

# Public Document Pack

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8 November 2021

## Cabinet

A meeting of the Cabinet will be held at **10.30 am** on **Tuesday, 16 November 2021** at **County Hall, Chichester, PO19 1RQ**.

**Note:** In response to the continuing public health measures, there will be limited public access to the meeting. Admission is by ticket only, bookable in advance via: [democratic.services@westsussex.gov.uk](mailto:democratic.services@westsussex.gov.uk).

**The meeting will be available to watch live via the Internet at this address:**

<http://www.westsussex.public-i.tv/core/portal/home>.

## Agenda

- 10.30 am    1.    **Declarations of Interest**
- Members and officers must declare any pecuniary or personal interest in any business on the agenda. They should also make declarations at any stage such an interest becomes apparent during the meeting. Consideration should be given to leaving the meeting if the nature of the interest warrants it. If in doubt please contact Democratic Services before the meeting.
- 10.35 am    2.    **Minutes** (Pages 5 - 8)
- Cabinet Members are asked to agree the minutes of the meeting held on 19 October 2021 (cream paper).
- 10.40 am    3.    **Urgent Matters**
- Items not on the agenda which the Chairman of the meeting is of the opinion should be considered as a matter of urgency by reason of special circumstances.
- 10.45 am    4.    **Youth Cabinet Address** (Pages 9 - 12)
- The Chairman of the West Sussex Youth Cabinet will address the Cabinet to provide an update on its activities, campaigns and future plans. The Cabinet is invited to consider and discuss the update.

The Chairman of the Children and Young People's Services Scrutiny Committee will be invited to speak for up to three minutes on the Youth Cabinet address.

Each of the main Minority Group Leaders will be invited to speak for up to three minutes on the Youth Cabinet address.

11.05 am 5. **Residential based in-house services - Marjorie Cobby House, Selsey (CAB07\_21/22)** (Pages 13 - 54)

Report by the Executive Director of Adults and Health.

The Chairman of the Health and Adults Social Care Scrutiny Committee will be invited to speak for up to three minutes to provide views on the Marjorie Cobby House decision report.

Each of the main minority group leaders will be invited to speak for up to three minutes each on the Marjorie Cobby House decision report.

The Cabinet will then discuss the report and any proposals prior to taking any decision.

11.40 am 6. **Shaw Healthcare Day Services Review (CAB08\_21/22)** (Pages 55 - 96)

Report by the Executive Director of Adults and Health.

The Chairman of the Health and Adults Social Care Scrutiny Committee will be invited to speak for up to three minutes to provide views on the Shaw Healthcare Day Services Review decision report.

Each of the main minority group leaders will be invited to speak for up to three minutes each on the Shaw Healthcare Day Services Review decision report.

The Cabinet will then discuss the report and any proposals prior to taking any decision.

12.15 pm 7. **Gatwick Northern Runway - Approval of consultation response (CAB09\_21/22)** (Pages 97 - 140)

Report by the Director of Highways, Transport and Planning.

The Chairman of the Communities, Highways and Environment Scrutiny Committee will be invited to speak for up to three minutes to provide views on the Gatwick Northern Runway consultation response report.

Each of the main minority group leaders will be invited to speak for up to three minutes each on the Gatwick Northern Runway consultation response report.

The Cabinet will then discuss the report and any proposals prior to taking any decision.

12.45 pm 8. **Emerging Issues**

Cabinet Members are invited to provide any verbal updates on current significant issues for their respective portfolios which may benefit from discussion.

12.55 pm 9. **Date of Next Meeting**

The next meeting of the Cabinet will be held on 3 December 2021.

**To all members of the Cabinet**

**Webcasting**

Please note: this meeting is being filmed for live and subsequent broadcast via the County Council's website on the internet. The images and sound recording may be used for training purposes by the Council.

Generally the public gallery is not filmed. However, by entering the meeting room and using the public seating area you are consenting to being filmed and to the possible use of those images and sound recordings for webcasting and/or training purposes.

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## **Cabinet**

19 October 2021 – At a meeting of the Cabinet held at 10.30 am at County Hall, Chichester, PO19 1RQ.

Present: Cllr Marshall (Chairman)

Cllr Crow, Cllr J Dennis, Cllr Hunt, Cllr N Jupp, Cllr Lanzer, Cllr Russell, Cllr Urquhart, Cllr Waight, Cllr Lord and Cllr Montyn

Apologies were received from Cllr A Jupp

Also in attendance: Cllr Lord and Cllr Montyn

### **Part I**

#### **19. Declarations of Interest**

19.1 No declarations of interest were made.

#### **20. Minutes**

20.1 Resolved – that the minutes of the meeting held on 14 September be approved as a correct record and that they be signed by the Chairman.

#### **21. Medium Term Financial Strategy and Council Plan 2022/23**

21.1 Cabinet considered a report by the Director of Finance and Support Services. The report was introduced by Cllr Jeremy Hunt, Cabinet Member for Finance and Property who advised that the Medium Term Financial Strategy (MTFS) outlined the broad budget principles which were supported by the priorities of the council plan. Katharine Eberhart, Director of Finance and Support Services further outlined the key assumptions underpinning the review of the MTFS, service pressures and movement in the budget gap, which stood at £2.5m. Whilst this was a favourable position, there remained much uncertainty into the future, particularly surrounding Adults Social Care, price inflation, Council Tax and Business Rates and the deferred Fairer Funding review. An increase in capital borrowing was likely in order to meet new demand.

21.2 Cllr Pieter Montyn, Chairman of the Performance and Finance Scrutiny Committee noted the uncertain position, national challenges and their likely impact on the core budget, such as the pandemic effects, rising energy costs, Adults Social Care guidance, pay increases and National Insurance. Cllr Montyn felt clarity on local government funding was key in order to close the budget gap now and for planning future years.

21.3 Cllr Kirsty Lord, Leader of the Liberal Democrat Group acknowledged the difficult financial situation and that whilst the gap was small, uncertainty was an issue. Cllr Lord expressed concern

about the proposed changes to day centre services and hoped the pandemic wasn't being used as a justification for this and other changes. Cllr Lord felt any proposals and their scrutiny should be managed in a public and transparent way.

21.4 A written statement from Cllr Caroline Baxter, Leader of the Labour Group was read out. Cllr Baxter recognised the good position for the forthcoming budget but felt rebuilding communities and improving the health of residents was very important and asked Cabinet to bear in mind the increased costs faced by residents when considering savings.

21.5 Cllr Paul Marshall, Leader of the Council said the MTFS was encouraging, affirmed the priorities of the Council Plan and demonstrated resilience. The Leader recognised the challenges and unpredictable landscape but that the assumptions built into the MTFS gave a good starting base to tackle the external pressures.

21.6 The following points were made by Cabinet Members in discussion:

- Cllr Bob Lanzer, Cabinet Member for Public Health and Wellbeing felt the report presented a good and viable MTFS which supported the Council Plan and makes best use of resources.
- Cllr Steve Waight, Cabinet Member for Support Services and Economic Development noted the £683m worth of Capital Programme investment in areas such as schools, highways and new ways of working which would benefit residents both directly and indirectly.
- Cllr Jacquie Russell, Cabinet Member for Children and Young People highlighted the revenue growth pressures in the Children and Young People portfolio which were largely attributed to demand growth. She outlined the work ongoing with the launch of the Family Safeguarding Model which should see a reduction of the number of children and young people with child protection plans and phase 2 of the fostering programme. The predicted savings were on track.
- Cllr Deborah Urquhart, Cabinet Member for Environment and Climate Change and Deputy Leader outlined the significant funding set aside to commence work on Climate Change and energy projects over the next four years and that plans needed to be in place to ensure the Council Plan could be delivered inside the budget. Cllr Urquhart confirmed that any decisions about savings were scrutinised in a transparent and public way.

21.7 Cllr Hunt thanked the Director of Finance and Support Services and her team and summarised the many challenges ahead. The Leader concluded the MTFS was an optimistic first presentation ahead of setting the budget for 2022/23 and beyond and outlined the consultation and engagement timeline over the Autumn and Winter.

21.8 Resolved – that Cabinet:

1. Note the latest update to the Medium Term Financial Strategy
2. Agree the existing priority outcomes and underpinning theme of Our Council Plan remain unchanged as the basis for planning 2022/23 and beyond.

**22. Date of Next Meeting**

- 22.1 The next meeting of the Cabinet will be held on 16 November 2021.

The meeting ended at 11.34 am

Chairman

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**Key decision: No  
Unrestricted  
Ref: N/a**

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## **Report to Cabinet**

**16 November 2021**

### **West Sussex Youth Cabinet Update**

#### **Report by the West Sussex Youth Cabinet**

**Electoral division(s): n/a**

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#### **Summary**

The West Sussex Youth Cabinet has been invited to attend the Cabinet meeting on 16th November to provide an update on its activities and future plans. This paper has been provided by the Youth Cabinet to give some background information on its work.

#### **Recommendation**

Cabinet is invited to receive the update and the Youth Cabinet's comments and is asked to consider and advise on the benefits to the Council and its residents of the work of the Youth Cabinet.

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### **1 Background and context**

- 1.1 The Youth Cabinet and UK Youth Parliament for West Sussex is an organisation made up of 56 young people, between the ages of 11 and 18, who are elected to represent the views of young people in West Sussex.
- 1.2 We work on various campaigns. Our main goal as a group is to empower all children and young people in West Sussex to use their voice in an effective and compassionate way and to make change to the community. Make Your Mark, a ballot open to all young people in the UK, helps us establish focus points for campaigns. Other focus areas are agreed upon by the Youth Cabinet, and what we feel is relevant to the young people of West Sussex, and the UK.

### **2 Our current campaigns**

- 2.1 **Youth Safety:** A campaign combining Knife Crime, Homelessness and Domestic Violence (the final two being this year's 'Make Your Mark' campaigns).

#### Knife Crime

In March 2021 the Youth Cabinet came runners up for their knife crime campaign (which was focused around posters to deter young people from carrying a knife) in the National Crimebeat Awards. We were nominated for this award by Dr Tim Fooks - the current High Sheriff for West Sussex. Funding was awarded to the Knife Campaign by the National Crimebeat Awards which

will be shared between the three campaigns, with a main focus on a homelessness fundraiser planned for December.

### Homelessness

This campaign has three main goals: to reduce stigma, promote changes to legislation, and educate and fundraise to support the homeless. We have made positive contact with schools and charities in West Sussex to organise fundraisers and donation collections for local homelessness charities. In December students will be encouraged to wear something red to raise awareness of homelessness in exchange for a £1 or more donation to a local homelessness charity.

### Domestic Violence

The Domestic Violence campaign exists to support young people struggling in situations where domestic violence is occurring. We hope to educate people on the effects and conversations needed surrounding domestic violence and young people. By working with external organisations, we will be able to strengthen existing support for young people. The campaign lead has spoken at an event - 'Domestic and sexual violence and abuse: C-19 and beyond.' - emphasising the need for youth voice when dealing with these situations.

- 2.2 **Tackling Racial Inequality:** The goal of this campaign is to bring awareness to the issues of racism faced by individuals who live in the West Sussex area and the UK as well as provide support, comfort and understanding for those who experience it. Activity has included:

### Webinars

The Youth Cabinet ran a webinar series over a three-day period during Black History month in 2020. This received praise and positive feedback and is now available to watch on Youtube. The series has also been sent to schools to be used as a part of the curricular for PSHE.

### Faith awareness

A social media campaign was undertaken to educate young people and the wider community on the five major religions in the UK.

### Race awareness for teachers

The Youth Cabinet is helping to produce a training course for teachers on racial discrimination and how to deal with it as well as providing an opportunity for all West Sussex Schools to enable students to take a training course to become Equality Ambassadors which will be launched later this year.

- 2.3 **Environment:** In this campaign the main aim is to raise awareness about environmental issues that affect our planet to encourage people towards sustainable green solutions. The Youth Cabinet have been working closely with outside organisations including the Marine Conservation Society and Community against Gatwick Noise Emissions (CAGNE) and to raise awareness of climate change and plastic pollution.
- 2.4 **Mental Health and Emotional Wellbeing:** The youth cabinet and MYP recognise the impact that the pandemic has had on young people's mental

health. The Youth Cabinet continue an active social media campaign to educate young people on mental health issues; how to identify them and what young people can do to help others and themselves if they are experiencing issues. We have also begun collecting blog posts to be posted anonymously on our blog site about young people's personal experiences with mental health and, if applicable, how they overcame these issues.

- 2.5 **Transforming Education:** The youth cabinet continue to campaign on transforming education following a number of successful campaigns which aim to tackle reducing the digital divide in West Sussex, encouraging an inclusive curriculum and addressing poverty in education.
- 2.6 **Webinars:** The youth cabinet used webinars on Zoom as a way to engage with young people and political leaders in a period of lockdown due to Covid 19. The benefit of having these webinars online and recorded means that they are now being used in colleges in Worthing as tasters for studying politics.
- 2.7 **Podcasts:** Equally, podcasts allow social media engagement with young people, and podcasts have been created on subjects such as racial equality, political engagement, and the Palestine/Israel conflict.

### **3 What Next?**

- 3.1 As a Youth Cabinet, we want to continue to strengthen our working relationship with the County Council. Our attendance and participation in the Children and Young People' Services scrutiny committee and regular meetings with the Cabinet Member for Children and Young People have proven beneficial to all the members of the Youth Cabinet. The Youth Cabinet also welcomes this opportunity to address Cabinet on its work on an annual basis. Youth Cabinet Elections will take place in Spring 2022, which will see a newly formed Youth Cabinet, who will then look to launch their manifesto and key campaigns in the Summer. As a Youth Cabinet, we look forward to continuing to engage with County Councillors in our campaigns as they progress.

### **4 Details**

- 4.1 There are no resource, risk, policy or legal implications for the County Council arising from this report by the West Sussex Youth Cabinet but we invite the Cabinet to consider whether the issues covered are in line with the policies and priorities the Council has set for itself.

**Contact Officer:** Katherine De La Mora, Senior Advisor – Democratic Services  
0330 22 22535

**Appendices - None**

**Background papers - None**

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**Key decision: Yes  
Unrestricted  
Ref: CAB07 (21/22)**

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## **Report to Cabinet**

**16 November 2021**

### **Short-term residential care services in the Chichester and Bognor Regis area at Marjorie Cobby House**

#### **Report by Executive Director Adults and Health**

**Electoral divisions: All in Chichester, Bognor Regis and Selsey**

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## **Summary**

[West Sussex County Council is committed](#) (PDF, 8MB) to enabling people to live independently for longer without the need for long term services, maximising independence and making best use of Council resources.

In 2018 the Council identified a requirement to undertake a review of the in-house residential services it provides for adults, which included services provided at Marjorie Cobby House (MCH) in Selsey. The review was delayed because of the Covid-19 pandemic but has now been undertaken and the information from the review and the feedback from a recently held consultation have been used to establish proposals on future service arrangements.

The review has found that, since the introduction of Home First, home based support and the changes in hospital discharge pathways there has been more demand for supporting people in their own home. There is also reduced demand for the number of available beds within Marjorie Cobby House with an average number of admissions of 13 beds per month in 2020/21, out of a potential 34. In addition, the Marjorie Cobby House building is not felt to be suitable to accommodate people with more physical complex care needs without further and significant investment. The proposal that was recently consulted upon included the closure of the service and commitment to find alternative arrangements to better support those needing short-term residential care and reablement support, enabling the Council to meet future demand more effectively within available resources.

Notwithstanding the above, given current challenges in the health and social care system and, in order to support the local NHS's need to address delays in elective care, MCH could potentially be required as an interim social care solution through the winter period 21/22. This would allow for the development of medium-term community-based capacity and temporarily delay the implementation of the proposal.

This report also seeks approval from Cabinet to declare all the freehold property at Marjorie Cobby House surplus to Adults Services operational requirements conditional upon the potential interim use set out above.

## Recommendations

Cabinet is recommended to approve:

- (1) The end of the provision of in-house residential services for adults in Marjorie Cobby House, 38 St Peter's Crescent, Selsey, PO20 0NA and all the buildings on site including 38a and 38b St Peter's Crescent. This will include closure of the building, declaration that the buildings are surplus to operational requirements as per the plan set out in Appendix C and for the return of the buildings to the Council's Property and Assets service to manage or dispose of.
- (2) The arrangements for future provision of short-term residential care services in the Chichester and Bognor Regis area as set out in paragraph 2.
- (3) Delegate the implementation of recommendation (1) to the Executive Director Adults and Health (DASS) in light of the potential short term use of the building as outlined in paragraph 1.10 of the report.

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## Proposal

### 1 Background and context

- 1.1 [West Sussex County Council is committed](#) (PDF 8MB) to enabling people to live independently for as long as possible, maximising independence and making best use of its resources. In order to ensure these objectives are being met, the Council regularly reviews the services it provides.
- 1.2 In 2018 the 'Choices for the Future' programme was approved by the Cabinet Member for Adults & Health. Directly Provided Services committed to reviewing the provision of the in-house residential services, which included services provided at Marjorie Cobby House (MCH) in Selsey. This review was due to start in 2020 but was delayed due the Covid-19 pandemic.
- 1.3 MCH is a resource centre owned and operated by the Council. It provides short term residential support and care for people requiring reablement support following discharge from hospital, primarily St Richard's Hospital in Chichester. The service works in partnership with the NHS, social workers, local GPs, and the intermediate care team.
- 1.4 MCH is registered with the Care Quality Commission (CQC) to provide 34 beds but is currently commissioned to provide 10 Discharge to Assess (D2A) beds and 10 interim beds. At the last inspection by the CQC in 2018 the service was rated 'Good'.
- 1.5 A financial savings plan, which included the proposal to close MCH and provide alternative services in the Chichester and Bognor Regis area, was considered by the [Health & Adult Social Care Scrutiny Committee on 13 January 2021](#). The Committee requested to scrutinise proposals prior to a final decision, via a Task

and Finish Group. The financial savings plan was also included in annual budget report which was approved at [Cabinet on 22 January 2021](#) and [County Council on 12 February 2021](#).

- 1.6 The Council subsequently established a project to review the service and the need for services, this review considered:
- The need and demand for residential short term reablement services,
  - Occupancy levels of the existing in-house services,
  - Projections of future needs,
  - The condition of the buildings and suitability of the facilities,
  - The cost of providing the services, and the cost and sustainability of alternative services in the local area,
  - The Council's objectives to enable people to live independently for as long as possible and to make best use of resources,
  - The impact any closure could have on those requiring short-term residential care and reablement support in the Chichester and Bognor Regis area,
  - The impact on the Council's partners that refer to MCH,
  - The availability, quality, and suitability of alternative services in the Chichester and Bognor Regis area, and
  - The impact for staff supporting MCH and the potential for redeployment for directly employed staff.
- 1.7 The completion of this work, together with results of the consultation and engagement activity detailed in paragraph 4, has informed the recommendations in this report. A summary of key findings from the review are identified below.
- The review found that there was not a sufficient need for all 34 beds at MCH now or in the near future.
  - Since the introduction of Home First and the development of hospital discharge pathways there has been a marked increase in the need for support for people in their own home.
  - Numbers of admissions to MCH in the last three years have been between 13 -15 per month. In 2020/21 average admissions per month included 8 for D2A and 5 for interim beds. The information suggests a relatively steady need for D2A with reablement beds, but not at the level of bed availability within MCH.
  - Interim beds can also be supported within existing contract arrangements in the Council's block contract with Shaw Healthcare and commissioned from the wider market on a spot purchase basis.
- 1.8 Another consideration for the future of MCH was the building's suitability to meet needs in the future. The building does not have en-suite facilities, the rooms are not wheelchair accessible nor large enough to enable turning space and do not have ceiling hoists which would support people with more physical complex care. The building also has a flat roof above the lounge and kitchen which leaks and is under constant repair. The service has had investment in the past to replace windows, decorate, replace the lift and upgrade the laundry. Further and significant capital investment would however be required in the future to meet the level of complex needs a service of this type would support,

including remodelling of the building to enable installation of en-suite bathrooms and toilets (which would result in a reduction in the number of rooms) and ceiling hoists fitted to all bedrooms. The main roof and flat roof also require complete replacement. Capital investment is not a good use of public resources when alternative beds are readily available within the Council's block contract with its strategic partner Shaw Healthcare.

- 1.9 The steady requirement for D2A beds indicated there is a need for alternative provision. The cost of a reduced number of beds in an alternative provision was taken into account when the savings target agreed by the Council was set. There was sufficient interest in the care market to be confident of the ability to commission alternative services in the Chichester district area.
- 1.10 There are currently significant challenges in the health and social care system as a result of a significant increase in demand following the Covid-19 pandemic. In order to support the local NHS's requirement to address any delays in elective care, MCH could potentially be required as an interim social care solution throughout the winter period. This would be from December 2021 to the end of March 2022. The need for this use would be determined before the end of January 2022. It would allow for the development of medium-term community-based capacity and temporarily delay the implementation of the proposals as set out in section 2 below. These decisions would be taken by the Executive Director Adults and Health.

## **2 Proposal details**

- 2.1 The strategic intention to support people to remain independent at home for as long as possible, the consultation responses, the analysis of the review and the alternative provision available have all been considered in the development of the proposals.
- 2.2 The majority of consultation responses disagree with the proposals and have expressed positive experiences of the service and the importance of the centre for the local community. Concerns have also been raised, for example, about the impact on hospitals, the ability of the wider market to provide alternatives and impact on carers visiting. There have however also been comments on the benefits of providing support in alternative settings such as using otherwise empty beds for short stay care and that it is untenable to justify costs of retaining if the service is underutilised. The feedback has been fully considered and whilst it is clear that the majority of respondents do not agree with the proposals, the information from the wider review indicates that it is not a good use of limited resources to continue to provide a service at Marjorie Cobby House. The Council will however reflect on all comments to ensure that the important considerations raised are reflected in alternative arrangements. This includes for example ensuring occupational therapists regularly visit, having trained staff and accessible buildings and consideration of visiting.
- 2.3 The importance of MCH to the local community was expressed during the consultation and the impact on visitors of a different location. As part of the review, the home location of MCH customers for the last three years was considered. Few customers were local to Selsey. The majority of customers resided in Chichester, Bognor Regis and Arundel (see Appendix D), with any visitors travelling at least 30 minutes to MCH. Some customers however also

lived in Worthing, north Chichester, Mid Sussex and Hampshire with any visitors travelling at least 45 minutes to MCH.

- 2.4 Therefore, having considered all the information, it is recommended that MCH be closed, declared surplus and returned to the Council's Property and Assets Department. Further investment in MCH would not represent value for money given that there is insufficient demand for the full number of beds within the service and more suitable alternative services are available. The property and all buildings on the site are recommended to be declared surplus to operational requirements.
- 2.5 Subject to the approval of the recommendations in this report, MCH would stop taking new admissions and would continue to care for those already in MCH until they leave for the next stage of their recovery or alternative support is identified by 31 March 2022. The building will be closed, emptied, and returned to the Council's Property and Estates Department in 2022 to manage or dispose. The timing would however be subject to the potential short term use referred to in paragraph 1.10 above.
- 2.6 A commitment to find alternative provision was outlined within the recent consultation. Alternative provision provided is as below:
- (a) The Council will continue to support people being discharged home from hospital through the Home First pathway wherever this is a suitable solution for the individuals. This is commissioned through Hospital Discharge Care Contracts which operate alongside Sussex Community NHS Foundation Trust and these contracts are in place until March 2023 and have been increased throughout the pandemic and will continue to be commissioned as part of the health and social care systems plans.
- (b) Where people are unable to return home straight from hospital, the following solutions are proposed:
- D2A with reablement beds are commissioned including the provision of therapeutic intervention to maximise people's opportunities to return home at the end of their stay.
- The recommendation in the short term, until March 2023, is to provide these through the Shaw Healthcare service. This will include the delivery of therapist support to be provided within the Council and will require confirmation of GP cover through local primary care practices in consultation with the NHS.
  - In the longer term and in alignment with timescales on other contracts, the Council will review the provision of D2A with reablement services with the three other remaining services and develop a longer-term plan for commissioning this provision.
  - Interim short-term residential beds will be provided through the Council's existing block contracts for residential and nursing care and through spot purchasing from the wider care market.

### **3 Other options considered (and reasons for not proposing)**

## Agenda Item 5

- 3.1 The option to do nothing and continue to use MCH to provide short-term residential care and reablement support or to recommend alternative use for the building has not been proposed because there has been insufficient demand for all 34 beds in recent years and the facilities and building would require further significant capital investment in the future.
- 3.2 The option of not providing alternative D2A beds has not been considered. D2A is an important service provision for the health and social care system, enabling people to receive therapeutic support to regain their independence and return to their own homes and to support hospital discharge and system flow. This is consistent with the [Council's commitment](#) (PDF, 8MB) to enable people to live independently for longer without the need for long term services, maximising independence and making best use of its resources.
- 3.3 There are a number of local care and nursing homes that support people who are being discharged from hospital without the additional reablement provision. Therefore, the option to block purchase services for the interim beds has not been proposed as spot purchased care is available.
- 3.4 The Council has undertaken soft market testing with the local residential care market, including Shaw Healthcare, which has identified an interest from the market to provide a D2A with reablement service as a block commissioned service. Whilst this is important and will be considered further for longer term provision, the time required to set up a service in the market and the bed availability at the outset means this is not a viable option for the short term to avoid a gap in service. These providers can be considered as a reserve and approached on a spot purchase basis to provide short term interim and hospital discharge beds for people in the local area where reablement is not required.

## **4 Consultation, engagement and advice**

- 4.1 The Council held a stakeholder consultation between 9 August 2021 and 20 September 2021 to hear the views of people and organisations that could be affected by any changes. Past and present users of MCH, their family and friends and carers, current staff, stakeholders, and partner organisations were invited to respond. The consultation was published on the Council's website, with alternative formats available, and was also open to members of the public to respond. 174 responses to the consultation were received. The report with the full results can be found at Appendix A. The main findings are detailed below with the percentage and number of responses:
  - 76% (70) of stakeholders and 72% (55) of current and former customers and their family and friend carers disagreed with the proposal (disagree/strongly disagree) with 64% (59) stakeholders and 51% (39) current and former customers and their family and friend carers strongly disagreeing to the proposal.
  - 78% (73) of stakeholders and 75% (57) of customers and family and friend carers thought the proposal would have a negative impact on people discharged from hospital needing rehabilitation, whilst 76% (71) of stakeholders and 63% (48) customers and family and friend carers thought it would have a negative impact on family and friend carers.

- The majority of stakeholders felt that health and care organisations (60% / 56), Marjorie Cobby House staff (73% / 68), independent health and care providers (58% / 54) and the local community (62% / 58) would be negatively impacted.
- 4.2 Detailed analysis of responses from current and former Marjorie Cobby House customers, family and friend carers and stakeholders are included in Appendix A.
- 4.3 Equality Impact Assessment (EIA) for the stakeholder consultation was undertaken and is attached at Appendix B. The assessment considered that due regard was given to the feedback in the stakeholder consultation and the potential impacts outlined on selected 'equality groups' in the EIA. As a result, it has been recommended to re-commission a short stay reablement service from Shaw Healthcare. As this will be offered on a similar basis to the service currently provided at Marjorie Cobby House, it is not anticipated that there would be a disproportionate impact for any of the selected 'equality groups'.
- 4.4 Soft market testing took place from 11 August 2021 for one month. The Council contacted 81 care providers in the Chichester and Bognor Regis areas requesting information and their potential interest in providing interim residential care beds and D2A beds to understand market capacity and estimated rates. Nine care providers responded stating they would be interested in the opportunity to provide D2A services and could provide 3 - 4 beds meaning the proposed eight beds would need to be split between two or more services. Shaw Healthcare also expressed an interest and have since had discussions with the Council to explore how D2A with reablement could be provided within the services under block contracts with the Council.
- 4.5 The majority of the staff working at MCH are employed directly by the Council on either permanent, short term or casual contracts and have been engaged and supported throughout the review by the Council and their union representatives.
- 4.6 The Joint Consultative Committee (JCC) was briefed on the review and plans for the stakeholder consultation on 27 July 2021, followed by a briefing for MCH staff on 28 July 2021. A full report on the proposals and the impact on staff will be considered by the JCC on 2 November 2021. Should the proposals within this report be approved and it is confirmed that MCH will close, a formal 30-day staff consultation will commence at the end of November 2021. Staff will continue to be supported throughout the consultation and their responses will be considered in early January 2022. Where possible, staff will be redeployed within the Council.
- 4.7 As detailed in paragraph 1.5 above, the suggestion to close MCH and provide alternative services was included in the Council's financial savings plan which was considered by the [Health & Adult Social Care Scrutiny Committee on 13 January 2021](#), and approved by [Cabinet on 22 January 2021](#) and [County Council on 12 February 2021](#). The Cabinet Member for Adult's Services has also been briefed and updated on progress throughout the review.
- 4.8 As noted in paragraph 1.5, the Health and Adult Social Care (HASC) Scrutiny Committee requested to scrutinise proposals regarding MCH and the provision of alternative services prior to any final decision being taken. A HASC Task &

Finish Group meeting took place on 5 November 2021 to preview this report and appendices. Comments and the recommendation(s) from the Task & Finish Group will be available for consideration by Cabinet at the meeting on 16 November.

- 4.9 The proposals within this report have been considered and endorsed by the Council’s Finance, Legal, Human Resources and Property and Assets Teams. The Property and Assets team note that further legal due diligence on the legal title to MCH is required in order to prepare an options appraisal for the future strategy for the property.

## 5 Finance

- 5.1 The financial savings plan in the Council’s annual budget report was approved at the [Cabinet on 22 January 2021](#) and [County Council on 12 February 2021](#). In that report it was estimated that approximately £960k would be saved annually from the closure of MCH, from which around £320k would be required to fund alternative provision of eight beds, resulting in a net benefit of £640k. These estimated savings were subject to more detailed work taking place on the cost of alternative services and demand for beds.
- 5.2 In the event, the cost of reprovision, together with related expenditure such as occupational therapy support and primary care cover, is expected to be lower than estimated because of the opportunity to deliver this within the existing Shaw block contract. Whilst the price remains to be finalised, the advantage of this arrangement is that it will be based on a marginal cost increase. This will enable a higher level of savings to be delivered. Subject to completion of the necessary processes, these are anticipated to rise from £640k to around £800k and be available in full with effect from 2022/23. The increase will be used to mitigate other Adults’ savings targets which are forecast to under-achieve:

	<b>Year 1 2022/23 £m</b>	<b>Year 2 2023/24 £m</b>	<b>Year 3 2024/25 £m</b>	<b>Year 4 2025/26 £m</b>
Savings target	0.64	0.64	0.64	0.64
Amount estimated to be delivered by the proposal	0.8	0.80	0.80	0.80
Surplus to be applied to mitigate shortfalls in other Adults’ savings targets	0.16	0.16	0.16	0.16

- 5.3 In addition, there are potential redundancy costs that will need to be funded. Although these have been assessed at a maximum of £405k, through an active approach to redeployment it is highly likely that this will reduce to a significantly lower figure. Any payments that need to be made will be funded using resources that have been earmarked in the spending plan for the Improved Better Care Fund.
- 5.4 The effect of the proposal:
- (a) **How the proposal represents good value**

MCH is a facility for which demand has been steadily reducing. As a result in relative terms it is becoming more expensive to operate, particularly as its retention would require significant capital investment to improve the condition of the building. Better value for money can be obtained by maximising the use of the block contract already commissioned with Shaw Healthcare, which can provide a sufficient number of beds to provide an alternative to MCH. In addition, the interim beds can be provided through the rest of the Shaw Healthcare service or spot purchased through the wider market as required.

**(b) Future savings/efficiencies being delivered**

As set out above.

**(c) Human Resources, IT and Assets Impact**

Staff are employed under the following arrangements.

<b>Employee Type</b>	<b>Number of staff</b>	<b>FTE</b>
<b>Permanent</b>	38	26.6
<b>Fixed term / Temporary</b>	5	4.2
<b>Casual</b>	15	15
<b>Total</b>	58	44.81

- 5.5 A number of staff employed under permanent contracts are also engaged under casual contracts and therefore for the data displayed are recorded in both categories. This is so all true positions and contractual statuses are considered in the analysis. All casual positions are recorded on County Council systems as 1FTE (full time equivalent) although it is recognised that often hours worked are not equivalent to 1FTE and are often much less. Those staff on fixed term and temporary contracts have various end dates and these dates will be managed to meet service needs.
- 5.6 Once a decision is taken as to MCH’s future the Directly Provided Care Service, supported by HR, will if required undertake a staff consultation which will last for approximately 30 days (public holidays allowing). Once responses to the consultation have been considered by the service, decisions for potential redeployment and possible redundancies may be taken. It is planned that the service will successfully redeploy as many staff as possible, although the geography of the Manhood peninsula may create some constraints because of the time potentially involved in travelling to suitable alternative locations.
- 5.7 The freehold of MCH and all the buildings on the site are owned by the County Council and used by Adults Services to provide in-house residential short-term services. Should the proposals within this report be approved, MCH would close and all the buildings would be returned to the Council’s Property and Assets Department to manage as part of the Council’s Asset Management Strategy, noting the [Council’s commitment to make best use of its resources and dispose of surplus assets](#). Further legal due diligence will be required to ascertain the future strategy for this property. Void holding costs and ongoing Council Tax will be incurred until such time as the property can be disposed of or re-purposed, so there will be no immediate savings in buildings-related expenditure, which are excluded from the figures quoted in the table above.

- 5.8 An inventory of the resources and equipment within MCH has been updated, ensuring there is a record of items that need to be returned to providers such as the NRS Community Equipment Service and items that can be redistributed within Adults Services to other facilities in West Sussex.

## 6 Risk implications and mitigations

Risk	Mitigating Action (in place or planned)
Alternative provision does not offer a higher CQC rating and improved facilities	The Council is working in partnership with Shaw Healthcare to support improvements in quality within all services through the Council's Care and Business Support team and through <a href="#">Proud 2 Care</a> .
Increase in number of days awaiting hospital discharge	The Community Reablement Service and Home First contracts have been varied to take an increase in customers. In advance of the proposals for longer term D2A with reablement services the demand will be reviewed to ensure sufficient provision to avoid increasing numbers of days waiting for hospital discharge.
Financial savings are not met / risk of increased cost on adult social care budget	The proposal over delivers against the savings target. Although the cost of reprovision is still to be confirmed, mitigation for the risk that this could increase has been to specify the service required and undertake soft market testing.
Inability to provide services at MCH until closure due to insufficient staffing	Recruitment took place in Spring/ Summer 2021 for short term and casual staff. Existing staff have been, and will continue to be, supported throughout this process by the Council and union representatives. Agency staff will be used if necessary. Number of beds available to be adjusted if insufficient staff to operate safely.
There is a continued financial risk in holding onto under-utilised assets, which can delay capital receipts or income, or where there is no or limited-service benefit.	All vacant property is risk assessed at the time of handover to the Property and Assets Department by a service and appropriate security measures put in place pending a decision on the future of the property.
Risk of alternatives being unavailable to the local area where MCH is located.	A range of alternatives are available and to be commissioned. This includes Home First Care and Community Reablement Service which are available across the county, and spot purchasing within the wider market. D2A with reablement beds will move to a location outside of the immediate area. However, these are short stay services designed to support people to move back home as soon as possible and hence the disruption would be kept to a minimum to enable the longer-term outcome for the customer.

## **7 Policy alignment and compliance**

- 7.1 The proposals within this report are consistent with the Council's [Our Council Plan 2021 – 2025](#) in which the priorities to enable people to live independently for longer without the need for long term services, maximising independence and making best use of its resources are detailed.
- 7.2 The proposal enables the Councils statutory duty to residents to be met as appropriate alternative services will be provided to mitigate any impact to individuals. Appropriate plans are also in place to ensure that staff affected by the recommendations are dealt with in accordance with the terms and conditions of their contracts of employment and employment law rights.
- 7.3 Equality Duty and Human Rights Assessment – refer to attached Equality Impact Assessment at Appendix B and paragraph 4.2 above.
- 7.4 By ending the provision of in-house residential services for adults in Marjorie Cobby House and using beds available within an existing block contract with Shaw Healthcare, there is an opportunity to realise some benefits for the Council's [Climate Change Strategy](#) (PDF, 1MB) as there will be a reduction in the number of vehicles traveling to and from Selsey and a reduction in the Council's energy consumption in relation to Council owned buildings.
- 7.5 Crime and disorder – not applicable.
- 7.6 Public health – not applicable.
- 7.7 Social value – not applicable.

Keith Hinkley

**Executive Director Adults and Health (Director of Adult Social Services)**

**Contact Officer:** Barry Poland, Operations Manager: Directly Provided Care Services

### **Appendices**

Appendix A – Consultation Findings Analysis

Appendix B – Consultation Equality Impact Assessment

Appendix C – Marjorie Cobby House Property and Assets Plan

Appendix D – Home location of people supported by Marjorie Cobby House

### **Background papers**

None

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## **Future of short-term care services in the Chichester and Bognor Regis areas – consultation findings analysis**

### **Summary of key findings from the public consultation**

- 174 responses to the public consultation were received, comprising 166 standard surveys and 8 easy read survey responses.
- 35 responses were received from current and former Marjorie Cobby Centre customers, 20% of the total.
- 41 responses were received from family and friend carers of current and former Marjorie Cobby House customers, 24% of the total
- 92 responses were received from other stakeholders (52%). This included local residents, health and social care workers, Marjorie Cobby House staff, voluntary and community sector workers and volunteers and independent health and social care providers.

### **Key findings from current and former Marjorie Cobby House customers and their family and friend carers responses to the public consultation survey**

- 72% of current and former customers and their family and friend carers disagreed with the proposal (disagree/strongly disagree) with 51% strongly disagreeing.
- 75% of customers and family and friend carers thought the proposal would have a negative impact on people discharged from hospital needing rehabilitation, whilst 63% thought it would have a negative impact on family and friend carers.

Detailed analysis of current and former Marjorie Cobby House customer and family and friend survey responses is given at Section 2 of this report.

### **Key findings from other stakeholder responses to the public consultation survey**

- 76% of other stakeholders disagreed with the proposal (disagree/strongly disagree) with 64% strongly disagreeing.
- 78% felt that people being discharged from hospital needing rehabilitation would be negatively impacted and 76% felt that family and friend carers would be negatively impacted.
- Majorities of stakeholders felt that health and care organisations (60%), Marjorie Cobby House staff (73%), independent health and care providers (58%) and the local community (62%) would be negatively impacted.

Detailed analysis of other stakeholder responses to the survey is given at Section 3 of this report.

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**1 Stakeholder consultation overview**

- 1.1 The stakeholder consultation on the future of short-term care services in the Chichester and Bognor Regis areas ran from 9 August 2021 to 20 September 2021.
- 1.2 The consultation was developed in compliance with the four Gunning Principles for public consultation and every effort was made to remove any barriers to participation that people from under-represented groups, such as those from minority communities and others with protected characteristics, may face.
- 1.3 The consultation was promoted through a variety of channels to ensure that people with protected characteristics had an equal opportunity to participate and share their views. The County Council adhered to its duties under the Accessible Information Standard and documentation was available in other formats, including easy read, large print and audio, on request.
- 1.4 A survey questionnaire was published on the Your Voice online platform and was also available in Easy Read and other formats.
- 1.5 In total, 174 responses to the survey were received, comprising 166 standard surveys and 8 easy read survey responses.
- 1.6 35 responses were received from current and former Marjorie Cobby House customers, 20% of the total. 41 responses were received from family and friend carers of current and former customers, 24% of the total. The full breakdown of responses is given in Table 1.1.

**Table 1.1 – Which of these statements is right for you?**

<b>Statement</b>	<b>No.</b>	<b>%</b>
Currently staying in Marjorie Cobby House	2	1
family or friend carer of someone currently at Marjorie Cobby House	5	3
Previously stayed at Marjorie Cobby House	28	16
Family or friend carer of someone previously stayed at Marjorie Cobby House	36	21
Local resident	42	24
Health and social care worker	16	9
Work at Marjorie Cobby House	10	6
Voluntary and community sector worker or volunteer	9	5
Work for an independent health and social care provider	6	3
Other (please specify)	9	5

<b>Statement</b>	<b>No.</b>	<b>%</b>
Did not answer	11	6

Please note that five responses to the easy read customer survey did not specify if they were current or former customers. These are marked as 'other' in Table 1.1 but have been included in the customer total in this report.

- 1.7 15% of responses from current and former customers were completed by someone else on their behalf, whilst 85% were completed by the respondent.
- 1.8 The time interval since the Marjorie Cobby House customer, or the person they care or cared for stayed at the facility is given at Table 1.2

**Table 1.2 When did you, or the person you care or cared for, stay at Marjorie Cobby House?**

	<b>No.</b>	<b>%</b>
Currently staying	1	1
Within the last six months	12	16
six months to a year	21	28
More than a year ago	29	38
Don't know	2	3
Did not answer	11	14

## **Survey analysis**

### **2 Current and former Marjorie Cobby House customers**

- 2.1 As shown in Table 2.2, 72% of current and former customers disagreed with the proposal (disagree/strongly disagree) with 51% strongly disagreeing. 15% agreed with the proposal (agree/strongly agree), including 7% who strongly agreed.

**Table 2.2 How far do you agree or disagree with the proposal? (%)**

Strongly agree	7
Agree	8
Neither agree nor disagree	11
Disagree	21
Strongly disagree	51
Don't know	1
Did not respond	1

2.2 As Table 2.3 illustrates, 75% of customers and family and friend carers thought the proposal would have a negative impact on people discharged from hospital needing rehabilitation, whilst 63% thought it would have a negative impact on family and friend carers.

**Table 2.3: What impact do you think the proposal would have on? (%)**

	<b>people discharged needing rehab</b>	<b>family and friend carers</b>
Positive impact	16	20
Neither positive nor negative	5	5
Negative	75	63
No impact	0	1
Don't know	3	5
skipped	1	5

2.3 Current and former customers were asked to provide more information about why they felt the proposal would impact them.

2.4 The most frequent response focussed on people’s positive experiences of staying at Marjorie Cobby House, or the positive experience of the person they cared for. This included:

- the high quality of care they had received from the staff.
- the facilities (although some noted these could require update)
- the convenient location for family and friends who lived locally to visit. This was cited as an important element of rehabilitation.
- Carers could be reassured their relative was appropriately cared for.

2.5 The importance of Marjorie Cobby House as a dedicated rehabilitation facility was frequently cited. This ensured that people were given the time and focussed care and support they needed to be able to safely return home or to the next stage of their care.

- 2.6 Some respondents felt that rehabilitation would not be provided as well in alternative facilities such as care homes, as these did not solely support rehabilitation and had to balance additional priorities.
- 2.7 In addition, some respondents were concerned that the proposal may mean that support would be provided at home. It was felt this was not suitable for people who needed rehabilitation and could be potentially unsafe or lead to repeat hospital admissions.
- 2.8 The importance of Marjorie Cobby House for the local community was a further consistent theme in the comments. This was the only facility available on the Manhood Peninsula and it was valued by many respondents as a result.
- 2.9 A common theme from respondents opposing the proposal was the changing demographics and the growth of the older population and higher levels of need locally. This would lead to greater demand for rehabilitation services in future. Some respondents felt that more spaces, rather than fewer, would be required.
- 2.10 Pressures on hospitals were also cited, and the risk of 'bed blocking' without easy access to a rehabilitation facility was referred to in multiple responses. Patients could be left in hospital for longer than required, as they could not safely return home, or would have a potentially lengthy wait for care packages and short-term placements to be put in place. This could also be more expensive for the County Council. One respondent worried that sending people to multiple establishments may impact upon the quality of communications with social services.
- 2.11 A small proportion of respondents had not had positive experiences at Marjorie Cobby House, citing issues with the standard of care and support they had received. The Selsey location made it difficult for some people to visit, including one former customer of Marjorie Cobby House from the north of Chichester district, who felt that a local alternative would have enabled more family and friends to visit.

### **Priorities for future provision**

- 2.12 Current and former service users and their family and friend carers were asked to prioritise the things that were important for arranging short-term care and rehabilitation for people who were not able to be discharged to their own home. The results are given at table 2.4, including the top five ranked most important priorities.

**Table 2.4 what are the most important priorities for arranging short-term care and rehabilitation for people discharged from hospital? (% and top five ranked priorities)**

Priority	% selecting priority	Ranking
Appropriately trained staff available at all times	78	2
Health professionals (Occupational Therapists) regularly visit	79	1
Rooms have en-suite facilities	37	
Rooms have equipment for disability	62	
Equipment/technology-enabled-care	66	=4
Buildings are fully accessible	67	3
Different dietary requirements accommodated	53	
Location easily accessible by public transport	49	
Free or low-cost parking on site or nearby	53	
Discharge from hospital any day of week	54	
Information and contacts about medical/care support	55	
Easily accessible info, advice and support for carers	66	=4
Carer respite	62	
Other (please specify)	11	

2.13 'Other' responses included the following:

- On site physiotherapy and rehabilitation staff were great. That people were required to do some things for themselves was a motivation
- Locate the facility close to or within the patient's home community as placing a Bognor Regis patient in Selsey or visa-versa makes no sense. The impact on the carer to visit could affect their health and lead to both needing care.
- Some bedrooms could be changed to en-suites, but not necessarily all. Special equipment could be movable, not in each room.
- The list was not helpful as the vast majority were 'must-haves' and not discretionary options for a 'proper' rehabilitation service.
- Location in or near accessible centres of population, for 'morale boosting' visits. Occupational therapist visits had been hard to organise during the pandemic and this had negatively impacted a respondent's relative's mobility.

**Additional comments**

2.14 Many of the customer and family and friend carer comments again focussed on positive experiences of staying at Marjorie Cobby House and the benefits of retaining the facility. In addition to those given at 2.4 these included:

- Its good reputation
- Marjorie Cobby House was a dedicated rehabilitation facility

- Good public transport links
- The service helped people to regain confidence
- Some people were unwilling to go to an 'old people's' home for rehabilitation, but were happy to stay at Marjorie Cobby House
- The short stay model gave family members time to decide on the best options for future

2.15 A range of comments were critical about the proposal and the possible alternative options to Marjorie Cobby House. These included:

- Care homes were not appropriate locations for everyone
- There was not enough capacity in the provider market
- Negotiation for purchasing places from providers can be lengthy and may delay discharge.
- Alternative locations do not prioritise or specialise in rehabilitation
- The proposal was being led by savings, not need.
- Impact on carers of the loss of the short-stay facility and the risk carers may have to provide care at home.
- Increased risk of 'Bed Blocking', complicating hospital discharge
- Loss to the Selsey community of closing Marjorie Cobby House and the risk that the site will be turned into more housing.

2.16 A number of respondents were sad at the prospect of Marjorie Cobby House closing, whilst some expressed anger at the proposal and there were a number of pleas to retain the services.

2.17 There were several negative comments about Marjorie Cobby House including that the facility was tired and neglected (although the care remained of a good standard) and that the location was a negative.

2.18 A number of alternative proposals were suggested, including the following:

- Create a 'cottage hospital' combining Marjorie Cobby House with other services such as X-rays and dressings for minor injuries and accidents.
- Create a day centre for older people on the site
- Adapt Marjorie Cobby House to function as a scalable resource that could expand and contract with demand.
- Use any spare rooms for housing residential customers or for staff
- Update and modernise the site
- Reduce the number of rooms and carry out a cost-effective update and refit.
- Build on the foundations of Marjorie Cobby House and extend the service offer.

### **3 Other stakeholders**

3.1 As shown in Table 3.1, 76% of other stakeholders disagreed with the proposal (disagree/strongly disagree) with 64% strongly disagreeing. 20% agreed (agree/strongly agree) including 9% who strongly agreed.

**Table 3.1: How far do you agree or disagree with the proposal? (%)**

	<b>%</b>
Strongly agree	9
Agree	11
Neither	3
Disagree	12
Strongly disagree	64
Don't know	0
Did not answer	1

3.2 Table 3.2 provides a breakdown of the percentage of respondents agreeing or disagreeing with the proposal, by stakeholder group. It also gives the number of respondents in each group. This data should not be over-interpreted owing to the relatively low number of respondents in some stakeholder groups.

**Table 3.2: How far do you agree or disagree with the proposal? (by stakeholder group, %)**

	<b>Health/ social care worker %</b>	<b>Local residen t %</b>	<b>VCS worker/ volunteer, %</b>	<b>Independen t provider %</b>	<b>Marjorie Cobby staff, %</b>
Strongly agree	6	7	0	17	20
Agree	25	5	0	67	0
Neither	0	0	11	0	10
Disagree	31	10	89	0	10
Strongly disagree	38	76	0	17	60
Don't know	0	0	0	0	0
No response	0	2	0	0	0
No. of respondents	16	42	9	6	10

3.3 The majority of other stakeholders felt that the proposal would have a negative impact for all the groups surveyed (Table 3.3). Note that three Marjorie Cobby House staff completed the customer and carer version of the survey, which asked about the impact for family and friend carers and people needing rehabilitation after hospital discharge, but not the other groups listed in Table 3.3.

**Table 3.3 What impact do you think the proposal would have on? (%)**

	<b>Family/ friend carers</b>	<b>people needing rehabilitation after hospital</b>	<b>health and care organisations</b>	<b>Marjorie Cobby staff</b>	<b>Independent providers</b>	<b>Local community</b>
Positive impact	12	13	11	4	14	6
Neither positive nor negative impact	8	8	12	5	9	13
Negative impact	76	78	60	73	58	62
No impact	1	0	0	0	1	1
Don't know	2	0	3	3	4	3
Did not answer	0	0	13	13	13	13

3.4 Other stakeholders were asked to provide more detail about their views on the proposal and its potential impact. A wide range of impacts were reported. These have been grouped into the following broad themes.

*Benefits of Marjorie Cobby House*

3.5 A broad range of the benefits of Marjorie Cobby House were highlighted by other stakeholders. These included:

- Most frequently cited was that Marjorie Cobby House was a good rehabilitation service. Reasons for this included its focus on supporting safe hospital discharge, freeing up hospital capacity and helping people return home safely, with greater confidence. It was valuable to the NHS and the local community.
- Marjorie Cobby House gave an opportunity to assess needs for a return home and put in place any support that was needed.
- There was a mental and physical benefit for people from receiving rehabilitation outside of a hospital setting
- It provided 24-hour care and rehabilitation, that could not be replicated by care homes. It was a positive alternative to a care home placement.
- People staying at Marjorie Cobby House built relationships and trust with regular staff and this supported rehabilitation.
- It was a 'life saver' to help people live independently. It was a safe and secure service for those not yet well enough to return home. This was particularly important for those who did not have family nearby and couldn't be cared for at home after hospital discharge.
- The short-term preventative approach was cheaper and enabled people to go home, rather than a long-term placement.
- It benefitted carers in several ways, as it offered family respite and peace of mind that the person they cared for was appropriately supported, local families could visit without having to travel far, and it gave families and the individual time to consider and plan their next steps.
- It was the only place of its kind in the area and played a 'vital' role in the local community.

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- It provided local employment.
- Support was provided by trained carers and included services for the homeless.
- It was an 'excellent' facility that was positive for patients, provided a 'great' service and had a good atmosphere.

*Negative impacts of the proposal*

3.6 A wide range of negative impacts of the proposal were highlighted by other stakeholders. These have been organised into the following categories.

**Impact on Service Users**

3.7 Impacts for service users included the following:

- People would be impacted by the loss of local rehabilitation services.
- Elderly people needed to be looked after locally as many people didn't drive.
- Placements outside of the local area may lead to less people visiting. This was important for rehabilitation.
- Marjorie Cobby House provided support for self-neglecters and there was concern where they would otherwise be supported.
- Too many people were discharged from hospital too soon.
- People may feel that care homes were a longer-term stay, and this could cause upset and distress if they must move following a short-term placement.
- Any Increased use of care at home could negatively impact rehabilitation
- COVID-19 had negatively impacted respite opportunities and this had created greater need for these services.

**Impact on hospitals**

3.8 Impacts on the hospital system and discharge included the following:

- The lack of short-stay beds was an issue for the NHS and the proposal could reduce discharge options across the county and for Western Hospitals, with the loss of a valuable asset to deal with backlogs of cases.
- Delaying discharge would lead to 'bed blocking' and more people staying in hospital for longer could 'overwhelm' hospitals.
- Discharge could become more complex owing to an increase in the number of service providers involved in providing rehabilitation.
- Closing Marjorie Cobby House could remove a link between hospitals and returning home and reduction in rehabilitation support could lead to an increase in return hospital admissions.
- There was not enough availability of specialist care and this was negative for rehabilitation and discharge to assess.

**Impact on independent care providers**

3.9 Impacts for care providers included the following:

- Owing to limited numbers of available beds, care providers could struggle to accommodate the additional need, slowing down discharge and leading to 'bed blocking' in hospitals.
- Using care home beds for short-term rehabilitation could prevent these beds being used for people with long-term care requirements and care homes were geared towards longer-term care, rather than short stays.
- Closure of Marjorie Cobby House without alternative rehabilitation beds would place extra demand on community care providers, who were already very stretched and may struggle with additional demand.
- A market-based approach could prove more expensive than retaining Marjorie Cobby House.
- Use of care homes could increase the risk of long-term placements, and not sending people back home.

### **Impact on Selsey**

3.10 The loss to the Selsey community was a recurrent theme in the responses and included the following:

- The proposal would negatively impact the community as facilities for a growing older population were already limited and there was a need for local rehabilitation services and interim, short-stay beds.
- Loss of the facilities would impact on the social care needs of the community. This could particularly affect people with dementia and carers, owing to a lack of local respite.
- It was noted that there was no guarantee of alternative provision being located locally to the town

### **Impact on staff**

3.11 Closure of Marjorie Cobby House would lead to local job losses and many staff would not want to leave. It was recognised that there were a high number of vacancies in the care sector, although the availability of alternative local care jobs was questioned.

### **Positive impacts of proposal**

3.12 Stakeholder respondents also cited a number of positive impacts from the proposal. These included the following:

- Managing short-term respite in a care home would mean it was easier for people to stay for longer, if needed.
- Providers could benefit from having short-term clients in otherwise empty beds.
- Other providers could fill any gap, and therefore Marjorie Cobby House was unnecessary
- Marjorie Cobby House was poorly located. Chichester or Worthing could be better locations
- It was not easily accessible for families on public transport, and some were required to use taxis
- It was 'untenable' to justify the costs of retaining Marjorie Cobby House if it was under-utilised.

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- The building was old and had a poor layout and would continually require more improvement.
- If it was not 'fit for purpose' then it shouldn't be invested in.
- Local primary health, including GPs and community nurses may benefit from the proposal as Marjorie Cobby House was time-consuming, with a complex workload.
- There were long travel times for health and care workers going to Selsey.
- It could be difficult to 'sell' Marjorie Cobby House to people, owing to its location and some negative perceptions of the service and its reputation.

**Other comments**

3.13 Additional comments included:

- Marjorie Cobby House was not used to its fullest potential and more people could benefit from its services, but it was not offered.
- The proposal was being led by a savings requirement, not need.
- Although Selsey may be geographically isolated for some, the proposal was not offering to open a new facility in a more convenient location.
- It was wrong to close the service before funding improvements.
- There was a need for more facilities like Marjorie Cobby House, not fewer.
- If the service was under-utilised the process for accessing it should be reviewed and improved, rather than closing it.

**Priorities for future provision**

3.14 Other stakeholders were asked to prioritise the things that were important for arranging short-term care and rehabilitation for people who were not able to be discharged to their own home. The results are given at table 3.4, including the top 5 ranked most important priorities.

**Table 3.4 what are the most important priorities for arranging short-term care and rehabilitation for people discharged from hospital? (% and top five ranked priorities)**

<b>Priority for short-term care and rehabilitation</b>	<b>%</b>	<b>Ranking</b>
Appropriately trained staff available at all times	86	2
health professionals (Occupational Therapists) regularly visit	89	1
Rooms have en-suite facilities	40	
Rooms have equipment for disability	74	3
Equipment/technology-enabled-care	73	4
Buildings are fully accessible	60	
Different dietary requirements accommodated	54	
Location easily accessible by public transport	48	
free/low-cost parking on site/near	36	
discharge from hospital any day of week	63	
Info about medical/care support (contact details)	62	
Easy accessible info, advice and support for carers	67	
carer respite	68	5
Other (please specify)	7	
Skipped	2	

3.15 'Other' responses included the following:

- Community Physio, Neuro Physio and Occupational Therapists, Mental Health Practitioners. All were needed in addition to early joint working with social care.
- Day care for people with dementia.
- A social worker on site, who can help with day-to-day worries and concerns.
- Suggestion that the question should ask for a limited number of priorities, as all on the list were important and, therefore, selected.

**Additional comments on the proposal**

3.16 A range of additional comments were received from other stakeholders. These included a number that focussed on the potential impacts of the proposal and the benefits of Marjorie Cobby House. Those that had previously been reported in sections 2.4 and 2.14 have not been repeated here.

**Pleas to retain the services and disagreement with the proposal**

3.17 The most frequent comments were pleas to retain the service, sadness at its closure and disagreement with the proposal. Reasons for this included:

- Personal or family experiences of attending Marjorie Cobby House
- The benefits of the rehabilitation service provided by Marjorie Cobby House
- The level of local need, the ageing local population and future need and the benefits for the community of having a local rehabilitation facility. The negative impact on the community of the closure was also cited.
- The cumulative impact of reductions in services, had led to greater need. If not the facility was not replaced, this would impact on hospital discharge.

**Other comments**

3.18 Other comments on the proposal included:

- Local care homes would not necessarily be able to respond to additional needs due to staffing issues, domiciliary care providers were stretched to capacity. NHS care home matrons covering the Selsey area were working to capacity already, as was the local GP surgery.
- The local voluntary and community sector would be called on to pick up additional local need as it arose but was not commissioned to do so. This would require a separate discussion, but the sector had not been approached for this.
- The proposal should be implemented, to save money.
- The County Council's care fee rates meant that care homes may not hold many beds to provide short-term rehabilitation.
- Recognition that the facility was not fit-for-purpose, but concern for the impact of closure on hospital discharge.
- There were several questions for the future, following implementation of the proposal

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Appendix A

- What would happen to the building and staff?
- Would arrangements be made for people placed away from the town to receive visitors from Selsey?

**Alternative proposals**

3.19 A range of alternative proposals were suggested by stakeholders, including the following:

- The most frequent suggested alternative proposal was to invest and enhance the service - It could be a "gold standard" for rehabilitation with political will and finance.
- Work with the local community to 're-imagine' and develop the service offer at Marjorie Cobby House.
- Manage the facility to support and work with local services, mixing with nursing care on a collaborative model, led by the County Council.
- Increase spending to enhance the service
- Upgrade Marjorie Cobby House to take patients of all ages, to support hospitals and create an exemplar of good practice.
- Managing cost of renovation, through grant applications
- Sit down with key local stakeholders to discuss proposals.
- If the closure goes ahead then the building should be considered as a space for day care services, as this was an area of local need. It was also suggested to split the service offer to comprise rehabilitation and day care, to generate income from the latter.
- Better utilise the facility to maximise its potential following the recent cost of its refurbishment
- As the recent period had not been representative, wait for the COVID-19 impact to work through system and then conduct the review to determine if the proposal should proceed.

**4 Survey respondents – demographic overview**

**Age**

4.1 As shown in Table 4.1, current and former customers and family and friend carers both had an older age profile than respondents overall.

4.2 78% of current and former customers were aged 65 years and older, including 49% who were aged 85+ years old. 45% of family and friend carers were aged over 65 years old, and a further 34% were aged 55-64 years old.

**Table 4.1 Which of the following age groups best describes you? (%)**

	<b>overall</b>	<b>carers</b>	<b>customers</b>
18-24	0	0	0
25-34	5	5	0
35-44	7	0	0
45-54	14	12	3
55-64	21	34	3
65-74	17	20	9
75-84	12	15	20
85+	13	10	49

Prefer not to say	2	0	6
No response	7	5	11

### Sex

- 4.3 Overall, 74% of respondents were female, 14% were male, 1% were 'other', 3% preferred not to say and 9% did not respond.
- 4.4 76% of family and friend carers were female and 15% were male. 5% preferred not to say and 5% did not respond.
- 4.5 63% of current and former customers were female, and 14% were male, 3% were 'other' and a further 3% preferred not to say. 17% did not respond.

### Ethnicity

- 4.6 As shown in Table 4.2, large majorities of respondents were White British.

**Table 4.2 What is your ethnicity? by group (%)**

	Overall	carers	customers
White British	81	88	83
White other	2	0	0
Mixed	1	2	0
Asian	1	0	0
Black	0	0	0
Chinese	0	0	0
Gypsy/Irish	0	0	0
Other	1	0	0
Prefer not to say	5	5	3
no response	10	5	14

### Disability

- 4.7 As shown in Table 5.3, 51% of current and former customers had a disability, compared to 15% of carers and 20% of respondents overall.

**Table 4.3 Do you consider yourself to have a disability? By group, %**

	Overall	carers	customers
Yes	20	15	51
No	66	66	37
Prefer not to say	6	7	3
no response	8	5	9

- 4.8 As per Table 4.4, a majority of disabled respondents in all groups had a physical impairment. 100% of disabled carers had a long-term condition.

**Table 5.4 What is your disability? Select all that apply, by group (%)**

	Overall	carers	customers
--	---------	--------	-----------

Physical impairment	63	83	67
Sensory impairment	6	0	11
Mental health	6	17	0
Learning disability	3	0	0
Long-term condition	23	100	6
Other	23	0	39
no response	3	0	6

## Religion

4.9 As shown in Table 4.5, majorities of respondents overall, family and friend carers and customers were Christian (all denominations). One respondent was Muslim and one was Jewish.

**Table 4.5 What is your religion? By group (%)**

	overall	carers	customers
Christian	59	68	69
Muslim	1	0	0
Buddhist	0	0	0
Hindu	0	0	0
Jewish	1	0	0
Sikh	0	0	0
No religion	17	10	9
Other	2	2	3
Prefer not to say	12	12	9
skipped	9	7	11

## Sexuality

- 4.10 69% of respondents overall were heterosexual and 1% were homosexual/gay/lesbian. 2% defined as other, 17% preferred not to say and 11% did not answer the question.
- 4.11 71% of carers were heterosexual and 2% were homosexual/gay/lesbian. 12% preferred not to say and 12% did not answer the question.
- 4.12 63% of customers were heterosexual and 3% defined as 'other'. 17% preferred not to say and a further 17% did not answer the question.

## Gender reassignment

- 4.13 79% of respondents overall had the same gender as the one they were assigned at birth and one person's (1%) gender was different. 10% preferred not to say and 10% did not answer the question.
- 4.14 80% of carers had the same gender as the one assigned to them at birth, 10% preferred not to say and 10% did not answer the question.
- 4.15 77% of customers had the same gender as the one assigned to them at birth, one person's gender was different (3%), 9% preferred not to say and 11% did not answer the question.

## 5 Additional submissions

- 5.1 The following additional submissions were received and considered as part of the consultation.

Individual or organisation making submission	Method of submission	Submission overview
Selsey Town Council	Letter, via email 20 September 2021	Outlining a series of objections to the proposal, relating to its negative impacts on those potentially affected and the Selsey community. Included an offer to work with the county council and other stakeholders on alternative approach.
Local resident	Via email, 7 September 2021	Outlining objections to the proposal and suggestions for cost-effective update and improvement to the facility.

**Contact Officer:** James Ironside, Development Manager Engagement, Advice and Information, 033022 22534, [james.ironside@westsussex.gov.uk](mailto:james.ironside@westsussex.gov.uk).

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# Equality Impact Assessment

## Equality Impact Assessment Form

### 1. Contact Details

**Service/department/section:** Adults Commissioning, Adults Services

**Full name:** Sarah Saych

**Job Title:** Commissioning Manager

**Email/phone:** sarah.saych@westsussex.gov.uk and 033 022 23773

**Submission date:** November 2021

### 2. About the Policy, Procedure or Change

- 2.1 Marjorie Cobby House (MCH) is a 34 bedded care home, owned and run by West Sussex County Council. It is located in Selsey and is registered with the Care Quality Commission (CQC) to provide short-term (interim) and discharge to assess (D2A) beds to adults. The service primarily supports people coming out of hospital and in particular St Richard's hospital in Chichester.
- 2.2 In 2018 the Council identified a requirement to undertake a review of the in-house residential services for adults it provides, which included services provided at MCH in Selsey. The review was delayed as a result of the Covid-19 pandemic but has now been undertaken and the information from the review and the feedback from a recently held consultation have been used to establish proposals on future service arrangements.
- 2.3 The review has found that since the introduction of Home First and the changes in Hospital Discharge pathways there has been more demand for supporting people in their own home. There is also not a demand for the number of available beds within MCH with an average number of admissions of 13 beds per month in 20/21. In addition, the MCH building is not felt to be suitable to accommodate people with more physical complex care needs without further and significant investment. The proposal that was recently consulted included the closure of the service and commitment to find alternative arrangements to better support those needing short-term residential care and reablement support, enabling the Council to meet future demand more effectively within available resources.
- 2.4 The Council remains committed to supporting people who are discharged from hospital to return home as quickly and safely as possible, as this important for their wellbeing and recovery.
- 2.5 A six-week public consultation was held from 9 August to 20 September 2021, in advance of the Cabinet decision in November 2021.
- 2.6 Proposed savings were presented to the Health and Adults Social Care Scrutiny Committee on the 13 January 2021 and then at Cabinet on the 22 January 2021,

which included £640k in savings related to Directly Provided Services and identifying the closure of MCH as a possibility.

- 2.7 As of June 2021, there are 45 staff, which does not include casuals.
- 2.8 **Title of Policy, Procedure or Change:**  
Short-term residential care services in the Chichester and Bognor Regis area
- 2.9 **Briefly describe the purpose of the changes being made:**  
As above.
- 2.10 **Who do the changes apply to? (delete any that are not applicable)**
- All Staff and Casuals
  - Green book only
  - Community
  - Current Customers
  - Future customers
  - Family and friend carers and family and friend carers of future customers
  - Other (St Richards Hospital -Western Sussex Hospitals Trust, Clinical Commissioning Group and Sussex Community Foundation Trust)
  - Care Market Providers

### 3. Data collection; consultation; and evidence

A customer profile regarding age on admission, gender, referral routes and where customers move onto has been created using data from 2018-2021 and is given in the following tables.

**Table 3.1** Sex of people admitted to MCH (2018-2021) – number and %.

Sex	Number (% of total)
Female	287 (64%)
Male	158 (36%)

**Table 3.2** Age at admission to Marjorie Cobby House (2018-21)

Age	Number of admissions
85 years and older	229
75-84 years	132
65-74 years	47
45-64 years	34
18-25 years	13

**Table 3.3** Admission route to MCH (2018-2021)

<b>Admission route</b>	<b>Number of admissions</b>
St Richards hospital	324
Own home	50
Bognor Regis hospital	30
Arundel hospital	14
Other hospital	13
Worthing hospital	11
Care home	3

**Table 3.4** Where people were discharged to following MCH stay (2018-21)

<b>Where discharged to from Marjorie Cobby House (2018-2021)</b>	<b>Number of admissions</b>
Own home	254
Care home	93
Hospital	80
Extra care housing	13
Passed away	4
Temporary housing	1

Of the 106 customers purchased on Mosaic at MCH since April 2020, 18 had a previous county council funded service that pre-dated their placement at MCH. This is 17% of the total, with the other 83% being new customers to the County Council.

MCH has also on occasion supported people with alcohol and drug related issues, along with accepting people into the service who are funded via Section 117 after care.

Staff are recognised as a stakeholder in relation to the planned review of short-term hospital discharge of MCH, Selsey. Engagement and consultations with staff and UNISON will take place throughout the project. As part of this, a separate Equalities Impact Assessment will be undertaken in relation to the proposed approach for implementing any decisions taken. The Equality Impact Assessment will form part of any formal consultation with staff. Throughout the project all staff will be encouraged to raise any concerns, or specific individual needs, with their line manager, Human Resources, or their trade union.

All staff will have the opportunity to access and receive support from their management team, their trade union, and also via the confidential Employee Assistance Programme, which is available 24 hours a day, 7 days a week. As part of the staff consultation process there will be one-to-one meetings that will provide the opportunity for discussion on personal circumstances, needs, and adjustments as required.

### 3.5 **Service Demand**

Need and Demand work is being undertaken to identify future commissioning requirements. This identifies the numbers of beds we estimate would be required for future commissioning.

Soft Market Testing was undertaken through market engagement from 11 August 2021 for a month. The Council contacted 81 care providers in the Chichester and Bognor Regis areas requesting information and their potential interest in providing interim residential care beds and discharge to assess beds to understand market capacity and estimated rates. 9 care providers responded stating they would be interested in the opportunity to provide such services and could provide 3 - 4 beds meaning the proposed 8 beds would need to be split between 2 or more services. Shaw Healthcare also expressed an interest and had discussions with a Council contract & relationship manager to explore how the current contract could potentially be modified to provide the D2A with reablement beds.

A consultation was held on the proposal. This commenced on Monday 9 August 2021 and ran until 20 September 2021. Full details of the consultation can be found in Appendix A to the decision report.

A Stakeholder Map has been produced as part of the Communications Plan to ensure effective internal and external communications using a range of media.

The most recent Care Quality Commission (CQC) inspection was undertaken in 2018 and rated the service good in all areas, although they have historically highlighted issues with the building itself, including a lack of en-suite facilities and the limitations of the building design in supporting customers with physical needs.

**Impact the policy, procedure or change may have on employees/community members in each of the equality groups**

3.6 **Age**

As showing in Table 3.2, MCH's services are predominantly aimed at older people. The average age of customers using the service is 82. As a result, older people would be disproportionately affected by any impacts from the proposal.

Potential impacts

- MCH provides 24-hour care and reablement in a dedicated unit, whereas care homes were required to balance a range of priorities and long-term care needs.
- Purchasing short stay reablement beds from multiple providers may be more complex and could potentially delay hospital discharge and lead to an increased risk of 'bed blocking' and pressure on hospitals.
- There may also be a risk of delayed discharge owing to capacity issues for residential providers.
- Risk of a greater user of home-based reablement for people who would otherwise had been placed at MCH. This could impact upon people's recovery, particularly for those who lived alone and could potentially lead to an increased risk of hospital readmissions.

- Longer travel times to alternative facilities may lead to fewer visits from family and friend carers, which could impact upon the wellbeing of people using the services. It is important to note that carers who are not local to MCH have experienced this issue for a number of years.

### 3.7 **Disability**

A high proportion of people using the short stay reablement service at MCH have a disability and they would be disproportionately affected by any impacts from the proposal.

Due to limitations of the design and layout of the building, MCH is unable to take significant numbers of customers with physical disability as it has only two rooms which are of sufficient size for required equipment, such as hoists, and there are no en-suite facilities.

As a result, offering the reablement service at an alternative location would positively impact people with physical disabilities needing a short period of reablement following hospital discharge.

### 3.8 **Caring responsibilities**

A number of potential impacts for carers were described in the consultation. These included the following:

- Carers could have peace of mind that the person they cared for was being looked after in an appropriate reablement centre.
- The short stay following hospital discharge provided family and friend carers with time to plan for the return home of the person they cared for or to organise the next stage in their care.
- Any greater use of home-based reablement may impact carers who may be required to provide care at home. This could impact on carer wellbeing and negatively impact opportunities for carer respite.
- Alternative placements outside of the Selsey area may make it more difficult for local carers to visit the person they care for and this may impact upon their wellbeing, as well as that of the person they care for. It is important to note that this issue has been experienced by carers who are not local to MCH for some years.

### 3.9 **Gender (sex)**

No impact - the changes are to services which are offered on a health and care needs-basis only. This would not disproportionately impact in relation to gender (sex).

### 3.10 **Gender reassignment**

No impact – the changes are to services which are offered on a health and care needs-basis only. They are not gender-specific and therefore people undergoing or having undergone gender reassignment will not be disproportionately impacted.

**3.11 Marriage or civil partnership**

No impact. These changes are to services which are offered on a health and care needs basis only. This would not disproportionately impact on people's marriage or civil partnership status.

**3.12 Pregnancy and maternity**

No impact. The changes are to services which do not provide maternity or pregnancy-related support. This would not disproportionately impact on pregnancy or maternity status.

**3.13 Race**

No impact - the changes are to services which are provided on a health and carer needs basis. This would not disproportionately impact on people's ethnicity.

**3.14 Religion or belief (including no belief)**

No impact - the changes are to services which are provided on a health and carer needs basis. This would not disproportionately impact on people's religion or belief.

**3.15 Sexual Orientation**

The changes are to services which are provided on a health and carer needs basis. This would not disproportionately impact on people's sexual orientation.

**3.16 Part time workers**

The majority of staff are employed on a part-time basis and will be impacted by a decision to close MCH. A full staff consultation process will then be conducted, should the proposal be agreed.

**3.17 Socio economic groups (e.g. unemployed; students)**

Not applicable.

**3.18 Other socially excluded communities or groups (e.g. homeless)**

Not applicable.

**3.19 Mitigations**

Due regard was given to the feedback in the consultation and the potential impacts outlined on selected 'equality groups' in this Equality Impact Assessment. As a result, it has been recommended to re-commission a short stay reablement service from Shaw Healthcare.

As this will be offered on a similar basis to the service currently provided at MCH, it is not anticipated that there would be a disproportionate impact for any of the selected 'equality groups'.

#### 4. Summary and Progressing the Equality Duty

- a) Is there an opportunity to use this policy, procedure or change to show we are working to progress any of part of the Public Sector Equality Duty?

**No** - Adults' Services operates in full knowledge of the need to acknowledge diversity, meet its duties under equalities legislation and to minimise disadvantage and this will inform implementation of the decision.

- b) Please provide a summary of the overall findings and rate your analysis.

**Red** – As a result of performing the analysis, it is evident a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups who share Protected Characteristics (and/or local non-legislative factors). In this instance, **it is recommended that the use of the activity or policy be suspended** until further work or analysis is performed. If it is considered this risk of discrimination is objectively justified, and/or the use of this proposal (policy, activity, function) is a proportionate means of achieving a legitimate aim, this should be indicated, and further professional advice taken.

**Amber** – As a result of performing this analysis, it is evident a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing actions or control measures detailed in the action planning section of this document.

**Green** – As a result of performing this analysis, **no adverse effects** on people who share Protected Characteristics and/or local non-legislative factors are identified – no further actions are recommended at this stage.

The impact assessment identifies that older people, those with a disability and people in a caring role are disproportionately impacted by the proposals. The rating of the impact is Amber (as a result of performing this analysis, it is evident a risk of discrimination exists and this risk may be removed or reduced by implementing actions or control measures detailed in the action planning section of this document). Alternative provision will be commissioned which will mitigate and or reduce the impacts.

## 5. Action Planning

Commissioning of Alternative provision for D2A with reablement beds in an alternative service/s in the Chichester District area and interim care in residential setting in either Shaw Healthcare or wider market beds as required. These will provide similar services for older people and those with a disability. It will also provide those with a caring responsibility time to think about long term options for the person they care for and will support the person they care for in a residential setting until they are able to return home. The impact and importance of visiting was raised in the consultation and this will be considered as part of the development of alternative arrangements.

## 6. Identified Impact(s) on Protected Characteristic or local non-legislative factor(s):

### Recommended Actions:

As identified under action planning.

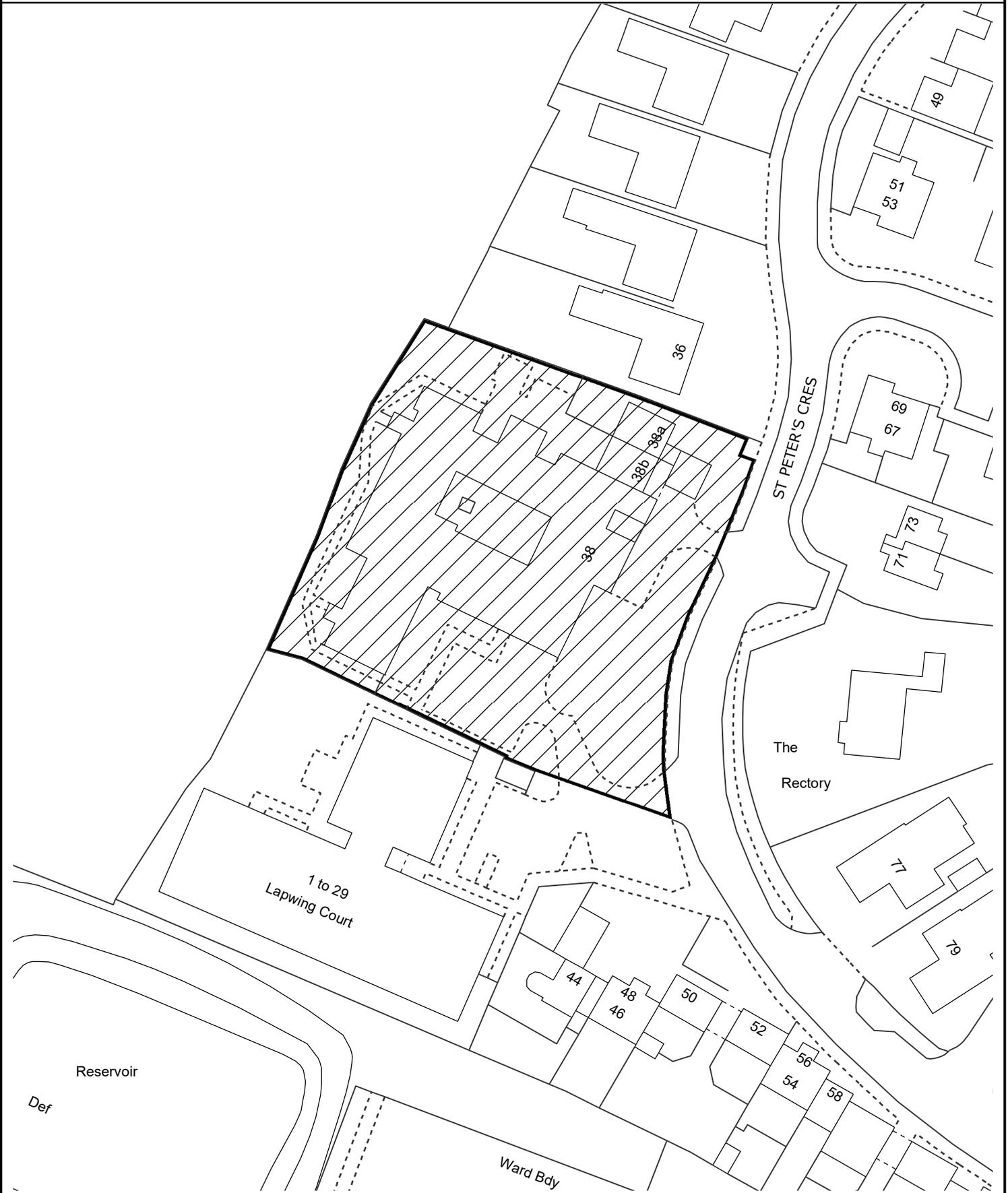
**Responsible Lead Officer:** Sarah Saych

**Completion date:** 30 September 2021

**Review date:** TBC

# PROPERTY & ASSETS

Agenda Item 5  
Appendix C



## Marjorie Cobby House, Selsey

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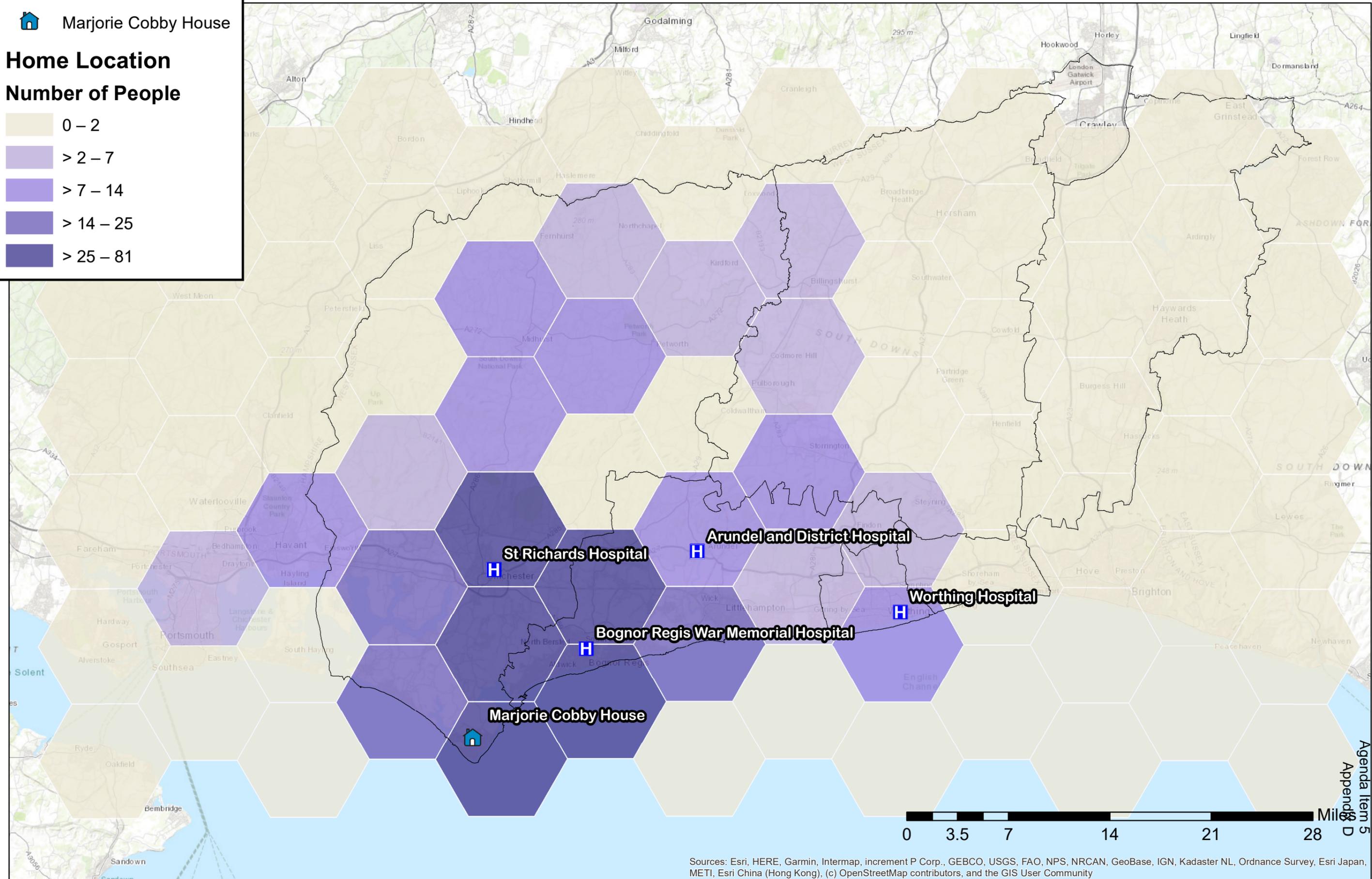
# Where people are from that have attended Marjorie Cobby House between 2018 - 2021

## Legend

-  Hospital
-  Marjorie Cobby House

## Home Location Number of People

-  0 – 2
-  > 2 – 7
-  > 7 – 14
-  > 14 – 25
-  > 25 – 81



Sources: Esri, HERE, Garmin, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL, Ordnance Survey, Esri Japan, METI, Esri China (Hong Kong), (c) OpenStreetMap contributors, and the GIS User Community

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**Key decision: Yes  
Unrestricted  
Ref: CAB08 (21/22)**

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## **Report to Cabinet**

**16 November 2021**

### **Shaw Day Services Review**

#### **Report by Executive Director Adults and Health (DASS)**

**Electoral division(s): All**

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### **Summary**

West Sussex County Council has a strategic long-term contract with Shaw Healthcare (West Sussex) Ltd to provide twelve Care Homes with 590 residential and nursing beds in West Sussex. Six of these services also have a day service offer. The day provision is accessible by people living in the community and utilisation is variable across the services. At the outset of the Covid-19 pandemic all Shaw day service provision was suspended and the day services have subsequently remained closed since 25 March 2020.

In May 2018 as part of a Shaw contract variation, the Cabinet Member decision approving the variation referenced the Council's intention to review the six adjoining day services to offset the costs of the bed reconfiguration. More recently in the Council's financial savings plan which was considered at Health & Adult Social Care Scrutiny Committee on 13 January 2021, approved at Cabinet on 22 January 2021 and agreed by County Council on 12 February 2021 further savings were identified. This made the total scope of savings from the review of the Shaw Healthcare day service provision £0.75m.

A full review has been undertaken with a public consultation. The majority of respondents did not agree with the proposal to terminate the Shaw Day Services and feel there will be a negative impact. The review however does not indicate that it would be a good use of public money to continue with the services. Therefore, following consideration of all the information, the proposal is to permanently close the day services but to ensure that alternatives are available from a mix of existing provision and the development or adaptation of existing services.

### **Recommendations**

Cabinet is asked to approve the:

- (1) Permanent closure of the Shaw Day Services and undertaking of a contract variation to remove the provision of day services from the Shaw Healthcare contract.

- (2) Utilisation of existing provision as alternatives for current and future potential customers.
- 

## **Proposal**

### **1 Background and context**

- 1.1 The West Sussex County Council 'Our Council Plan 2021 – 2025' outlines an intention to "develop and deliver a new model that uses fewer building-based day services but ensures that people have support to access the right activities and opportunities in their local community."
- 1.2 The Council has a strategic long-term contract with Shaw Healthcare (West Sussex) Ltd to provide twelve Care Homes with 590 residential and nursing beds in West Sussex; six of these services also have a day service offer. These are located at; Rotherlea in Petworth, Warmere Court in Yapton, Forest View in Burgess Hill, Burleys Wood in Crawley, Deerswood in Crawley and Mill River Lodge in Horsham.
- 1.3 In 2018 a Cabinet Member decision ([Report ref:AH2 18-19](#)) was taken to enter into a contract variation with Shaw Healthcare to reconfigure 129 of the contracted beds. The report included the decision to conduct a strategic review of the Shaw day service offer with identified savings anticipated of £0.5m.
- 1.4 The County Council agreed it's Medium-Term Financial Strategy in February and to deliver the required savings the strategic review was undertaken to assess whether Shaw Healthcare day services are required, whether they provide best value for public money, and, if not, what should change in order to deliver better outcomes for people. This review incorporates the whole Shaw day service offer, including considerations of a further £0.25m in savings. The total scope of savings is therefore £0.75m.
- 1.5 Due to the Covid-19 pandemic all six day services were closed as of March 2020 in response to the national lockdowns and restrictions, as was other day service provision across the county and indeed the country. These services have remained closed and will remain so until a decision is taken on the future of the provision.
- 1.6 At the point of closure, 91 customers were attending the Shaw day services. Customers and their family or friend carers have been supported with interim and alternative care and support arrangements whilst the services remained closed. This number has significantly reduced over the intervening period as a result of customers passing away or needs increasing to the point where other care services were required. 36 of those customers remain although the majority have suitable alternatives in place and would therefore not be likely to return to the day services if they were to open. The alternative support has included other day centre provision, increases in Direct Payments, increased care and support at home, increased breaks for carers, informal care and support from family and friend carer networks and residential services where needs increased to this level.
- 1.7 A public consultation ran from the 24 June to 5 August 2021. A summary of findings from the consultation is included at section 4, and the full report is

attached at Appendix B. In summary 158 responses to the public consultation were received. 81% (25 people) of current and former customers and 89% (40 people) of family and friend carers felt the day service was very important to them or the person they care for. 74% (23 people) of current and former customers, 84% (38 people) of family and friend carers and 76% (59 people) of stakeholders disagreed with the proposal to close the services with 58% current and former customers and 76% of carers thinking the proposal to close would have a negative impact. 70% of current and former customers and 87% of family and friend carers said it would be difficult to travel to activities in different locations.

- 1.8 Most frequently expressed concerns were on the loss of service which was valued as a 'highlight of the week', an opportunity to get out of the home, human interaction and support for people with complex needs.
- 1.9 The Council has completed the strategic review of these services which incorporated considerations of the occupancy and demand data, population projections, service costs, feedback from staff at the services, social care teams and the voluntary sector, customer engagement and an analysis of alternative provision.
- 1.10 This shows the service is under-utilised and there is insufficient demand for places meaning that the existing block payment in place under the contract with Shaw does not represent good value for money. The number of places utilised was at 40% prior to the outbreak of Covid-19. Demand for the service prior to closure as a result of the pandemic had remained at a consistent level with an average of 66 customers per month. On average there were 4 new customers entering the service and 4 customers leaving the service each month.
- 1.11 The service provides a traditional model of service and activities which provide breaks for family and friend carers and personal care alongside activities for customers. Transport and time to arrange a day service offer were highlighted as challenges but general feedback was that the service provided a positive experience with the main reasons including socialising, having a change of scene and a meal. Reports since the closure identified challenges for customers in maintaining friendship groups and relationships, impacts on wellbeing of customers and family and friend carers.
- 1.12 The review of alternative provision (outside of directly provided services) confirmed that there are thousands of community groups (community provision mapping data from 2018 contained information of over 4000 community and voluntary sector groups operating across West Sussex at either a local or countywide level across all ages) and around 100 day activity groups and organisations across the county. Some areas however have better levels of provision than others, for example Arun and Chichester. 31 private market and voluntary and community sector day services were identified through the analysis, 17 of the 31 day services had a personal care offer and the majority of those were not accepting referrals currently due to either closing to limit the spread of Covid-19, currently only opening the offer to their own residents or that they had no capacity for referrals. The remaining had limited or no availability. This analysis however did not include the directly provided day services which are not currently fully utilised because of the Covid-19 pandemic restrictions limiting full capacity, as set out in section 1.15 below, and would be able to provide alternative services for those with high levels of need within a building-based service.

- 1.13 In each area where the Shaw day services are located, a review of the types of alternatives for day provision, both available now and in the future, were considered, with a focus on low level need day activities through to high level need for personal care provision. There are community groups available in all areas, although with some limitations on availability. In all areas these community groups are for independent people but individuals are able to be accompanied by a personal assistant or family or friend carer to enable attendance if the individual has personal care needs which can be met through their accompanying person.
- 1.14 For those with a higher level of need and with personal care provided on site, the Council directly provides day services in seven locations across the county in Bognor Regis, Chichester, Littlehampton, Worthing, Shoreham, Horsham and Burgess Hill. The 'Choices for the Future' project was launched in 2016 and this programme of work set out to modernise the directly provided services. This work ensures the council provides services that meet the changing needs and aspirations of people requiring support and focus on need rather than customer groups.
- 1.15 Except for Strawford in Horsham and Burnside in Burgess Hill these facilities now provide services for a full range of need including older people with dementia, learning disabilities including autism, acquired brain injury and physical and sensory impairments, thus providing an alternative day service for people with high level personal care needs. The intention for the directly provided services was a model of modernisation that met the changing needs and aspirations of people requiring council support, no longer segregating customers by label and focusing on need rather than customer group. These day services are not fully utilised currently due to the pandemic and whilst just over 100 older customers are registered around half are not currently attending. There is potential to review the places available for older people within these services to ensure provision across each of the locations is available. It is therefore recommended that as an interim solution whilst this review is completed, four places per day are commissioned in Strawford and the same number in Burnside, which will align with the original intentions for the model. This will accommodate some existing customers in those areas whose needs are best met within a building-based day service and further customers as is required.
- 1.16 The Council Plan makes clear the intention to develop new models. There is also an intention to ensure that a range of high quality provision of services is available across the county to support residents with a range of needs. A wide range of work and developments are already underway or planned which will increase capacity and breadth of service offer, including:
- a review of services which provide a break for carers and work with partners to address any gaps,
  - a community led support focus to secure solutions for people within their own communities,
  - ongoing work with the voluntary and community sector to understand the needs of people supported within community and prevention level services,
  - development of a Market Position Statement to inform the market of areas where less day activity opportunities or solutions are identified,
  - further development of the personal assistant market and the take up of direct payments,

- development of day opportunities offered within current and new extra care schemes in line with the Extra Care Strategy,
- A longer-term review of the places utilised and needed within directly provided day services,
- feedback of the outcomes and intelligence gathered from the Shaw day service review insight on transport into the Transport Co-ordination team to inform the longer term offer for access to social care services.

1.17 A recent review of older people who were customers of the Shaw day services and would still have been attending had they still been open, concluded that alternative solutions had been found for the majority of customers. There are two customers who would like to return to a building-based service although there is an alternative which is working well and there are five customers in respect of whom an alternative long-term solution has yet to be confirmed or they specifically require a building based service if one were available. Proposals to develop the existing the existing service model of the Strawford and Burnside facilities would support the majority of these customers. For the remaining two customers support plans can be agreed that reflect the circumstances and needs of those individuals.

1.18 A focus on supporting individuals within their local communities through a range of provision, including care at home, personal assistants and accessing local community groups and resources is expected to have a positive impact.

## **2 Proposal details**

2.1 The review has taken into account the ongoing development of community-based services, consultation responses, the needs of the current remaining customers and the alternative provision available, to develop the proposals set out below.

2.2 The majority of respondents to the consultation disagree with the proposals to close the day services and a number of concerns were raised about this including the importance of supporting carers in their caring role, avoiding isolation and supporting people with higher level needs. This information has been taken into consideration and whilst the strength of feeling is recognised, the wider review and information does not indicate that it would be a good use of money to continue to provide these services given the constraint on available funding and growing demand. The proposal therefore is that Shaw day services are permanently closed and the contract varied to reflect the closure of the provision.

2.3 That the directly provided services provide four places per day over five days for older people at the Strawford site in Horsham and the same number of places at the Burnside site in Burgess Hill. This will enable these services to be focused on wider need and provide a further option for a building-based day service for older people. These services already provide services to people with a learning disability and autism. This will provide one of a range of alternative options for current and future customers and would be expected to start accepting older people from November 2021 to January 2022, if the proposals are agreed.

- 2.4 Upon completion of decommissioning of the services, a full analysis will be undertaken to determine the best use of the vacant building space that meets the strategic objectives of the Council in partnership with Shaw Healthcare.

### **3 Other options considered (and reasons for not proposing)**

- 3.1 Do nothing and retain the day services. This option is not proposed as the services are underutilised and therefore do not provide good value for public money. If the proposal is not approved the savings target will not be realised and the services will continue with low utilisation presenting a higher relative cost to the Council. It will also impact on the strategic aim to take a strengths and place based approach with customers, focusing on using new models of care and fewer building-based day services.
- 3.2 Retain one service in Crawley. With no directly provided service offer in Crawley that could be utilised and one other service that has currently limited or no capacity, retaining one service in Crawley was considered following the review. There is however not sufficient current demand to justify the cost of retaining the service. The focus therefore for Crawley will be on utilising an alternative privately provided service, personal assistants to enable customers to access other services and exploring potential for development within the extra care services within the local area.

### **4 Consultation, engagement and advice**

- 4.1 As part of the review process, the council commissioned Impact Initiatives to engage with customers and carers, prior to public consultation. This engagement aimed to identify the outcomes customers want to achieve and gather feedback on how needs have been met during the service closure and how they could potentially be met differently in the future. The feedback helped to construct the wider consultation, supported reviews of individual customers and consideration of alternatives in the interim, and was taken into account in the development of proposals.
- 4.2 A public consultation on the proposal to close the Shaw day services ran from 24 June 2021 to 5 August 2021. Current customers, their family and friend carers and community and voluntary groups were encouraged to respond with their views. In addition, the Council commissioned Independent Lives to offer support to customers and their family and friend carers who had recently attended a Shaw day service to respond and engage with the consultation. The public consultation also included feedback and responses from focus groups and an engagement session with the voluntary and community sector.
- 4.3 The public consultation findings analysis can be found in appendix A.
- 4.4 A Health and Adult Social Care (HASC) Scrutiny Committee scrutinised the proposal prior to the Cabinet decision being taken through a Task and Finish Group meeting. Comments and recommendations from the Task and Finish Group will be noted and provided to Cabinet when the decision is taken.

### **5 Finance**

- 5.1 The proposed decision will result in a reduction of £0.78m in the Council's block contract payment to Shaw. An allowance of £30k is made for the cost of reprovision, for which the need is limited because the alternative arrangements that have been put in place since March 2020 for those customers who have not

been able to attend Shaw day services has been funded within the budget. With effect from the start of the 2022/23 financial year, the outcome is that the recommendation will deliver savings of £0.75m, which is the overall amount that the council had planned to achieve.

	Year 1 2022/23 £m	Year 2 2023/24 £m	Year 3 2024/25 £m	Year 4 2025/26 £m
Savings target	0.75	0.75	0.75	0.75
Amount delivered by the proposal	0.75	0.75	0.75	0.75
Difference	Nil	Nil	Nil	Nil

5.2 Separately to this, various one-off costs are likely to be incurred in changing the contract. Under its provisions, the County Council is responsible for funding, amongst other things, Shaw's external legal fees together with any redundancies that are necessary. All such expenditure will be met from the Improved Better Care Fund.

5.3 The effect of the proposal:

**(a) How the cost represents good value**

The proposed decision represents good value for money by reducing the block contract payment for services under the contract with Shaw that are not fully utilised. Customers and family and friend carers will be supported to access alternative provision at a lower overall cost to the Council and according to customer need. Customers will receive more tailored support and will be enabled to access local community provision, including through the use of personal assistants.

**(b) Future savings/efficiencies being delivered**

The proposed decision will deliver on-going annual savings of £0.75m from 2022/23, subject to completion of the necessary contract variation with Shaw. In addition there will be potential for further benefits once a decision is made about alternative uses of the building space that will become vacant.

**(c) Human Resources, IT and Assets Impact**

The proposed decision has an impact on human resources. There is potential for redeployment and redundancies and associated costs, staff have been temporarily redeployed within the residential services since the day services closed in March 2020. Shaw Healthcare will undertake a consultation with staff and will redeploy staff where possible and appropriate to mitigate any additional liability falling to the Council.

**6 Risk implications and mitigations**

<b>Risk</b>	<b>Mitigating Action (in place or planned)</b>
Insufficient alternative provision and capacity within the affected areas of the community	Analysis of community provision undertaken to identify potential alternatives, potential capacity and services including where a personal assistant could accompany customers. Amendment to Service Level Agreement for in-house service places at Strawford and Burnside. Ongoing development of day opportunities.
Impact to customers and family and friend carers of day services permanently closing.	Services have remained closed since March 2020. Customers and family and friend carers have been supported with alternative arrangements in the interim. Customers and family and friend carers supported to access alternative services post easing of COVID-19 lockdown restrictions.
Delay of legal contract variation to achieve savings.	Resources and timescales outlined and incorporated into project delivery plan to achieve variation. The Council will work with Shaw Healthcare to achieve the legal contract variation by the end of 2021/22 to enable a full year savings for 2022/23.

## **7 Policy alignment and compliance**

- 7.1 The statutory requirements to meet the eligible needs of residents in West Sussex have been considered in relation to the closure of services and in considering and arranging alternative service solutions for existing customers and family and friend carers and future customers.
- 7.2 A full equality impact assessment was undertaken throughout the review process to fully consider the impacts on equality and human rights. The full assessment can be found in appendix B.

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### **Appendices**

Appendix A – Consultation Findings Analysis  
Appendix B – Equality Impact Assessment

### **Background papers**

None

## **Shaw Healthcare Day Services Public Consultation Findings Analysis**

### **Summary of key findings from the public consultation**

- 158 responses to the public consultation were received, comprising 146 standard surveys and 12 easyread survey responses.
- 31 responses were received from current and former Shaw Healthcare day centre customers, 20% of the total.
- 45 responses were received from family and friend carers of current and former Shaw Healthcare day centre customers, 28% of the total
- 78 responses were received from other stakeholders (49%). This included local residents, health and social workers, community and voluntary sector workers and volunteers, and independent health and social care providers.
- Two focus groups were held as part of the public consultation. Detailed analysis of the focus groups is given at Section 7 of this report.

### **Key findings from current and former Shaw Healthcare day service customer responses to the public consultation survey**

- 81% of current and former customers felt the day centre was 'very important' for them to take part in activities. 68% felt the day centres were 'very important' for personal care
- 74% of current and former customers disagreed with the proposal (disagree/strongly disagree) with 58% strongly disagreeing.
- 58% of current and former customers thought the proposal would have a negative impact, whilst only 13% thought it would have a positive impact.
- Of those who felt the proposal would have a negative impact 89% thought it would have a serious impact.
- 70% of customers said it would be difficult to travel to activities in different locations

Detailed analysis of current and former customer survey responses is given at Section 2 of this report.

### **Key findings from family and friend carers of current and former Shaw Healthcare day service customer responses to the public consultation survey**

- 89% felt the day centre was 'very important' for the person they cared for to take part in activities. 71% felt they were 'very important' for personal care.
- 87% felt the day centre was 'very important' for them to have respite from their caring role.
- 84% of family and friend carers disagreed with the proposal (disagree/strongly disagree) with 73% strongly disagreeing.
- 76% of family and friend carers thought the proposal would have a negative impact, whilst only 2% thought it would have a positive impact.
- Of those who felt the proposal would have a negative impact, 85% thought this impact would be serious.
- 87% of family and friend carers said it would be difficult to travel to activities in different locations.

Detailed analysis of family and friend carer responses to the survey is given at Section 3 of this report.

### **Key findings from other stakeholder responses to the public consultation survey**

- Overall, 76% disagreed with the proposal
- 94% felt that day centre users would be negatively impacted and 95% felt that family and friend carers would be negatively impacted.
- Clear majorities of stakeholders felt that local communities (73%), the voluntary and community sector (74%), the health and social care sector (86%) and independent health and care providers (71%) would be negatively impacted.

Detailed analysis of other stakeholder responses to the survey is given at Section 4 of this report.

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## **1 Public consultation overview**

- 1.1 The public consultation on the proposal to permanently close six Shaw Healthcare day centres ran from 24 June to 5 August.
- 1.2 The public consultation was developed in compliance with the four Gunning Principles for public consultation and every effort was made to remove any barriers to participation that people from under-represented groups, such as those from minority communities and others with protected characteristics, may face.
- 1.3 The consultation was widely promoted using a variety of channels, including media, social media, through relevant community networks and the residents e-panel, to ensure that people with protected characteristics had an equal opportunity to participate and share their views. The County Council adhered to its duties under the Accessible Information Standard and documentation was available in other formats such as easy read, large print and audio, on request.
- 1.4 A survey questionnaire was published on the Your Voice online platform and was also available in Easy Read and other formats, such as hard copy, audio or large print, on request. Easy Read versions were prepared in advance of the consultation.
- 1.5 The pre-consultation engagement had evidenced the communication needs of the current Shaw Healthcare day service customers and their family and friend carers. Consequently, telephone 'interviews' focussed on the questions in the survey were again held with these customers and carers. They were also sent hard copy surveys with a pre-paid envelope. The accompanying letter made clear that only one channel could be used to share their views. In order to maintain impartiality, 'Independent Lives' undertook the telephone interviews on the county council's behalf.
- 1.6 In total, 158 responses to the survey were received, comprising 146 standard surveys and 12 easyread survey responses.
- 1.7 31 responses were received from current and former Shaw Healthcare day centre customers, 20% of the total. 45 responses were received from family

and friend carers of current and former Shaw Healthcare day centre customers, 28% of the total. The full breakdown of responses is given in Table 1.1.

**Table 1.1 – Which of these statements is right for you?**

	<b>No.</b>	<b>%</b>
Used to attend a Shaw Healthcare day centre and would be going if it was open	25	16
Used to attend a Shaw Healthcare day centre but have stopped	4	3
Family and friend carer for someone who used to attend and would be going if it was open	27	17
Family and friend carer for someone who used to attend but has stopped	18	11
Local resident	27	17
Health and social care worker	39	25
Voluntary and community sector worker or volunteer	10	6
Work for an independent health and social care provider	2	1
Other	4	3
No response*	2	1

- 1.8 Two respondents to the hard copy version of the easy read customer survey did not answer the question (Table 1.1). These responses have been included in the current and former customer analysis.
- 1.9 57% of responses from current and former customers were completed by someone else on their behalf, whilst 40% were completed by the respondent. One respondent did not specify.
- 1.10 The proportion of current and former customers who attended each of the Shaw Healthcare day centres is given in Table 1.2, alongside the proportion of family and friend carers whose cared for attended each of the centres.

**Table 1.2 Which day service did you or the person you care or cared for attend? (%)**

<b>Day Centre</b>	<b>Customers</b>	<b>Carers</b>
Burleys Wood	6	24
Deerswood Lodge	16	16
Forest View	13	11
Mill River Lodge	42	29
Warmere Court	10	11
Rotherlea	13	7
Not sure	0	0
Not answered	0	2

- 1.11 Key community groups were invited to engage with their service users, and where possible, hold virtual/web-based 'focus groups'. A focus group pack was developed, which included Easy Read versions of the materials and an offer to facilitate sessions. Focus groups were held with the Adults Services Customer and Carer Group and the Minorities Health and Social Care Group.

## **Survey analysis**

### **2 Current and former customers of the Shaw Healthcare Day Centres**

- 2.1 As per Table 2.1, 81% of current and former customers felt the day centre was 'very important' for them to take part in activities. 68% felt the day centres were 'very important' for personal care and a further 16% felt they were 'quite important'.

**Table 2.1: Before it closed because of coronavirus, how important was the Shaw Healthcare day centre for the following? (current and former customers, %)**

	<b>taking part in activities</b>	<b>personal care</b>
Very important	81	68
Quite important	0	16
Not very important	13	0
Not at all important	3	3
Don't know	0	6
Not applicable	3	6

2.2 As shown in Table 2.2, 74% of current and former customers disagreed with the proposal (disagree/strongly disagree) with 58% strongly disagreeing. 6% agreed with the proposal, including one person who strongly agreed.

**Table 2.2 How far do you agree or disagree with the proposal? (%)**

Strongly agree	3
Agree	6
Neither agree nor disagree	16
Disagree	16
Strongly disagree	58
Don't know	0

2.3 As Table 2.3 illustrates, 58% of current and former customers thought the proposal would have a negative impact on them, whilst only 13% thought it would have a positive impact.

**Table 2.3: What impact do you think the proposal would have on you? (%)**

Positive impact	13
Neither positive nor negative	16
Negative impact	58
No impact	3
Don't know	10

2.4 Of those who felt the proposal would have a negative impact on them, eight (89%) thought it would have a serious impact and one (11%) felt it would have some impact.

2.5 Current and former customers were asked to provide more information about why they felt the proposal would impact them. The responses have been grouped into two key themes, as follows.

*Loss of the day centre*

2.6 Amongst the most frequently expressed concerns was the loss of a service which was valued by customers for a range of reasons, including the following:

- The day centres provided an opportunity to get out of the home and take part in stimulating activities and socialise with a familiar group of people (both other service users and staff). For some it was the only opportunity they had for social interaction and to take part in activities.
- It was a 'highlight of the week' that was something to look forward to, providing stimulation and motivation.
- The human interaction at the day centres was important for people with dementia.
- The Shaw Healthcare day centres could support people with more complex medical and personal support needs, which others could not. An example was given of the administration of medication, which was not possible at other day centres the respondent had attended.
- Day centres acted as a stepping-stone to residential care for people as their needs progressed, making the transition easier to manage.
- Several people had not liked other day centres they had attended and contrasted this with their positive experiences at their Shaw Healthcare day centre.

*Covid-19 pandemic*

2.7 The pandemic had negatively impacted many respondents, some of whom reported increased loneliness and worsening physical and mental health. The lengthy closure of the day centres owing to the Covid-19 restrictions had meant the loss of a valued 'outlet' which had contributed to the negative experience of this period.

### Priorities for future provision

2.8 Customers were asked to select the types of support that were important for people who may have used day centres. The results are shown in Table 2.4, including the top five ranked most important types of support.

**Table 2.4 What types of support are important for people who may have used the day centres? (%)**

Type of support	%	Rank
Specialist services/ support groups	71	=3
Personal Assistants (PAs)	52	5
Reablement	35	
Care and support at home	65	4
Community centres	71	=3
Activities for specific interests	42	
Lunch clubs	45	
Leisure centres	29	
Carer respite	77	1
Dedicated carer advice/ support	45	
Other	16	

2.9 Other options included 'experienced and knowledgeable people who understand my condition', 'opportunities to socialise in an appropriate and supportive environment', 'a small day centre' and several pleas to retain the current day centres.

2.10 Customers were also asked to select the things that were important for people to access activities and support. The findings are given in Table 2.5, including the top five ranked most important things for people to access activities and support.

**Table 2.5: Which of the following things are important for people to be able to access activities and support? (%)**

<b>Important for accessing activities and support</b>	<b>%</b>	<b>Rank</b>
Activities outside the home are local	68	5
Support and care provided locally	58	
Support and care in own home	52	
Personal care where activities take place	77	=4
Staff trained to support range of needs	90	1
Venues and facilities are accessible	77	=4
Help with mobility at venues	84	2
Less time spent travelling	48	
Support with communication	42	
Other	19	

2.11 'Other' options included that people whose level of need meant they could not take part in 'activities' were looked after and given some stimulus outside of their home in the carer's absence, a person to support someone with anxiety to attend sessions, and regular daily socialising and care.

### **Travel**

2.12 70% of customers said it would be difficult for them travel to activities in different locations. 3% said it would be easy whilst 23% said it would be neither easy nor difficult. A further 3% did not know.

2.13 The most frequently cited comment about transport was the customer's reliance on the transport provided to take them to the day centre and bring them home for them to be able to access the service. The transport was important as it could accommodate wheelchairs and people with complex needs, including medication and personal care needs. One customer noted the benefit of the social aspect of the provided transport and that if their carer had to take them to activities this would reduce their respite time.

### **Additional comments on the proposal**

2.14 Finally, customers were asked if they had any additional comments on the proposal. Comments included the following.

- Day care was essential to make a care-at-home model sustainable, as carers required regular respite to be able to continue with their caring role.

- Care at home could be isolating and support provided in the home, including personal assistants (PAs), was not equivalent to the benefits of attending a specialist day service.
- Local activities in the community were not suitable alternatives for people with higher level needs and disabilities.
- Some respondents were sceptical that their opinions would have an impact on the decision.
- The proposal was short-sighted given the growing population and increasing levels of need.
- There were several pleas to retain the services.

2.15 An alternative proposal was suggested to make day care accessible to more people, to provide more information about the service and to lower the cost.

### 3 Family and friend carers

3.1 As per table 3.1, 89% of family and friend carers of current and former customers felt the day centre was 'very important' for the person they cared for to take part in activities, whilst 71% felt it was 'very important' for personal care.

**Table 3.1: Before it closed because of coronavirus, how important was the Shaw Healthcare day centre for the following (current and former family and friend carers, %)**

	<b>Taking part in activities</b>	<b>personal care</b>	<b>Carer respite</b>
Very important	89	71	87
Quite important	9	13	7
Not very important	2	4	0
Not at all important	0	2	0
Don't know	0	9	0
Not applicable	0	0	7

3.2 87% of family and friend carers felt that the day centre was 'very important' for them to have respite from their caring role, with a further 7% saying it was 'quite important'.

#### **The proposal**

3.3 As shown in Table 3.2, 84% of family and friend carers of current and former customers disagreed with the proposal (disagree/strongly disagree) with 73% strongly disagreeing. Four respondents (8%) agreed with the proposal, including two who strongly agreed.

**Table 3.2: How far do you agree or disagree with the proposal? (%)**

Strongly agree	4
Agree	4
Neither agree nor disagree	7
Disagree	11
Strongly disagree	73
Don't know	0

3.4 As Table 3.3 illustrates, 76% of family and friend carers thought the proposal would have a negative impact, whilst only 2% thought it would have a positive impact, 9% thought it would have neither a positive nor negative impact and 11% thought it would have no impact on them.

**Table 3.3: What impact do you think the proposal would have on you? (%)**

Positive impact	2
Neither positive nor negative	9
Negative impact	76
No impact	11
Don't know	2

3.5 Of those who felt the proposal would have a negative impact, 85% thought the impact would be serious, whilst 9% felt there would be some impact. 3% felt the impact would be minor and 3% didn't know.

3.6 Family and friend carers of current and former customers were asked to provide more detail about their views on the proposal and its potential impact. A wide range of impacts were recorded. These have been grouped into the following broad themes.

*Impact on carers/carer respite*

3.7 The potential loss of carer respite was by far the most frequently cited negative impact, with many expressing concern as to whether they would be able to cope without the opportunity for respite that the day centre had afforded them.

*"When my husband was able to attend the day centre, 3 days a week. This gave me some respite to feel normal and feel part of the human race, as caring for someone 24/7 is extremely mentally draining."*

- 3.8 Concern about the potential impact of closing the day centres on carer mental health and wellbeing, and that of the person they cared for, were also frequently cited.

*"I am at burnout (again). I cannot envisage carrying on my caring role without day care provision. I/we feel totally abandoned and without an effective 'voice'"*

*Loss of the day centre*

- 3.9 Similarly to customers, family and friend carers cited a range of benefits of attending the day services for the person they cared for. In addition to those listed at 2.6, these included.

- Carers could feel reassured during their respite time that the person they cared for was at a safe and secure venue.
- The day centres had provided a stimulating and social environment for people with complex needs, including dementia and Parkinson's Disease.
- Day centres provided a familiar environment, with a regular group of attendees and staff. This continuity was valued, particularly for people with conditions such as dementia and autism, who benefited from routine.
- The staff at day centres were trained to support higher-level care needs, including manual handling and personal care.
- Day centres were viewed by some a 'lifeline' to service users and their carers and had been loved by some customers who had been attending for a long time.
- Without the day centre there could be increased travel requirements to attend different venues.
- The day centre had enabled one family carer to continue to work full time.

*Covid-19 pandemic*

- 3.10 The prolonged restrictions imposed by Covid-19 had powerfully impacted family and friend carers and the person they cared for. The closure of services and support meant that carers had lost opportunities for respite and some had been providing care without a break as a result.

*"In COvid-19 times there have been no opportunities for respite so as carer I keep going 24/7 x 7 days a week it's exhausting & my mental health has definitely suffered!"*

- 3.11 Some carers observed that the person they cared for had declined over the past year, which they felt had been exacerbated by the lack of stimulation and activities provided at the day centres.

*"I have really noticed a big change in my mum's mental wellbeing since not being able to attend her twice a week day centre sessions. These two days a week helped her cope with loneliness and mental stimulation, which is vital in people with dementia."*

- 3.12 For some carers the prospect of the centres not opening again after the experience of the pandemic was deeply concerning, as the centre's re-opening had been the '*light at the end of tunnel*'.

**Priorities for future services**

3.13 As shown in Table 3.4, carers were asked to select the types of support that were important for people who may have used day centres. Also included are the top five ranked most important types of support.

**Table 3.4 What types of support are important for people who may have used the day centres? (%)**

Type of support	%	Rank
Specialist services/ support groups	84	=3
Personal Assistants (PAs)	18	
Reablement	53	
Care and support at home	58	5
Community centres	84	=3
Activities for specific interests	47	
Lunch clubs	51	
Leisure centres	29	
Carer respite	89	1
Dedicated carer advice/ support	60	4
Other	13	

3.14 'Other' responses included.

- Advice from occupational health to adapt homes
- Knowledge that the person being cared for will be safe on a regular basis, picked up and dropped off for an affordable price
- Criticism of the proposal and perceived short-sighted cost-cutting
- A plea to retain the current day centres.

3.15 Carers were also asked to select the things that were important for people to access activities and support. The findings are shown in Table 3.5, including the top five most frequently selected options by current and former carers.

**Table 3.5. Which of the following things are important for people to be able to access activities and support? (%)**

<b>Important for people to access activities and support</b>	<b>%</b>	<b>Rank</b>
Activities outside the home are local	69	
Support and care provided locally	71	5
Support and care in own home	33	
Personal care where activities take place	76	4
Staff trained to support range of needs	93	1
Venues and facilities are accessible	80	3
Help with mobility at venues	82	2
Less time spent travelling	49	
Support with communication	29	
Other	7	

3.16 'Other' options included.

- 1:1 assistance and activities
- That support is not limited to care 'in the home' or a limit on the number of people customers can socialise with.
- Help with medication.

### **Travel**

3.17 87% of family and friend carers said it would be difficult for them, or the person they care or cared for to travel to activities in different locations. 2% said it would be easy whilst 9% said it would be neither easy nor difficult. A further 2% did not know.

3.18 Carers most frequently cited their dependence on the provided transport owing to the age and level and complexity of need of the customer, the limited mobility for many customers and the importance of wheelchair accessibility. The familiarity of the route and drivers was noted as beneficial for a customer with dementia and some carers felt peace of mind knowing that the customer was properly supported whilst being transported and returned home.

3.19 Some carers no longer drove or had a car, including one respondent who did not drive and lived 30 minutes from their parent and would therefore be required to use taxis. Other respondents worked and would not be able to manage pick-up and drop-off within their schedule. It was also noted that some carers had their own busy lives and commitments to manage.

### **Additional comments on the proposal**

3.20 Family and friend carers were asked if they had any additional comments on the proposal. Responses included the following.

- Sadness and frustration at the potential closures, particularly following the impact of the pandemic on carer health and wellbeing.
- There were several pleas to retain the services, which were 'vital' for attendees and family and friend carers.
- There were questions as to what the alternatives to the day centres would be and some scepticism that any alternative provision would be provided.
- The cumulative impact of closures reducing options for day services was cited by some. This included the previous closure of the county council's day services. Maidenbower in Crawley was given as an example by two carers.

3.21 Several alternative proposals were suggested, including:

- Raising awareness of the service to increase uptake for places.
- Increasing funding for the day services.

## **4 Other stakeholders**

4.1 78 consultation responses were received from other stakeholders, as per table 4.1.

**Table 4.1 Stakeholder group response totals**

<b>Stakeholder</b>	<b>No.</b>
Local resident	27
Health and social care worker	39
VCS worker or volunteer	10
Independent health and social care provider	2

### **The proposal**

4.2 As per Table 4.2, there was strong disagreement with the proposal from all stakeholder groups, including both provider respondents. Overall, 76% disagreed with the proposal, with 9% agreeing.

**Table 4.2: Do you agree or disagree with the proposal? (%)**

	<b>overall</b>	<b>local resident</b>	<b>health/ care worker</b>	<b>VCS</b>	<b>Providers</b>
Agree	9	7	10	10	0
Neither	13	15	13	10	0
Disagree	76	70	77	80	100
Don't know	3	7	0	0	0

### **Impact of the proposal**

- 4.3 As per Table 4.2, Stakeholders viewed the impact of the proposal as negative for all groups, most notably day centre users (95%) and family and friend carers (94%). Providers were viewed as the least negatively impacted (71%), although both providers responding to the consultation perceived the impact as negative.

**Table 4.2 What impact do you think the proposal could have on the following groups? (%)**

	<b>day centre users</b>	<b>family/ friend carers</b>	<b>local communities</b>	<b>VCS</b>	<b>Health and care</b>	<b>Providers</b>
Positive	3	3	4	8	1	9
neither	0	0	13	9	6	4
negative	95	94	73	74	86	71
None	0	0	3	0	0	0
Don't know	1	4	6	8	5	14
no response	1	0	1	1	1	3

- 4.4 Stakeholders were asked to provide more detail about the reasons for their views on the proposal and its potential impact. The following broad themes have been drawn from their responses.

#### *Loss of the day centres*

- 4.5 Similarly to day service customers and family and friend carers, the potential loss of a wide range of benefits of day centres was frequently cited by stakeholders when considering the impact of the proposal. In addition to those already given at 2.6 and 3.9, comments included.

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- Staff were trained to support people with higher-level needs and could help finding medical issues and signs of deterioration in health and wellbeing.
- Day centres were a cost-effective model, delaying long-term placements and the activities offered could also help delay the progression of conditions such as dementia.
- The day centres provided for people with complex needs and conditions such as dementia that the voluntary and community sector can't easily replace.
- Activities were social and not offered on a 1:1 basis, and this was beneficial for customers.
- Day centres provided dignified care, in a 'near normal' setting.

*Loss of carer respite*

- 4.6 The negative impact of the loss of opportunities for regular carer respite was a further major theme of stakeholder responses. There was concern that carers would struggle to cope without the opportunity for respite and this could lead to increased risk of carer breakdown. The age and frailty of many carers was highlighted, as was the demanding nature of care for people with complex conditions such as dementia.

*"If you close these facilities who is going to give these often elderly and frail carers a desperately needed day or two off a week? Would you offer an 84-year-old woman a job that was working with someone living with dementia? Hours are 24/7 and no breaks!"*

- 4.7 The day centres provided a safe space for the person cared for to be looked after and this reassurance was important for carers to feel comfortable taking respite. Some felt that home-based care alternatives would not offer the same opportunity for genuine carer respite as a day centre, whilst closure of the centres may lead to an increased demand for residential respite, which was more expensive and had less availability.

*Impact of Covid-19*

- 4.8 The pandemic was viewed as having created potentially significant additional need, owing to a deterioration in mental health, wellbeing and progressive conditions such as dementia. As a result, closing the day centres would reduce capacity at a time when this would potentially be needed to meet increased need and ease pressure on the health and social care systems.

*False economy*

- 4.9 An additional theme was that the proposal was short-sighted, as the day centres performed a valuable preventative function for customers and their family and friend carers. The removal of this preventative function could have serious impacts on customers and carers and ramifications for the wider health and social care system.

*"It is a short-sighted proposal and will result in more client isolation and distress, people experiencing carer breakdown or crisis, increasing the burden on social services in terms of finding emergency placements, increasing unnecessary hospital admissions"*

*Alternative provision*

- 4.10 A further theme in the responses was concern regarding alternatives to the day centres. Some felt that there was a lack of community provision and, where available, this was not often able to support people with complex needs and conditions such as dementia. There was a potential risk of social isolation for people with dementia in rural areas, owing to a lack of suitable provision.
- 4.11 Many community and voluntary organisations were already facing significant challenges because of the pandemic. They would also require additional funding if they were asked to innovate and develop alternative provision.
- 4.12 Some felt that it was difficult to assess the potential impact as it was not clear what the alternatives would be, and that not enough information was available in the consultation to understand this. This led to some feeling that the proposal was a cost-cutting exercise, rather than being led by need or the potential cumulative impact of closures on provision.

**Additional comments on the proposal**

- 4.13 Stakeholders were asked if they had any additional comments on the proposal. Their comments included the following.
- 'Building-based' services were important, particularly specialist services for people with conditions such as dementia. A mix of provision was needed.
  - Services that were seen to be underperforming should be supported to develop, not closed.
  - Low uptake for the day centres reflected a complex process for allocating places, not a lack of demand.
  - The county council should work more closely with partners and stakeholders across the health and care system, including voluntary and community sector providers, before decisions are made.
  - Several respondents agreed with the proposal. One was felt that there was an opportunity for a 'modern up-to-date approach', although alternatives needed to be in place.
  - Two respondents expressed concern about the current service delivery, and it was questioned whether this represented good value for money.
- 4.14 A number of alternative proposals were suggested, including:
- Undertake work to increase uptake
  - Simplify the process for accepting people into the service
  - Reduce the number of places being purchased from Shaw
  - Ring-fence funding for alternative provision
  - Close the day centres but use the sites as training hubs
  - Overhaul the service offer with a new provider

**5 Survey respondents – demographic overview**

**Age**

- 5.1 As shown in Table 5.1, current and former customers and family and friend carers both had an older age profile than respondents overall.
- 5.2 84% of current and former customers were aged 65 years and older, including 26% who were aged 85+ years old. 36% of family and friend carers were aged over 65 years old, and a further 36% were aged 55-64 years old.

**Table 5.1 Which of the following age groups best describes you? (%)**

	<b>overall</b>	<b>carers</b>	<b>customers</b>
18-24	2	2	0
25-34	8	2	0
35-44	8	4	3
45-54	15	13	0
55-64	27	36	10
65-74	25	20	48
75-84	4	7	10
85+	8	9	26
Prefer not to say	4	4	3
skipped	1	2	0

**Sex**

- 5.3 Overall, 71% of respondents were female and 23% were male. 4% preferred not to say and 1% did not respond.
- 5.4 71% of family and friend carers were female and 20% were male. 7% preferred not to say and 2% did not respond.
- 5.5 58% of current and former customers were female, and 39% were male. 3% preferred not to say.

**Ethnicity**

- 5.6 As shown in Table 5.2, large majorities of respondents were White British.

**Table 5.2 What is your ethnicity? by group (%)**

	<b>Overall</b>	<b>carers</b>	<b>customers</b>
White British	85	78	90
White other	5	4	3
Mixed	2	2	0
Asian	1	2	3
Black	0	0	0
Chinese	1	0	0
Gypsy/Irish	0	0	0
Other	0	0	0
Prefer not to say	4	7	3
no response	3	7	0

### **Disability**

5.7 As shown in Table 5.3, 87% of current and former customers had a disability, compared to 13% of carers and 27% of respondents overall.

**Table 5.3 Do you consider yourself to have a disability? By group, %**

	<b>Overall</b>	<b>carers</b>	<b>Custo- mers</b>
Yes	27	13	87
No	65	71	10
Prefer not to say	7	11	3
no response	1	4	0

5.8 As per Table 5.4, a majority of disabled respondents in all groups had a physical impairment. 43% of disabled carers had a mental health condition.

**Table 5.4 Please tell us what your disability is, by group (%)**

	<b>Overall</b>	<b>carers</b>	<b>Cust- omers</b>
Physical impairment	65	71	63
Sensory impairment	21	14	26
Mental health	33	43	33
Learning disability	14	0	22
Long-term condition	33	0	30
Other - state	21	14	26

### **Religion**

5.9 As shown in Table 5.5, 68% of customers and 51% of respondents overall and family and friend carers were Christian. Two respondents were Muslim and one was Jewish.

**Table 5.5 What is your religion? By group (%)**

	<b>overall</b>	<b>carers</b>	<b>Custo- mers</b>
Christian	51	51	68
Muslim	1	2	3
Buddhist	0	0	0
Hindu	0	0	0
Jewish	1	0	0
Sikh	0	0	0
No religion	30	22	23
Other	1	0	3
Prefer not to say	14	18	3
No response	3	7	0

### **Sexuality**

- 5.10 72% of respondents overall were heterosexual, 3% were homosexual/gay/lesbian and 1% were bisexual. 2% defined as other, 17% preferred not to say and 5% did not answer the question.
- 5.11 73% of carers were heterosexual. 20% preferred not to say and 7% did not answer the question.
- 5.12 58% of customers were heterosexual, 16% were homosexual/gay/lesbian and 6% defined as other. 10% preferred not to say and a further 10% did not answer the question.

### **Gender re-assignment**

- 5.13 85% of respondents overall had the same gender as the one they were assigned at birth and one person's (1%) gender was different. 8% preferred not to say and 6% did not answer the question.
- 5.14 76% of carers had the same gender as the one assigned to them at birth, 11% preferred not to say and 13% did not answer the question.
- 5.15 97% of customers had the same gender as the one assigned to them at birth and 3% preferred not to say.

### **Pregnancy/maternity**

- 5.16 One respondent (1%) was currently pregnant/ been pregnant in the last six months, 84% were not, whilst 9% preferred not to say and 7% did not answer.
- 5.17 73% of carers were not pregnant/been pregnant in the last six months, while 13% preferred not to say and a further 13% did not answer the question.
- 5.18 90% of customers were not pregnant/been pregnant in the last six months, whilst 6% preferred not to say and 3% did not answer the question.

## **6 Focus Groups**

- 6.1 Two focus groups were held as part of the consultation, as follows.

- Adults' Services Customer and Carer Group
- Minorities Health and Social Care Group

6.2 Participants discussed four questions regarding the proposal, it's potential impact and the priorities for future provision.

### **Views on the proposal**

- 6.3 In both focus groups there was concern that the proposal was being put forward before it was clear what alternative provision was available. The importance of ensuring adequate provision was in place before closing the day centres was stressed in both groups.
- 6.4 There was some concern that the proposal assumed that other organisations were available to provide local support, which may not be the case. For example, in Worthing there were only a small number of organisations/centres which supported older people and in Crawley there were already waiting lists for some day services. It could also be a 'logistical nightmare' transporting people between different community-based activities and services, rather than a single location.
- 6.5 Owing to changes in strategic approach, many voluntary and community providers had increasingly withdrawn from the provision of clubs/centres providing day activities and now looked for others to provide, while they focussed on different types of support.
- 6.6 Community-based activities were often not suitable for people with higher level needs, including dementia. An example was given of volunteer-run lunch clubs, which did not have the skills to support greater needs or a secure venue. This issue was particularly acute for people living in rural areas such as Midhurst and Petworth, who may have long journeys to Chichester to access services.

### **Views on the impact of the proposal and the reasons for that impact**

- 6.7 As with the responses to the surveys, the benefits of the day centres for the wellbeing, motivation and stimulation of attendees were emphasised in both focus groups. Many people attending day centres were used to the people around them and had made friends there.
- 6.8 The importance of the day centres in maintaining carer mental health and wellbeing whilst ensuring respite was also emphasised in both focus groups.
- 6.9 Overall, day centres made an 'unbelievable, massive' difference to people and were 'godsend' for customers and their carers.
- 6.10 The benefits of the day centres had been illustrated by their closure during the pandemic. One participant's disabled relative attended a day centre (not provided by Shaw Healthcare) and they had observed a marked deterioration in their relative's skills retention and stimulation when the centre had been shut.
- 6.11 In both groups it was noted that the loss of the day centres could lead to isolation, impacts on mental health and wellbeing and the likelihood that people would develop more complex care needs. This could potentially lead to an increase in long-term, residential placements that could ultimately be more costly for the county council than maintaining the day centres.

**Views on the types of support that are important for people who may have used the day centres and their family and friend carers**

6.12 Participants discussed a range of priorities for people who may have attended day centres, including the following:

- 'Most important' was for people to be in a different environment to their home, as this can become 'like a prison'. Getting out could help someone return home a 'completely different person'.
- Familiarity of place was 'key'. It could be 'transformative' when people get used to a place and this could lead to less challenging behaviour. People couldn't simply swap locations; they needed to feel comfortable and confident. This was particularly important for people with dementia.
- Places that provided a secure environment, where people can feel safe and are with communities of similar service users/needs.
- Support with personal care, for example, bathing and toileting.
- Reliable transport must be available – people needed to be picked up and taken home, with support workers to assist them.
- Culturally specific services to cater to the needs of diverse communities, for example appropriate food.

**Additional comments on the proposal**

6.13 A range of additional comments on the proposal were raised in the focus groups, including the following:

- The ethos of day services should be rethought, with an emphasis on equity of care and a greater understanding of diverse communities and their needs. Burleys Wood was cited as an example of a service that had focussed on cultural competency for the South Asian community.
- A participant had been working with the South Asian community to encourage greater use of support and activities that take place outside of the home, providing respite for family members. A reduction in provision, particularly culturally sensitive services such as Burleys Wood, risked undermining this work and turning the widespread assumption that South Asian families always provide care within the family into a self-fulfilling prophecy.
- If we want more people from diverse communities to come forward earlier for diagnosis for conditions such as dementia, we need to provide a range of suitable support for them to access throughout the pathway.
- Being part of the community was 'wonderful' but would require a lot of planning and may need more resources than the current day centre model.
- Extensive cuts to services since 2010, including the closure of the county council's own day centres, had been premised on community-based alternatives 'popping up everywhere', but these had not materialised.
- Carers must be part of the conversation around alternative support.
- Talk to the voluntary sector and voluntary and community sector organisations in every major town as these had expertise on what was available locally.
- The pandemic had 'blown apart' the usual structure of life and people's mental and physical health had suffered to a great extent. People needed an 'anchor' to help them rejoin society.
- There was not uniform quality of services, including those that were inspected by the Care Quality Commission. The council needed to ensure it effectively scrutinised services and assessed providers.

- The county council needed better follow-up of safeguarding concerns in care homes, as carers did not always feel it was safe to leave the person they were caring for in these services.

6.14 Several alternatives to the proposal were suggested, including:

- Carry out research into the use of the centres before taking a decision, to demonstrate that this was an evidence-based decision.
- Don't necessarily close all the centres.
- If there are more places than are being used, then consider a reduced offer in the same space, rather than shutting down the service.

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# Equality Impact Assessment

## Equality Impact Assessment Form

### 1. Contact Details

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**Submission date:**

### 2. About the Policy, Procedure or Change

2.1 Shaw Healthcare Day Service review.

2.2 The county council spends around £950k per year on day services for older people provided by Shaw Healthcare, as part of the current block contract. The contract has been in place for approximately 16 years and day services are provided at six of the twelve residential settings.

2.3 The day services closed on 25 March 2020 due to the COVID-19 pandemic restrictions and have not re-opened. Prior to the pandemic, occupancy at the day services had been historically low, averaging 40% in the first months of 2020.

2.4 As a result, a review of demand, value for money, and relevance for the future, commenced in January 2020. A corporate savings target of £750k was set against the review.

2.5 The recommendation following the review is to permanently close all six Shaw day services and to utilise existing provision as alternatives and the development of already existing services.

2.6 The following list are the key stakeholders.

- People who use the Shaw Healthcare day services
- People who would have used/required the services during the period of closure
- Family and friend carers of people using the day services
- Future users of the day services
- Shaw Healthcare
- Other day service providers
- Voluntary and community sector organisations and groups

2.7 A comprehensive stakeholder list was developed as part of the engagement and consultation planning.

2.8 At the time of the March 2020 closures, 91 people were registered as attending the day services. Over subsequent months the number of people either able to or wishing to return has dropped to 36.

2.9 The services are aimed at older and/or disabled people. Current customer numbers for the day services are as follows.

Table 2.1 – Current customer numbers

<b>Day service</b>	<b>Number of current customers</b>
Rother Lea	2
Waremere	4
Mill River	11
Deerswood	6
Forest View	9
Burleys Wood	4

- All current customers have been assessed as having eligible social care needs
- The level of need varies among customers, ranging from lower level to more complex needs, but all have a personal care requirement for day activities
- All customers have a level of disability
- 10 customers (18%) have a dementia diagnosis
- 29 customers (64%) require support to communicate/someone to communicate on their behalf
- Six (13%) are Lifelong Services customers who have learning disabilities and live in a residential service which does not offer day activities. These have been accessed externally, via Shaw Healthcare day centres
- 18 customers (40%) are male and 27 (60%) are female
- One customer lives in sheltered accommodation
- Approximately two-thirds of family and friend carers/representatives are female and one-third are male.

### **3. Data collection; consultation; and evidence**

Following closure (March 2020 – present), the needs of current Shaw Healthcare day service customers and their family and friend carers have been paramount during the period of the day service closures owing to the pandemic. Multiple contacts were made with these people throughout this period, as outlined below.

- Shaw Healthcare contacted every customer and their family and friend carer to check on their wellbeing, to find out how people were managing following the closures and they referred people to Adults' Services, as necessary.

- The county council has been working with current customers and their family and friend carers during the period of closure to ensure that their social care needs continue to be met. This has been through the provision of alternative support that has been tailored to individual needs.

### **3.1 Pre-consultation engagement (15 March- 6 April 2021)**

The county council commissioned Impact Initiatives to carry out a survey with current customers and their family and friend carers on its behalf to enable to find out the following.

- understand the outcomes they want to achieve,
- their views on how these have been met during the day service closures,
- how they could potentially be met differently in the future.

Impact Initiatives is an independent charity experienced at working with and supporting people with disabilities. They worked to a comprehensive service specification focussed on enabling people with disabilities to participate and share their views.

The Impact Initiatives findings report highlighted several impacts on current customers and family and friend carers of the ongoing closure of the day services. These include the following.

#### *Current customers*

- Loss of regular social contact. None of the current customers who participated in the engagement were able to socialise independently.
- Some reported a loss of stimulation from not taking part in regular activities.
- Loss of opportunity for a regular 'change of scenery' with a reason to get dressed, travel and a meal away from their home.

#### *Family and friend carers*

- Loss of respite and, for some, potential risk of carer breakdown
- Some family and friend carers had been required to increase their caring responsibilities
- Some family carers had changed their work arrangements to provide additional care, whilst others had been required to purchase additional care

#### *Other findings*

- Anxiety at the potential lack of suitable alternative options should day services remain closed.
- Concern that other venues or activities may not be suitable owing to the level of additional support current customers required to participate.
- 92% of current customers were not able to travel independently and 87% used the day centre vehicle as their method of transport to the centres.

It is important to note that the engagement was conducted following a year of day centre closures because of the COVID-19 pandemic. Over the course of 2020-21 many other services, sources of community support and sectors of the economy, had also been severely limited, suspended or withdrawn and many remained either closed or restricted at the time of the engagement. The findings of the pre-consultation engagement should be understood within this context, as this may have exacerbated people's more negative experiences.

### **3.2 Public Consultation 21 June – 5 August**

The public consultation ran from 21 June 2021 to 5 August 2021. Full details of the consultation and the comprehensive findings analysis are available at appendix A to the decision report.

Older people are disproportionately impacted as the services which are changing are essentially aimed at this demographic, as evidenced in sections 5.1 to 5.2 of the public consultation findings analysis at appendix A.

84% of current and former customers were aged 65 years and older, including 26% who were aged 85+ years old.

The services which are changing also provide respite for family and friend carers, including those who are themselves older people. 36% of family and friend carer respondents to the consultation were aged over 65 years old, and a further 36% were aged 55-64 years old.

### **3.3 Impacts for day centre customers**

- The potential loss of the principal, or only, opportunity to get out of the home and take part in stimulating activities and socialise with a familiar group of people (both other service users and staff). This could lead to a loss of motivation and increased risk of isolation.
- The Shaw Healthcare day centres were able to support people with more complex medical and personal needs, which alternatives may not.
- Day centres acted as a stepping-stone to residential care for people as their needs progressed, making the transition easier to manage.
- Care at home could be isolating and support provided in the home, including personal assistants, was not equivalent to the benefits of attending a specialist day service.
- Day centres provided dignified care, in a 'near normal' setting.
- The COVID-19 pandemic had negatively impacted many consultation respondents, some of whom reported increased loneliness and worsening physical and mental health. The lengthy closure of the day centres owing to the COVID-19 restrictions had contributed to this experience.

### **3.4 Disability:**

Disabled people are disproportionately impacted. The services which are changing are aimed at older people, some with higher-level social care and health needs, including dementia and physical and sensory impairments, and some adults with learning disabilities.

Impacts for day centre customers

- The day centres provided a familiar environment, with a regular group of attendees and staff. This was of particular importance for people with conditions such as dementia and autism, who benefit from routine.

- Activities offered by the day centres could help delay the progression of conditions such as dementia.
- Day centres provided for people with complex needs and conditions such as dementia that the voluntary and community sector could not easily replace.
- There was a potential risk of social isolation for people with dementia in rural areas, owing to a lack of suitable alternative provision.
- 70% of customers responding to the consultation said it would be difficult for them travel to activities in different locations. 3% said it would be easy whilst 23% said it would be neither easy nor difficult. A further 3% did not know.

### 3.5 **Gender (sex):**

The changes are to services which are not gender (sex) specific, and gender (sex) specific activities are not part of the service offer. However, family and friend carers of day service customers will be disproportionately impacted as the services which are changing provide respite opportunities.

Two-thirds of family and family carers of current customers are women (see above data). In addition, see the 'caring responsibilities' section below for further discussion of impacts on carers.

### 3.6 **Race**

Prior to the pandemic, Burleys Wood in Crawley had developed culturally competent services, working with the local voluntary and community sector. Closing the site risks undermining ongoing work to encourage South Asian families to seek support and turning the widespread stereotype that South Asian families provide care within the family into a self-fulfilling prophecy.

Encouraging people from diverse communities to come forward earlier for diagnosis for conditions such as dementia requires a range of suitable, culturally sensitive support for people to access at all stages of their care pathway.

### 3.7 **Caring responsibilities**

Carers will be disproportionately impacted by any changes to the Shaw Healthcare day services. The services provide opportunities for a break for carers, which are crucially important to enable them to maintain their wellbeing and fulfil their caring role with the assurance the person they are caring for is appropriately looked after and safeguarded.

As evidenced above, this group intersects with gender (sex) as two-thirds of family and friend carers of current customers are women and age, as most of this group are likely to themselves be older (see under section 'who the changes apply to').

76% of family and friend carers thought the proposal would have a negative impact, 85% of whom thought the impact would be serious.

- The age and frailty of many carers was highlighted in the public consultation, as was the demanding nature of care for people with complex conditions such as dementia and the importance of regular respite.
- The loss of a break for carers was by far the most frequently cited negative impact in the public consultation, with many carers expressing concern as to whether they would be able to cope without the opportunity for a break that the day centre had afforded them, increasing the risk of carer breakdown.
- Home-based care alternatives would not offer the same opportunity for genuine carer breaks as a day centre.
- Closure of the centres may lead to increased demand for residential respite, which was more expensive and had less availability.
- The day centres provided carers with peace of mind that the person they cared for was in a safe and secure environment. This enabled them to feel comfortable taking respite.
- The day centre had enabled one family carer responding to the public consultation to continue to work full time.
- The prolonged restrictions imposed by COVID-19 and the closure of services and support meant that some carers had been providing care without a break for a prolonged period.
- 87% of family and friend carers responding to the public consultation said it would be difficult for them, or the person they care or cared for to travel to activities in different locations.
- Alternative provision for five of the day centres may require individuals to be accompanied throughout a session by a personal assistant or family and friend to enable attendance if the individual has personal care needs. This could significantly reduce the opportunity for carer respite and increase the burden on carers.

### **3.8 Gender reassignment:**

No impact – the changes are to services which are offered on a health and care needs-basis only. They are not gender-specific and therefore people undergoing or having undergone gender reassignment will not be disproportionately impacted.

### **3.9 Marriage or civil partnership**

No impact – the changes are to services which are offered on a health and care needs-basis only. This would not disproportionately impact on people's marriage or civil partnership status.

### **3.10 Pregnancy and maternity**

No impact - the changes are to services which do not provide maternity or pregnancy-related support. This would not disproportionately impact on pregnancy or maternity status.

### **3.11 Religion or belief (including no belief):**

No impact - The changes are to services which are offered on a health and care needs-basis only.

### 3.12 **Sexual Orientation:**

No impact - The changes are to services which are offered on a health and care needs-basis only.

### 3.13 **Part time workers:**

Not applicable

### 3.14 **Socio economic groups (e.g. unemployed; students;):**

Not applicable

### 3.15 **Other socially excluded communities or groups (e.g. homeless):**

Not applicable

### 3.16 **Mitigations**

In response to the review and consultation findings, the county council proposes to:

- Continue to direct customers to preventative community-based activities and groups as part of the Council's commitment to community led support and to source solutions based on individual circumstances and need.
- Provide an additional 40 places across the week within the county council's directly provided day services to incorporate places for older people at the Strawford Centre, Horsham and the Burnside Day Centre, Burgess Hill.
- Further develop the Personal Assistant (PA) market to support customers to access community provision with the support of a PA.
- Increase the uptake of direct payments to people with support needs to enable them to directly employ PAs.
- Work with providers to identify gaps in day service provision and to inform areas for future service development in the independent provider market.
- Feedback the information on transport from the day services review and public consultation findings to the Transport Coordination Team, enabling people to access care and support in the future.
- Adults' Services staff adopt a 'Think Carer' approach when working with people needing social care support and are mindful of the needs of carers and the impact of their caring responsibilities on their mental and physical wellbeing.

- The council contract with Carers Support West Sussex to carry out carer assessments on its behalf and to provide a wide range of services to meet carer needs. This includes information and advice, equipment to support independence and signposting carers to other appropriate services.
- A team of health professionals (the Carers Health Team) work on a one-to-one basis with carers whose health is beginning to suffer as a result of their caring responsibilities.
- Complete the review of services that provide, or indirectly provide, family and friend carer breaks which is currently underway. On completion, an outline of the potential gaps in service will be circulated to providers with a view to working with them and other partners to address any shortfall in places, geographical gaps in provision, and transport/accessibility matters.
- Develop the day opportunity offer within current and new extra care schemes. This includes an understanding of the potential capacity, capability and range of day activity provision at extra care schemes that can be made available to the wider community.

#### 4. Summary and Progressing the Equality Duty

- a) Is there an opportunity to use this policy, procedure or change to show we are working to progress any of part of the Public Sector Equality Duty?

Replacing geographically based services with community-led support can benefit some individuals unable or unwilling to travel any distance where there are lower levels of need. In addition, tailoring support to people's individual circumstances can enable the provision of specific services to meet diverse needs, thereby helping to improve equality of opportunity between different protected groups.

Adults' Services operates in full knowledge of the need to acknowledge diversity, meet its duties under equalities legislation and to minimise disadvantage and this will inform implementation of the decision.

Every effort was made to enable people from under-represented groups, and those with protected characteristics to share their views and influence proposals.

The County Council will ensure that any alternative provision meets equalities legislation through the commissioning process.

- b) Please provide a summary of the overall findings and rate your analysis.

**Red** – As a result of performing the analysis, it is evident a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups who share Protected Characteristics (and/or local non-legislative factors). In this instance, **it is recommended that the use of the activity or policy be suspended** until further work or analysis is performed. If it is considered this risk of

discrimination is objectively justified, and/or the use of this proposal (policy, activity, function) is a proportionate means of achieving a legitimate aim, this should be indicated, and further professional advice taken.

**Amber** – As a result of performing this analysis, it is evident a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing actions or control measures detailed in the action planning section of this document.

**Green** – As a result of performing this analysis, **no adverse effects** on people who share Protected Characteristics and/or local non-legislative factors are identified – no further actions are recommended at this stage.

Following the day services review and public consultation, a number of potential impacts for selected 'equality groups' have been highlighted in this Equality Impact Assessment. A range of mitigations has been outlined and as a result, the analysis is rated as Amber.

## **5. Action Planning**

As per mitigations, above. Planned timescales following decision.

## **6. Identified Impact(s) on Protected Characteristic or local non-legislative factor(s):**

As above.

### **Recommended Actions:**

As per mitigations above. Action plan to be developed.

**Responsible Lead Officer:** Juliette Garrett

**Completion date:** to be agreed following decision.

**Review date:** TBC

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**Key decision: Yes  
Unrestricted  
Ref: CAB09 (21/22)**

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## **Report to Cabinet**

**16 November 2021**

### **Gatwick Northern Runway Project: approval of consultation response**

#### **Report by Director of Highways, Transport and Planning**

**Electoral division(s): All**

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#### **Summary**

Gatwick Airport Limited (GAL) proposes alterations to bring the existing Northern (standby/maintenance) Runway at Gatwick Airport into routine use alongside the main runway, enabling the dual operation of both runways. The proposal, the Northern Runway Project (NRP), is a Nationally Significant Infrastructure Project (NSIP) requiring a Development Consent Order (DCO) from the Secretary of State (rather than planning permission from the local planning authority). The County Council is a statutory consultee in the DCO process, and it has specific responsibilities as a 'host' authority.

The NRP comprises the following works, most of which would be contained within the existing airport boundary: repositioning of the Northern Runway and reconfiguration of taxiways; expansion of the North and South terminal buildings; a new Pier and amendments to aircraft stands; other airport facilities including a waste facility, a new hangar, and new fire training grounds; new office space and hotel rooms; additional car parking spaces; road improvement works; and environmental and mitigation measures. The Northern Runway would be operational by summer 2029, with the construction of other elements continuing until 2038. The project would increase Gatwick's passenger throughput by approximately 13.2 million passengers per annum by 2038.

In advance of an application for consent being submitted, GAL is undertaking formal consultation from 9 September to 1 December 2021 on a Preliminary Environmental Information Report (PEIR), which identifies the likely significant impacts of the NRP and any required mitigation.

A detailed analysis of the PEIR has been undertaken, with consideration being given to likely significant impacts (both direct and indirect) and whether those impacts are considered to be positive, negative, or neutral (taking into account any proposed mitigation measures). Consideration has also been given to whether further work could be undertaken by GAL, including mitigation measures, to address issues identified as being significantly negative.

In summary, the County Council cannot support the NRP because there are a number of matters of significant concern that need to be satisfactorily addressed by GAL, including: the basis for the passenger forecasts and underlying assumptions; the justification for supporting infrastructure; the assessment of the 'waste' facility,

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including proposed technology; clarity on the suggested socioeconomic benefits, including the number, type, quality, and location of jobs created, the link between current labour supply and jobs created, and local economic benefits; the need for new homes and associated infrastructure; concerns relating to traffic and transport, including assumptions about mode share for both passengers and staff; impacts on noise and air quality from both construction and operational phases; concerns about greenhouse gas emissions and impacts on climate change, and understanding how airport expansion can be justified given national and international carbon reduction targets; and the need for enhancement measures (including to Public Rights of Way, recreational facilities, and ecological habitats).

The consultation response accords with the Notice of Motion on the NRP approved by County Council on 22 October 2021.

### **Recommendations**

That Cabinet:

- (a) approves the comments in paragraphs 2.36-2.98 of the report and the detailed comments on the PEIR in Appendix C of the report as the County Council's formal response to the consultation on the Northern Runway Project;
- (b) authorises the Director of Highways, Transport, and Planning to respond to any further stages of pre-submission consultation - in support of the formal response approved under (a);
- (c) if an application for a Development Consent Order is submitted, authorises the Director of Highways, Transport, and Planning to:
  - (i) approve the County Council's 'adequacy of consultation' response;
  - (ii) prepare and submit the County Council's written representation and Local Impact Report, and to negotiate with the applicant on the DCO requirements, any S106 Agreement, and the preparation of a Statement of Common Ground – all in support of the formal response approved under (a); and
  - (iii) attend the examination hearings and answer the Examining Authority's questions in support of the County Council's position; and
- (d) if a Development Consent Order is made, approves the County Council becoming a relevant authority for the discharge of requirements, provided that the Authority's costs are met in full.

### **Proposal**

#### **1 Background and context**

- 1.1 In 2012, the Planning Inspectorate (PINS) became the agency responsible for operating the planning process for nationally significant infrastructure projects (NSIP). NSIPs are usually large-scale developments such as new harbours, power generating stations, and electricity transmission lines, that require 'development consent' from the relevant Secretary of State under the Development Consent Order (DCO) process, rather than planning permission from the relevant planning authority.
- 1.2 Any developer wishing to construct an NSIP must submit an application for consent. Following submission, PINS examines the application and makes a recommendation to the Secretary of State, who will make the decision on whether to grant or to refuse development consent. Once made, a DCO

provides all the approvals (for example, planning permission, compulsory purchase) required for a development to proceed.

- 1.3 Gatwick Airport Limited (GAL) proposes alterations to bring the existing Northern (standby/maintenance) Runway at Gatwick Airport into routine use alongside the main runway, enabling the dual operation of both runways. The scheme, known as the Northern Runway Project (NRP), is a NSIP because throughput at the Airport would increase by over 10 million passengers per annum (mppa) and so requires development consent. Given that the scheme is in West Sussex, the County Council is a statutory consultee in the DCO process.
- 1.4 In advance of an application for consent being submitted, GAL is undertaking formal consultation from 9 September to 1 December 2021 on a Preliminary Environmental Information Report (PEIR), which identifies the likely significant impacts of the NRP and any required mitigation. In addition to consultation on technical matters, it also involves consultation with the public in accordance with the Statement of Community Consultation (SoCC), a formal document that sets out how GAL proposes to consult the community.
- 1.5 This report outlines the scheme and the key areas for consideration by the County Council in making a formal response to the consultation.

## **2 Proposal details**

### ***Background***

- 2.1 In July 2019, GAL revised its non-statutory Gatwick Airport Master Plan, which sets out its plan for the next five years, together with three growth scenarios looking 5-15 years ahead to 2032.
- 2.2 In responding to the consultation on the draft Master Plan in January 2019, the County Council recognised that the Airport is a significant asset in terms of its contribution to the local economy. Therefore, it welcomed sustainable growth at the airport where it would be consistent with the Authority's West Sussex Plan and Economic Growth Plan, and the C2C Strategic Economic Plan (Gatwick 360°). However, the general 'in principle' support for growth at the Airport should not be interpreted as support regardless of the impacts.
- 2.3 The NRP first surfaced as a concept as Scenario 2 in the draft Master Plan. In responding to the consultation, the County Council neither supported nor objected to the idea but reserved its position at that stage given the lack of detail and supporting evidence provided by GAL.
- 2.4 It should be noted that regardless of whether the NRP is consented and implemented, passenger throughput at Gatwick will continue to grow using the main runway from approximately 47mppa – pre-pandemic figures - to approximately 62.4mppa by 2038. This is likely to be achieved through a combination of greater use of the airport in the off-peak periods, more intensive use of the runway at the peak periods, and a shift to larger aircraft and higher load factors. Any changes that do not involve physical development are outside the scope of the planning system.

### ***Northern Runway Project***

- 2.5 The NRP comprises the following works, most of which would be contained within the existing airport boundary:

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- repositioning of the Northern Runway (12m north) and reconfiguration of taxiways. Smaller aircraft only would depart from the Northern Runway and would continue to use existing flightpaths;
- expansion of both the North and South terminal buildings;
- a new Pier (no.7) and amendments to aircraft stands;
- other airport facilities including a waste facility, a new hangar, and new fire training grounds;
- new office space (9,000m<sup>2</sup> floorspace) and 1,000 new hotel rooms over three new hotels;
- an additional 18,500 car parking spaces;
- road improvement works to the South Terminal Roundabout, North Terminal Roundabout, and Longbridge roundabout; and
- environmental and mitigation measures, including new runoff and storage ponds and flood compensation areas.

2.6 The project would further increase Gatwick's passenger throughput to approximately 75.6mppa by 2038, an increase of approximately 13.2mppa (over the 'without project' projection of 62.4mppa – see paragraph 2.4). By 2047, passenger throughput would be approximately 80.2mppa, an increase of 13.0mppa over the 'without project' projection of 67.2mppa.

2.7 GAL state the benefits of the NRP to be as follows:

- aligns with Government policy of making best use of existing runways at all UK airports;
- in comparison to the existing situation and continued growth using the main runway, provides greater UK point-to-point airport capacity to assist in delivering unmet Department for Transport forecasted aviation demand to 2050 (whilst complementing the UK hub capacity provided by the expansion of Heathrow with a third runway);
- an increase in flights, improved connectivity, increased employment and economic benefits to the local area with a much-reduced scale of environmental impact (compared to that arising from an additional new southern runway);
- creates economic benefits to the national, regional, and London economies, including through supporting inward investment for business travellers and tourism;
- provides additional operational resilience for the airport with the flexibility to routinely use two runways whilst minimising growth outside of the airport boundary;
- does not prejudice the long-term safeguarding of land to the south of the airport for a future additional runway; and
- delivers significant local economic benefits, including further employment and training opportunities for local people, supply chain opportunities for local businesses, increased local retail and leisure expenditure, and other economic stimuli to the local area.

2.8 Although land to the south of the airport continues to be safeguarded in the long-term for an additional runway, in accordance with national policy, GAL is not actively pursuing that scheme in light of the Government's support for the third runway at Heathrow. Accordingly, a southern runway at Gatwick does not

form part of the NRP and, as such, it is outside the scope of the current consultation by GAL.

- 2.9 The broad timetable for the scheme is submission of the DCO application in late 2022, followed by examination through to late 2023 and a decision by mid-2024; more information on the DCO process is set out in paragraphs 2.11-2.19.
- 2.10 If consent is awarded, work would not start until 2024 with the Northern Runway operational by summer 2029 and the construction of other elements continuing until 2038.

***DCO Process***

- 2.11 There are six stages in the DCO process.

*Pre-application*

- 2.12 Before submitting an application for consent, potential applicants have a statutory duty to carry out consultation on their proposals; this is the current stage for the NRP. The consultation provides the best opportunity for consultees, such as the County Council, and third parties to try to influence the project, whether they agree with it, disagree with it, or believe that it could be improved.

*Acceptance*

- 2.13 The Acceptance stage begins when an applicant submits an application for development consent to PINS. Key documents submitted by the applicant will include the draft order, which will include a number of legislative clauses (relating to matters such as statutory nuisance, tree protection orders, and stopping-up of public rights of way) and 'requirements', which are akin to the conditions attached to planning permissions. Documents relating to mitigation of the scheme may also be submitted, for example, a Code of Construction Practice, Environmental Management Plans, S106 Planning Agreement, and topic-specific strategies.
- 2.14 There follows a period of up to 28 days (excluding the date of receipt of the application) for PINS, on behalf of the Secretary of State, to decide whether the application meets the standards required to be accepted for examination. This includes consideration of the adequacy of the applicant's consultation prior to submission.

*Pre-examination*

- 2.15 At this stage, the public will be able to register with PINS to become an 'Interested Party' by making a Relevant Representation, which is a written summary of a person's views on an application. As a statutory consultee, the County Council is automatically 'registered' as being an Interested Party. An Examining Authority is appointed at the pre-examination stage, and all Interested Parties will be invited to attend a Preliminary Meeting, run and chaired by the Examining Authority (i.e. a panel of inspectors).
- 2.16 Although there is no statutory timescale for this stage of the process, it usually takes approximately three months from the applicant's formal notification and publicity of an accepted application.

*Examination*

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- 2.17 PINS has up to six months to carry out the examination. During this stage, Interested Parties are invited to provide more details of their views in writing. Careful consideration is given by the Examining Authority to all the important and relevant matters, including written representations, key documents, and any supporting evidence submitted by Interested Parties, and answers provided by them to the Examining Authority's questions (set out in writing or posed at hearing sessions).

### *Recommendation and Decision*

- 2.18 PINS must prepare a report on the application to the relevant Secretary of State, including a recommendation, within three months of the close of the six-month Examination stage. The relevant Secretary of State then has a further three months to decide whether to grant or refuse development consent.

### *Post decision*

- 2.19 Once a decision has been issued by the relevant Secretary of State, there is a six-week period in which the decision may be challenged in the High Court. This process of legal challenge is known as Judicial Review.

## **Role of the County Council**

### *Pre-Application*

- 2.20 In September 2019, PINS asked the County Council, as a statutory consultee, to comment on a scoping request by GAL, the purpose of which was to identify the information to be provided in the Environmental Statement (ES), which will be part of the DCO submission); officers made detailed technical comments in response. In October 2019, PINS issued a Scoping Opinion, which is binding on GAL.
- 2.21 Although the Planning Act 2008 is not prescriptive, the spirit of the Act is about front-loading the DCO process and early engagement by applicants with stakeholders and others. Unfortunately, GAL has not engaged with the County Council (and other Gatwick local authorities) in a positive and proactive manner during the development of the NRP over the past 2.5 years. Although some general information was shared with officers in late 2019 and early 2020 before work was paused due to the COVID-19 pandemic, GAL has not shared any background studies and there have been no opportunities for officers to inform evidence gathering or to contribute to it since work on the NRP formally restarted in January 2021. The only area where GAL has formally engaged with the County Council is in seeking comments in spring 2021 on its draft SoCC.
- 2.22 In advance of an application for consent being submitted, GAL is undertaking formal consultation on the PEIR, which identifies the likely significant impacts of the scheme and any required mitigation. The [Non-Technical Summary \(NTS\)](#) of the PEIR is on GAL's consultation [website](#). As identified above, this is a key stage in the process and the County Council's suggested response, for which approval is sought, is set out in paragraphs 2.36-2.98 below.

### *Submission*

- 2.23 If an application is submitted, the County Council, as a statutory consultee, will be expected to engage in the post-submission stages of the process.
- 2.24 As part of the acceptance process, the County Council will be asked to comment whether the pre-submission consultation undertaken by GAL accords with their

SoCC. In addition to any concerns that the County Council may have, it must also consider the views of any third parties that consider the consultation to be inadequate. Accordingly, delegated authority is sought for officers to approve the County Council's 'adequacy of consultation' response.

*Examination*

- 2.25 If the submission is accepted by PINS, the County Council will be invited to submit a written representation and a Local Impact Report (LIR - see paragraph 2.26). It will also be expected to negotiate with GAL on the DCO requirements, any S106 Agreement, and the preparation of a Statement of Common Ground (SoCG - see paragraph 2.27).
- 2.26 In deciding whether to grant or to refuse development consent, the Secretary of State is required to have regard to LIR submitted by local authorities. An LIR is a technical document defined as "*a report in writing giving details of the likely impact of the proposed development on the authority's area (or any part of that area)*". Provided that it fits within this definition, the structure and content of an LIR is a matter for each local authority.
- 2.27 It is also anticipated that a SoCG will be submitted by the applicant. The SoCG will identify issues where it is considered that the signatories agree with the applicant about the impacts of the proposed development. The contents of the final SoCG can only be agreed by the County Council following the conclusion of discussions with the applicant about the key issues and the finalising of the Authority's LIR.
- 2.28 Accordingly, delegated authority is sought for officers to prepare and submit the necessary responses and documents and to negotiate with the applicant in support of the County Council's formal consultation response. Delegated authority is also sought for officers to attend the examination hearings and to answer the Examining Authority's questions in support of the County Council's position.

*Post-Decision*

- 2.29 Although the County Council will not be responsible for determining the application for consent, it can play a formal role in the post-decision approvals process by becoming a 'relevant authority' for the discharge requirements in the DCO (if it is granted). The legislation allows there to be more than one relevant authority and the final decision rests with the Secretary of State but, if requested to do so by GAL, it would help to give the County Council some control over implementation of the scheme.
- 2.30 Therefore, provided that the Authority's costs are met in full by GAL, approval is sought for the County Council becoming a relevant authority for the discharge of requirements for the NRP (if an order is made).

***Preliminary Environmental Information Report (PEIR)***

- 2.31 Officers have undertaken a detailed analysis of the PEIR, considering likely significant impacts (both direct and indirect) and whether those impacts are considered to be positive, negative, or neutral (taking into account any proposed mitigation measures). Consideration has also been given to whether further work could be undertaken by GAL, including mitigation measures, to address issues identified as being significantly negative.

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- 2.32 Given the lack of pre-consultation engagement by GAL (see paragraphs 2.43-2.44) and the large number and length of the consultation documents (and, in some cases, the absence of key documents), it has been difficult for officers to fully evaluate the PEIR within the time available. Furthermore, some of the material is so complex that external expert support is required to inform post-consultation dialogue with GAL. Accordingly, the County Council and the other Gatwick authorities are working together to procure consultancy support to undertake detailed analysis of the evidence and GAL's assessments for some PEIR topics, including the need for the development, passenger forecasts, climate change and carbon, air quality, noise, and socio-economics (including the need for new homes and supporting infrastructure).
- 2.33 Against this background, the following paragraphs address the key issues in relation to the proposals presented at this formal consultation stage. Following some general, overarching comments (including about technical and community engagement), key issues on a topic-by-topic basis are identified.
- 2.34 Approval is sought for the comments in paragraphs 2.36-2.98 and the detailed technical comments on the PEIR in Appendix C to be submitted as the County Council's response to the formal consultation.
- 2.35 The consultation response accords with the Notice of Motion on the NRP approved by County Council on 22 October 2021 (see paragraph 4.4).

### *General Comments*

- 2.36 The County Council acknowledges the importance of Gatwick Airport as a significant asset that contributes to the local economy of West Sussex. Any proposals for growth need to be achieved responsibly, sustainably, and with a focus on the well-being of communities within West Sussex and beyond. It is recognised that national aviation policy gives 'in principle' support to proposals to increase passenger numbers and air traffic movements by making best use of the existing runways at Gatwick. However, such proposals need to be judged by taking careful account of all relevant considerations, particularly economic and environmental impacts and proposed mitigation.
- 2.37 The County Council believes that further evidence, environmental assessment, and justification of key assumptions is required across a number of topic areas, to allow these relevant considerations to be assessed.
- 2.38 The County Council requests that GAL justify the increase in passenger throughput at the Airport through the NRP given the Government's commitment to achieving an emissions' reduction target of 100% by 2050 and the effects of the COVID-19 pandemic on the aviation sector.
- 2.39 The intensification of development at the Airport will lead to both construction and operational impacts, which will bring about adverse impacts on the environment and local communities of West Sussex, and beyond.
- 2.40 Therefore, the County Council cannot support the NRP because there are a number of matters of significant concern that need to be satisfactorily addressed by GAL. These include:
- understanding the basis for GAL's passenger forecasts and the assumptions that underpin them;
  - justification for the required supporting infrastructure and its necessity to facilitate the required passenger throughput;

- clarity on the assessment and final selection of remaining options for the Central Area Recycling Enclosure (CARE) facility, including proposed technology;
- clarity on the socioeconomic benefits, including the number, type, quality, and location of jobs created, the link between current labour supply and jobs created, and local economic benefits;
- the need for new homes and associated infrastructure, including County Council services;
- concerns related to traffic and transport access, including the impact of other strategic development and forecasting assumptions about mode share for both passengers and staff;
- further analysis and scrutiny of impacts on noise and air quality from both construction and operational phases;
- concerns about the significant increase in greenhouse gas emissions and impacts on climate change and understanding how airport expansion can be justified in the light of national and international carbon reduction targets;
- the need for enhancement measures (including to Public Rights of Way, recreational facilities, and ecological habitats through a Biodiversity Net Gain approach); and
- responses to the technical queries raised in Appendix C.

2.41 Therefore, the County Council will continue to engage with GAL in the coming months to understand the data and underlying assumptions, to seek to influence the remaining design elements, and to mitigate concerns about the potential adverse impacts presented in the PEIR. This dialogue will enable the best possible outcomes for the local communities and other sensitive receptors in West Sussex that would be most affected by the construction and long-term operational impacts of the NRP. It will also enable GAL to prepare a robust Environmental Impact Assessment (EIA) and application for development consent.

2.42 Given the significant concerns identified in this report about expansion at Gatwick using the Northern Runway, it is difficult to see how the environmental impacts of an additional runway to the south (further increasing throughput by 20mppa) would ever be acceptable. Therefore, rather than GAL not actively pursuing a southern runway at this stage (see paragraph 2.8), the County Council considers that GAL should commit to only 'actively pursuing' expansion at Gatwick using the existing runways, with a voluntary cap on passenger throughput (to be secured by a legal agreement). Not only would that provide certainty to local communities and businesses about GAL's intentions, it should also lead to the freeing-up of the safeguarded land for alternative uses.

#### *Technical Engagement*

2.43 The County Council notes that MHCLG guidance on the pre-application stage of the DCO process emphasises the benefits that the early involvement of local authorities (and communities and statutory consultees) can bring. Therefore, it is concerned that there has been insufficient technical information provided by GAL in advance of publication of the PEIR and insufficient time for officers to challenge and scrutinise the assumptions and evidence base ahead of formal consultation.

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- 2.44 Overall, there has been a lack of engagement by GAL during the development of the NRP and, therefore, the County Council and other stakeholders have not been given the opportunity to provide meaningful feedback to influence the proposed development. Going forward, the County Council expects GAL to take advantage of the wealth of knowledge and understanding of their areas that local authorities can bring to the development of the NRP (should it proceed).

### *Community Engagement*

- 2.45 Concerns are raised with regard to GAL's reliance on digital formats and a lack of face-to-face meetings with the community, particularly given the complex nature of the proposals. This will be monitored through the consultation period and any local concerns raised will be documented as evidence for inclusion in the County Council's post-submission Adequacy of Consultation response (see paragraph 2.24).

### *Need and Alternatives Considered*

- 2.46 *Passenger Forecast* – Although GAL states that detailed passenger forecasts (and the assumptions behind them) have been prepared, they have not been published as part of the consultation. The need case is very generic, relying on general Government statements about capacity shortage and the benefits of expansion. There is little to validate the scenarios for capacity with and without the project in place or to demonstrate that the baseline case is deliverable, potentially undermining the validity of the assessments (which are crucial to understand the impacts of the NRP).
- 2.47 GAL states that the aviation sector will recover from the effects of the pandemic by 2025. However, no detailed information is provided on what appear to be overly optimistic assumptions. Actual passenger demand may be higher or lower in the future than those assumed by GAL, leading to a lack of confidence in the forecast. Furthermore, no alternative scenarios are set out, including consideration of the implications of expansion at Heathrow Airport. Therefore, GAL should demonstrate a need for the NRP which is distinct from, and not met by, a third runway at Heathrow (which remains Government policy).
- 2.48 Without the ability to scrutinise and substantiate the forecasts and assumptions, it is difficult to understand the requirements of the scheme and to comment with certainty on the impacts of the NRP.
- 2.49 *Supporting Infrastructure* - GAL have proposed a significant amount of development to support the increase in passenger throughput. The County Council questions whether the inclusion of new hotels and office blocks is relevant or directly related to this growth. It is noted that the PEIR states that the new office configuration, phasing, and floorspace is dependent on the timing of requirements, whereas the timing of the additional hotel rooms would be dependent on commercial need. GAL should clarify why these developments are needed to facilitate the airport expansion and how they are directly linked to it.
- 2.50 *Assessment of Alternatives* - Since the development of the proposals, there have been limited opportunities for stakeholders to influence the design, prior to the PEIR being published. The County Council wants to see further mechanisms to allow the proposals to be understood and scrutinised prior to the DCO application being submitted. Although it is understood that operational and safety considerations are important aspects of design, the PEIR lacks detail

on how environmental and social criteria have influenced the decision-making process.

*Project Description*

- 2.51 There is a lack of detail about certain elements of the NRP in the project description. This includes the Waste (CARE) facility, where GAL propose a 22m high building and up to a 50m stack. This is likely to be EIA development in its own right; therefore, further detail is required to understand its construction and operational impacts, including its design and potential visual impacts. This, and other elements of the project description where clarity is required, are identified in Appendix C.
- 2.52 Construction phasing should be presented clearly to enable local communities and the County Council to understand the impacts relevant to them. GAL states that the location of large construction compounds will be agreed when a principal contractor is appointed post-consent. Given these will be in place for the duration of the construction programme (up to 14 years) and be typically five hectares in size with up to 30m high infrastructure within them, clarity on the locations for assessment will be required. This will give stakeholders confidence that potential impacts have been appropriately addressed and mitigated.

*Landscape, Townscape and Visual Resources*

- 2.53 The County Council is concerned that the PEIR omits some key viewpoints suggested by stakeholders during the scoping stage. The assessment does not identify all the views and additional visual receptors along important public routes intersecting the airport and wider public views that need to be considered by GAL to provide a robust landscape visual impact assessment.
- 2.54 The PEIR downplays the value of the landscape surrounding the airport and attempts to argue that the airport merges seamlessly into the surrounding towns. Although the assessment states that the land within the proposals is not highly-valued in landscape terms, it is of great visual and amenity value to local residents.
- 2.55 There is no aspiration or commitment in the PEIR to improve the declining visual landscape caused by the airport activity already in existence. Furthermore, the indicative design, scale, and siting of the proposed development would further damage the landscape. There is concern about the lack of imagination in terms of mitigation and enhancement, as it is only proposed to plant limited areas with vegetation and there will be no landscaping to screen development in the short term.

*Ecology and Nature Conservation*

- 2.56 There are a range of concerns that need to be addressed, including the Zones of Influence, survey areas, air quality impacts, mitigation measures and approach to Biodiversity Net Gain (BNG). If there is any risk of impacts (such as air quality, river quality, and noise) extending beyond the site boundary, a broader survey area will be required, which should be based on the Zone of Influence. Surveys of protected species, such as Great Crested Newt and Water Vole, should also extend beyond the project site boundary. Apart from bat surveys, no further justification for survey areas has been given.

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- 2.57 The proposals will result in an increase in both aircraft and vehicle traffic with associated impacts on air quality. It is understood that air quality impacts on designated sites in the surrounding landscape is being investigated. Discussion is required on whether this should be extended to non-designated sites, such as ancient woodland.
- 2.58 A 14-year construction programme will prolong the impacts of habitat loss and, in some locations, mitigation will not be in place until the end of the construction period. It can take several decades for habitat establishment and recovery (longer for natural regeneration) even with a significant level of intervention and intensive monitoring. It is not clear if the limited areas identified for environmental mitigation and enhancement will adequately compensate for the significant loss of habitat. Mitigation, compensation, and enhancement measures should not be limited to within the airport boundary and further discussions on the approach to these measures is required.
- 2.59 GAL report the sustainability goal for biodiversity is to “*have a sector-leading 'net gain' approach to protecting biodiversity and habitats on the airport estate*”. Even though it is not mandatory, GAL should adopt a voluntary BNG approach as good practice. If the proposals are to deliver a 10% BNG, it will require significantly more biodiversity enhancements than is currently proposed.

### *Traffic and Transport*

- 2.60 The County Council has a number of concerns relating to uncertainty around surface access and transport impacts due to the lack of evidence provided by GAL. The pandemic has resulted in a significant reduction in staff working at Gatwick while, on a wider scale, working and living patterns have changed (e.g. working from home or remote working). GAL expect that the baseline in staff levels to return to and exceed 2016 levels. Given the changes in the economy as a result of the pandemic, the future impacts on the distribution and travel behaviour of staff are unclear. Therefore, GAL should undertake some sensitivity analysis to understand the impact of changes on the distribution of staff journeys.
- 2.61 There are Network Rail and National Highways schemes included in the future baseline assessments that are not fully-funded or going through the relevant statutory planning process; these include the Croydon Area Remodelling Scheme (CARS), a strategic rail improvement, and the Lower Thames Crossing (LTC), a strategic highway improvement. If these schemes do not come forward, they may impact travel behaviour and adversely affect the achievement of the proposed mode share targets. Therefore, GAL should remove transport network changes that are not currently fully-funded or going through the statutory planning process from the future baseline assessments.
- 2.62 Although the assessments take account of background traffic growth through applying the Department for Transport's National Trip End Model, they do not take into account the site-specific impacts of emerging large development sites in the area; these include West of Ifield, Gatwick Green, and Horley Business Park. Due to their proximity, these strategic sites will have a cumulative impact on the transport network and, therefore, the methodology for cumulative assessments should take them into account.
- 2.63 The main measures to mitigate the likely impacts of the NRP are local highway improvements and the provision of a significant amount of additional parking spaces, the need for which is unclear. Active travel mitigation is limited to

provision/improvement of one desire line between Longbridge Roundabout and the North and South Terminals. Furthermore, GAL are solely relying on bus and coach operators to react to demand rather than proactively identifying investment in shared travel. Therefore, there is concern that the proposed mitigation is too focused on providing for vehicles (including parking provision) and that there is not enough focus on sustainable modes of transport.

- 2.64 The mode share targets are ambitious because although Gatwick has been relatively successful in targets for sustainable transport mode share by passengers, this has not been the case for staff (despite significant investment). It is unclear how the Gatwick Mode Choice Model has been developed by GAL and, therefore, it is difficult to understand the suggested changes in mode choice by passengers and staff and the extent to which GAL's targets are the outcomes of an assessment (rather than just being assumptions).
- 2.65 GAL state that any construction works that would require the closure of operation of the airport, would take place overnight to minimise disruption. It is unclear how this pattern of working has influenced the assessment of construction traffic impacts. Further information about the assumptions that have been made about the volume and timing of construction traffic impacts is required to assess the potential impacts.
- 2.66 The presentation of traffic impacts is not clear with regard to the difference between 2016 and future 'baseline' and 'future with project' conditions. This makes it difficult to understand background traffic growth on the highway network and the specific impact of the proposals on that network.

#### *Air Quality*

- 2.67 There are concerns around the Impact Pathway Assessments and the requirement for damage cost calculations presented as part of the air quality assessment. The provisional view is that current calculations by GAL are limited, providing too great a range (£12m to £423m). Modelling data has not been published as part of the PEIR and, therefore, it is difficult to determine if the modelling is reasonable.
- 2.68 There is no source apportionment data in the PEIR, meaning there is no indication of where the pollution is coming from, for example, aircraft, road traffic (airport and non-airport), construction, the proposed CARE facility or wastewater treatment works. Furthermore, although there are expected to be significant falls in pollution from road traffic, pollutant concentrations in the 2029 scenario are unchanged from the 2019 position and the lack of source apportionment in the PEIR means there is no way of determining why pollution levels are not falling.
- 2.69 It is noted that the World Health Organisation (WHO) published revised guidance on ambient air pollution in September 2021, which recommends that annual average nitrogen dioxide concentration should reduce from 40 µg/m<sup>3</sup> (which is the current UK and EU standard) to 10 µg/m<sup>3</sup>. This compares to average nitrogen dioxide concentration of around 27 µg/m<sup>3</sup> at sites around the airport. Given that GAL do not forecast any change in concentrations, the revised WHO guideline value is of significance if the project is progressed.

#### *Noise and Vibration*

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- 2.70 GAL present four elements of noise for assessment in the PEIR; construction noise, air noise, ground noise, and noise from road traffic. Noise can have direct effects on health (at a physiological level where the individual is often unaware of the effects), annoyance, and cognition. Therefore, noise impact assessments must be robustly undertaken. However, there are concerns that the focus has been on self-reported annoyance, that health effects have not been adequately characterised, that insufficient consideration is given to the health effects of noise, and that the thresholds for assessment and mitigation are based on a limited study concerning self-reported annoyance.
- 2.71 There is particular concern about the noise impacts associated with construction, given that a large proportion of the works will be undertaken during the night, for up to 14 years, while the Airport will continue to operate 24 hours a day. Local communities close to the Airport, particularly at Charlwood and Horley, are most likely to be affected from this source of noise disturbance and mitigation measures must be employed to reduce these impacts.
- 2.72 Communities that live under the flight paths of the Airport are already affected by air noise. Increases in the number of flights will mean more disturbance events. Even if each noise incidence is quieter when accounting for newer technology in the future, the impact of multiple aircraft can have adverse effects. The proposals suggest that communities in the north of Sussex, that have little or no noise exposure at present, will be exposed to regular and frequent aircraft noise in the future, which is of concern.
- 2.73 The effects of ground noise (from engine ground running or aircraft auxiliary power units) on local communities, particularly in Horley, Charlwood, and Crawley, are unclear and further work is required.
- 2.74 Although mitigation measures for those overflown are supported in general, there is concern that the levels proposed are not adequate to minimise the impact on quality of life of those communities that will have increased external noise levels as a result of the NRP. Whether measures (such as those currently included within the Noise Mitigation Fund where criticism is already directed at the process and discharge of funds) are sufficient or will need to be more generous, will only become clearer as the noise impacts are fully understood.

### *Climate Change and Carbon*

- 2.75 The PEIR identifies that there will be higher overall greenhouse gas emissions as a result of the NRP, emissions that are considered to be 'significant' due to their permanent, cumulative nature. A significant increase of aviation emissions is noted, around 12%, which is contrary to the Government's declared ambition of carbon neutrality by 2050.
- 2.76 There is no evidence that GAL have taken into account the recommendations in PIN's Scoping Opinion regarding cumulative impacts, arrival flights, non-Kyoto gases, or emissions. The County Council expects that the comments made by PINS on such matters will be fully addressed by GAL.
- 2.77 Several key documents have not been presented as part of formal consultation; these include the Carbon and Climate Change Action Plan, The Third Climate Change Adaptation Report, the Sustainability Statement, and the Landscape and Environmental Management Plan.

- 2.78 The details are unclear as to how GAL intend to balance their share of the national 'carbon budget' saving commitments over the period of growth. It is difficult to challenge these commitments without further information on precisely how they expect to achieve emission reductions, including how they intend to encourage reductions in emissions in the control of their partners and cumulatively against other major airport expansion projects.

*Socio-Economics*

- 2.79 The County Council is concerned there is no mention of WSCC plans and strategies, including Our Council Plan and the Economy Reset Plan, and that there has been no engagement on economy priorities to inform the PEIR. There are concerns about the baseline data that, in places, draws on data that is more than 10 years old. More recent data sources should be used as they become available. The baseline data is also skewed by key locations in the groupings and this should be recognised and pulled out further, for example, Crawley's demographics are very different to the rest of the Local Study Area.
- 2.80 The County Council is concerned there is not a clear 'read across' between the PEIR and the Economic Impact Assessment and that the geographies used as the 'study area' and 'labour market area' are muddled and inconsistent between the various documents.
- 2.81 The employment, supply chain and labour market assessment in the PEIR is based on high-level quantitative data and does not evidence the types of jobs required (including time-limited jobs), qualifications or skills needed, and how this relates to the local and wider labour market.
- 2.82 It is not clear why the Outline Employment, Skills and Business Strategy plan is dependent on the proposed expansion, the extent to which activities already take place, and why GAL would not be delivering on a range of the commitments as a major economic anchor in the area.
- 2.83 There is a lack of reference to the opportunity for growth around international visitor economy, working with local partners and national sector bodies. This is a strategic priority for local partners.
- 2.84 The assessment of the socio-economic impacts has been from a purely 'numbers-based approach', that is, local planning authorities are planning for houses and, therefore, the workers will be provided based on the uplifted numbers that the Government is expecting local authorities to deliver. However, this excludes analysis of key issues, such as market signals, affordable housing, or constraints on housing supply. Therefore, GAL's approach is considered to be overly simplistic.
- 2.85 There is also significant concern with this 'houses equals workers' approach as it fails to take account of the type and quality of employment being generated (unskilled/semi-skilled/skilled) at the Airport and how this translates into the need for different types of housing.
- 2.86 Although PINS suggested that the effect of the NRP on property values should be scoped in, GAL has proposed to scope this out from the assessment. GAL state that there will be little change in flight paths; however, there will be an increase in the frequencies of flights along existing flight paths (cited as 10-15 air traffic movements per hour) and, therefore, some properties will experience greater overflight, which has the potential to adversely impact property values.

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- 2.87 GAL should be contributing towards social and community infrastructure within the study area, for example, GAL is citing Land West of Ifield as a site that could provide housing for new employees, given its proximity to the airport. It is considered that GAL should contribute to increasing the level of affordable housing provision on this site and other sites across the region, where employees commute from, whilst also contributing to the associated need for new and improved social and community infrastructure, including County Council services.
- 2.88 There is significant concern regarding the lack of financial support for local authorities and the communities affected. As part of its second runway proposal to the Airports Commission, GAL offered a significant package of financial measures totalling circa £74m to local authorities deliver essential community infrastructure; this included a Home Owners Support Scheme and Local Highway Development Fund, amongst other measures. Therefore, it is questioned why the PEIR only identifies very few mitigation measures for the local authorities and communities adversely affected by the NRP.
- 2.89 It is difficult for the County Council to assess and respond to the economic impact of the proposed development given the lack of information provided. Further assessment and dialogue are required to understand the full socio-economic impacts of the NRP and the mitigation and support required of GAL, so as not to place additional burdens on local authorities and their communities.

### *Health and Well-Being*

- 2.90 The County Council has a duty to ensure that the health and well-being of their residents are not adversely affected by the NRP.
- 2.91 It is stated by GAL that although there will be loss of public open space, new areas will be created to mitigate this loss and to serve local users. However, this will not be immediately adjacent to areas removed and, therefore, reassurance is needed that mitigation measures will be targeted at communities or groups impacted by the loss. Where construction compounds are to be located close to parks and open public spaces, the project may have an impact on enjoyment of recreational activities; therefore, more detail and consideration is required.
- 2.92 There is no evidence to demonstrate that consideration has been given to the impact of the NRP on certain vulnerable groups, as highlighted by PINS in its Scoping Opinion. Certain groups, including the elderly and people living with disabilities, may be more adversely impacted by reconfiguration of public open spaces and paths and diversions of PRoW or even the slightest changes to noise levels. In addition, the County Council would like a clearer and more detailed description of the impact of the project on care home residents and schools within the study area, particularly from a noise and air quality perspective and the extent to which mitigation measures would reduce any adverse effects.
- 2.93 It would be beneficial for GAL to undertake an Equality Impact Assessment to understand how the NRP may impact on all groups and ensure that certain individuals are not put at a disadvantage or discriminated against. This would also ensure that mitigation measures can be tailored to avoid harm to equality.
- 2.94 PINS has advised that "*an assessment of the impact on local primary health care, acute services and emergency responders from additional passenger movements, where these are likely to result in significant effects*" should be undertaken. Experience in West Sussex is that higher throughput at Gatwick

has often led to an increased demand for health services. Therefore, clarity is needed about whether there is enough capacity at local accident and emergency departments and within the broader emerging ICS (Integrated Care System) to cope with the demand of an additional 14 million passengers travelling to and passing through the airport every year.

### *Recreation*

- 2.95 The PEIR outlines where the existing PRoW network is affected by the proposals. The County Council would have expected to see an Outline Public Rights of Way Strategy (OPRoWS) or something similar to identify how PRoWs will be dealt with during construction and how impacts on public users will be kept to a minimum. This will need to include matters such as temporary impacts (i.e., closures during works) but also more permanent changes to the network through diversions that may be necessary. The County Council will not support permanent closures of routes and would expect that routes will be accommodated on their legal line or on newly diverted routes.
- 2.96 Opportunities to improve the local PRoW network through the proposals should be taken, including the possible upgrade of the Sussex Border Path to a bridleway, which could tie into the proposed road improvement works.

### *Major Accidents and Disasters*

- 2.97 The County Council raise concerns that NRP would result in fire stations close to the airport e.g., Crawley and Salfords, being called upon more frequently for Gatwick 'domestic' incidents, for example, fire alarm activations, medical incidents, lift shut-ins. Therefore, clarity is required about whether Gatwick Fire and Rescue Service are still going to be operating a domestic appliance and if the category of the airport would remain the same. If this category was proposed to increase, it would affect the level of fire cover the airport would have to provide.
- 2.98 In the event of a major incident or disaster, there would be an increased demand for humanitarian support required, which would put higher demands and pressures on acute hospitals/local authorities and rest centre requirements. Currently, capacity is identified in local hotels to accommodate rest centres or reunion areas and further information is required about whether this would change (given the increase in passengers and higher demands for accommodation).

## **3 Other options considered (and reasons for not proposing)**

- 3.1 As a 'host' authority, one of the responsibilities of the County Council is to respond to the current formal consultation. The responsibilities also include: discussing the DCO requirements and S106 Agreement; providing an 'Adequacy of Consultation' response; preparing SoCG and LIR; and submitting written representations and participating in the examination process.
- 3.2 There is the option to not take on the role of being a relevant authority with responsibility for the discharge of requirements (if an order is granted). However, it seems sensible for it to undertake this task for the NRP (if costs are recovered) because it would give the Authority some control over implementation of the scheme.

## **4 Consultation, engagement, and advice**

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- 4.1 Internal officers have been involved in the analysis of the PEIR and preparation of the detailed comments on the PEIR in Appendix C.
- 4.2 Joint working, including the identification of key issues, has taken place with the other Gatwick authorities: Crawley Borough, Horsham District, Mid Sussex District, Mole Valley District, Tandridge District, and Reigate and Banstead Borough Councils; and Surrey, East Sussex, and Kent County Councils. Joint working with those authorities will continue for the next stages of the DCO process, including, as necessary, the commissioning of external specialist support for some topics.
- 4.3 An all-member briefing was held on 30 September 2021 at which an outline of the scheme and its impacts (and proposed mitigation) was given by GAL, with the opportunity for questions and answers.
- 4.4 The following Notice of Motion on the NRP was approved by County Council on 22 October 2021:

"West Sussex County Council is a statutory consultee in the Development Consent Order process with regard to the proposal by Gatwick Airport Ltd (GAL) to bring the Northern/Emergency runway into routine use (for departures only). This Council notes the proposed economic benefits and likely adverse social and environmental impacts of GAL's Northern Runway Project.

This Council resolves to ask the Cabinet to seek evidence and assurance from GAL that it will mitigate the following key impacts as part of the proposed development:

- (1) Any increase in aircraft noise levels/noise distribution pattern.
- (2) Any adverse traffic and surface access impacts (forecasting, transport assessment methodology, modal shift).
- (3) Any additional social and environmental impacts, including on health and well-being, air quality and carbon reduction targets.
- (4) Any increase in the need for new homes (supply/demand from anticipated additional workforce) and supporting infrastructure, including County Council services.

In addition, whilst not part of the formal consultation, the safeguarded land allocation to the south of the existing runway for an additional runway should be reviewed and recommendations as to its future use should be made by the Cabinet to Her Majesty's Government."

- 4.5 The consultation response will be considered by a Communities, Highways and Environment Scrutiny Committee Task and Finish Group (TFG) on 10 November 2021. The TFG Chairman will address Cabinet on 16 November 2021 to inform it about the findings of the group before the response is approved.

## **5 Finance**

- 5.1 Although the County Council has responsibilities as a statutory consultee, there is no requirement for GAL to fund this additional work. However, the County Council and the other Gatwick authorities have agreed in principle to a Planning Performance Agreement (PPA) with GAL that contributes towards the cost of

engaging in the DCO process. This will enable the consultation work required to be delivered within existing budgets.

- 5.2 If a DCO is confirmed, a new PPA with GAL will be sought in relation to the County Council discharging its requirements provided that the Authority's post-decision costs are met in full.

## 6 Risk implications and mitigations

- 6.1 There are no risks associated with responding to the consultation and engaging in the next stages of the DCO process.

Risk	Mitigating Action (in place or planned)
None	n/a

## 7 Policy alignment and compliance

- 7.1 Legal Implications – the County Council is a statutory consultee in the DCO process. It has specific responsibilities as a 'host' authority, including: being a consultee on the draft SoCC [undertaken]; responding to the scoping request [undertaken]; responding to the formal consultation [this stage]; discussing the DCO requirements and S106 Agreement; providing an 'Adequacy of Consultation' response; preparing SoCG and LIR; and submitting written representations and participating in the examination process. The recommendations in this report seek to ensure that the County Council delivers its responsibilities for the current and remaining stages of the process.
- 7.2 Equalities – not applicable, as it is a response to a consultation by an external organisation.
- 7.3 Climate Change – although focussed on the County Council's activity, the Authority's [Climate Change Strategy](#) is supportive of actions that mitigate the effects of climate change by reducing carbon emissions.
- 7.4 Crime and Disorder – not applicable.
- 7.5 Public Health – not applicable.
- 7.6 Social Value – not applicable.

### **Matt Davey**

Director of Highways, Transport and Planning

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### **Appendices**

Appendix A: Project Site Boundary

Appendix B: Key Elements of the NRP

Appendix C: Detailed Comments on the Preliminary Environmental Information Report

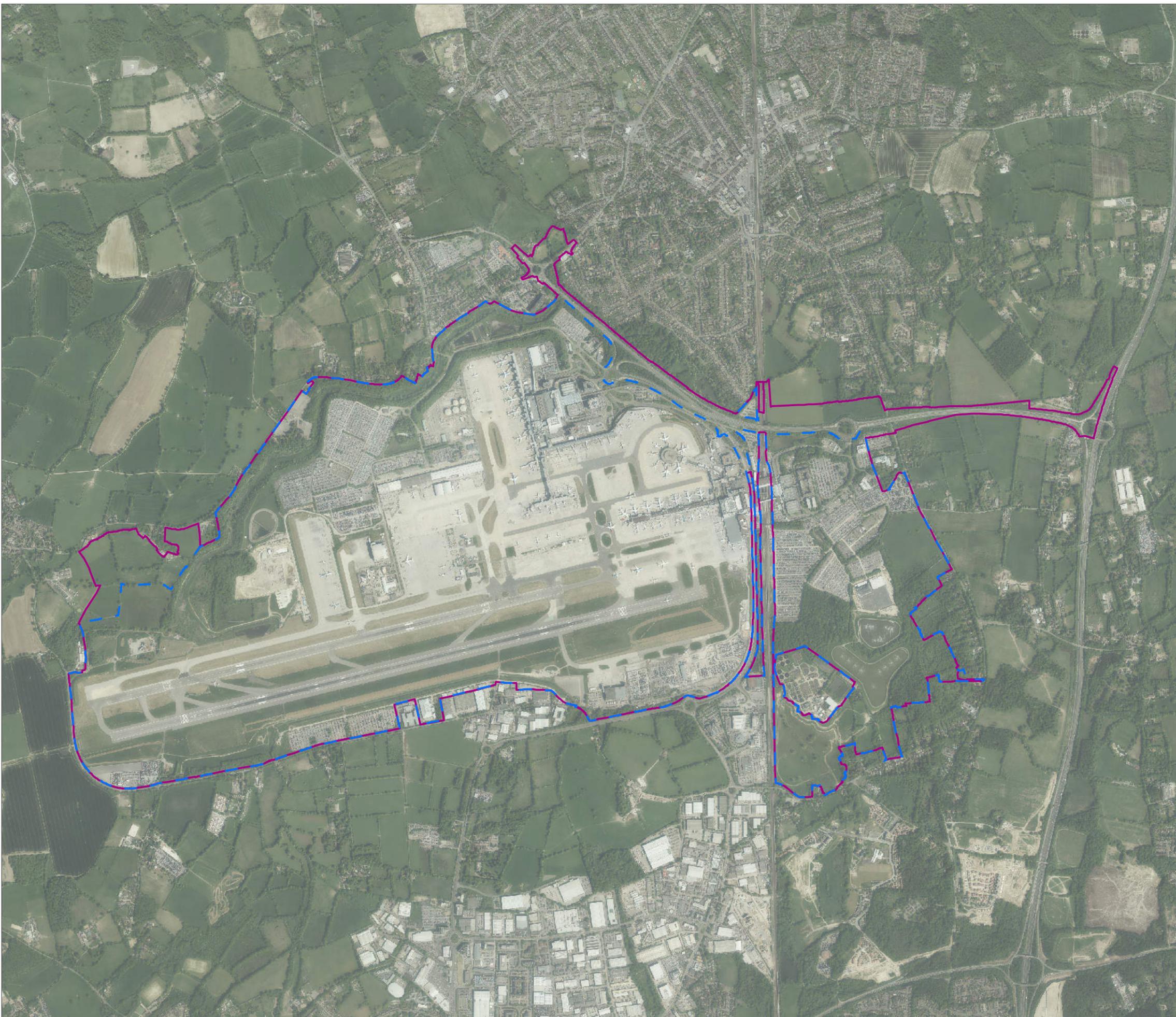
### **Background papers**

None

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KEY

- Project Site Boundary (PEIR)
- Land in the Ownership of Gatwick Airport



DOCUMENT  
**Preliminary Environmental Information Report**

DRAWING TITLE  
**Project Site Boundary**

DATE  
**September 2021**

	DRAWING NO. <b>FIGURE 1.3.1</b>	REVISION <b>For PEIR Issue</b>
	DRAWN BY <b>CR</b>	PM / CHECKED BY <b>AR</b>

SCALE @ A3 1:20,000



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Appendix A

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## Appendix B: Key Elements of the Northern Runway Project

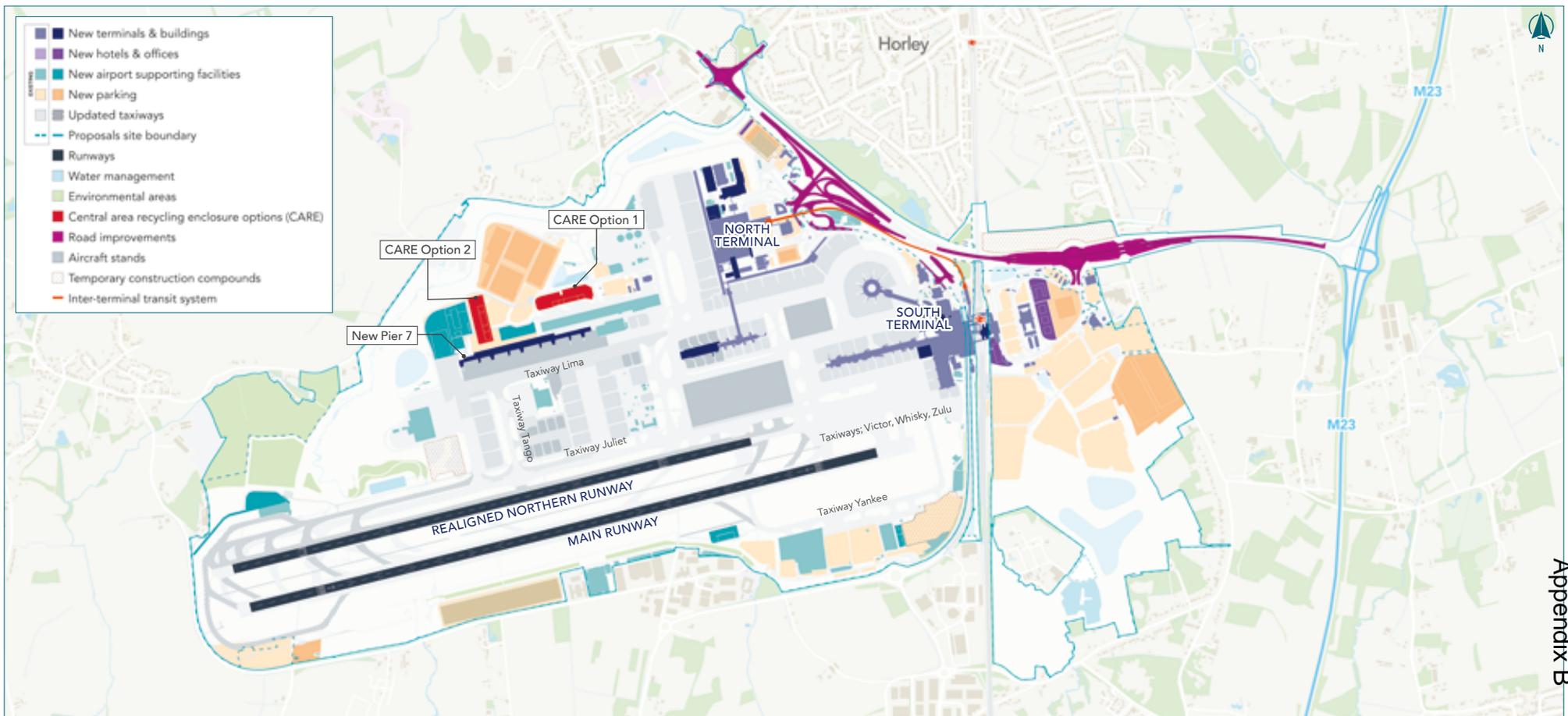
The key elements of the proposal to enable dual runway operations and support increased passenger numbers at Gatwick, include:

- › alterations to the existing Northern Runway, including repositioning its centreline 12 metres further north;
- › reconfiguration of taxiways to accommodate the changes being made to the Northern Runway and ensuring sufficient room for the safe manoeuvring of aircraft;

- › changes to some aircraft stands to improve the handling of different types of aircraft and a proposed new remote pier (Pier 7) that would serve both North and South Terminals;
- › reconfiguration of a number of airfield facilities to facilitate taxiway changes;
- › extensions to the North and South Terminal buildings to accommodate passenger growth, improve baggage handling, and enhance the experience of our customers;
- › provision of additional hotels and office space;

- › provision of reconfigured car parking, including new surface and multi-storey car parks;
- › surface access (highway) improvements;
- › reconfiguration of existing utilities, including surface water, foul drainage and power; and
- › landscape/ecological planting and environmental mitigation.

Flights departing from the Northern Runway would continue to use existing flightpaths.



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## **Appendix C: Detailed Comments on the Preliminary Environmental Information Report**

This document provides comments from West Sussex County Council (hereafter referred to as 'WSCC') on the Gatwick Northern Runway Project Preliminary Environmental Information Report (PEIR), published by Gatwick Airport Limited on 9 September 2021.

The following table provides comment for each PEIR chapter relevant to WSCC, with specific paragraph/table/figure references where applicable.

**NB:** It does not include comments on behalf of the District or Borough Councils in West Sussex.

Ref	WSSC Comment
<b>Chapter 1 - Introduction</b>	
1.3.4	There is no reference made to the demolition and relocation of the CARE (Central Area Recycling Enclosure) Facility. The PEIR indicates (Chapter 5, para 5.2.39) that installation of a stack of up to 50m in height would be required. This has the potential for significant environmental effects in its own right. The EIA must include full details of the CARE facility to allow stakeholders to understand if all potential impacts have been fully addressed.
1.5.2	WSSC would want to see enhancements listed here and a commitment to a minimum of 10% Biodiversity Net Gain (BNG) would be expected.
1.8.2	WSSC welcomes, pursuant to Regulation 14 (4) of the 2017 Environmental Impact Assessment (EIA) Regulations, the Statement of Competence that has been presented as part of the PEIR. WSSC expects this to be updated for inclusion within the Environmental Statement (ES).
1.9	GAL presents 'next steps' sections within the Preliminary Environmental Information Report (PEIR). There is a lack of detail on this for individual topics, i.e., detailing what is still required to be undertaken to develop the ES, and when and how stakeholders will be involved in the process, prior to the Development Consent Order (DCO) application being submitted.
<b>Chapter 2 – Planning Policy Context</b>	
General	There are a number of Government projects and programmes that are taking place over the coming years that will impact UK airports, that are outside the scope of the proposals. Any material changes to national policy and guidance, related to aviation, will need to be considered by GAL as the DCO process progresses.
Table 2.2.1	The West Sussex Joint Minerals Local Plan is incorrectly referenced. The reference should read West Sussex Joint Minerals Local Plan (July 2018, (partial review March 2021)).
References	The West Sussex Transport Plan reference is incorrect, it is marked down as the Waste Plan (although the link is correct).
<b>Chapter 3 – Need and Alternatives Considered</b>	
General	There is insufficient detail provided to understand the forecasts and assumptions around passenger growth and need, making it difficult to understand the requirements of the scheme and its impacts.
General	York Aviation Ltd were commissioned by WSSC, and other LPAs, to consider the need case, scenarios, demand forecasts, and the assessment of socio-economic benefits of the NRP. The York Aviation report, submitted with this consultation response, forms part of the overall WSSC response.
3.3.3	'taking into account environmental effects' - WSSC wants to see a stronger statement that environmental and social effects have been a key factor in the site selection process associated with airport infrastructure.
Table 3.3.1	WSSC understand that safety and operational factors are a driving element of airport facilities, we would expect to see clear evidence of how constraints mapping of ecological/environmental information has fed into the assessment

	process to choose the most favourable site. How have these criteria been weighted? How have the criteria been chosen? Reference is made to landscape character, but little about visual impact to receptors, including local communities.
3.3.45	The preferred option is a combination of B1, B2 and B3. It is not clear what is and isn't included from the 3 options. This should be presented as a stand-alone Option B7, clearly marked, against which potential impacts can be fully understood.
3.3.66	The preferred option for the pier is Option E10, the location of an existing carpark. How has the loss of this car park been considered? Reference is made to the car parking options but it's not clear how many spaces would be 'new' and those that would be 'replacement'.
3.3.75	<p>Clarity is required on some of the design assumptions with regards these options – for example hangar options. The assessment does not outline the height/footprint of these and how visual impacts have been taken into account. Hangar Option F1 would have potential visual impacts to receptors outside of the airport boundary to the North West, but this has not been highlighted in the assessment.</p> <ul style="list-style-type: none"> <li>• It is noted that in para 3.3.64, regarding the piers, reference is made to introducing new aircraft to an area of the airfield that does not experience aircraft resulting in noise and air quality emissions closer to receptors to the north west of the airport (mainly the Bear and Bunny Nursery, Povey Cross and the River Mole corridor). These receptors are closer to Option F1 for a new hangar, than the new pier (E10), however no reference is made to the potential impacts.</li> <li>• Option F1 will result in the loss of car parking spaces. How has the loss of this car park been considered? Reference is made to the car parking options but it's not clear how many spaces would be 'new' and those that would be 'replacement'.</li> </ul>
3.3.128	The CARE facility in its own right has the ability to cause environmental harm. It is important that detailed information is provided, including the site criteria assessment, technology proposed, and potential impacts to the environment, including, but not limited, to air quality.
General	This chapter should outline the justification for the PEIR boundary presented, with the recognition that it is very tightly drawn around the airport boundary. Can this be further detailed within the ES, taking account of any additional required mitigation.
General	As stated within the WSCC Masterplan consultation response in 2019, before the publication of the draft Master Plan, there were no formal discussions with WSCC about the scenarios or the work undertaken by GAL. Similarly, since the development of the NRP DCO proposals, there have been limited allowance for stakeholders to influence the design prior to the PEIR being published. WSCC expect to see further technical engagement to allow the design to be understood and scrutinised prior to the DCO application being submitted.
General	It is stated that the development process has been designed to run alongside, and iteratively, with the EIA process, with the design informing the EIA and vice versa. It would be useful to have a flow diagram indicating how the design and EIA process are interlinked, and how this process runs in parallel with consultation and engagement activity. This would demonstrate how the Proposed Development maximises opportunities for avoidance and prevention

	of significant effects and maximises stakeholder engagement to result in a high-quality development, consistent with the policy requirements.
Appendix 3.3.1	There is a general lack of evidence around scoring and narrative of risks associated with each option. The Appendix does not give enough evidence, with nearly all stating: ' <i>options would reduce land take and avoid the removal of habitats where possible</i> '.
<b>Chapter 4 – Existing Site and Operation</b>	
General	The description of the existing site and operations requires further clarification. This information must be verified if it is to be used in any baseline assumptions for the ES.
General	Clarification is required on whether the facilities currently presented as baseline are fully utilised based upon current passenger throughput.
General	Clarity is needed on the status of projects/plans included as ' <i>planned for implementation</i> '.
General	Consideration should be given to the York Aviation report, which forms part of the WSCC consultation response.
<b>Chapter 5 – Project Description</b>	
5.2.3	WSCC requests that full justification is given for the inclusion of facilities such as new hotels and office blocks (particularly as it is not clear when they would be required or whether the end occupier could be a non-airport related user) and whether it is directly linked and required to facilitate the airport expansion. WSCC would question whether these are necessarily essential on-airport to cater for the increase in passenger numbers resulting from the alteration of the runway.
5.2.3	The demolition and rebuilding of the CARE facility is a major element of the project and should be referred to as such.
5.2.37 – 5.2.40	The description of the replacement CARE facility is lacking and requires further detail to understand how much additional infrastructure is present over and above currently on site (e.g., it describes an additional biomass boiler and limited details on the number of flues required).
5.2.45	Will a new emergency control tower be required, this section only describes its demolition, but no indication of replacement, or details on the basic engineering parameters.
5.2.49	Further clarity on how close the old aircraft engineer ground running areas are to the new facilities proposed. These should be presented on a figure.
5.2.52	When will there be clarity on the likely requirements for a satellite airport fire service facility? Has this therefore be assessed as a worst case for the purposes of the PEIR?
5.2.55	Further detailed information is needed to understand the location and form of the noise bund/barrier. Will the new noise bund be higher or lower than the current? How will noise be temporarily mitigated whilst the old is being demolished and the new being constructed?
5.2.67	In recent years passenger growth has occurred without the need for additional office provision. However, it is expected that further operational office provision would be required as the airport grows to meet needs of airport companies. ' <i>The exact configuration, phasing and amount of floorspace would</i>

	<i>be dependent on the actual timing of requirements'</i> - WSCC expects further justification of what is included within the DCO on this basis.
5.2.97	When will details on the amount/scale of intervention of the shuttle service be provided to allow for additional capacity to be known? Has no additional development of this been assumed for the purposes of the PEIR?
5.2.122	WSCC would expect design of new buildings, and infrastructure (including lighting strategy) to be sensitive to the surrounding environment and receptors, and the EIA should be positively influencing this. Reference should be made to IEMA ' <i>Delivering Quality Development</i> ' and ' <i>Shaping Quality Development</i> '.
5.3.2	What are the emergency measures in place for aircraft when the emergency northern runway is ' <i>not available as a standby runway for a period of several months</i> '?
5.3.80	The temporary construction compounds will be in place from the start to the end of construction, in 2035. They will be approximately 5 hectares in size and have construction equipment to a height of 30m. All impacts of these construction compounds should be fully assessed and details on how locations have been determined, in terms of sensitive receptors need to be provided.
General	WSCC is disappointed that a Sustainability Assessment has not been included within the PEIR documentation and expect to be consulted on this, and a number of other plans referenced, ahead of DCO submission.
General	The wording within the project description, for example, ' <i>it might, its likely, it could include</i> ', doesn't give stakeholders confidence that all likely impacts have been assessed. Information should be presented under each project element outlining the maximum design parameters that are going to be assessed in the EIA.
Appendix 5.3.1	The key phasing set out in the document (Table 1.2.1) provides very large timeframes, such as 11 years for car parking and 8 years for hotel/commercial facilities. Going forward, it will be important to know more accurate timing/phasing of the associated development, to fully understand the impacts of construction on sensitive receptors.
Appendix 5.3.3	There is concern that local Fire Stations to the airport e.g., Crawley and Salfords, would be called upon more frequently for Gatwick ' <i>Domestic</i> ' incidents (fire alarm activations, medical incidents, lift shut-in's etc) if the Airport Fire Service will be operating a satellite station on top of their existing station, or by the simple fact there will be an increase in the size of the airport and an increase in people at the location. Clarity is required on whether Gatwick Fire and Rescue Service are still going to be operating a domestic appliance and if the category of the airport will still remain the same.
Appendix 5.3.3	There is a concern that there will be an increase in Road Traffic Collisions as a result of the increased infrastructure and road networks surrounding the airport, that will have an impact on emergency services and WSCC Highways departments.
Appendix 5.3.3	WSCC Fire Service have asked that they be included in any future consultations or discussions in relation to mitigation works taking place that form part of the project in relation to wildfires and flooding. There are concerns from WSCC in relation to flood risk increasing through the increase of infrastructure. The River Mole, which runs through the airport, already poses a substantial risk when water levels are high or there is heavy rainfall.
Appendix 5.3.3	With the increase in the terminal forecourt areas and increased passenger numbers, there is concern this could increase the risk of potential terrorist

	activities taking place in these locations. WSCC recommend consultation with the National Counter Terrorism Security Office (NaCTSO) if this has not already been undertaken.
Appendix 5.3.3	Would the Rendez-vous-points remain in their current locations or would these be relocated? This would impact emergency services and possibly the attending appliances if these were to be relocated.
Appendix 5.3.3	GAL appear to have only made considerations in a 1km and 10km area, but nothing beyond this. WSCC expects to see a clear justification for the defined study areas associated with the assessment in the ES.
Appendix 5.3.3	It is not clear if Surrey Fire & Rescue service been involved in the consultations. WSCC recommends that they are included going forward if not consulted to date.
Appendix 5.3.3	In the event of a major incident or disaster, there will be an increased demand for humanitarian support, which will put higher demands and pressures on acute hospitals/local authorities and Rest Centre requirements. Currently capacity is identified in local hotels to accommodate rest centres or reunion areas, would this change with the increase in passengers and higher demands for accommodation? WSCC also require clarity also on whether there is enough capacity at local A&E departments and within the broader emerging ICS (Integrated Care System) to cope with the demand of an additional 14 million passengers passing through the airport every year.
<b>Chapter 6 – Approach to Environmental Assessment</b>	
General	WSCC welcome the Statement of Competence by GAL (required under the EIA Regulations) and raises no concerns over the level of competence of the consultants who have undertaken the environmental assessment work. There is, however, no evidence that GAL have taken into account all recommendations from the Planning Inspectorate in some key topic areas. Although it is recognised that professional judgment is important, WSCC note that the narrative around this professional judgement is lacking, and therefore leaves stakeholders thinking that impacts have been downplayed without the full justification for this.
General	All method statements for surveys, investigations and assessment methodology for relevant topics should be consulted upon and agreed with the relevant stakeholders in good time and discussions held on any COVID-19 restrictions in gaining required data.
General	The EIA should focus on mitigation and compensation to be provided, that is both clearly presented in the PEIR/ES and measurable, particularly if it is relied upon for the purposes of presenting the residual impacts within the assessment.
6.3.51	WSCC wants to see commitments to monitoring. It is recognised that monitoring is an important element in the management and verification of the actual proposed impacts. It is understood that the outline management plans, across a number of environmental topics, will be submitted along with the DCO application.
General	With regards the ES structure, will GAL be including a chapter on consultation, with an appended Consultation Report? WSCC wants to see how the key findings of consultation have driven forward the proposed design.
<b>Chapter 7 Historic Environment</b>	

General	WSCC refers to comments made by Surrey County Council (SCC) with regards archaeology matters.
Table 7.4.2	The impact on surviving archaeology within the site of the current airport has not been included within the impact assessment. The only acknowledgement of the Airport itself as having heritage interest is in relation to designated assets. Further assessment is required within the airport boundary itself.
Table 7.4.2	Use of the Airports NPS, whilst obviously acceptable as the national methodology, leads to what is considered to be a downgraded assessment system for heritage assets. The assessment methodology also draws upon the Design Manual for Roads and Bridges and its accompanying Environmental Assessment methodology. Only World Heritage Sites would qualify as being of 'Very High' significance under this process, with nationally important sites as 'High' and regionally significant as 'Medium' (or 'Moderate' as the PEIR baseline refers). Locally significant sites are rated as 'Low'. Non NSIP assessment methodology omits the 'Very High' category meaning each class of asset is assigned a higher rating than here. Therefore, WSCC disagree with some of the 'significance' assessments in the Baseline Study, and most of the sites are more important to regional/local commentators, than the assessment process has concluded.
General	The continuation of archaeological evaluation work, to better appraise and define the potential of the sites not yet undertaken, will be required. This is particularly within and around Museum Field, but also on Pentagon Field and Crawters Field, and in association with the River Mole diversion.
General	WSCC expects to see an Historic Area Appraisal of the airport itself to address the gaps in the baseline study. It is hoped the borehole and geotechnical information that GAL intend to review will be a comprehensive survey; if not, further ground truthing will be required to confirm the archaeological truncation that has been stated has occurred. Absence of this data is a major omission and further consultation on these matters will be required with relevant stakeholders prior to DCO application.
<b>Chapter 8 Landscape, Townscape and Visual Resource</b>	
General	WSCC would have benefited from earlier involvement in the LVIA methodology discussions, for example to understand what screening levels and parameters have been used for the ZTV, and the basis for identifying viewpoints.
Table 8.3.1	PINs question (I.D 4.2.10) - If a visible plume is produced it should be assessed and if a RVAA is undertaken it should be included in the LVIA. <i>GAL state that 'Due to the limited intervisibility of visual receptors within the study area and the very limited number of likely significant effects, there is no requirement for an RVAA. The potential for a visible plume at the CARE facility will be considered during the EIA process and reported, if required, in the ES'.</i> How have visible plumes be ruled out if the assessment hasn't been undertaken yet? Further justification for no RVAA should be included in the ES.
8.3.2	The listed topic areas raised during consultation do not include the queries raised by WSCC with regards LVIA methodology (basis for ZTV production) and how viewpoints were identified.
General	It is not clear how the early LVIA work fed into the site selection process for the proposed development. How has LVIA work helped guide the location for the construction compounds? The need for a surface access contractor compound on greenfield land north of the A23 Spur is questioned, when the

	airport has so much surface access car parking that could be utilised without the environmental damage and disruption this site would cause to nearby residents.
General	There is a strong reliance throughout the PEIR that the maturity of planting will be used to mitigate impacts, although the 'Landscape Design Year' is 2038, there are significant elements of the project where landscape planting proposals will be immature, not just visually, but in ecosystem service provision too. WSCC requests GAL review and present opportunities for substantial advance planting.
Figure 8.4.1	Further justification is needed on why large areas of the ZTV presented within this figure is shown as having intervisibility with the surrounding environment, but no viewpoints are presented to assess this. Extra viewpoints should be considered to the north, west and south of the airport, e.g. along the Sussex Border Path, Charlwood, Russ Hill, Langley Green, closest point of the High Weald AONB and to the east of the M23. WSCC refers to the relevant District and Borough Councils for further site-specific viewpoints identified.
General	WSCC expects all viewpoints to have photomontages and to be assessed in summer, winter and during the night-time periods.
8.9	The document discussion on PRoW is limited only to the visual receptors. The experience and impact for the public on these routes and footpaths is not representative from just one viewpoint, there needs to be a wider analysis of the impact on these wider routes and other rights of way as the public travel along them.
8.9	Concerns about works to Pentagon Field, being used as a site for spoil, and its potential impact to Lower Pickett Woods to the south. Impacts appear to be downplayed when taking account of proposed development in this sensitive location.
General	The assessment does not address the visual impact of the 18,000 m <sup>2</sup> Gatwick Stream Flood compensation area, which appears to excavate the ground level by 3m. Such works would have impacts during construction and on landscaping from these fields, although reference to walkers is made in 8.9.184.  The report does not describe the impacts on landscape or nearby sensitive uses for the Peeks Brook Lane road widening, that includes an increase in the height of the bridge. The visual impacts of the junction works for both Terminals need to be fully outlined.
<b>Chapter 9 Ecology and Nature Conservation</b>	
Table 9.2.1	This section states that ' <i>Opportunities for building in beneficial biodiversity in the Project design have been sought and these have included opportunities to establish and enhance green infrastructure.</i> '  Although a green infrastructure approach is welcomed, WSCC would expect enhancements to green corridors and improved habitat connectivity to extend beyond the confines of the airport, along key corridors such as the River Mole and Gatwick Stream.
9.4.6	For the majority of surveys, the study area was the Project site boundary. However, surveys for more mobile and sensitive species such as bats, birds and otters have been extended beyond the Project site boundary. There is no discussion provided on the rationale behind this.
9.4.12	The proposal to extend the otter and water vole surveys to include up to 500 metres both upstream and downstream of the Project boundary is welcomed.

9.4.14	Existing information on ecology was collected from Local Records Centres and other sources in a desk study exercise. It should be recognised that lack of species information can simply mean that few naturalists and other recorders have visited an area. This is likely to be particularly so within the confines of Gatwick Airport. Such limitations of the data should be highlighted in Section 9.5.
9.6.12	The Project site includes two areas managed by GAL as part of their Biodiversity Action Plan (BAP). It would be helpful to understand more about the Gatwick Airport BAP, including the ecological interest and management of these areas. This could help inform potential opportunities for habitat enhancement and creation.
Table 9.8.1	Protective fencing is proposed during the construction period where trees, woodlands and hedgerows are to be retained. Such fencing should also be used to protect other habitats, such as rivers, ponds and some grasslands, including those supporting reptiles.
Table 9.8.1	What opportunities are there for enhanced management of existing sites/habitats within the Project boundary, such as the extensive areas of amenity grassland alongside the runways, Horleyland Wood Local Wildlife Site, ponds, hedgerows, Gatwick Stream & Crawter's Brook?  A more diverse flora of native wildflowers could be introduced to the existing amenity grasslands, possibly through a variety of techniques such as re-seeding & plug planting. A change in management from mowing to cut and collect could also be employed, thereby reducing the vigour of the sward & encouraging flora diversity. Reduced herbicide use would be beneficial. Any new areas of grass, including adjacent to runways & buildings, could be established on low fertility subsoil (rather than high fertility topsoil) to reduce vigour and encourage floral diversity. It may be possible to enhance the condition and ecological interest of a number of the ponds within the Project Area through better management.
Table 9.8.1	WSCC expects to see more detailed, annotated plans showing the locations of all the habitats to be retained, enhanced and created, and also those likely to be lost within the ES.
Table 9.8.1	Mitigation, compensation and enhancement measures should not be limited to within the airport boundary.
Fig. 4.2.1c and Fig. 9.6.3	Fig. 4.2.1c is labelled ' <i>Existing Location/Environmental Features identified in PEIR</i> '. However, it does not show all the environmental features identified in the PEIR and is therefore misleading. The Phase One Habitat Survey (Fig. 9.6.3), for example, shows additional environmental features such as woodlands, hedgerows and neutral grasslands, which should also feature in Fig. 4.2.1c.
Fig. 9.6.3	This depicts grassland adjacent to the runways in pale yellow (Amenity grassland) & pale greenish yellow. The latter shade does not feature in the key; therefore, it is not clear what habitat this refers to.
Fig. 9.6.3	The Phase One Habitat Survey (Fig. 9.6.3) appears to omit some of the running water, notably Crawter's Brook (Although Crawter's Brook is highlighted in Fig. 4.2.1c).
Fig. 9.6.3	It would be beneficial if the Phase One Habitat Survey extended beyond the Project Area. Depicting linear habitats, such as streams, notably the River Mole, Gatwick Stream and Crawter's Brook, woodland and hedgerows outside the boundary of the airport would help identify wildlife corridors & potential enhancement opportunities.

9.8	WSCC would expect the ES to include a long-term site/habitat management plan covering all the existing and proposed areas of biodiversity interest.
9.8	A clear plan or strategy for biodiversity monitoring should be presented in the ES. This should include monitoring of the condition of key habitats and population monitoring of key species.
Appendix 9.9.1	Any future amendments to the HRA should be clearly identified in any update.
4.5.1	As stated in this section, <i>air quality issues that could arise during operation are increased traffic and emissions from the airport operations</i> . A detailed explanation of this would be beneficial. Does traffic mean increased car traffic to and from the airport? Do emissions from airport operations relate solely to the increased number of aircraft or does it also include associated operational vehicle movements around the airport, such as fuel, cleaning or luggage transport vehicles?
4.5.7-4.5.21	These sections appear to only address air quality issues arising from increased vehicle (presumably car) traffic. There is no mention of air quality impacts resulting directly from increased flights, and also airport operations.
4.9.1	The conclusion is too vague in terms of defining and assessing how air quality might be impacted during operation of the airport. Air quality is likely to be impacted by increased aircraft traffic and associated vehicle movements around the airport, as well as increased car journeys to and from the airport.
General	It is of concern that the non-technical summary states that for ecology and nature conservation, <i>'no permanent significant effects would arise as a result of the Project'</i> and <i>'no potential for significant cumulative effects has been identified'</i> given the assumptions and limitations of the assessment and maximum design scenarios. Absolute certainty such as this is not consistent with the vague language used in statements such as <i>'assets will be retained wherever possible...'</i> and <i>'where practicable'</i> . This is referred to by the Planning Inspectorate in the Scoping Opinion.
<b>Chapter 10 Geology and Ground Conditions</b>	
10.2.24	Reference to safeguarding guidance is incorrect (2018 version referenced). Updated guidance published recently – <a href="https://www.westsussex.gov.uk/media/13437/mw_safeguarding_guidance.pdf">https://www.westsussex.gov.uk/media/13437/mw_safeguarding_guidance.pdf</a> Note that the correct reference is given in para 10.6.14.
10.4.8	Reference made to GAL undertaking a Mineral Resource Assessment (MRA), is supported.
10.6.13	JMLP date incorrect – updated in 2021 following the Soft Sand Review.
10.6.15	2016 data is used to assess brickworks – there is updated information in the latest WSCC <a href="#">AMR</a> . West Hoathly brickworks has permanently ceased.
Table 10.7.1	The airport is underlain by Weald Clay (as identified). Although there are significant amounts of clay in the county, and sufficient reserves in the existing brickworks, MRA should be undertaken to identify the presence of minerals, in line with guidance, to avoid needlessly sterilising minerals (not just clay). Opportunities should be undertaken to extract any viable minerals

	prior to development. Materials found may be useable as part of the construction activities.
10.9.22	Reference to JMLP incorrect, and ref to 2016 data – as above, updated data available in the latest AMR.
10.9.23	Reference to using excavated material as a mineral to be explored – this is supported – but should include reference to aggregate and MRAs.
10.6.23 / general comment	Although Gatwick Airport falls within the Mineral Safeguarding Area (MSA) for Weald Clay, where there are other minerals, such as sand and gravel, needless sterilisation should be avoided. Reference is made to previous common excavation of these kinds of materials to facilitate construction of the airport. Opportunities to use materials on site to facilitate construction should be taken. These can reduce HGV movement of materials to Gatwick airport.
<b>Chapter 11 Water Environment</b>	
Table 11.2.1	Flood and Water Management Act 2010: the PEIR states East Sussex as the LLFA; this should read West Sussex.
11.4.18	This section states ' <i>no project specific groundwater investigation has been undertaken at this stage</i> '. This may limit the mitigation measures outlined in relation to attenuation area and below ground storage.
11.6.35-36	Later sections related to groundwater state that groundwater levels may be between 0.7 – 1.2m bgl. Again, this may limit the mitigation measures outlined in relation to attenuation area and below ground storage.
Table 11.4.3	WSCC do not hold data regarding unlicensed groundwater and surface water abstraction.
11.6.94	Details that Pond A is used for retention of de-icer contaminated runoff, which then discharges to the River Mole. Pond A will be reduced in size during the construction and an over pumping facility will be installed to increase the rate at which this pond is emptied into the much larger Pond M. Mitigation measures should be outlined should the pumps fail, and contaminated runoff flows into the River Mole.
Table 11.8.1	Mitigation, Monitoring and Enhancement Measures: <ul style="list-style-type: none"> <li>• Provision of compensatory flood storage: Clearly any compensatory flood storage must be provided outside of the existing and any revised floodplain;</li> <li>• Provision for new airfield syphons: Mitigation and maintenance measures should be outlined within any 'site operation manual' for the airfield syphons; and</li> <li>• Surface access improvements drainage strategy: Designer should aim for betterment with regards to surface water runoff not just pre-development values.</li> </ul>
General	GAL should be aware of two WSCC documents relating to new development ' <i>Water, People, Places</i> ' and ' <i>Sussex LLFA Policy for the Management of Surface Water</i> '.
General	The River Mole catchment can be very 'flashy' after prolonged heavy rain. This is something that should be discussed with the Environment Agency and mitigation measures put in place for such events during the construction period.

<b>Chapter 12 Traffic and Transport</b>	
12.4.38	The assessment of severance based on traffic flow fails to take account of the impacts of changes in the composition of traffic. The criteria for assessment of severance should also take into account the impact of an increasing number of HGVs.
Table 12.4.6	Junctions operating over 85% of volume/capacity over an average time period can be very sensitive to increases in traffic volume leading to delays and traffic rerouting. A 4% increase in traffic volume on a link or junction operating at 99% of volume to capacity is likely to have a noticeable impact on users and sensitive receptors as volume would exceed capacity yet the proposed approach would categorise the magnitude of impact as 'low'. The V/C ranges used to classify the conditions at the junctions should be amended to; not significant (<85%), minor (85-90%), moderate (90-95%) and major (95%). This would ensure that changes taking a junction over capacity are either categorised as medium or high.
12.6.61	The acknowledgement of the importance of 'push' measures to achieving mode share targets is welcome. Although increasing parking and forecourt charges are stated to have been included in the strategic modelling for passengers, there are no similar measures for staff. GAL should introduce similar measures to support the achievement of staff mode share targets.
12.6.62	There is a gap between the impact of the measures assessed in 2038 and 2047 and the passenger mode share target of 60%. GAL should introduce additional measures to fill the gap between the assessed impact and the mode share target.
12.6.62	The impact of measures on sustainable transport mode share for staff is stated in Appendix 12.9.1 para 7.5.5 to achieve a 47% mode share. GAL should introduce additional measures to ensure the proposed mode share target of 60% is achievable and provide a rationale for the number of staff parking spaces due to be provided and the approach to management (e.g., pricing) of these spaces.
12.9.3	PEIR Chapter 5 Paragraph 5.3.99 states that any construction work in close proximity to existing runways and taxiways would be scheduled to take place overnight. It is unclear how this scheduling has influenced the construction trip generation forecast in Paragraph 12.9.3. Further information should be provided on the assumptions used to assess construction traffic impacts.
Appendix 12.9.1, Part 1, 6.1.9	The demand forecast for 2021 appears overly optimistic. It is unclear what effect this will have on the future forecast scenarios. GAL should revise the forecast to take account of the ongoing impacts of the COVID19 pandemic.
Appendix 12.9.1, Part 1, 6.1.9	Demand forecasting is inherently uncertain and the rate of growth in passenger demand could be higher or lower than forecast for a range of reasons, resulting in passenger demand reaching forecast levels earlier or later. The key assumptions explained in Chapter 4 regarding up-gauging by airlines and higher load factors suggest this is a central forecast rather than a worst-case scenario. GAL should provide an alternative 'high demand' forecast scenario to ensure the impacts of the project are understood in a worst-case scenario.
Appendix 12.9.1,	The reporting (Appendix 12.9.1, paragraph 6.2.7) states that " <i>the transport modelling assumes that the distribution of new employment will be comparable to existing employment</i> ". COVID-19 has potentially changed where people work/live, which may also influence their travel behaviour, so

Part 1, 6.2.7	further evidence should be provided around this assumption and potentially sensitivity assessments should be undertaken to assess a different distribution and travel pattern of employees.
Appendix 12.9.1, Part 1, 7.2.2	The reporting (Appendix 12.9.1, paragraph 7.2.2) has a headline target of "60% of staff journeys to travel by sustainable modes...by 2030", which looks to contradict the modelling results that show "employee mode share by sustainable modes of 36% by 2047". Additional measures should be added to ensure the mode share target is achievable and evidence provided to substantiate the target.
12.9.1, Part 1, 7.2.2	Combining the target for staff sustainable transport mode share with low emission travel initiatives (i.e. zero emission vehicles) will not help to address congestion and also has the potential to abstract investment from initiatives that support sustainable modes of transport (i.e. bus, rail walking and cycling). The target for low emission initiatives should be separated from the target for sustainable modes of transport.
Appendix 12.9.1, Part 1, 7.4.1	The Croydon Area Remodelling Scheme and Lower Thames Crossing are not fully-funded or going through the relevant statutory planning process and should only be considered 'reasonably foreseeable' at this stage. As such, and in line with DfT's TAG, they should be removed from the core assessment to understand the impacts of the project without these interventions.
Appendix 12.9.1, Part 1, 7.6.8	The reporting (Appendix 12.9.1, Part 1, paragraph 7.6.8) states that "Modelling shows an employee mode share by sustainable modes of 36% by 2047 and up to 43% including car share, comprising 15% rail, 17% bus and coach and 4% active travel". It is unclear whether these mode shares are an input to the model or as an output. Further details on how these numbers are arrived at is required.
Appendix 12.9.1, Part 4, 4.9.3	The generalised costs used in the model were taken from TAG Data Book (July 2020 v1.14 -sensitivity test). The updated transport modelling for the DCO should use the latest available information (currently July 2021).
Appendix 12.9.1, Part 4, 7.2.2	TEMPRO 7.2 has been used to produce traffic forecasts but the DfT is due to issue an updated version in late 2021/early 2022. How will this be taken into account as part of the DCO?
Appendix 12.9.1, Part 4, 7.2.2	The assessment does not take into account the site-specific impacts of emerging development sites in the area. There are large strategic development sites such as West of Ifield, Gatwick Green and Horley Business Park close to Gatwick that are emerging through the respective locals plans. Due to their proximity to Gatwick, these sites will have a cumulative impact on some of the same parts of the network. The cumulative impact assessment should take these sites into account.
Appendix 12.9.1, Part 4: General comment	More detailed technical notes on inputs to the strategic model should be provided, specifically on building the base model and demand matrices, forecasting & mode choice assumptions.
Appendix 12.9.1, Part 5, 14.1.3	The reporting states that "In terms of employees, the strategic model shows that a sustainable transport mode share of 47% is achievable and this would indicate that further measures are required, in particular these could include incentives around EV uptake as well as restrictions on staff parking". This statement appears to be contradicted by Appendix 12.9.1, Part 1, paragraph

	7.6.8, which states that modelling shows an employee sustainable transport mode share of 36% by 2047 and up to 43% including car share.
Appendix 12.9.1, Part 4, 10.2	Traffic flow change diagrams included in Appendix 12.9.1, Part 4 show differences between 2016 and 2029 and then between 2029 and 2032 and then between 2032 and 2047. There is no comparison of traffic change between 2016 and 2047 therefore the impact on the local road network is difficult to gauge and the true impacts may well be masked. Additional comparisons should be provided to show the differences between 2016 and 2032 and 2016 and 2047.
Appendix 12.9.1, Part 4, 10.3	The Annual Average Daily Traffic (AADT) flows diagrams are for the forecast years only, with no comparison against earlier year e.g. 2016. Comparisons should be provided to show the differences between 2016 & 2029, 2016 & 2032 and 2016 & 2047
Appendix 12.9.1, Part 4, 10.4, 10.5, 10.6	Journey time impacts (Appendix 12.9.1, Part 4, Section 10.4) have been shown for the 2029, 2032 and 2047 forecast years as a comparison between the 'future baseline' and the 'with project' so there looks to be no notable impact. There is no comparison of journey time between 2016 and 2029, 2016 and 2032 and 2016 and 2047 so true impacts may well be masked. Comparisons should be provided to show the differences between 2016 & 2029, 2016 & 2032 and 2016 & 2047.
Appendix 12.9.1, Part 5, 10.7	As with the journey times the Volume/Capacity (V/C) ratio is shown for the forecast years only with no comparison between 2016 and 2029, 2016 and 2032 and 2016 and 2047 so true impacts may be masked for both road link impacts and junction impacts. Comparisons should be provided to show the between 2016 & 2029, 2016 & 2032 and 2016 & 2047.
Appendix 12.9.1, Part 5, 12.2.10	The reporting (Appendix 12.9.1, Part 5, Paragraph 12.2.10) states that " <i>For HGVs and LGVs, the shift patterns in August 2027 mean that, for the busiest daytime shift, the monthly total construction vehicles are 14,508 vehicles, equivalent to 7,254 in one direction. When divided by 22 working days and spread over a 10-hour shift, the estimated vehicle trip generation</i> " is 33 Light Goods Vehicles (LGV) and Heavy Goods Vehicles (HGV) in and out an hour along the M23 Spur. The robustness is questioned, as there may be nothing to stop more construction trips arriving or departing in a hour period.
<b>Chapter 13 Air Quality</b>	
General	WSCC refers to comments made by Reigate and Banstead Borough Council (RBBC) with regard to air quality matters.
13.4.25	It is stated that Chapter 12: Traffic & Transport also includes an assessment for 2047. However, air quality is expected to improve in the future and current tools include predictions only up to 2030. It is acknowledged that predictions for 2047 would be uncertain but this does not justify the absence of a 2047 assessment, which should be provided in the ES.
13.4.30	The Air Quality reporting indicates that there are no significant impacts for construction and operation elements on human receptors and ecological receptors in the forecast years of 2024 (Construction phase), 2029 and 2032. It is acknowledged that predictions for 2038 will be uncertain but this does not justify the absence of a 2038 assessment of road vehicle emissions, which should be provided in the ES.
<b>Chapter 14 Noise and Vibration</b>	

General	WSCC refers to comments made by Crawley Borough Council (CBC) with regard to noise and vibration matters.
14.5.11	The noise and vibration reporting shows that there are some moderate adverse effects in areas immediately to the south of the Airport but these are subject to further study. This assessment should take into account that some of these areas have already been identified by DEFRA as Noise Important Areas.
<b>Chapter 15 Climate Change and Carbon</b>	
General	It is not clear if account has been taken of the cost of carbon and future abatement measures in the forecasts, which makes them inconsistent with the Government's Net Zero Policy.
15.4.9	For the purposes of the assessment (and in the absence of data on other airports) the assumption is that landing emissions from inbound flights at Gatwick are equal and equivalent to the landing emissions for outbound flights at destination airports. WSCC would expect GAL to have the data and be able to confirm if the landing emissions are equal. The assessment also does not refer to relative impacts of different measures to decarbonise aircraft emissions. Without this information, comments cannot be made on the matter.
15.6.5	WSCC requires further justification that Gatwick Airport does not experience a detectable urban heat island effect. This needs to be presented within the ES.
15.9.1	This section outlines risks but the assessment itself is limited e.g., building overheating is presented, but little other impacts are included.
15.9.2	The information presented here is a mixture of impacts and proposed mitigation actions. This needs to be presented more clearly in the ES.
15.9.12	WSCC questions the impact scoring for the In-combination Climate Change Impacts Assessment. For a project of this scale, how can non-significant impacts be assessed?
Table 15.8.2	<i>The strategy to include new impermeable areas (road and airfield infrastructure) will reduce additional surface water runoff, thus increasing resilience to extreme weather events in future – impermeable areas are likely to increase surface water runoff, not reduce it.</i>
15.8.2 and 15.6.14	15.8.2 refers to increased de-icer loading, while 15.6.14 states less de-icer. Clarification is required here.
15.8.3	The text states that Low and zero carbon design and performance standards will be applied to new infrastructure. WSCC would expect exemplar Zero carbon design throughout and renewable energy infrastructure as standard, not as mitigation for new development.
General	There are statements made throughout this chapter on energy and water use, waste generation, wastewater production and construction phase mitigation. These are approaches that should be industry standard best practice. As referenced in the 'Our Sustainability Policy' (to 2030), there are projects already underway to address many of these issues.
Appendix 15.4.2 Table 3.3.2	Climate hazards seem limited in application. High temperature is relevant to airport infrastructure and high winds are applicable to airport operations.

<b>Chapter 16 Socioeconomic Effects</b>	
16.2.3	The strategic documents referenced highlight the LEP strategies and work towards local Industrial Strategies. This work is effectively paused, and a Government LEP review is imminent.
16.6.19	Highlights as a key issue that the Census shows the occupation of residents in the local study area is more skewed towards services and other elementary occupations and less towards managerial and professional roles when compared with the labour market area and five authorities' area. There is no indication of the impact of the proposed development on this issue. There is reference to these issues in the supporting documents, but it is not reflected in this chapter.
General	The geographies used as the 'study area' and 'labour market area' are muddled and not consistent throughout the various documents – the PEIR has the Local Study Area and the Labour Market Area; the Economic Impact Assessment uses the Gatwick Diamond and C2C LEP area.
16.4.8	States that the study areas are cumulative, so wider areas incorporate the smaller areas; therefore, clarity is needed on what is being referenced across all reports.
General	<p>This chapter refers to trends in the Local Study Area – however, because this area includes the whole of Crawley Borough and only parts of the other local authorities (Horsham, Mid Sussex, Reigate and Banstead, Tandridge and Mole Valley) the overview is skewed. It would be useful if there was more teasing out of the differences amongst those local authorities, for example:</p> <p>16.6.1 growth in population (2011-2020) in 65+ is 21% in East Sussex and Kent 22%, compared to 9% in Brighton and Hove; Brighton and Hove see an 8% increase in 16-64-year-old population compared to 0.9% in East Sussex.</p> <p>16.6.2 the local study area has a younger population than the wider area – that is to be expected because of the younger population make up in Crawley; in 2020 Crawley has an average younger population than the rest of West Sussex, older age population make up a much higher % of total population in e.g., Arun at 29% - compared with Crawley at 14%; Brighton and Hove 16-64 year olds make up 71.3% of total population compared with East Sussex at 57% and West Sussex at 59%.</p> <p>16.6.8 the local study area is more diverse in terms of ethnic groups and religion – because of the make-up of Crawley – it is a very different picture in those Surrey and West Sussex authority areas.</p> <p>16.6.12 there is a need to caveat the use of the Annual Population Survey because the sample is so small and is not robust only indicative of trends and the survey has been undertaken during COVID in a different way to previous surveys</p> <p>16.6.17 why is Job Seekers Allowance referred to and not either the full Claimant Count or the Alternative Claimant Count? Most people claiming benefits primarily because they are out of work will claim Universal Credit.</p> <p>16.6.19 Occupations - There needs to be more around the differences in the trends between the local authorities and the smaller areas of the local study area – as well as the differences in occupations of residents and occupations of workers in the area.</p>

	<p>16.6.28 states that workplace earnings are lower than resident earnings across the labour market area – but this is not the case for Crawley – again, showing the difference in Crawley to the rest of the areas.</p> <p>16.6.33 deprivation is more prevalent in urban areas but particularly in coastal local authorities.</p> <p>16.6.53 It is worth noting that Crawley has one of the highest % of large enterprises in the country so will therefore skew the figures for the local study area.</p> <p>16.6.64 reference to other FE/HE provision in the local study area should be considered – Haywards Heath? East Surrey (Redhill) North East Surrey College - Epsom and Ewell?</p> <p>16.6.84 house prices – Crawley does not necessarily have the range of housing types that perhaps other areas within the local study area have – what about prices in Horsham compared with Surrey? There is no information provided about the increases since COVID?</p> <p>16.6.101 projected total labour supply – are economic activity rates dependent on ages? Is there account taken of older working age into the future?</p>
General	The increase in capacity is also expected to facilitate the growth of freight by 10% in 2029, 27% in 2038/9 and 20% in 2047/48 – is this realistic given that most freight is transported from Gatwick in passenger rather than cargo planes?
<b>Chapter 17 Health and Wellbeing</b>	
17.9.31	It is stated that there will be loss of public open space along the boundaries of Riverside Garden Park and as a mitigation measure, new areas will be created to serve all users but will not be immediately contiguous with the park. This does not provide enough reassurance that mitigation measures will be targeted at communities or groups impacted by the loss. GAL should provide further information around where the new open space will be situated and demonstrate that this will be easily and equally accessible to current users and communities around the garden park.
17.9.32	Due to the nature of effects the project may have on communities living in the study area, and the mechanisms (some psychosocial) through which these are mediated, WSCC strongly encourage that any evidence collected to make assumptions on the impact of the project on health, incorporate information provided by these communities. Also, where there are claims of loss of portions of green spaces not having an adverse impact on the integrity of the park, or conclusions that proposed changes to existing amenities are beneficial, GAL must demonstrate that this inference has been drawn from evidence, which includes feedback from communities in the study area.
Table 17.3.1	There is no evidence in the chapter to demonstrate that consideration has been given to the impact of the project on certain vulnerable groups, as highlighted by the Planning Inspectorate. Classifying every group as highly sensitive does not sufficiently address this issue. Certain groups, including the elderly and people living with disabilities, may be more adversely impacted by reconfiguration of public open spaces and paths and diversions of PRoW or even the slightest changes to noise levels. For example, noise that may be considered tolerable for the general population may be distressing or disorientating for individuals living with dementia. In addition, WSCC would like a clearer and more detailed description of the impact of the project on care home residents and schools within the study area, particularly from a

	noise and air quality perspective, and to what extent mitigation measures will reduce any adverse effects.
General	Further to the point above, it would be beneficial for GAL to undertake an Equality Impact Assessment to understand how the project may impact on different groups and ensure that certain individuals are not put at a disadvantage or discriminated against as a result of the project activities. This would also ensure that mitigation measures can be tailored to avoid harm to equality. This is especially relevant since in a 2018 Appraisal of Sustainability, prepared by the Department for Transport, it was predicted that addition of a second runway to the existing main runway at Gatwick may increase inequality gaps experienced between certain vulnerable groups and the general population. It should be noted that more deprived populations are also likely to be disproportionately affected by adverse impacts.
General	WSCC advise that the impact of the project on local health services is considered. To assess this impact, it would be beneficial to know, if possible, what the average GP to patient ratio in the study area is, if this already exceeds acceptable limits, how it compares to other areas locally and nationally, to what extent workforce number projections will affect this ratio. Furthermore, the mitigation measure proposed in Table 17.8.1 does not seem to address the potential impact of population increase on acute services.
Table 17.3.1	In addition to impact from increased population size due to the workforce from the project, the Planning Inspectorate have advised ' <i>an assessment of the impact on local primary health care, acute services and emergency responders from additional passenger movements, where these are likely to result in significant effects</i> '. WSCC could not find any indication that this had been assessed in the chapter. This is particularly important, as from practical experience in West Sussex, a higher throughput at Gatwick airport has often led to an increased demand for health services.
17.9.12	There is insufficient information in the chapter on measures that will be implemented to mitigate the adverse effects of construction and operational activities. As such, there is limited reassurance around this. Where construction compounds are to be located close to parks and open public spaces, the project may have an impact on enjoyment of recreational activities in these places. WSCC would therefore want to see that this has been considered in sufficient detail and presented in this chapter.
General	WSCC advise that results be presented with a detailed description of the statistical methods used, including all variables accounted for and those not included in the analysis models. This would enable a better interpretation of the results, which seem not to be in line with what should be expected. WSCC advise a more detailed definition of the populations in the study area and a clear description of evidence supporting each assumption made.
General	There is no indication in the chapter that consideration has been given to the impact on small and medium sized businesses, or where this is cross referenced from other chapters. It is advised that this is included, considering the influence it could have on health and well-being.  Furthermore, Crawley was identified by the Government's Social Mobility Commission as having the worst social mobility in the whole of the South East region, therefore it is vital to consider the nature and quality of work and how this benefits residents and future generations when discussing the economic benefits of the project.

**Chapter 18 Agricultural Land Use and Recreation**

18.4.1	<p>WSCC wants to see the addition of the following guidance:</p> <ul style="list-style-type: none"> <li>• The Government’s Guide to Assessing Development Proposals on Agricultural Land (2021);</li> <li>• The Government’s Safeguarding our Soils strategy (2009b), and is supported by the Defra Construction Code of Practice on the Sustainable Use of soils on Construction Sites (Defra, 2009a);</li> <li>• West Sussex Transport Plan (2011-2026);</li> <li>• draft West Sussex Transport Plan (2022-2036);</li> <li>• West Sussex Walking and Cycling Strategy (2016-2026);</li> <li>• West Sussex Rights of Way Management Plan (2018-2028);</li> <li>• Environmental Impact Assessment: Appraising Access (2020) – The Institute of Public Rights of Way &amp; Access Management (IPROW)</li> </ul>
18.4.6	<p>A figure showing the study area (not just the PEIR boundary) would be helpful in aiding the stakeholder to understand the geographical scope of the assessment.</p>
Appendix 18.6.2	<p>No survey methodology has been provided for the soil surveys. Was this agreed with relevant stakeholders? How was the study area defined for the soil survey?</p>
Table 18.18.1	<p>These mitigation measures should be further defined to include dates / phases for when they will be implemented, i.e., is this a mitigation through the design process, or an element of construction practice? Where relevant, they should also outline how they are intended to be secured through the DCO. This will allow for a robust predication of residual effects.</p>
18.9.14	<p>It would be beneficial to have a PRow strategy document to show how any construction impacts are dealt with appropriately and show how impacts on the public users will be kept to a minimum. This will need to include matters such as temporary impacts, e.g., closures during works, but also more permanent changes to the network through diversions that may be necessary. WSCC would not support permanent closures of routes due to development and would hope that routes will be able to be accommodated on their legal line or on newly diverted routes to accommodate any proposed development.</p>
18.9.18	<p>WSCC would expect to see improvements to the local PRow network as part of these proposals. Particular opportunities include improvement and also possible upgrade of the Sussex Border Path, potentially to Bridleway, offering opportunities to cyclists and walkers particularly, which could tie into the road improvements proposed that would improve sustainable transport options for local residents, employees and leisure users. These opportunities may also be possible east of the South Terminal so as to offer sustainable transport options from the airport to Tinsley Green.</p>

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