting their relatives." (CP)

"Deeside provides the type of care my mother requires 24/7... She seems very settled at Deeside and very well cared for."

"It's all nicely decorated and clean. The gardens have perked up a bit. What a waste. It doesn't make sense." (D resident)

"I was the gardener here. I like it because it's out of the way like an island. We might not have grounds somewhere else." (D resident)

"People with dementia need homes with company and constant care – the company and care are much more important than posh rooms and en suite bathrooms." (NL)

"He doesn't need en suite facilities and a larger room. He needs care and understanding his needs in his confused state - he gets this at Cranleigh Paddock."

"Cranleigh Paddock provides excellent care for its residents who all suffer from dementia. Upgrading their bedroom/bathroom arrangements will not make them feel more secure or cared-for."

"I value the caring attitude of the team as a whole. This is harder to rebuild or remake than en suite bathrooms which I believe would have had little positive impact on my mother's wellbeing." (BH)

"It is an exceptional residential home in that the residents live in small self-contained areas. Consequently they all know each other in their own area, they are looked after by the same friendly staff and there is no feeling of being in a large impersonal home. It is much more important for residents to live in a cosy environment than it is to have larger bedrooms with modern facilities." (CP)

"Because it is a really good home. It's very nice. We all get spoilt. They do all sorts of things to entertain us. We have good staff." (NL resident)

"In my considerable experience of working in residential care both private and local authority, also as a field social worker I am convinced that the care in privately run homes is very rarely as good as in local authority homes, the reason for this being the high quality of training and the dedication of staff in local authority homes." (BH)

- The staff of the homes were described as caring, experienced, trained in dementia care, understanding, dedicated, trustworthy and having a strong relationship with staff/residents (total=19; BH=4; CP=6; D=5; NL=4).

"I am delighted with the care he is getting as the staff are so dedicated and give the residents the dignity they deserve." (CP)

*"I'm quite happy. They are kind to us. The staff are very nice- that's important."
(D resident)*

- The third most common comment against the proposals was that residential care units are still needed and will be in the future so none of them should be closed (total=40; BH=12; CP=16; D=4; NL=10 – some respondents had a connection with more than one home). People said that residential care homes are needed for people with dementia and other older people who cannot live independently but do not need nursing care. Some thought the Council should build more of them. There was a view that residential care should not be an either/or option with Extra Care assisted living and there is a need for both. There was also a view that communal living is better for older people. It was suggested that the community need the type of care provided in small units, and this type of care is better than the care in Extra Care assisted living. People connected with Cranleigh Paddock argued that there is a high need for specialist dementia care homes like Cranleigh Paddock.

"Someone is under the delusion that Extra Care assisted living and residential care is an either/or option. I believe that they are very wrong."

"The County Council should not be closing the residential care homes to replace them with "Extra-living" care. There is a need for both types of provision so the Extra Care assisted living should complement the residential care homes and not replace them." (NL)

*"I feel it provides safe and reassuring care for vulnerable people who are no longer able to manage in their own homes but are well enough to enjoy company and group activities. If the home closes, this specific type of care will be lost."
(BH)*

"I think that Bulmer House provides essential in-between care for those who are unable to live independently but are able to enjoy the company and activities provided at the home."

"There is a greater need for specialist dementia care homes." (CP)

"I understand the need for Extra Care housing but I feel there is a greater need for specialist dementia care." (CP)

"There is already a high demand for places that can care for clients with dementia in this area and no more can afford to be lost." (CP)

"Lyndhurst needs a dementia home, especially as it is a "Dementia-friendly village"." (CP)

179 "Small dementia specialist homes are an asset to the county and should not be replaced by bigger multi-use homes."

- One of the arguments for retaining the homes was that levels of demand would increase and mean more care homes are needed not less (total =10; BH=3; CP=4; D=1; NL=4). People said that different family structures, increasing numbers of people with dementia, people living longer and an ageing population meant it would be unwise to close care

homes now. People said that the Council claimed there was a lack of demand for residential care homes, and that this claim was untrue. They suggested that certain homes were being deliberately run down by reducing staff and putting a block on admissions.

"We have an ageing population and an increase in the number of people with dementia who are utterly unable to feed, clothe or wash themselves, who need 24-hour specialist care such as that provided at Cranleigh Paddock."

"Romsey is large enough to support a HCC residential unit in the town- not just near- actually in it." (NL)

"When I came here it was full up, now look at it. I think they are trying to run it down." (NL resident)

- Some said that Council-run residential care homes are needed in particular and the closures would leave Hampshire with too few (total=10; BH=5; CP=1; D=1; N=3). The reasons given were that they are better quality than private care homes, with a high standard of care and trained and dedicated staff. People said Council-run care homes have the benefit of being well regulated, affordable and accountable. Some viewed the potential closure of these homes as abdicating responsibility for the elderly.

"It is important that services are publicly run so that these services are accountable to families and friends of those in care. It is clear from numerous scandals in private care that public care for the elderly is much needed." (BH)

"There are not enough Council-run residential homes as it is. Slowly but surely you are closing them one by one." (BH)

"The care these homes provides needs to be invested in and not lost. HCC should invest in Extra Care housing on land brought for this purpose and not lose the care homes it has and the reputation it has for providing such good care." (CP)

"The Council should be showing best practice in these homes, not closing them." (BH)

"It would seem HCC are passing 85% of the care to the private sector, opting out?" (NL)

"We will always need a care home for the elderly who can no longer care for themselves in their own homes and have little money and no savings, like myself." (NL)

- The fourth most common type of comments received were expressing the view that there was a lack of suitable alternative care homes for the residents to move to in the locality (total=35; BH=5; CP=13; D=6; NL=7). People said there was a lack of vacancies for people with dementia and other people who need care 24 hours a day but not nursing care. People connected to Cranleigh Paddock stressed that there are no other specialist dementia care homes in the local area, including private care homes. People said that the numbers did not add up – there would be too

few places for the current care home residents in the Extra Care assisted living homes; too few places for residents of Nightingale Lodge and Cranleigh Paddock in Forest Court; too few places in Oakridge for Deeside residents. There was also doubt that there would be enough places for people with dementia in private homes in the various localities.

“My mother is a resident at Cranleigh Paddock and gets expert specialist dementia care which is not available at other care homes in the area. A move would be very detrimental to her and other dementia residents there.”

“Closure of a specialist home for people with advanced dementia, who require specialist 24 hour care, before providing any equivalent, up to date care home, to suit their needs and the needs of increasing numbers of people with dementia in future years is WRONG. Assisted care packages, supplied by the private sector, must not be enabled by the casting out of this vulnerable group of our population. This is not care.” (CP)

“This is the only specialised dementia care home in our local area and we need one.” (CP)

“If these places go, where are these people meant to go? The local hospitals are already struggling to find beds and people are having long admissions in hospital already because there are no beds in homes available.” (CP)

“These care homes are much needed, where are all the residents from these four care homes to go as they are unable to live independently but do not require nursing care.” (D)

“We will lose a fabulous team of specialist dementia staff - we will lose the only specialist dementia home in South Hampshire. This will affect the people of our community both now and in future generations - Lyndhurst is due to be one of the first villages to be designated as a dementia friendly community (due to happen, along with training for the shopkeepers in November this year). We are going to look pretty dementia un-friendly if we have just allowed the closure of a valuable dementia care home!” (CP)

- Looking at specific reasons why people said alternative homes were not appropriate, there was a view that private care would be too expensive for residents and future people needing care (3; BH=2; CP=1). There was also concern about the quality of life and care in alternative care homes, with particular doubt about the quality of life residents with dementia, and especially residents of Cranleigh Paddock, would experience in other, non specialist homes (total=5; BH=1; CP=3; D=1). There was concern about the level of training that staff in other care homes would have, particularly around dementia care and concern about the levels of care provided in private homes. Respondents were critical of the HCC homes Forest Court, Emsworth House, Bickerley Green and Oakridge. Specific concerns were that these homes were too large and/or institutional and lacked easily accessible enclosed gardens. It was suggested that Forest Court's

facilities, such as first floor accommodation, lifts and en suites, made it a danger to people with dementia.

“The residents need small units where close relations with the staff can be achieved. Larger units such as Oakridge house would be threatening... Large complexes with 80+ residents tend to isolate.” (D)

“With this current proposal, it looks like HCC is planning to move to a more “Mr Rochester” style of care for the elderly demented [at Forest Court]. This is clearly cruel and a violation of all human rights and dignity. This proposal alone has caused me to lose all faith in HCC, its officers and elected representatives. To even think it is acceptable to close Cranleigh Paddock and stick the residents in the attic of a distant location shows how wrong HCC is in it’s thinking.”

- Connection to place was very important to many respondents. People talked about how they could currently visit their relatives easily because of where the care homes are placed. There was marked concern that alternatives would be too far away and residents of the care homes, and future local people who need care, would be isolated because family and friends could not visit them easily or, in some cases, at all (total=17; BH=4; CP=5; D=4; NL=5). There was a view that the homes were a long-established resource for the local community. For example, one person mentioned that the facilities at Bulmer House are used by local groups.

“Elderly people such as the lady I visit... depend on the close proximity of family and neighbours who can easily visit, which also ease the burden for the staff.” (BH)

“Cranleigh is a part of the village and it’s just a disgrace that the people who live there or use any of the service are going to have to leave probably to an area they don’t know.”

“Deeside is near my home; I can visit and take my dad home for the day.”

“I am the only relative in England. I can catch the bus from the train station to Deeside, but what happens if she moves?”

“Deeside has been part of the community since 1965. It provides excellent care for the elderly of the area. On speaking to many residents of Basingstoke, most have some connection to Deeside whether it is someone who works there or a family member who has been cared for. It would be criminal for the community to lose this excellent facility.”

“There needs to be a dementia residential care home in Romsey as the transport network does not lend itself to relatives travelling from the Romsey environs to elsewhere e.g. Eastleigh, Winchester and Southampton.” (NL)

“I don’t want to go miles away from family.” (NL resident)

- The fifth most common comment about the proposals was that Extra Care assisted living, and independent living in general, was not appropriate for most of the residents, or people with dementia now or in the future (total=33; BH=4; CP=9; D=9; NL=7). People said the residents will not benefit from the proposals as most or all would not be able to go into Extra Care

assisted living. They said Extra Care assisted living was not enough for these sorts of residents – that it was no substitute for having professionals on call 24/7, created too little social interaction and would be unsafe. There was a view that people would be lonely. Some respondents expressed a preference for communal living. There was a view that the proposals had not taken into account the needs of people with dementia. There was particular concern for people with advanced dementia amongst respondents connected with Cranleigh Paddock, who suggested that Extra Care assisted living or independent living would be no substitute for the specialist dementia care provided in that home. There was also a view that the proposals would not meet the needs of carers of people with dementia because they did not provide enough reassurance that people with dementia would be adequately cared-for.

“Extra Care assisted living will not meet the needs of older people with frailty or severe dementia. They will be unable to cope in those places. In Nightingale Lodge only two residents out of 36 would manage in Extra Care assisted living.”

“Extra Care assisted living provision will not be sufficient for people whose condition is similar to those who are currently in these residential units. They mostly suffer with dementia and need 24/7 care, which mostly involves nursing care.” (NL)

“I do not feel that the Extra Care Assisted Living would be suitable for the current residents of my local residential home, Nightingale Lodge. It would suit a certain number of elderly people but it is not replacing like with like.”

“Extra Care assisted living may be ok for some people as a stepping stone, but dementia patients need more care and companionship than visits by carers can provide. Where will there be left for people to go when Extra Care assisted living is no longer enough? Will they die lonely lives?” (D)

“I like living with company. I wouldn’t want to live on my own.” (BH resident)

“I think communal living is much better for older people. When I was young I did not think so, but now I think it is better for people to live in a community with others. It reduces risks and people feel happier. If people live alone they get isolated and may get depressed.” (BH resident)

“Deeside provides the type of care my mother requires 24/7. Assisted living sheltered accommodation has been tried but was unsuccessful due to her dementia.”

“Although there is the need for Extra Care housing, I feel there is also the need for dementia care, and dementia sufferers could not manage in Extra Care assisted living even with support, would be isolated and they need trained staff/people to assist.” (CP)

“Extra Care assisted living will not necessarily meet the needs of people with dementia. ... The proposal lacks adequate plans for the future or an impact assessment on people with dementia.”

“She would not be able to benefit from Extra Care assisted living having moved from a warden-assisted flat with high levels of care going in daily - I feel this assisted living arrangement comes too late for her and am extremely concerned about having to move her at this late stage, from a specialist dementia unit like Cranleigh Paddock.”

- 19 respondents thought that the reasons given for closure that focused on the cost of modernising the care homes were not good enough (BH=4; CP=6; D=5; NL=4). It was suggested that no proper cost/benefit analysis had been made. People argued that residents and their families were not bothered by the alleged shortcomings of the care homes: for example, they suggested there was no need for fixed hoists in every room and that people did not need en suites. Indeed, some suggested that en suites would be a danger for people with dementia. It was argued that the buildings were fine as they are. Individuals pointed out that Nightingale Lodge met CQC standards, Nightingale Lodge had been redecorated and Cranleigh Paddock had been purpose-built. People said the size of corridors and rooms in Nightingale Lodge, Cranleigh Paddock and Deeside were the same as other Council care homes. For example, rooms in Nightingale Lodge are the same size as those in Fleming House but, one person pointed out, Nightingale Lodge is younger.

“It would be nice to have your own bathroom but it’s no problem using the ones here.” (D resident)

“I would not like an en suite as I like my bathroom and toilet to be away from my room.” (D resident)

“I have known people who have lived at Cranleigh and they were given amazing care, the surroundings were just what they needed. They DO NOT need en suite facilities as they have dementia which means they could quite easily leave taps on and burn themselves with hot water. All residents I have spoken to and their families were very happy with the care there.”

“My mother was a resident of Cranleigh Paddock for three years up to April 2013... the building, set in its wonderful grounds, offered relaxation and a safe environment to enjoy the fresh air for all. The interior of the building was constantly being updated and at no time seemed not fit for purpose.”

- There was concern about, and objection to, the proposed closure of Cranleigh Paddock Day Centre from 14 people, mostly Day Centre attendees. People wrote how important this Day Centre is to retain their independence, give carers a break, how it contributes to wellbeing, and stops them from being completely housebound or socially isolated. Some said they did not want change, or that they did not want to be separated from their friends and the staff by being sent to different services.

“This is the place where I like coming to most and would not have anywhere else to go.”

“I have no idea why they want to pull it down. We have no idea where they will put us but we want to stay together with our friends and the carers.”

"I would like to stay together with everyone. I don't like change."

"We are all quite happy here. We get on with the carers. I am really quite unhappy about it. We want to stay together, all of us as well as staff."

"In order for my father to remain in his home with my mother, day care centres are essential. Providing care in his home is not sufficient and not possible as we have found out. Resources are not available to provide this level of care."

"Possible deterioration of [name]'s health if he cannot attend – he really enjoys it and they can do things with him that I cannot."

"It has taken my mum a while to get into a routine of going to a Day Centre, and has built up a lovely relationship with the carers there. Now we're back to square one! My mum suffers from anxiety and does not like change- something quite common in the elderly. I wish the not so elderly people who decide to disrupt the residents' lives would appreciate the impact it has on people such as my mum."

- In response to the first question, people who were against the proposals also expressed the following:
 - The view that particular homes should be upgraded as needs change (total=5; BH=2; CP=1; D=1). People suggested it will not cost as much as has been estimated. Two, one connected with Bulmer House and one with Deeside, suggested that the Council should use its reserves to upgrade the homes.

"Why not spend some of Hampshire County Council reserves to adapt Bulmer and leave the residents to spend their last few years in peace."

- Concern about the impact on the staff (total=4; CP=1; D=2; NL=1).

"It's unfair for the staff here, they are all upset by it. Some might not be able to get another job." (NL resident)

- Distress as a relative of a resident. Four people said they were upset at the prospect that their relative might have to move, with two of them stating that it had taken a long time to find a place suitable for their relative and they were distraught at the prospect that they might have to go through the process again (D=1; NL=1).
- The view that the consultation is a formality and the Council have already decided to close the homes (total=4).

"I have a feeling that this place will close because they won't listen to us. If they intend to shut something down they will do it anyway." (D resident)

"In the long run they will do what they want, if they want to shut it they will." (NL resident)

- The view that the proposals are not for the welfare of older people, but all about money, land and greed or an excuse to sell off real estate (total=4).

“If the authorities want to invest in ‘Extra Care’ they do not need to demolish ‘existing care’ to achieve that aim. Cranleigh Paddock is within the village community and the building does not need to be bulldozed for developers’ gain and the County Council’s capital asset gain.”

“Petersfield needs a care home like Bulmer House in the future for the ever increasing sufferers from dementia - not a profit making enterprise!”

- Concern about the impact the development of Extra Care assisted living at Cranleigh Paddock would have on the immediate neighbourhood in terms of levels of traffic on the private access road, road degradation, pedestrian access, disruption from the construction and the potential loss of mature trees (one person).
- The view that Extra Care assisted living will be more expensive than keeping the homes open (one person).
- Concern about the loss of Nightingale Lodge as a place to get respite to have a break as a carer (one person).
- Concern that the day centre at Bulmer House would close when the care home is closed (one person).

“I like going to the day centre. I do not like change. I am 81 years old.”

- Objection to the closure of Cranleigh Paddock as it is a specialist dementia unit, but support for closure of the other three homes on the basis that they are ordinary residential homes (one person).
- Concern about what will happen to the sheltered housing scheme at Cranleigh Paddock.
- Some people had mixed feelings about the proposals and had answered ‘neither for nor against’ or ‘unsure’ to the first question. Their comments were on the following themes:
 - The building is no longer fit for purpose or there are better facilities elsewhere (total=4; BH=3; CP=2), but:
 - I would still like it to stay open (BH=1).
 - My relative is happy there and moving may unsettle her but better facilities somewhere else might help her condition (CP=1).
 - The staff are second to none (CP=1).
 - Whatever replaces it needs to be tailored to the needs of people in Petersfield (BH=1).
 - It is not good that there will be disruption for the residents (total=3; CP=1; D=1; N=1), but:
 - This can be mitigated against by making sure change is managed and resident-led, e.g. giving people enough time they need to cope with change (CP=1).

- I understand the need to progress and change/become more efficient (D=1; NL=1).
 - The care is currently very good, but with the doubts about the future, good staff will leave and the care will decline (NL=1).
 - Not enough information has been given to answer the question (total=2; BH=1; CP=1). For example, the numbers of dementia and nursing homes and their capacity, how many units will be provided, and what will happen to residents with advanced dementia have not been given.
- Some people made comments in support of the proposals. Comments included:
 - The building is outdated (total=7; BH=1; CP=1; D=2; N=1). The rooms at Deeside are too small (one person).

“I am only in favour of closure because Bulmer House desperately needs updating.”

“I refer to Deeside as it is very dated and has not got the facilities which more up-to-date places have. It is also in an out-of-the way area.”

- There is a need to invest in future services, despite the upset it will cause (total=2; BH=1).
- It could be a better living environment for residents if they moved (total=2; D=1; NL=1).

“My mother was in Deeside about 10 years ago. We had her moved from there not because of the building but the staff were non-caring, non-existent on occasions. The place was never clean, floors unswept, crockery not removed from tables after meals. On one occasion another resident fell from her chair and there was no one to be found to help her so had no option but to leave her on the floor. Apparently they were all on a tea break.”

- This type of service (residential care) is institutionalised and outdated (total =1, NL=1).

Question 2.

If there are any other alternative options that you think the Council should consider in relation to the four homes and four proposed Extra Care assisted living developments, please give details below.

122 respondents answered this question. The crux of most of the responses was that the four homes, or specific ones, should be kept open.

Specific comments around keeping the status quo included:

- Think about how dementia residents would cope in Extra Care assisted living schemes. The suggestion was that Extra Care assisted living is not the answer for this group (total=4; CP=3; NL=1.)
- Invest in residential care (total=14; BH=6; CP=3; D=3; NL=3). The argument was that the homes are needed for those people who cannot live independently no matter how much support they are given at home. Respondents said specialist dementia residential care is needed – demand is increasing – and it is needed locally for people who have limited funds. It was also suggested that communal living works well for these groups and some people prefer it. One of the respondents said that residential care homes are basically a good idea but need more staff, more training and safe outdoor spaces to be good (D). One said that more nursing homes are needed (NL) and two said that there should be separate units for frail elderly and people with dementia (BH).

“Mixing residents with dementia with other elderly residents can unfortunately cause confusion, stress and anxiety for both types of resident.”

- Leave the homes alone – don’t close them (total=20; respondent connected to BH=8; CP=5; D=3; NL=4). They should stay in public ownership to keep them affordable and accountable (BH=1).
- Keep Bulmer House open (BH=3).
- Keep Cranleigh Paddock open (CP=8). One said it should be kept open for dementia residents in particular.
- Keep Deeside open (D=5). One said that it should be kept open for dementia patients.
- Keep Nightingale Lodge open (NL=4).

“Keep Cranleigh Paddock for dementia residents as moving them would cause so much confusion and heartache to their families. They are very contented with the home and the wonderful staff they have there.”

- Seven respondents (mainly users of the service) commented that they wanted Cranleigh Paddock Day Centre to stay open. They said that the building was fit for purpose and that it would be desirable for it to be run as an independent concern (unconnected to the care home). Two said that there was a shortfall of day care in the New Forest and more investment was needed in day care.

“The day centre building is fit for our clubs.”

“I can understand why they want to modernise the living bit at Cranleigh, but not the day service.”

“There is nothing wrong with the building, it already suits us. We want to have it independent from Cranleigh Paddock.”

"I think the day centre could remain open with very little work to be done. We could run independent from the home as the other day centres do and have done in the past. It is only our meals that come over from the home."

- Three people said that, if it was closed, the Council should fund alternative day care. Suggestions were that it should be locally in a nearby building or in a private facility; it should be suitable for people with dementia; transport should be provided.

"A day centre option of some kind would be best. There are not enough 'dementia-friendly' resources in the community."

With regards to the proposed care home closures, an alternative option suggested by 12 people was to retain the homes and build Extra Care assisted living elsewhere (BH=4; CP=8; D=1; N=2). It was suggested that the Council owns lots of other land that could be used for Extra Care assisted living: for example, Stocklands and Romsey Register Office site.

Three argued that HCC should choose not to build Extra Care assisted living because there is already similar accommodation available (CP=1; D=1; NL=1).

Many people said that the homes should be refurbished, upgraded or rebuilt in the same place (total=43; BH=16; CP=13; D=5; NL=9). There was doubt that this would be as expensive as had been estimated. It was thought that fewer amendments were required to the homes than the Council suggested. People considered upgrading the homes to be a cheaper option than building Extra Care assisted living. One person suggested that redundancies would cost as much as keeping and upgrading the homes would cost. Another person said the Council should upgrade at least two of the homes.

"The Council should consider the real advantages offered by such in-between care, and how the homes can be updated and refurbished without losing this essential facility... reducing council run care homes is a dangerous step to take. It will leave many vulnerable people at risk of isolation and changes in policy leaving them stranded if money for care is reduced." (BH)

"Update existing homes to ensure welfare of residents still living there. This will be more beneficial to Dementia sufferers of the future, as they will get the right sort of care for them. Extra Care assisted living is not the answer in most Dementia patients." (NL)

"The council should use "our" money to put back into updating the existing care homes." (CP)

"The most practical and economic route is to allocate a budget for re-investment in providing the structure, fittings and specialist staff within the properties already managed."

"No evidence has been produced, or even obtained at 25/8/2013 to show the homes cannot be modernised. No evidence shown/obtained to show projected costs of such modernisation. No surveyors reports, architects or builders reports. This is a sham. HCC should modernise the homes. There is no need for en-suite

rooms. Nightingale Lodge met all the requirements of care to the residents without en suite rooms, or in-room hoists etc. They manage because the beds are all hospital beds and can be raised. There is enough room to get both sides of the beds.”

“Spend a little money making improvements to Bulmer House. The residents do not need en suites as most need help with toileting.”

“The standard of care is more important than excessive specifications.” (BH)

“En suite facilities including showers are not necessary for the residents - they need to be taken to the toilet and given a bath.” (D)

11 people (BH=5; CP=2; NL=4) suggested that their local home had sufficient space to be expanded and improved whilst keeping residents in situ, for example:

- Update the spare wing at Bulmer House.
- Remove the wall between bedrooms in some parts at Bulmer House so hoists can be put in for the few who need them.
- Build a new wing at Nightingale Lodge. This could be done on the existing land or by using the Masters House or the Register Office site.
- Extend Cranleigh Paddock so there are bigger rooms.

“HCC should build a new wing on at Nightingale Lodge, residents to remain in place. There is enough land to do so. It was done at Fleming House, Eastleigh whilst the residents were on site. When the new wing is built the residents can move across and work can be done to modernise the existing home. When completed there will be extra income from the increased size. It is rubbish to say you don't have the money. What is true is you don't want to do it.”

Suggestions on how the homes might be kept open or kept open and refurbished included:

- Using some of the Council's £400 million reserves to pay for it or getting rid of ‘fat cats’ at the top of the Council (total=4). There was a view that the Council has plenty of money to spend on other projects and could afford it.

“Sack the people who cost the Council the most (i.e. the fat cats at the top) and plough the money back into the community where it is needed.” (CP)

- Using the money that was earmarked for Extra Care assisted living (total =1).
- At Cranleigh Paddock, look into having step-down beds and offer day care to make the home more viable (total=1). Stop the block on referrals and let people on the waiting list have the beds that are being kept empty (total=1).

An option suggested by seven people (BH=4, NL=2, CP=1) was to build Extra Care assisted living whilst retaining the existing care homes on the sites.

- There was a view that there is sufficient land at Bulmer House, Cranleigh Paddock and Nightingale Lodge to do this.

“Serious consideration needs to be given to providing both residential care and Extra Care assisted living on the same site. This is particularly so in Petersfield where the community is still very upset and disappointed at the closure of the Willow Ward at Petersfield Hospital last year that dealt with mentally ill patients.”
(BH)

“Why don’t you build extra wings in Romsey Nightingale Lodge for the flats?”

- A couple of respondents suggested that HCC should consider selling Bulmer House to an independent provider, who would retain the care home as a going concern and also build Extra Care assisted living on site.
- Another provider expressed an interest in Cranleigh Paddock and building Extra Care assisted living as well as retaining the residential care home.

“As an independent provider of care and support services within a variety of settings, we feel we are in a position to discuss alternative solutions with the Council. These solutions have proven successful with other Local Authorities. We have a particular interest in Cranleigh Paddock in Lyndhurst, although are happy to discuss all of the homes involved in the consultation. We would be interested in discussing further ways in which refurbishment and investment could be provided which strikes a balance with providing Extra Care assisted living facilities and residential provision.”

An alternative but similar suggestion made by one person was that the Extra Care assisted living developments should include residential and nursing care units that people can move into as their needs change.

Eight people (BH=2; CP=5; NL=1) suggested that the Council should build new residential care homes before closing the existing ones. It was argued that the four homes earmarked for closure must be replaced; otherwise there will be a shortfall in accommodation. Suggestions for specific homes included:

- Develop Stocklands at Calmore/another site as a new CP specialist dementia home and move the CP staff and residents there.
- A new Nightingale Lodge should be built on one of the other HCC sites nearby before Extra Care assisted living is built on the old site.
- Build a replacement for Bulmer House on a site further out of the town.

“I suggest the site at Stocklands, a white elephant for years, should be re-developed as a specialist care home for advanced dementia sufferers BEFORE closing existing nearby homes- i.e. Cranleigh Paddock and Nightingale Lodge.”
(CP)

"I cannot speak for the other homes but in the case of Cranleigh Paddock. If closure is agreed, then a new specialist dementia unit should be built in the area so that the residents and team of care workers can move there en bloc before the closure."

"It would be preferable to build a new unit first on another site which needn't be so close to the town centre and there is land available around the town which could be used for that purpose and then move the residents into that.....there has to be a Council-owned care home in Petersfield and it needs to cater for not only the ablest of elderly but also those dementia sufferers and EMI patients who need the loving care that the staff at Bulmer House has been giving its residents in the past."

Four people suggested that the homes should be kept open until the existing residents die or move on (BH=1; CP=1; NL=2). One of the four suggested that Nightingale Lodge should be kept open until the dementia home at Abbotswood is built and that places should be secured there for the resident and future council-funded clients.

"I feel that the home should be wound down gradually over a suitable period if this is necessary, allowing the existing residents to remain there as long as possible until their death, or need to move to a nursing home. Dementia sufferers respond extremely badly to change in their routine and this should not be about finance at their late stage in life." (CP)

Two people said that the residents should be looked at on a case-by-case basis and if their needs cannot be met by Extra Care assisted living they must stay in residential care/where they are.

Other suggestions made by individuals included:

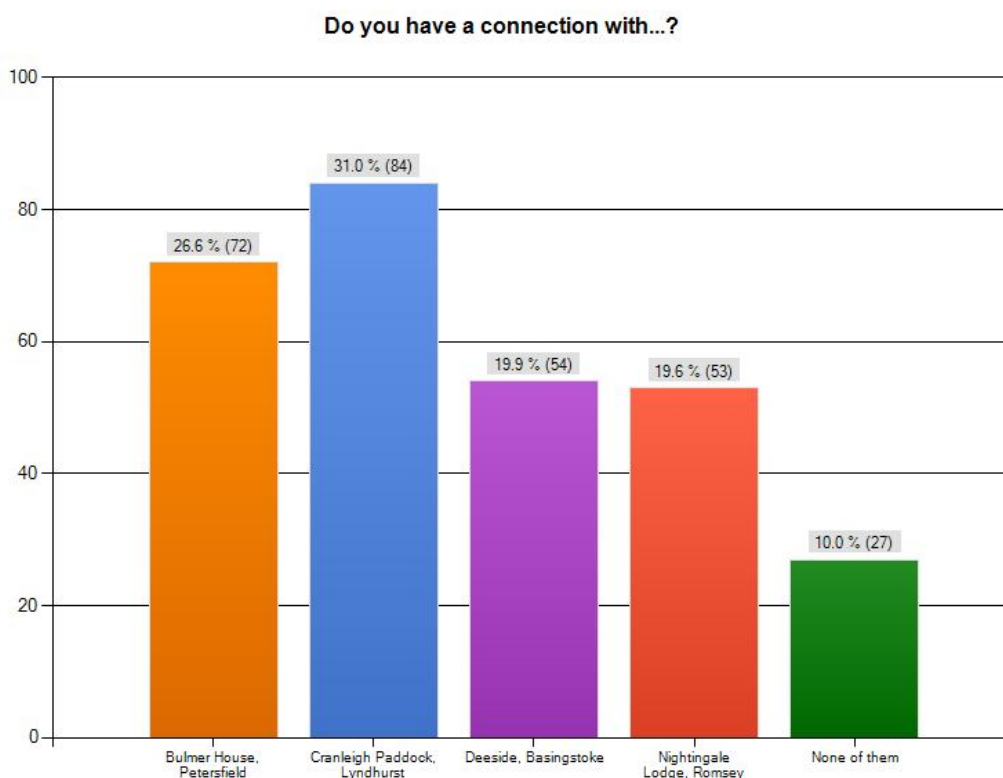
- Undertake a full assessment of the needs/future needs of the population to check whether this proposal is the right way forward.
- Make a decision on each home individually, analysing the circumstances in each home e.g. if the residents like it there, how long they stay there, do they have relatives.
- The Council should insist that new large developments should include residential provision for care of the elderly.
- Consider grant-aiding existing/planned private sector developments rather than the Council building new Extra Care assisted living units itself.
- Consider different locations for Extra Care assisted living, e.g. Ringwood.
- Build Extra Care assisted living schemes in a phased plan.
- Place people in private homes near their family/in the same locality and fully fund their care.
- Keep one home open for the more active/independent residents.

- Stagger closures so that residents can be brought together as numbers dwindle. Then residents will not all be moved at once and people can maintain relationships with staff and other residents.

One person stated that they thought Extra Care assisted living was the best option there was and two said they did not know enough, or had not been given enough information about existing housing stock, places for 'mentally disturbed patients', or predictions for future needs to answer the question.

Question 3.

Do you have a connection with...?

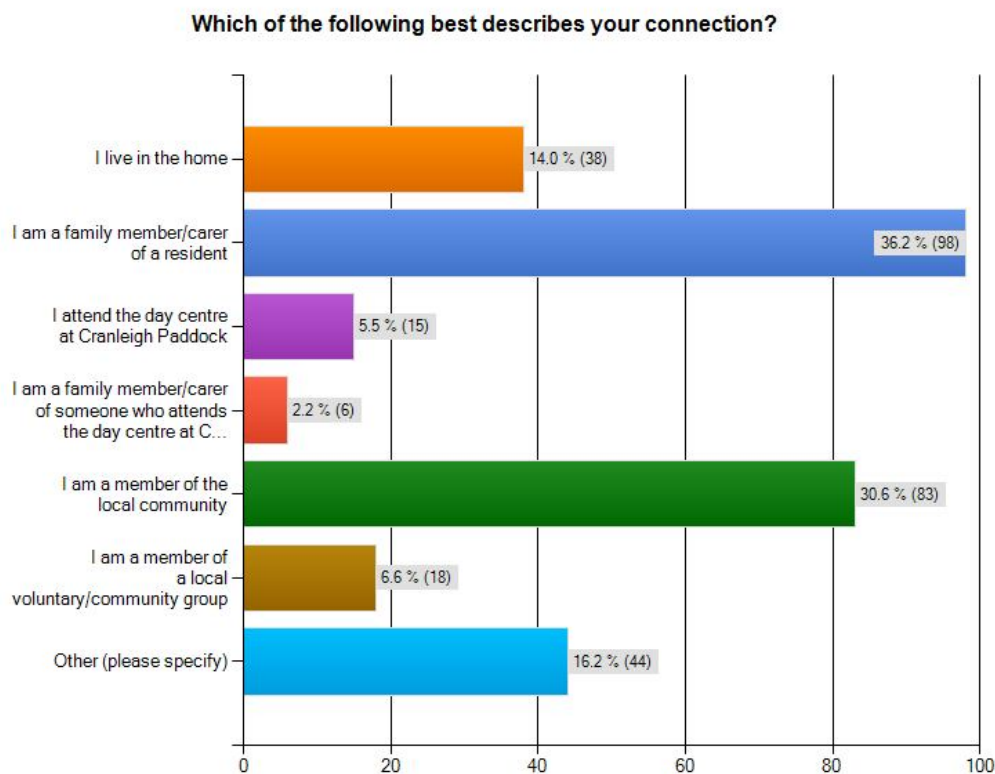


271 respondents answered this question.

- The majority, 31% (84 people), had a connection to Cranleigh Paddock.
- Almost 27% (72 people) had a connection to Bulmer House.
- 20% (54 people) had a connection to Deeside.
- Almost 20% (53 people) had a connection to Nightingale Lodge.
- 10% were not connected to any of the homes.

Question 4.

Which of the following best describes your connection?



271 people responded to this question.

- The majority of respondents (36%, 98 people) were family members or carers of a resident of one of the homes.
- 31% (83 people) were members of the local community.
- 14% (38) were residents.
- 7% (18 people) were members of a local voluntary or community group.
- 5.5% (15 people) were attendees of the day centre at Cranleigh Paddock and 2% (6 people) were their family members or carers.
- Amongst those who chose 'other' to describe themselves:
 - Eight were friends or acquaintances of a resident
 - Eight were relatives or carers of a former resident
 - Five were relatives of someone who uses the day centre at one of the homes (BH=2; NL=3)
 - Three were relatives of carers of someone who uses a home for respite (CP=1; NL=2)
 - Two were care home employees

- Other individuals variously described themselves as a relative of someone living independently with care; trade union official; relative of a former staff member; GP; parish councilor; mobile farm.

Question 5.

If the Council decides to close your home, what support or practical assistance would you like to help you find and move to alternative accommodation?

This question was included on the version for residents and their relatives only. 107 people responded, a mix of residents and their relatives. Their answers were as follows:

- As much help as possible (total=6; CP=3; D=3). A resident at Nightingale Lodge said the Council would need to do everything as they could not do it themselves.
- Help to identify somewhere suitable that meets the resident's needs (total=16; BH=1; CP=3; D=4; NL=7). This should be planned and coordinated and focused on what the resident wants – not just what is most convenient for the Council.

“Nightingale Lodge was found for us by Adult Services deeming her unsafe to be left home alone. We have had a positive experience of her time at Nightingale Lodge and we would sincerely hope Adult Services would offer the same level of support should she face the trauma of another relocation.”

“I imagine the Council will just house my Uncle where there is a space. I doubt his wellbeing will be taken into account. If they could guarantee he'd be happy. I would be all for it.” (D)

- Help to find somewhere suitable in the locality, e.g. in the same town (total=17; BH=5; CP=3; D=3; NL=6). There was concern that residents would be moved too far away for their relatives to visit. There was also concern about costs and several people said they could not afford to pay extra themselves to keep their relative local in private care.

“I live in West Sussex and my sister lives in Romsey. My sister visits 3-4 times per week and I visit 1-2 times per week. A move outside Romsey would make visiting very difficult.” (NL)

“Find and pay for another home within walking distance.” (BH)

“Don't know what I will do as Petersfield is convenient for me to visit and certainly don't have funds for private homes.” (BH)

- Help to find somewhere that is near or nearer to family (total=11; BH=3; CP=2; D=1; NL=6).

“We have identified a possible home closer to where we live. If there is absolutely no alternative to closing Cranleigh Paddock, in this case I would expect HCC to

continue funding my mother's accommodation costs. The proposed move of residents to Calmore moves her away from us rather than nearer and is therefore unacceptable to us."

"Resident-centred relocation in HCC or better run home to suit mum and family's needs- i.e. located closer to family." (CP)

"I want to go back to Boscombe near to my daughter." (NL resident)

- Enable residents to continue to be with people they know. Seven people connected to Cranleigh Paddock or Nightingale Lodge said they needed to be with other residents and/or staff (CP=4; NL=3). Five people connected to Cranleigh Paddock said their relative needed to stay with the Cranleigh Paddock staff because people with dementia need continuity. It was suggested that, if residents move, staff should come with them.

"Most important- I need to be with the people I know." (CP resident)

"If my mother has to move, we would like her to go to Forest Court with carers from Cranleigh Paddock. It is very important for her to have familiar staff."

"Each home is a community, staff, residents and relatives. They function as a group. The residents are totally dependant on the staff and their friends in the home. They are vulnerable and do not/cannot adapt to change. Therefore they should be allowed to stay together, as a group in the place they know as "home". If a move must happen, they should all be able to move together, staff included as they are the vital support, and the relatives friends. The support they have to give is very personal and intimate. The residents NEED people they don't feel awkward with." (CP)

"To keep the resident living with dignity they will need to recognise staff and fellow people they have got used to. A move to a very different place would be a disaster." (CP)

- The Council to find somewhere that has at least the same level or quality of care that residents currently get (total=7; BH=2; CP=3; D=1; NL=1).
 - At a similar price (total=2; BH=1; CP=1).

"My mother has Alzheimer's and needs full care. I would like a similar place to be found for her, even though a move would be detrimental to her (already unhappy) state of mind." (NL)

"I would need help in finding a suitable home at the same cost as Cranleigh Paddock, with the same facilities in terms of ground floor room with outdoor access - very important to my mother. My mother could not afford a higher cost care home and I cannot afford top-up fees once her money runs out."

- The Council to fully fund care in another home of the family's choice for life – and to cover any additional cost if it is an expensive private home – so that the resident can stay in the same locality or be nearer to family (total=6; BH=4; CP=2).

"I want HCC to fully fund those residents who do not have the assets to pay the fees in private care homes to allow them to stay in Petersfield, close to family and friends." (BH)

- Help with the physical aspect of moving, i.e. the Council to arrange the relocation of personal belongings and take the resident to the place they want to go to (total=6; CP=2; D=2; NL=2).
- Support to find suitable respite care (CP=3; NL=1). Specific features people asked for were respite care for people with dementia; respite locally so the individual could still attend their local Day Centre; respite that is bookable months in advance; and respite where the person would be with people they already know.

"I will need respite when my daughter goes away. It would be nice to go somewhere where I know the people." (CP)

"If I do need respite care, I would prefer it near to my home and then I would be able to have the same carers and the day centre bus would still be able to bring me to the day centre." (CP)

- Three people said they needed somewhere with the same level of facilities as Cranleigh Paddock, e.g. residents to have their own room, safe outdoor garden, same layout.
- The Council to categorise residents and move them to homes with people of similar physical and mental capacity rather than just putting people where there are spaces that need filling, i.e. do not put the more able with people who have advanced dementia (total=2; CP=1; NL=1).
- A resident and their relative both said they need help to find a care home that will allow the relative to bring in their dog when she visits every evening.

"I would need help to move near to my daughter. She visits every day with my little dog. I need to still be able to see my dog." (NL resident)

- Individuals also requested the following:
 - A formal medical/social services assessment to determine future care needs.
 - Help to find a home with male residents, so there is some male company.
 - Help to find a nursing home so that the resident does not have to be moved again.
 - Help to find a home that is better equipped than Cranleigh Paddock for dementia care.
 - Help to find the best home for someone with a stroke and speech problems.
 - A home with a garden that the resident can sit in and smoke.

- A furnished home.
- Residents to be moved to better facilities if they are made to move, not just the same.
- The family to be involved in choosing new accommodation.
- Enable the relative to be on hand when the move happens (relative was a long distance away).
- Help the relative to tell the resident about the changes.
- Reimburse the cost of the move.
- An invite to the family to view any accommodation proposed for the resident.
- Reassurances that the resident will not be moved again (e.g. in 18 months' time)
- A guarantee that the resident will not die of stress when moved.
- Assurance that if the resident dies because of being moved, Cllr McNair Scott will take full responsibility.
- A new specialist dementia home to be built to replace Cranleigh Paddock.

"I would prefer you not to close Cranleigh Paddock! However, should that perverse decision be taken then I would hope that a new specialist home can be built to accommodate the residents."

- Four people said their family would help them (BH=3; D=1).
- Two said they had already spoken to Council representatives and had been offered help. One said they had already received excellent help from the Council.

"The help I received from Bulmer and Susan Walden was excellent and my mum was moved with no problems."

- Eight people said that the Council cannot close the home or said that no support would be any help as there was no suitable alternative home for their relative (BH=2; CP=3; D=3). Reasons given included that their relative was not in a fit state to move, there are no suitable homes at the same price, a lack of vacancies at suitable homes and there are no homes with the same level of specialist dementia care as Cranleigh Paddock.

"I think my mother should be offered the same specialist care she gets now in council accommodation but having looked at other care homes in the vicinity they fall short of this." (CP)

- Three people were very worried that closure of the homes would mean that the resident would have to go back to the family home. They said they could not cope with this (CP=1; NL=2).

- Eight people said they would need support to find an alternative day centre to go to if Cranleigh Paddock was to close. It was stressed that it would need to be not too far from people's homes and that transport would need to be provided.
- Two people said they/their relatives wanted to go to Fenwick as an alternative day centre, but asked that the range of activities there be expanded, otherwise it may get too boring. Two asked if their friends from Cranleigh Paddock Day Centre would be going to Fenwick as well – they wanted to continue to see their friends.
- Two people said they needed another Day Centre for older people in Petersfield if Bulmer House was to close. One said they wanted to be able to go four or five days a week.

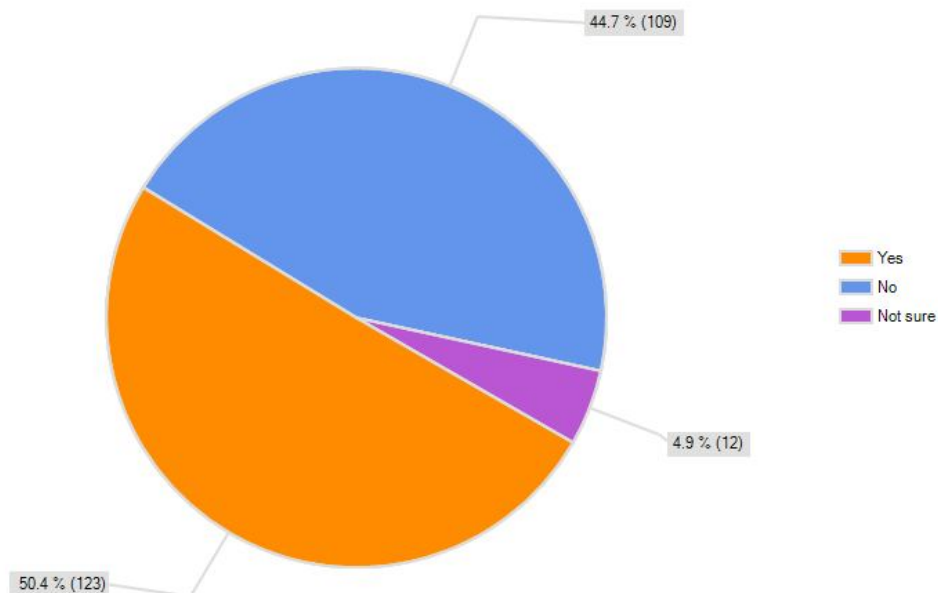
Section 2: Future care options for older people in Hampshire

Question 6.

Before this consultation, had you heard of Extra Care assisted living?

244 people responded to this question. Half answered yes, 45% no and 5% were not sure.

Before this consultation, had you heard of Extra Care assisted living?

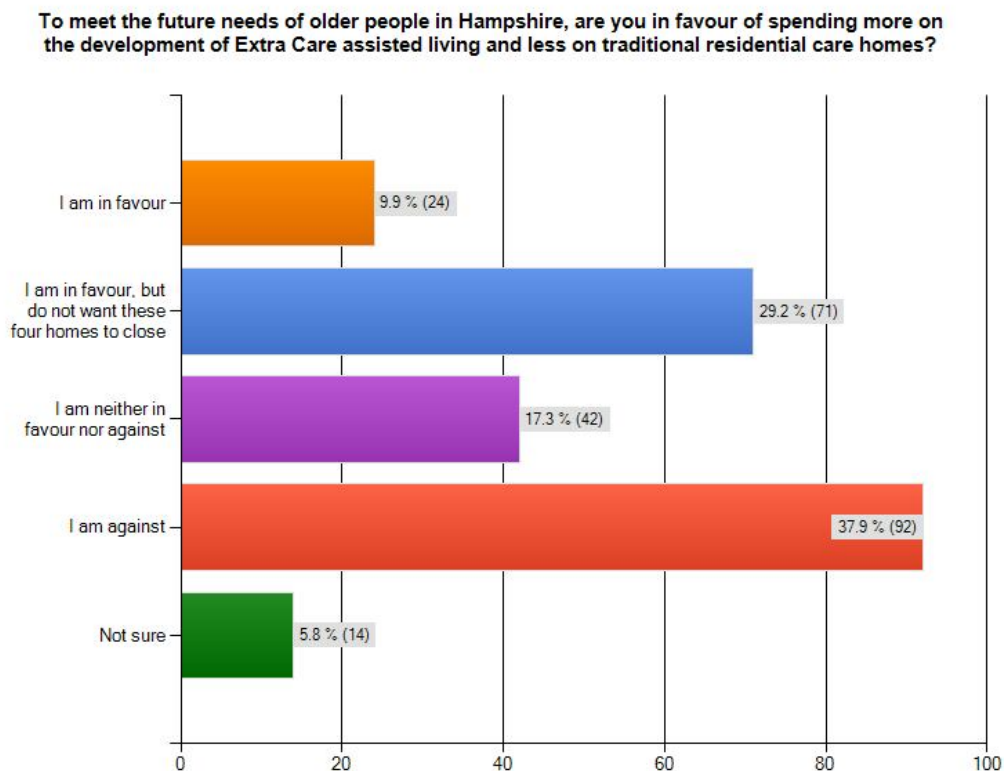


Question 7.

To meet the future needs of older people in Hampshire, are you in favour of spending more on the development of Extra Care assisted living, and less on traditional residential care homes?

243 people responded to this question.

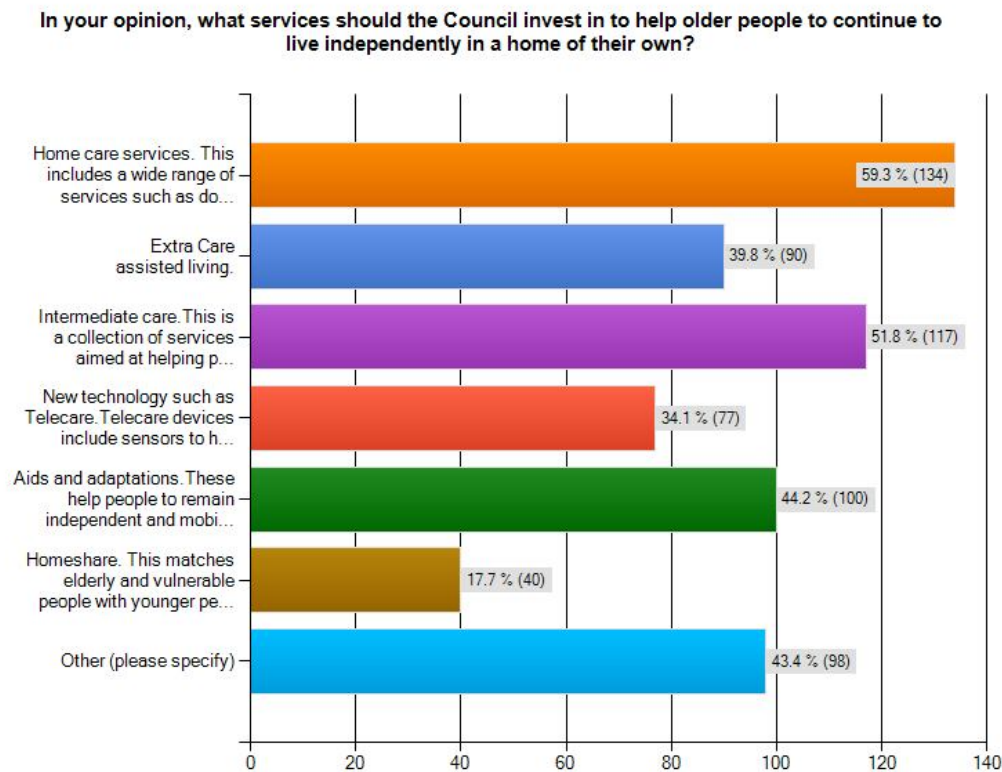
39% of respondents were in favour of spending more on Extra Care assisted living and less on traditional residential care homes to meet the future needs of people. However it is significant that three-quarters of these people did not want the four homes to close, i.e. whilst they supported investment in Extra Care assisted living, they did not want these particular homes sacrificed for it. 38% were against spending more on Extra Care assisted living and less on traditional residential care homes.



Question 8.

In your opinion, what services should the Council invest in to help older people to continue to live independently in a home of their own?

226 people completed this question.



- 59% (134 people) thought the Council should invest in home care services. Three people wrote about problems they had with home care and how this impeded independent living: there was a view that home care services are currently often poor and independent living is only ok if there are suitable people assisting and enough help is given at the time it is needed.

“Experience of home help - services limited/poor and sometimes inflexible. All services depend on the quality and number of staff - again deficiencies observed.” (CP)

“So many times I have heard the home care do not turn up, do not stay for the length of time required and complaints are ignored.”

- Over half – 52% (117 people) – thought the Council should invest in intermediate care.
- 44% (100) supported Council investment in aids and adaptations.

- 40% (90) supported Council investment in Extra Care assisted living. Three expressed concern about, or queried, the amount/level of care available in Extra Care assisted living. One of them said they would be for Extra Care assisted living only if it would meet people's medical and personal care needs to the same level as residential care.

"We are being told Extra assisted living would mean someone being on site 24 hours to aid residents. More and more we now hear this is not happening and it has to be phoned for in a central area not on site." (BH)

"Who will ensure the staff will be reliable? They certainly won't have the qualifications of nursing care." (D)

- 34% (77) thought the Council should invest in new technology such as Telecare. Three people expressed doubt about investment in Telecare. It was suggested that it is ineffectual because older people won't wear it/use it, it is ineffectual for people with severe dementia, it has little impact on support needs, and does not give carers of family reassurance. One of the three said that it had been used to make a case for evicting their relative from sheltered housing. Two people, one a resident of Cranleigh Paddock, said that technology is useful for keeping people safe.

"Technology is the true answer as most would like to stay in their own homes. We wanted to use this to keep my father at home, but there was little help or advice. Tracking devices like watches would be a huge help for dementia patients so that they can wonder where they like without being lost." (CP)

- 18% (40) thought the Council should invest in Homeshare. 10 people expressed concern about Homeshare. There was concern about the potential for abuse (total =4) and doubt that it would work on a large scale (1 person).

"Too open to abuse and seen as easy money." (NL)

"The elderly could be abused. This is another scheme where the council want to save money. The elderly are vulnerable people." (NL)

"I would not like to share anyone's or my home with younger people." (CP)

- 43% (98) people answered 'Other'. 62 of those who chose this option thought that Hampshire County Council should invest in residential care homes in general (total=48; BH=11; CP=15; D=11; NL=10), or one (CP=1; D=3;) or all (total=11; connected to BH=1; CP=6; D=3; NL=1) of the four homes proposed to close. People argued that it is not always possible for people to live independently. They said there are a group of older people who need constant care but not nursing care, which includes people with dementia, so investment is needed in residential care for these people. Many said that the options for living independently at home were not suitable for the residents or for people with advanced dementia. Several people wrote to say that their relative needs care 24 hours a day, 7 days a week (which could not be delivered in a care package) and would be at risk if they tried to live independently. There was a strong view that care

homes, and specialist dementia care homes, need investment from the Council to ensure that people with dementia are cared-for properly. There was also an argument that older people need company and some prefer communal living. Four people said that, for people with dementia, living independently on their own can exacerbate their condition and leave them lonely and depressed. There was a view that care at home only works for people who have mental capacity and live with their family. It was also suggested that independent living and private care would not meet the needs of carers as they would not provide carers with enough reassurance when people's mental and physical abilities seriously decline. Some people said the Council should provide more residential and nursing care homes. One person said that the Council should not invest in services to keep people living independently – instead the money should go on more care for those who cannot live independently.

"I cannot see that you can provide personal care 24 hours to people in their own homes, other than through Telecare. This will not prevent people injuring themselves or wandering but will only deal with the aftermath." (BH)

"My concern is that some elderly people are not suited to continuing to live alone - however much money is invested in home care. This includes people with dementia who would need full-time care." (BH)

"Obviously it makes sense, both emotionally and financially, to encourage people to stay in their own homes for as long as possible, but care, however comprehensive, cannot replace company. There is a danger of having well cared for but isolated and lonely people who need the company of their own generation." (BH)

"Residential care homes as they still have a relevance in elderly and vulnerable care. If they cease to exist, what will happen to this section of the older generation? They will be forced into hospitals and nursing homes unnecessarily." (NL)

"None of the choices are suitable for people with severe/moderately severe dementia. HCC should continue to invest in long-term residential care homes (not nursing homes) to enable people who cannot remain in their own homes to be cared for, e.g. people with severe dementia. Very few will be able to remain independent and when they are no longer able to be in Extra Care assisted living, places to go thereafter will be very few, if existing at all. If they can [live independently] does not mean do away with residential." (NL)

"Having had my own frail 89 year old father discharged from hospital back to living alone with carers visiting at meal times, this does not work (in fact, he lasted only a week at home before we had to find residential care for him). The carers are under pressure to visit their next client and had to leave my father to eat breakfast alone, which he forgot to do as he suffered mild dementia. There are elderly people who had much worse health than my father and visits from carers at home is no substitution for constant human care and contact that is provided in a care home. The above methods simply do not work for a vulnerable elderly person living alone." (NL)

“None of this. When you live on your own you’re vulnerable, you need to be around people 24/7 that look after you to show compassion, kindness and respectfulness.” (D)

“Care in the home works for some people, but residential care home is the only realistic supportive option for others - particularly with those suffering from dementia.” (CP)

“As a human being who is getting older I worry that by the time I need care there will be none available as its either been privatised or mechanised!” (D)

“I don’t want to live on my own in a flat. I want to live where I am now.” (BH resident)

“A lot of our residents would be at risk if they were to be in their own homes. That is why Deeside should remain open. Our residents love their home and are safe and well cared for and very loved. There is a smaller chance of incidents and if anything happens there is always someone around to help immediately. You wouldn’t always get that with other services.”

“None of the people in Nightingale Lodge can look after themselves.”

“He cannot live on his own as he needs constant care.” (NL)

“Old people such as my mother simply cannot live independently as many, many others cannot do either. To try and force old people to live on their own when they are not capable of doing so is extremely damaging and cannot be condoned.” (BH)

“At no time could my mother have lived independently in her own home, assisted or not, due to her dementia.” (CP)

“How are glitzy surroundings going to help those with dementia, they often don’t know where they are. Extra Care assisted living only meets the needs of some but meets the needs to offload care of the elderly into the private sector. None of the choices listed are suitable for people with severe/moderately severe dementia.” (NL)

- 11 people commented that all of these options and/or more are needed to support older people (BH=5; CP=5; D=1; NL=2). Some of them said that the Council should invest in both Extra Care assisted living and residential care homes – they believed the Council should not develop one by destroying the other. There was a view that the Council should do more work looking at the need for particular types of care in different areas to inform investment.

“HCC needs to invest in both traditional residential care homes and Extra Care assisted living homes but to date they have not produced any data which demonstrates the quantity and type of accommodation which is needed. Anything which is built needs to be flexible and adaptable as Petersfield (and other areas) will have changing and fluctuating needs. It is obvious that community buildings such as this will become outdated in about 25 years and so the council needs to set aside money for replacement over these 25 years.” (BH)

“Extra Care is of course needed but not by losing existing homes.” Dementia sufferers could not manage in Extra Care! All things to keep older people independent need investing in, but dementia care also needs huge investment, more dementia units need to be available now and in the future.” (CP)

“All of the above need to have investment but based on needs in specific local areas and based on what provision is existing there. I think a range of care is always best. I understand the costs are high so careful research (such as this questionnaire) is needed.” (BH)

- Other things that one or two people said the Council should invest in were:
 - Encouraging families to look after their elderly relatives (one person)
 - More support for carers looking after elderly relatives at home (total =5), specifically:
 - respite facilities to give carers a break without worrying how the person they care for will be looked after (CP=1; NL=1)
 - more affordable home care services available at night (CP=1)
 - Day services to give carers a break (CP=2)
 - Cranleigh Paddock Day Centre (CP=1)
 - Funding for individual social support (CP=1)
 - Step down beds from hospital (CP=1)
 - Transport (one organisation).
- Three people said they did not know enough about the options to answer this question.

Question 9.

Do you have any other comments, suggestions or feedback?

132 people added comments in this section.

- The most common view expressed was that residential care homes are needed now and in the future. 60 people said that care homes,⁶ or one or all of the four residential care homes, are needed or should be kept open and invested in (connected to BH=15; CP=22; D=7; NL=16). It was argued that residential care is needed in the future for those older people who need care 24 hours a day, 7 days a week, cannot manage on their own and need constant company. It was suggested that, if such homes are not

⁶ Some respondents used the term ‘nursing homes’ rather than ‘residential homes’ (this seems to have been mainly through mistakenly thinking that the four homes concerned provided nursing care), hence the use of the word ‘care homes’ in this instance.

available, people with the more complex needs or dementia will have nowhere to go. Many specifically referred to a need for care homes for people with dementia and suggested more care homes are needed for this group rather than living in the community. Some equated closures to the abandonment of people with dementia by the Council and said the proposals made no provision for this group. People felt that the Council should not cut care for people with dementia (meaning residential care homes) for the sake of Extra Care assisted living because it would mean cutting services for the most needy for the benefit of people less needy.

"I think places like Bulmer House should be part of an overall policy of care for the elderly and vulnerable. They fill a gap between people who can live at home with varying amounts of care, and who want to do so, and those that require a nursing home or palliative care."

"In residential care, as well as being cared for the residents at Deeside have exceptional staff who have time for them. Older people do not want to be on their own – they need constant company. Someone popping in twice a day for someone with dementia just (in our case) made the condition worse."

"Dementia sufferers need care, company, stimulation and a place that they can feel safe in. Extra Care assisted living and other alternatives do not provide this round the clock. Residential care homes do more for the stability and protection of people who are confused and easily stressed by change." (NL)

"Lyndhurst has been named as a dementia friendly town and the specialist dementia care home ... in Lyndhurst ... is being shut down!!! Disgusting." (CP)

"Tax payers' money should not be wasted on knocking down a perfectly good building only to spend more on a service that is not needed as much as a specialist dementia unit." (CP)

"The Council should be investing in more homes for the elderly, not trying to put the elderly out in the community. The care of the elderly is specialist care. Dementia is an illness that needs a team of staff to provide the right service." (NL)

"The emphasis on Extra Care will mean less care for those with dementia." (BH)

"HCC does not seem to have any proposals as to how it will care in future for those with dementia. Are these vulnerable people going to be abandoned?" (BH)

"Petersfield is well endowed with private residential care/sheltered housing/nursing homes. Facilities for older people with mental health problems closed at Petersfield Hospital, moving people with increasing dementia to Gosport. The journey to visit is long and elderly spouses feel separated from their loved ones... " (BH)

"It is widely known that the number of people with dementia is increasing, especially with people living longer. Their needs are different from the elderly frail or disabled – they need companionship and fairly constant surveillance to keep them safe and healthy. The occasional 15 minute visit from a carer is totally inappropriate. They need residential care and will do so in increasing numbers

but it won't be there if closures continue except in private homes run solely for profit.” (D)

- Amongst the 60:
 - 12 explicitly said ‘keep Cranleigh Paddock open’. One of the 12 suggested that Extra Care assisted living should be built elsewhere and one (a day centre user) said the Extra Care assisted living should be built on the Stocklands site so people could stay at Cranleigh until the Extra Care assisted living was ready.
 - Six explicitly said ‘keep Bulmer House open’. One of the six said that Extra Care assisted living should be built elsewhere.
 - Six explicitly said ‘keep Nightingale Lodge open’. One of the six said it should be extended and then the existing building modernised. Another said the home should be retained and Extra Care assisted living built in the garden.
 - Three explicitly said ‘keep Deeside open’.
 - Seven said demand for residential care will increase, not lessen.
 - Six said the Council can afford to keep the homes and update them, e.g. through use of its reserves, passing the cost to tax payers, or (for Cranleigh Paddock) with a Government grant.

“Dementia is an ever-increasing problem. With all the will in the world, dementia patients cannot be safe in their own home – if they even recognise it as such! There will always be a nursing need, wherever you live, but more provision should be made for dementia care as it increases in society.” (CP)

“We [a voluntary organisation] fully recognise the pressures cut backs are having on local authorities across the country. However, we would urge HCC to invest in quality dementia care now as numbers are increasing and need is growing.”

“By spending a small amount of HCC reserves they could update existing residential homes.” (CP)

“Do not close Cranleigh Paddock, it will be a huge mistake, it would be better putting money into it if needed. I understand the government has grants put aside to give councils to do this.”

“Stop trying to re-invent the wheel. Each successive generation has provided a burden of responsibility on the State to provide it. In part this has been met by the private sector provision of Care and Nursing homes, and also by care packages and outreach, community staff. All of this plus the addition of the local authority homes already available is meeting the needs of most of the elderly. The vast majority of taxpayers have little or no objection to paying more for the investment in care for those who have by dint of age, already paid their dues.”

“You can do both, you have +£400 million in the reserves.” (NL)

“Yes, the head of Lyndhurst council has a Mercedes and driver to chauffeur them round!!! Get rid of this totally unnecessary expense and spend the money where

it's actually needed - to provide better services to those that need it in the community!" (CP)

- Seven people said it was important that HCC provided a range of options so that the services meet the needs of individuals and people can choose what suits them best. It was argued that there should not be a 'one size fits all' approach, and both Extra Care assisted living and residential care should be provided: Extra Care assisted living should not be used as an excuse to close care homes.

"I don't want these four homes to close or any other existing residential homes to close for the benefit of privately funded and rented Extra Care assisted living facilities. Both kinds are needed." (CP)

- The second most common type of feedback was praise of one or more of the four residential care homes, or particular aspects of them (total=25; connected to BH=6; CP=10; D=5; NL=5). People said the homes were friendly, comfortable and had a good atmosphere. Several people viewed the homes as valuable resources for their local community that enabled people to stay local in old age. Specific praise was given with regards to:
 - The staff – described as dedicated, helpful, friendly and caring (total=11; BH=2; CP=5; D=1; NL=3). People said the staff teams should not be broken up.
 - The high quality of care – and high quality of dementia care at Cranleigh Paddock (total=5, D=1; CP=4).
 - The way residents are made happy (total=4; CP=1; D=2; NL=1).
 - The homeliness of Cranleigh Paddock (CP=2).
 - The affordability (BH=1).

"If the statistics for growth in the number of elderly people with dementia are accurate then I have a 1 in 3 chance of needing the benefits of the services these facilities already provide so well. If my relatives find the need for me to avail myself of permanent residence, it would be pleasing to know that I would remain in my local community and reduce the inconvenience of visiting friends and family." (CP)

"From my experience of Nightingale Lodge it is a well run home with staff who really care about the residents – something no amount of new rooms/flats etc. can ever replace. Ensuring wellbeing and morale of staff ensures wellbeing of residents and is so much more important than the size of the bedrooms or bathrooms. Good care homes are few and far between."

"I can't see anything better, it's comfortable here, we got wonderful staff, and I can't see any need to change. I'm happy here, staff are very good to us.... I feel quite safe with the staff." (NL resident)

"The staff at Bulmer House were and are superb. It's devastating that these care teams will be ripped apart by a closure."

“Please think carefully about closing Cranleigh Paddock. They deliver excellent care and support to the residents with dementia. They are able to care for all levels of dementia, even people that other homes can’t manage.”

“Dementia residents do not need big homes, they feel safer in smaller homes where they are free to wander and move around. Please keep Cranleigh Paddock open!”

“Council-run homes are necessary for those unable to afford private care or nursing homes, the fees of which can be exorbitant.” (BH)

- The third most common type of comments were that Extra Care assisted living, or independent living in general, is not necessarily a good idea. It was suggested that it can be isolating for some people, make dementia worse and will not really work for everyone (total=13; BH=5; CP=3; D=3; NL=2). For some, living independently may not be preferable to communal living. There was a view that not everyone would be able to afford to buy or rent Extra Care assisted living flats. It was also suggested that the various measures to support independent living laid out in Question 8 would not remove stress for family carers of people with dementia. Two people said their relatives had had bad experiences in Extra Care assisted living before they moved into residential care (D=2). One suggested that it would be very important for Extra Care assisted living to have a central area where events are organised and held, such as concerts, parties and church services, otherwise residents would be strangers and socially isolated.

“We have experienced having two of our elderly relatives alone in their homes and seen how quickly they mentally and physically deteriorate. People need company. Carers cannot spend enough time to fill this gap.” (CP)

“Extra Care assisted living is an excellent concept but for single elderly it does NOT provide company, stimulation, connection with the community. They remain isolated unless their family carer takes on even more responsibility.” (CP)

“No I don’t like the idea of support in your own home.” (D resident)

“This sounds good on paper but in practice there are many pitfalls. Some people, especially those with dementia, benefit from being cared for in a well run and properly funded care home. Many would feel safer being looked after in a care home rather than effectively left to their own devices at home.” (BH)

- 12 people said they liked or accepted the idea of Extra Care assisted living in principle, but with caveats (total=12; BH=4; CP=4; D=1; NL=2). Five said it was not suitable for particular residents – such as those with advanced dementia or those who prefer communal living (BH=3; CP=1; D=1). Others queried the affordability of Extra Care assisted living and/or doubted there would be sufficient units to meet need. One said they wanted to visit a scheme to see if it was suitable. One queried the choice of location: they said that the Cranleigh Paddock site would not be suitable to enable independent living if an Extra Care assisted living development was placed there. Only one person who commented in response to this

question expressed support for Extra Care assisted living with no caveats – this was a resident of Cranleigh Paddock. They commented on the benefits of Telecare and liked the idea of having more personal space in Extra Care assisted living.

“I think Extra Care assisted living is a good idea. But my father is happy in residential. At 92 he could not manage in Extra Care, and he wants to stay at Deeside.”

“I am not in principle against Extra Care but feel much more consideration needs to be given to the needs of these frail and vulnerable dementia sufferers who can't take advantage of a new care system- it is too late for them and they should be allowed to stay in their own care home for the remainder of their lives.” (CP)

“Having worked with a mixed group of older people in residential care it is evident that people with increasing dementia cannot be catered for in a one/two bedroomed flat with care going in at specified times. They need to be able to see other people around and to have the security of staff being able to observe their immediate needs. If they don't have these assurances they are liable to wander, trying to find someone.” (BH)

“How will older people afford the Extra Care assisted living on low incomes? It sounds and looks good but will we be able to afford it?” (CP)

“How much are these flats to cost? Too few flats to go round.” (NL)

“If apartments for sale on open market then no curb on how much they would cost to buy or rent in the future- could make them elitist.” (BH)

“Extra Care assisted living presupposes that people either have property to sell or regular income, to enable them to purchase or rent a flat.” (BH)

“All the local facilities Lyndhurst has to offer are in the village itself. There are no bus services from this area of Lyndhurst into the village or beyond. There are no buses running along Romsey Road, so to access public transport requires a walk into the village and either up to the Crown Hotel, via some steep, narrow steps or down to the bottom of the village opposite the Lyndhurst Park Hotel, a distance of nearly a kilometre... The two access roads, Calpe Avenue and Gales Green are narrow roads with no pavements and in winter very wet from the run off from the surrounding fields. In cold weather, this water freezes across Gales Green (the most direct route for pedestrians and buggies), particularly at the bottom... The pavements to the village in Romsey Road are extremely narrow in places, making it difficult for able-bodied people to pass safely on this busy main road, let alone a mobility scooter, wheelchair or walking frame... The main village is also on a hill with the bus stop and post office at the bottom and the GP surgery and church at the top. Residents would need to cross two main roads to access these and most of the other community facilities. If the Extra Care assisted living home is to be built in Lyndhurst, the Cranleigh Paddock site is not in an appropriate location for residents who want the freedom to get about and continue their day to day lives independently.”

- 12 people who commented were objecting to the proposed closure of Cranleigh Paddock Day Centre. They were mainly Day Centre attendees. People said that attending the Day Centre contributed greatly to their wellbeing – they were happy there and they enjoyed the activities, had made friends and it enabled them to get out to places on trips that they could not get to otherwise. A couple of people who lived alone said that they would not see anyone else if they could not come to the Day Centre. People were concerned that the closure would mean they would be split up from their friends. Five people also said that it enabled their carer to have a break, which meant they were able to stay living at home. Three people said the Day Centre is better than other ones they have been to. People commented on the lack of activities at Age Concern and the limited range of activities at Fenwick. One said they would like there to be a bigger range of activities at Fenwick if Cranleigh Paddock closed. They were also concerned that they would have their number of days at day centres reduced if Cranleigh Paddock closed. Two said they would need to have transport supplied if they were sent to another day centre as they cannot use public transport. Another person, a resident of Cranleigh Paddock commented that they had tried the Day Centre but it wasn't for them. They thought it was too small.

"It gives my husband a bit of respite so he can do his own thing. I wouldn't like it if I had to stay at home, I was so pleased to find somewhere like this. We go out on the bus and have ice cream. We go out for lunch. It keeps me well because it gives me something to look forward to once a week."

"It's such a pity. We are all happy here. We are going to be split up. I've made a lot of friends here. I really enjoy coming here. We do all sorts of things – we play cards, quiz, have a sing."

"I would miss it a lot if I didn't go there. I go to Age Concern once a week for a meal. They don't do activities like at Cranleigh. Our meals here are really nice. I like talking to my friends. We go out in the summer, I wouldn't get to go to those places otherwise."

"I would be upset if the day service closed and I think it's wonderful what people do for us. I would much rather be at the day service than at home."

"I've been coming here a long time. The people are very important to me. It needs to be the right place for me to feel safe."

"I find it very nice to get out, to come out of home and have a chat... I'd feel very disappointed and upset if I couldn't come here. It's a nice place to come. You come here, you have different people to talk to, you have a nice lunch, talk about the old days... sometimes we go for a ride in the forest or beach... Good memories, that's what life's all about. You meet some nice people, meet people you haven't seen for a long time, meet up with old friends."

"I can't put into words how I feel and I think it is terrible that you can think of closing Cranleigh. Get stuffed."

- 10 people commented that the Council should think more about the impact closure of the care homes would have on the residents (BH=1; CP=3; D=3; NL=2). A couple thought residents would deteriorate if they had to move.

“Consider the residents who live in the homes. How would you like to be evicted?” (D)

“My nan is so happy and well cared for at Deeside so please keep it open as it will break her heart to move.” (D)

“I feel it would be devastating for the residents at Cranleigh to move and have the change.” (CP)

“Feelings need to be considered for the frail and those who are suffering from dementia, to uproot them at this stage of their lives when they have made close attachments and bonds and have familiarity will be very difficult.” (NL)

- Nine people said that it was morally wrong or cruel to move older people from their homes, particularly those people with dementia (BH=1; CP=2; D=5; N=1). They said that the residents deserved quality of life and this could only be achieved by not uprooting them. They suggested that this group lived through hard times during the Second World War and considered the proposals to be bad treatment of the most vulnerable in society. An additional three people connected to Deeside said that the Council/decision makers care only about money, not about people.
- Eight residents expressed concern about aspects of the proposals in answer to this question (BH=1; CP=2; D=1; NL=5). Four of the eight said they were distressed at the prospect of their home closing (C=1; D=1; NL=2). Three were concerned about losing staff, with whom they have built up a strong relationship (CP=1; NL=2). Four were each concerned about different aspects of the place that they might move to if the homes closed: the cost; provision of trips out; meals; and location so that friends can still visit.

“It makes me feel sad, it’s a lovely home. I have lived here a long time. It’s always been a good home.” (NL resident)

“I think when you get older it’s not so easy as when you are young, it’s your age. It would be a hard thing to move.” (NL resident)

“That’s the scare I have, that one day I’ll have a letter to say I’m moving.” (CP resident)

“I wouldn’t care where I went as long as I had the same facilities and the same staff. Trouble is I think some of the staff are thinking of retiring or giving up, this tips them over the edge. I expect them to find me somewhere, its no good trying to go private, I can’t afford it!” (NL resident)

“I still want to go out.” (NL resident)

“What about the meals? You need them if you can’t see to cook like me.” (NL resident)

"It's important my friends can still visit me if I have to move." (CP resident)

- Another resident at Cranleigh Paddock was against the proposals but was critical about aspects of the home, citing a lack of independence and poor doctors. Two residents at Cranleigh Paddock were fairly ambivalent or unsure about the proposals. They were happy where they were but one was not entirely happy with being told what to do at the home and both described mixed feelings.
- One respondent suggested that, as Extra Care assisted living is private, it will save the Council money. However, six people thought that Extra Care assisted living could be more expensive for tax payers or questioned whether Extra Care assisted living was an efficient use of tax payers' money when tax payers had not asked for these changes to be made. It was queried why so much money was going on one type of service and there was a view that it would be better spread across a range of services. One of the six thought the proposals amounted to taking from older people to give affordable housing to people who will never do a day's work.

"I am concerned it would cost more and jeopardise funding for other services." (CP)

- Five people said that particular homes do not need refurbishing – they are fine as they are (BH=2; CP=2; NL=1). It was suggested that quality of care is more important than the type of facility.

"Whilst most people would like to live in their own home or support loved ones at home, there are points when this becomes too difficult for many people. Residential care must be part of the mix offered but the emphasis should be on CARE not on facilities which are often the focus. Basic clean, decent provision is fine. Lack of care and respect is not." (BH)

"They need to remember that they are people's homes. They are settled, happy and being well looked after. Not everyone wants en suites, big rooms and wide corridors. Being cared for by people who know and understand them is much more important." (CP)

"It would be very nice to have the better standard of facilities described in your proposal, but in the present climate we all have to limit our expenditure and it would appear to me that you are concentrating more on being an up to date service rather than using what you have available in a more effective manner." (NL)

- Four people said that there were a lack of suitable alternative places available locally for residents if their homes closed (BH=2; CP=1; NL=1). People said that there were waiting lists for any private homes locally under £900 in Romsey, Forest Court is unsuitable for Cranleigh Paddock residents as it is too clinical and not homely, there is a lack of homes for dementia patients in Petersfield, and Bulmer House residents who cannot afford private care would have to be sent far away from their families.

"I realise that there are problems with Bulmer House in terms of out of date equipment, condition of building etc. But as Bulmer House is the only local authority home in Petersfield, to close it would mean elderly people without the means to pay for private care, would be sent to a home completely out of the area in which they have spent their lives, and where it would be difficult for their families to visit."

- Four people expressed concern about the quality of home care available and there was a view that it is insufficient to keep people independent (CP=4; NL=1). People wrote about different carers arriving every day, carers failing to arrive on time, the lack of home care services available at night, and the shortage of carers in general.

"At the moment I usually have regular calls am and pm but I think it would be good if there were more staff available at 10pm-7am." (CP)

- Three people said that relatives are very distressed by the proposals and worried about what will happen. There was concern that residents would be sent to live back with their families. Four residents said they wished they could go back home.

"It hits the middle class the worst, as he gets no help from the government and can't afford help at home. My Gran finds it hard and I have to go to hers a lot. I'm worried that something will happen to her if I'm not there. Having my Grandad with dementia back home would kill her." (CP)

- Two people using Cranleigh Paddock for respite were concerned about how closing the home would impact on their ability to access respite in the future. They said there is a lack of options in the New Forest and there will be too much demand at Forest Court, arguing that there is already very limited respite provision in Council residential care homes.

"I come to Cranleigh for respite every six weeks for a long weekend. Where would I go then? I need respite close to Totton."

- Other comments against the proposals included:
 - The view that the Council is trying to shirk responsibility for caring for the elderly by trying to put it over to the private sector (total=2; BH=1).
 - The view that the Council cares more about its future clients than its current ones (D=1).
 - The opinion that changing the accommodation at Cranleigh Paddock would ruin the locality (one person).

"It is a lovely spot. Don't ruin it by change of accommodation. Don't keep taking from the national park".

- 14 people made negative comments on the consultation process.
 - Three people connected with Nightingale Lodge said that care home closures were a foregone conclusion. It was suggested that

the fact that staff had been given voluntary redundancy notices and some residents had already been moved to other homes during the consultation period must mean that the Council have already made a decision.

- Three people said the Council had not provided enough information or evidence to support the statements it made in the consultation documents. They suggested there was a lack of full analysis or costing on the options, no 'plan B', no demographic forecasts and a lack of information on the number of units that will be created (BH=2; NL=1).
- Two people expressed disappointment that Cllr McNair Scott did not attend face-to-face public or relatives meetings as organised (CP=1; D=1).
- Two people connected with Cranleigh Paddock claimed that public meetings had been scheduled with little notice and had not been advertised.
- Two people connected to Bulmer House questioned whether having one person making the final decision was democratic. They suggested councillors should be able to debate and vote on what should happen.
- Two people said that Cllr McNair Scott should resign because of a conflict of interest relating to Extra Care assisted living housing (CP=1; D=1).
- One person connected with Nightingale Lodge and describing themselves as a 'member of the local community' claimed that the Council had not consulted with the public. They also suggested that the proposal discriminates against people who need Extra Care assisted living.
- One person claimed the questionnaire was biased and unlawful, arguing that there was nowhere to express a view against Extra Care assisted living.
- One person claimed that Question 8 was biased because it was about independent living and did not mention care homes. One person said they thought this question 'dodged the issue' because, they argued, residents cannot live independently.
- One person said that the Council did not seem to have asked the residents a straight question on whether they wanted to stay or move. They suggested that the Council was assuming it knows what residents want.
- One person complained that the handout at a meeting about Cranleigh Paddock had the wrong Internet address for the

questionnaire on it. They said that many elderly people would not be able to use the Internet.⁷

- Some people made comments in favour of the proposals:
 - Two people said the proposals are good and will work if the necessary resources are available (D=1). The need for proper staffing, management and performance monitoring of agencies was stressed – and it was suggested that it could be challenging to get enough people with the skills needed to work in a caring environment into the workforce.
 - One said that Bulmer House is not fit for purpose. They suggested that the cost of refurbishment would be the same as a new build and it would still not be to the same standard. They thought the Council would be making the right decision by investing in other services for the future.
 - A resident of Nightingale Lodge was for the proposal on the basis that the building is old and not up to the standards they would like.

“I’m not very happy about the confinement. It’s a little hole in the wall. I could do with a bigger room and more modernised... I think we should have more choice, I’d like a balcony.” (NL resident)

- Some people put forward other suggestions around the proposals and planning for future care:
 - Retain the staff from the homes and transfer them to the Extra Care assisted living schemes/alternative homes so that there is continuity of care and familiar faces for residents, and their valuable skills are not lost (total=2; CP=1; NL=1).
 - One person said HCC should be honest about what can be done for the residents and their families and should not promise more than it can deliver, for example promising that private homes will take on residents for the same price as an in-house home.
 - One person said HCC should provide reassurances that mistakes made when another service was closed do not happen again this time.
 - A resident of Nightingale Lodge said that transfer from hospital to a care home or other accommodation needs to be better managed: people need to have more say on where they go. This resident said they did not choose this care home, they did not know where they were going when discharged from hospital and did not get to see the home beforehand.
 - One person said more investment should be made in keeping people in their own home and supporting carers rather than

⁷ It should be noted that people did not need to be able to access the Internet to take part in the consultation. Paper copies and alternative formats were freely available.

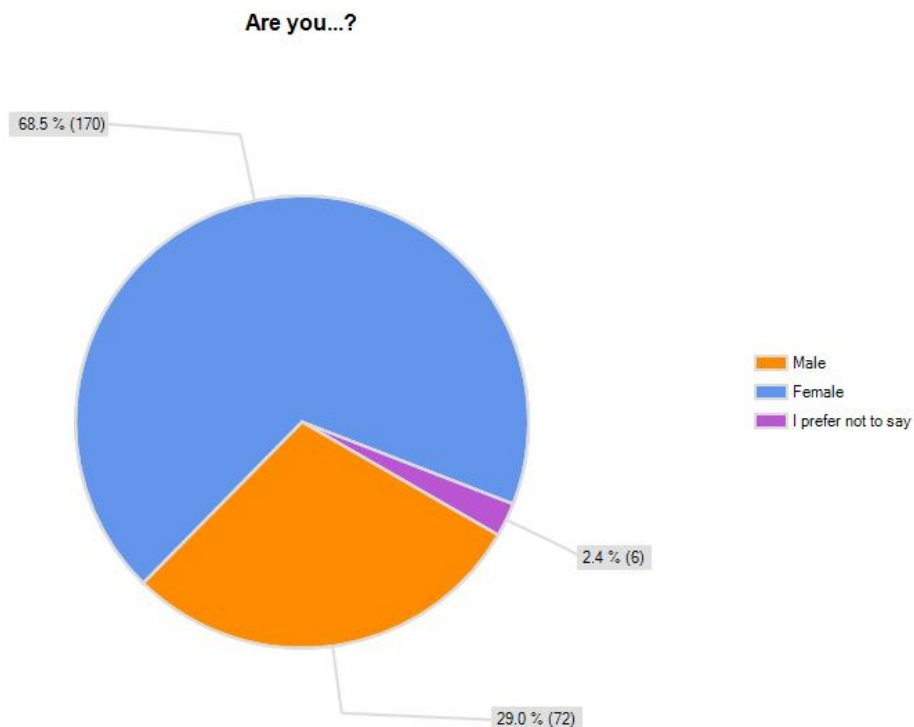
investing in assisted living. They said the Council should focus on making much more technology available and have dedicated nurses.

- One person said care staff should be given more time to do their job so they have enough time to discuss with the person whether things are ok.
- One person said a medically trained practitioner should visit the homes once or twice a week on a regular basis to check the medical needs of residents and refer to a GP if needed.
- One person said that senior HCC representatives should anonymously try out all of the current and new care choices, with 24 hours in each.
- One person said that HCC should consider issues of enabling death at a time of people's choosing. They said there are too many people and too few resources and some people want the option to end it when they want.

Section 3: About you

Question 1.

Are you...?



248 people answered this question.

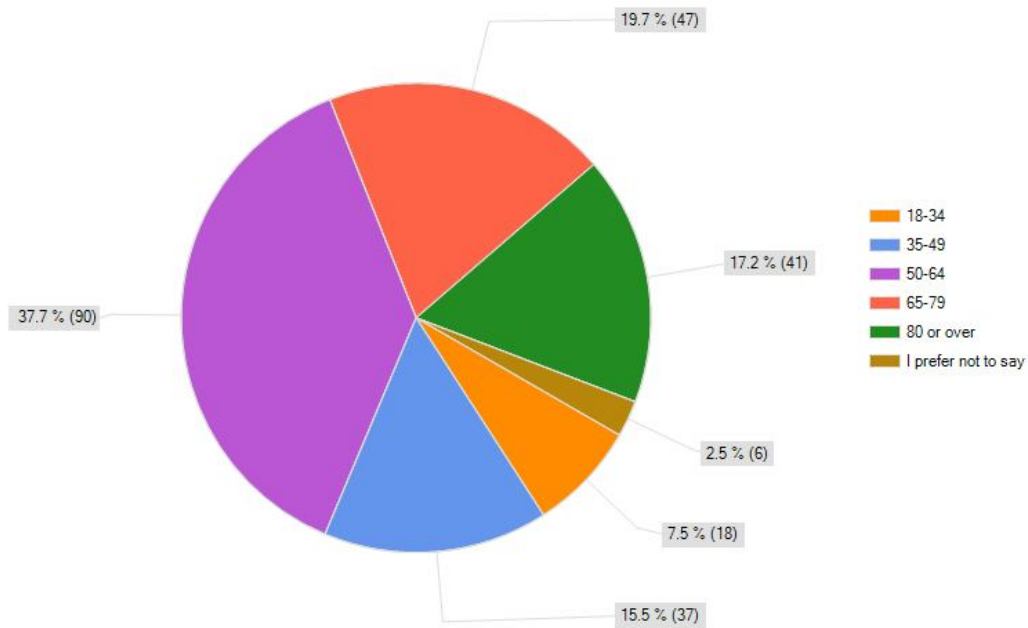
- 68.5% (170 people) were female.

- 29% (72 people) were male.
- 6 people preferred not to state their gender.

Question 2.

Please indicate your age range.

Please indicate your age range.

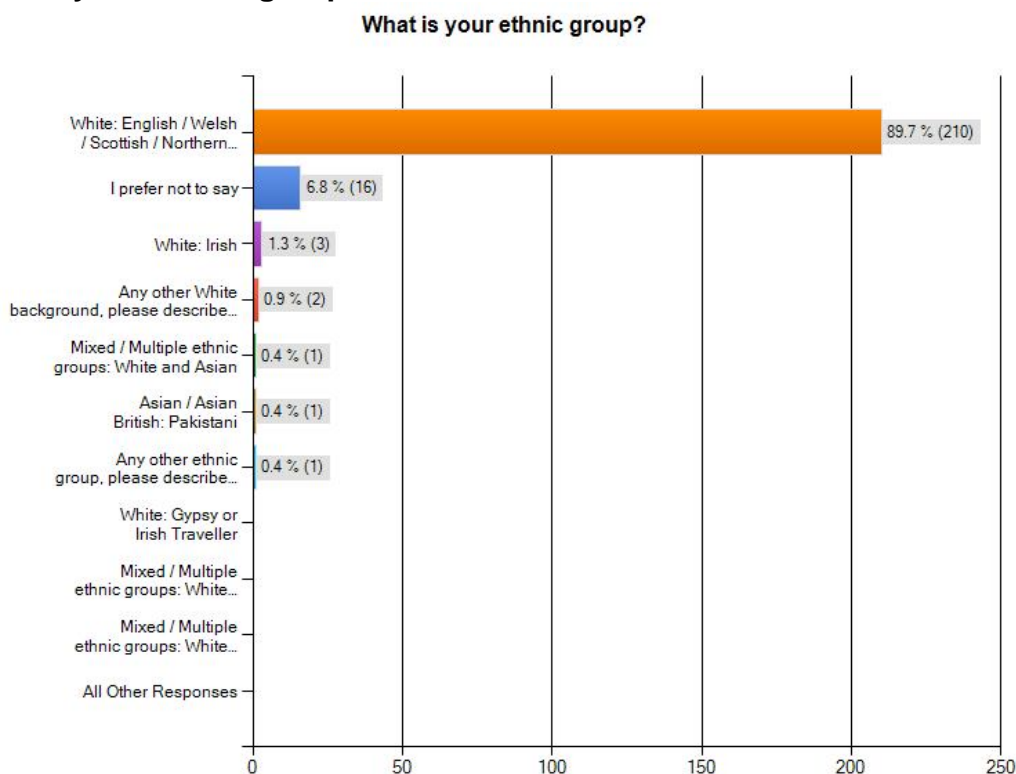


239 people answered this question.

- The biggest age group was 50-64, with almost 38% of respondents in this group.
- Over one-third of respondents were over 65, with people aged 80 or over making up 17% of respondents.

Question 3.

What is your ethnic group?

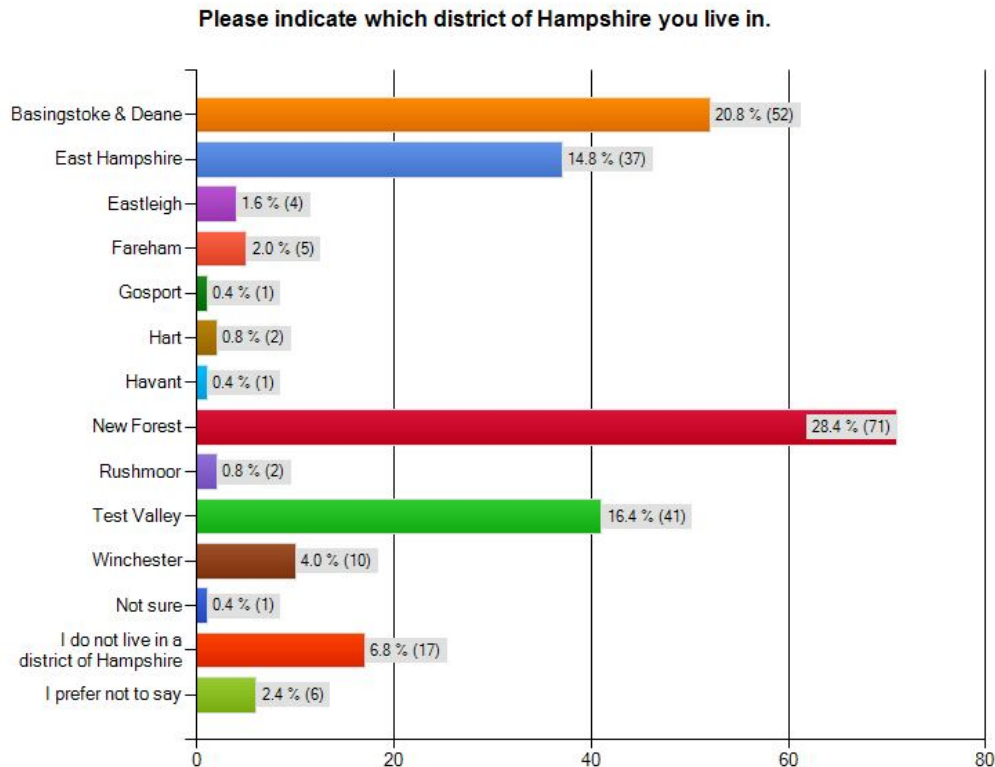


234 people answered this question.

- Almost 90% described themselves as White: English / Welsh / Scottish / Northern Irish / British.
- Almost 7% preferred not to state their ethnicity.
- Respondents also included people describing themselves as Irish, Mixed White and Asian, Jewish and Pakistani.

Question 4.

Please tick one box to indicate with district of Hampshire you live in.



250 answered this question.

- The majority of respondents (28%) were from the New Forest.
- 21% were from Basingstoke and Deane, 16% were from the Test Valley and 15% were from East Hampshire.

What people told us: letters and emails

248 letters and emails were received. Some respondents sent multiple emails and letters.

Against

The majority of the letters and emails received were in objection to the proposals.

- 30 people said that Bulmer House should not be closed. Two of the people objecting were also concerned about the future of Bulmer House Day Centre and there was a view that trying to house it temporarily

elsewhere would be problematic. A local organisation was in opposition because, they argued, the home provides valuable respite to carers.

- 35 said that Cranleigh Paddock should not be closed. One of those objecting said they supported the closure of the other homes as they were ordinary residential care homes but Cranleigh Paddock should be retained because is a specialist dementia unit.
- 34 said that Deeside should not be closed.
- 41 said Nightingale Lodge should not be closed.
- 66 respondents praised one or more of the four homes, or aspects of them (connected to BH=14; CP=22; D=12; NL=11). There were strong views that, as the homes are very good, and so much other elderly care, including care in other care homes, is so bad, it does not make sense to close them. People talked about the quality of care at the homes, and the quality of the specialist dementia care at Cranleigh Paddock, the gardens at Cranleigh Paddock and Deeside, the benefits of the size of the units, the happy atmosphere, the pets, cleanliness, reputation, activities and safety and security of the homes. There was a view that the homes provided the best quality of life residents could hope for.
 - Four respondents said that they are far better than homes in the private sector (BH=1; D=2).
 - Nine said that, though the buildings may not be modern, this was more than made up for by other features of the homes – particularly the quality of care, but also for Bulmer House, the location (BH=1; CP=2; D=2; NL=3).

“The accommodation is far from luxurious, but its key feature is its location; it is close to the town which means that families and partners, friends and grandchildren, can visit often and easily. The location means that old people who are increasingly cut off through their condition (e.g. senile dementia) receive regular visits from loved ones. Specialists in dementia care know that this emotional support and love is infinitely more important to their wellbeing, comfort and security, than state of the art buildings and en suite bathrooms.” (BH)

“Me and my three children regularly visit and immediately get a feeling of contentment when we go. Everyone, including residents and staff, are very high spirited. This is so reassuring especially when you hear daily reports in the media about other care homes that maltreat the elderly in their care- we feel extremely lucky. Therefore it just doesn’t make any sense - why change what is good?” (BH)

“Bickerley Green did not allow for any of mum’s natural/normal daily living routine, thus compounding her issues. Whereas Cranleigh Paddock allow her to maintain her routine and her independence, safely within her limits which has greatly contributed to her wellbeing and contentment, again as her condition allows. To take this from her would be a travesty, especially as the criteria in today’s climate of management of dementia care is ‘to maintain as much normal

living, independence and dignity as possible.” To move her would go against all current policies.”

“Anyone who has visited Cranleigh has nothing but praise for the care and experience of all the staff and the incredible atmosphere of the building. The home is bright, cheerful, safe, and has plenty of stimulation throughout the building. The residents have access to a secure garden area as well as their own particular space in the four lounges in the wings.”

“I find it hard to understand why you would close a care home like Cranleigh Paddock, in Lyndhurst, which is a credit to HCC and the staff who run it for you. At a time when so many cases of neglect and poor care are highlighted in the press, this is a place you can be proud of, and show that you do have understanding, and highlight Cranleigh Paddock as such a place.”

“My dad has had respite stays in private homes because he lived with us for 12 years before going to Deeside. In my experience, Deeside is homely, clean, secure. The staff are brilliant and provide a far better experience than the homes I have experience of in the private sector.”

“We understand that Deeside is not the most up-to-date care home however it is clean, secure and comfortable for all the residents and the service provided there by the nursing staff has been faultless, which in view of recent experiences nationwide can only be highly recognised and rewarded.”

“People with dementia can lead happy, physically healthy, and rewarding lives with the right care... with the right support they blossom and become able to relate to all that is going on in their daily life. This care has been given at Nightingale Lodge, it is not a service but love and dedication to the individuals.”

“Our care homes under threat are – in the main - FAR superior to those in the private sector which are funded by Adult Services. We fund residents in shared bedrooms with no en suite and even less space in corridors and rooms.”

- 40 of the 65 praised the caring, trained and dedicated staff and the relationship they have with residents (BH=9; CP=17; D=8; NL=6). There was concern that closure of the homes would mean breaking up excellent teams and loss of expertise and experience.

“I remember little [name] who kindly came in when she should have been off, to take my mum and myself out into Petersfield to visit an art exhibition and wheeling mum around the town with me. How many people would be prepared to do that in their own time?” (BH)

“These residents could not live in such a dignified and safe way were it not for the staff and surroundings of Cranleigh. It is not interim accommodation but their home. What I have always been so impressed by is the staff’s wish to put the resident first. As with all frail elderly people, they pass away, and Jenny Parsons and her staff do everything to support their dignified death in their home. It is something very special to Cranleigh and not always consistent in other homes.”

“It appears that most of the current staff at Cranleigh Paddock are being offered voluntary severance which will mean the loss of a great team of highly skilled

specialists. My wife and I visit my mother regularly and witness the wonderful way in which all the staff operate. Whilst I am sure they are good at what they do, I doubt that the staff at Forest Court have the experience to cope with advanced dementia sufferers.”

“The home is renowned for its training and expertise of the staff, this wealth of experience may be lost if Cranleigh Paddock is closed and employees are not redeployed.”

“The staff at Nightingale Lodge do wonderful work for fairly low pay, but it is obvious, from the love and respect which they show to all the residents, that they treat their jobs as vocations. They provide excellent stimulation for them, with enjoyable and thoughtful activities and outings.”

- 58 people wrote expressing doubt about the estimated cost of modernising the four residential care homes or doubts about the need to modernise the homes (BH=6; CP=20; D=9; NL=19). There was a view that no proper cost/benefits analysis had been made and that the cost of refurbishing the homes and bringing them up to modern standards had been overestimated. 40 of the 57 (BH=3; CP=13; D=6; NL=17) said that the homes, or a particular home, were fit for purpose and meet people’s needs, with 10 citing positive CQC reports as evidence that the homes, or certain homes, are good enough or very good (CP=9; NL=2). 20 of the 58 said that residents and their families are happy with the homes as they are and do not want refurbishment. Other points made included the following:
 - Some argued that modernisation would make the homes worse for people with dementia. They suggested that residents would flood en suite bathrooms.
 - People queried why Nightingale Lodge had recently been refurbished and a new kitchen was put in Deeside if the homes were not fit for purpose.
 - People said that the majority of alternative homes suggested for the residents are in a similar condition, with similar room sizes and ages to these homes. It was suggested that the rooms in Deeside are actually bigger than the rooms in its proposed alternative, Oakridge. They also said that, though Deeside does not have en suites, Oakridge does not either. It was suggested that the only refurbishment Deeside might need is a new boiler and double glazing. People said Fleming House, a proposed alternative for Nightingale Lodge residents, is similar but older than Nightingale Lodge. People pointed out that some private homes the Council houses clients in have smaller rooms, no en suites, shared bedrooms, narrow corridors and do not have hoists in every room. They queried why the Council was recommending these homes for residents when the Council considered the four homes in the consultation, with similar or better features, to be unsuitable.
 - Two people pointed out that Cranleigh Paddock was purpose built.

- One person argued that the rooms at Nightingale Lodge are big enough to get people either side of the bed to lift clients.

“The example given of the need to install hoists to lift 35 stone residents is laughably inappropriate given that the residents of Bulmer House are probably all less than 12 stone.”

“Do the residents really need en suite bathrooms? Is that a potential problem in the making?” (CP)

“No one feels that their relatives suffer from lack of privacy or dignity in any way.” (BH)

“As for the facilities they have at Nightingale Lodge, they have their own rooms, not shared like some homes. En suite is a luxury not an essential. To my relative it would be a hazard, again a supervision issue. The lounges are spacious and comfortable with all the luxuries that go with it. ”

“En-suite facilities are unnecessary for such residents [with dementia] as they wear pads at night so do not use the toilet, and during the day are in the day rooms and use the public facilities. It has been known for sinks and toilets to be blocked overnight or overflow with the attentions of curious and wandering dementia-sufferers in other establishments. So not a valid reason for closure of Cranleigh Paddock either?”

“Why would you want to close Cranleigh Paddock when it has all the things a relative could ask for. It is all on one floor, it is light and bright we think this is very important for the residents also having small areas where they are familiar with the surroundings, caring staff who work with dementia, and its working very well.”

“We believe that the residents are content with their homes so we do not think it is necessary to uproot them and put them through the trauma of a move in order to comply with new standards.” (D)

“I have heard it said that the living conditions at Cranleigh Paddock are no longer appropriate; that the corridors are too narrow, the rooms too small and that none of them are equipped with en suite facilities. As far as my mother-in-law is concerned, the narrow corridors are a bonus, they allow her to move from area to area by holding on to the bars on each side of the corridor; her small room is ideal, it enables her to move around, possibly with some help, by holding onto the furniture in a way that she could not do in a larger, more spacious room; the lack of en suite means nothing to her as she’s taken to the lavatory whenever necessary and so long as the facilities are clean, which they always are, that is all that is necessary.”

- 56 respondents expressed concern about the impact of the proposed closures on residents of the four care homes. It was clear that many people felt that, in proposing to close four care homes and invest in Extra Care assisted living, there had been too little consideration of residents. Two said that the residents should have choice and control about where they live, not the Council. Amongst the 56, it was strongly felt that the proposals do not take into account the psychological and emotional stress

it will cause residents if they are forced out of their home. It was suggested that moving them is likely to be detrimental to their health and wellbeing. 21 of the 56 pointed out that older people, particularly those with dementia, find it hard to cope with change – they need continuity and routine for their wellbeing – and moving them could result in their deterioration. A few people said that residents should be able to end their days at the home and one said residents thought they could stay there for life. One person mentioned a case where the resident had already gone through one move from another care home to one of these four. Another person pointed out that if people from Nightingale Lodge were moved to Fleming House temporarily while the redevelopment took place, and then back to Nightingale to go into the Extra Care assisted living schemes, they would be moved twice and thus experience more stress.

- 24 respondents thought that moving the residents would kill particular residents or many of them. Some cited examples of people dying after closures elsewhere or claimed that ‘it is a fact that 37% of elderly people moved from one care home to another die within a year’.⁸ Four people connected to Deeside said they would hold the Director of Adult Services, Gill Duncan, personally responsible if their relative died soon after being moved.

“It breaks my heart to see these frail elderly people being treated like herds of cattle, wanting to turf them out of their final home which gives them peace of mind, caring staff and comfort.” (D)

“I understand you have to find money from somewhere but anyone who has had a relative or come into contact with patients suffering from Dementia or Alzheimer’s, will understand the frightening and confused world they live in. Being able to cling to familiar places and people is the only thing they have to hang on to, and kind understanding care is essential.” (CP)

“In June it was necessary for my husband to move to another room, and it was hard to witness the trauma this caused him. Dementia patients have a routine and also need familiar surroundings. I think it is fair to say he has still not fully recovered from this move, so it is understandable that a complete move to another residence will take its toll on him once again, should this happen.” (CP)

“The change of environment, regular carers, other staff, and not forgetting other residents can disorientate, confuse and change a dementia person’s personality

⁸ It should be noted that this figure seems to have been based on the closure of one care home in Northamptonshire in 1998: it is not a figure that can reasonably be applied to care homes in general. Evidence on whether moving residents causes a deterioration in health or death is currently ambiguous. For example, see <http://www.scie.org.uk/publications/homeclosures/assessmentandchoice/>, <http://blogs.lse.ac.uk/healthandsocialcare/2013/06/21/the-impact-of-involuntary-nursing-home-relocation-on-health-outcomes-what-can-be-done-to-help/> and <http://www.birmingham.ac.uk/Documents/news/BirminghamBrief/AchievingClosureReport.pdf>.

completely, usually to the detriment of these type of person. They usually “step down” and increase their dementia. If in many cases aggression has been a problem and Cranleigh Paddock has managed to resolve or “tame” or “control” it, any move will re-start and possibly increase this.”

“Cranleigh Paddock is not simply a residential care home, specialising in dementia care, it is my mother in law’s home; it is where she lives, where she thrives.”

“Why should they be moved from a home which is a centre of excellence to an unproven facility which will most likely limit their ability to enjoy their remaining time.” (CP)

“I am very concerned at the growing evidence that suggests that the moving of the elderly shortens life expectancy.” (BH)

- Connected with this, two residents, one of Deeside and one of Cranleigh Paddock, wrote to say they did not want their home to close. 29 people in total said that residents are happy in the four homes and do not want to move. People said residents feel safe there or are settled. Three people said that their relative in the home is very worried about the proposals. Four expressed concern that the closures would mean residents would no longer see the other residents who they had made friends with in the home break up, two were concerned that residents would be separated from pets at Deeside and Cranleigh respectively and six were concerned that the staff and residents, who can have very close bonds, would be separated.

“The residents, I don’t suppose you know and I guess you couldn’t care less, some are in their late eighties and nineties, one of over a hundred. They are all set in their ways and their little groups and quite happy. Now in your stupidity, you want to break them up and put them in a place where they will find it hard to settle in. So have a good long think before you decide anything. After all is said and done you are supposed to care for people first and money second. As for myself, I have been here over twelve years and good years, getting on ok with the staff and carers. I am nearly eighty nine and I don’t want to be pushed around at my time of life. I don’t suppose that worries you one iota.” (CP resident)

“My mother is 98 years old in September and has been in the care home for four years. She suffers from dementia and is settled in the home and happy. I fear that any change in her circumstances, e.g. moving her to a new home or as suggested Sheltered Housing is totally inappropriate and will cause unnecessary suffering.” (D)

“I feel that the residents of Nightingale Lodge are effectively being evicted and moved against their will.”

“My dad is 92 years old. He is settled at Deeside and he has made friends. He helps care for the two cats at the home. He is very worried and has no wish to move to another home. I think a move at his age could be life threatening.”

“For most of the residents their best friends are the staff, will they be accommodated too?” (NL)

- 47 respondents said that Extra Care assisted living and/or independent living is not appropriate for the sort of people who live in the four homes or that most of the residents would not benefit from the proposals because they would not be able to live in Extra Care assisted living (BH=11; CP=17; D=10; NL=7). It was argued that the proposals are not appropriate for people with dementia and do not take into account their needs. People said that the proposals provide no alternative plans to care for those residents who have dementia and that the proposals were sacrificing dementia care for the benefit of the more able. As with the questionnaire responses, people said that Extra Care assisted living and independent living would not be an adequate substitute for having communal living with professional care available 24 hours a day. They argued that many people would not be safe in Extra Care assisted living. They suggested there were too many dangers in the buildings, such as stairwells, and that people with dementia pose a risk to both themselves and other residents from fire and flooding. They also said that, though the Council had advertised Extra Care assisted living as 24-hour care, the ratios of available carers to residents would be too small to meet the needs of the sort of people living in residential care, for example, only two on at night, one asleep and one awake for 70 residents, and one carer between 17 people between 7am and 2pm. People said that people would be lonely and pointed out that some people prefer communal living. It was also suggested that Extra Care assisted living can be too complicated to manage and expensive for residents. There was concern that it would not meet the needs of people with dementia or their carers in terms of providing adequate care and reassurance. People connected to Cranleigh Paddock said it was no match for the specialist dementia care that Cranleigh Paddock provides. Some people said they had tried independent living with care packages and it does not work and three said they had a relative who had a bad experience of living in Extra Care assisted living before they moved into Cranleigh Paddock. Three people said that care at home can be very poor, with people receiving a different carer from agencies every day and carers failing to turn up on time, and that it is not good enough to keep people independent. One said there were not enough home carers available. Another respondent said that Telecare has, in practice, very little impact upon the support needs of older people.

“It seems that you propose to increase first stage support at the cost of withdrawing second stage support. You provided no basis for prioritising elderly who are in fact less needy (able to live in their own flats) over those that are more needy of care.” (BH)

“Even with the best home care support available, there will always be some people who are unsafe to be at home.” (BH)

“Could you please tell me what would happen to an elderly person that has dementia, that is unable to look after their own daily needs, such as cooking, personal care and toileting? Will there be a carer living in their home 24 hours a day? Our job is very demanding and we have been given the correct training to assist our service users. Families cannot always look after their loved ones that have dementia and that is why they come to us, so that we can give them the care and support they need.” (CP employee)

- 47 wrote against the proposal that there is a lack of suitable alternative homes for residents in the local area (BH=13; CP=8; D=12; NL=11). As with respondents to the questionnaire, people said there is a lack of vacancies in Council-run homes for people who need 24-hour care but not nursing care in the areas where the proposed closures will take place. There was a view that there was a lack of places for people with dementia in the alternative homes suggested by the Council. People connected to Cranleigh Paddock pointed out that it is the only specialist dementia care home in the area. 10 of the 47 said that private homes are too expensive (BH=3; D=4; NL=2).
 - People stressed that places are needed locally, both for the residents and for local people who need care in the future. 10 of the 47 said they considered the homes to be a resource for the local community. 26 of the 47 spoke about how convenient the current location of one of the four homes is for them or expressed the view that alternative care homes suggested for residents would be too far for friends and relatives to visit, severing their connection to their local services and community and leaving them socially isolated (BH=10; C=6; D=5; NL=5).

“We were also wondering where residents would be moved to. Some people had phoned round the remaining council care homes only to be told there were no vacancies. If all four care homes close, there will be over 100 people seeking accommodation in care homes that are already full.” (BH)

“I have a friend, a 92 year old gentleman whose wife has been in Bulmer House for four years. Living locally he visits her every afternoon and has been told that his wife must move. To where is she to move? He has enquired from every home in the Petersfield area and there are no vacancies! To move her to a home in Andover, Alton, Emsworth or elsewhere is just not acceptable.”

“At present she is only 10 minutes walk away, which means that not only myself, but my children visit her regularly. She loves family visits- her eyes light up when she sees one of us.” (BH)

“The proposal is to move the current residents to Forest Court in Calmore. That would move my mother further away from us, and make the journey to visit her much more difficult.” (CP)

“Cranleigh Paddock’s residents and their families come from the Totton, Waterside and New Forest areas. The unit provides easy access to the families of the residents. The only other specialist dementia unit is Havant.”

“The public transport between Lyndhurst and Forest Court is not sufficient to enable families to visit their family members in Forest Court. Isolating dementia patients from their families in this way is not in the best interests of their happiness, health or welfare.” (CP)

“There is no suitable alternative accommodation in Basingstoke for the number of dementia residents that are cared for within Deeside.”

“It took me over three years to move my mum back into Basingstoke due to the shortage of rooms as she was originally placed in a privately run care home in Whitchurch and as you can imagine this put additional strain on all the family as she was so far away. Now we again face the potential issue of her moving outside of the area if Deeside closes.”

“People who need care and have little money to pay the weekly fee of £1200 (Cherry Trees Home) of a fee paying home will have nowhere locally to go.” (D)

“Many people in Petersfield worked hard to raise money to build and equip Bulmer House. It was a much needed facility. To scrap a building 37 years old seems thoroughly wasteful. Surely it can be brought up to date for the present and future of those who need it.”

“Please bear in mind that Bulmer House was built as a community amenity for the elderly of Petersfield, where residents could keep regular contact with their loved ones and long standing friends. It is destroying this concept to hive it off to the private sector and scatter the current residents across the whole of Hampshire. Their families, many of whom are elderly or unwell themselves, will be forced to make long and possible onerously expensive journeys to visit.”

“We will lose the only specialist dementia home in South Hampshire, This will affect the people of our community both now and for future generations. Lyndhurst is due to be one of the first villages to be designated as a dementia friendly community by Andover Mind in November this year. This will include training for shopkeepers and it would be inconsistent with this to allow the closure of a valuable dementia care home.” (CP)

“We believe it is important to have homes within communities to benefit from and maintain local support and friendships.” (D)

“It has always been reassuring that the facility has been there should any family member, or even myself in the future, need it.” (NL)

“The proposals for Nightingale Lodge will mean that not only is Romsey unable to care for people with advanced dementia as is the current situation, it will not even be able to care for those with moderate needs (these people need constant supervision due to their unpredictable behaviour, confusion, risk of falls etc.) whose care needs can only be satisfactorily met in a nursing home setting... Moving Romsey residents to out-of-area care facilities is morally unjustifiable and isolating for them. It is also extremely cruel to their loving spouses whose life revolves around a journey of several miles in order to visit regularly, when they themselves are elderly.”

“They would no longer be able to see their local GP. Visits from religious organisations and other local groups would also be severely disrupted.” (NL)

“Current proposals are that existing residents will be placed elsewhere, i.e. Fleming House in Eastleigh... This will cause a rupture to the connection between the residents and their local community, friends, neighbours and religious congregations.” (NL)

“The elderly and vulnerable of Romsey need somewhere local where this kind of care can be given and friends and relatives can visit easily. No one wants to move from an area where they have lived for most, and sometimes all their lives.” (NL)

- 18 of the 45 expressed concern about the quality of life and care residents would receive if they were placed in other homes (BH=2; CP=12; D=7; NL=2).
 - Emsworth House, Oakridge, Bickerley Green and Forest Court were criticised, with nine people connected to Cranleigh Paddock saying that Forest Court is not suitable for Cranleigh Paddock residents. People said Emsworth House was dirty, Oakridge is too big for people with dementia, more of an institution than a home and smells like a toilet, and that Bickerley Green has an institutional regime and no safe, freely available enclosed garden. People said Forest Court is not as good as Cranleigh Paddock for dementia care in that it was not designed for people with dementia; if residents were placed on the first floor they would not be able to wander freely inside and in the gardens outside; there would be too many dangers in the physical environment; the corridors would be too wide; and the staff are not trained and experienced in working with people who have advanced dementia whereas the staff at Cranleigh Paddock are. People were concerned that the team at Cranleigh Paddock would be broken up and their skills dissipated and wasted.
 - There was also concern that people would be put in non-specialist dementia care homes, where people without dementia are put with dementia patients, and this would be unfair on all of them.
 - There was concern that people would be put, unnecessarily, into nursing care.
 - There was also concern about the level of care in private homes and people felt that the staff in such homes would not be as well trained as those in homes like Cranleigh Paddock and Bulmer House.

“Bulmer House is not the same as other residential/private homes in the vicinity, who do not have the same trained staff and qualifications.”

“Cranleigh Paddock provides specialist dementia care which is not provided at many other homes. Staff have been highly trained and know how to provide the dementia residents with sensitive, patient and caring support. To residents like my mum, a move could be extremely detrimental as the support/care would not be of such a high standard and she could get stressed and disorientated, taking to undressing and other bad behavioural traits. We are concerned that she would be confined to her room and not involved in anything and, because she has limited concentration/communication, she could not say what she wants or needs and carers might not understand or be sympathetic towards her.”

“The standard of care that these kinds of people [advanced dementia residents at CP] may receive in the future, without the specialism being available, will be far from satisfactory or something of a lottery at least. The suggested alternative place for them to go, Forest Court, is a wing on the first floor, so no safe wandering about in the garden, which so many enjoy. It is built and set up as a nursing home, so is large and quite intimidating, and hard to find your way around, confusing and distressing to dementia patients. Not cosy and friendly like the Paddock. I’m sure it is good for the job it was built for, NOT for the very special and unusual needs of dementia patients.”

“Why should they be restricted and only allowed to walk downstairs and in the gardens when the carers deem fit [if they move to Forest Court]. Again, this is a deprivation of their freedom and liberties.” (CP)

“It’s likely that the only credible solution will be to place all, or most current and future residents in private care homes, which, given their poor record in recent years, is unlikely to inspire confidence and is, I suspect, part of the reason for the decline in demand for residential care.... high profile closures will have done little to encourage faith in the private sector. It is therefore ironic that HCC, which does have a good reputation, is reducing its support for residential care.” (D)

- 42 people wrote that residential care units are still needed (BH=5; CP=13; D=13; NL=9). As with responses to the questionnaire, people said that it is needed for people who cannot live independently but do not need nursing care, particularly people with dementia. People associated with Cranleigh Paddock said there is a high need for specialist dementia care homes.

“I feel the future of independent living would be great for some elderly but not for others. I’m sure that in the future there will be service users that will need the 24 hour care that we provide. Our service users do not require a nursing home, but require a carer to assist them through the day and night.” (CP)

“Cranleigh Paddock is one of only two specialist units in Hampshire and I would suggest even the proposal to close it is perverse. Its closure would leave the western side of Hampshire without any specialist care for dementia sufferers.”

- Of the 42, 25 said that increasing demand due to demographics means that it would be unwise to close care homes. Four people and one organisation (connected to BH=3; NL=1) said the Council’s argument that there is a lack of demand for the four homes does not add up – they said that lower quality homes in the county have high demand, there had

always been a waiting list to get into Nightingale Lodge and Bulmer House used to have a waiting list. It was suggested that the homes are reducing admissions and this was not due to lack of demand but staffing cuts and deliberately running down the homes.

“Although the percentage of elderly who come into this category (very frail elderly) may decrease over time, the number of elderly is set to increase, so the number of residential placements required may stay the same or even increase. There will need to be replacement homes built for them to improved design standards.” (CP)

“Many families came [to Basingstoke] in the 1960s London overspill and these people are now old and wanting care.” (D)

“Over the next two decades the number of dementia carers in New Forest is predicted to increase by 43.2%. It is essential that HCC prepares to provide for the care of more dementia patients within the New Forest. This Parish Council therefore considers it would be unwise and unacceptable to close down the only council-run specialist dementia care home in the New Forest.” (C)

“It has been stated to me recently from HCC that there was a lack of demand at Bulmer House. Relatives over a year ago were told on separate occasions by different members of staff that a wing was closing (not because of lack of demand but because of cuts) they were also told that further admissions would cease on that basis. The comment therefore that there has been a fall in demand, would seem to be unable to be sustained.”

“Despite what was said at the meeting Bulmer is being wound down and has been for quite some time. People have been encouraged not to place relatives there. The books have effectively been closed for most of 2013 and only respite carers being taken in.”

- Eight of the 42 specified that Council-run homes are needed in particular. As with the questionnaire responses, the reasons given were the affordability, high standard of care, training and dedication of staff and accountability of Council-run care homes.

“The majority of elderly people do not have vast amounts of savings for private care and social services only contribute a very small percentage. Selling a home is not an option, when there is still a spouse remaining. How you can consider accommodating so many people, unable to afford private housing, in five county council run homes, I just can’t imagine.” (NL)

“The most vulnerable usually cannot afford to have one of these flats.” (NL)

“Hampshire is turning its back on some of the most vulnerable in the community by stepping away from direct care provision.” (BH)

- 30 respondents, including a union and 15 employees of Nightingale Lodge, were against the proposal on the basis that staff would lose their jobs or would be forced to relocate (BH=3; CP=8; D=4; NL=17). There was a view that this was contributing to the recession and staff may not be able to get another job.

"I love my job and want to carry on working at Nightingale Lodge with my wonderful colleagues."

"You are making many good, caring people lose their jobs and yet again feeding into the recession." (BH)

"There is also the matter of the staff, most of whom are local. They have earned a reputation for their dedication and care, and would be very hard pushed to have to relocate outside the Romsey area. They too have family commitments, such as schooling and partners who would be unable to move with them. Keeping the facility in Romsey will help retain these valuable people and avoid additional numbers to the unemployed." (NL)

"I am still convinced that the closure of Nightingale Lodge will be a sad loss, especially as the staff are all wonderful and their commitment to care and love has been its finest accolade. These staff members who have been loyal, extremely kind and caring to their residents and their families and are all well qualified, have just been treated like they don't matter. I hope they will all be snapped up, as people like these are hard to find."

"One of my neighbours... has worked at the care home for over six years and loves her job there and can ill afford to lose the income." (D)

- 28 said that the homes, or a particular home, should be invested in or upgraded so that it means people's needs (respondent connected to BH=9; CP=9; D=1; NL=6). There was a view that only some things would need changing so it would not cost as much as the Council estimated. Three of the 28 said that the Council can afford it. People said there is room to add extensions at Bulmer House, Cranleigh Paddock and Nightingale Lodge so the accommodation can be improved e.g. putting in en suites. It was also suggested that the spare rooms at the homes would make the homes easy to remodel in phases and this would mean residents could stay in situ while the improvements were made. It was also suggested that the Masters House site or Romsey Register Office sites could be used to extend Nightingale Lodge. In relation to Cranleigh Paddock, five said that there is a Government grant available to upgrade the home and they queried why the Council has not applied for it.

"Why not take one room from each of the five wings at Nightingale Lodge and divide that room into two to provide the adjoining rooms with en suite. This will tick your boxes as with several of the upgraded homes in Hampshire."

"If some elderly people also require other equipment, then why not update the wing that is currently out of use due to lack of staff? Surely a much cheaper option than tearing down the whole building and starting from scratch?" (BH)

- 23 people wrote to say that they felt that the proposals are for financial reasons and for the financial gain of the Council, not for the benefit of older people, or that the Council only cares about money and does not care about people. People variously perceived the proposals as abdicating responsibility for elderly care to cut costs, an attempt to get higher rents

from local people and an attempt to shift costs from the Council onto self funders and relatives: if the homes are closed people will have to pay for private care, where Council costs are capped and relatives have to make up the difference in top up fees; more Council-funded people in private homes means self funders paying more to make up for it. One criticised the Leader of the Council for being prepared to spend money on a warship but not to save Deeside. Another criticised the Council for spending money on a cycle track.

“It will mean more people from council homes will be placed in private care homes, meaning people who have saved will be charged even more to cover them.” (D)

- 11 people wrote to say that they thought it would be morally wrong or cruel to move the residents from their homes. Nine of the 11 said that the residents had lived through the Second World War and should be treated better.

“To make these people homeless, to ship them about to any other place with a spare bed, is callous in the extreme. I happen to know that several residents were in the services, at least two in the merchant navy, one of whom was a captain, one worked for the W.H.O., and has an OBE for his efforts... Valued members of society in their time. They deserve MUCH better treatment than this.” (CP)

- Nine relatives wrote to say they were very upset or would not deal well with the stress it would cause them if their relative had to move. Three said it had been very hard and/or took years for them to find a suitable place for their relative and were distraught that the home they chose may now be closed.
- Four respondents said that they think the Council has an agenda to get rid of all care homes. One of the four said that Council should stop trying to shirk its responsibilities towards the elderly in this way.
- Four people said that Extra Care assisted living would cost the Council and tax payers more than keeping the homes open. Two of the four, people associated with Deeside, viewed investment in Extra Care assisted living as paying for modern housing for people who live off benefits and do not work. They thought it was wrong for the Council to do this.

“Closing the homes to save £2.4m a year is really peanuts against the money you will spend on the new Extra Care assisted living housing programme you name, which would be totally unsuitable for these people, and cause such suffering to themselves and their relatives.” (CP)

- Three respondents expressed concern about the impact changing the accommodation at Cranleigh Paddock would have on the immediate area. They said that traffic is already congested in this area and the narrow road would not be able to cope with any extra traffic, such as lorries doing deliveries and residents' cars (one explained that there are no buses there after 5.30pm so residents of the flats would need cars). One complained

that the Extra Care assisted living flats would overlook their property and they would lose their privacy.

- Individuals associated with Deeside and Cranleigh Paddock also expressed concern that if the homes were closed, and Extra Care assisted living not built, it would add another boarded up property to the area which would attract vandalism and crime to the area.
- One organisation said that, in addition to the areas for investment in independent living outlined in the consultation document, the Council should also invest in transport to help people stay independent.
- Individuals associated with Bulmer House and Cranleigh Paddock queried what would happen to the sheltered housing schemes on these sites.
- One respondent asked for reassurances that mistakes made when another care home was closed would not be repeated on this occasion.

Comments about the consultation process

- Some respondents made negative comments about the consultation process. 20 people said they thought that the closure of the residential care homes was a foregone conclusion or that alternative options had not been fully explored. People interpreted various things as signs that the Council had already made a decision, including:
 - staff being given redundancy notices;
 - people assessing the Cranleigh Paddock site;
 - Council staff asking relatives where they would like residents to go or encouraging relatives to move residents to other homes, and having a social worker on site to oversee the process of moving residents;
 - some residents have already been moved out;
 - blocks on admissions to the homes, resulting in spare beds and the homes appearing not to be in demand;
 - Council staff saying 'when the closure takes place';
 - allocating rooms in Forest Court for Cranleigh Paddock residents;
 - not applying for a grant to upgrade Cranleigh Paddock;
 - providing information about Extra Care assisted living at the consultation meeting for Cranleigh Paddock;
 - councillors stating that residential care is outdated and, it was suggested, Councillor Perry is pushing for Extra Care assisted living;

- a partnership of five seem to have been chosen to build the Extra Care assisted living schemes and the possibility of selling Bulmer House as a going concern seems to have been discounted before the consultation has ended;
- the Council's financial justification for the proposals will only be available after the consultation period;
- all other consultations about home closures have resulted in the homes closing, even though, in 2012, 76% of respondents objected to the closure of three homes. There was concern that objections would be discounted regardless of the number of people who objected.

"I really feel this is a losing battle that the decision to close Cranleigh Paddock will be made however much we try and say DEMENTIA patients need this home."

"Encouraging those legally responsible for residents to move them to another care/nursing home does seem to me to be determining the outcome of the consultation process. If the transfer/resettlement process achieves sufficient uptake, then surely Bulmer House will become unviable by default."

"Cllr Perry was heard to say... that 'thousands of signatures would not carry any weight, and that it would be the quality and sincerity of the responses that would be taken into account'. So already decisions can be seen to have apparently been made, when the protests of so many people are not considered to be of significant importance. 76% of protests were cast aside as unimportant last time apparently too. Who is to decide on what a 'quality and sincere response' is?" (BH)

- Other negative comments made about the consultation process were as follows:
 - Seven complained that Cllr McNair Scott did not take part in the public meetings or that she arranged to meet families at Cranleigh Paddock and did not turn up.
 - Three said that Council staff were unable to answer their questions at the meetings.
 - One said that consultation meetings had been held too soon. Another wrote to say that they had not had any notification of public meetings and subsequently wrote again to say that they thought the meetings were scheduled with little notice and no advertising.
 - One said that the consultation meetings were not held at a convenient time for some people, i.e. when some would be at work.
 - Six respondents said that they felt there had been a lack of proper costing on the options or alternative options, e.g. upgrading the present structure of the homes, or insufficient information about the number of units that would be created, demographic forecasts, etc.,

to make a proper case for the proposals in the consultation document.

- One claimed that staff had been told not to talk to residents and one resident said that staff had not informed them about it. Another was unhappy that residents were spoken to without relatives present and that relatives were telephoned before they got notification of the proposals in writing.
 - One claimed that staff were told in a 'callous way' that they would lose their jobs.
 - Two organisations said they were disappointed because they had not received an invite to take part in the consultation. One of the two said that there was a lack of transparency in the consultation and they did not like the questionnaire.
 - Two respondents said that they felt the Council had not consulted enough with care professionals/GPs.
 - One claimed that few of the decision-makers have visited the care homes.
 - Two suggested that the consultation period should be extended because Cllr McNair Scott was on holiday for part of it.
 - Three said Cllr McNair Scott should resign because she has a conflict of interest, with her husband having a business interest in Extra Care assisted living housing.
- In addition to providing feedback on the consultation, some people requested information about the consultation process. For example, one respondent asked if there was a Council protocol/policy document setting out the methods under which the consultation for proposed closures of residential care homes for the elderly should be carried out.
 - Some respondents were critical of the actions of campaigners against the proposals:
 - One said that many residents in Deeside lack capacity to understand what is going on in relation to the consultation, but some staff have been encouraging them to say they do not want to leave the home.
 - One complained that the meetings were attended 'mob-handed' and this was intimidating for relatives.
 - One said that the 'Save Deeside Campaign' gave misinformation about Deeside and that its leaders do not have residents' best interests at heart: they claimed that one of the leaders of this campaign deliberately avoids visiting their mother, who is a resident, when they come to the building for meetings.

In favour

- A couple of people wrote in favour of the proposals. One wrote about Deeside, saying the building is not fit for purpose and it could be better for residents if they moved. The other argued that Extra Care assisted living is beneficial for older people, including those with dementia.

“The building has out-lived its life with regards to the old windows, the heating system is always causing us problems and most of the bedrooms are far too small, especially when a resident is taking poorly and we have to move furniture out to get a hoist into the bedroom.” (D employee)

“I have also recently visited a more modern Extra Care assisted living scheme in Ellesmere Port, Liverpool and have seen the huge benefits achieved in a scheme that supports older people to remain within their homes, as part of a community. The scheme I visited included older persons with none or some physical health issues, and included those suffering from dementia and provided accommodation for couples.” (CP)

Support for Extra Care assisted living, with caveats

- Six more respondents (including three organisations) wrote to say that they were for investment in Extra Care assisted living, but with caveats: three of the six said that it was important to have a range of options for older people to choose from – and that both residential care and Extra Care assisted living are needed. Two said it would not be appropriate for residents or people with dementia. One said they would support Extra Care assisted living if personal and medical care was to the same level as that in residential care homes and social activities and trips out were provided in the schemes. One person was concerned that the location of Extra Care assisted living on the Bulmer House site would mean that its residents would be socially isolated. An organisation was concerned that staffing/care provision may decrease over time due to budget challenges, making Extra Care assisted living ineffectual, as has happened with sheltered housing schemes. They gave the example of one of their members who was living in sheltered housing where there had been social activities and visits from a warden who was also available via an alarm system. Due to financial reasons, the warden was not replaced, the emergency alarm system outsourced then stopped altogether, there were no more social activities and no-one to help. They suggested that a leasehold agreement with a housing agency would be better than freehold at the schemes and that Wi-Fi should be made available in all apartments, not just communal areas, so that residents can Skype their families in privacy.

“We are happy with the concept of the Extra Care assisted living scheme. It sounds like an excellent option for older people who are finding maintaining their own property a burden, and a good alternative to standard residential care. Investing in these schemes will mean reducing the budget for the very frail

elderly who need the type of care offered by residential homes. ... We need more of both schemes not less.” (CP)

“While I support the Extra Care assisted living and Telecare services, where appropriate, they are not the solution for everyone. ... all too often I am finding that encouraging the elderly to stay in their own homes, which may often be unsuitable or downright dangerous given their changing needs, is often leading to falls requiring hospitalisation. So while this approach may save HCC money in many cases it merely transfers the problem to the NHS.” (D)

“We have Burgesmead which offers individual units. Those living there are able to go out themselves usually or can watch the world from the window being right in town. Units like that at Ramshill would not work, they constantly need to see people around, not shut up in a self contained unit. We also have other options of single units/flats as this in various other places in town. Most assigned there at Ramshill would find it hard to access town.” (BH)

Alternative options

- In addition to the suggestions that the homes, or specific homes should be kept open or refurbished, other alternative options suggested by respondents were:
 - Keep the homes open and build Extra Care assisted living elsewhere (total=6; BH=1; CP=2; NL=2)
 - Keep the homes open and build Extra Care assisted living in the grounds (total=6; BH=3; NL=2).

“Bulmer is adaptable/upgradeable and it is a big enough plot to possible combine Extra Care assisted living and residential, which no one seems to have investigated. It is a matter of the will of the council (and the money obviously).”

“My suggestion is to provide care and cover the whole of spectrum of life span from Extra Care assisted living onwards i.e. from day care, Extra Care assisted living to residential to nursing to dementia care at any stage they suffer from in Bulmer House. The Bulmer House is ideal for this. If it is sold to me, then I would make the rooms bigger gradually. Leave the present residents where they are. Also build Extra Care assisted living units in the remaining land.”

“Nightingale Lodge has a large footprint of land that could be developed, upgraded or added on to. Other options could include using the Masters House Day care site and incorporate Day care into the Nightingale Lodge unit. There would be ample room to add both Assisted Living Flatlets and/or a Nursing wing should you choose. The residents could then stay put (as with Fleming House) whilst the redevelopment takes place and the residents may even benefit from any Nursing beds that you choose to add in later life.”

- Build replacement residential care homes for Nightingale Lodge and Cranleigh Paddock before closing them (total=4; CP=2; NL=2).

Build the Cranleigh Paddock replacement at Stocklands (one person).

“Design and build a new Cranleigh Paddock on an available site, such as Stocklands at Totton. This would be done over the next few years, whilst the first three blocks of Extra Care assisted living apartments were being built on the other sites, enabling Cranleigh Paddock to continue in Lyndhurst for the time being. The entire enterprise – keeping the staff team intact- could be transferred to the new site, with its purpose built facilities to cater for this especially vulnerable and most needy group of elderly people long into the future. The Lyndhurst site might then be made available for the fourth and final phase of the Extra Care assisted living building programme. The key point is that none of the residents would leave the old Cranleigh Paddock until the new Cranleigh Paddock was available to receive them.”

“If Cranleigh Paddock is closed BEFORE an appropriate alternative is built, how on earth are those families with advanced dementia sufferers now, and those who will inevitable follow us, going to be able to cope?”

- Do not build Extra Care assisted living – there are already similar schemes available (total=3; BH=1; NL=2).

“There are at least 2 sites in Romsey that will be used for older people to live independently, but also have on site aid. Why has HCC got to go down the same road, not filling the gap that Nightingale Lodge fills? If you insist on closing and demolishing Nightingale Lodge, it should be replaced with another facility providing the same services. This will ensure there is at least one residential dementia care home to serve the people of Romsey and Hampshire.”

- Build Extra Care assisted living in a phased plan (one person).
- Ensure the residents are offered Extra Care assisted living accommodation, make it financially viable for them and put them in temporary or respite accommodation locally until it is ready (one organisation).
- Keep the homes open until the residents die or move on (total=3; D=2; NL=1).

“I think you could leave the home as it is and as residents die you don't take in any replacements and reduce staff accordingly, then when the last residents die the home is yours and everyone will be happy.” (D)

- Keep the homes open for the existing residents and upgrade them as and when the residents need it (one person)
- Keep residents at the homes until the contracts are signed/about to be signed (one person).
- Sell Bulmer House as a going concern to a private provider and let them refurbish it gradually (four people).

- Extra Care assisted living at Cranleigh Paddock must be a combined specialist dementia Extra Care assisted living facility similar to the one in Eastleigh (one organisation).
- Keep Deeside open until the Oakridge extension is finished (one person).

“The route from Deeside to Oakridge may prove an attractive one for many families but the Oakridge extension is not going to be finished until August 2014. It would therefore be sensible planning for the Deeside dementia care to be allowed to continue until August 2014, and in any event until the new facilities at Oakridge are available. Given that about half the Deeside residents are suffering from dementia, the overlap period would be very helpful in facilitating an easy transition for the residents.”

- Move the staff of Deeside with the residents to Oakridge, allowing a period where there is over staffing if necessary to help the residents with the transition (one person).
- Sell Romsey Register Office site on the open market (not in a private deal with Nightingale Surgery) and use the money to extend Nightingale Lodge. Buy other land for Extra Care assisted living housing.
- Keep Nightingale Lodge and build Extra Care assisted living on the Register Office site instead

Comments from residents and relatives on what support they would need to find and move to alternative accommodation

The comments people made in their letters and email included the following requests:

- That the Council should move the residents at a time that is convenient for the family and the resident – people should not be rushed (total=3; BH=2; D=1).
- A formal medical/social services assessment should take place to determine the resident’s future care needs and the next of kin should be invited to attend this (one person, BH).
- Help should be provided to help relatives identify a suitable home near or nearer to family (CP=2).
- Help to find a nursing home and information on how changes to this type of care will affect costs (one person, BH).
- Residents who are friends should be placed together so they are with someone they know (BH=2).
- Help to find a home of the same quality at a similar price (one person, BH).

- Find somewhere the resident likes, not just the first place where there is space (one person, CP).
- Advise on the suitability of specific homes. i.e. will they meet needs; will the Council pay for them? (total=2; BH=1; D=1).
- The homes need to be relocated if residents' needs are still to be met. Have trained staff and the right facilities in place before people move (one person, CP).
- Staff need to be trained specifically to handle the changes brought by the proposals (one person, CP).
- The Council should pay for private care of the family's choice, even if this is much more expensive (one person, CP).
- Support to find suitable alternative bookable respite care (total=2; BH=1; NL=1).

Four relatives of residents thanked the Council or specific staff for help they had given to date with regards to moving their relative to a different home.

"My mother certainly does seem to have settled in very well and seems very happy in Fleming House. All the staff are very friendly and caring as they were in Nightingale and all seem to get on well with my mother. Thank you for your help in the very smooth transition from Nightingale to Fleming House."

What people told us: summary of feedback received from meetings with relatives/interested parties

During the consultation process, a number of relatives/stakeholders requested a meeting with the Executive Member and senior Adult Services officers. Key themes from these meetings are set out below.

Impact on residents

Relatives wanted to be reassured that if homes closed, the residents (and their families) would be given choice about where to move to; that friends would be able to stay together; and that a home would not be closed until all the residents had found suitable alternative accommodation. One relative raised the phenomenon of 'Relocation Stress Syndrome' and several people expressed concern that moving residents, particularly those with dementia, could lead to a decline in their health and increase death rates. One stakeholder expressed the view that the consultation was about money and felt that local authorities needed to stand up to central Government and ask for more money. It was felt that HCC was a wealthy council so should look at other alternatives to closure.

Dementia

Concern was raised in a number of meetings about how HCC would respond to the increasing number of people suffering with dementia and how needs would be met if facilities were being closed. Cranleigh Paddock was highlighted as being the only specialist dementia care unit in the New Forest, and demand for this type of service is only going to increase. People said more care should be being planned for people with dementia, not less. Relatives praised the quality of care at Cranleigh Paddock feeling that it was a flagship service for people with dementia that needed to be maintained. Concern was raised as to the suitability of alternative options (such as Forest Court) for Cranleigh Paddock residents.

The issue of en suite facilities was raised, with several people expressing the view that en suite rooms were not necessary in homes for people with dementia, and they could be detrimental.

Care arrangements in Extra Care assisted living

The issue of staffing ratios and the size of care packages in Extra Care assisted living was raised a number of times, with a view that residents might not receive sufficient care and contact time. There was also a view that it would not be fair for existing residents in Extra Care assisted living settings to share their communal facilities with people who had dementia.

Alternative options

There was a view that Extra Care assisted living can be very good, but Extra Care assisted living should not be developed at the expense of existing residential facilities. It was stressed that Hampshire needs both residential care provision and Extra Care assisted living. A request was made for evidence (costings and plans) to be made available to support the assertion that it would be too costly to refurbish the four residential homes. One relative had heard that a potential buyer had come forward who was interested in purchasing the Bulmer House site and wanted to know if this option would be considered after the consultation period. It was also felt that HCC had invested in refurbishing some of its homes recently (e.g. Westholme) so why could this policy not be applied to other homes. Would it not be possible, for example, to build some Extra Care assisted living accommodation on the current Nightingale Lodge site, and refurbish the residential home?

Another suggestion was that a new, flagship, advanced dementia care unit could be built on the vacant site at Stocklands in Calmore, and the staff and residents of Cranleigh Paddock could be moved there together, freeing up the Cranleigh Paddock site for Extra Care assisted living development. There was a feeling that it was only being proposed that Cranleigh Paddock should be closed because HCC wanted the land for Extra Care assisted living. It was also suggested that new Extra Care assisted living facilities could be phased, so that Cranleigh

Paddock was the last site to be rebuilt as Extra Care assisted living, allowing time for an alternative Cranleigh Paddock site for dementia care to be built.

Staff in the homes

One stakeholder raised the issue of the treatment of staff members in the homes, saying staff had been sent a pre-redundancy letter which informed them of the implications of the potential closures.

The consultation process

The view was expressed that HCC could have publicised the consultation proposals more widely, as it appeared that the detailed information was predominantly sent to residents and relatives. One stakeholder felt that town councils should have been informed about the consultation. One relative expressed concern that HCC would not make a balanced decision about the closures because its strategic direction was to invest in Extra Care assisted living. Several people expressed the view that the closures were a foregone conclusion, that their views were being ignored and that HCC was not listening to them.

There were also queries about how the consultation would be analysed; how petitions would be taken into account; what criteria would be used to make the decision; and whether the decision could be taken by the whole Cabinet rather than one Executive Member. The Executive Member was asked whether she had any conflict of interest that could affect her decision making.

What people told us: summary of discussions at public meetings

Petersfield Town Council public meeting, 30 September 2013

The following were the key themes raised during the meeting, which focused on Bulmer House.

The consultation process

There was concern that some people were being moved before a decision has been made and that closure was a foregone conclusion.

Concerns about Extra Care assisted living

There was scepticism about the concept of Extra Care assisted living, particularly for the current residents of Bulmer House. Extra Care assisted living was felt to be unsuitable for people who needed 24-hour care, with particular concerns about whether there would be sufficient care allocated to each individual, and

whether residents living in their own accommodation within the scheme would be sufficiently monitored.

Implications of the closure for residents

A range of concerns were highlighted, including: where residents would be placed if closure went ahead; whether friends would be able to stay together; how easy it would be for relatives and friends to visit, depending on the new location and whether it was accessible by public transport; that residents' needs were not being put first; and the impact of moving people at this vulnerable stage, including concern over death rates of elderly people when care homes are closed.

Dementia

Questions were raised about how people with dementia would be catered for under the proposed Extra Care assisted living scheme. There was a feeling that the prevalence of dementia was increasing and there would be insufficient provision for dementia sufferers if Bulmer House were to close.

On-going need for residential care

In general, it was felt that people are very well cared for at Bulmer House, in a warm, pleasant environment. It was acknowledged that the facilities do not always cope with the needs of today's residents, but it was felt that it could be refurbished with little disruption. Considerable concern was expressed about the loss of facilities in Petersfield, and although it was acknowledged that there could be a need for Extra Care assisted living, people felt that, equally, there was still a need for a residential care facility in the town. It was suggested that the two types of care could both be provided on the existing site.

Plans for the Bulmer House site

Concern was raised that if the Bulmer House site was released for Extra Care assisted living to be developed, there was no guarantee the development would take place (as it would be built by a third party). Also, there was concern that another site might not be found in Petersfield, should a residential home be needed in the future.

Community Forum (Petersfield, Liss and Surrounding Villages), 9 October 2013

The following were the key themes raised during the meeting, which focused on Bulmer House.

Dementia

Concern was raised that Extra Care assisted living facilities would not provide sufficient supervision to meet the needs of people with moderate to severe dementia.

Impartiality

A concern was raised that the Executive Member making the decision about the proposed home closures might have a conflict of interest, due to her husband's business interests.

Impact of the closure on residents

It was felt that residents' health could decline if they were forced to move out of Bulmer House. People said it is their home and they should not be moved for the sake of providing Extra Care assisted living. One relative felt that Bulmer House was a bright and cheerful place, and was being unduly negatively portrayed in the consultation.

Loss of facilities in the area

Concern was expressed that vulnerable people were being moved out of Petersfield, with the closure of local facilities. It was felt that there is a need to keep local facilities open in the town.

Availability and affordability of alternative accommodation

A question was raised as to whether other local residential homes or Extra Care assisted living schemes had capacity to take additional residents if Bulmer House were to close, and whether the costs would be affordable.

Potential for providing a joint facility

HCC was requested to look at the potential for developing a joint residential/Extra Care assisted living facility on the Bulmer House site, to meet both types of care need. It was felt that Petersfield could benefit from the provision of some Extra Care assisted living.

Lyndhurst Community Centre Public Meeting, 10 October 2013

The following were the key themes raised during the meeting, which focused on Cranleigh Paddock.

Consultation process

Several people expressed the view that this public meeting was not advertised widely enough. A question was asked about why only one councillor, the Executive Member, would make the decision about the closure, rather than a wider group.

Impact on residents

Concerns were raised as to where residents with severe dementia would go if Cranleigh Paddock were to close and they did not want to go to Forest Court nursing home. There was also a fear that the residents' mortality rate would rise if they were moved and a question as to whether HCC has risk assessed for this.

It was reported that residents did not want to move and want to remain at Cranleigh Paddock for the rest of their lives. People felt that the proposed closure was motivated by money and wanting to use the site for Extra Care assisted living, and was not about people. A question was asked as to whether the home was being run down and whether people were still being admitted.

Feedback on Forest Court

Several relatives were concerned that if Cranleigh Paddock residents were moved to Forest Court, where the dementia accommodation was to be on the first floor, they would not be able to access a garden as easily as they can now.

Dementia

Several people expressed the view that Extra Care assisted living would not be suitable for people with dementia, although it was recognised that it can be a very good care option for some older people. They felt that the rooms and layout at Cranleigh Paddock suited dementia sufferers very well and they did not need en suite facilities. It was suggested that, as the home is compliant with Care Quality Commission regulations, it must be fit for purpose. Staff were praised for being very skilled in dementia care. There was a view that a new purpose-built dementia facility may be needed in the future, but people did not want Cranleigh Paddock to close before such a facility was available. It was felt that more dementia care provision would be needed in future, so it did not make sense to close a high-quality dementia facility now. People said other sites should be sought for Extra Care assisted living in the area.

Ridgeway Centre public meeting, 14 October 2013

The following were the key themes raised during the meeting, which focused on Deeside.

Extra Care assisted living

A range of concerns were raised about Extra Care assisted living, including whether it would provide suitable care for people who needed medication; whether staffing ratios would be adequate; and whether the flats were affordable. Several people did not feel that Extra Care assisted living was a suitable setting for people with dementia, and one person commented that the larger size of Extra Care assisted living developments made them feel more institutional. The issue of community was raised and a concern about moving people out of their community.

Planning for the future

One person questioned the logic in closing homes and said that HCC would regret it in 20 years' time. There was concern that the closures were motivated by money, not about making improvements to people's surroundings and care. It

was felt that central Government should be asked to provide sufficient resources, since people paid taxes. One person felt that Deeside had not been maintained for years, but that it would not be difficult to upgrade the existing facilities. A query was raised as to whether a full cost/benefit analysis had been done, and a request was made for the evidence that demand for residential care was falling. The estimated £2.5m cost for upgrading Deeside was also queried. One person asked what would happen to the Deeside site if it had to close. They wanted reassurance that redevelopment would happen quickly.

Impact on residents

Concern was raised that moving people out of Deeside would lead to an increase in the mortality rate for residents, and reference was made to data about death rates following previous home closures elsewhere. One person said it was wrong to move people; they should be able to live their life out at Deeside. Concern was raised that some people are already looking at alternative placements before a decision has been made. The issue about en suite bathrooms was raised, with a view expressed that people in Deeside did not need their own facilities.

Impact on staff

An issue was raised about whether staff would have a job if Deeside closed, and if they could be TUPE transferred to work in an Extra Care assisted living scheme.

Feedback about Deeside

People attending the meeting were very positive about Deeside – the staff, the building and the care provided. They were not in favour of closing Deeside (one person suggested continuing to provide it and extend it) and felt it was a good care setting for the current residents.

Decision-making process

One person asked whether the Executive Member deciding on the home closures would have a conflict of interest because of her husband's business. HCC was asked to confirm that it would pay due attention to the Deeside petition and consultation responses.

Conclusion

Whilst there was a small amount of support for the proposals and some support for investment in Extra Care assisted living in principle, the overwhelming majority of consultation responses were against the proposals, with people mainly objecting because they thought the four residential care homes, or one of the homes in particular, should not be closed.

Appendix A Questionnaire

Residential care for older people in Hampshire

Public Consultation

29 July – 18 October 2013

This information, the questionnaire and report can be requested in alternative formats such as large print and Braille by e-mailing:

E-mail: adultservices.communications@hants.gov.uk

or by calling:

Tel: 0845 603 5630.

For residents and next of kin



Hampshire
County Council

www.hants.gov.uk

Introduction

Hampshire County Council wants to provide excellent services for older people. The number of older people living in Hampshire is increasing and we are planning for this now, by looking at new ways of providing care and support which will help people to remain as independent as possible, for as long as possible.

In order to meet the challenges of an ageing population it is vital that services for older people are sustainable, cost effective and offer people choice and control. Recent research shows that the majority of older people would rather stay in a home of their own than move into traditional residential care if at all possible. It also shows that as people strive to live independently, the decision to move into residential care is now often taken at a later stage in life when their care needs are higher than a traditional residential home is designed to support.

There are limited funds available. We need to invest in services that meet people's expectations of what care should look like, such as Extra Care assisted living. At the same time, we are faced with the issue that many of the County Council's residential homes that were built in the 1960s/1970s require large-scale improvement and modernisation to bring them up to modern standards. Significant investment would be required to help increase bedroom size and install modern facilities. The number of bedrooms would have to decrease as a result, and this would significantly increase the cost of running the homes.

We are therefore proposing to close four older style residential homes and to invest in the development of Extra Care assisted living in those areas.

Extra Care assisted living helps vulnerable people by bringing together housing, care and support in a home of their own. This enables people to maintain their independence for as long as possible. Within Extra Care assisted living developments, care is available 24 hours a day, seven days a week, providing for a wide range of clients with varying care needs including dementia and physical frailty. Extra Care assisted living also enables couples, whose needs may be very different, to stay together, and is a sustainable way to provide care and support.

Research shows benefits to residents who have moved into Extra Care assisted living developments in relation to health, social life, confidence and general wellbeing.

For more information on Extra Care assisted living visit: www.hants.gov.uk/extra-care.

We would not close any residential home without extensive consultation with residents, their families and carers. We would undertake careful planning with residents and their families looking at individual care needs, but also at overall wellbeing and what is important to them, including friendships and relationship groups, and proximity to families/carers.

Consultation

This County Council is seeking views on the proposed closure of the following four residential homes for older people, so that it can instead invest in Extra Care assisted living houses on these sites or nearby in the local area:

- **Bulmer House** in Petersfield
- **Cranleigh Paddock** in Lyndhurst
(including the older people's day centre)
- **Deeside** in Basingstoke
- **Nightingale Lodge** in Romsey.

The questionnaire is divided into three sections:

Section 1 – The proposed home closures

Section 2 - Future care options for older people in Hampshire

Section 3 – About You

Responding to the consultation is entirely voluntary. If you would like to respond, you will find further useful information on the dedicated webpage:

www.hants.gov.uk/residential-care-consultation.htm

This includes the report the Executive Member for Adult Social Care will consider, a Q&A, and more information on Extra Care assisted living. Alternatively you can request a printed copy of the report by e-mailing:

E-mail: adultservices.communications@hants.gov.uk

or by calling:

Tel: 0845 603 5630.

Please omit any questions you feel are irrelevant to you. The questionnaire takes approximately 20 minutes to complete.

All responses to the consultation will be treated as confidential. This means that when the results are reported we may quote what you have told us but you will not be identifiable. The responses will be kept securely for one year and then destroyed.

The consultation results, and analysis of the findings, will be published and presented to the Executive Member for Adult Social Care, Cllr Anna McNair-Scott on 28 November 2013, along with a final recommendation on the future of the homes.

Please post your completed questionnaire to reach us by **18 October 2013** to:

The Future of Older People's Residential Care Consultation
Adult Services Freepost SO2077
Winchester
SO23 8BR

using the **FREEPOST** envelope provided (you do not need to use a stamp).

Section 1

The proposed home closures

1. The County Council is proposing to close four residential homes - Bulmer House, Cranleigh Paddock (including the older people's day centre), Deeside and Nightingale Lodge - so that it can instead invest in Extra Care assisted living on these sites (Cranleigh, Bulmer and Nightingale) or nearby in the local area (Deeside).

How would you describe your attitude to this proposal?

Please tick one box

- Strongly in favour.....
- In favour.....
- Neither in favour nor against...
- Against.....
- Strongly against.....
- Not sure.....

If you would like to give the reasons for your answer choice, please do so below.

2. If there are any other alternative options that you think the Council should consider in relation to the four homes and four proposed Extra Care assisted living developments, please give details below.

3. Do you have a connection with...? Please tick all that apply

- Bulmer House, Petersfield
- Cranleigh Paddock, Lyndhurst
- Deeside, Basingstoke.....
- Nightingale Lodge, Romsey.....
- None of them.....

Questions continue on the next page.....

4. Which of the following best describes your connection?

- I live in the home.....
- I am a family member/carer of a resident.....
- I attend the day centre at Cranleigh Paddock.....
- I am a family member/carer of someone who attends the day centre at Cranleigh Paddock.....
- I am a member of the local community.....
- I am a member of a local voluntary/community group.
- Other, *please specify in the box below*.....

5. If the Council decides to close your home, what support or practical assistance would you like to help you find and move to alternative accommodation? *Please write in the box below*

Section 2

Future care options for older people in Hampshire

We would like to ask you some questions about your views on Extra Care assisted living, and other care options:

6. Before this consultation, had you heard of Extra Care assisted living?

Please tick one box

- Yes

- No

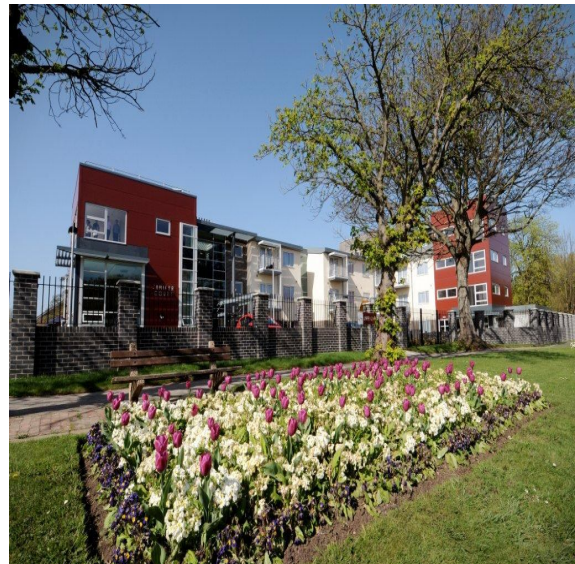
- Not sure ..

Extra Care assisted living helps vulnerable people by bringing together housing, care and support in a home of their own. This enables people to maintain their independence for as long as possible. Within Extra Care assisted living developments, care is available 24 hours a day, seven days a week, providing for a wide range of clients with varying care needs including dementia and physical frailty. Extra Care assisted living also enables couples, whose needs may be very different, to stay together, and is a sustainable way to provide care and support.

Research shows benefits to residents who have moved into Extra Care assisted living developments in relation to health, social life, confidence and general wellbeing.

For more information on Extra Care assisted living visit:

www.hants.gov.uk/extra-care.



Examples of Extra Care assisted living in Hampshire

7. To meet the future needs of older people in Hampshire, are you in favour of spending more on the development of Extra Care assisted living, and less on traditional residential care homes? Please tick one box

- I am in favour.....
- I am in favour, but do not want these four homes to close
- I am neither in favour nor against
- I am against.....
- Not sure

8. In your opinion, what services should the Council invest in to help older people to continue to live independently in a home of their own? Please tick all that apply.

Home care services.....
This includes a wide range of services such as domestic help, shopping, and help during the night

Extra Care assisted living

Intermediate care
This is a collection of services aimed at helping people stay in their own home, or care home instead of going into hospital, or that help people get home after a hospital stay. They are provided by teams of professionals that may include nurses, occupational therapists, care assistants and others.

New technology such as Telecare
Telecare devices include sensors to help people remain independent in their own homes, minimising risks and giving peace of mind for their families and friends. They range from devices mainly focused on preventing problems - such as a fall or forgetting to take medication - to intervention monitors that check sleep and activity.

Aids and adaptations.....
These help people to remain independent and mobile in their own homes.

Homeshare
Matches elderly and vulnerable people with younger people who are willing to offer them help in exchange for cheap accommodation in the older person's home.

Other – *please specify in the box below*.....

9. Do you have any other comments, suggestions or feedback?

Please write in the box below

Questions continue on the next page.....

Section 3

About you

The information you provide here is voluntary and confidential. You do not have to fill in this section if you do not want to. If you complete this section you will be agreeing to us holding this information but using it for monitoring purposes only. Please tick the boxes that apply to you.

1 Are you...? Please tick one box

- Male.....
- Female.....
- I prefer not to say.

2 Please indicate your age range. Please tick one box

- 18 – 34.....
- 35 – 49.....
- 50 – 64.....
- 65 – 79.....
- 80 or over.....
- I prefer not to say.

3 What is your ethnic group? Please tick one option that best describes your ethnic group or background

- I prefer not to say.....

White

- English / Welsh / Scottish / Northern Irish / British

- Irish.....

- Gypsy or Irish Traveller

- Any other White background, please describe:.....

Mixed / Multiple ethnic groups

- White and Black Caribbean.....

- White and Black African.....

- White and Asian

- Any other Mixed / Multiple ethnic background, please describe:.....

Asian / Asian British

- Indian

- Pakistani

- Bangladeshi

- Chinese

- Any other Asian background, please describe:

Black / African / Caribbean / Black British

- African

- Caribbean

- Any other Black / African / Caribbean background, please describe:

Other ethnic group

- Arab

- Any other ethnic group, please describe:.....

4 Please tick one box to indicate which district of Hampshire you live in.

- Basingstoke & Deane..
- East Hampshire.....
- Eastleigh.....
- Fareham.....
- Gosport.....
- Hart.....
- Havant.....
- New Forest.....
- Rushmoor.....
- Test Valley.....
- Winchester

- Not sure.....
- I do not live in a district of Hampshire...
- I prefer not to say.....

Thank you for completing this questionnaire.

Appendix B Cranleigh Paddock standard letter

Cllr Anna McNair Scott
Executive Member for Adult Social Care
Hampshire County Council
Winchester

anna.mcnairstcott@hants.gov.uk

Reference: The possible closure of Cranleigh Paddock, Lyndhurst

Dear Councillor

I wish to register my objection to the possible closure of Cranleigh Paddock in Lyndhurst.

Cranleigh Paddock is run by Hampshire County Council and accommodates up to 30 older people who have support needs associated with old age or dementia. For the past 6 years, Cranleigh Paddock has become a specialist Dementia Unit; caring for adults over 65, and providing a safe and caring environment for vulnerable dementia patients. In a recent inspection (November 2012), Cranleigh Paddock met all of the standards required by the Care Quality Commission (CQC). The inspector also remarked that it was a shame there were not more residential units like Cranleigh Paddock, as it was very homely. The only other specialist dementia unit is in Havant.

Cranleigh Paddock's residents and their families come from the Totton, Waterside and New Forest areas. The unit provides easy access to the families of the residents. I feel that it would be grossly unfair to residents, relatives and staff, to close Cranleigh Paddock; particularly in light of its specialist dementia status, consistently meeting standards and providing a safe, caring and happy environment for residents.

If the proposal to close Cranleigh Paddock goes ahead, it will mean that 30 elderly residents with dementia will be sent to other homes. These other homes will not be familiar to those residents nor will they be near to the relatives. The proposal would mean that Cranleigh Paddock, along with the independent living accommodation, would be demolished and replaced with a block of 50 Extra Care units. These units would not be suitable for dementia patients, nor would they be managed and owned by Hampshire County Council.

Name:

Address:

Signature:

Appendix C Deeside standard letter

Dear Cllr McNair Scott,

I am writing to object to the proposed closure of the Deeside Care Home in Buckskin. I understand that you are conducting a consultation on the planned closure of this home and I want to object strongly to this planned closure.

Such care homes are much needed in our community. The idea that an extra care scheme is appropriate for many people in Deeside is mistaken, and that nursing care is appropriate for many is also mistaken. Care homes like Deeside provide an important service for people who have needs, are vulnerable, and who cannot live independently for many reasons, but do not necessarily require full nursing care.

I want you to accept this letter as a response to your consultation, and I would like a reply to my objection to acknowledge that you have received it and read it.

Please do not close Deeside Care Home.

Yours Sincerely