



Woodside Lodge Consultation meeting
5th August 2014
18:30
Woodside Lodge, Southampton

Present:	Councillor Dave Shields, Cabinet Member for Adult Services Helen Woodland, Interim Head of Audit Services Jane Woodward, Service Manager Tracy Flint, Service Manager Michelle Fellowes, Manager of Woodside Lodge Liz Palmer, Senior Practitioner Paul Juan, (Project Support) Izzie Clayton (Minute taker) Relatives of the residents
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ITEM		ACTION
Q1	<p>As discussed at the previous meeting there are 3 residential homes in Southampton, two on the other side of the city and one on this side. The reason stated for the considered closure for Woodside Lodge is that it has an 87% occupancy rate which means that this home had 3 empty beds. It was also stated that the quality and the standard of all the homes is on par and this one is not below standard. So why pick the one home that is on this side of the city to close? Why not leave one this side of the town and one other side?</p> <p>Is this decision being made because of the new housing estate opposite and the fact that the block of flats on the other side of this building, I believe, is being redeveloped and this site sits like an island in the middle of a little money making scheme? The City Council is in partnership with Barrett's so it stands to reason that this decision is being made because of the money?</p> <p>Reflecting on the relatives of the loved ones who visit people here, have you considered those people who are not able to travel across the city to visit their loved ones?</p> <p>You make valid points and I encourage you to put this in your</p>	

	<p>feedback. The only answer I can give you is that we based this decision on the lowest level of occupancy of 87% over a year which is lower than in our other homes. I promise you that is the only reason we have selected this home. On average at the moment we have 23 out of 27 beds in use. The number we have in occupancy fluctuates. We were not aware until today of the situation with the flats next door. This decision is not based on saleability of the site. I can't make you believe something I say, but it's not something that has come through Adult Services, and this is the first time I was aware of the land development.</p>	
<p>Q2</p>	<p>The questionnaire is poorly put together. It states that “it will mean that some residents will have to move from the home but they will be individually assessed to assure their needs are met in any new home”. You state that “some residents will have to move”. What’s going to happen to the ones that are not going to move out? So how can we believe that everything you say is right when you can’t get this statement correct? This process should be halted and everything put back correctly.</p> <p>I apologise for the phrasing in the document. You do not have to fill in the questionnaire, you can give your feedback anyway you like, by letter, or email and we will take all that on board.</p>	
<p>Q3</p>	<p>You say people are telling you that they do not want to consider residential care. Can I have a show of hands who will consider going into residential care - nobody. It’s a silly statement to make. You are trying to mislead us into your intentions. People who suffer with Dementia, their learning capabilities go down and they can't retain information. At the moment the staff here will see a resident approximately once every 20 minutes. Out in the community calls by carers are made four times, once every four hours, that is not going to be suitable for anybody with dementia because the minute they go out the door they could soil themselves. You have two duties of care towards the patient, security and dignity. Where is the dignity in leaving someone in soiled clothes for four hours? You also say you are going to consult with the residents about their opinions. They will not have a clue what you are talking about. A lot of the process you put forward to us is flawed. At least have the dignity to say we</p>	

	<p>are closing Woodside.</p> <p>So, there are a lot of things there and I take the points onboard. I can't come to you and say we are going to close because we have not made that decision. We are a political organisation and there is a process that we have to follow which includes statutory consultation. Talking to residents and yourselves is something by law we have to follow. I can tell you that we want to put forward recommendations that reflect what you are telling us. The possible closure is not my decision to make, that is partly why Cllr Shields is here. In terms of types of care for people with dementia at the moment we offer residential care and we don't offer much else. What we need to do is explore a range of options to suit different needs. There will always be people who need some residential support and care especially at the high end of dementia. We also have a generation coming through with early dementia, so if we look at some of the research into people with dementia, and it is quite early, if they are moved into settings such as extra care, what we have proved, is that we don't have to make another move later in life which can be traumatic and that we can provide the level of support in one setting.</p>	
<p>Q4</p>	<p>Why do you need to move people who are so seriously ill who are in the last stages of their lives. Where is the care in society? You are going to move those people around when you have a beautiful place like this? There is money meant to be going into dementia, where is it?</p> <p>One of the issues they have is, when we are talking about budgets and money, I am working with the Adult Social Care Budget and I have a set amount of money for people who need care, all sorts of care. We know that more and more people need that care, all forms of care.</p>	
<p>Q5</p>	<p>Why did the Council spend money on a new carpet, furniture and a new conservatory if it was your intention to close this center?</p> <p>The proposal to talk about the future of Woodside only came about in July 2014. We have a duty, when we talked at the beginning of the meeting about the standards of the three care homes, to maintain those standards. We would not want your relatives to live somewhere that was not maintained while we were looking into the future and our future ongoing budgets.</p>	

<p>Q6</p>	<p>You asked for alternative proposals and there are a couple. Have you considered alternatives such as the private sector? Have you explored the larger care home companies or private individuals to take over Woodside as a going concern? The other option could be, because of the size of the grounds, to shut one of the east side homes and use the money saved to extend the Woodside site?</p> <p>If and when Woodside does close down, what will happen to this site when the home closes will it just lay dormant?</p> <p>I can't answer that. We have different issues when we budget and spend money, and if this place was to close we would save ongoing money, in particular relating to staffing costs. What I am saying is, that in terms of selling the building and capital raised, that money would go into what the council refers to as Capital Budget. In other words the funds raised would go back into the capital pot, and potentially, we could request the money to build alternative sorts of care provision.</p> <p>One of the issues that we talked about before that we have explored is whether an individual could take on the running of this home, but here we have a challenge. The amount of money that we pay to staff and the other benefits that we offer would have to pass on and it would probably not be commercially viable. In terms of developing or converting it I would encourage you to feed that back.</p>	
<p>Q7</p>	<p>Let's make the assumption that Woodside is going to close in December 2014. We have a responsibility to re-house our loved ones. There will be no vacancies in good homes if we wait. How long in reality do we have to find somewhere? Do we have six months?</p> <p>We would never say this is where your loved ones are moving to. We would work with you to identify what your options are and which option suits your needs. If you would like to start looking at different options now, we can help you. You are not in this on your own. You will have a dedicated Care Worker, a social worker who will work with you to find the right placement. As of today there are 67 placements in the city. That number changes week to week. We were being genuine when we said we want to work with you to determine how long this process will take. The longest period that we want this matter to extend for is 6 months.</p>	
<p>Q8</p>	<p>What happens if we have not found somewhere within six</p>	

	<p>months? You won't keep this place open indefinitely? You must have a target date for when you will lock the door? What would be nice for us, would be for you to come to and say to us, what the timescale is?</p> <p>I don't have a time frame.</p>	
Q9	<p>Last time the council closed a home you moved some of the residents to Bournemouth and I don't want that to happen.</p> <p>I am sorry but that was not the case. I don't want to dispute the matter but I can tell you that did not happen, nobody has been moved out of the city, unless of course the family members lived outside the city</p>	
Q10	<p>I wish you would just come and be honest with us, you know full well there is hardly a chance of this closure being overturned. You have already made a decision haven't you?</p> <p>The intention is to find the best of outcomes for the people we have responsibility for. We have a legal obligation to listen to your views.</p> <p>Cllr Shields - I would not be here listening to you and asking for ideas if a decision had already been made. The intention is for the best outcome for the people we have responsibility for. I would like to pick up on some ideas and there are some things I would like our offices to explore. I also have a lot of sympathy with the dangling uncertainty because of the process we have to go through. I can't say anything about what is actually going to happen, we need to complete this consultation and look at the options. I would like to note that I would not have allowed this consultation to go ahead, if the ambition was for this site was for it to be used for housing, I want to reassure you on that. As to your ideas about closing one of the homes on the other side of the city, please remember that the people concerned at the other homes would have similar views to yours.</p>	
Q11	<p>Southampton City Council seems more interested in spending money on things like the University Halls of Residents and outside the city. If this home closes when will the other homes come into the firing line? The Council needs to be upfront and honest about their plans and how they are treating elderly residents.</p>	

	<p>Dementia sufferers will only get worse they will never get better and while it is laudable that you are suggesting that we have sheltered housing schemes for early dementia which may delay the next stage dementia, that next stage will happen. There is a duty of care for those people who are not financially able to provide for those needs. Yet you say that demand for residential care is going down, while number of places is going up, this argument does not seem to square.</p> <p>To be clear, the demand for residential care, such as this, is going down but you are quite right we are always going to need nursing care, in fact we need more. None of our homes are registered to provide nursing care. So the number of placements that we need for nursing care are increasing. We need to be able to offer a range of care.</p>	
<p>Q12</p>	<p>Why not turn one of the three homes into a nursing home?</p> <p>We are not allowed to do that. A local authority is not allowed to provide nursing care.</p>	
<p>Q13</p>	<p>Numbers are dropping at the moment so we will compact our services. We have an ageing population so numbers are going to go up. You are looking at the very short term what do you do when the numbers go up?</p> <p>If people stay in that community setting a little bit longer they might only need to make one move. You might have a situation where people might make one move into nursing care that will provide them with all their care needs for the remainder of their years.</p>	
<p>Q14</p>	<p>What happens at Manston Court for people with early dementia?</p> <p>The strength of this place is that there is night care. There is a rota of carers going in so the people are by themselves for a little bit and carers are on site. So it's not like people in their own home waiting for a carer to come across the city. What it allows us to do is manage the increasing needs so if someone is at the start of dementia we can provide for that. Meals are provided but they are microwave meals. My grandma lives in an extra care housing facility, it has on site a care provider and as her needs fluctuate so they increase the number of visits or decrease the number of visits. They also have very nice onsite restaurant, now that restaurant will provide meals or she has a kitchen. We need to look at providing more progressive models of care.</p>	

<p>Q15</p>	<p>I can totally see where you are coming from, I know there is a need for a variety of care. My concern is if the council are going to withdraw that type of care package for people, in order to provide care for perhaps more people in the early stages. My concern is whether there is enough quality provision provided by the private sector and also linked into the ideas of this wider residential community care. Is the council going to provide for respite care?</p> <p>Yes to all of those. We do provide respite care here and in Brownhill House and we also provide it in our other homes. We want to look at flexible models of respite or may be in a home setting for an individual. Private Service also provides respite care.</p> <p>There are a number of different options for respite care. They are all governed by the same guidelines. We need to ensure everyone keeps to the same standards.</p>	
<p>Q16</p>	<p>You said there were 67 places in Southampton, but are those for people with similar sorts of dementia?</p> <p>14% of those places available at the moment deal with more advanced levels of dementia. The majority deal with similar levels of dementia as here, and some with deal with much lower levels.</p>	
<p>Q17</p>	<p>Going back to Social Care and Manston Court, do you have the figures for the numbers of married persons? You do need to have those sorts of figures, of how many people are married?</p> <p>I will look into the numbers of married couples. One of the benefits is where we have people that are married that actually if we get them situated in an extra residential care home we can maintain those relationships. We want to be able to offer this option. We will still have residential care but it will not all be provided by the council.</p>	<p>HW</p>
<p>Q18</p>	<p>Cllr Shields - You made a criticism about the way we plan. I do think with all the pressure of an ageing society with more people suffering with dementia we need to put a plan in place that is based around housing care. We will discuss this matter. We could use this consultation process so that you start to see what the plans are.</p> <p>I would like to make a point about how much money we spend,</p>	

	<p>I don't want to get in a political discussion but I recognise that there is a place where we should have those sorts of matters discussed. At the end of the day we have to work with the resources that the Government gives us.</p>	
<p>Q19</p>	<p>Whatever you decide, you are going to do, you will not listen to us. You have to look at keeping people in their homes for as long as possible. We had carers 4 times a day, the times were erratic and the care was abysmal.</p> <p>I recognise everything you are saying and one of the things we are doing at the moment is going through an exercise with all of the home care providers to re-contract with these people who provide care, to deliver it in the way that we want them to.</p>	
<p>Q20</p>	<p>Ghandi once said – “you can judge a society by the way it treats its animals”.</p> <p>It's shameful for the council to even consider this. There was a time when this would not have been considered. These are vulnerable people and it seems criminal that the weakest in society at being crucified for the sake of money. When you consider the money that is wasted in the council with things like the open air theatre at the Guildhall.</p> <p>Can't we go to cabinet and say Woodside Lodge is a success, may we keep it open?</p> <p>It's absolutely an option. What we need to go back with in December is a representation of how you feel, and of your ideas and of the points you want to put forward. All of the points that you have made are perfectly valid so I am, as an officer of the council, apolitical in this sense, my personal views do not matter. That being said, I honestly do not believe this a done deal. My job is to look forward 5 to 10 years into the future.</p>	
<p>Q21</p>	<p>Have the council spent time here at the home and seen what service of care is provided?</p> <p>It's difficult to answer that, some have, Cllr Shields is here and will be coming to all the meetings. Cllr Shields is the member in charge of the health services. Others have had less involvement, but Cllr Shields has had previous involvement in care homes.</p>	

<p>Q22</p>	<p>We have not swayed your opinion - you haven't changed your mind irrespective of looking at the long term. They are going to come to you and your budget will be more important.</p> <p>It's not my decision. I would like to make a recommendation for all the reasons that we have discussed. I think that you are making really good points in that you are looking at this matter from the point of view of your loved ones in the home.</p>	
<p>Q23</p>	<p>The people in these homes at the moment are collateral damage. The thing that worries me is that 20 years down the line I want to make sure this centre of excellence is still here. This place is always clean and never smells like an institution. You need to go and look at some of the options that you expect us to put our loved ones into!</p> <p>Quality in the private sector, it's not about how some where looks. We all worry about accountability with private homes, all we can really do is take our parents out if we are not happy.</p> <p>We retain the accountability even if we place people in a private home. We have an entire unit that inspects them.</p>	
<p>Q24</p>	<p>After this consultation is finished and the majority of relatives have provided feedback to you is there a possibility that you would recommend to Cabinet to leave Woodside alone?</p> <p>There is always that possibility. It's not my recommendation, it's a matter for the Director. It maybe that throughout the course the consultant there is a brilliant idea that we have not thought of.</p>	
<p>Q25</p>	<p>Is there anything that the relatives can do to help you come to the decision to keep the home open?</p> <p>What you done is to show how very passionate you feel about this matter. I think in terms in what we recommend at the end of the consultation, we shall need to take into account both the passionate support for the home, and how we would then be able to provide different levels of care in the future.</p>	
<p>Q26</p>	<p>I believe your boss is of the same view as you, so if you are both saying we recommend that this place should be closed down, what is the point of us fighting you?</p>	

	I think we need to put forward some good points for having a home on this side of the city, this is a good arguing point. I am genuinely encouraging you to put your views forward. As I have said this matter is not my decision.	
Q27	<p>Conclusion is that you haven't been swayed to change your opinion?</p> <p>My challenge is that I have to look at the types of care required going forward in the future and within the budget available. It's about different types of care being more important. We can't afford everything.</p> <p>I accept that we are still going to need nursing and some residential. If I look at all of the research done it around the people who go into residential care die within 18 months against those who are supported in other ways who live longer. We will always need nursing care but nursing and residential are different levels of support. Your relatives are in residential care not nursing. It is possible when we review people here we will look at moving them towards nursing care.</p>	
Q28	Please fill in the consultation document. We want your views - this is your opportunity to have your say, whatever you want to let us know.	
Q29	Date of next meeting 21st August 2014	
	<p><u>Administrative Notes</u></p> <p>Owner Author: Paul Juan Taken and Typed by: Izzie Clayton Retention period: 3 years from date of this meeting</p>	