



IJB 17 December 2020  
Item: 7.1.1  
Purpose: For Information



## Fairness Assessment

### Section 1 - Overview

#### 1. Is this a new strategy?

Yes. Until recently, we had envisaged longer-term reform of the care units, as part of a wider capital development programme to renew the residential estate for older people in Lewis.

#### 2. Does it align policy objectives?

Yes. Our ambition is to support people for as long as possible in their own homes; and to ensure that those with more complex needs can be supported in a high quality residential setting. Demand for the Care Units has dropped away over recent years, as the homecare service became more adept at supporting people with complex needs at home.

#### 3. Please list which protected population groups are likely to be affected by this project and how they will be affected

Who?	How?
Older people	The reforms raise key issues in respect of service access, due to the distance some people may have to travel to access residential care
Disabled people	



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#### 4. How have we involved these groups in the project?

In developing the proposal, we have sought wide-ranging input from the local community. The prospect of care unit redesign has been discussed at both the Stornoway and Rural Lewis Locality Planning Groups. Four public meetings have taken place: two in Point, one in Uig and one in Carloway (covering the specific localities in which the care units are situated).

The IJB website has hosted a public consultation on the matter, which ran from 21<sup>st</sup> February 2019 until 20<sup>th</sup> March. The consultation was heavily publicised in local communities and through the local media. The consultation paper asks for feedback on four options:

- a) Status Quo. Keep the Care Units as they are
- b) Develop one of the Care Units into a respite care facility to support unpaid carers and take the remaining resource as a saving
- c) Redevelop one of the Care Units into a respite care facility to support unpaid carers and split the remaining resource between savings and investment in homecare (the IJB's preferred option).
- d) Another option not described above

The views of services users have been addressed separately, through intensive work by social work.

#### 5. Is additional information or evidence required?

No further evidence is required.



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## **Section 2. Consultation Findings**

### **CONSULTATION FINDINGS**

1. The consultation ran from 21st February 2019 until 26th April. Three public meetings were also held, as follows:
  - Monday 4<sup>th</sup> March, 7.30-9.30pm, Point
  - Monday 18<sup>th</sup> March, 7.00-9.00pm, Uig
  - Tuesday 19<sup>th</sup> March, 7.30-9.30pm, Carloway
  
2. The public meetings were well-attended, with 21, 70 and 45 members of the public attending the meetings in Garrabost, Crowlista and Carloway, respectively. The Chief Officer presented the case for change alongside the Head of Partnership Services. Participants were offered the opportunity to decide on how they wished to air their views and opted for an open group meeting. Notes were taken at all meetings. The main sentiments expressed at the public meetings were as follows:
  - Support for the retention of the care units, in one form or another;
  - A willingness from attendees to explore alternative uses for the care units given the profile of demand;
  - An anxiety that the closure of the care units would further erode community services and contribute to the loss of population;
  - A scepticism about a reduction in demand given wider levels of need in the community;
  - An indication that more imaginative solutions were available, and a request for the IJB to work with communities.
  
3. In respect of the wider consultation, a total of 68 written responses to the consultation were received. Of those:
  - 28 respondents argued in favour of the status quo (41%) (Option A)
  - 8 respondents argued in favour redeveloping a care unit into a respite care facility (13%) (Option B)
  - 24 respondents argued in favour of redeveloping a care unit into a respite care facility and investing further in homecare (35%) (Option C)
  - 8 respondents preferred another option not specified in the consultation document (13%) (Option D)



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- Of those who outlined alternative suggestions, some favoured a mixed model of care and respite care; some suggested the units be used as intermediate care beds to support reablement and discharge from hospital; and some suggested development into nursing care
- If a care unit were not required by the IJB, some respondents suggested they should be used as social housing; others suggested early years' childcare.
- Respondents, not surprisingly, favoured the retention of the care unit in their own neighbourhood. The arguments in favour of each units were typically articulated as follows:
  - Carloway has advantages as a hub, with GP practice and day care within the vicinity;
  - Garrabost has advantages in serving a larger population, with effective links to Stornoway;
  - Crowlista plays a crucial role as a lifeline service for people in a very remote community and makes a contribution to the local economy.
- The majority of respondents highlighted the importance of being able to support older people in their natural communities.





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## 2. Inequality

Impact	Affected Populations
<p><b>Positive</b>            The IJB's preferred option (to develop one of the care units into respite care and augment homecare capacity) would result in unpaid carers having better access to public services and support. Carers are, on average, materially worse off than the more general population.</p>	<p>Materially disadvantaged</p>
<p><b>Negative</b>            The main negative impact is in relation to service access because the remaining residential care services are based in Stornoway, requiring people with relatives in these care homes to travel further to visit. This may be more challenging for materially disadvantaged families.</p>	<p>Materially disadvantaged</p>

## 3. Environment, Economic and Community

Impact	Affected Populations
<p><b>Positive</b>            There will be a reduced carbon footprint from the assets as a result of closing two of the three units.</p> <p>The carers' community (a community of interest) will be better supported as a result.</p>	<p>Wider community</p>
<p><b>Negative</b>            There will be an increased carbon footprint from a greater number of journeys from the western extremities of the island to Stornoway.</p>	<p>Wider community</p>
<p>The economic impact will be felt in the local communities whose care unit was a contributor to local economic activity (e.g. community shops).</p>	<p>Wider community</p>



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Since the community has expressed its support for a three site service, the move to a single site could damage community relations

Wider community

## **Section 4. Mitigation**

**It is recommended that the following actions are taken to mitigate any disadvantage from the proposals:**

1. It is recommended that the preferred option of the IJB be reconsidered in view of feedback from the community.
2. In order to address the specific vulnerabilities within the geographically isolated community of Uig, it is recommended that the IJB commit to a process of coproduction, with the designation of appropriate resources, to work with the community on a solution to the care needs in Uig as a whole (and not restricted to the use of the care unit).
3. Given the significant support expressed from within the Carloway community in favour of the delivery of additional respite care, additional work should now be undertaken with the community, including input from regulatory bodies such as the Care Inspectorate, to explore this option, not restricting development to the use of the Care Unit.
4. In order to address any loss of service in Point, it will be important that there is a corresponding increase in the availability of homecare. The proposed facility at Goathill will provide geographically proximate alternatives to shared accommodation within a higher quality environment which better respects individuals' autonomy and privacy.

**Ron Culley**  
**Chief Officer, Health and Social Care**  
**CÙRAM IS SLÀINTE**

January 2018